

PARTNERSHIP FOR CHANGE CHRISTIAN AID ETHIOPIA

POVERTY

Strategy 2012–17



We believe when people work together,
the world can be changed

Christian Aid/Antoinette Powell



WHO WE ARE, WHAT WE DO

Christian Aid is an international organisation that insists the world can and must be swiftly changed to one where everyone can live a full life, free from poverty.

We work globally for profound change that eradicates the causes of poverty, striving to achieve equality, dignity and freedom for all, regardless of faith or nationality. We are part of a wider movement for social justice.

We have an integrated approach to poverty eradication, working worldwide on humanitarian relief and long-term development.

We work with, and through, partners including civil society organisations (CSOs), research institutions, churches, faith groups and social movements, as well as governments, the private sector and non-governmental organisations (NGOs).

At Christian Aid, we believe human action is responsible for the underlying causes of poverty and that when people work together, the world can be changed. This thinking has framed our new corporate strategy, *Partnership for Change*.

Our new strategy for Ethiopia is closely aligned with *Partnership for Change*.



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THE SITUATION IN ETHIOPIA

Ethiopia has one of the world's fastest-growing populations and is the second most populous country in Africa. While the country is experiencing high levels of economic growth, it still faces major challenges such as food insecurity, cyclical disasters, population pressure, unemployment, disease and natural resource degradation.

The Ethiopian government's development strategy, the Growth and Transformation Plan, prioritises economic growth, expansion of social development and infrastructure, good governance and promotion of gender, youth empowerment and equity agendas. NGOs must demonstrate how they contribute to these priorities. The main development objective of the Ethiopian government is to achieve middle-income status by 2025.

Although Ethiopia is a major recipient of aid, it still only receives around half the African average per capita. Bilateral and multilateral donors contribute a significant proportion of the country's annual budget. Ethiopia is the largest country programme for both the UK's Department for International Development (DFID) and the European Union (EU), and is among the top recipients of US funding.

The economy is still largely based on agriculture, with more than 85 per cent of people living in rural areas and subsisting off the land. Agricultural investment makes up 17 per cent of the country's annual budget. Although women play a major role in agricultural production and livestock management, their contribution goes largely unrecognised and unrewarded. Despite developments in agricultural production and marketing, many Ethiopians experience permanent or seasonal food insecurity. The country is affected by international commodity and food price fluctuations.

Natural disasters, particularly droughts and floods, occur frequently in Ethiopia, with over 2 million people requiring humanitarian assistance every year. Natural resources, particularly water, land and vegetation, are under severe pressure from overpopulation and overexploitation.

Around 1.3 million people are living with HIV in Ethiopia, one of the largest affected populations in the world. Approximately 52 million people are exposed to malaria, with 2.6 million reported cases in 2010. Ethiopia also has some of the highest rates of maternal, neonatal and child mortality globally. Lack of access to clean water and sanitation facilities are a major cause of preventable illnesses. According to USAID, 20 million young people and 30 million adults in Ethiopia lack basic literacy and numeracy skills. Many children do not attend school.

The private sector is relatively underdeveloped, although there is an increasing trend towards commercialisation and private investment in some sectors, particularly agriculture. To achieve greater self-reliance, domestic resource mobilisation through strengthened taxation systems have been prioritised in recent years.



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CHRISTIAN AID IN ETHIOPIA

Christian Aid has worked in Ethiopia for more than 30 years, initially responding to emergencies but gradually building a long-term development programme. We opened a country office in 1998. Over the years, our work has focused on food security, secure livelihoods, HIV, accountable governance, economic justice, pro-poor energy and climate change. In 2011, our HIV work grew into a wider community health programme, integrating TB, malaria, and maternal and child health.

We work with local partners, supporting them with access to information, training and financial resources, and by building strategic alliances. Together we deliver programmes that bring about big, deep and lasting change with, and for, vulnerable and marginalised people. We want our work to result in thriving, resilient and equitable communities where people, their assets and their livelihoods are resilient, and where previously disadvantaged individuals and communities feel increasingly able to influence decisions affecting their lives.

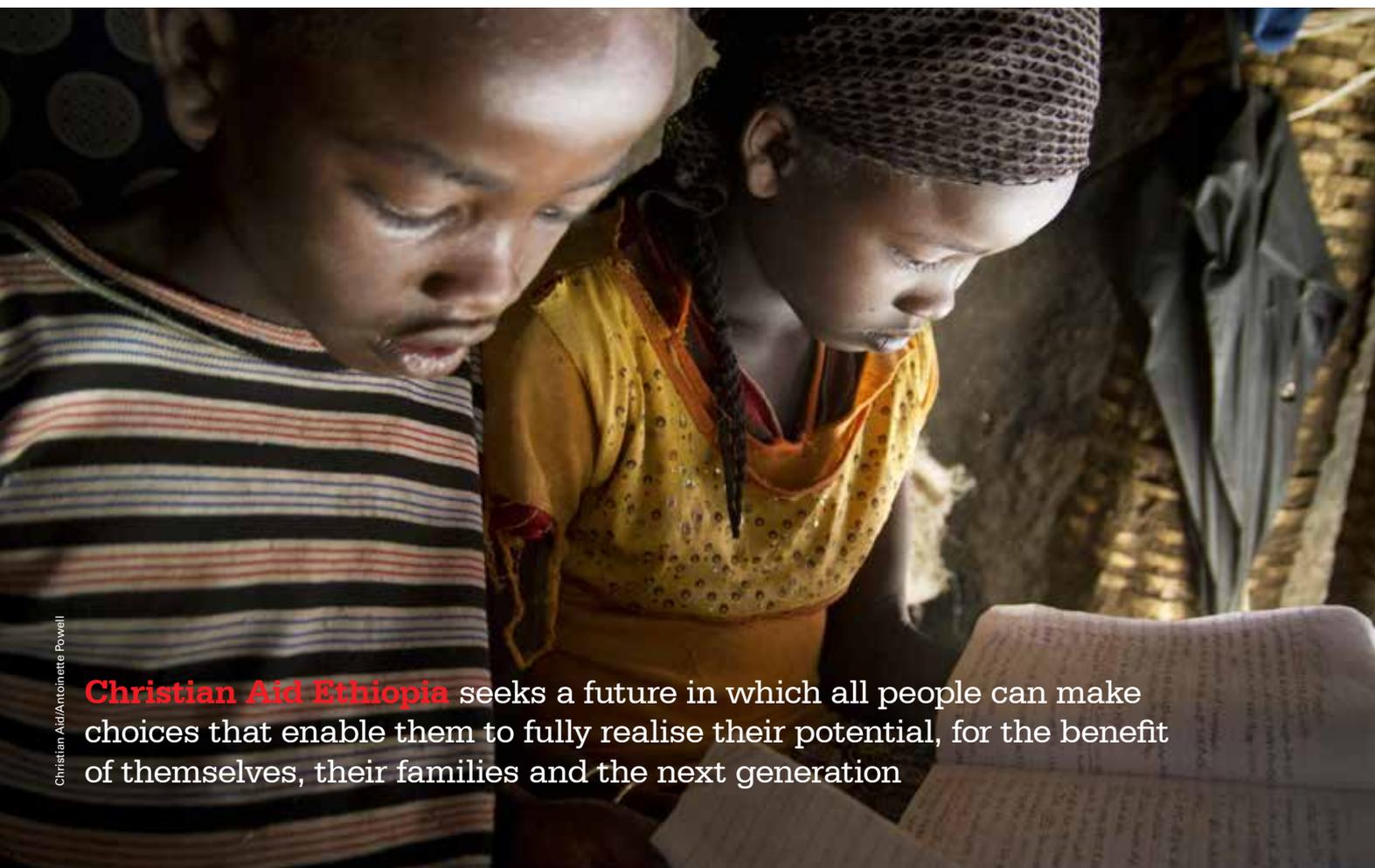
Christian Aid Ethiopia has substantial experience and a strong reputation for working on resilience and secure livelihoods in remote locations, particularly with pastoral communities. We work in key areas under-served by other development organisations, particularly South Omo Zone and Borena Zone, where we have strong relationships with partners, local communities and local authorities – including woreda and zonal government officials. We have a good

reputation for community-based interventions that are effective, sustainable and participatory. This includes our strong competence in, and commitment to using, participatory vulnerability and capacity assessments (PVCAs) in our development and emergency work. Our grassroots work and field-level experience gives us credibility in our contributions to the policy making process and on the impact of climate change on indigenous pastoral and agro-pastoral communities.

Working solely through local partners, we are in a position to influence local CSOs to increase the gender sensitivity of their programmes as well as improve their accountability to the communities they seek to support, including women and girls.

We have a distinctive reputation for work tackling HIV stigma, denial and discrimination. Through our work with faith-based organisations, we are well placed to influence religious communities and leaders who help determine socio-cultural norms in the country and to collaborate with other ecumenical agencies and faith-based networks. We occupy a unique space in the overlap between British and ecumenical bodies, which gives us important access to two communities, to build synergy and achieve greater impact.

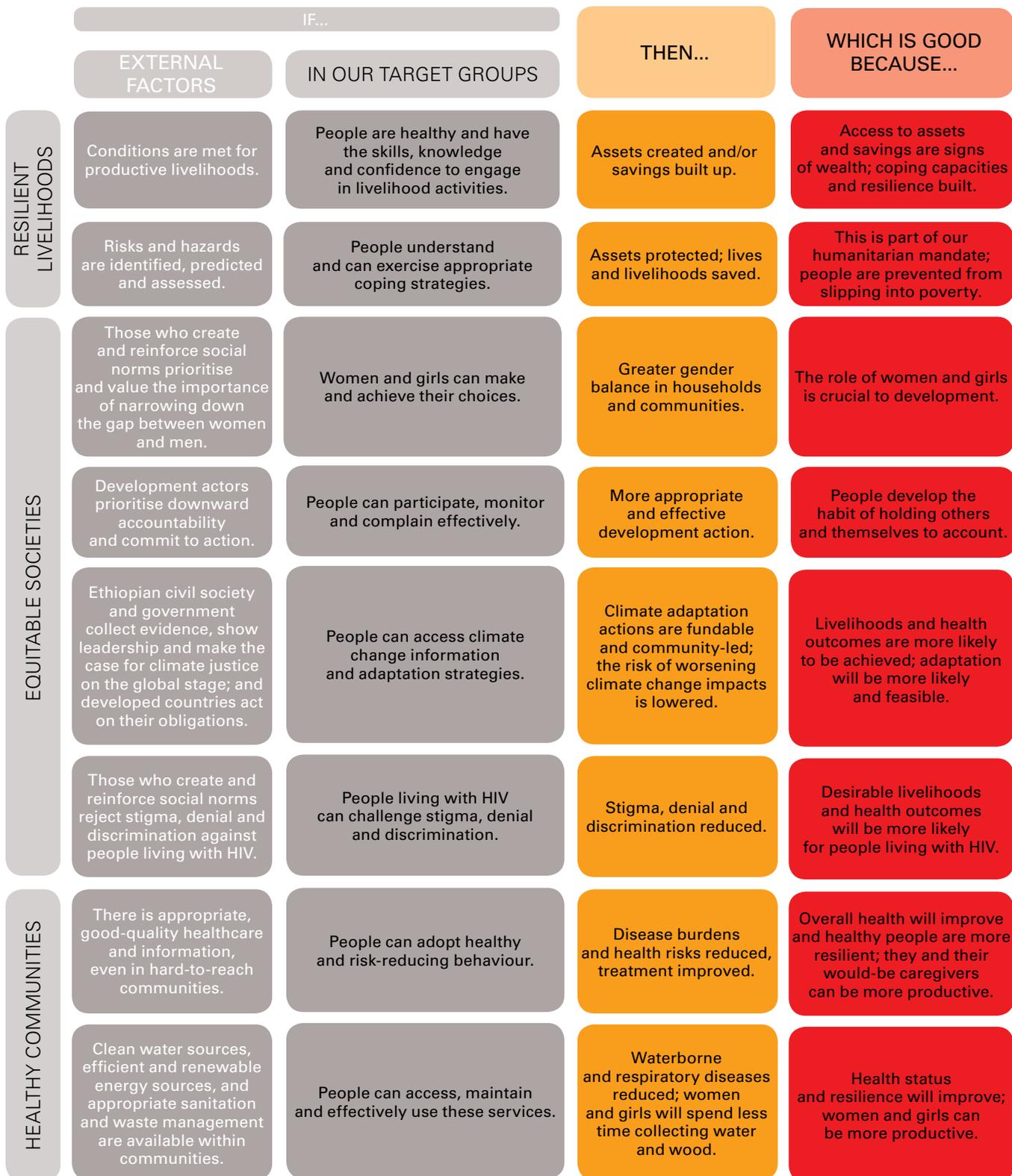
Christian Aid plays a strong leadership role among non-state actors in Ethiopia and has contributed to strategic dialogue with donors, particularly DFID and the EU. We are currently one of only a few agencies in Ethiopia certified by the Humanitarian Accountability Partnership (HAP) and have championed the importance of increased downward accountability among development organisations.



Christian Aid Ethiopia seeks a future in which all people can make choices that enable them to fully realise their potential, for the benefit of themselves, their families and the next generation

OUR PROGRAMME THEORY OF CHANGE

Our theory of change only shows areas on which Christian Aid will work in Ethiopia. Decisions have been made based on our previous experience and track record, our global and corporate priorities, what we can do as an NGO in Ethiopia, feedback from government, partners, communities and strategic allies, and what Christian Aid is best placed to achieve in relation to other development actors.



OUR NEW STRATEGY FOR ETHIOPIA

Christian Aid’s new strategy for Ethiopia contributes to several of the global goals laid out in *Partnership for Change*. We will create conditions in which poor women and men achieve greater influence over decision-making institutions and processes that affect their lives. Through our programme, access to the essential services necessary for good health will increase in remote and vulnerable communities. Christian Aid Ethiopia will work for more productive, sustainable and resilient livelihood opportunities, and fair shares of resources for disadvantaged people, through better market information and access.

We have three programme objectives in Ethiopia that seek change for poor and marginalised groups: indigenous pastoral and agro-pastoral groups, people living with HIV, and rural women and girls in the south and south-west of Ethiopia. We will do this by building their individual and collective capacity. We want these groups to have more choices and influence over their own lives, better health and to be increasingly able to produce and keep hold of income and assets.

All of our work will be designed to help our target groups be more prepared for risks and hazards. It will also be characterised by greater awareness of, and sensitivity to, gender. Greater accountability will be a fundamental requirement.

Objective 1 – Resilient livelihoods.

We will work to increase wealth creation opportunities and build livelihood resilience for poor and marginalised people, particularly pastoral and agro-pastoral communities. Their livelihoods are highly dependent on an environment increasingly under threat from climate change, and traditional coping strategies are no longer enough. There is an urgent need to improve protection, diversification and productivity of their livelihood strategies in a radical way and to support them to be more resilient to future risks and hazards. We will support grassroots and policy work that will bring about such changes.

What we will do:

- agricultural and non-agricultural livelihood support work, including innovation and technology, energy and animal health, plus technical training in agronomy, maintenance, artisanship and entrepreneurship
- build producer and community institutions – including self-help groups, savings/credit/loan associations and cooperatives – and offer training in literacy, numeracy and leadership
- systemic market development, including approaches that mobilise market actors such as Participatory Markets Systems Development (PMSD)
- emergency response, recovery and resilience-building, including climate change adaptation activities.

What we hope to achieve:

- better production capacity and more diverse livelihood options and asset creation
- strengthened collective power in accessing finances
- improved market systems functioning
- enhanced protection of lives, assets and livelihoods.

Objective 2 – Equitable societies.

We will work to improve the ability of under-served groups and people living in poverty, especially women and girls, to make and achieve self-determined choices.

What we will do:

- champion accountability mechanisms and institutional capacity-building among NGOs, particularly HAP
- engage religious and community leaders, and other key power-holders, to tackle the stigma, denial and discrimination associated with HIV, including the promotion of the SAVE approach
- support Ethiopian institutions and civil society representatives to call for, and deliver, climate justice and associated adaptation measures
- community-level gender analysis that builds the capacity of relevant actors.

What we hope to achieve:

- increased accountability of NGOs to communities with whom they work
- decreased HIV-related stigma, denial and discrimination
- climate justice campaign successes, internationally and for developing countries and marginalised communities
- social norms that create and reinforce gender inequity have been challenged and changed.

Objective 3 – Healthy families.

We will work to improve the health of poor and marginalised people, indigenous pastoral and agro-pastoral communities, and people living with HIV. We can increase healthy behaviours while supporting increased access to services essential for better health.

What we will do:

- health system strengthening – improving service delivery, workforce, information systems and infrastructure – in remote or marginalised areas and for mobile pastoral communities
- water supply, sanitation and hygiene promotion activities, combined with policy influencing
- raise community awareness and encourage behaviour change on health-related issues.

What we hope to achieve:

- increased capacity of the healthcare system to deliver quality services for hard-to-reach places and communities
- decreased disease burden related to waterborne diseases and unsafe sanitation
- improved health-seeking behaviour and preventative practices among marginalised communities, and better health as a result.

Christian Aid Ethiopia will deliver projects and programmes through a partnership model. Our local partners will come primarily from civil society and local NGOs, both faith-based and secular, and include those delivering grassroots work and national or regional networks, platforms and movements seeking higher-level influence on policy development.

We recognise churches and sister agencies as natural strategic allies and will continue to be an active contributor to the efforts of ACT Alliance. We will actively engage

in strategic networking with other British and humanitarian NGOs. We will work with the donor community, maintaining good working relationships with DFID and the European Union. We will build relationships with key donors in Ethiopia with whom we do not currently have strong links. We will work with the private sector in our markets work and the government of Ethiopia in pursuing both our grassroots and policy-level advisory work.

Christian Aid Ethiopia believes equity between all people is a fundamental human right, and a vital step to wiping out poverty



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Front-cover photo: With most of the population of Miyo, a district in southern Ethiopia, dependent on livestock and on growing crops when weather conditions are favourable, water is a critical resource. And so when after several poor seasons, rains failed again in early 2011, Oromia Kebele Gelgalo (right) and her daughter Tume watched as her cattle died and crops withered in the fields. But by tanking in emergency water supplies to communities in her area, Christian Aid partner Action for Development helped Kebele and others like her save some of their livestock.

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Christian Aid is a member of ACT – an alliance of more than 130 churches and related organisations that work together in humanitarian assistance, advocacy and development – giving us the ability to respond quickly and easily to emergencies the world over.

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actalliance



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