



TESFA Ex Post Evaluation Research Brief

Despite large declines in child marriage over the last decade¹, child marriage in Ethiopia is still near 40%, with even higher rates evident in various parts of the country. Early marriage contributes to both high primary school drop-out and high fertility rates for adolescent girls. Married adolescent girls are particularly vulnerable, as they are at greater risk of experiencing intimate partner violence, become isolated to the domestic sphere and do not have information or power to make critical decisions related to their own sexual and reproductive health.

CARE launched the TESFA (Towards Improved Economic and Sexual Reproductive Health Outcomes) project in 2010, aiming to mitigate the challenges faced by married girls in South Gondar zone of the Amhara region of Ethiopia. TESFA reached 5,000 adolescent girls during that time with the goal of achieving “measurable positive change in their economic empowerment (EE) and sexual and reproductive health (SRH) status.” TESFA used an integrated intervention model combining CARE’s successful Village Savings & Loan Associations (VSLA) model within peer-led girls’ groups to strengthen both SRH and EE outcomes and Social Analysis & Action groups to engage community members to address the social normative barriers faced by ever married girls.

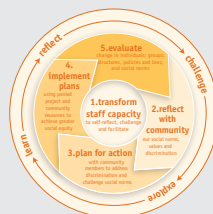
The evaluation, conducted in 2013 by International Center for Research on Women (ICRW), found that the lives of married adolescent girls in the TESFA program significantly improved in economic, health and social terms after only 12 months of participation. The changes included large gains in communication between the young wives and their husbands, decreased levels of gender-based violence, improved mental health among participating girls, increased investment in productive economic assets, improved knowledge and use of sexual and reproductive health services, including family planning, and increased social capital and support. On average, the proportion of girls with savings of their own grew by 23% while increasing only 3% in the comparison group. Furthermore, the number of girls using family planning at the end of the program increased 15 percentage points.²

Core CARE Approaches in TESFA



Village Savings & Loan Associations (VSLA)

CARE’s micro-finance model forms savings groups at the community level with vulnerable populations - particularly women - which financial institutions usually ignore. The process enables women to pool together their resources in order to save money, lend to each other and start income generating activities.



Social Analysis & Action (SAA)

As one of CARE’s models for **gender transformation**, SAA is a community-led social change process through which individuals and communities explore and challenge social norms, beliefs and practices around gender and sexuality that shape their lives.

In order to better understand the sustained impact of the project, as well as the conditions for sustainability and diffusion of the TESFA model, CARE partnered with Addis Continental Institute of Public Health (ACIPH) in May 2017, four years after implementation ended, to perform an Ex-Post evaluation in two of three of the original program areas.

Ex-Post Evaluation Methods

The study used a qualitative approach with purposive sampling, engaging ever married girls from the former TESFA project EE and SRH only arms, government officials – such as Health Extension Workers, and SAA group members. The assessment included two implementation districts of South Gondar: Farta and Lay Gayint.

The ex post evaluation used three different tools to evaluate TESFA.

1 

First, a mapping checklist was filled out with girls' group facilitators to rank each woreda for sustainability and auto-replication, including how often the groups met and the date of their last meeting.

2 

Secondly, key informant interviews with original TESFA project stakeholders, including health extension workers and government officials were conducted to reflect on the model's strengths, gaps and their perception of sustainability of changes.

3 

Finally, focus group discussions (FGDs) were conducted with representatives of girls group members from each woreda and with SAA groups in Farta woreda.

Results

The Ex Post Evaluation revealed even without continued assistance, support or monitoring from CARE and implementing partners, 100% of groups targeted by this study continued meeting after the end of the project, of which 88% reported that they met in the month before the ex post evaluation. Ever married girls reported that they continued to meet with their groups for a variety of reasons, ranging from economic reasons such as budgeting and savings benefits, to exercising social capital, such as gaining and maintaining friendships, getting out of the house, and being a role model for other girls in their community.

TESFA Theory of Change

Girls' income growth accelerated through savings & loan groups for ever married adolescent girls



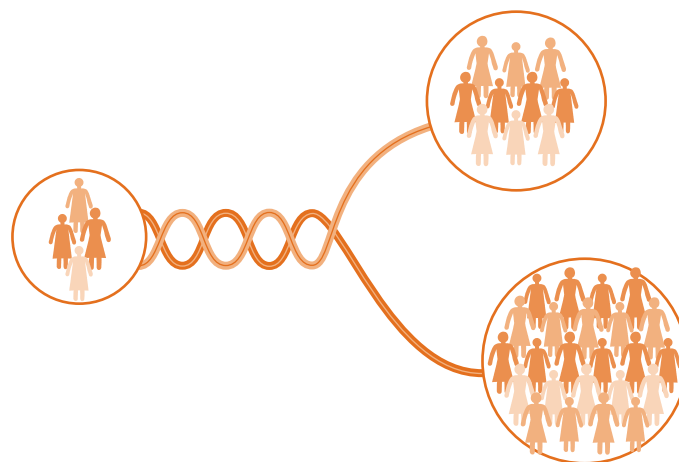
Adolescent girls' SRH education, knowledge and skills increased through age and context appropriate SRH



Adolescent girls' partners, families and communities are educated, informed and involved in supporting Adolescent girls' SRH & EE

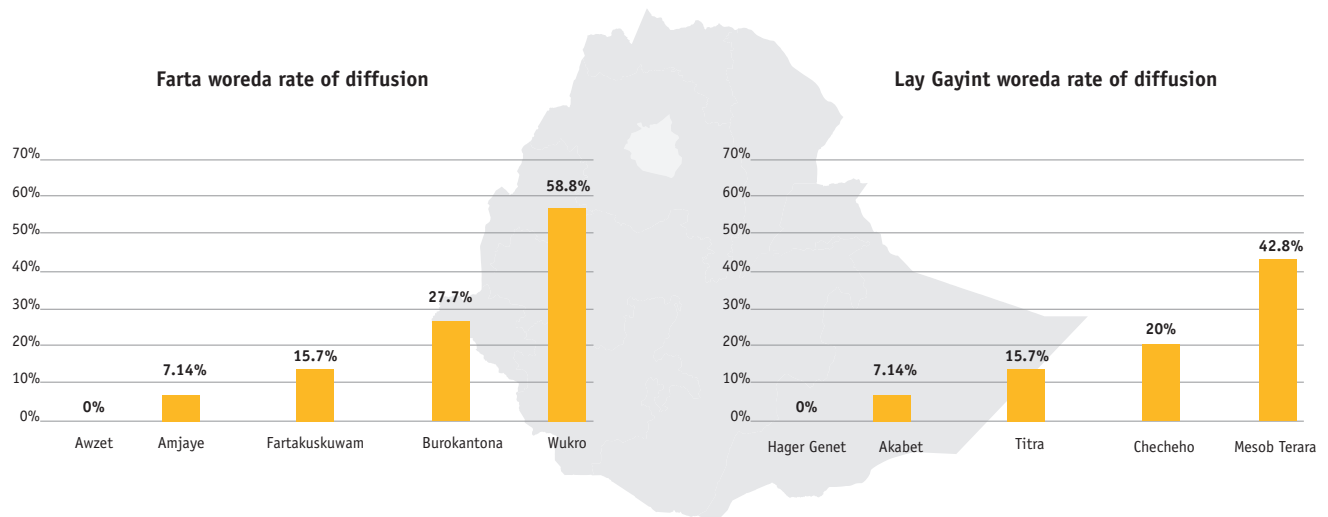


Adolescent girls are economically empowered with improved SRH outcomes and social status



Spontaneous Diffusion of the TESFA Innovation via Girls' and SAA Groups

Finally, girls' and SAA groups both reported that components of the model were not only sustained but diffused to other parts of their communities: 58.8 % of girls' groups in Farta and 42.8 % of girls' groups in Lay Gayint spontaneously diffused the model, thus disseminating both the TESFA approach and its outcomes to non-TESFA participants. This was achieved in two ways: 1) Auto-replicated groups: group resembling original TESFA girls' groups emerged, which are supported by TESFA original members, or 2) Sustained groups: original groups replaced members when they left the group due to various reasons. Below are tables showing the rate of diffusion in the original implementation kebeles.



Savings as a Norm: Sustained Economic Benefits

According to the respondents, the benefit from financial savings and income generating activities was the strongest reason for their sustaining the activities of the groups. Inspired by TESFA and their own group, girls created their own income generating activities; ranging from fattening cattle, poultry feeding, growing vegetables, and selling baked goods and coffee. Another frequently mentioned activity was to buy grains during times they were cheap in the market and then to sell it later in the year when prices increased.

Another transformative aspect of the project was that girls reported an increased financial independence because of their participation in a TESFA group. These gains were small, but important. For instance, girls reported being able to buy things for themselves, and having meaningful conversations with their husbands about spending, which were non-existent before TESFA.

Economic benefits were not limited only to the girls' groups: SAA groups also reported that their own savings-based benefits from TESFA. Notably, they told interviewers that "spending without planning is now considered 'old fashioned'." This new attitude was put into practice by SAA group members who referenced using community resources with forethought and minimizing unnecessary spending in their own households.

"Spending without planning is now considered 'old fashioned'."



Sexual & Reproductive Health & Rights Benefits

Another goal of the original TESFA project aimed to increase ever married girls' knowledge and skills related to sexual and reproductive health. Girls learned to differentiate between myths and facts regarding contraceptives. However, TESFA not only increased girls' knowledge about sexual and reproductive health, but also the skills, confidence and mobility necessary to gain access to health services. ►

► Girls reported that they have the sustained ability to discuss and jointly decide the use of contraceptives and desired number of children with their husbands. Husbands also confirmed joint decisions on the desired number of children and about spacing childbirth. Respondents also said TESFA has helped them better understand sexually transmitted diseases and their means of transmission.

Girls also mentioned their positive experiences of using antenatal care and delivery services at health facilities. Girls

are very much aware of the risks associated with home delivery and mentioned the risk of fistula as one of the potential threats of not having trained birth attendant at delivery. TESFA was mentioned repeatedly to have taught the girls about the risks of giving birth at home.

“...we benefitted from TESFA project a lot... TESFA girls help promote our tasks...they know very well about child care and family planning ... they serve as role-model.”

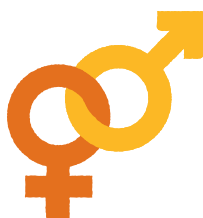
—HEALTH EXTENSION WORKER

Improved confidence, communication and negotiation skills and capacity to report to legal authorities also helped to prevent violence. Adults in the SAA groups confirmed that TESFA helped to substantially reduced violence against women as husbands and community now see married girls as “human beings” and “worthy members of society.”



Gender Transformative Changes

Girls' group participants reported that TESFA helped to “rediscover” the ever married girls whose voices had previously been missing in the community by providing a platform on which to be seen, enabling them to speak up with men and engage with the larger community.



Communities reported sustained transformative change happening at the individual, family, and community levels. The study found that the sustained and meaningful changes were due to the involvement of influential community members, like parents, health extension workers, religious leaders, and government officials, who mobilized support for girls and for the community at large. Study participants reported girls having sustained improvements in their ability to advocate for themselves and communicate their needs to their partners and their community. Members of the original TESFA girls and SAA groups and Health Extension workers reported that TESFA had resulted in sustained improvements for their own lives such as improved communication and negotiation skills, improved couple relationships and joint decision-making, and even sustained reduction in gender-based violence. The respondents also reported community-level, normative changes, such as expectations about early marriage and greater freedom of movement for women.

Next Steps: TESFA+

The Ex Post Evaluation gave insight into the essential elements of sustained and meaningful impact on ever married girls and their communities. The auto-replication of girls' groups after TESFA was an unplanned but promising component of the original project. Studies show that this type of participatory, community-initiated norms change naturally leads to innovation, sustainability, and participation.³ **To meet girls' and communities' articulated needs while utilizing their strengths, TESFA+ will first build on the findings of the Ex-Post Evaluation to investigate how to successfully reach more ever married girls with the TESFA model, including exploration and documentation of facilitators, barriers to auto-replication and complementary pathways to scale.** With this additional understanding, CARE will work with communities to design a scalable model that builds on the essential components of the initial program to explore girls' own improvements and capitalize on innovative avenues for impact.

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Notes

1. <https://www.girlsnotbrides.org/child-marriage/ethiopia/>
2. Edmeades, J. and Hayes, R. Evaluation Report for the TESFA Project, 2014. Accessed at: http://www.careevaluation.org/Evaluations/TESFA_Evaluation%20Report.pdf
3. Shediak, Rizkallah, and Bone (1998)