



**CARE Ethiopia key approaches & synergies:  
Are CARE's key approaches the best fit to ensure women's  
empowerment & household livelihood resilience?**



**The “Good Enough” learning Agenda Pilot final Report**

Program Quality and Learning Unit  
CARE Ethiopia  
*March, 2017*

# The “Good Enough” learning Agenda pilot

## Table of contents

## Contents

Table of contents .....	2
List of acronyms .....	3
<b>Summary.....</b>	<b>4</b>
<b>Use of findings.....</b>	<b>8</b>
1. Recommendations .....	9
2. Introduction .....	9
<b>2.2. Methodology .....</b>	<b>10</b>
<b>Planning the pilot implementation.....</b>	<b>11</b>
<b>Good enough’ ’learning agenda pilot implementation .....</b>	<b>12</b>
<b>3. Findings.....</b>	<b>13</b>
<b>3.1. Women empowerment, resilience, CARE’s approaches &amp; synergy .....</b>	<b>14</b>
<b>3.1.1. Household livelihood resilience building.....</b>	<b>18</b>
3.1.2. CARE Ethiopia key common Approaches.....	19
3.1.3. CARE Approach: Village Saving and Loan Association (VSLA/VESA) .....	20
3.1.4. CARE Approach: Social Analysis and Action (SAA) .....	22
3.1.5. CARE Approach: Climate Vulnerability and Capacity Analysis (CVCA) .....	23
3.1.6. CARE Approaches: Participatory scenario planning (PSP) .....	24
3.1.7. CARE Approaches: Community Score Card (CSC) .....	24
3.1.8. Synergy among CARE’s key approaches .....	25
<b>4. Reflection (“good enough” process &amp; implementation monitoring) .....</b>	<b>26</b>
<b>Use of findings.....</b>	<b>29</b>
5. Recommendations .....	30
6. Conclusion.....	30
<b>References .....</b>	<b>32</b>
<b>Appendix.....</b>	<b>33</b>
<b>Data collection tools: FGD, KII &amp; desk review .....</b>	<b>33</b>

## The “Good Enough” learning Agenda pilot

### List of acronyms

BERCI:	Be strong! Project
CFIRW:	Chronically Food insecure rural women
CSC:	Community Score Cared
CVCA:	Climate Vulnerability and Capacity Analysis
PSP:	Participatory Scenario planning
FSTF	Food Security Task Force
SAA:	Social Analysis and Action
WERISE:	Women’s Empowerment: Improving Resilience, Income and Food Security
GRAD:	Graduation with Resilience to Achieve Sustainable Development
TESFA:	Towards Improved Economic and Sexual Reproductive Health Outcomes for Adolescent Girls
MWA	Millennium Water Alliance
LEGAS	LIBO-KEMKEM, EBINAT, GAYINT AND SIMADA
TOC	Theory of change
VSLA	Village Saving and Loan Association
VESA	Village Economic and Social Association

## The “Good Enough” learning Agenda pilot

### Summary

In February 2017 the CARE USA- MI unit created opportunity for CARE country offices to apply for a grant entitled “good enough” learning agenda pilot. CARE Ethiopia applied and received award of \$25,000. Team of experts implemented the agenda pilot from April to June 2017. Main objective the learning agenda pilot was to generate evidences that help to validate how realist CARE assumptions are about key approaches as catalysts for achievement of program goal and that synergetic practices have been materialized during projects implementations. Specially, it was intended to:

1. Generate program level evidences that help understand whether the CFIRW program Theory of Change has worked as per the hypothesis of defined program goal,
2. Pave ways to generate, accumulate and use lessons that help promote organizational learning culture, improve program performances and future programs design.

Three learning questions were defined but only one learning question was attempted in this phase assuming that the rest would be addressed sequentially. The learning question attempted: *Are different CARE approaches, or combination of approaches (synergies) more effective than others in contributing to women’s social and economic empowerment and building their households livelihood resilience?*

Secondary and primary data sources were used. Purposively selected project evaluation reports were reviewed for secondary information where primary data were gathered from two field offices-chosen based on more number of projects implemented in the area. CARE Ethiopia program staff –specifically the CO LDM managers, sector leaders, all PQL staff and LDM managers from EH&NPO field offices participated in different phases of this work.

The “good enough” learning pilot study revealed that CARE has several organizational program working principles, approaches and assumptions about the approaches. There are approved programs (CFIRW, PSAG, and RPUFY), program TOCs, CARE common approaches SAA, VSLA/VESA, CVCA, CSC & PSP and assumptions about the approaches. All CARE Ethiopia programs/projects focus on ensuring women empowerment and their household’s livelihood resilience. As per the review findings, women empowerment has been understood as that women’s access to productive resources increased and are able to make decisions over different household agenda- productive resources, income, expenditure and use of modern contraceptives. Some projects evaluation reported that use of SAA approach impacted on women empowerment. Likewise, the VSLA/VESA approach has contributed to women economic empowerment-targeted women get increased access to financial services, improved their saving, women are able to generate income and diversified household’s livelihood. TESFA, BERCHI & WE RISE evaluations review indicated that projects have attempted combined use of key CARE approaches and come up with some evidences that combined approach is contributing more to attainment of the organizational goal.

Except the three projects, other projects evaluation reports didn’t have evidence on whether or not CARE’s key approaches were applied as per the established assumptions and had synergy among approaches and projects. On basis of the evaluation reviews and primary data sources, it is possible to conclude that there was no measurable synergy/integration among different approaches with in a project or across projects. Except some information about the contribution of SAA, there is no adequate evidence that describe extent that key approaches are catalyzing program implementation and challenge social norms and cultural barriers towards achieving program goal.

Overall, none of the evaluations looked at whether achievement of individual projects objectives was due to use of CARE key approaches or not. All of the projects evaluations, haven’t looked at any relationships among approaches, project goals and program goal. Among the approaches, the CVCA & PSP haven’t been

## The “Good Enough” learning Agenda pilot

mentioned in any of the evaluation reports and none of the respondents in two field office data collection areas mentioned about these approaches. Yet, building household livelihood resilience to climate change shocks is one of the pillars of CARE program goal.

This ‘good enough’ learning agenda pilot findings led to conclude lack of adequate evidences and mechanisms for proving or disproving validity of the assumptions as a critical organizational gap. Findings of this learning agenda pilot should be implemented as per the identified recommendation to strengthen organizational learning practices and to inform future planning and organizational transformation. There should be functioning mechanisms to regularly validate whether CARE’s key approaches are complementing or competing among each other and also generate evidences on how the approaches catalyze process of addressing challenges of social norms & promoting economic opportunities to ensure program goal.

Brief summary of key findings presented below by thematic areas:

### Women empowerment

- CARE’s women’s empowerment framework offers a powerful model to assess the various demarcations of patriarchy and promote CFIRW programming strategies to overcome inequality and other obstacles to progress, including social and cultural norms.
- As per women FGDs, the recognized women empowerment dimensions are improvement in **women’s own** knowledge, skill, ability and power relationship through that women are able to negotiate and influence in their regular activities/life. The evidence is linked to changes in the Agency and Relation perspectives of women empowerment framework.
- As per woreda level government office representatives (male & female key informants) and men FGD participants at community level, women empowerment is viewed from the perspective of women’s capability, skill and knowledge; this is also agency and relation perspective. The primary sources, didn’t say any about the enabling environment perspective or the structure dimension of women empowerment framework.
- As per secondary sources, women empowerment has been reported from the view of increased women access to and control over productive resources. However, the way evidences generated and measured is not uniform across projects.
- Overall, women empowerment aspect has been measured and analyzed in different ways by different projects and that is key challenge hinders aggregating evidences on women empowerment at CARE level as an entity.

### Household’s livelihood resilience to shocks

CARE has adapted and using household livelihood resilience building approaches and most the FNS projects are said to be using to ensure household livelihood resilience to shocks. As per the evidences:

- There exists clear definition for resilience in the secondary sources,
- However, the available evidence on resilience area were not adequate to represent what has been defined by CARE in the resilience framework (adaptive, anticipatory, transformative & absorptive). Resilience aspect has been presented in a minimal extent in those reviewed documents including the resilience study that was done by GRAD,
- Community level respondents didn’t know about what resilience mean. They are not aware about whether they are resilient to any climate change shocks or vulnerable. Even some of the FGD participants understood the resilience concept/climate change in a reverse way than the actual concept. After unpacking the concept as to adaptive, anticipatory, absorptive & transformative, some respondents/ informants happened to mention their livelihood strategies such as livelihood diversification, improved crop varieties, promoting savings by engaging in the VSLA as part of adaptive, anticipatory and coping mechanisms,

## **The “Good Enough” learning Agenda pilot**

- Still there is assumption that CARE Ethiopia projects are build households livelihood resilience. Hence, it is good to adequately sensitize concept of resilience building and properly measure performances no matter resilience has different dimensions.

### **CARE Key Common Approaches**

- CARE Ethiopia has key common approaches and also invested on it expecting that the approaches contribute as catalyst for more robust achievement of program goal. However, there is no adequate evidence on how best the approaches have been applied by projects. In addition, there is no clarity on whether those approaches have been contributing to the expectations as return on investments made by the projects. Moreover, there is no adequate evidences about what combination would be the best fit that CARE could set to make the most use out of the approaches in the future-towards ensuring program/projects goal.

#### **Key Approaches: VSLA/VESA**

- VSLA/VESA helps as an entry point to address financial literacy through business skill trainings, better access to agricultural technologies and business related information. It promotes linkages to microfinance and input/output markets, and other livelihoods interventions.
- The VSLAs in ABDISHE, FSF plus, WE-RISE, Berchi & VESA in GRAD have contributed a lot in accelerating discussions and debated over gender related injustices and paved ways for increased exercise of women leadership as well as decision-making. There are lots of evidences that the VSLA exercise has proved to be effective in changing social norms and transforming women’s roles in the community.
- VSLA/VSA is the powerful approach in CARE that has been contributing to women socioeconomic empowerment. The GRAD’s VESA guideline is inclusive of socio-economic dimension of women empowerment apart from contributing to the women economic empowerment. .However, the level of contribution by VSLA towards women empowerment from the social aspect hasn’t been indicated in the VSLA guide in the reviewed projects evaluation reports.
- The TESFA finding indicated attempt for using VSLA & SAA in a slight aspect. Yet, there is no evidence on whether approaches have been used by project in a combined manner standalone. In addition, evidences haven’t been accumulated in alignment with the CFIRW program TOC domains of change.

#### **Key approaches: Social Analysis Action (SAA)**

- Program review (2015) revealed that SAA process is proving to be a very effective means of building awareness around gender perceptions based on socio-cultural traditions. Its application is appropriately premised on influencing not only CFIRW program target populations but also other influential stakeholders such as government officials, community leaders and gatekeepers. Improved communication between spouses is an essential dynamic leading to positive gender role changes. SAA helps to lay the groundwork for this to happen. SAA direct engagement prioritizes male gender sensitization. Field level information from the BERCHI & TESFA project area of NPO complements the evidence obtained from secondary sources.
- CARE projects (BERCHI, TESFA, WE-RISE and some few) have significantly influenced behavior and attitude of individuals (women and men) and enhanced socioeconomic opportunities for the vulnerable women and girls.
- Neither the primary nor secondary sources provided with adequate evidence whether SAA has been applied by projects in a collaborative/synergetic method with other key CARE approaches or independently,
- The persisting social norms and cultural barriers in different parts of the operational areas needs integrated efforts of relevant stakeholders and multiple strategies than before.

#### **Key approaches: Climate Vulnerability & Capacity Analysis (CVCA)**



## **The “Good Enough” learning Agenda pilot**

- The CVCA methodology can be used and adapted to gather and analyse information to design climate change adaptation initiatives, as well as to integrate climate change adaptation issues into livelihoods and natural resource management programs”. It can also provide practical evidence for advocacy on climate change issues.
- However, there is no evidence about CVCA and its contribution to household livelihood resilience. Neither secondary nor primary sources revealed evidence as to whether CARE projects use CVCA either in the design or implementation stages

### **Key Approaches: Participatory scenario planning (PSP)**

- Ideally known as one of the key approaches and implemented as a weather forecasting tool; PSP is a participatory planning tool/approach or instrument. It is best known for its uses in the PRIME project in the pastoral areas.
- But, both the secondary and primary sources didn’t have any evidence about the PSP.
- Thus, it is important to understand and redefine what does common approaches mean to CARE in this regard.

### **Key Approaches: Community Score Card (CSC)**

- The existing secondary sources indicated that CSC has been applied in the NPO before 2013.
- Since 2013, no nay project has been applying the CSC.
- There isn’t any evidence whether CSC has been applied and also contributing to program effectiveness & efficiency.

### **Synergy among Key Approaches**

- CFIW program review revealed that until the CFIRW program uniformly measure women’s empowerment and livelihoods resilience across its projects and for the program as a whole, the TOC is an underutilized framework that cannot be rigorously tested nor considered fully integrated program,
- Only few projects namely Berchi, TESFA and WR-RISE have made attempts to implement combination of VSLA & SAA and tried to measure whether there was any synergetic effect on the targets,
- From all the project evaluation reports reviews, the WERISE, Berchi & TESFA evaluations attempted to see about synergies among SAA & VSLA, but didn’t generate adequate information whether it worked or not,
- Review of WERISE & Berchi projects indicated how to go for building synergies and where to begin,
- Community level primary information indicated that both the SAA or VSLA groups have complained that they are expected to attend several sessions set for the SAA & VSLA that is time consuming,
- FGD and KII suggested combining the approaches would be more efficient and effective than having separate approaches,
- In general, the current state of using key approaches has more distinctive characteristics than that of synergetic. Hence, it is difficult to calculate catalyzing contributions of the approaches towards achieving organizational program goal.
- Both primary and secondary didn’t show any sign whether or not CARE’s key approaches have been applied by all projects as per the established assumptions. Neither primary nor secondary sources showed whether synergy/integration/collaboration exists among the CARE approaches that are applied during project implementation.
- There is no evidence regarding the extent to which the key approaches are catalyzing the implementation process and challenging social norms and cultural barriers.
- The CVCA and PSP approaches haven’t been mentioned in any of the evaluation reports and none of the respondents from primary sources mentioned though building household livelihood resilience to climate change shocks is one of the pillar of country program.

## The “Good Enough” learning Agenda pilot

- None of the evaluations looked at whether achievement of individual project’s objectives is due to use of CARE key approaches either in an integrated manner or distinctly.
- As per the “good enough” learning pilot exercise, there are organizational culture of setting several working principles and approaches but there is inadequate consciousness at the organization level to ensure its effectiveness and attainment,

Therefore, it is difficult to know whether setting number of working principles and approaches are contributing to or competing against goal process. To demonstrate socioeconomic transformation at systemic level, synergy seems a must. To understand whether assumptions are working and contributing to the organizational broader goal, CARE(team) should:

1. Set clear strategies that direct method of implementation, monitoring, evaluation and generating lessons,
1. Prioritize the LDM/MEL responsibility to strengthen organization learning, informing future planning and organization transformation,
2. Set appropriate standard for projects to follow & respective accountability for projects,
3. Establish regular reflection platform where CO senior management takes part,
4. Set Standard for inclusion of learning in new designs and policy influence at higher level,
5. Networking with global research entities / universities to verify and confirm the validity & high level acceptance of findings generated from the organizational learning process,
6. Internship program for high talented students (graduate study, post Graduate-PhD, or any scientific research),
7. Promote culture of innovation and learning for the organization to transforming operating model,
8. Relay on valid and reliable evidences for organization decision and actions.

### Use of findings

*Describe key actions to be taken as a result of the findings*

The “good enough” learning agenda pilot helped to generate evidences that describes current programs operating context and possible actions to set systematic approaches to adequately demonstrate evidences of program impact on the impact groups and inform future programming. CARE believes that different approaches are essential to catalyze implementation of projects and initiatives by challenging social norms and cultural barriers that hindered women access to and control over basic productive resources and important decisions. CARE has established assumptions that SAA, VSLA, CVCA, CSC and PSP are key common approaches applied by all projects that catalyze program implementation and contribute to women empowerment and building households’ livelihood resilience. However, there was no clear system and mechanisms to regularly generate and accumulate reliable and valid evidences to prove/justify whether the assumptions are realistic or not. Thus, key actions need to be taken to generate evidences to validate the assumptions so as to build on strengths and improve gaps. Key actions includes:

Actions	Facilitation by	Responsible to ensure	Time by quarter
1. Set minimum requirements for projects to establish possible synergies among approaches and across projects	PQL, projects & PMT	Alemitu & Selam	III(Dec- Feb)
2. Set systems to generate evidences of changes (success or failure) of program operations, mechanism of using lessons and informing program/projects design.	PQL, project and field office LDM & PD	Alemitu, Silke & Selam	III(Jan-March)
3. Allocate adequate resources for implementation of the action plan. Set follow-up mechanisms through which	PQL, PD, CD, projects	Esther, Silke Selam & Alemitu	III(Jan-March)



## The “Good Enough” learning Agenda pilot

the management would ensure whether the identified actions are implemented and brought expected changes.			
4. Share findings and inform program design	PQL & PD	PQL & PD	II-V
5. Regularly review and reflect on effectiveness of the process. Ensuring that whether implementing of the action plan has brought improvement in the performance of the organization.	PQL, PD & CD	Alemitu/Selam	II-V

*Identify practices that could be adopted or adapted in current programming or to address future learning questions.*

CARE Ethiopia always develops program principles and assumptions. But there is lack of consciousness from entire organization with regard to ensuring whether the principles & assumptions are working or not. Enhanced consciousness in every day work and establishing a regular follow-up and reflection practices (MEL) about effectiveness of the principles, strategies and validating assumptions could be adopted as mechanism to help CARE strengthen learnings and demonstrate contribution to program goal, global fight against poverty & social injustices. These will help improve organization learning practices and accumulating of relevant evidences to influence decisions and actions at systemic level. See actions listed from 1-5 in the above table.

### 1. Recommendations

*Provide recommendations for other teams who would like to address similar learning questions in the future.*

Through the “good enough” learning pilot exercise, reliable and valid evidences are generated. The evidences revealed that there is organizational culture of setting several working principles and approaches but there is inadequate consciousness at the organization level to ensure whether that worked or not. So, it is difficult to know whether setting number of working principles and approaches are contributing to or competing against attaining organizational goal. To understand whether assumptions are working and contributing to the organizational broader goal, CARE(team) should:

1. Set clear strategies that direct method of implementation, monitoring, evaluation and generating lessons,
2. Prioritize the LDM/MEL responsibility to strengthen organization learning, informing future planning and organization transformation,
3. Set appropriate standard for projects to follow & respective accountability for projects,
4. Establish regular reflection platform where CO senior management takes part,
5. Set Standard for inclusion of learning in new designs and policy influence at higher level,
6. Networking with global research entities / universities to verify and confirm the validity & high level acceptance of findings generated from the organizational learning process,
7. Internship program for high talented students (graduate study, post Graduate-PhD, or any scientific research),
8. Promote culture of innovation and learning for the organization to transforming operating model,
9. Relay on valid and reliable evidences for organization decision and actions.

### 2. Introduction

This report presents process and findings of the “*good enough*” learning agenda pilot study. The report is organized in to five parts. The first part presents introduction, objectives and methodology. The second part

## The “Good Enough” learning Agenda pilot

presents findings from primary and secondary sources. Part three presents information captured during reflection meeting. And part four and part five present recommendation and conclusion respectively.

### 2.1. Brief description of the pilot

In February 2017 CARE USA MI team invited country offices for grant ward application entitled “good enough” learning agenda pilot. Accordingly, CARE Ethiopia team applied and received \$25,000. The learning agenda pilot focused on the Chronically Food Insecure Rural Women (CFIRW) Program/Impact Group. The program has a goal statement named “*Chronically Food Insecure Rural Women are empowered and their household livelihood is resilient*”. The goal has accompanying hypothesis that describe, realization of the program goal is highly dependent on fulfilment of domains of change and the pathways of change. As part of these definitions, different approaches are labelled as key common CARE approaches and believed to be catalysts that smooth the efficient implementation of the projects to achieve the program goal. The approaches are assumed as causal to smoothly addressing the complexity of poverty alleviation and women empowerment. Evidences from CFIRW programs review of 2015 reinforced by saying ‘CARE’s food security and livelihood initiatives provide essential multi-faceted approaches to meet the complexity of poverty alleviation and achieve household resilience while prioritizing women as the target population’.

From CARE Ethiopia said, the main objective of the good enough learning agenda pilot was to generate evidences that help to validate how realist CARE assumptions are about key approaches as catalysts for achievement of the program goal and that integration/synergetic practices have been materialized during implementations. It was also intended to generate program level evidences that help understand whether the CFIRW program Theory of Change has worked as per the defined program goal. Moreover, it was intended to pave ways to generate, accumulate and use lessons that help promote organizational learning culture, improve program performances and future programs development. Three comprehensive learning questions were formulating but one question was selected for this first phase pilot implementation assuming that others would be addressed in the next series of periods. The learning question chosen was:

#### **A. Are different approaches, or combination of approaches (synergies) more effective than others in contributing to women’s social and economic empowerment and building households livelihood resilience?**

A.1. What is the best combination of approaches to use?

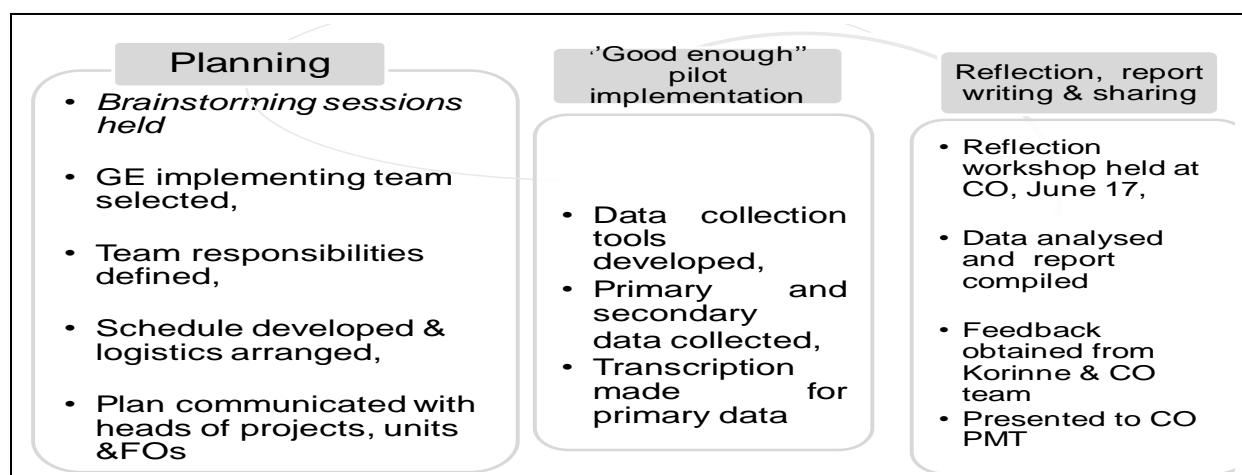
A..2. What lessons can we learn about the synergies of these approaches to inform the design of new projects?

### 2.2. Methodology

The “good enough” learning agenda pilot had passed through series of process. Among others, planning the pilot implementation, implementing activities of the pilot, monitoring and feedback (reflection), compilation and report writing. See visual representation of the process.

## The “Good Enough” learning Agenda pilot

Illustration of the pilot implementation and sharing process



### Planning the pilot implementation

Preliminary implementation plan was developed following the HQ confirmation about grant award. The purpose of developing the planning work was to identify possible activities and paths towards acquiring expected evidences to answer the learning questions. Key activities accomplished in the planning phase include, scheduling brainstorming sessions, identifying relevant participants for the brainstorming session, setting responsibilities for the implementing team/ division of tasks, developing implementation schedule, arranging logistics and communication of the agenda with heads of projects/ units as they assign experts.

As per the plan, first round brainstorming session was held on April 2017 where-Climate Change Advisor for CARE-ECSA, Deputy Chief of Party for LRA, Coordinator for CARE Ethiopia Program Quality and Learning (PQL) and the senior impact measurement advisor took part. Purpose of the session was to share the overview and to further internalize the “good enough” learning agenda pilot, its objectives and deliverables. It was also intended to gain knowledge and information inputs from the participants to further unravel the learning questions and the key concepts in the learning question. The participants pointed out women empowerment in agriculture index (WEAI), CARE women empowerment framework, CARE resilience framework /USAID and CARE’s key approaches guidelines as some of the key documents that could be used as standard parameters for the comparison and

Delineating the “good enough” learning agenda pilot scope to focus only on women empowerment, resilience, CARE approaches & synergy is due to the fact that:

- ✓ Women empowerment and household livelihood resilience are pillars for the CFIRW program goal statement,
- ✓ The CARE approaches are tactics that CARE uses to enhance efficiency of implementation to address underlying causes of poverty and challenges of social norms, and
- ✓ Looking at the synergy aspect is to better understand what kind of synergy existed among the approaches and to what extent that synergy contributed more to the program goal achievement. The synergy aspect was also emphasized to draw recommendation that help to set a collaborative use of approaches as to its best fit to each other.

The available CARE key approaches focused in this pilot are Social Analysis and Action (SAA), Village Saving and Loan Association (VSLA), Climate Vulnerability and Capacity Analysis (CVCA), Participatory Scenario Planning (PSP) and Community Score Card (CSA). These key approaches are considered catalysts in the process of ensuring the program goal (women empowerment and household livelihood reliance).

## The “Good Enough” learning Agenda pilot

base for analysis. Key deliverables, deadline dates and follow-up time were also critically looked at during the planning session. According to the participant’s feedback, the learning question that chosen for first phase implementation was further reviewed for flexibility of application and smooth the implementation and to better accommodate relevant evidences.

By taking the first round brainstorming session as a foundation, the second round session was held within a week interval in April 2017. Its purpose was to identify & delineate scope of concepts to be addressed in the learning agenda pilot, the team members who will involve in the process of unpacking the concepts& possible references (commonly known reference documents for the thematic areas), methods of primary and secondary data collection, sources of the data and schedule for gathering and analyzing the data.

Participants of this second brainstorming session were the pathways program manager, pastoral WaSH program manager, PQL coordinator and the senior impact measurement advisor. In this session they delineated scope of the learning pilot to focus on key selected areas namely women empowerment, resilience, key CARE approaches and synergy. Participants also shared responsibilities to gather, organize and share key documents as references. They also proposed operational definitions for the concepts from view of aligning with the “good enough” learning expectations and set key strategies as well as implementation approaches to answer the learning questions.

### Good enough’ learning agenda pilot implementation

#### Learning questions

CARE Ethiopia has been implementing a wide range of interventions and approaches to achieve the program goal however there is no adequate documented evidence to prove whether there are synergies among the approaches and what lessons are learned that can inform the design of new projects. With this background the below learning question was formulated.

- 1. *Are different approaches, or combination of approaches (synergies) more effective than others in contributing to women’s social and economic empowerment and building livelihood resilience?***
  - 1.1. *What is the best combination of approaches to use?***
  - 1.2. *What lessons can we learn about the synergies of these approaches to inform the design of new projects?***

#### Data collection

Entry point discussions and decisions were made to establish a common understanding among the “good enough” learning pilot implementing team on the types of data, its sources, methods of the data collection and analysis. Primary data were collected from two CARE Ethiopia operation locations and secondary data were gathered by reviewing purposively selected projects end line evaluation and related documents. The data used in this learning pilot were qualitative and minimum extent of quantitative (presented in the secondary sources). This pilot mainly focused on internally available qualitative data due to the fact that the pilot is the first attempt/implementation for the team and hence, the team opted to focus more on the data available at hand. The projects end line evaluation documents reviewed include CARE country programs review report, FNS projects review report, food security and women empowerment projects reports such as WERISE, GRAD 1, ABDISHE, EU recovery and BERCHI. TESFA, the SRH project and two WaSH projects namely LEGAS and MWA were also reviewed.

The team intensively reviewed selected projects end line evaluation reports to capture evidences of reported achievement and how that have been presented in each of those reports from the perspective of CARE

## The “Good Enough” learning Agenda pilot

program goal. This means, how compatible the individual projects evidences is to aggregate the values of similar concepts to show program level achievements. The team also reviewed the VSLA, SAA, CVCA, CSC guiding documents and CARE women empowerment framework to use the principals and minimum criteria as a base to judge the findings reported by evaluators and findings from primary data sources.

The review of secondary sources was undertaken by experts from CARE Ethiopia Country office and two LDM managers from North program and East Hararghe field offices. See list below:

### List of staff participated in data gathering (secondary & primary data)

SN	Name	Project represented/unit	Position
1	Addisalem Berhane	PQL	Gender and social transformation Advisor
2	Martha Rezene	PQL	Partnership and capacity building Advisor
3	Masresh Tadesse	GRAD	Knowledge Management Advisor
4	Kasahun Eshetu	GRAD/FSF	LDN Manager
5	Nardos Aboma	Humanitarian unit	Program Officer
6	Desta Baye	Humanitarian unit	Wash Advisor
7	Yordanos Zelalem	North Program office	LDM Manager
8	Surafel Ejigu	East Hararge field office	LDM Manager
9	Beza Amare	Wash unit	Water engineer/intern
10	Aelaf Habte	Pastoral Unit	Admin
11	Elias Ibrahim	EU recovery project	Accountability & Climate Change Advisor
12	Selamawit Menkir	PQL	Coordinator
13	Alemitu Golda	PQL	Senior Impact Measurement Advisor

The review process was carried out by each team that comprised of four experts who jointly review designated documents and present the information in the presence of other groups. These review team members were nominated by their supervisors on basis their expertise on climate change & disaster risk reduction, NRM, Economic development, gender & development, MEL, knowledge management, WaSH, water engineer, project management & program support. The two field office LDM managers were purposively chosen as they have more experiences and knowledge about CARE programs goal, the TOC, key approaches and the field offices operations. These field offices LDM managers took part during setting the learning agenda pilot.

Two field offices were selected for primary data collection due to volume of operations and accessibility of the operation areas than other field offices to conduct this study. The data were collected by some of the team by lead facilitation of the North program and East Hararghe field offices LDM managers. Total of 16 FGDs (50% gender ration) at 8 kebeles, 8 KII at community level (50 % gender ratio) and 7 KII at woreda office level together from the North and East Hararge field offices were administered. FGD and KII were conducted by using semi- structured interview and topic lists whereas thematic area based outline was used to organize required data from the primary sources. Tools used for the data collection are attached as Annex.

### Data Analysis

As qualitative data were collected from primary and secondary, qualitative analysis method was applied. The predominant analysis methods used were describing & evaluating the information in line with established criteria and principles.

### Findings

This section presents the findings generated from primary and secondary data sources. Presentation of the findings is based in thematic areas.

## The “Good Enough” learning Agenda pilot

### 2.3. Women empowerment, resilience, CARE’s approaches & synergy

As stated in the introduction, the learning agenda pilot was intended to generate comprehensive and comparable evidences that help country office prove whether the available evidences adequately reflect occurrence of program goal theory and related assumptions. In addition, it was intended to identify efficient and effective methods that help to generate and organize key lessons that inform future programming. Five concepts/thematic areas were center of the agenda pilot analysis. Findings from the primary and secondary sources were analyzed on basis of the established definition of key CARE concepts and other standard definitions. These concepts have been used by CARE as base of measurement for the intended changes and achievement of the program goal. See the list below.

SN	Concepts	Explanation	Remarks
1	Women empowerment	It is the key component of the CARE program goal	Focus of all programs is ensuring women empowerment
2	Household resilience	One of the key components of the program goal	
3	CARE Approaches	Assumed as common across CARE, applied by all projects and catalyzing factor for smooth and efficient implementation of projects to achieve of the program goal	Assumed as key facilitators to address social norms and barriers
4	Synergy	Program goal is the aggregate effect of achievement of individual projects and unless projects are having synergetic approach among themselves, it is unrealistic to demonstrate high level program goals	

### Women empowerment

CARE’s women empowerment framework used as base for analysis and testing of the reported achievements on women empowerment. According to the CI Gender Network (2012), women’s empowerment is the combined effect of the changes in agency, structure & relation. It is key to understand that **women’s empowerment is one of the approaches** used by CARE **to reach** the ultimate goal of **gender equality**. As the common dimensions such as women’s access to and control over resources and decision making are always part of women empowerment concept and part of the framework, the success reported by projects on women empowerment are outlined in such manner for simplicity.

When stating women empowerment framework and CFIRW program, evidences from the CFIRW program review (2015) sated that CARE’s *women’s empowerment framework* offers a powerful model to assess the various demarcations of patriarchy and promote programming strategies to overcome inequality and other obstacles to progress, including deleterious social and cultural norms. To varying degrees, the CFIRW program is empowering change within each of the interrelated components of agency, relations and structure.

**Women access to and control over productive resource:** According to Berchi project evaluation (2015) achievement on women empowerment aspect have been described as that “institutional arrangements and flexible working mechanisms” are key for women’s access to and control over resources. As stated, formation of the VSLA and putting in place flexible and effective working procedures have been helpful to women to ensure equitable access and control over locally available resources. Evidence from the TESFA end line evaluation (2015) stated that the project contributed to 30% increase (from the target) girls’



## The “Good Enough” learning Agenda pilot

economic participation through engaging them in income generating activities and 70% increase by their savings.

As per TESF findings, women empowerment is considered as women’s ability to use modern family planning; reported 78% increase coupled with increase in women visit to health facilities for obtaining family planning & that was increased up to 81%. As per the evidences, through providing girls with SRH information and broader life skill training, it has been possible to increase women/girls autonomy in decisions related to their sexual and reproductive health which addressed the women empowerment framework component of power relation.

The comprehensive understanding of empowerment requires not only to increase women’s individual agency but also to change structural barriers in order to shift social and cultural norms, policies and key relationships in ways that allow women and men to step into new roles. Experience and evidences from the SII indicate that progress across all these 3 dimensions of empowerment is needed to achieve sustainable results. On basis the SII, “good enough” learning agenda pilot attempted to establish evidences to better understand CARE’s programming effectiveness and efficiency possible common base for future analysis of women empowerment- impact at scale.

**Table 1. Summary of women empowerment indicators as described by different projects**

<i>Women's access to productive resources</i>	<i>Women's control over resources to ensure livelihood security</i>	<i>Change in the social attitude towards women's role in the household and community level</i>
<ul style="list-style-type: none"> <li>With the "revolving fund and asset transfer approach," number of chronically food insecure and destitute women had access to and control resources as evidenced by the cases discussed (Berchi, 2015).</li> <li><i>The project helped women to develop saving culture, as women save money twice a month ; since 2015, 23 VSLA members saved Birr 11,408(Berchi)</i></li> <li>Service available and accessible-Health extension services is compared with the baseline; increased from 64.80 % in the baseline to 73.32 % in the end line (n=848)(Berchi)</li> <li>Micro-finance services increased from 23.18 % to 69.63 % (Berchi)</li> </ul>	<ul style="list-style-type: none"> <li>Input on most or all decisions on income from crop sales has increased from 40.6% to 54.83 % in the end line (n=848).</li> <li>Input on most or all decisions on income from sales of livestock or poultry 35.1 % to 54.19 % (n=848).</li> <li>Input on most or all decisions on income from sales of nursery from 0 to 37.03% (n=848).</li> <li>The distributions of these productive resources induced positive changes on the beneficiaries.</li> <li>VSLA meetings haven’t only been paving ways for accessing resources, but also a key platform to exercise leadership and decision making from which the beneficiary women have been furthering their skill of leadership at community or formal government institutions(ABDISHE,2015).</li> </ul>	<ul style="list-style-type: none"> <li>“With the Berchi intervention, both the attitude of men and women has begun to change. Women and men are now working together in VSLA and SAA where gender is no more a criterion to take charge of social responsibilities”.</li> </ul>

ABDISHE evaluation review (2015) presented women empowerment from the perspective of **reduced gender gap in access to and control over resources and services**. The evaluation finding presented as due to the project intervention, **gender gap in access to extension services reduced by 6% and also the gap in decision over the extension services use was reduced by 5.3% from the target**.

## The “Good Enough” learning Agenda pilot

The GRAD evaluation review (2016) reported women empowerment from the perspective of **women decision making in non-formal financial institution** and on use of finance. Increased decision making by women from 7 % to 56.6% for the targets. Project has contributed to **increased recognition of the value of girls’ education and the abilities of the girl child**.

The LEGAS- WaSH project review (2014) reported women empowerment from the perspective leadership role women play in the WaSH committee. Reported that 55% of the WaSHCO members are women in most of water supply scheme and women decision making role on the agenda increased. WE-RISE project- (implemented in a partnership with SOS Sahel Ethiopia) (2016) women empowerment is described from the perspective of certain domains such as **access to and control of agricultural production, resources, income, leadership and autonomy**. The changes presented as that decision making by women on productive inputs increased from 66.5% to 71%, resources joint ownership declined from 78.4% to 62%, women control over household income and expenditure increased from 55.5% to 71.7%, women participation in formal and informal groups decreased from 96% to 89%, For full detail-see the table 2.

**Table 2: WERISE project evaluation (2015/6) –women empowerment domains & indicators**

Domains of empowerment		Point Estimate			Sample Size	
Domain	Indicator	BL	EL		BL	EL
<b>Production</b>	With decision-making input for all HH productive decision domains	66.5	71.2	*	501	548
	With autonomy in one or more HH production domains	38.3	28.8	***	501	548
<b>Resources</b>	With sole or joint ownership of 75% of household assets	78.4	62.0	***	476	548
	With sole or joint control over purchase or sale of 75% household assets	79.1	68.3	***	478	548
<b>Income</b>	With access to and decisions on credit	63.4	67.0		257	303
	With control over household income and expenditures in 50% of HH decision-making domains	55.5	71.7	***	510	551
<b>Leadership &amp; community</b>	Participating in formal and informal groups	96.0	89.2	***	525	499
	Confident speaking about gender and other community issues at the local level	82.6	70.7	***	534	543
	Demonstrating political participation	^	^		^	^
	Who express self-confidence in 5 of 7 statements	50.6	52.9		534	534
<b>Autonomy</b>	Satisfied with the amount of time available for leisure activities	64.4	71.3	**	533	543
	Achieving a mobility score of 16 or greater	46.7	46.8		533	543
	Expressing attitudes that support gender equitable roles in family life	74.1	68.7	**	534	543

**Statistically different from baseline at the 10% (\*), 5 %(\*\*) or 1 %(\*\*\*) levels.**

Domains of women empowerment, source WERISE project end line evaluation TANGO Inc. 2015

As per the report, women in male-headed households have experienced the gain —66% on decision-making/ control of household income and expenditures compared to 32% at baseline. Women who reside in female-headed households feel less empowered to make decisions about income and expenditures than they were at baseline (84% versus 77%), although the difference is not statistically significant, and, as

## The “Good Enough” learning Agenda pilot

should be expected, women in female-headed households express approximately ten percent more control over their household income and expenditure than do women in male-headed households.

Women empowerment for the EU recovery project is women’s **enhanced access to agricultural inputs, finance, saving promotion acquiring adequate skill training as well as social empowerment**. As the EU recovery project is not yet complete, the review findings are presented here to get insight about the parameters rather than level of changes.

Primary data were gathered from six districts of two CARE field offices and the evidences on women empowerment are complements to that evidences presented by secondary sources. As per the women FGDs in the North program office areas, women empowerment means participation of women in different community meetings, women engagement in IGAs, undertaking tasks that previously known to be men’s task. Related finding have been generated from the East Hararghe women FGD. In this area, women FGDs participants described women empowerment as participation of women in public meetings, confidently speaking in the meetings, influencing household decisions (sale of livestock, expenditure, income &etc.) and generating own income.

According to evidences from women FGD at Farta- the TESFA project area & Ebinat -Berchi project area in the north program areas and evidence from Fidis & Kurfachale woreda of EH, **an empowered women “is she who has self-confidence, able to influence audiences with her ideas, confidently speaks in public meetings, identify and run successful business and exemplary person”**. This tells that women group are significantly aware about what women empowerment means and they know who is an empowered women.

According to the districts level government women affairs, health & water supply and agricultural offices in the CARE operation areas, women empowerment is understood as participation and decision making by women in income-generating activities, participation in the VSLA, access to productive inputs, decision making at household income, asset selling and expenditure.

The men’s FGD participants defined women empowerment as women’s increased access to land, credit, agricultural inputs and reliable climate and market information. Women’s increased control/decision-making on household income, expenditure, sale of small assets, children spacing(birth) and participation of women in VSLA, WaSH COs and public meetings/any gatherings.

According to the analysis of the good enough agenda pilot, community have different level of understanding towards the concept of women empowerment. Women and men FGD participants are significantly aware about women empowerment in areas where more projects have been implemented whereas women FGD participants in the Dera woreda (MWA project area) are unaware about what women

As per women FGDs findings, women empowerment is recognized from the perspective of women own knowledge, skill, ability and power relationship through that women negotiation in their regular endeavors. This means, it is about agency and relation perspective of women empowerment.

The woreda level government office representatives (male & female informants) and men FGD participants described women empowerment from the perspective of women capability, skill and knowledge; agency and relation perspective. According primary sources, the enabling environment- structure aspect hasn’t been emphasized by projects and the evaluation or hasn’t been focused during implementation.

As per secondary sources, women empowerment has been reported from the view of increased women access to and control over productive resources. However, the way evidences generated and measured is not uniform across projects.

Overall, women empowerment aspect has been measured in different ways by different projects and that is key challenge hinders

## The “Good Enough” learning Agenda pilot

empowerment means. In this woreda (Dera)-WaSH project site, FGD participant women defined women empowerment as *a girl is mature to get married(mebkat)*. This shows difference in the level of understanding among targets on women empowerment.

This kind of difference could have useful aspect to initiate more interest to generate evidences that help CARE answer questions on to what extents projects meet women empowerment results as expected. Overall, efforts or emphasis of CARE towards women empowerment varies from place to place or from project to projects so does the level of understanding among targets towards the concept.

### 2.3.1. Household livelihood resilience building

Building household livelihood resilience is one pillar of the CARE Ethiopia’s CFIRW program goal. This study presents evidences related to resilience building works by CARE projects & programs. The program review finding (2015) states that household resilience index can be calculated using Resilience Principle Component Analysis. This comprises three indexes– **absorptive capacity, adaptive capacity, and transformative capacity** – as inputs. This is also related with the USAID definition of resilience as the ability of people, households, communities, countries and systems to **mitigate, adapt to and recover from shocks and stresses** in a manner that reduces chronic vulnerability and facilitates inclusive growth.

Absorptive capacity is the ability to minimize exposure to a shock and recover quickly when exposed. The adaptive capacity refers to the ability to quickly and effectively respond to changing conditions whereas transformative capacity is the ability to move beyond chronic poverty and insecurity through systematic changes that promote resilience. As per information from the reviews, GRAD project used the resilience framework; (1) to improve support structures and create an enabling environment for supported household and communities, (2) to improve the capacity of households and communities to respond and adjust to variable climate and market conditions and, (3) to improve the capacity supported households to reduce and manage risk throughout the project support cycle respectively.

The qualitative approach used in the resilience assessment offered descriptive information about what the GRAD households considered impacts of the drought and GRAD’s support that built resilience capacities. As per the review, resilience framework was applied throughout the resilience assessment process however findings stated that issue of resilience must be considered as projects starting point that means without including activities and targets, nothing can be measured and reported in the end. Specific to GRAD, if there is need to know contribution of projects works to resilience building, the GRAD strategies must be tested, measured against standard and revised as per the knowledge and previous experience. With regard to measuring resilience, it has been stated that that GRAD monitored overall impact on household resilience, possibly using a composite index or a set of proxy indicators. However, findings revealed the need for routinely assessing and monitoring resilience indicators at both household and outcome levels, rather than at group and output levels. The resilience assessment also recommended that GRAD must be able to monitor medium- to long-term changes in resilience rather than short-term changes in household consumption and to understand resilience as a dynamic process (GRAD Resilience assessment, 2016).

The ABDISE evaluation (2015) indicated that project beneficiaries have accumulated productive assets that reduce their vulnerability to the worst drought shock that happened in 2015. The drought that took place in 2015 has been the worst but thanks to the project that they were relatively resilient enough. As per the evaluation, 64% of the project beneficiary households were found to eat three meals from the previous 2 meals per day. About 97% the beneficiaries were found to be able to cover six month of families’ food consumption from their own income and savings.

## The “Good Enough” learning Agenda pilot

Berchi project evaluation (2015) revealed that the project contributed for household’s livelihoods **diversification & intensification** which is part of resilience building. Assets are accumulated and contributed to reduced risk. The project contributed to livelihood diversification and had its own share to the improvement of households’ food security status and resilience.

WE RISE project evaluation (2016) 40% female participants cited improved access to credit and one-third mentioned improved household savings. 30% reported that they have increased their agricultural income and 13% have increased their non-agriculture income as a result of their participation in WE RISE. Nearly one-quarter of interviewed women (24%) believe that WE RISE participation has improved their household resilience to risks and shocks. Not all of the impacts have been in the economic realm.

Most WE RISE project participants describe their lives as improved since the onset of the project four years ago. Women and men have virtually identical perceptions of their changing well-being: 71% of men and 69% of women reported that they were better off four years after WE RISE initiated its activities in Sidama. Only 9% of men and 10% of women described their lives as worse off than four years (WERISE/TANGO Inc., 2016).

CARE has a clear definition for resilience in the secondary sources however the community level findings showed different response. Community level respondents didn’t know about being resilient to shocks and even some individuals understood the resilience concept in the opposite ways. After unpacking it as adaptive, anticipatory and absorptive, some respondents/informants happened to mention their coping actions such as livelihood diversification, improved crop varieties, promoting savings by engaging in the VSLA as part of adaptive, anticipatory and coping mechanisms.

The available evidence on resilience pieces are not presented as per defined in the resilience framework (adaptive, anticipatory, transformative & absorptive).

In general, the resilience aspect has been presented in guiding documents and shared with some employees but community didn’t reflect what has been indicated in the principles.

As projects have been implemented aiming to build their household’s livelihood resilience, Hence, it is good to have common understanding to certain extent about resilience no matter what levels of understanding differs among people.

Field level primary data indicated that most of the respondents in both field offices don’t understand the concept resilience but after rephrasing it they mentioned little about their coping strategies when climate change shocks occur. This “good enough” review concludes that CARE’s household resilience-building perspective is more theory/expert level knowledge rather being applied at community level. The evidences reported in the secondary sources didn’t have alignment with the definition of resilience framework i.e. there wasn’t clear evidence on which intervention and outcome have contributed to the adaptive, anticipatory, transformative, absorptive aspect. From this it is possible to conclude that projects didn’t emphasis translating concepts to work plans, implementations, monitoring & evaluation and generating evidence for learning and improvement in future programing.

### 2.3.2. CARE Ethiopia key common Approaches

Since the Program Shift (P- shift-2009, CARE Ethiopia has identified women and girls as its programs impact groups in the agrarian, urban and pastoralist areas. Accordingly, the three impact groups, namely chronically food insecure rural women (**CFIRW**), resource poor urban female youth (**RPUFY**) and pastoral school aged girls (**PSAG**) have been defined. Three programs have been also named after those impact groups and respective TOCs, domains of change and pathways of changes were defined.

CARE Ethiopia understood that women’s lack of/limited access to productive resources whilst being responsible for household’s livelihood is among the key underlying causes of livelihood insecurity and vulnerability. Social norms and cultural barriers have been recognized as the topmost challenges with regard



## The “Good Enough” learning Agenda pilot

to ensuring improvements in women’s access to and control over resource across all programs implementation areas. Thus, as a catalyst towards facilitating efficient implementation through challenging such social norms and barriers, CARE identified common approaches and issued to be applied by every projects. According CARE’s perception, common approaches are Village Saving and Loan Associations(VSLA)/Village Economic and Social Associations(VESA-GRAD), Social Analysis and Action(SAA), Community Score Card(CSC), Climate Vulnerability and Capacity Analysis(CVCA) and Participatory Scenario Planning(PSP).

Assuming that the approaches have catalyzing effect on effectiveness and efficiency in implementation, CARE invested on approaches and set minimum standards to be applied uniformly by all projects. There is also assumption that majority of CARE projects have been using the key approaches either in a combined way stand alone. As per CARES perception, the approaches are supposed to be linked with women economic & social empowerment (VSLA/VESA &SAA), household’s livelihood resilience (CVCA &PSP) and accountability to all stakeholders (CSC) or the combinations.

However, from review of secondary sources and primary data gathering during this study, only VSLA & SAA have been mentioned to certain context but not as such similar with the CARE’s assumption. Overall, there is no evidence to say much on whether the approaches have been challenging the norms and barriers and contributing to the achievement of program goal.

Findings regarding each of the approaches is presented below.

### CARE Assumption on Key approaches

- CARE Ethiopia has common approaches with minimum standards and CARE has invested on the approaches,
- The approaches are common because used by all projects,
- The approaches are entry points for projects,
- The approaches are catalyst for more robust achievement

However, there is no adequate evidence on how best the approaches have been applied by projects, whether use of the approaches has been contributing to the envisioned success or what combination would be the best fit that CARE could set to make the most out of the approaches in the future-towards ensuring the TOC

### List of projects and use of CARE approaches

Project	VSLA	SAA	CVCA	CSC	PSP
WERISE	Yes	Yes	No	No	No
GRAD	Yes	No	No	Yes	No
ABDISHE	Yes	No	No	No	No
EU recovery	Yes	No	No	Yes	No
BERCHI	Yes	Yes	No	No	No
TESFA	Yes	Yes	No	No	No
LEGAS	No	No	No	No	No
MWA	No	No	No	No	No

### 2.3.3. CARE Approach: Village Saving and Loan Association (VSLA/VESA)

VSLA users’ guide (2007) describes VSLA as group of 15-25 people who save together and take small loans from those savings. Activities of VSLA run in ‘cycles’ of about **one year**, after which the accumulated savings and the loan profits are being shared out among the members as per the amount they have saved.

For the last several years, CARE projects have implemented VSLA and realized its contributions to achievement of projects objectives. Specifically, WE RISE project evaluation (2016) revealed that



## The “Good Enough” learning Agenda pilot

beneficiary women in the project appreciated VSLA participation for ushering in a “saving’s culture” and developing their “business skills.” VSLA has led to declined reliance on local moneylenders who charge exorbitant interest rates loans. During the project period (5 years) the VSLA members have managed to save ETB1.5 million => \$65,217 in Dale *Woreda/district* alone, largely because members value the VSLA savings component that increase their monthly savings investments fivefold. A total of 621 VSLAs were established across the three *woredas* – has served as an excellent entry point for other activities and women participants offer positive role models in Sidama communities. For example, WERISE project begun to integrate **SAA and VSLA** activities and participation. This informal institution has provided the project with the most consequential engine as **change agent**. VSLA member women have invested in IGA activities such as sheep fattening.

The VSLAs that have promoted women who have been trained into leadership positions were successfully progressing and maybe sustainable post-project. As government has yet to officially recognize VSLAs, they remain informal community saving groups. Recently, VSLA has gained attention from the GoE technical teams and the team specifically mentioned the need for government certification to sustain activity by conferring legal status of the VSLA and use it as catalyzing tool to towards women’s economic empowerment.

With the VSLA approach, the project enabled more women to have access to agricultural financial services at the end line than the baseline (i.e., 2 to 3 times as many women increased access to and control over a loan) (WE-RISE Final Evaluation Global Report, 2016). It is about access to finance The GRAD project review revealed that apart from the VESA members (more than 96%), by the project intervention and facilitation about 27.2% beneficiary households were also membership in RuSACCO (GRAD IR, 2016). The VESA approach of GRAD has served as sources of finance for agricultural and value chain involvement. It has also increased beneficiary’s membership as alternative financing and enabled women to have more opportunities of empowerment. The (2016) GRAD-IR assessment report stated that 24 % of women households have held one of four main leadership positions in VESA (i.e., chairperson, secretary, cashier, or treasurer).

The **ABDISHE** evaluation (2015) reported that VSLAs contributed to linking women with unions to procure seeds which is a sustainable solution to source agricultural inputs for the future. The VSLA sessions haven’t only been paving ways for accessing resources, but also a key platform to exercise leadership and decision making where the women have been furthering their skill of leadership at community or formal government institutions. The TESFA project evaluation also revealed that the combined EE-VSLA/SRH-SAA approach have been used and contributed to improved outcomes for girls. This is based on the theory that, for this group a synergistic relationship exists between economic empowerment and SRH and that an improvement in one (EE or SRH i.e. VSLA and SAA approaches) provides the catalyst for improvements in the other.

The research component of the TESFA aimed at providing actionable and relevant evidence on the effectiveness of providing EE and SRH programming together as a single package, versus providing these interventions in isolation. To address this question, program participants were separated into four main program arms:

1. Those receiving EE training only (VSLA),
2. Those receiving SRH training only (SRH),
3. Those receiving a combined EE/SRH program (Combined), and 4, those receiving a delayed version of the combined curriculum, who served as a comparison group (control). The design allowed for comparisons

## The “Good Enough” learning Agenda pilot

of the relative effectiveness of each arm in improving the EE and SRH conditions of the girls and the effect of each of these compared to a de facto ‘do nothing’ scenario where the girls did not receive any programming. The end line evaluation suggests that there was strong evidence for the overall effect of the project on the lives of girls but there was little evidence that suggest synergistic relationship of combining economic and SRH programming results.

Field level evidences from the NPO showed that SAA and VSLA approaches have been implemented by Berchi and TESFA project and has contributed to women’s improved saving culture and access to loan. VSLA contributed to economic and social transformation of poor women. Primary data report from the EH field indicated that VSLA contributed to improvement in saving practices for members, women access to loan for IGA and agricultural inputs purchase. It has created opportunity for members to engage in dialogue about different agenda. It has improved women’s mobility, women gained experience facilitating on community events and chairing the VSLAs.

In general, both the primary and secondary sources shown that VSLA is a powerful approach that has been contributing women participation in decision making and more to women economic empowerment. TESFA project evaluation report indicated about attempt for using VSLA & SAA together and separately to do the experiment. Yet, there is no adequate evidence whether approaches implemented by project are in a combined manner or standalone. On the other hand, VSLA related evidences haven’t been accumulated at the level of the CFIRW program goal and the domains of change.

### 2.3.4. CARE Approach: Social Analysis and Action (SAA)

According to the SAA guide (2015), SAA is one of CARE’s common approaches and believed to be contributing to attainment of the program goal- women empowerment and building household resilience. It is a social and behavioural change communication methodology facilitates regularly recurring critical reflection and dialogue on how social norms, gender norms, power relations, economic and cultural factors influence development outcomes. SAA creates a safe space that involves the community, CARE staff, and CARE partners in change processes. With conscientious and intelligent adaptation, SAA can effectively address a wide range of social conditions impacting community resilience outcomes, sanitation and hygiene challenges, weak livelihood production, poor nutrition, and so on.

CARE introduced the SAA, promoting gatekeepers who are so important to the process of discussion, reflection, and behavior change toward offering models of shifting and more equitable gender relations, greater sharing of gender roles, and breaking down negative cultural practices. CARE projects (BERCHI, TESFA, WE-RISE and GRAD) reported that the projects have significantly influenced behavior and attitude of individuals (women and men) and enhanced socioeconomic opportunities for the vulnerable women and girls. However, the persisting social norms and cultural barriers in different parts of the operational area need an integrated efforts of relevant stakeholders.

The WE-RISE final evaluation report (2016) presented that more than 2/3 of women (68%) responded positively with gender-equitable attitudes compared with 61% of men as a consequence of repeated discussions in SAA platforms, in the WE-RISE project of Sidama zone. Both surpass the end-of project targets of 60% for women and 50% for men Men begun to share household chores such as cleaving fire wood and braying coffee with traditional mortar that have never been done by men. WE-RISE annual report (2015), the percentage of women spending their time for household chore has significantly reduced following women’s involvement in the project in all the project implementation *Weredas*. For example, a total of 48 (20.6%) of women spent less than 2 hours, 116 (49.7%) spent between 2-4 hours for household chores, i.e., a total of 70% of women have committed less than 5 hours for household chores, implying that majority of women spent more of their times on economic activities. Women’s involvement in

## The “Good Enough” learning Agenda pilot

economically-benefiting activities have positively influenced the minds of their husbands that they believe women’s mobility has something to do with the income of the entire family.

According to the Berchi end line evaluation, the average score of women’s mobility (i.e., to go to market and other outdoor activities) was very low, 2.2% at baseline (n=493) and it reached to an average point of 32.86% at end line (n=850), implying an increased women’s discretion to mobility due to the project interventions. TESFA project evaluation revealed that the project sought to engage the community to a greater degree than is typical. The evaluation finding suggested that while the results provide strong evidence for the overall effect of the project on the lives of girls, there is little evidence suggesting a synergistic relationship where combining economic and SRH programming results in even better outcomes than when offered separately. While the improvement in the economic outcomes are similar across the project arms, there is no area where the combined arm consistently outperforms the VSLA arm. This is also true when examining SRH outcomes, with the changes consistently higher for the girls in the SRH arm –the SAA. However, the WE- RISE evaluation review (2016) stated that Sidama women who participated in the project continue to engender relatively low empowerment, despite the introduction of a very powerful tool, the SAA approach.

CFIRW Program review (2015) revealed that SAA process is proving to be a very effective means of building awareness around gender perceptions based on socio-cultural traditions. Its application is appropriately premised on influencing not only CFIRW program target populations but also other influential stakeholders such as government officials, community leaders and gatekeepers. It has improved communication between spouses is an essential dynamic leading to positive gender role changes.

SAA helps to lay the groundwork for this to happen. SAA direct engagement prioritizes male gender sensitization.

Field level information from the BERCHI & TESFA project area of NPO complemented the evidence obtained from secondary sources as that SAA has been influencing social norms and cultural barriers. Overall, expect few projects, there was no adequate & clear evidence that inform whether the methodology/approach used for implementing SAA was collaborative with other approaches or standalone.

### 2.3.5. CARE Approach: Climate Vulnerability and Capacity Analysis (CVCA)

CVCA is said to be one of the key approaches for CARE Ethiopia which is thought to be contributing to ensuring household livelihood resilience-the pillar of the program goal. The CVCA methodology provides a framework for analysing vulnerability and capacity to adapt to climate change at the community level. The CVCA methodology is based on a framework of “enabling factors” for Community-Based Adaptation (CBA). Recognizing that local actors must drive their own future, the CVCA prioritises local knowledge on climate risks and adaptation strategies in the data gathering and analysis process. The main objectives of the CVCA are to:

- **Analyse vulnerability to climate change and adaptive capacity at the community level:** The CVCA is a methodology for gathering, organizing and analysing information on the vulnerability and adaptive capacity of communities, households and individuals. It provides guidance and tools for participatory research, analysis and learning. It also takes into account the role of local and national institutions and policies in facilitating adaptation.
- **Combine community knowledge and scientific data to yield greater understanding about local impacts of climate Change:** One of the challenges of working at the local level on climate change adaptation is the lack of scaled-down information on impacts. This is coupled with inadequate data and information on weather and climate predictions. The process of gathering and analysing information

## The “Good Enough” learning Agenda pilot

with communities serves to build local knowledge on climate issues and appropriate strategies to adapt. The participatory exercises and associated discussions provide opportunities to link community knowledge to available scientific information on climate change. This helps local stakeholders to understand the implications of climate change for their livelihoods, so that they are better able to analyse risks and plan for adaptation.

Handbook of CVCA (CVCA Handbook, 2009) presents a set of guiding questions for analysis of information at national, local and household/individual levels. It provides guidance on facilitating a participatory process for multi-stakeholder analysis and collaborative learning. The CVCA is designed to **feed into and strengthen planning processes by providing vital, context-specific information about the impacts of climate change and local vulnerability**. The process of gathering, analysing and validating this information promotes invaluable dialogue within communities, and between communities and other stakeholders.

“The CVCA methodology may be used and adapted to gather and analyse information to design climate change adaptation initiatives, as well as to integrate climate change adaptation issues into livelihoods and natural resource management programs” (CVCA Guide, 2009). It can also provide practical evidence for advocacy on climate change issues.

Though the CVCA guide presents the usages and its benefits, in this study none of the data sources stated any on whether or not CVCA has been used in CARE projects/programs. Apart from the secondary sources, neither the FGD nor the key informant interview participants said any about CVCA and its contribution to resilience building.

### 2.3.6. CARE Approaches: Participatory scenario planning (PSP)

Commonly considered as one of the key approaches and implemented as tool for planning weather forecast; PSP is a participatory planning tool or instrument. It is best known for its uses in the PRIME project in the pastoral areas. It has been considered as one of the key common approach to CARE. Nevertheless, there was no evidence about the approach from the reviewed secondary data and primary data sources. Thus, it is important to understand and redefine what does common approaches mean to CARE.

### 2.3.7. CARE Approaches: Community Score Card (CSC)

As per evidence from the Odi study (2015) Community Score Card (CSC) first developed by CARE Malawi in 2002, has become an internationally recognised approach within CARE and beyond. CARE now has more than a decade of experience in implementing this approach in a variety of contexts and sectors. A study conducted in Ethiopia on WASH implementation at three Kebeles of Este Woreda in the Amhara region revealed, CSC implementation agenda was developed with a strong degree of co-operation from the Government employees to set up and facilitate the process. CARE Ethiopia played four main roles in the process of the CSC application: (i) initiating the program and securing commitment from local government; (ii) training the facilitators allocated by the government; (iii) providing resources to the local government for specific projects e.g. materials for water points; and (iv) monitoring the CSC process and convening officials to discuss results.

As per evidences obtained through the good enough review, CSC has been applied by EU recovery project as forward accountability and participatory monitoring tool. In this project, woreda and kebele level FSTFs applied the CSC and reviewed beneficiary targeting practices against the project targeting criteria. The same applied in the livestock provision- in this process the woreda livestock transfer committee provide orientation to the beneficiaries about livestock husbandry, screening out unfit livestock against the criteria, ensure the provision of vaccination for the livestock and supervise the distribution process.

## The “Good Enough” learning Agenda pilot

According to the evidences from primary data sources from Farta woreda, CSC was implemented in the health sector very long time ago. At that time local government partners were able to ensure that CARE was delivering project’s promises. Common platform for implementing the CSC were review meetings, steering committee meetings, field visits, report and terminal evaluation reports review and reflections.

So far, the forward accountability data is hasn’t been compiled and reported on a regular basis in the CFIRW programs.

Except the history of previous period use & some implementation progress by the EU recovery project, there was no adequate evidence from evaluations review & fields findings on how CARE is using the CSC and to what extent it contributed to improved organizational accountability and effectiveness-contribution to achievement of the programs goal.

There are pieces of information from previous studies and from this” good enough” learning pilot study about CSC, however available information doesn’t lead to judge the contributions of using the CSC towards effectiveness and efficiency of project and program level goal.

Evidences showed that CSC has been applied to a certain extent in the north program office when compared to other CARE offices. However, no any projects applied it since 2013. Even in the areas where CSC has been applied, there was no evidence on whether use of the CSC has contributed to program effectiveness, efficiency and benefits of the target groups.

### 2.3.8. Synergy among CARE’s key approaches

Synergy is a state in which two or more things work together in a particularly fruitful way that produces an effect greater than the sum of their individual effects. Expressed also as *“the whole is greater than the sum of its parts”* (various). In this “good enough” learning agenda pilot, the concept synergy holds the same meaning of any literal definition. This good enough pilot process intended to get further insight about whether there is any synergy among key CARE approaches while applied by given project. In addition, it intended to understand what evidences are available that could reflect whether combination(synergy) of approaches is more efficient than using separately. It also desired to get evidences on whether any combined approaches of SAA, VSLA/VESA, CVCA, PSP, and CSC had contributed to ensuring women empowerment and household livelihood resilience more than using approaches separately. The agenda pilot wanted to know what approaches are best fit to ensure the program goal?

In the WE RISE evaluation (2016) synergy has been taken in to consideration as that *‘synergy of the approaches was very important if considered for this project, since the social transformation part of the community was not seen to improve. As norms and practices are equally contributing to poverty as food insecurity etc. Even on agricultural inputs and diversity, if SAA had its part in building a discussion on why FHHs are preferred not to grow coffee and why it is hard to diversify agricultural inputs. The SAA is either not strong on building agency on the HTPs or not captured the change since the project identified, Gender-based violence (GBV), Female genital mutilation (FGM), polygamy, early marriage and rape’*.

Berchi project evaluation finding (2015) revealed that the project is appreciated for its holistic approach and targeting the most vulnerable women and chronically food insecure households. Berch project used combination of SAA& VSLA and also made strong efforts to improve the socio-cultural challenges and economic situations within a single platform. Way forward the evaluators,” *therefore, CARE Ethiopia and CARE Austria must promote and replicat the experiences of SAA and VSLA at wider geographic scales and design a new project that will stimulate the best experiences and sustain the “flavor” of CARE among the beneficiary community* increased women’s participation in social affairs- (VSLA, SAA, Iddir, equib, and mahaber among others).



## The “Good Enough” learning Agenda pilot

TESFA project evaluation suggested strong evidence for the overall effect of the project on the lives of girls but there was little evidence that suggested synergistic relationship of combining economic-VSLA and SRH programming-SAA. The combined approach generally experienced changes on both the economic-VSLA and SRH-SAA dimensions that were greater than receiving solely one type of intervention. **This suggests when there exist a synergistic effect, girls receiving the combined package may have experienced the greatest overall gains from program participation, gaining significantly in terms of both economic and health outcomes.**

As per the available evidences from selected projects review, only few projects namely BERCHI, TESFA and & WR-RISE, have made some promising efforts to implement combination of VSLA & SAA and tried to measure whether there is any synergetic effect on the targets. But community level primary information indicated that both the SAA and VSLA groups have complained that

they are expected to attend several sessions set for the SAA & VSLA that is time consuming. **FGD and KII suggested combining approaches would be more efficient and effective than having separate approaches.** In general, the current state of using key catalyzing approaches has more distinct characteristics than that of synergetic. Hence, it is difficult to calculate/aggregate joint contribution towards realizing organizational program goal.

From all the project evaluation report reviews, the WERISE, Berchi & TESFA evaluations mentioned about synergies among SAA & VSLA. But there weren't any evidences from primary sources about whether there existed synergy among CARE key approaches.

Evidences from review of WE RISE & Berchi projects indicate how to go for building synergies and where to begin. Overall findings showed that organizational operation is more of distinct than that of synergetic throughout the projects implementation.

To demonstrate socioeconomic transformation at systemic level, synergy seems a must from strategy setting to operations. The CFIW program review (2015) revealed that until the CFIRW program can uniformly measure women's empowerment and livelihoods across its projects and for the program as a whole, the TOC is an underutilized framework that cannot be rigorously tested nor considered fully integrated program.

### 3. Reflection (“good enough” process & implementation monitoring)

Day-long reflection workshop was held at Addis Ababa, on the 16<sup>th</sup> June 217 to enrich & validate evidences generated from both primary and secondary sources. All the “good enough” learning pilot implementing team took part in the session where findings obtained from both sources were presented and intensive discussions were made. Participants of the session were pathways project manager, all CO- LDM managers, VSLA & MF Advisor- from the FSF project, Gender Advisors, WaSH Advisors, LDM managers from three field offices (EH, NPO & Borena). CARE Ethiopia Interim –PD-Annie Richey also attended the session and contributed ideas that helped to organize the analysis and presentation of this pilot. Group discussions were held on some key topics and groups reflected and also conducted SWOT analysis. See the below table 3 & 4 for the detail group reflection.

**Table 3: Groups reflection on key questions**

Discussion questions	Groups reflection
1. Is there any common ground to CARE CO to measure women empowerment & resilience and to demonstrate evidences at broader scale (CO program, SDGs, Cl...)? If yes, how, If not why?	<ul style="list-style-type: none"> <li>Yes: Because CARE has high level change indicators, framework and target / CARE 2020</li> </ul>



## The “Good Enough” learning Agenda pilot

<p><b>2. Does CO have common approaches?</b></p> <p>1. If yes, what are they?</p> <p>2. What are their common characteristics?</p>	<ul style="list-style-type: none"> <li>• Yes, For SAA, and VSLA, In between: CSC</li> <li>• No: PSP and CVCA</li> <li>• Have manual, trained staff, and have similar purpose</li> <li>• Implemented at community level</li> </ul>
<p><b>3. Is it possible to establish synergy among:</b></p> <p>1. Projects from different sources?</p> <p>2. Key approaches? How?</p> <p>3. Where is the ideal place to the CO to focus to establish synergies among the stated areas?</p>	<ul style="list-style-type: none"> <li>• Yes, being evidence based, impact focused, build on existing initiative's and convince donors</li> <li>• Standardizing approaches, familiarizing approaches to partners and staff</li> <li>• Check the inclusion of these approaches during project designing</li> <li>• Team that control the quality of project interventions should be established (PQL) establish /revitalize the designing team</li> </ul>
<p><b>4. Is there any opportunity to unify?</b> SWOT analysis (practices towards enhancing women empowerment, Household resilience, application of key approaches &amp; synergy among approaches)</p>	<ul style="list-style-type: none"> <li>• Yes: we have indicators, framework and target / CARE 2020</li> <li>• See SWOT below table</li> </ul>

## The “Good Enough” learning Agenda pilot

**Table 4- SWOT analysis on practices towards enhancing women empowerment, resilience building, application of key approaches & synergy among the approaches**

KEY CONCEPTS	STRENGTHS	WEAKNESS	OPPORTUNITY	THREAT
<ul style="list-style-type: none"> <li><i><b>Women empowerment</b></i></li> </ul>	<ul style="list-style-type: none"> <li>Have WE framework</li> <li>Identified underlined cause of poverty and social inequality</li> <li>Organizational commitment</li> <li>Qualified staff</li> <li>Existence of policies and manuals</li> </ul>	<ul style="list-style-type: none"> <li>Shortage of uniformity in implementation</li> <li>Limited of consistency</li> <li>Lack of strong alignment among projects</li> <li>Limited Documentation and sharing</li> <li>Limited influencing capacity</li> </ul>	<ul style="list-style-type: none"> <li>Government commitment and grand plan</li> <li>Community awareness and structure</li> <li>Supportive Government structures at all level</li> <li>Global commitment for WE</li> </ul>	<ul style="list-style-type: none"> <li>Climate change triggered disaster risk</li> <li>Government restrictions in some interventions</li> </ul>
<ul style="list-style-type: none"> <li><i><b>Households livelihood resilience</b></i></li> </ul>	<ul style="list-style-type: none"> <li>Diversified interventions</li> <li>Have approaches like VSLA, SAA, PSP and CVCA</li> </ul>	<ul style="list-style-type: none"> <li>Limited intervention</li> <li>Limited coordination effort</li> </ul>	<ul style="list-style-type: none"> <li>Gov’t commitment and policy</li> </ul>	<ul style="list-style-type: none"> <li>Disaster risk</li> </ul>
<ul style="list-style-type: none"> <li><i><b>Use of the key CARE approaches</b></i></li> </ul>	<ul style="list-style-type: none"> <li>Have manual , trained staff and M and E system</li> <li>Different initiatives provide different support that improve the wellbeing of the household.</li> </ul>	<ul style="list-style-type: none"> <li>Limited consistency</li> <li>Limited standardization</li> </ul>	<ul style="list-style-type: none"> <li>Have government buy in (SAA,VSLA, CVCA and PSP)</li> </ul>	<ul style="list-style-type: none"> <li>Some like CSC not accepted by government</li> </ul>
<ul style="list-style-type: none"> <li><i><b>Synergy among approaches</b></i></li> </ul>		<ul style="list-style-type: none"> <li>Limited (projects implement approaches in the same area with the same community eg. SAA by N@C and FSF, VSLA by FSF and N@C)</li> </ul>		<ul style="list-style-type: none"> <li>Donor requirement</li> </ul>

## The “Good Enough” learning Agenda pilot

### Use of findings

*Describe key actions to be taken as a result of the findings*

The “good enough” learning agenda pilot helped to generate evidences that describes current programs operating context and possible actions to set systematic approaches to adequately demonstrate evidences of program impact on the impact groups and inform future programming. CARE believes that different approaches are essential to catalyze implementation of projects and initiatives by challenging social norms and cultural barriers that hindered women access to and control over basic productive resources and important decisions. CARE has established assumptions that SAA, VSLA, CVCA, CSC and PSP are key common approaches applied by all projects that catalyze program implementation and contribute to women empowerment and building households’ livelihood resilience. However, there was no clear system and mechanisms to regularly generate and accumulate reliable and valid evidences to prove/justify whether the assumptions are realistic or not. Thus, key actions need to be taken to generate evidences to validate the assumptions so as to build on strengths and improve gaps. Key actions includes:

Actions	Facilitation by	Responsible to ensure	Time by quarter
6. Set minimum requirements for projects to establish possible synergies among approaches and across projects	PQL, projects & PMT	Alemitu & Selam	III(Dec- Feb)
7. Set systems to generate evidences of changes (success or failure) of program operations, mechanism of using lessons and informing program/projects design.	PQL, project and field office LDM & PD	Alemitu, Silke & Selam	III(Jan-March)
8. Allocate adequate resources for implementation of the action plan. Set follow-up mechanisms through which the management would ensure whether the identified actions are implemented and brought expected changes.	PQL, PD, CD, projects	Esther, Silke Selam & Alemitu	III(Jan-March)
9. Share findings and inform program design	PQL & PD	PQL & PD	II-V
10. Regularly review and reflect on effectiveness of the process. Ensuring that whether implementing of the action plan has brought improvement in the performance of the organization.	PQL, PD & CD	Alemitu/Selam	II-V

*Identify practices that could be adopted or adapted in current programming or to address future learning questions.*

CARE Ethiopia always develops program principles and assumptions. But there is lack of consciousness from entire organization with regard to ensuring whether the principles & assumptions are working or not. Enhanced consciousness in every day work and establishing a regular follow-up and reflection practices (MEL) about effectiveness of the principles, strategies and validating assumptions could be adopted as mechanism to help CARE strengthen learnings and demonstrate contribution to program goal, global fight against poverty & social injustices. These will help improve organization learning practices and accumulating of relevant evidences to influence decisions and actions at systemic level. See actions listed from 1-5 in the above table.

## The “Good Enough” learning Agenda pilot

### 4. Recommendations

*Provide recommendations for other teams who would like to address similar learning questions in the future.*

Through the “good enough” learning pilot exercise, reliable and valid evidences are generated. The evidences revealed that there is organizational culture of setting several working principles and approaches but there is inadequate consciousness at the organization level to ensure whether that worked or not. So, it is difficult to know whether setting number of working principles and approaches are contributing to or competing against attaining organizational goal. To understand whether assumptions are working and contributing to the organizational broader goal, CARE(team) should:

1. Set clear strategies that direct method of implementation, monitoring, evaluation and generating lessons,
2. Prioritize the LDM/MEL responsibility to strengthen organization learning, informing future planning and organization transformation,
3. Set appropriate standard for projects to follow & respective accountability for projects,
4. Establish regular reflection platform where CO senior management takes part,
5. Set Standard for inclusion of learning in new designs and policy influence at higher level,
6. Networking with global research entities / universities to verify and confirm the validity & high level acceptance of findings generated from the organizational learning process,
7. Internship program for high talented students (graduate study, post Graduate-PhD, or any scientific research),
8. Promote culture of innovation and learning for the organization to transforming operating model,
9. Relay on valid and reliable evidences for organization decision and actions.

### 5. Conclusion

*Conclusions should briefly summarize the learning agenda report and next steps.*

This conclusion is drawn from the evidences generated through “good enough” learning process. The main objective of the “good enough” learning agenda pilot was to generate evidences that help to validate how realist CARE assumptions are about key approaches as catalysts for achievement of the program goal and that integration/synergetic practices have been materialized during implementations. Specially, it was intended to:

3. Generate program level evidences that help understand whether the CFIRW program Theory of Change has worked as per the hypothesis of defined program goal,
4. Pave ways to generate, accumulate and use lessons that help promote organizational learning culture, improve program performances and future programs design.

Three learning questions were defined but only one learning question was attempted in this phase assuming that the rest would be addressed sequentially. The learning question attempted: *Are different CARE approaches, or combination of approaches (synergies) more effective than others in contributing to women’s social and economic empowerment and building their households livelihood resilience?*

Secondary and primary data sources were used. Purposively selected project evaluation reports were reviewed for secondary information where primary data were gathered from two field offices-chosen based on more number of projects implemented in the area. CARE Ethiopia program staff –specifically the CO LDM managers, sector leaders, all PQL staff and LDM managers from EH&NPO field offices participated in different phases of this work.

## The “Good Enough” learning Agenda pilot

The “good enough” learning pilot study revealed that CARE has several organizational program working principles, approaches and assumptions about the approaches. There are approved programs (CFIRW, PSAG, and RPUFY), program TOCs, CARE common approaches SAA, VSLA/VESA, CVCA, CSC & PSP and assumptions about the approaches. All CARE Ethiopia programs/projects focus on ensuring women empowerment and their household’s livelihood resilience.

As per the review findings, women empowerment has been understood as that women’s access to productive resources increased and are able to make decisions over different household agenda- productive resources, income, expenditure and use of modern contraceptives. Some projects evaluation reported that use of SAA approach impacted on women empowerment. Likewise, the VSLA/VESA approach has contributed to women economic empowerment-targeted women get increased access to financial services, improved their saving, women are able to generate income and diversified household’s livelihood. TESFA, BERCHI & WE RISE evaluations review indicated that projects have attempted combined use of key CARE approaches and come up with some evidences that combined approach is contributing more to attainment of the organizational goal.

Except the three projects, other projects evaluation reports didn’t have evidence on whether or not CARE’s key approaches were applied as per the established assumptions and had synergy among approaches and projects. On basis of the evaluation reviews and primary data sources, it is possible to conclude that there was no measurable synergy/integration among different approaches with in a project or across projects. Except some information about the contribution of SAA, there is no adequate evidence that describe extent that key approaches are catalyzing program implementation and challenge social norms and cultural barriers towards achieving program goal.

Overall, none of the evaluations looked at whether achievement of individual projects objectives was due to use of CARE key approaches or not. All of the projects evaluations, haven’t looked at any relationships among approaches, project goals and program goal. Among the approaches, the CVCA & PSP haven’t been mentioned in any of the evaluation reports and none of the respondents in two field office data collection areas mentioned about these approaches. Yet, building household livelihood resilience to climate change shocks is one of the pillars of CARE program goal.

This “good enough” learning agenda pilot findings led to conclude lack of adequate evidences and mechanisms for proving or disproving validity of the assumptions as a critical organizational gap. Findings of this learning agenda pilot should be implemented as per the identified recommendation to strengthen organizational learning practices and to inform future planning and organizational transformation. There should be functioning mechanisms to validated whether using CARE’s key approaches is complementing to or competing among each other and also generate evidences on how the approaches catalyze process of addressing challenges of social norms & promoting economic opportunities to ensure program goal.

### Key lessons learned from the “good enough” learning pilot study

- ❖ CARE should have:
- ✓ Established mechanisms to regularly monitor contributions/relevance of using the key Approaches for the achievement of corporate goal,
- ✓ Shared organizational assumptions regarding the key approaches to all employees,
- ✓ Established learning and sharing platforms for learning and best practices from individual projects & sectors
- ✓ Reinforced & backed the PQL to meaningfully promote instructional learning practices & evidences based decision making

### References

- CARE Ethiopia. (2016). ABDISHE/Linking Initiatives, Stakeholders to Achieve Gender-Sensitive Livelihood Security (LINKAGES) Project.
- CARE Ethiopia. (2014). Berchi - Be Strong! Project.
- CARE. (2009). Climate Vulnerability and Capacity Analysis hand book.
- CARE Ethiopia (2016). Graduation with Resilience to Achieve Sustainable Development (GRAD).
- CARE Ethiopia. (2014). LIBO-KEMKEM, EBINAT, GAIN AND SIMADA (LEGAS) WASH PROMOTION PROJECT.
- CARE Ethiopia. (2015). Livelihood Security (LINKAGES) Project. Unpublished report final mid-term evaluation report.
- CARE International. (No. date). Program Standard Framework.
- CARE Ethiopia. (2016). Review of CARE and Partners Initiatives (GRAD, WE-RISE & Other Projects) in Sidama.
- CARE Ethiopia. (2014). Millennium Water Alliance- Ethiopia Program. End line evaluation report.
- CARE Ethiopia. (2016). Support to Early Recovery and Socio-Economic Stability of the Drought Affected Population in Ethiopia.
- CARE Ethiopia. (2016). Towards Improved Economic and Sexual Reproductive Health Outcomes for Adolescent Girls (TESFA).
- CARE. (2009). Village Savings and Loan Associations (VSLAs) - *VSL Field Officer Guide*.



## The “Good Enough” learning Agenda pilot

### Appendix

#### CARE Ethiopia, “ good enough learning” agenda pilot

Data collection tools: FGD, KII & desk review

Date \_\_\_\_\_

Name of moderator/lead facilitator \_\_\_\_\_

Note taker \_\_\_\_\_

Start time \_\_\_\_\_ end time \_\_\_\_\_

**Maximum estimated time: 2:00**

*Dear participants of the ‘good enough’ teaching pilot FGD, I would like to thank you all on behalf of CARE Ethiopia, my name is \_\_\_\_\_, and I am working as \_\_\_\_\_ Advisor/manager. Today, I and my colleague \_\_\_\_\_ are here for this FGD as part of the learning pilot. The information you are providing to us will help CARE understand your views towards its works towards enhancing women empowerment & their households’ livelihood resilience. In order to keep/capture details of the discussion, we would like to request your permission to record the information in our note book/voice recorder. If you have any question in this regard, please ask us?*

#### ”Good enough” learning Agenda pilot learning questions

**Question #1: “Are different approaches, or combination of approaches (synergies) more effective than others in contributing to women’s social and economic empowerment and building livelihood resilience?**

**What is the best combination of approaches to use?**

**What lessons can we learn about the synergies of these approaches to inform the design of new projects?**

**Key words: women empowerment, resilience, approaches & synergy**

### A. Women empowerment

#### 1. What is women empowerment to you?

- ⇒ Who is an empowered women? (Can you give an example of an empowered woman from your surrounding?
- ⇒ Why do you say she is empowered?

**Access to:**

- ⇒ Because she is able to access land
- ⇒ Information on agricultural seasons
- ⇒ Agricultural inputs(seed & fertilize)
- ⇒ Training on Agricultural practices
- ⇒ Formal financial services (MFI, Banks) for saving, loan...
- ⇒ Business development and financial management training
- ⇒ Market & climate information

**Control over/decision making**

## The “Good Enough” learning Agenda pilot

- ⇒ Household livelihood activities
- ⇒ Level of household saving & spending
- ⇒ Decision on access to household food
- ⇒ Decision on the composition of food
- ⇒ Selling & acquisition of HH assets
- ⇒ Use of family planning
- ⇒ Determining family size
- ⇒ Level & types of decisions that women made:
  - WaSHCOs
  - VSLA
  - SAA
  - Cooperatives
- ⇒ Kebele administration

### 2. What do you understand about SAA?

- ⇒ Do you think it is important? If yes, why important?
- ⇒ Who should be a member of SAA? / Who do you think should participate in the community level SAA session? Why?
- ⇒ Is there any change due to SAA approach?
- ⇒ For how long should SAA continue?
- ⇒ What would happen if SAA stops?

## B. Community resilience to climate change variability & shocks

1. What is resilience to climate change variability & shocks to you and your community?
2. What are key components of climate change variability & shocks?

- ⇒ Weather variability:
  - Change in rainfall intensity
  - Temperature change(increase /decrease)
  - Change in agricultural time
- ⇒ Climate change shocks:
  - Flood
  - Frost
  - Snow
  - Erosion
  - Drought
  - Crop failure
  - Livestock failure

3. What do you do while climate condition varies?
  - Adaptation mechanism
  - Absorptive mechanism
  - Transformative mechanism
  - Anticipatory

## C. CARE Approaches

1. How did the approaches contribute to women empowerment & resilience?

**Note: This specific question needs your analysis from community responses for the below concepts.**

- 1.1. Have you ever heard about and involved in the following concepts/terms and its application specific to CARE projects?

CSC:

- Lateral Accountability:
- Upward Accountability:
- Forward accountability:

CVCA

- Project design
- Implementation
- MEL
- Evaluation

VSLA

- Saving
- Decision making and leadership

PSP

## D: Synergy among CARE Approaches

1. Do you think the above CARE approaches have coordination among one another?
2. How do you explain the coordination in between the approaches (SAA, CVCA, VSLA, and PSP)?
3. Is using combination of approaches better than using it separately? E.g. VSLA & SAA...etc
4. Are use of approaches similar from project to project that CARE implements in your area? E.g. TESFA, MWA, LEGAS, BERCHI,
5. Explain if any difference in use of approaches from project to project by CARE
6. What is your opinion about the coordination among approaches & projects of CARE in your kebele?

Thank you

## The “Good Enough” learning Agenda pilot

### Community level key informants interview: estimated time 1:00 hour

Date \_\_\_\_\_

Name of moderator/lead facilitator \_\_\_\_\_

Note taker \_\_\_\_\_

Start time \_\_\_\_\_ end time \_\_\_\_\_

*Dear participant of the “good enough” learning agenda pilot KII, I would like to thank you on behalf of CARE Ethiopia, my name is \_\_\_\_\_, and I am working as \_\_\_\_\_ Advisor/manager. Today, I and my colleague \_\_\_\_\_ are here for this KII as part of the learning pilot. The information you are providing to us will help CARE understand your views towards its works towards enhancing women empowerment & their households’ livelihood resilience. In order to keep/capture details of the discussion, we would like to request your permission to record the information in our note book/voice recorder. If you have any question in this regard, please ask us?*

***What does community representative/leader say about CARE’s women empowerment, resilience, CARE Approaches and synergy views?***

1. What do you know about CARE’s projects/activities?
1. Who does the organization/project target?
2. Why?
3. Do you think that all CARE’s interventions are related with the need of people in your kebele? How?
4. How do you & your Kebele ensure that CARE’s interventions are relevant and effective? (Participatory planning? M&E approach, CSC, .if any ...)
5. How does your office work with CARE? At what levels of the work that your kebele participate in the intervention?
6. Have you ever heard about the concept women empowerment through CARE’s intervention?
7. What do you understand about women empowerment from your area perspective?
8. Why do you think empowerment is happening?
9. Have you heard about SAA? If yes;
  - What is it?
  - Who introduced it in to your kebele?
  - Who are group members of the SAA?
  - What do the members do in the SAA group?
  - Do you think that SAA contributed to changes in this area? Can you give examples of change happened due to SAA?
  - How long should SAA exist in your area? Why?
10. Can you give examples for key supports that CARE did for your kebele?
  - a. Why are they key to your kebele?
  - b. What do you think could happen if there hadn’t been any support?
11. Do you have anything to say about overall CARE works from perspective of women empowerment & household livelihood resilience building?
12. What is your overall view about the CARE’s current interventions and what do you recommend for future time?

Thank you

## The “Good Enough” learning Agenda pilot

**Woreda level KII: estimated time: 1:00**

Date \_\_\_\_\_

Name of moderator/lead facilitator \_\_\_\_\_

Note taker \_\_\_\_\_

Start time \_\_\_\_\_ end time \_\_\_\_\_

*Dear participant of the ‘good enough’ learning pilot KII, I would like to thank you on behalf of CARE Ethiopia, my name is \_\_\_\_\_, and I am working as \_\_\_\_\_ Advisor/manager. Today, I and my colleague \_\_\_\_\_ are here for this KII as part of the learning pilot. The information you are providing to us will help CARE understand your views towards its works towards enhancing women empowerment & their households’ livelihood resilience. In order to keep/capture details of the discussion, we would like to request your permission to record the information in our note book/voice recorder. If you have any question in this regard, please ask us?*

1. How does your organization participate in CARE project interventions? Planning, beneficiary selection, participatory review.....
1. How do you understand about women empowerment?
2. Can you tell us about women empowerment interventions and practices of CARE Ethiopia in your Woreda?
3. Do you think the interventions contributed to women empowerment? Please give examples from perspective of enhancing access to and control over resources/decision making
4. How do you understand the concept household resilience to climate change? What are the characteristics of resilient households? Please give example from your woreda context.
5. Have you ever heard of the concepts (CARE approaches) & involved in the applications of SAA, CSC, SAA, CVCA, and PSP? Do you think the use of approaches relevant? Why is it important?
6. Have you ever evaluated/analysed whether there is coordination and integration in between the approaches? E.g. SAA,VSLA,CVCA , PSP and its combinations
7. How do you ensure whether CARE is delivering its projects promises to targets & stakeholders? Eg. CSC...
8. How do the target community see CARE’s interventions? Do they think their household’s livelihood improved due to CARE intervention?
9. Do you think that the livelihood of target communities improved due to CARE’ interventions? If yes, how? If not, why?
10. What is your overall view about the CARE’s current interventions and what do you recommend for future time?

*Thank you*

*CARE Ethiopia, Addis Ababa  
01 June 2017*

## The “Good Enough” learning Agenda pilot

### Theme based outline & desk review template

<b>“Good enough” learning Agenda pilot learning questions</b>
<i>Question #1: “Are different approaches, or combination of approaches (synergies) more effective than others in contributing to women’s social and economic empowerment and building livelihood resilience?”</i>
<b><i>What is the best combination of approaches to use?</i></b>
<i>What lessons can we learn about the synergies of these approaches to inform the design of new projects?</i>
<i>Women empowerment</i>
<b>To what extent the CARE Ethiopia programs/ intervention contributed to improved women’s access to productive resources and services?</b>
<p>Access to:</p> <ul style="list-style-type: none"> <li>• House</li> <li>• Equipment</li> <li>• Savings</li> <li>• Land</li> <li>• Cash</li> <li>• Agricultural extension services</li> <li>• Training</li> <li>• Credit services</li> <li>• Production inputs(seed, fertilizer, technology)</li> <li>• Climate and other information</li> </ul>
<b>To what extent the CARE Ethiopia programs/ initiatives contributed to improved women’s control over productive resources and decision making?</b>
<p>Level of change at division of labor:</p> <ul style="list-style-type: none"> <li>• Productive</li> <li>• Reproductive</li> <li>• Community managing role Decision on:</li> <li>• Household livelihood activities</li> <li>• Level of household saving &amp; spending</li> <li>• Decision on access to household food</li> <li>• Decision on the composition of food</li> </ul>



## The “Good Enough” learning Agenda pilot

- Selling & acquisition of HH assets
- Level & types of decisions that women made:
  - WaSHCOs
  - VSLA
  - SAA
  - Cooperatives
  - Kebele administration

Is there any component of the indicated HTP that our projects considered in design, implementation?  
What are the changes happened due to interventions?

- Practices in land inheritance
- Acceptance of women decisions power over productive assets

*Resilience to climate change shocks*

To what extent that CARE Ethiopia programs/projects contributed to households resilience to climate change variability and shocks

- Adaptive
- Absorptive
- Transformative
- Anticipatory

To what extent each approaches contributed to women’s empowerment and resilience?  
What are the major activities under each approach?

## The “Good Enough” learning Agenda pilot

How did the approaches contribute to women empowerment & reliance?
<p>CSC:</p> <ul style="list-style-type: none"> <li>Lateral Accountability:</li> <li>Upward Accountability:</li> <li>Forward accountability:</li> </ul> <p>CVCA</p> <ul style="list-style-type: none"> <li>Project design</li> <li>Implementation</li> <li>MEL</li> <li>Evaluation</li> </ul> <p>VSLA</p> <ul style="list-style-type: none"> <li>Saving</li> <li style="background-color: #00FF00;">Decision making and leadership</li> </ul>
<p>SAA</p> <ul style="list-style-type: none"> <li>Gender equality and women empowerment(community level)</li> </ul> <p>PSP</p>
What lessons can we learn about the synergies of these approaches to inform the design of new projects?”
Is there any synergy among the approaches/projects?
Wat are the result of the existence of the synergy?