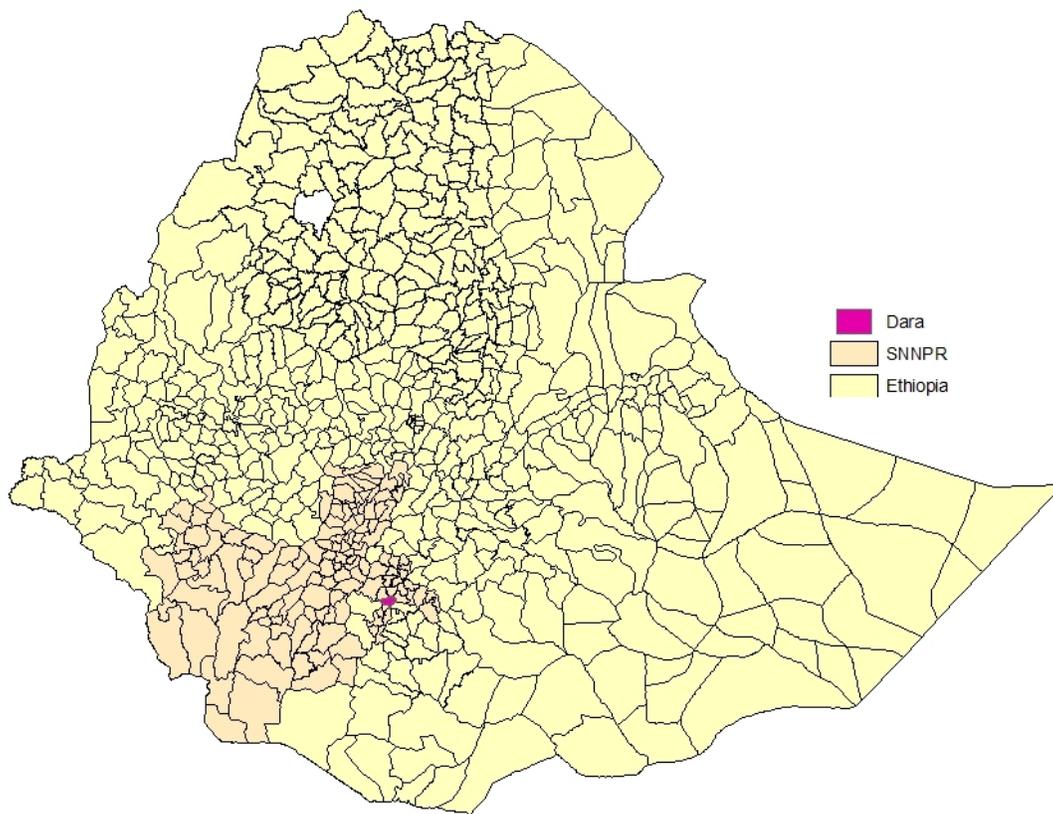


## **Rainwater Harvesting in Health Centers in SNNPR, Ethiopia**

### **Progress Report 2**



**Project Sponsor:** Ceil & Michael E. Pulitzer Foundation Inc.  
**Principal Investigator:** Paulina Concha Larrauri  
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Period covered: September 1, 2017 – December 31, 2017  
January 31, 2018

## Executive Summary

This report covers the activities executed after the recommendation to change the scope of the original project was submitted (report from July 2017). During this time, a new support intern was hired (Jeremy Lakin) as our colleague Henok Girma Begashaw moved back to Ethiopia. A survey was developed and applied to document the conditions of all the existing rainwater harvesting (RWH) systems in health centers (HCs) and health posts (HPs) in Dara Woreda. An application for the HCs/HPs was developed to apply for repairs and training of their systems, which was reviewed by the legal department at Columbia University and is currently being translated to Amharic. Estimates of the costs of the repairs were obtained from a local contractor and meetings were held with potential partners such as South Ethiopia Peoples Development Association (SEPDA), TOCID Ethiopia, and Plan International. We are currently outlining the agreement and project budget with SEPDA and TOCID, and a final partner decision will be issued in February 2018.

Six health centers and health posts were identified as potential beneficiaries of RWH repairs. The application for the repairs, approved by the legal department at Columbia University, will be distributed to the health centers and health posts at the beginning of February 2018. Discussions with the potential partners have advanced, and due to the size of the project and budget we recommend partnering with either SEPDA or TOCID Ethiopia. The recipients will be selected in the dates stated below, and the repairs and training are scheduled to take place in the second half of 2018 (depending on when the agreements with the local partners are finalized). At the moment, we are concerned with the current devaluation of the Ethiopian Birr and the impact it may have on the execution of the project and our budget. Therefore, we will include different projections in the budget.

## Objectives

1. Gather information about the current conditions of RWH systems at HCs/HPs located in Dara Woreda, SNNPR, Ethiopia.
2. Develop an application so that HCs/HPs can apply for the RWH repairs and training.
3. Finalize the change of scope including a revision of the original budget.
4. Consolidate the team members including the local partner.
5. Initiate planning for repairs, training, and monitoring.

## Observations, conclusions and recommendations

1. **Survey.** Two health centers with existing RWH systems were identified and surveyed, in addition to the four HCs/HPs visited in June 2017. The new health facilities surveyed were the Abera Dokko Health Center and Michesho Getar Health Post; both of the RWH systems at these locations need to be repaired/maintained. A summary of all the information related to the characteristics and state of the RWH systems at the six HCs/HPs is included in Attachment I. This summary includes data on their existing water sources, costs, and demand. The health centers and health posts were classified based on their access to water from a central supply, and we will prioritize those who have no connectivity as detailed in Table 1. below.

**Table 1.** Classification of health centers and health posts according to water connectivity

Classification	Name of HC/HP
Good connection to a central system	Kebado Hospital
Connection to a central system but with unreliable service	Tafarikela Health Center, Abera Dokko Health Center
No connection to a central system	Health Center Banko Markose Health Center, Odola Health Center, Saffa Health Post, Michesho Getar Health Post

- Application for repair.** As stated in the first report (July 2017), the surveyed HCs/HPs participating in the project will have to submit an application for funding in order to qualify for repairs and maintenance of the RWH systems and related training. The application considers a shared cost of at least 10% (can be done in kind/labor) and stipulates that two representatives from the HCs/HPs will have to commit to attending a 1-day training with no per diem. The application was developed considering the local reality and is being translated into Amharic. The application format was reviewed and approved by the legal department at Columbia to ensure compliance with all the internal requirements and a copy is included in Attachment II.
- Change of scope.** A formal change of scope is being submitted with this project report and includes a projection of the activities that need to take place in the remaining duration of the project. It is important to note that a request to approve a new budget is included, as the original scope considered only the installation of a RWH system at one location, and the new scope aims to repair as many RWH systems as possible in HCs/HPs at Dara Woreda. Additionally, the costs associated with the local partner, which needed to comply with local regulations, were not accurately considered in the initial budget. The draft budgets shared by TOCCID and SEPDA are enclosed.
- Team.** Jeremy Lakin joined the CWC team once Henok Begashaw returned to Ethiopia. Alyssa Shumaker (based in NYC) and Mileyan Sahilu (based in Dara Woreda) remain on the team. In terms of local partnerships, we spoke with Berhanu Tunsisa from Plan International, who recommended discussing a collaboration with smaller NGOs such as SEPDA and TOCID Ethiopia (and kindly provided the contacts), due to the size of the budget and the reach of this project. We also agree that investing in a more local partnership is key to project sustainability and builds community capacity. We will confirm the final partner in the beginning of February 2018. The formal kick-off of the repairs will have to wait until all legal agreements are finalized between Columbia University and the selected partner.
- Next Steps.** The applications for repairs will be distributed at the HCs/HPs in February 2018. Once the applications are returned, the team will define which centers will be awarded a repair, contingent on Health Center completion of the one-day training and further document requirements. The construction work, training, and development of further document requirements, including management plans, are expected to occur in the Spring-Summer of 2018, depending on how quickly the agreement with the partner is finalized.