

2018 Policy Influence Plan Update:

The impact of enhanced, demand-side sanitation and hygiene promotion on sustained behavior change and health in Amhara, Ethiopia

Study code: TW11 1016

The Andilaye intervention was developed by Emory University, in partnership with the Federal Ministry of Health, the Amhara Regional Health Bureau, and relevant Zonal Health Departments and Woreda Health Offices. Funding for the project is provided by World Bank, International Initiative for Impact Evaluation (3ie), and Children's Investment Fund Foundation (CIFF).













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1. Activities and interactions

Activities and interactions related to the policy influence plan during the reporting period and upcoming activities: List the # of stakeholder engagement meetings and activities. Highlight some of the main outcomes or discussion points emerging from the meetings and activities listed, and include participants list (with name of organizations and position) for major dissemination workshops or event in annex. Please specify any upcoming activities and events planned and highlight any changes, if any, that you have made to planned interactions since submitting your policy influence plan.

ID	Activity	Date / Location	Participants	Main Outcome / Feedback
1	Workshops/Meetings			
1.1	Meeting with Amhara Regional Health Bureau (ARHB) for invitation to project launch	September 22, 2016 Bahir Dar, Ethiopia	 Deputy of ARHB Core Process Owner of Community Health Programs 	 Introductions to key regional stakeholders and invitation to the project launch meeting Emory was invited to participate in the Regional NTD Task Force
1.2	Meetings with Zonal and Woreda level Health and Finance Departments/Offices for invitation to project launch	September 26, 2016 Amhara, Ethiopia	 Fogera Health Office Head Farta Health Office Head Fogera Hygiene Officer Farta Hygiene Officer Deputy Director of the South Gondar Zonal Health Dept. Debre Tabor Town Health Extension Office 	 Introductions to study site health office stakeholders and invitation to the project launch meeting
1.3	Regional project launch and stakeholder meeting	September 29, 2016 Bahir Dar, Ethiopia	See participant list <u>here</u>	 Key regional level stakeholders oriented to the project's purpose, objectives, core activities and key outputs and deliverables Feedback and buy-in from key regional level stakeholders before the project begins
1.4	National project launch and stakeholder meeting	September 30, 2016 Addis Ababa, Ethiopia	See participant list <u>here</u>	 Key national level stakeholders oriented to the project's purpose, objectives, core activities and key outputs and deliverables Feedback and buy-in from key national level stakeholders before the project begins

1.5	ONE-WASH regional planning meeting	December 1-2, 2016 Bahir Dar, Ethiopia	Regional Co-WASH CoordinatorNational One-WASH Officers	 Feedback from project stakeholders incorporated into the communication plan Project stakeholders were oriented to regional and national behavior change strategies
1.6	Orientation to the project's qualitative research methods	December 10-12, 2016 Bahir Dar, Ethiopia	Amhara Regional Health Bureau representatives	 Ethiopia project staff and regional stakeholders fully capable of undertaking formative research activities using the qualitative research tools
1.7	Intervention design stakeholder feedback workshop	April 7-8, 2017 Bahir Dar, Ethiopia	See participant list <u>here</u>	 Feedback from participating stakeholders supplemented formative research findings, resulted in more comprehensive solution trees, and generated a list of the most feasible and impactful behavioral domains to target during intervention design
1.8	<i>Woreda</i> -level stakeholder sensitization workshop (Bahir Dar)	September 20, 2017 Bahir Dar, Ethiopia	See participant list <u>here</u>	 Awareness of local stakeholders on the project's key "takeaways" increased Action plan developed, endorsed and signed for the roll out of intervention activities by key stakeholders Consensus reached among key stakeholders on behavior change strategies
1.9	Meeting with Children's Investment Fund Foundation (CIFF) on break STH transmission	October 5-6, 2017 London, England	 CIFF Various NGOs and academic institutions working on WASH and NTD research Estimated 20 total attendees 	 Emory discussed WASH messaging and behavior change approach of the <i>Andilaye</i> project There was expressed interest from CIFF's project officer to evaluate a proposal for the <i>Andilaye</i> project to fund behavioral maintenance activities
1.10	<i>Woreda</i> -level stakeholder sensitization workshop (Fogera)	Early October 7, 2017 Woreta, Ethiopia	See participant list <u>here</u>	 Awareness of local stakeholders on the project's key "takeaways" increased Action plan developed, endorsed and signed for the roll out of intervention activities by key stakeholders Consensus reached among key stakeholders on behavior change strategies

1.11	<i>Woreda</i> -level stakeholder sensitization workshop (Farta)	October 16, 2017 Debre Tabor, Ethiopia	See participant list <u>here</u>	 Awareness of local stakeholders on the project's key "takeaways" increased Action plan developed, endorsed and signed for the roll out of intervention activities by key stakeholders Consensus reached among key stakeholders on behavior change strategies
1.12	Co-WASH annual planning meeting	November 24-25, 2017 Bahir Dar, Ethiopia	 Over 172 attendees from 20 Woredas and 5 Zones attended the meeting including: Woreda Health Offices (x40) Woreda Water Offices (x40) Woreda Education Offices (x40) Woreda Offices of Finance and Economy (x40) Woreda Administration (x2) Zonal Offices of Health (x5) Zonal Offices of Water (x5) 	 The purpose of the meeting was to guide <i>Woreda</i> stakeholders in preparing the annual WASH plan of 2017/18. Emory's message during the meeting was for integrating the <i>Andilaye</i> project with Co-WASH program in the 3 selected <i>Woredas</i>, namely: Farta, Fogera and Bahir Dar zuria Emory tried to integrate <i>Andilaye</i> intervention activities of WASH-NTDs with Co-WASH in our intervention <i>Woredas</i> when making their plans. However, most of the proposed activities in the planning template are at institutional/community level. Whereas, activities of the <i>Andilaye</i> project are planned at household level. Thus, it was difficult to align <i>Andilaye</i> activities with Co-WASH annual planning unless the planning template is subjected to some modification It was recommended that a discussion is had at high level management at Co-WASH
1.13	Meeting with NTD team at the Amhara Regional Health Bureau (ARHB)	December 20, 2017 Bahir Dar, Ethiopia	 ARHB NTD Coordinator ARHB Technical Advisor ARHB NTD Experts 	 Emory met with the NTD team from the ARHB to discuss the <i>Andilaye</i> project and how to collaborate The NTD team unanimously agreed to support the <i>Andilaye</i> project and suggested that Emory provide updates on the project

1.14	Emory discussed with National Co-WASH consultant and Regional Co-WASH contact person	January 2, 2018 Bahir Dar and Addis Ababa, Ethiopiea	 Arto Suominen (National Co-WASH) Abrham Kebede (Regional Co-WASH) 	 Emory followed up with National and Regional Co-WASH representatives after Co-WASH annual planning meeting. Specifically, to agree on financial support for training hall rent as well as staff and HEW/WDAL travel costs, per diems, incidentals The Co-WASH representatives explained that funding allocated for the <i>Andilaye</i> project <i>Woredas</i> is small and is inadequate to provide financial support for the items above. Further, the representatives explained that there are four sectors (Health, Education, Women and Children Affair, and Water) that are the beneficiaries of the Co-WASH funding and the money is sent to these sectors in lump sum through the <i>Woreda</i> Finance and Economic Cooperation. The <i>Woreda</i> WASH Committee is authorized to prioritize for which sector should the money be given
1.15	<i>Kebele</i> -level stakeholder sensitization workshops	January – March, 2018 All intervention <i>Kebeles</i> (x25)	 223 total attendees from 25 different workshops. One in each intervention <i>kebele:</i> <i>Kebele</i> manager (x22) Health extension workers (x37) Agricultural extension workers (x27) School directors (x16) Women's development army leaders (x16) Religious leaders (x32) Influential elders and other influential people from the <i>gott</i> (x73) 	 Key gott and <i>Kebele</i> stakeholders were oriented to the <i>Andilaye</i> intervention and engaged in intervention action planning Buy-in was generated and an enabling environment was fostered to develop action plans for each <i>Kebele</i>
2 2.1	Reoccurring Meetings World Bank WASH focal point meeting to discuss ONE-WASH	Monthly (x12) Remotely via web conference	 Oliver Jones (World Bank) Aiden Corville (World Bank) Christian Borjas-Vega (World Bank) 	 Awareness of World Bank focal points on intervention status increased Feedback from project stakeholders on project

2.2	Neglected Tropical Diseases (NTD) focal point meeting with the Disease Control Directorate of the Ethiopian National Ministry of Health	Quarterly (x4) Remotely via web conference	 Biruck Kebede (former NTD focal point) Nebiyu Negussu (NTD focal point) 	 Awareness of Emory University on Ethiopia NTD programs increased Feedback from project stakeholders on project activities and timeline
3	Conferences			
3.1	2017 UNC Water and Health	October 17, 2017 University of North Carolina	See <u>website</u>	 Emory led a side session on theoretically informed, evidence-based intervention design and evaluation: Approaches and lessons learned in which the <i>Andilaye</i> project was highlighted Increased awareness on behavior change intervention design processes utilized by Emory University and its consortium partners
3.2	2017 Coalition for Operational Research on NTDs (COR-NTD)	November 2, 2017 Baltimore, Maryland	See <u>website</u>	 Emory led presented on intervention design of the <i>Andilaye</i> project Increased awareness on behavior change intervention design processes utilized by Emory University and its consortium partners
4	Reporting			
4.1	Formative research summary and research note	April 2017	All key project stakeholders	 Hard and soft copies of formative research findings disseminated to project stakeholders
4.2	Intervention design stakeholder feedback workshop meeting report	April 2017	All key project stakeholders	 Hard and soft copies of formative research findings disseminated to project stakeholders
4.3	Baseline report	June 2017	All key project stakeholders	 Hard and soft copies of baseline survey findings disseminated to project stakeholders
4.4	Project summary	September 2017	All key project stakeholdersGeneral audience	 Two page summary of project published on project website and circulated to general audience during

4.5	WEDC International Conference paper: "Towards behavioral maintenance: innovations in demand-side sanitation and hygiene intervention design and implementation"	February 2018	WEDC International Conference See <u>website</u>	 Paper will be published and presented during the 2018 WEDC International Conference
4.6	Emory Global Health Institute newsletter	April 2018	Emory University Global Health Institute	• Emory University Global Health Institute members oriented to the <i>Andilaye</i> project
4.7	Preliminary year one follow-up data handout for implementers	April 2018	Health extension workersWoreda health officer	 Three page summary of fidelity at the household level of the Andilaye project was circulated to identify gaps and an action plan for mitigation
4.8	Year one follow-up data findings brief	June 2018	All key project stakeholder	 Two page summary of year one follow-up data collection findings and policy implications of the Andilaye project
5	Planned Activities			
5.1	2018 NTD Annual Review Meeting and Research Symposium	July 2018 Hawassa, Ethiopia	Meeting attendees	 To present on "Understanding barriers and facilitators of WASH behavior change to inform the design of the <i>Andilaye</i> intervention in Amhara, Ethiopia" Emory University was asked by Federal Ministry of Health of Ethiopia stakeholders to present as the <i>Andilaye</i> project is one of the few projects that incorporates WASH and NTD behavior change within its design and tools/materials
5.2	Water, Engineering and Development Centre (WEDC) International Conference	July 2018	WEDC International Conference See <u>website</u>	 To present our paper "Towards behavioral maintenance: innovations in demand-side sanitation and hygiene intervention design and implementation"
5.3	Dissemination of one year follow-up evaluation results	August 2018	All key project stakeholders	• To provide regional stakeholders with a two page summary of year one follow-up data collection findings and policy implications of the <i>Andilaye</i> project
5.4	3rd WASH-NTD Roundtable	September 2018 Addis Ababa, Ethiopia	Roundtable attendees	• We proposed and are now co-organizing the 3rd Global WASH and NTD Roundtable to take place in Addis Ababa in September 2018. We expect to

				 Primary focus will be on our initial findings on the feasibility of a novel demand-side behavior change intervention approach (i.e., Andilaye) to advocate for increased attention on improving the HEW program and enhancing coordination between the WASH and NTD sectors
5.5	9th Neglected Tropical Disease NGO Network (NNN) annual conference	September 2018 Addis Ababa, Ethiopia	Conference attendees	 The WASH-NTD working group is coordinating a workshop that will include a panel of representatives showcasing different models of WASH-NTD coordination existing in Ethiopia. The workshop aims to show case successful collaboration, coordination and integration between WASH and NTDs programs in Ethiopia to promote improved practices, illustrate opportunities both on the policy level by federal and regional governments, and on the implementation level by different NGOs, and identify challenges and shortcomings to address in the future. Emory University has been selected as a panelist to share their lessons learned (to date) on the Andilaye project
5.6	Adaptive management workshops	September 2018 Amhara, Ethiopia	 Woreda hygiene and sanitation officer Woreda health officer Cluster health center supervisors 	 (Intervention activity) To leverage monitoring data to facilitate evidence-based, controlled, and documented operational-specific modifications during critical program moments (i.e., "change gates"). To improve intervention outcomes and resource management by learning from monitored program outcomes. Primary focus will be on providing more supportive supervision to HEWs and WDALs

2. Output and intermediate indicators

Output and intermediate indicators: Include specific indicators selected in your PIP for level 1 and 2 monitoring including: # of knowledge sharing/dissemination events, # of people reached, # of high level policy makers engaged, feedback from stakeholders, # of media clippings, # of citations, web metrics data.

ID	Indicator	Sept 2017	June 2018
L	Output / Intermediate Indicators		
1.1	 # of meetings to discuss evaluation or building policy relevant relationships See above 	24	66
1.2	 # of events at which material related to study presented Regional project launch and stakeholder meeting (see presentation here) National project launch and stakeholder meeting (see presentation here) Intervention design stakeholder feedback workshop (see presentation here) Woreda-level stakeholder sensitization workshop (x3) (see presentation here) 2017 UNC Water and Health 2017 Coalition for Operational Research on NTDs (COR-NTD) Meeting with Children's Investment Fund Foundation (CIFF) on break STH transmission 	4	9
1.3	 # of participants in those events (estimate) See above 	104	553
1.4	 # of participants who are policymakers (estimate) See above 	20	64
1.5	 # knowledge products (e.g. policy notes, briefs, memo, articles, working papers) Research note: Exploring the barriers and facilitator to improved WASH behaviors in Amhara, Ethiopia (see product here) Andilaye project: Formative research findings (see product here) Meeting report: Andilaye project intervention design workshop (see product here) Baseline report: The impact of enhanced, demand-side sanitation and hygiene promotion on sustained behavior change and health in Amhara Ethiopia Project summary (see product here) WEDC International Conference paper: "Towards behavioral maintenance: innovations in demand-side sanitation and hygiene intervention design and implementation" Preliminary year one follow-up data handout for implementers Year one follow-up data findings brief (see product here) Intervention design paper (working) Study protocol paper (working) 	4	10
1.6	 # media clippings Emory Global Health Institute newsletter (see product <u>here</u>) 	0	1
1.7	 # of stakeholders and policymakers present at the launch / dissemination workshop See above 	49	49
2	Uptake Indicators		
2.1	Feedback from policymakers on the study findings Not yet applicable 	N/a	N/a
2.2	 # articles/study and policy brief downloads No published finding yet 	N/a	N/a
2.3	 # policymakers invitations to present the findings 2018 NTD Annual Review Meeting and Research Symposium 	0	3

	3rd WASH-NTD Roundtable		
	 9th Neglected Tropical Disease NGO Network (NNN) annual conference 		
2.4	# citation in government/donor agency strategy documents	0	0
2.5	If the study was posted on the IA website	No	No
2.6	 # websites where study was posted http://www.freemanresearchgroup.org/Andilaye 	1	1

3. Outcome and impact measurement tools and indicators

Outcome and impact measurement tools and indicators: Indicate the measurement tools and indicators identified to report on policy influencing. This section is to provide an update on the measurement tools that the team would have finally selected and report on any refinements or change of uptake and impact level indicators as the project progresses.

ID	INDICATOR
1	Impact Indicators
1.1	 Changes in program policy, design, practice or budget contributed to by the study findings Not yet applicable
1.2	Change in attitudes, e.g. if the IA is planning to commission another IE Not yet applicable
1.3	 Changes in public discourse on questions addressed by the study Not yet applicable

4. Case studies, stories, and testimonials from the field

Case studies, stories, and testimonials from the field: The stories will be used by the 3ie communication team to write some projects in focus features which will be posted on the 3ie website and in the newsletter.

ID Testimonial from the field

1

Interview of a woman discussing gender inequality and social expectations of using latrines

Location: Fogera, Amhara, Ethiopia Date of focus group: October 9, 2016

Focus group context: Focus groups discussion with women who identified as having access to a latrine. Discussion explored the women's experiences around sanitation-related behaviors (defecation and urination), specifically exploring the challenges they face in practicing these behaviors. We also discussed motivations for latrine uptake and their experiences with having a household latrine.

Participant: "We were defecating at every big trees and bushes. It was very stressful. We used to feel that we are lower than men in this regard. We looked for bushes and waited for time in which men aren't around. Those stresses are now gone. There is no difference between men and women. But it used to be considered as debasing of a woman if she was seen defecating on the fields."

Facilitator: "Why?"

Participant: "It was because we are women, and we shouldn't be seen doing such things. If a man's wife is seen defecating on the field, the respect the woman will have from the community would be lowered. This was in our culture. If she isn't married, no one would want to marry her. But the men defecate everywhere as they like. No one say anything bad about them. If women were travelling together, we defecate on the field while some of them will watch the road for us. The latrines gave us relief from such bad things. We used to be stressed because of holding it inside. It used to give us stomach ache. We used to be jealous of the men. But now, this time is happy time. If I feel like I am pressed, I pause whatever that I am doing and go to the latrines to excrete. We are happy now."

Application of formative research findings in *Andilaye* **intervention approach:** This discussion between the facilitator and participant showcases the restrictions women face around their defecation practices due to the social expectation that they do not expose their bodies in public, especially to men. Men do not face the same social expectations – the woman so poignantly expresses this gender inequality. Behavior change communication material in the *Andilaye* intervention highlights this unique benefit to women in having a household latrine - the freedom to defecate whenever you feel the urge and in some ways, be equal to men (see below). Additionally, community conversation facilitators have a discussion question around the experiences of men vs. women in order to create dialog among men around these issues that women face so that men may be motivated to construct a latrine for their household and/or more readily listen to their wives if she requests a household latrine: "Are there any challenges that women face when they defecate in a latrine during the day? If so, how can we avoid the problems and encourage women to use latrine every time they defecate?"

Andilaye intervention behavior change communication material: Intervention behavior change communication material showing a woman defecating inside her household's traditional pit latrine. Other household members are nearby talking and doing some chores but they cannot see the woman in the latrine - she is able to have privacy while defecating because of the latrine.



2 Interview with non-governmental organization (NGO) stakeholders: discussing the recruitment strategy and motivations and barriers of high level *Andilaye* NGO stakeholders for attending workshops in general and *Andilaye* sensitization workshop in particular.

Location: Bahir Dar city, Ethiopia Date of interview: September 20, 2017

Interview context: This informal interview was done with two NGO stakeholder participants during the *Andilaye Woreda*-level sensitization workshop for Bahir Dar Zuria. The interview showcases about the recruitment strategy of *Andilaye* project to form collaboration with non-governmental stakeholders, and motivations and barriers of these high level stakeholders in participating workshops in general and the *Andilaye Woreda*-level sensitization workshop in particular.

The two interviewed participants were from a regional organization called Organization for the Rehabilitation and Development of Amhara (ORDA). ORDA is a local NGO that works on different development activities in Amhara region including supply side water, sanitation and hygiene (WASH) intervention through developing physical water structures (community water schemes) and providing access to drinking water at rural *Kebeles* in Amhara. ORDA, as a local partner was invited to this workshop, two experts were in attendance. By training, one of these interview participants is a nurse (*participant 1*) and the other is a hydrologist (*participant 2*), the former works as WASH expert while the latter is a project manager.

Recruitment: In order to understand procedures used to approach and attract participants at individual or organizational levels during the coffee/tea break of the workshop, participants were first asked recruitment related question.

Facilitator: "How did you learn about today's workshop?" Both participants noted that the *Woreda* health office head made a phone call and invited them to the workshop.

Facilitator: "What did the *Woreda* health office head say when he invited you to this workshop." Participant 2: "He told our organization head that an organization called Emory is doing a WASH related project in our region and *Woreda*, and the organization wanted to have a workshop with government stakeholders and local NGOs, and since you are one of the local NGOs in our *Woreda* who work on WASH in our *Woreda*, we want to invite you to this workshop."

The above interview indicates that non-governmental stakeholders' recruitment, identification and invitation to participate in *Andilaye* workshop was done by government stakeholder, which showcases government health stakeholder direct coordination with the *Andilaye* project.

Reach: In order to understand participants' motivations and barriers to attend any workshop and the *Andilaye* sensitization workshop the following questions were asked.

Facilitator: "What are motivations to participating in any workshops and what are the barriers?"

Participant 2: "For us the motivation to attend any workshop is our gaps. If we are invited to attend a workshop and we realize that the workshop can help us fill our gaps, then we would be motivated to attend."

Participant 1: Responded the same thing, but when answering about barriers he noted that "In most workshops, workshop findings and ideas wouldn't be seen put in practice and in most meetings the same kind of things would be talked repeatedly and these make most people less motivated to go to workshops and meetings."

Participant 2: Added "there is a work load at office and when we are invited to meetings or workshop work load is a barrier to attend." He then added "most of the time it is taken by participants that workshops or meetings are just talks [politics] and they are not seen mostly in practice." Then he added "lack of programmed activities is also another barrier, workshops are not happening and invitations are not coming based on earlier set programs. All of a sudden, someone may come from some government office and invite you or tell for your boss to send some expert to go to a workshop or meeting. The barrier is lack of early set plans that forces people to go to workshops and meetings that are not set earlier."

Participant 1: added, "We gather/meet to solve problems but the meeting output will not be seen implemented." Then he added "experts mostly focus on the per diem that they would get from workshops." Then he added "sometimes experts even first ask the amount of the per diem they would be paid for attending a workshop before deciding to attend."

Facilitator: "Specific to today's *Andilaye* sensitization workshop, what motivated you to participate?" *Participant 2*: noted that "one of our [ORDA's] duties in this *Woreda* is to build rural drinking water structures, provide water access to rural people and work on WASH activities. Since this project [*Andilaye*] is working on WASH, we thought this workshop may help us to get some knowledge and experiences that can fill our gaps."

Facilitator: "What are your gaps?"

Participant 2: "We have a problem related to sustainability of our WASH related activities [like, sustainability in latrine construction and use] and knowledge gap on behavior change. I am very happy that during this morning presentation the presenter noted that this project [*Andilaye*] works on behavior change and the workshop also focuses on that. If the *Woreda* health office mentioned behavior change when he was inviting us to this workshop, we would have come to with much more enthusiasm."

Facilitator: "Can you identify any barriers that could have hindered government and NGO officials (including experts and office managers) like you to attend this workshop?"

Participant 2: "Work load, and un-programmed workshop/meeting invitations are the barriers."

Participant 1: "Not doing things in program and not to be able to see workshop meetings and workshops findings in practice are barriers for experts like me and other government experts/officials to attend workshops or meetings. We meet to solve problem but the final decisions and outcomes of workshop discussions have never seen practiced."

5. Feedback and quotes from key policy influencers or stakeholders

Feedback and quotes from key policy influencers or stakeholders: We request the teams to document the feedback received from one (anyone) of the key influencers or stakeholders identified in your PIPs for each tranche payment. This can be in the form of letter of endorsement or support from stakeholders, partnership agreement, email from stakeholders, minutes of meetings/working group meetings where the study would have been presented (to be included in Annex), or other documentation.

ID Feedback / quotes from key policy influencer or stakeholder

1 Letter from Ethiopia Ministry of Health to Amhara Regional Health Bureau

Date of letter: November 29, 2016

Author of letter: Biruck Kebede (NTD focal point for the Disease Control Directorate of the Ethiopian National Ministry of Health)

Audience of letter: Amhara Regional Health Bureau

"As it is known the Ministry of Health, by developing nationwide sanitation and hygiene strategy, is working with several partner organizations. For which ONE WASH program is known to play higher role, and integrating this program with other projects will have significant importance.

Related to preventing and controlling neglected tropical diseases, diverse projects developed on sanitation and hygiene together with partner organizations are implemented, and now in collaboration with Emory University, implementation of a project called Andlaye which centered on neglected tropical diseases is commenced. The project is going to be executed in Farta, Fogera and Bahir Dar Zuria and integrating the implementation of this project with ONE WASH will have significant role in achieving the desired goal on sanitation and hygiene.

For this reason, on the stated Woredas we ask the Andlaye project, which is centered on neglected tropical diseases, to work in integration with ONE WASH, and we ask you to provide the necessary support when project leader experts from Emory University come.

In this collaboration, the Emory University experts can provide technical support on trainings that would be provided by ONE WASH program, which means preparing materials that would create behavior change, providing technical support for trainings, and providing supportive supervision on detail Woreda level planning and implementation activities."

See original letter here

2 Letter from Amhara Regional Health Bureau to Fogera, Farta, and Bahir Dar Zuria Health Offices

Date of letter: December 7, 2016

Author of letter: Ato Mulusew (Core Process Owner of Community Health Programs of the Amhara Regional health Bureau)

Audience of letter: Amhara Regional Health Bureau

"To prevent neglected tropical diseases, projects on hygiene and sanitation are being implemented in coordination with different partners and now Federal Ministry of Health of Ethiopia has notified us (Amhara Health bureau) with letter number 32/1/45/62 on 29/11/2017 G.C that a project called Andilaye that focus on neglected tropical disease has begun in cooperation with Emory University. The project will be implemented in Farta, Fogera and Bahir Dar Zuria Woredas and it will be implemented in coordination with GSF, CO-WASH, Care, and other projects. Hence, this is to request your Woreda health office to give any necessary cooperation and support to Emory University Staffs that support the project in order to give technical support i.e. producing SBCC materials, giving training technical support and giving technical support on detail activity planning and implementation on trainings given by GSF, CO-WASH, Care and other programs."

See original letter here

3 Letter from Ethiopia Ministry of Health to Emory University

Date of letter: June 25, 2018

Author of letter: Nebiyu Negussu (Neglected Diseases Team Leader, Federal Ministry of Health, Diseases Prevention and Control Directorate - Ethiopia)

Audience of letter: Emory University

"The Federal Democratic Republic of Ethiopia Ministry of Health would like to express our support of Emory University and its consortium partners for their visionary commitment to testing whether an enhanced and integrated WASH-NTD intervention produces a greater net impact on behavior change and health in the Amhara Region compared to the traditional community-led total sanitation and hygiene intervention approach.

As this project aligns with the Amhara Regional Health Bureau's rural health and WASH strategy, we have appreciated your continued collaborative efforts in engaging the Federal Ministry of Health, the Amhara Regional Health Bureau, and relevant Zonal Health Departments and Woreda Health Offices during the design and implementation of the Andilaye project.

It was good to hear about the progress at the COR-NTD meeting in November, 2017 and we are pleased to hear from you that the year one follow-up data collection was completed in April 2018 and we look forward to learning more on the specific findings for policy implications based on your impact evaluation. As you are aware as a coorganizer, the 3rd WASH-NTD Roundtable will take place in Addis Ababa in September 2018. We are looking forward to using your findings to inform global and national policy on WASH and NTD behavior change."

See original letter here

4 Letter from Amhara Regional Health Bureau to Emory University

Date of letter: June 26, 2018

Author of letter: Bizauyehu Gashaw Andualem (Deputy Head, Amhara Regional Health Bureau)

Audience of letter: Emory University

"The Amhara Regional State Health Bureau would like to express our support of Emory University and its consortium partners for their visionary commitment to testing whether an enhanced and integrated WASH-NTD intervention produces a greater net impact on behavior change and health in the Amhara Region compared to the traditional community-led total sanitation and hygiene intervention approach.

As this project aligns with the Amhara Regional Health Bureau's rural health and WASH strategy, we have appreciated your continued collaborative efforts in engaging the Federal Ministry of Health, the Amhara Regional Health Bureau, and relevant Zonal Health Departments and Woreda Health Offices during the design and implementation of the Andilaye project.

We are pleased to hear from you that the year one follow-up data collection was completed in April 2018 and we look forward to learning more on the specific findings for policy implications based on your impact evaluation. As you are aware as a co-organizer, the 3rd WASH-NTD Roundtable will take place in Addis Ababa in September 2018. We are looking forward to using your findings to inform global and national policy on WASH and NTD behavior change."

See original letter here

6. Political context and challenges in stakeholder engagement

Political context and challenges in stakeholder engagement: Describe any changes in the policy context and identify the challenges faced with stakeholder engagement and dissemination, and draw lessons learned and mitigations strategies from those which will help you plan the next activities. This could include changes relating to the socio-political context such as change of administration, upcoming elections, policy influencers moved to another department not relevant to the project, changes in policies, laws or regulations or specific changes relating to the implementing agency (policies or operations).

ID Policy context / challenge

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1	Changes policy context
1.1	 Changes in Ministry of Health structure: In relation to the National MoH structure, the Hygiene and Environmental Health case team has been upgraded to a Directorate. This is generally positive, and should provide more focus on sanitation and hygiene within the Ministry. The new Directorate has been approved, and as detailed proposal on the new structure at Federal and Regional level has gone to the Ministry of Civil Service for approval. The following case teams are being proposed under the Directorate at the Federal level: (1) Waste Management, (2) Food, Water and Personal Hygiene, (3) Institutional and Occupational Health, (4) Climate Change and Social Conformity. Mitigation plan: Ethiopia project staff has reached out to the new Director to orient them to the project.
1.2	Social unrest in the study region: Despite the low levels of social unrest seen in recent months in the Amhara region, anti-government sentiment persists and has the potential to result in low-level security incidents. So far, no incidents have impeded stakeholder engagement for the project.
	Mitigation plan: Ethiopia project staff exercise caution and anticipate heightened security force presence in Amhara region, when appropriate and all staff carry relevant identification documents to facilitate passage through any checkpoints or spot-checks.
2	Challenges in stakeholder engagement
2 2.1	Challenges in stakeholder engagement Personnel turnover of stakeholders: There have been many changes in staff/personnel of stakeholders at the national, regional/zonal, and district level since the launch of the project. Changes in personnel for the following national level stakeholders: (1) the head of the Ministry of Health. Changes in personnel for the following regional/zonal level stakeholders: (1) the head of the Bureau of Health of Amhara Region, (2) South Gondar Administration Zone Administrator and Deputy Head (who was in charge of hygiene and sanitation activities), (3) the number of staff and technical assistants in the Regional Environmental Health team grew from 5 to 10. Changes in personnel for the following district level stakeholders: (1) Bahir Dar Zuria Health Office head, (2) Fogera Health Office head.
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2.3 Challenges in engaging health extension workers for meetings/trainings/workshops: Health extension workers have multiple tasks given by the government and partners, which makes it difficult to address the activities planned by the project, as desired. For example, they were engaged for several days in trachoma campaign and case identification in the community organized by The Carter Center. Overlapping of different tasks is likely due to challenges in completing activities based on the endorsed plan as health extension workers are often engaged by unplanned activities given by different authorities at different levels as directions.

Mitigation plan: Ethiopia project staff has worked to rescheduling of the activities and engagements for other times that were convenient to the implementers.