

ROTARY CLUB OF ADDIS ABABA – WEST (RCAAW)
District 9200, Club No. 27782

I. Project Proposal

1.1 Name of project:	Asagirt Water and Sanitation Project
1.2 Location of the project:	Asagirt Wereda, Amara Region
1.3 Types of beneficiaries:	Villagers
1.4 Number of beneficiaries:	3000 population plus living in Asagirt Wereda
1.5 Funding agency:	Rotary Clubs/Rotary Foundation
1.6 Executing agency:	Committee of Villagers, local Administration and RCAAW
1.7 Implementing agency:	Menschen Fur Menschen
1.8 Project budget	Birr 2,663,587.75 or US\$146,437.27

II. Executive Summary

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This project will aim to address some of the priority basic needs of the people of Asagirt in the area of health, and sanitation, RCAAW will collaborate with other rotary clubs, Menschen fur Menschen, the beneficiary population and the local authorities to reach this objective.

2.1 Project Background and Justification

Coverage levels of water and sanitation in Ethiopia is low. Only 61% of the population has access to safe water and 52% has access to sanitation facilities (MOWE World Water Day Report, 2011). Apart from low coverage levels, water quality is a major problem, as evidenced by frequent outbreaks of water related epidemics. The health problems in children are mainly related with unprotected water and environmental sanitation. According to UNICEF's Status of World's Children Report (UNICEF 2009) children under-five and infant mortality rate is about 119 and 75 per 1000 live births, respectively. Diarrheal diseases alone account for 46% of total under-five mortality.

Recognizing the facts, Rotary Club of Addis Ababa West wants to address the issues related to livelihood, health, education, water and sanitation problems of disadvantaged rural communities by mobilizing funds from donors and individuals.

RCAAW Action

After hearing of the problems in this particular village, Two RCAAW members (Rtn Askale and Rtn. Guenet) together with other individuals familiar with the village undertook several missions to assess the situation and develop the project based on actual and real need assessment of the targeted community. During these missions contact was established with the villagers, regional and local government authorities and Menschen for Menschen (an International NGO working in the area). Following the initial consultation among the various stake holders a villagers town hall meeting was held and a committee was established with the objective to identify the priority need of the villagers. Six follow up field missions were carried out by RCAAW members and discussions were held with all stake holders. As a result of these visits the need assessment was formulated and agreed by the village committee composed of six men and one woman, the local authorities at Gina-Ager, Asagirt and Debre birhan level and with Menschen for Menschen. The project is therefore the outcome of numerous field visits and consultations with all stake holders.

Asagirt village is located at approximately 128 kilometer from Addis Ababa and it is part of the Amara Regional State Administration. The estimated population is 3000 and 11 satellite settlement known as Kot. The village is connected with an all-weather road from the main highway leading to Mekele .However, the road needs serious rehabilitation, the local government in collaboration with the villagers is working on it. The village has no electricity and no piped water. The area is basically deprived of basic social services and is untouched by modernization. The villagers are mainly subsistence farmers with little means to procure basic services and improve their way of life.

2.2 Problem Analysis

According to the information obtained during the mission the residents in the aforementioned sub-district live under harsh conditions without access to electricity, safe potable water, sanitation facilities and basic health services. All households use

unprotected springs and seasonal streams for drinking, self-cleaning and food preparation. On average villagers walk about three to four hours to fetch unprotected water and their livestock have to travel similar distances. Inadequate water supply has resulted in a high morbidity and mortality associated with water, sanitation and hygiene related diseases. Shortage of water for animals similarly affects the productivity of livestock.

There is only one elementary school and this it is not enough to accommodate all school aged children, consequently a numbers of children are forced to remain without schooling. Parents are forced to give priority to boys over girls. This situation contributes to the tradition of marrying girls off at a very early age exposing them to serious health hazards caused by child pregnancy related complication without dwelling on the social deprivation. Furthermore the villages has no high school and children who finish elementary school either drop out or have to travel for three hours by foot to attend secondary school in a nearby village called Gin Ager or the sub regional capital Debre Birhane. This leaves the girls totally out of the secondary education seen. For fear that they will become victims of rape parents will not allow their daughters to travel for three hours by foot to pursue higher education.

There is no public transportation except on market day which is once a week on Saturdays. The village has a health post manned by low level health attendant. This has tremendous effect on the health of the population and their ability to access adequate service in a timely manner. Sick people will have to wait until Saturday to benefit from public transport to Debre Birhane the closest town with adequate health facility. The rest of the time sick people have to be carried by relatives on stretcher and travel long distance by foot. The health center lack basic drugs to treat patient with minor elements and there is no pharmacy in the village. The villagers are subsistence farmers with very little surplus or alternative means to supplement their livelihood.

2.3 Policy Context and Implications

Both national and international NGOS are playing a significant role in the national program and thereby contributing to the Government's scheme of poverty reduction strategy to meet the MDG targets and the current Growth and Transformation Plan for clean drinking water supply and sanitation in rural areas. This project will deal with three of the National Development priority agenda which is to provide access to clean drinking water, increase in the use of latrines / sanitation and improve personal hygiene of the rural community. The project will also improve the health situation of the population.

III. Goals and Objectives (SMART)

The overall goals and objectives of the project is to improve the health and wellbeing of the population by addressing the drinking water supply and sanitation problems for the population in Asagirt and its vicinity is facing.

3.1 Water Sanitation

Statement of the Problem

This village has limited sources of safe drinking water. There are mainly two types of water source and that is spring and harvested rain water. Residents have to travel over 6 km to fetch water. The elderly and the extremely vulnerable population have to buy water at ten birr per 10 liter. This is a very expensive deal for a population that has marginal income. While there is a spring source of water the terrain is such that developing a water project at this point from the spring is cost prohibitive, but is on the agenda for long term regional development. As a medium term solution numerous attempts have been made to dig wells without success. The only short and medium term alternative left to alleviate the suffering of the population is to develop access to clean water through a protected pond to harvest rain Water. The area receives rain twice a year. The fear of malaria related health hazard from harvested rain water is not an issue as the village is located at over 3000 meters above sea level.

The overall objective of the project is to improve the target population's quality of life through the provision of clean water and to raise the awareness level of the community towards improved sanitation and hygienic practices. Water born and sanitation related health problems are of great concern to the people and public health workers.

The specific objectives include:

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- To improve access to clean drinking water and provide water per personal hygiene and household sanitation
- To build individual family pit latrines and west disposal
To build eight public latrines and public shower in for the Saturday market
- To build a protected pond with 3700 liter capacity to collect rain water in central location and relevant piping for distribution.
- To reduce the prevalence of water borne and sanitation linked diseases
- To improve sanitation facilities and hygienic practices of the villagers through health education and awareness raising.
- To eliminate abduction and rape of women and girls.

3.2 Health

Statement of the Problem

The village health related problems can be reduced by focusing on improving the water and sanitation aspect of health. The local government is working on

improving the road condition with active participation from the population. The improved road will facilitate access to ambulance and public transportation service to the village. Currently people have to be carried on stretchers as access to transportation is limited. A health post does exist but due to absence of electricity minimal lab work and storage of basic drugs that needs refrigeration such as vaccines is lacking. Solar energy is not an option as the area is cloudy most of the times. Rotarian Askale and Rotarian Guenet have already been in contact with the sub-regional authorities to introduce the concern of the population, the authorities were very sympathetic and receptive .The village development committee established to oversee the water project has been advised to intensify their lobbying efforts with the authorities at all level. Rotarian Askale has also promised to help facilitate access with the regional authorities.

The objective is to focus on access to clean drinking water, sanitation and hygiene to improve the health and wellbeing of the population. Health education will be provided by provincial health workers and demonstration and visual material will be provided under this project to this effect

3.3 Education

Statement of the Problem

The girl child is the one responsible for fetching water for the family having access to clean drinking water at a reasonable distance will liberate her from these chores and give her the opportunity to pursue her education. It is also important to note that girls are raped and abducted on their way to fetching water and consequently forced into child marriage with all its health consequences. Having access to clean water in nearby location will protect the girls from undue sexual harassment. The primary school will also benefit from the construction of the water preservation and distribution system.

IV. Beneficiary Selection Criteria

The village for the project is identified based on the critical water shortage of clean drinking water as identified both by the local population, the local government authorities and the non-governmental organization working in the vicinity. The beneficiaries will be the individual households, public institutions, such as schools, health facilities and public latrines and showers.

4.1 Target Groups/Beneficiaries

4.1.1 Direct

The beneficiaries of the project will be the 3000 households living in the village, the public institutions such as schools, health centers, worship places, government and other public offices and facilities.

4.1.2 Indirect

Indirect beneficiaries of the project would include residents in neighboring satellite villages, traders and student population coming from other villages.

V. Project Duration

The project duration will be 12 month. The start of the project is dependent on the full mobilization of the financial resources required.

VI. Project Output

- A 3,700 cubic meters protected pond is constructed to collect and distribute rain water to allow access to water for the population during the dry season.
- The girl child will be spared from three hours of walk to fetch water and will be given a chance to focus on her education.
- Water sanitation (WASH) committee is formed and trained to oversee the day to day management of the water project.
- All households would have built improved traditional pit latrines (TPLs) and refuse disposal.
All villagers would have received health education about personal hygiene.
- A village sanitation committee would have been established to oversee and manage the public latrine and shower facilities. Money will be collected from the users on market day to ensure its upkeep.
- Latrine would have been built in the four corners of the Saturday market preventing public health hazard.
- Each household member of the village would have experienced visible change and improvement in their personal hygiene and health.

VII. Project Description

This project is designed to meet:-

- The critical need of water for the population through rain water harvesting system.
- The residents of the village will be given health education to promote hygiene and sanitation practices through awareness creation.
- Each household will be provided with materials and technical guidance for the construction of individual pit latrine and refuse disposal.
- Eight public latrines will be constructed in the four corners of the Saturday market with the technical support of Menschen fur Menschen and the labor and material contribution of the local population.
- The girl child will be liberated from three hours walk to fetch water and will be oriented toward pursuing her education.

- The existing water harvesting pond will be rehabilitated and used for the benefit of the domestic animals.

VIII. Location

The project site is located in Asagirt village off the main highway going to Debre Birhan at about 128, km from Addis Ababa in Amara Region off the main highway going toward Mekele. The road up to Sambo 90 kilometer stretch is paved and the remaining 28 is all weather dirt road.

IX. Project inputs

9.1 In cash

The cost of the project is estimated to be ETB 2,635,871.75 or 146,437.27 US. The Rotary Club of Addis Ababa West will contribute, 1,000.00 US\$ (18,000 birr) toward the project. The project will also be submitted for consideration by the District. Copy of the project document has been circulated to Rotarians from the Seattle area during their Polio Plus campaign trip to Ethiopia in 2012.

9.2 In kind

The community will provide local construction materials and members of the Rotary Club of Addis Ababa West have contribute their time and finance toward the need assessment process and will continue to provide same service for monitoring and overseeing the implementation of the project.

9.3 Skilled Personnel

To realize the project, Menschen for Menschen will utilize its existing structure and personnel to implement the project. Construction materials.

X. Organization and Management

Menschen for Menschen project coordinator at Gina Ager center will coordinate the activities of the project and the authorities of the Wereda will mobilize the community and give necessary support.

Menschen for Menschen head office will check work plans, budget, financial utilization and all reports.

A Memorandum of Understanding (MOU) will be signed between the Rotary Foundation, the RCAAW representing all collaborating Rotary and Menschen for Menschen.

RCAAW will designate three Rotarians to manage and follow up this project.

XI. Monitoring, Evaluation and Reporting

11.1 Monitoring

Menschen for Menschen will assign technical experts for the various activities .to ensure regular site-visits and continuous follow-up on the progress of project activities. Members of Rotary Club of Addis Ababa West will undertake at least three monitoring trip to the field. The finance managers of RCAAW and of Menschen fur Menschen will review and check all financial documents and reports and will conduct verification field visit on regular basis. The expenses of each budget line will be controlled and the utilization of funds will be physically observed. Due attention will be given to the details on vouchers, which must reflect precise, quantity, place and time of purchase and name of beneficiaries, and other facts. Spending and reconciliation with the plan of operation will be followed up.

11.2 Evaluation

At the end of the project, a committee of stakeholders will evaluate the performance of the project. The members of the committee will include RCAAW, representatives of other collaborating rotary clubs, local authorities, representatives of the beneficiaries and Menschen for Menschen. The evaluation shall guide the strategic decision making on successful practices. Lessons learned from this project will help develop and shape future projects in other localities.

11.3 Reporting

Audits will be conducted as per agreement signed between Menschen for Menschen and RCAAW in full compliance with the financial rules and regulation of Rotary Foundation.

Menschen for Menschen will submit regular financial and progress report to RCAAW.

RCAAW will submit narrative and financial periodic and final report on the project to all partners and donors.

11.4 External Audit

At the end of the project the Rotary Club of Addis Ababa will hire a n external auditor to review the account expenditures based on the project document as agreed between the partners and in accordance with financial rules and regulation of rotary international.

XII. Project cost estimation

The cost of the project is estimated to be Ethiopian Birr 263, 5871.75 and or US \$146,437.27 .

The breakdown is as given below

Description of Activities and COST in Birr

1. Construction of one dam with the capacity of 3,700 cubic meters at the cost of 2,025,871.75 Birr.
2. Construction of eight public latrines/shower, at the Saturday Market, the unit price is 50,000.00 birr and the total cost is 400,000 Birr.
3. Construction of 100 individual family latrines and waist /refuse disposal at the cost of 500 birr per unit and total cost of 50, 00.00 Birr.
4. Health education for production of posters demonstration station facilities 10,000.00 Birr.
5. External Audit 20,000.00 Birr.
6. Monitoring and Evaluation missions 10,000.00 Birr
7. Unforeseen expenditure (including local taxes /inflation etc... on some project items 120,000.00 Birr.
- 8. Total project expenditure is estimated at 263,587.75 Birr**

XIII. Expected Outcomes

The expected outcome of the project is development of rain water harvesting system for safe water supply to the rural communities. It will also influence the residents to improve their hygiene and environmental sanitation through the construction of traditional pit latrines and waste disposal.

XIV. Risks and Assumptions

- The political and security situation remains stable.
- There are no climatic or ecological extremes.
- Governmental offices at all levels support the program actively.
- Sufficient funding is mobilized in a timely manner.
- Menschen for Menschen will continue to execute the project

XV. Sustainability and Phase out Strategies

The project will establish and strengthen local sustainable community development scheme to improve the way of life of the villagers. The strategy will largely depend upon the sense of ownership and commitment that should be developed within the communities themselves. During the need assessment process we have witnessed the eagerness and commitment of the villagers and the local authorities to resolve the chronic water problem of the village. They have already established a village committee to see the work through.

Annex 1

I. Village Committee members:

Contact number

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|-------------------------|-----------------|
| 1) Ato Shimellis Chair, | |
| 2) Ato Shewndagn | 251910124211 |
| 3) Woz Adanech | |
| 4) Ato Masresha | 251 920 538 175 |
| 5) Ato Henok | 251 913 462 415 |
| 6) Kes Amde | 251 921 237357 |
| 7) Ato Habteweld | 251 920058971 |

II. Contact Persons for Menschen Fur Menschen:

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| 1) Ato Demere Head of Field Office Gin Ager | 251 911 201 301 |
| 2) Ato Misaw Atalaye, Community Service Officer | 251 911 787 942 |

III. Local Government Authorities:

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| 1) Ato Eshete Asfaw, Administrator Southern Showa | |
| 2) Ato Melkamu Administrator for Gin Ager/Asgirt Wereda | 251 913 174 694 |

IV. Rotary Club of Addis Ababa West (RCAAW):

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| 1) Askale Benti | 251 911 696492 |
| 2) Guenet Guebre-Christos | 251 910 325314 |
| 3) Terefe Mengesha | 251 113 724977 |
| 4) Yeman Bisrat | 251 911 202371 |

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