

Evaluation of the FUTURES project

Baseline Report

April 2022







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Data for Impact

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Cover

A coffee-based livelihood in Ali Kebele, Yayu Coffee Forest Biosphere Reserve, Ethiopia. Derresa Bulcha, Jimma University.

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Abbreviations

D4I	Data for Impact
ECFF	Environment and Coffee Forest Forum
FGD	focus group discussion
FTP	File Transfer Protocol
FUTURES	FUTURES—My forest, my livelihood, my family
II	informational interview
IRB	institutional review board
KYRHDO	Kulich Youth Reproductive Health and Development Organization
MEL	monitoring, evaluation, and learning
ODA	Oromia Development Association
ODK	Open Data Kit
PFM	participatory forest management
PSPP	policy, strategy, program, or project
RH	reproductive health
SDG	Sustainable Development Goal
UNC	University of North Carolina at Chapel Hill
USAID	U.S. Agency for International Development
V/YSLA	Village/Youth Savings and Loans Association
YCFBR	Yayu Coffee Forest Biosphere Reserve
YFHS	youth-friendly health services

Executive Summary

Background

The FUTURES—My Forest, My Livelihood, My Family program (FUTURES) serves communities in the Yayu Coffee Forest Biosphere Reserve (YCFBR) located in Southwestern Ethiopia, in Oromia Regional State. The YCFBR encompasses the Hurumu, Yayo, Bilo Nopa, Alge-Sachi, and Doreni woredas of Illu-Abba Bora zone and Chora woreda of Buno Bedele zone and includes protected forest area as well as designated areas for economic activities like coffee and spice production, commercial forest plantations and eco-tourism, and areas where many traditional and modern agricultural practices take place.

Households in the area depend on a combination of small-scale agricultural and forest management systems dominated by traditional agronomic practices and characterized by a lack of crop diversity and low productivity. Deforestation, degradation, and increased loss of biodiversity are major concerns for sustainable agricultural and livelihood practice in the region. Social, gender, and cultural barriers have historically limited women's and youth's engagement in agricultural and economic sectors. High rates of early and forced marriage, and limited availability of reproductive health and family planning services, especially youth-friendly services, may further limit women and youth from participating meaningfully in agricultural practice and livelihood generation. Government services and local civil society organizations in the area operate at a limited capacity, and their offices are male-dominated and do not meaningfully incorporate a gendered approach to their work (Gebrehanna and Seyoum, 2020).

The three-year FUTURES project was launched in April 2021 to address many of the health, environment, and livelihood concerns of the YCFBR region. The project is implemented by CARE Ethiopia and its three local partners, Oromia Development Association (ODA), Environment and Coffee Forest Forum (ECFF), and Kulich Youth Reproductive Health and Development Organization (KYRHDO). The FUTURES project evaluation, funded by USAID, and led by Data for Impact (D4I), aims to understand the impact of the FUTURES project on key health, agricultural, and livelihood and conservation behavioral outcomes, and to contribute to knowledge about the implementation of cross-sectoral programs, including monitoring, evaluations, and learning (MEL) of such programs.

Evaluation Aim and Objectives

The main development hypothesis that this evaluation aims to address is that integrating a health, livelihood, and environmental programming approach will lead to broader and more sustainable improvements than implementation of single-sector approaches. The evaluation of FUTURES will seek to answer questions related to the impact of FUTURES on key reproductive health, agricultural, and livelihood behavioral outcomes and the extent to which the FUTURES project contributes to the improvement of youth-friendly health services, the strengthening of small-scale agriculture and forest management systems, the strengthening of multistakeholder partnerships, and the empowerment of women and youth. Furthermore, the evaluation approach will seek to contribute to what is known about the process of implementing cross-sectoral programs.

Main Exposure and Outcomes

FUTURES project activities are designed to target the economy, agriculture, and reproductive health sectors simultaneously, while working across household, community, and institutional levels, with a focus on women and youth. Project activities include health provider training, improved referral linkages, and household and community education to reduce stigma to accessing reproductive health services; support for youth savings and loan programs, entrepreneurship training for women and youth, diversified livelihood schemes, and climate smart agriculture; as well as the formation and strengthening of multisectoral steering committees and increased mechanisms for knowledge sharing and generation among sectors.

Methods

Nineteen kebeles from 23 full-project intervention kebeles were randomly selected for the baseline. Nineteen kebeles from three non-intervention woredas in the Yayu biosphere were then selected as the comparison area.

Quantitative data were collected November-December of 2021 through household surveys with 1,113 women ages 15-49 and 37 family planning provider surveys in both intervention and comparison areas. The household surveys collected data about individual and household sociodemographics, knowledge, attitudes, and behaviors related to family planning, agriculture, livelihood and forest conservation practices, as well as measures of agency, gender norms, and gender equity. Health provider surveys collected data on the availability and quality of reproductive health services, including youth friendly services. Data were collected by gender-matched trained data collectors in Afan Oromo using tablets. Data were stored on a secure File Transfer Protocol server at Jimma University and UNC. Analyses were conducted in Stata version 16 and included sample weights and adjustments for the multistage sampling design.

Qualitative data were collected using the Sustainable Development Goal Analysis Grid (SDGAG) through four Woreda-level focus group discussions (FGD) with participants representing a variety of development sectors from two intervention and two comparison woredas. FGDs were led by experts from Jimma University and collected data on social, ecological, economic, cultural, ethical and governance dimensions of sustainable development. Scores were recorded in an Excel-based tool and triangulated with descriptions of the discussion.

Ten informational interviews were also conducted with natural resource management development workers in kebeles with active forest managements groups. Numeric information collected from the interviews was summarized and themes were analyzed by topics of interest for evaluation purposes.

Results

Women's interviews

Almost half of respondents were ages 15-29 years old (48.9%) and most were currently married or in union (94.6%) and had at least one child (93.0%). Two-thirds of respondents had attended any formal education (66.7%), though only 38.9 percent of respondents were able to fully read sample sentences provided by the interviewers. The 1,113 women interviewed recorded a total of 5,348

household members, and an average household size of 4.8. Households in the intervention area were significantly more likely to be food secure (47.5%) than comparison areas (34.5%). However, approximately one in five households in the intervention area reported being severely food insecure. Most women (85.6%) reported being employed during the previous year, usually by a family member. Most respondents owned their home either alone (54.0%) or jointly (34.7%). Almost 32 percent of the women surveyed had access to banking, while only 16.2 percent had access to credit in the last year.

Nearly all interviewed women knew of a place to obtain family planning services (95.4%), and 75.2 percent reported they were currently using some form of family planning. Respondents from the intervention area had more positive perceptions of the quality of care at health posts than did respondents from the comparison area. Most respondents in both intervention and comparison areas strongly disagreed that it is acceptable for unmarried adolescents to be sexually active (74.4% and 74.0%, respectively), yet 33.6% of respondents agreed or strongly agreed that it is acceptable for unmarried adolescents to use contraception.

About 10% of interviewed households were members of a Participatory Forest Management (PFM), and of these, only 7.7% held a leadership position. Among non-participants, the most common reason for not participating in PFM was that there was none in their area. The most common conservation practices applied in the 12 months prior to the survey were fertilizer microdosing, row planting, and improved seeds. The least commonly known practices were climate smart agriculture, agro-forestry, and integrated pest management. A small number of households (n=290) had received training on any of these practices during the past 12 months, mainly from the ministry of agriculture. Households in the intervention area were more likely to have received the ministry of agriculture trainings than those in the comparison area (27.5% vs 18.7%). Of the crops that were grown, households were most likely to consume these products (61.9%) or to consume some/sell some (33.5%); very little was produced only for the market (4.6%). Households in the intervention area were closer to the forest boundary than households in the comparison area.

Household participation in community groups was highest for forest user groups (39.0%) and soil and water conservation/watershed management campaigns (38.8%). Households in the intervention area had significantly higher membership in youth associations or self-help groups (10.0% compared to 6.5%). In general, household members in the intervention area were more often in leadership positions in the community groups than were households in comparison areas; leadership was highest for village leadership committees and forest user groups.

Provider interviews

Most family planning providers interviews were female (84%) and were health extension workers (62.0%). Almost two-thirds reported that they did not provide youth-friendly health services, and only 30.0 percent had received YFHS training within the last two years. The majority of surveyed facilities used some form of feedback mechanism to help ensure quality service provision (86.5%). Most facilities tracked family planning referrals (81.1%), most commonly by referral slips (80%). Methods provided on site included oral contraceptives, injectables, condoms, and implants. Half of facilities provided services to survivors of gender-based violence (54.1%), and even fewer provided case management services (35.1%). Fees for family planning services were not common

in the intervention area. In terms of services for adolescents, most facilities (83.8%) reported additional practices to maintain the privacy and confidentiality of youth clients, including offering separate hours (54.1%), separate counseling or examination rooms (45.9%), or separate waiting rooms (13.5%). Most providers felt that it is unacceptable for unmarried adolescents to be sexually active (89.2%), however, the majority also felt that it was acceptable for unmarried adolescents to use contraception (89.2%). Most providers stated they would provide a method to a client who has not had any children (91.9%) or was unmarried (91.8%).

Sustainable Development Goal Analysis Grid

Participants of FGDs assessed the performance of social, ecological, economic, cultural, ethical, and governance dimensions to be "satisfactory" or "excellent" in both intervention and comparison woredas. Discussions revealed opportunities for growth including ecosystem management, protection of biodiversity, and innovative approaches for governance. Participants also noted cultural beliefs about the social value of the unequal roles and status relationships of men and women as a major challenge to women's and girl's empowerment.

Informational interviews

Among the 38 kebeles included in the study, only 10 were identified to have active forest management groups at the time of data collection. Four kebeles in the intervention area each reported three active PFM with a total of 121 individuals, including 21% women and 10% youth participants. Women had PFM leadership positions in three of the four kebeles and PFMs varied in their level of functionality. The informants from three of four kebeles agreed that the groups needed to be strengthened to mitigate biodiversity loss, forest degradation and deforestation, and that local government support for these efforts needed to be strengthened.

Six kebeles in the comparison area reported active PFMs, with three is each of the six kebeles and all groups included at least one woman and youth as stakeholders and in leadership positions. Informants in the comparison area kebeles felt the functioning of PFMs could be improved with additional members, additional trainings, and better coordination between government and NGOs.

Discussion

Baseline data showed similarity between the intervention and comparison areas across individual and household characteristics. However, some important differences were noted, such as households in the intervention area were closer to the forest boundary, more likely to be food secure, and more likely to obtain family planning services at a health post rather than a health center (and have positive attitudes about the quality of care at health posts) than were households in the comparison area. Household members in the intervention area were also less likely to have received training in biodiversity conservation, yet more likely to have had life skills training for female household members ages 16-19.

Baseline data also show fairly high levels across outcome areas of family planning utilization, livelihood opportunities for women and youth, and improved forest conservation practices. Exceptions to this are the percentage of women actively using of financial services; participation in PFMs; and the application of various improved crop production practices, technologies, and inputs. Additionally, a low percentage of family planning providers had received recent YFHS training.

Evaluation Purpose

The FUTURES Project is an integrated family planning and reproductive health, agriculture, livelihoods, and conservation project in southwestern Ethiopia. The project, funded by the Packard Foundation, was launched in April 2021. The U.S. Agency for International Development (USAID)/Global Health Bureau/Office Population and Reproductive Health, through Data for Impact (D4I), supports a comprehensive, mixed methods, prospective evaluation of the project.

The evaluation seeks to contribute to knowledge about the process of implementing cross-sectoral programs including which implementation and monitoring, evaluation, and learning (MEL) experiences are transferable to other cross-sectoral programs; what are enabling conditions for successful implementation of integrated programs; and how and to what extent did the implementing partners and government collaborate and coordinate to achieve desired family planning/reproductive health, agriculture, livelihoods, and conservation outcomes.

Results from the baseline data collection are shared in this report for the purposes of project management and knowledge sharing. It is anticipated that these results will be used by FUTURES to inform implementation and MEL activities. USAID, the Packard Foundation, Government of Ethiopia, and project implementers will use final results from the evaluation to make programmatic and policy decisions for future integrated family planning/reproductive health, environment, and livelihoods projects in southwestern Ethiopia and elsewhere.

Background

The Yayu Coffee Forest Biosphere Reserve (YCFBR) is in the Oromia Regional State of Southwestern Ethiopia. The Biosphere reserve encompasses the Hurumu, Yayo, Bilo Nopa, Alge-Sachi, and Doreni woredas of Illu-Abba Bora zone and Chora woreda of Buno Bedele zone. It is comprised of three parts: (1) the core, which is a protected forest area; (2) the buffer, in which certain economic activities such as coffee and spice production and forest uses, such commercial forest plantations and eco-tourism, are allowed; and (3) the transitional area, where many traditional and modern agricultural practices take place.

A technical report assessing the health and socio-economic status of Buno Bedele and Illu-Abba Bora zones was prepared for the Packard Foundation prior to the launch of the FUTURES project (Gebrehanna and Seyoum, 2020). The report highlighted the general poor quality and lack of available family planning and reproductive health services in and around the YCFBR, with high rates of early and forced marriage, limited method supply, and lack of quality youth-friendly services. The report also highlighted the social, gender, and cultural barriers to women's and youth's engagement in decisions and processes that affect their lives. Households in the area depend on a combination of small-scale agricultural and forest management systems dominated by traditional agronomic practices with low inputs, lack of crop diversity, and low productivity. Of equal concern are the rates of deforestation, degradation, and increased loss of biodiversity due to a combination of intensified forest coffee production coupled with poor management practices. Finally, there is limited capacity of government services and local civil society organizations operating in the area. Despite their ambition to embrace a transformative agenda, governance and development approaches remain top-down, and their offices are predominately male-dominated and do not meaningfully incorporate a gendered approach to their work.

The FUTURES project was developed to address many of the reproductive health, environment, and livelihood concerns of the YCFBR eco-region. The project is implemented by CARE Ethiopia and its three local partners, Oromia Development Association (ODA), Environment and Coffee Forest Forum (ECFF), and Kulich Youth Reproductive Health and Development Organization (KYRHDO). In collaboration with CARE Ethiopia, D4I provides technical support for the development and implementation of a monitoring, evaluation and learning system capable of producing high-quality information. As part of this work, D4I is conducting a mixed method evaluation of the FUTURES project to understand how the project affects family planning, livelihoods and conservation outcomes of women and youth in the area. The evaluation will also examine the process and value of the multi-sectoral integrated approach.

Program Description

The goal of the FUTURES project is to achieve sustainable forest biodiversity and improved reproductive health and livelihoods of women and young people in the YCFBR. The integrated program focuses on mutually reinforcing short-term objectives representing the development sectors in which the FUTURES project will be working. These are: (1) improved family planning/reproductive health access and use for women and young people, (2) improved livelihood opportunities for women and young people, (3) improved forest conservation practices, and (4) effective multi-sectoral partnerships for integrated programming and collective action developed and strengthened. The intervention activities are designed and are expected to contribute to more than one objective; the objectives themselves are mutually reinforcing.

The FUTURES project works in a total of 28 kebeles: 10 kebeles in Chora, 10 kebeles in Yayo (of which two will have family planning/reproductive health activities only, as the Nature and Biodiversity Conservation Union implemented a project related to forest conservation and community development in these two kebeles), and 8 kebeles in Dorani (of which three kebeles will only receive family planning/reproductive health activities from FUTURES). FUTURES is thus fully implemented in 23 kebeles and partially implemented in an additional five kebeles (family planning/reproductive health activities only).

The selected kebeles are:

CHORA	YAYO	DORANI
Abdallaa	Achibo	Didu
Bero Muri	Bondawo	Didu Haro
Chega	Gechi	Hodha Obo
Dabo Tobo	Jeme Shono	Machalee (Reji Sute)
Dalagsa	Kamise	Sibo
Dilbi	Leka	Batali Gebebcha*
Halelu Hadesa	Witate	Hena*
llala	Yambo	Warabo*
Kodo	Amuma*	
Sibo Nogo	Geri*	

*Family planning/reproductive health only

The kebeles were selected based on several criteria including the location vis a vis the Biosphere Reserve, availability of forest and biodiversity resources management, potential number of people benefiting from forest resources, avoidance of duplication from other projects, and accessibility by program staff, among others.

The target population for the FUTURES project are youth and adolescents ages 15–29, women and girls ages 15 and older, and men and boys ages 15 and older living in the selected kebeles, with a special focus on youth and adolescents ages 15–29. The combined total population of the intervention kebeles is approximately 112,613 of which 57,267 are females and 55,346 are males.

Main activities

Activities for FUTURES are conducted at three levels—household, community, and institution across project outcome areas and in an integrated fashion. Women and youth are central to activities conducted at the household level. Key activities for this level of intervention include the implementation of Village/Youth Savings and Loans Associations (V/YSLAs), provision of entrepreneurship trainings for women and youth, and outreach to families on smart agriculture, off-farm businesses, intra-familial dialogue on family planning/reproductive health issues and creating supportive and enabling home environments. Key activities at the community level include the training of health providers on youth-friendly service provision, conducting community dialogues, awareness raising events and the application of <u>Social Analysis and Action</u> groups and <u>Community Score Cards</u>, and promoting sustainable forest management and climate smart agriculture. Key activities at the institution level are related to multi-sectoral partnerships and governance, and include the formation of a multi-stakeholder steering committee linked to Social Analysis and Action groups, coordinating meetings, producing and disseminating learning materials, organizing learning events and policy dialogues, and supporting policy and legal frameworks related to family planning/reproductive health and forest conservation.

Theory of Change

The main goal of FUTURES is to improve health, including access to family planning/ reproductive health information and services, while also increasing communities' management of natural resources in ways that improve their livelihoods, reduce drivers of deforestation, and conserve the critical ecosystems they depend upon. In recognition of the important role that women play in enhancing human health and natural resource management, the program includes a gender-transformative approach in its design and implementation. This integrated approach responds to the multi-faceted challenges of rural, local communities and increases the capacity of local structures and systems to embrace integrated approaches.



Figure 1: Theory of change model

The FUTURES project theory of change reflects the multi-sectoral nature of the project goals, objectives, and interventions, intended to both enhance and benefit from the nature of multi-sectoral collaboration across reproductive health, economic opportunity, and agricultural practices. The goal of FUTURES is to achieve sustainable forest biodiversity and improved reproductive health and livelihoods of women and young people in the YCFBR through this multi-sectoral collaboration.

The FUTURES project will achieve its goal through mutually reinforcing and comprehensive project activities representing different development sectors. Project activities will strategically target household, community, and institutional levels, focusing on women and youth.

Evaluation Questions

The full evaluation of FUTURES will seek to answer the following questions:

- 1. What is the impact of the FUTURES project on key health, agricultural, and livelihood and conservation behavioral outcomes? Specifically, these outcomes include: access to and use of family planning services; use of modern contraception; access to and use of financial services, participation in economic decision-making and activities, adoption of improved livelihood practices to reduce climate-related shocks and stresses, and adoption of improved agricultural practices
- 2. To what extent did the FUTURES project contribute to the improvement of youth-friendly health services?
- 3. How and to what extent were small-scale agriculture and forest management systems strengthened due to the FUTURES project?
- 4. How and to what extent, were multi-stakeholder partnerships strengthened for integrated programming and collective action?
- 5. How and to what extent did gender-related norms play a role in program effects? Did the program reduce power differences in relations between men and women? In what ways does the integrated approach contribute to empowering women and youth?
- 6. How can FUTURES contribute to the process of implementing cross-sectoral programs? What implementation and monitoring, evaluation, and learning (MEL) experiences are transferable to other cross-sectoral programs? Answering these questions may include identifying the enabling conditions for successful implementation of integrated programs.
- 7. How and to what extent did the implementing partners and government collaborate and coordinate to achieve desired family planning/reproductive health, agriculture, livelihoods and conservation outcomes? What factors facilitated or hindered collaboration and coordination? What are the most critical coordination/collaboration points?
- 8. How do communities view and understand integrated programs, including the acceptability of the project activities?

The evaluation is designed to be a quasi-experimental mixed-method design that will synthesize quantitative and qualitative data to address the evaluation questions. Data collection and analysis are planned at baseline (2021), mid-term (2023), and end line (date to be determined). This report presents results from the baseline data collection.

Methods

Quantitative baseline data were collected for evaluation questions one, two, and five, which focus on family planning, financial and livelihood, and agricultural practices. Qualitative data were collected as part of a Sustainable Development Goal Analysis Grid (Villeneuve et al., 2017), providing information for questions three and four.

The baseline data collection effort included the following activities:

1. A household survey was conducted with women ages 15–49 living in the intervention and comparison areas. The interviews collected data on socio-demographics, knowledge and behaviors related to family planning, agriculture, and livelihood and conservation practices for themselves and members of their household. The survey also included measures of agency,

gender equitable relations and norms, and structural barriers to gender equity for economic resources.

- 2. A health provider survey was conducted with family planning providers in health posts and health centers serving the intervention and comparison areas. The interviews collected data on the degree to which services are youth friendly, including practices related to confidentiality, respectful care, staff training, financial barriers to care, and availability of services for youth.
- 3. A Sustainable Development Goal Analysis Grid (SDGAG) was implemented using focus group discussions (FGD) with representatives of different sectors, including: health, agriculture and natural resources, environment, forest and climate change, education, finance and economic development, women and youth affairs, job creation and professional development, and credit and saving associations. The administration office of the respective woredas also took part in the assessment. The discussion took place in two intervention woredas, Chora and Yayo, and two comparison woredas, Bilo Nopa and Hurumu. The discussion collected data on the key dimension of sustainable development goals: social, ecological, economic, cultural, ethical and governance.
- 4. Informational interviews (IIs) were conducted with natural resource development agents. The interviews collected data on the functionality of the PFM, inclusion of women and youth in the PFM groups as stakeholders, leadership roles of women and youth in PFM, current capacity of PFM, capacity of local government, and key stakeholder's participation in multisectoral partnership.

English versions of the tools for the baseline data collection are shown in <u>Appendix 1</u>.

Study sample

The quasi-experimental design will compare individual and household characteristics, practices, knowledge, and attitudes in the intervention area against those of individuals and households in a non-intervention area. Nineteen kebeles from the 23 full-project intervention kebeles were randomly selected for the baseline. Nineteen kebeles from three non-intervention woredas in the Yayu biosphere were then selected as comparison kebeles. Nineteen kebeles were selected with the assumption that including an average of 30 households per kebele would be more than sufficient to reach the total sample—557 for each category. Using data on the number of kebeles per woreda and the number of households per kebele, the study kebeles and households were selected using probability proportional to size. Information on agroecology, agricultural production, infrastructure, and/or health service use, was not available for use to aid in the selection of the comparison kebeles. Some kebeles have alternate names and spellings, depending on language; these are noted below.

The kebeles selected for the study are:

Intervention area: Kebeles in Chora are Deleksa, Dilbi, Sibo Nogo, Chega, Abdallaa, Bero Muri, Halelu Hadesa, and Dapo Tobo; kebeles in Doreni are Didu, Hoda Obo, Didu Haro, and Sibo; and kebeles in Yayu are Yembo, Witate, Leka, Achebo, Jemena Shono, Bondawo, and Kemise.

Comparison area: Kebeles in Alge Sachi are Algesachi Town, Hanamogu, Yagere Buno, Sibonagenji, Iriyo, Sanbeto, Suphe Town (aka Supe 01), Doyo Chekorsa (aka Chokorsa Dayu), and Aliasendabo (aka Ali); kebeles in Bilo Nopa are Maru Chage, Maru Ekele, Karo Mariyam (L/A/Bona), Jeto, Dizi (aka Semano); and kebeles in Hurumu are Keresi, Sonta, Hurumu Town, Toma Yobi, and Inetaro.

Figure 2: Map of sampled kebeles



Once kebeles were selected, lists of the kebeles with their respective population or household size were obtained. The cumulative populations of the kebeles were computed to calculate the sampling interval and determine a random starting number between 1 and the sampling interval (inclusive). Beginning with the random number, interview households were identified using the sampling interval at each kebele. The kebeles were first divided into a manageable size of households using the already existing structure (defined as "gots"). On average, there were three gots per kebele. Then, the "reference household" was identified. Interviews were then conducted in the nearest household by walking distance to the reference household and continued until the final required sample was completed (approximately 30 per kebele). From each selected household, eligible study participants were registered and one respondent among reproductive-aged women (heads of household or married to head-of-household) was selected for interview. In households where eligible respondents were not identified, data collectors moved to the next nearest household. In total, there were seven refusals to participate, one household with unsuccessful recruitment after three visits, and one household with no eligible women. Data were

weighted for the assessment to correct for potential selection bias introduced by the sampling design.

Ethiopia's health service delivery is structured into a three-tier system: primary, secondary, and tertiary levels of care. The primary level consists of health posts and health centers. The health post is the most peripheral unit, providing mainly preventive care and selected curative services for 3,000-5,000 people in a woreda. It is a two-room structure and is the first level for the provision of healthcare for the community, emphasizing preventive and promotive care. A health center is a referral center for health posts and provides promotive, preventive, curative, and rehabilitative outpatient care including basic laboratory and pharmacy services. Five health posts and a health center work in collaboration and form the primary health care units that serve 15,000–25,000 people in a woreda. All health posts and health centers in the intervention and comparison areas were eligible for inclusion in the sample. One family planning service provider was selected for an interview from each sampled health facility. Selection was determined by: (1) status as current provider of family planning services and (2) availability for interview. If more than two providers met these criteria at a health facility, one provider was randomly selected from among those eligible. The completed sample includes 37 health facilities (9 health centers and 28 health posts). Four kebeles (Aliasendabo, Hoda Obo, Jeto, and Karo Mariyam) did not have health provider information and no extension workers were available for interview.

Four woreda level FGDs were conducted using an adaption of the SDGAG developed by Villeneuve and colleagues (2017). The two intervention woredas randomly selected for inclusion were Chora and Yayo, and the two comparison area woredas were Bilo Nopa and Hurumu. Heads of sectors at the woreda level participated in the FGDs. The participants were selected based on: (1) their sector is represented in the FUTURES steering committee, and (2) their expected sectoral knowledge of the status of the YCFBR.

IIs were conducted with development workers who focus on natural resource management in the kebeles with active forest management groups. From the 38 kebeles in the sample area, only 10 kebeles had active forest management groups at the time of data collection.

Ethical approval

Human subject review of the baseline study protocol and survey data collection instruments was obtained from the UNC-Chapel Hill Institutional Review Board (Study #21-2143, October 14, 2021) and the Jimma University College of Agriculture and Veterinary Medicine Research Ethical Review Board (Ref. No. R/GS/S22/2021, October 22, 2021) and the Faculty of Public Health Ethical Review Board (Ref. No IHRPG 1/2021, November 26, 2021) prior to data collection.

Data collection training and field work

The survey tools were developed in English and translated into Afan Oromo. The tools were programmed into ODK (Open Data Kit) for use by tablets and phones. The study team reviewed multiple iterations of the tools prior to the training workshop. Training for data collectors was held at Jimma University College of Agriculture and Veterinary Medicine, Jimma, Ethiopia, November 24–27, 2021. Facilitators for the training included Drs. Mitiku and Hiruy and Mrs. Alemi Kebede. Seven males and fourteen females participated in the workshop. Participants were

selected for the training based on their availability for the training and data collection, their prior experience with survey data collection, and their motivation to collect data using ODK. Also, given that the respondents of household interviews would be women, female data collectors were primarily preferred. Some of the training participants had completed a Master of Science degree and were teaching at Jimma University or Metu University, and some were current Master of Science students at Jimma University who have completed course work and are preparing themselves for thesis work. Topics covered during the training included the study overview, survey content, treatment of human subjects, interview techniques, COVID-19 safety protocols, and an in-depth review of the study tools in both languages. Pilot testing of the survey tools occurred on November 29, 2021, within the biosphere reserve, in one kebele of Chora woreda selected based on accessibility, proximity and similarity to the actual study area. The pilot was followed with a debriefing meeting and minor corrections to the tools. Data from the pilot were not included in the final dataset.

The fieldwork occurred November 30–December 12, 2021. The data collectors moved house to house and interviewed the respondent women at private places around their respective houses. The women's survey questionnaire took on average about an hour to complete. Provider interviews were conducted at health facilities, health posts, and centers; those interviews lasted about 30 minutes on average. The FGDs were conducted mostly at the office of deputy woreda administrators and lasted for about two hours. The FGD participants were consistent across intervention and comparison woredas except in the area of credit and saving associations, which was only included in Chora woreda, and in the absence of a representative from environment, forest and climate change in Yayo woreda. The IIs were mainly conducted at kebele centers, however, phone interviews were also used whenever the respondents were not physically accessible. The IIs lasted an average of 20 minutes.

The surveys were implemented by 20 data collectors (14 females and 6 males), including four supervisors and one coordinator. Research supervisors ensured the quality of the data collection process, the safety and maintenance of tablets and phones, consent/assent, and COVID-19 safety protocols. Simultaneous data quality checks were completed through the transferal of data using a secure File Transfer Protocol (FTP), in keeping with approved data security requirements. After data collection, tablets were checked for completeness of data delivery and cleared of all survey data. Data were stored on a secure FTP server at Jimma University and UNC. Informational interviews were conducted by survey coordinators whereas the FGDs were conducted by the principal investigator together with other experts at Jimma University.

Analysis

Descriptive statistics of the women and providers interviewed are presented in tables. Statistical differences (p<0.05) between the intervention and comparison areas are indicated for the women's statistics. The report presents gender and sex disaggregated descriptive statistics as appropriate. The following measures were constructed:

Wealth index: This index was constructed to measure the relative economic status of households using a principal component analysis method (Rutstein, 2000). The variables included were housing material (type of roof), access to utilities (water source, type of fuel, electric

power), ownership of household assists (radio, TV, telephone, PC, refrigerator, table, char, bed, electric stove, kerosine lamb, watch, mobile phone), number of farm animals (cattle, camel, goat, sheep, chicken, beehive), ownership of transportation means (animal cart, bicycle, motorcycle, cart Bajaj and car or truck) and size of agricultural land owned. Using these variables households were divided into five wealth quintiles – lowest, second, middle, fourth and highest.

Household Food Insecurity Access Scale (HFIAS) Prevalence: Version 3 of the HFIAS guide was used to develop food insecurity indicators (Coates, Swindale, Bilinsky, 2007). Briefly, nine questions measuring the occurrence of food insecurity and frequency of occurrence were presented to the respondents. The occurrence questions were recoded as yes or no response, while the frequency-of-occurrence were captured as rarely (once or twice), sometimes (three to ten times), or often (more than ten times) in the past four weeks. Using these responses, households were categorized into four levels of food insecurity namely food secure, mild food insecure, moderate food insecure and severe food insecure.

Household Food Insecurity Access-related Domains: These indicators provide summary information on the prevalence of households experiencing one or more behaviors in each of the three domains reflected in the HFIAS—Anxiety and uncertainty, Insufficient quality, and Insufficient food intake and its physical consequences. The indicator includes percent of households that responded "yes" to any of the conditions in a specific domain (Coates, Swindale, Bilinsky, 2007).

Household Food Insecurity Access-related Conditions: These indicators present the percent of households that responded affirmatively to each question, regardless of the frequency of the experience. They measure the percent of households experiencing the condition at any level of severity (Coates, Swindale, Bilinsky, 2007).

All analyses were conducted in Stata version 15 (Statcorp, 2015). Sample weights and adjustments for the multistage sampling design were used. Specifically, the "surveyset" command was used to account for the complex survey data. In doing so, strata were defined based on the project area (intervention vs. comparison), a finite population correction was applied for the selection of kebele and household, and weights were used to account for unequal probability of selection. Weight was calculated as the inverse of the probability of selection of a household, which was normalized by dividing it by the mean weight.

Percentage and mean values were used to compare baseline characteristics between intervention and comparison areas. All tables showing this comparisons were generated using the "*tabout*" stata program (Watson, 2019). The program accounted for the complex survey data using the "*svy*" command.

The FGDs assessed the existing development situation of woredas and were used to generate empirical baseline data on the YCFBR from the perspectives of multiple sectors. The SDGAG was used to analyze the overall performance of the entire socio-ecological landscape of the YCFBR in accordance with six key dimensions of sustainable development, including the social, ecological, economic, cultural, ethical and governance. Participants were asked to discuss the performance of policies, strategies, programs and projects (PSPPs) in the woreda for each dimension, covering as many issues related to sustainable development in the Yayu biosphere as possible. The goals related to each dimension were weighted on a scale of one to three, with one being "desirable," two being "important," and three being "indispensable." Their performance levels were then assessed out of 100%. Scores were recorded in an Excel-based tool. The grid used for the analysis is shown in Appendix 1c. Ratings from respondents are presented in tables using the percentage weights and triangulated with descriptions of the discussion.

Graphical representations of the performance ratings of each dimension were automatically generated in the analysis grid. This output of the assessment is used to provide a visual representation of the analysis results in tables and the radar charts, which gives the opportunity to participants to know the performance status of YCFBR in terms of the six dimensions. The chart shows the assessment as a weighted average percentage for the ethical, ecological, social, economic, cultural, and governance dimensions.

Numeric information collected from the IIs was summarized in a table. Themes were analyzed using the investigation topics of interest. Study personnel first read and familiarized themselves with the details of the conversation notes and then identified and summarized information relating to the themes.

Findings

Women's interviews

Characteristics of women of reproductive age

Interview data was collected from 555 women in the intervention area and 558 women in the comparison area, for a total of 1,113 women providing interview data for the baseline survey. Socio-demographic characteristics of these respondents are shown in Table 1. Overall, 48.9 percent of respondents were age 29 or younger, 36.4 percent were ages 30–39, and 14.8 percent were age 40 or older. The respondents in the intervention area were slightly more likely to be younger than 35, in contrast to the respondents in the comparison area, who were slightly more likely to be older than 35. As a likely result of sampling the female heads-of-household, most respondents were currently married or in union (94.6%) and had at least one child (93.0%). Respondents in the intervention area were more likely to be currently pregnant than respondents in the comparison area (21.4% vs. 16.5%). Two-thirds of respondents attended any formal education (66.7%); of these, respondents in the intervention area were less likely to have attended secondary school or higher than respondents in the comparison area (32.9% vs. 47.3%). On average, only 38.9 percent of respondents were able to fully read sample sentences provided by the interviewers. The respondents in the intervention area were more likely to be Muslim (66.4 vs. 38.3%%) while respondents in the comparison area were more likely to be Protestant (36.4% vs. 11.5%).

Table 1. Demographic characteristics of respondents

	Intervention	Intervention Comparison Total		_ Unweighted
Characteristic	%	%	%	number
Age groups				
15–19	4.0	3.3	3.4	40
20–24	20.8	18.9	19.4	221

	Intervention	Comparison	Total	Unweighted
Characteristic	%	%	%	number
25–29	30.1	24.8	26.1	304
30–34	15.6	14.9	15.1	170
35–39	16.7	22.8	21.3	* 221
40–44	7.2	8.9	8.5	90
45–49	5.6	6.5	6.3	67
Marital status				
Married/in union	93.6	94.9	94.6	1,049
Not currently married/in union	6.3	5.1	6.3	64
Mean number of children ever				
born	2.8	2.7	2.7	1,113
Number of children given birth to				
0	6.7	7.1	7.0	76
1–2	45.4	46.5	46.2	510
3–4	31.0	31.2	31.1	348
5+	17.0	15.2	15.6	179
Pregnant	21.4	16.5	17.6	50
Not pregnant	75.4	80.0	79.0	1,054
Don't Know	3.2	3.5	3.4	9
Attended any formal education				
Yes	64.7	67.3	66.7	735
No	35.3	32.7	33.3	378
Highest level of school attended (n=735)				
Primary	67.1	52.7	56.1	* 439
Secondary	25.1	33.7	31.7	* 217
Technical/vocational	2.2	6.9	5.8	* 34
Higher	5.6	6.7	6.4	45
Reading level				
Cannot read at all	44.1	42.2	42.6	479
Able to read only part of the				
sentence	20.6	17.7	18.4	214
Able to read whole sentence	35.0	40.1	38.9	418
Blind/visually impaired	0.4	0.0	0.1	2
Religion				
Orthodox	22.1	25	24.3	263
Muslim	66.4	38.3	45.1	* 579
Protestant	11.5	36.4	30.4	* 269
Other	0.0	0.2	0.1	2
N	555	558		1,113

Household characteristics

The 1,113 women interviewed recorded a total of 5,348 household members, and an average household size of 4.8. Approximately 62 percent of household members were under the age of 24, with the largest age group being under age 15 (39.9%). Approximately 13 percent of male household members over the age of 15 did not have any education, compared to 12% of female household members. Primary level education was the most common for males and females in the study area; the percentage with primary-level education was slightly higher in the intervention group (62.4% for males, 69.5% for females) than the comparison group (55.1% and 60.3%,

respectively). However, there was a higher percentage of household members with secondary or higher education in the comparison group as compared to the intervention group (though the difference is not statistically significant). (Tables 2 and 3)

	Intervention	Comparison	Total		Unweighted
Characteristic	%	%	%		number
Gender					
Male	48.5	51.1	50.4	*	2,663
Female	51.5	48.9	49.6		2,685
Age groups					
<15	43.1	38.8	39.9	*	2,187
15–19	11.1	12.4	12.1		631
20–24	9.4	10.1	9.9		523
25–29	10.7	10.3	10.4		562
30–49	23.3	25.7	25.1		1,311
50+	2.3	2.7	2.6		134
Ν	2,714	2,634			5,348
Average household size	4.9	4.7	4.8		1,113
Number of male youth 15–19					
0	79.4	76.2	77		864
1	16.5	18.9	18.3		199
2+	4.1	4.9	4.7		50
Number of male youth 20–24					
0	84.5	84.2	84.3		938
1	14.9	14	14.3		162
2+	0.5	1.7	1.5		13
Number of female youth 15–19					
0	76.2	74.9	75.2		840
1	19.1	20.9	20.4		223
2+	4.7	4.2	4.3		50
Number of female youth 20–24					
0	71.5	71.5	71.5		795
1	27.0	27.3	27.2		303
2+	1.5	1.3	1.3		15
Ν	555	558			1,113

Table 2. Household members

* p-value <0.05

	Intervention	Comparison	Total	Unweighted
	%	%	%	number
Male				
No formal education	14.2	12.9	13.2	295
Primary	62.4	55.1	56.8	1,289
Secondary	17.9	21.3	20.5	435
Technical/vocational	2.1	3.4	3.1	62
Higher	3.3	7.3	6.3	116
Ν	1,078	1,119		2,197

	Intervention	Comparison	Total	Unweighted
	%	%	%	number
Female				
No formal education	12.8	11.9	12.2	139
Primary	69.5	60.3	62.7	* 734
Secondary	14.4	21.4	19.6	203
Technical/vocational	1.4	2.5	2.2	22
Higher	1.9	3.8	3.3	31
Ν	593	536		1,129
Male Youth (15–24)				
No formal education	4.4	4.1	4.1	20
Primary	51.4	38.3	41.2	217
Secondary	35.7	41.7	40.4	193
Technical/vocational	3.1	7.1	6.2	26
Higher	5.4	8.9	8.1	35
Ν	229	262		491
Female Youth (15–24)				
No formal education	2.6	4.3	3.9	14
Primary	51.8	38.3	41.3	179
Secondary	38.1	43.5	42.3	166
Technical/vocational	3.1	4.7	4.4	16
Higher	4.3	9.2	8.1	27
Ν	191	211		402
Ν	2,091	2,128		4,219

A higher percentage of households in the intervention area were in the middle wealth category than in the comparison area, as a result, fewer households in the intervention area were in the highest wealth category (16.9% vs. 22.9%). Overall, less than five percent of households had any means of transportation, though motorcycle or scooter was most common (2.7%) among those that did. Most households in the study area had metal or corrugated iron for roofing material (91.4%), though having electricity was less common (27.8% and 33.2%, respectively). Most households also use wood as fuel for cooking (95%), with no difference between intervention or comparison areas (results not shown.) Ownership of common household effects was most common for a mobile phone (80.7%). Approximately 71.7 percent of households owned agricultural land, while slightly more (74.7%) owned farm animals (see Table 4).

Table 4. Household possessions

	Intervention	Comparison	Total	Unweighted
	%	%	%	number
Common household effects				
Radio	46.4	47.5	47.3	521
Television	12.6	24.8	21.8	210
Mobile phone	82.2	80.3	80.7	906
Watch	25.8	38.2	35.2	* 355
Ownership of agricultural land				
Yes	72.0	71.6	71.7	798
No	28.0	28.4	28.3	315

	Intervention	Comparison	Total	Unweighted
	%	%	%	number
Ownership of farm animals				
Yes	78.7	73.5	74.7	847
No	21.3	26.5	25.3	266
Wealth quintile				
Lowest	19.0	21.5	20.9	224
Second	20.9	19.2	19.6	222
Middle	23.1	16.8	18.3	222
Fourth	20.1	19.7	19.8	223
Highest	16.9	22.9	21.4	222
Ν	555	558		1,113

One area showing significant difference between households in the intervention and comparison areas was in food security. According to respondents, households in the intervention area were significantly more likely to be food secure (47.5%) than comparison areas (34.5%). However, approximately one in five households in the intervention area reported being severely food insecure (see Table 5).

	Intervention	Comparison	Tota	al	Unweighted
Household Food Insecurity Access Prevalence	%	%	%		number
Food secure	47.5	34.5	37.6	*	456
Mildly food insecure	10.3	11.0	10.8		119
Moderately food insecure	21.0	24.2	23.4		251
Severely food insecure	21.2	30.3	28.1	*	287
Household Food Insecurity Access-related Domains Household with anxiety and uncertainty about food supply	38.5	49.1	46.6	*	488
Households with insufficient food quality	48.8	63.7	60.1	*	626
Household with insufficient food intake	37.2	49.8	46.8	*	485
Household Food Insecurity Access-related Conditions					
Worry about food	38.5	49.1	46.6	*	488
Unable to eat preferred foods	41.2	55.1	51.8	*	536
Eat a limited variety of foods	36.9	53.9	49.8	*	505
Eat foods that you really did not want to eat	34.0	47.9	44.6	*	456
Eat a smaller meal	33.6	47.7	44.3	*	453
Eat fewer meals in a day	28.7	42.5	39.2	*	397
No food to eat of any kind in the household	18.2	25.8	24.0	*	245
Go to sleep at night hungry	13.0	16.0	15.3		161
Go a whole day and night without eating anything	9.9	8.8	9.1		104
Ν	555	558			1,113

Table 5. Household food insecurity

* p-value < 0.05

Approximately 60% of households experienced shocks or negative events during the 12 months prior to the survey. The most common shocks experienced included a significant rise in food prices (82.2%), the loss of livestock or poultry to disease or pests (29.7%), lower crop yield to drought (19.5%) and the disruption of farming or livestock (13.4%). Households in the intervention area were significantly more likely to experience the loss of livestock or poultry due to

disease or pests than households in the comparison areas (36.1% vs. 27.7%). The two most common responses to the shocks included reducing expenditures (20.0%) and relying on savings (19.6%). Very few households reported experiencing positive events in the 12 months prior to the survey including a new or regular job for a household member (9.8%) and new or increased remittances (6.6%). (Table found in Appendix 3.) Household participation in community groups was highest for forest user groups (39.0%) and soil and water conservation/watershed management campaigns (38.8%). Other common community groups included women's associations or self-help groups (33.8%), village leadership committees (20.6%), and cooperatives (20.2%). Households in the intervention area had significantly higher membership in youth associations or self-help groups (10.0% compared to 6.5%). Non-statistically significant differences were seen in membership in groups associated with FUTURES interventions, such as forest user groups¹ (33.4% vs. 40.7%), VSLAs (11.3% vs. 13.7%), and PFMs (11.8% vs. 9.7%), for the respective intervention and comparison areas. In general, household members in the intervention area were more often in leadership positions in the community groups than were households in comparison areas; leadership was highest for village leadership committees and forest user groups. Households with membership in PFMs were asked what services they had received from the groups. Most often households had received advice on sustainable forest management (46.5%). Other common services included training on harvesting of forest coffee (32.6%), training on biodiversity conservation (32.4%), and training on hanging beehives in trees (30.3%). Households in the intervention area were less likely to have received training on biodiversity conservation (15.1%) than households in the comparison area (39.1%) (see Table 6).

	Intervention	Comparison	Total		Unweighted
	%	%	%		number
Participation in:					
Cooperative	17.6	21.1	20.2		217
Micro and small enterprise (MSE)	5.6	6.3	6.1		67
Village leadership committee	23.2	19.8	20.6		240
Forest user group Soil and water conservation/	33.4	40.7	39.0	*	413
watershed management campaign	42.1	37.8	38.8		444
Women's association or self-help group	31.9	34.4	33.8		371
Village savings and loan association (VSLA)	11.3	13.7	13.2		141
Youth association or self-help group	10.0	6.5	7.3	*	93
Youth saving and loan association (YSLA)	3.4	2.3	2.6		32
Participatory forest management (PFM)	11.8	9.7	10.2		119
Ν	555	558			1,113
Among those who participated (n varies), percentage that held leadership position:					
Cooperative	19.6	16.5	17.1		38
Micro and small enterprise (MSE)	9.9	10.8	10.6		7
Village leadership committee	38.1	26.0	29.3		78
Forest user group	20.8	10.5	12.6		63

Table 6. Household participation in community groups

¹ Forest user groups are comprised of traditional forest users and members while PFMs tend to be well-planned and organized and are often project-supported groups. Not all forest user groups participate in PFMs. There is overlap between groups in some areas.

	Intervention	Comparison	Total	Unweighted
	%	%	%	number
Soil and water conservation / watershed management	14.9	9.4	10.8	55
Women's association or self-help group	19.0	15.5	16.3	64
Village savings and loan association (VSLA)	12.6	5.2	6.7	12
Youth association or youth self-help group	14.3	15.5	15.1	14
Youth saving and loan associations (count)	0	2	NA	2
Participatory Forest Management (PFM)	13.7	5.6	7.8	12
Services received from the PFM group (n=119)				
Advice on sustainable forest management	36.3	50.5	46.5	51
Training on how to harvest forest coffee	36.5	31.1	32.6	41
Training on how to hang beehives on trees Training on how to harvest spices and	21.2	33.9	30.3	32
medicines	1.5	9.4	7.2	6
Training on how to harvest timber	4.5	11.3	9.4	9
Training on biodiversity conservation	15.1	39.1	32.4	* 31

Women's livelihood

Women's employment characteristics are shown in Table 7. In this sample, 85.6 percent of respondents were employed (in "any type of work") during the preceding 12 months. Among the employed, women were most likely to be employed by a family member (88.8%). Most respondents worked seasonally or part of the year (68.3%). Respondents varied by whether they were paid in cash (17.3%), in cash and in-kind (17.2%), in-kind only (32.4%), or not paid at all (42.3%), though payment by cash was the least common. Approximately half of respondents reported earning less than their husbands (51.3%). Respondents in the intervention area were significantly more likely to report that their husbands were not earning any income (9.3%) compared to respondents in the comparison area (1.0%) (see Table 7).

	Intervention	Comparison	Total	Unweighted
	%	%	%	number
Employed in the 12 months preceding the survey				
Yes	86.5	85.3	85.6	956
No	13.5	14.7	14.4	157
Ν	555	558		1,113
Among employed:				
Type of employer				
Family member	88.8	83.0	84.5	821
Someone else	3.7	5.0	4.7	42
Self-employed	7.5	11.9	10.8	93
Continuity of employment				
Throughout the year	23.1	29.5	27.9	252
Seasonally/part of the year	75.2	66.1	68.3	675
Once in a while	1.7	4.5	3.8	29
Type of earnings				
Cash only	12.4	18.9	17.3	150
Cash and in-kind	12.9	18.5	17.2	150
In-kind only	32.4	22.8	25.2	263
Not paid	42.3	39.8	40.4	393

Table. 7 Respondent's employment characteristics

Ν	480	476			956
Woman's earnings relative to husband's earnings					
More than him	5.7	6.4	6.3		42
Less than him	45.9	52.9	51.3		337
About the same	26.4	29.0	28.4		188
Husband/partner has no earnings	9.3	1.0	2.9	*	34
Don't know	12.6	10.7	11.1		78
Ν	328	351			679

Women's access to resources is shown in Table 8. Approximately half of households in the study area reported owning their house alone, while 34.7 percent owned the home jointly with someone else, and 11.3 percent did not share in the ownership of the home. Almost 32 percent of the women surveyed had access to banking, while only 16.2 percent had access to credit in the last year. Among the women with access to credit, the most common sources were microfinance (53.1%) and cooperatives (23.9%). Very few women reported that they were refused credit, though this was more common in the intervention area (6.6%) than in the comparison area (3.2%). Almost eight in ten women had their name on land titles (77.3%). Life skills training for adolescent girls was twice as common in the intervention area (13.5%) than in the comparison area (6.1%).

Table 8. Access to resources

	Intervention	Comparison	Total	_ Unweighted
	%	%	%	number
Ownership of house				
Alone	56.6	53.2	54.0	608
Jointly	35.7	34.4	34.7	393
Do not own this house	7.7	12.4	11.3	112
Women have an account in a bank or other financial institution				
Yes	29.5	32.6	31.8	347
No	70.5	67.4	68.2	766
Have access to credit in the past 12 months				
Yes	14.4	16.8	16.2	175
No	85.6	83.2	83.8	938
Refused credit in the past 12 months				
Yes	6.6	3.2	4.0 *	55
No	93.4	96.8	96.0	1,058
Ν	555	558		1,113
Source of credit (among women with access to credit in the past 12 months, n=197)				
Microfinance	51.4	53.6	53.1	92
Bank	5.0	5.4	5.3	9
Cooperative	21.1	24.6	23.9	41
Local savings group	5.0	5.6	5.5	9
Traditional lender⁺	7.5	1.2	2.5	7
Other	10.0	9.6	9.7	17
Woman's name is on title/deed (among households owning land, n=798)				
Yes	75.7	77.8	77.3	612
No	24.3	22.2	22.7	186

Life skills training for women ages 16–19 (n= 565)				
Yes	13.5	6.1	8.1 *	57
No	86.5	93.9	91.9	508

* Traditional lenders are "iqub" and "idir" and lend money based on social ties with interest or free of interest.

Family planning

Nearly all interviewed women knew of a place to obtain family planning services (95.4%) (not shown in table). Women in the intervention area were more often visited by a health extension worker in the last 12 months than women in the comparison area (49.3% vs. 38.6%) and were also more likely to have discussed family planning with a health care worker (78.4% vs. 66.4%). Women in the intervention area were also more likely to be referred for family planning by a health extension worker (HEW) (11.7% vs. 7.2%, respectively). These results may reflect the initiation of FUTURES training and health promotion activities prior to the baseline survey. In both areas, the most common sources of family planning information were community events/conversations (45.9%), radio (39.8%), and television (22.8%) (see Table 9).

Table 9. Exposure to family planning

	Intervention	Comparison	Total	Unweighted
	%	%	%	number
Contacted by health care provider in the last 12				
months				
Visited by a health extension worker (HEW)				
Yes	49.3	38.6	41.1	489
No	50.7	61.4	58.9	624
Visited a health facility for self or children care				
Yes	76.6	76.1	76.2	851
No	23.4	23.9	23.8	262
Discussed family planning with provider (among those who contacted health care provider) (n=851)				
Yes	78.4	66.4	69.3 [°]	* 615
No	21.6	33.6	30.7	236
Referred by (n=851)				
Self	64.2	74.0	71.6	* 588
Husband/ partner	23.6	18.6	19.8	179
HEW	11.7	7.2	8.3	* 81
Women's development association	0.5	0.2	0.3	3
Read or heard about family planning in:				
Pamphlet/posters/leaflets	9.5	6.1	6.9	86
Newspaper or magazine	3.6	3.2	3.3	38
Television	13.9	25.7	22.8	222
Radio	42.9	38.8	39.8	454
Community event/conversation	41.2	47.4	45.9	491
Mobile phone	2	3.2	2.9	29
Internet	0.6	3.1	2.5	20
VSLA meeting	3.3	3.5	3.5	38
SAA	1.1	0.2	0.4	7
None of the above	24.7	22	22.6	262
N	555			1,113

* p-value < 0.05

According to respondents, 75.2 percent were currently using some form of family planning. The methods most used were injectables (54.3%) and implants (15.6%). Respondents in the intervention area were more likely to be using implants (19.5%) than respondents in the comparison area (14.4%). The most common sources of the methods were health posts (48.2%) and health centers (37.6%). Respondents in the intervention area were less likely to obtain methods from health centers (21.7%) and private health facilities (6.2%), but more likely to obtain methods from health posts (69.5%) than were respondents in the comparison area (42.8%, 14.3%, and 41.2%, respectively). Among users, the majority were comfortable with their method (91.4%), using their preferred method (93.2%), and report their husband is supportive of family planning use (95.8%). Among non-users, 58.4 percent of respondents reported that their husband would be supportive of their family planning use.

	Intervention	Comparison	Total		Unweighted
	%	%	%		number
Currently use any family planning method					
Yes	76.8	74.7	75.2		845
No	23.2	25.3	24.8		268
Ν	555	558			1,113
Methods used					
Implants	19.5	14.4	15.6	*	189
IUD	3.8	2.0	2.4	*	32
PILLS	2.4	2.1	2.2		25
Injectables	50.9	55.4	54.3		592
Other methods**	1.9	1.9	1.9		16
N+					854
Source of contraception methods (n=845)					
Health Center	21.7	42.8	37.6	*	270
Health Post	69.5	41.2	48.2	*	470
Government hospital	1.6	0.5	0.7	*	9
Private health facility	6.2	14.3	12.3	*	87
Other	0.9	1.2	1.1		9
Among users (n=845)					
Comfortable with the current contraceptive method	90.9	91.5	91.4		771
Current method is preferred method or your method of choice	93.9	93.0	93.2		790
Partner supportive of family planning use	93.8	96.5	95.8		804

Table 10. Current use of family planning

Among women not using contraceptives (n=268) Partner be supportive if women wanted to use a family planning method				
Yes	54.5	59.5	58.4	153
No	45.5	40.5	41.6	115

+ Methods used is greater than number of users because a single women might use more than one method

** Other methods are male or female sterilization, lactational amenorrhea method, and calendar methods

Table 11 shows the number and percent of women who agreed with statements about the quality of family planning at the nearest health center and health post. Between 50–60 percent of respondents reported that family planning services at the nearest health center were confidential, private, and respectful. One-quarter of respondents felt that the same level of care was provided to adolescents, though this may reflect the fact that many did not know (adolescent respondents ages 15–19 were less than 5 percent of surveyed women). Attitudes about the level of care were slightly more positive for health posts. There were some differences between the intervention and comparison areas, women in the intervention area were more likely to feel services were confidential (74.8% vs. 57.0%), private (72.7% vs. 56.1%) and respectful (76.1% vs. 56.5%). Only one-third of respondents felt that the same level of care was provided to adolescents at these facilities.

	Intervention	Comparison	Total	Unweighted
	%	%	%	number
Health Center				
Provide confidential family planning services Provide privacy while offering family planning	52.3	62.8	60.2	640
Services	51.6	60.7	58.5	624
Charge fees for family planning services	5.8	7.4	7.0	74
The cost of family planning services is affordable Provide respectful care while offering family	21.7	23.7	23.3	17
planning services Adolescents and youth are provided the same	54.5	58	57.2	625
level of respect as older people	29.3	25.5	26.4	305
Health Post				
Provide confidential family planning services Provide privacy while offering family planning	74.8	57.0	61.3	* 733
services	72.7	56.1	60.1	* 716
Charge fees for family planning services	10.2	8.3	8.8	* 104
The cost of family planning services is affordable Provide respectful care while offering family	50.7	25.5	32.6	41
planning services Adolescents and youth are provided the same	76.1	56.5	61.2	* 738
level of respect as older people	38.4	29.0	31.2	* 375
	555	558		1,113

* p-value < 0.05

Agriculture and forestry

As shown in Table 12, about 10 percent of interviewed households were members of a PFM, and of these, only 7.7 percent held a leadership position. Respondents reported that their perception of

the performance of the PFM was "very good" (64.5%) or "good" (24.8%). Among non-participants, the most common reason for not participating in PFM was that there was no PFM in their area, though this response was less common in the intervention area than in the comparison area (71.9% vs. 84.1%). Interest in joining a PFM was high (94.2%).

	Intervention	Comparison	Total		Unweighted
	%	%	%	-	number
Participation in PFM	11.8	9.7	10.2		119
Among participants of PFM					
Leadership in PFM	13.7	5.6	7.8		12
Perceived performance of PFM					
Very good	54.3	68.5	64.5		73
Good	33.4	21.4	24.8		33
Neither good nor bad	12.2	7.6	8.9		12
Bad	0.0	2.5	1.8		1
Ν	66	53			119
Among non-participants					
Reasons for not being member of PFM					
There is no PFM in my area	71.9	84.1	81.2	*	776
There is no forest in reach of my household	13.6	7.1	8.6	*	103
I don't see any advantage of membership	1.6	1.0	1.1		13
Other	12.9	7.8	9.0		102
Household have any interest to be a member of PFM	93.9	94.3	94.2		935
Ν	489	505			994

Table 12.	Participat	torv forest	management
	. altioipa		managomone

* p-value < 0.05

The conservation-related improved agricultural practices respondents had heard of are listed in Table 12. The most common were fertilizer micro-dosing (86.2%), row planting (83.1%), and improved seeds (82.4%). These were also the most common practices applied in the 12 months prior to the survey. In contrast, the least commonly known practices were climate smart agriculture (10.8%), agroforestry (29.1%), and integrated pest management (30.0%). Significant differences between the intervention and comparison area were in knowledge of green manure application, mulching, and mixed or inter-cropping, with the comparison area having a higher level of awareness of these practices. Intervention area households were more likely to have applied agrochemicals (37.8% vs. 27.4%) and integrated pest management (10.0% and 6.0%) during the last 12 months. A small number of households (n=290) had received training on any of these practices during the past 12 months, mainly from the ministry of agriculture. Households in the intervention area were more likely to have received the ministry of agriculture trainings than those in the comparison area (27.5% vs. 18.7%).

Table 12. Improved agricultural practices

Intervention	Comparison	Total		Unweighted
%	%	%		number
28.4	31.7	30.9		334
82.5	87.4	86.2		946
70.5	72.2	71.8		795
74.2	80.2	78.7		860
31.9	39.9	37.9	*	399
81.3	82.8	82.4		915
81.0	83.8	83.1		918
40.8	44.5	43.6		474
29.3	37.8	35.7	*	373
56.3	64.0	62.1		671
40.4	47.3	45.6	*	490
62.5	65.3	64.6		712
27.2	30.9	30.0		323
27.2	29.7	29.1		317
8.7	11.5	10.8		112
555	558			1,11:
7.0	7.2	7.2		79
66.6	59	60.8		698
18.1	19.9	19.5		212
37.9	36.8	37.0		41
8.6	7.1	7.5		8
59.7	53.2	54.8		628
59.1	53.7	55.0		628
7.6	5.2	5.8		7
5.3	4.6	4.7		50
20.1	20.7	20.5		228
14.8	14.1	14.3		16 ⁻
37.8	27.4	29.9	*	363
10.0	6.0	7.0	*	89
555	558			1,113
				,
27.5	18.7	20.8	*	257
1.6	2.6	2.4		24
	% 28.4 82.5 70.5 74.2 31.9 81.3 81.0 40.8 29.3 56.3 40.4 62.5 27.2 8.7 555 7.0 66.6 18.1 37.9 8.6 59.7 59.1 7.6 5.3 20.1 14.8 37.8 10.0 555	% $%$ 28.431.782.587.470.572.274.280.231.939.981.382.881.083.840.844.529.337.856.364.040.447.362.565.327.229.78.711.55555587.07.266.65918.119.937.936.88.67.159.753.259.153.77.65.25.34.620.120.714.814.137.827.410.06.0555558	% $%$ $%$ 28.431.730.982.587.486.270.572.271.874.280.278.731.939.937.981.382.882.481.083.883.140.844.543.629.337.835.756.364.062.140.447.345.662.565.364.627.230.930.027.229.729.18.711.510.85555585587.07.27.266.65960.818.119.919.537.936.837.08.67.17.559.753.254.859.153.755.07.65.25.85.34.64.720.120.720.514.814.114.337.827.429.910.06.07.0555558	% % % 28.4 31.7 30.9 82.5 87.4 86.2 70.5 72.2 71.8 74.2 80.2 78.7 31.9 39.9 37.9 $*$ 81.3 82.8 82.4 81.0 83.8 83.1 40.8 44.5 43.6 29.3 37.8 35.7 56.3 64.0 62.1 40.4 47.3 45.6 62.5 65.3 64.6 27.2 29.7 29.1 8.7 11.5 10.8 555 558 558 7.0 7.2 7.2 66.6 59 60.8 18.1 19.9 19.5 37.9 36.8 37.0 8.6 7.1 7.5 59.7 53.2 54.8 59.1 53.7 55.0 7.6 5.2 5.8 <t< td=""></t<>

* p-value <0.05

Respondents were asked to think about their access to forest resources More households in the intervention area reported being within reach of the forest (38.5%) than did households in the comparison area (15.0%). On average, it takes household members more than an hour to walk to the boundary of the forest, 78 minutes from intervention kebeles and 134 minutes from comparison kebeles. These walking times have not changed substantially from those of five years ago. Perhaps due to the closer distance to the forest, households in the intervention area were

more likely to use the forest for timber and non-timber forest products, though this was not common. Use of the forest to grow coffee was the most common, but only reported by 10.2 percent of households in the intervention area. Households in the intervention area were more likely to perceive that the availability (both in terms of quantity, expansion vs. shrinkage, and quality, improvement vs. degradation) of the forest had changed over the past five years (17.1%) compared to those in the comparison area (6.0%); these respondents mostly felt the pace of change was "moderate" or "slow." About half of all respondents felt that improving their household's livelihood could help improve forest conservation (55.6%), though the percentage was slightly higher in the intervention area (64.6%).

	Intervention	Comparison	Total		Unweighted
	%	%	%		numbei
Household located in reach of Yayu Forest					
Yes	38.5	15.0	20.7	*	29
No	61.5	85	79.3		81
Current average minutes to walk to nearest boundary of Yayu	78.3	134.2	109.1		1,11;
Five years ago, average minutes to walk to nearest boundary of Yayu	74.8	140.8	111.8		1,11:
Forest products use					
Grow coffee in the forest	10.2	2.0	4.0	*	6
Use the forest to collect timber products Use the forest to collect non-timber (other than	2.4	0.5	0.9	*	1
coffee forest products)	3.7	0.0	0.9	*	2
Non-timber forest products you collected					
Wild coffee	1.9	0.0	0.5	*	1
Honey	0.6	0.0	0.1	*	
Spices	1.1	0.0	0.3	*	
Medicines	1.3	0.0	0.3	*	
Fuel wood	2.5	0.0	0.6	*	1
Charcoal	1.1	0.0	0.3	*	
Construction poles	1.4	0.0	0.3	*	
Availability change in the last 5 years Availability of the forest changed over the last five years					
Yes	17.1	6.0	8.6	*	10
No	82.9	94	91.4		1,00
Ν	555	558			1,11
Change in the availability of the forest					
Increasing	57.3	71.9	65.0		6
Decreasing	40.1	28.1	33.8		4
Neither	2.6	0.0	1.2		
Ν	79	28			10
Pace of change in the availability of the forest	-	-			
Fast	24.8	21.5	23.1		2
Moderate	42.4	50.2	46.6		4
Slow	32.7	28.3	30.3		3
N	77	28			10

Table 13. Access to Yayu Forest

Household believes that improving their livelihood can lead to improvements in forest conservation				
Yes	64.6	52.8	55.6	655
No	35.4	47.2	44.4	458
Ν	555	558		1,113
* p-value <0.05				

Very few households reported clearing the forest to make room for agricultural fields (n=8) or thinning the forest to give crops more space (n=22). In contrast, more than half of surveyed households reported planting trees during the last 12 months (n=704). The median number of trees planted by households in the intervention area was 39, compared to 50 trees planted per household in the comparison area.² Thirty-six percent of respondents reported that of the trees planted, 50 percent or fewer were still surviving at the time of the interview. Thirty-eight percent reported that more than 75 percent of trees planted were still surviving. Degraded lands were the most common location for planting trees; however, this percentage was lower in the intervention area than in the comparison area (17.7% vs. 37.8%). Other common locations included homesteads (26.9%) and crop fields (23.4%). When asked about the reasons for planting the trees, income was the most common response (66.8%). Respondents in the intervention area were more likely to plant trees for food (22.9%) than in the comparison area (14.2%), and less likely to plant trees for a fence (15.6 vs. 27.0%) or for timber (14.9% vs. 27.8%). Planting for coffee shade (20.4%) and firewood (18.5%) were also common (results not shown in a table).

A list of crops produced was obtained from respondents, generating a list of more than 25 agricultural products produced in the area. The most produced crops included maize (28%), coffee (21.3%), teff (10.5%) and sorghum (9.3%). Households in the intervention area were more likely to grow teff (16.5%) and less likely to grow sorghum (5.4%) as compared to households in the comparison area (8.2% and 10.7%, respectively). Households were most likely to consume these products (61.9%) or to consume some/sell some (33.5%); very little was produced only for sale (4.6%). Among households marketing agricultural products (44.1%), most commonly products were sold directly on the market (18.7%), to a local trader (12.7%), or to a trader from a distant town (10.3%). Only 1.1 percent reported selling products to a cooperative (results not shown in a table).

Gender decision-making and attitudes

Most of the women interviewed (83.3%) indicated that they discussed family planning with their husband or partner. In the interventions area, 16.9 percent of respondents reported that they discussed family planning with a community health worker, compared with 10.1 percent in the comparison area. Discussions with friends were also common (10.5%), as was discussing with "no one" (9.8%). Less than 1 percent of respondents reported discussing family planning with a facility-based provider. (Results not shown in Table.) Table 14 shows that the majority (73.5%) of respondents in both the intervention and comparison areas also responded that the decision to use (or not use) contraception was a joint decision between the respondent and their spouse. This proportion was lower in the intervention area (69.2% vs. 74.9%, respectively), although this difference with the comparison area was not statistically significant.

² Extreme values for the number of trees planted per household (>1,000) were removed from the analysis.

More than half of respondents indicated that decisions around major household purchases (64.0%) and how the respondent used her earnings (65.3%) was a joint decision. Women were also jointly involved in decisions about how to spend their husband's earnings (71.4%), sending children to school (76.2%), and allowing a daughter (62.6%) or son (63.0%) to work outside the home. Though the difference is not statistically significant, joint decision-making in the intervention area trended lower than in the comparison area. Notably, very few respondents reported that their daughter or son made decisions themselves about working outside of the home.

	Intervention Comparison		Total	Unweighted
	%	%	%	number
Would you say that using (not using) contraception is mainly your decision:				
Mainly respondent	13.9	15.7	15.3	164
Mainly spouse	14.6	8.0	9.5	* 126
Joint decision	69.2	74.9	73.5	802
Other	2.4	1.4	1.7	21
Major household purchases:				
Respondent	11.3	10.1	10.4	119
Husband/partner	26.5	25.2	25.5	287
Respondent and husband/partner jointly	62.1	64.6	64.0	705
Someone else	0.2	0.0	0.0	1
Other	0.0	0.2	0.1	1
Person who decides on how the women/wife cash earnings are used:				
Respondent	10.7	11.2	11.1	122
Husband/partner	22.2	18.5	19.4	226
Respondent and husband/partner jointly	66.0	65.1	65.3	730
Respondent has no earnings	0.9	5.1	4.1	* 33
Other	0.2	0.2	0.2	2
Ν	555	558		1,113
Among women who are married/in union, person who usually decides how husband's earnings will be used				
Respondent	5.6	3.2	3.8	46
Husband/partner	24.5	21.5	22.2	241
Respondent and husband/partner jointly	69.4	72.1	71.4	742
Respondent husband has no earnings	0.6	3.2	2.6	* 20
Ν	520	529		1,049
Among women who have children, who usually decides about sending children to school				
Respondent	12.8	10.8	11.3	123
Husband/partner	13.4	8.8	9.9	115
Respondent and husband/partner jointly	70.3	78.0	76.2	* 769
Someone else	0.2	0.2	0.2	2
Other	3.3	2.1	2.4	28
Ν	518	519		1,037

Table 14. Women's participation in decision-making
	Intervention	Comparison	Total	_	Unweighted
	%	%	%	_	number
Among women who have a daughter, person who usually decides about her working outside of the house					
Respondent	14.4	12.4	12.9	*	110
Husband/partner	18.8	11.3	13.2		123
Respondent and husband/partner jointly	58.6	64.0	62.6		504
The daughter herself	4.0	3.9	3.9		33
Someone else	0.2	0.0	0.1		1
Other	4.0	8.4	7.3	*	50
Ν	421	400			821
Among women who have son, person who usually decides about him working outside of the house					
Respondent	9.2	8.5	8.7		74
Husband/partner	21.0	13.5	15.3		143
Respondent and husband/partner jointly	59.1	64.1	63.0		513
The son himself	5.5	6.2	6.1		50
Someone else	0.2	0.0	0.1		1
Other	4.9	7.6	7.0		52
Ν	406	427			833

* p-value < 0.05

When asked about their influence in decision-making related to household earnings, most respondents (>55%) across intervention and comparison areas agreed or strongly agreed they had a lot of influence in household decision-making for wage employment, crop and livestock production, and non-agricultural economic activities. This was slightly higher in the intervention area for all means of income generation, although not statistically significant for any. A portion of respondents in the intervention area (approximately 10%) disagreed that they had a lot of influence in decision-making on wages or revenue. (Table 15)

I have a lot of influence in household decision- making on:		Strongly disagree %	Disagree %	Neither agree nor disagree %	Agree %	Strongly agree %
Wage employment (in cash	Intervention	0.5	9.4	5.4	59.8	24.9
or in-kind)	Comparison	0.2	7.3	12.9	56.8	23
Revenue from wage employment (in cash or in-	Intervention	0.7	11.6	8.4	58.7	20.6
kind)	Comparison	0.7	7.6	14.6	55.2	22
Crop production and	Intervention	1.2	11.5	5.3	60.3	21.6
marketing	Comparison	0.8	10.9	9.8	56.7	21.7
Revenue from crop	Intervention	1.2	13.5	7.0	56.7	21.6
production and marketing	Comparison	1.3	8.6	12.4	54.2	23.5
Livestock production and	Intervention	1.5	10.0	4.7	62.2	21.6
marketing	Comparison	0.5	9.5	5.4	56.2	28.4

Table 15. Women's influence in economic decision-making

Revenue from livestock production and marketing	Intervention	1.5	11.1	6.5	56.0	24.9
	Comparison	0.8	9.2	8.0	55.4	26.5
Non-agricultural economic activities (small businesses self-employment)	Intervention	1.5	3.6	7.1	60.0	27.8
	Comparison	0.0	3.6	5.9	55.9	34.6
Revenue from non- agricultural economic activities (small businesses)	Intervention	1.5	6.4	7.1	59.4	25.5
	Comparison	0.0	3.1	7.7	57.2	32.1

Highlighted are significant at p<0.05. N= 1,113.

Most respondents agreed (59.2%) or strongly agreed (35.2%) that married women are expected to participate in income-generating activities. Forty-three percent of respondents agreed or strongly agreed that married women are expected to hand over income to their husband, while 44.0 percent of respondents disagreed or strongly disagreed with this statement. For unmarried women, most respondents agreed or strongly agreed (86.7%) that they are expected to participate in income generating activities, though only 36.1 percent agreed or strongly agreed that they are expected to hand over earnings to their parents. Respondents in the intervention area were more likely to strongly agree with this statement (8.4%) than were respondents in the comparison area (3.5%) (see Table 16).

When asked about their agreement with whether women are capable to lead forest management groups, nearly all women agreed (63.8%) or strongly agreed (19.6%). This high level of agreement was also noted for a statement about whether women are capable of leading village and youth savings and loan groups (65.0%% and 20.7% respectively). However, 11.5 percent of women in the intervention area disagreed that women were capable of leading forest management groups, compared to 5.7 percent of women in the comparison area.

		Strongly disagree %	Disagree %	Neither agree nor disagree %	Agree %	Strongly agree %
A couple's decision about the number of children to have	Intervention	32.7	42.6	11.6	11.7	1.4
should be left up to the man	Comparison	38.8	43.5	5.5	11.9	0.3
Married women are expected to participate in income generating activities	Intervention	0.9	2.2	3.8	55.6	37.5
	Comparison	1.2	0.9	3.0	60.4	34.5
Married women are expected to hand over the income to	Intervention	10.0	32.4	11.1	39.4	7.0
their husband	Comparison	11.2	33.3	13.0	37.6	4.9
Unmarried women are	Intervention	0.7	4.5	8.5	58.1	28.2
expected to participate in income generating activities	Comparison	0.0	4.1	9.0	63.9	22.9
Unmarried women are expected to hand over the	Intervention	8.5	27.7	19.7	35.8	8.4
income to their parents	Comparison	14.6	30.6	21.3	30.1	3.5

Women are capable of leading forest management	Intervention	0.4	11.5	10.9	57.8	19.4
groups	Comparison	0.4	5.7	8.6	65.7	19.6
Women are capable of leading village and youth	Intervention	0.2	5.9	12.0	61.8	20.1
savings and loan (VSLA and YSLA)	Comparison	0.9	3.5	8.8	66.0	20.8

Highlighted are significant at p<0.05. N=1,113.

Youth-related attitudes

Most respondents in both intervention and comparison areas strongly disagreed that it is acceptable for unmarried adolescents to be sexually active (74.4% and 74.0%, respectively). More than half of respondents (54.4% total statistic not shown in table) disagreed or strongly disagreed that it is acceptable for unmarried adolescents to use contraception, while 33.6 percent of respondents agreed or strongly agreed that it was acceptable.

		Strongly disagree %	Disagree %	Neither agree nor disagree %	Agree %	Strongly agree %
It is acceptable for unmarried adolescents to be sexually active	Intervention	74.4	18.3	3.8	3.1	0.4
	Comparison	74.0	21.6	1.1	3.1	0.2
It is acceptable for unmarried adolescents to use contraception	Intervention	24.6	26.2	16.6	22.0	10.6
	Comparison	23.5	32.0	10.6	26.9	7.1

Table 17. Youth-related gender attitudes

Highlighted are significant at p<0.05. N=1,113.

When respondents were asked if they discussed family planning and reproductive health topics with their children, less than 10 percent in both intervention and comparison areas noted that they discussed any of the following topics with their children: sexuality, family planning, menstruation, STIs or HIV/AIDS, unwanted pregnancy, early marriage, or sexual harassment (results not shown in table). Of these topics, early marriage was discussed most often (7.5%, followed by menstruation (7.2%) and relationships (7.1%). About one third of respondents (30.4%) said that adolescent children were allowed or would be allowed to use family planning, a similar finding to that shown in Table 17.

Respondents were also asked if their adolescent children were engaged in community events (results not shown in table). An average of 43.7 percent of respondents indicated that their children were engaged in any type of community event, with 39.8 percent indicating their children were involved in community/volunteerism. A lower percentage of respondents in the intervention area than in the comparison area indicated that their children were involved in jointly solving community problems (28.5% vs. 38.1%, respectively).

Provider interviews

Provider characteristics

Characteristics of the 37 interviewed family planning providers are shown in Table 18. Most family planning providers were female (84%) and were HEWs (62.0%). Almost half of the providers had worked at their health facility for ten or more years (49%). Almost two-thirds reported that they

did not provide youth-friendly health services (YFHS) and relatedly, only 30.0 percent had received YFHS training within the last two years. Initial trainings conducted by FUTURES may be reflected in the responses of intervention area providers.

	Intervention %	Comparison %	Total %
Gender			
Male	16	17	16
Female	84	83	84
Profession			
Nurse (Diploma)	5	22	14
Health Extension Worker	58	67	62
Other	37	11	24
Service year in the current health facility			
One year or less	0	11	5
Two to four years	27	39	33
Five to nine years	5	23	14
Ten years or more	70	28	49
Provide YFHS			
Yes	32	39	35
No	68	61	65
Received any training in YFHS in the last 2	4 months		
Yes, within past two years	32	28	30
Yes, over two years ago	11	0	5
No trainings or updates	58	72	65

Table 18. Characteristics of family planning providers (n=37)

Facility characteristics

Characteristics of the health facilities are shown in Table 19. The majority of surveyed facilities used some form of feedback mechanism to help ensure quality service provision (86.5%); the most common of these were meetings with community leaders (40.5%) and client interviews or survey forms (35.1%). Eighty-six percent had received an external supervision visit within the last six months, though supportive supervision related to YFHS was not as common (56.8%). Most facilities tracked family planning referrals (81.1%), most commonly by referral slips (80%), though some facilities used mobile phones; this was more common in the intervention area (40%) than in the comparison area (13.3%). Methods provided on site included oral contraceptives, injectables, condoms, and implants. The IUD was only available onsite at 29.7 percent of facilities, though it was more commonly available in facilities in the intervention area (42.1%). Emergency contraception had similar availability (48.6%), though was provided on-site in 57.9 percent of facilities in the intervention area. Cycle beads were not commonly provided on-site (13.5%) or through counseling (21.6%). Just over one-third of the surveyed facilities were able to remove both implants and IUDS (37.8%), an additional 29.7 percent could remove implants only. On average, half of facilities provided services to survivors of gender-based violence (54.1%), and even fewer provided case management services (35.1%). Fees for family planning services were not

common in the intervention area, and were most often for the purchase of client health cards (15.8%).

	Intervention %	Comparison %	Total %
Facility uses any feedback collection mechanism	84.2	88.9	86.5
Clinic-based feed-back mechanisms used			
Suggestion box	10.5	22.2	16.2
Client interview or survey form	47.4	22.2	35.1
Official meeting with community leaders	36.8	44.4	40.5
Informal discussion with clients or the community	26.3	16.7	21.6
Community score card	5.3	22.2	13.5
Other	0.0	5.6	2.7
Supervision received in the last 6 months	0.0	0.0	
Receive any external supervision	84.2	88.9	86.5
Supportive supervision for the provision of youth-	01.2	00.0	00.0
friendly health services	63.2	50.0	56.8
Family planning referral tracking			
Track family planning referrals	78.9	83.3	81.1
Main family planning referral tracking system			
Referral Slip/Paper/Prescription	60.0	80.0	70.0
Mobile Phone Referral Receipt	40.0	13.3	26.7
Other	0.0	6.7	3.3
Family planning methods provision			
Oral contraceptive pills			
Provide	100.0	94.4	97.3
Neither	0.0	5.6	2.7
Injectables			
Provide	94.7	100.0	97.3
Neither	5.3	0.0	2.7
Condoms	0.0	0.0	
Provide	89.5	100.0	94.6
Offer/Counsel Only	10.5	0.0	5.4
IUD	10.0	0.0	0.7
Provide	42.1	16.7	29.7
Offer/Counsel Only	42.1 52.6	77.8	29.7 64.9
Neither		-	
	5.3	5.6	5.4
Implant	047	00.0	04.0
Provide	94.7	88.9	91.9
Offer/Counsel Only	5.3	11.1	8.1
Emergency contraceptive pills			
Provide	57.9	38.9	48.6
Offer/Counsel Only	26.3	44.4	35.1
Neither	15.8	16.7	16.2
Cycle beads for Standard Days Method			
Provide	10.5	16.7	13.5
Offer/Counsel Only	26.3	16.7	21.6
Neither	63.2	66.7	64.9
IUD or implant removal on site?			
Yes, removal of both	47.4	27.8	37.8
Yes, removal of IUD only	10.5	0.0	5.4
Yes, removal of implant only	31.6	27.8	29.7

 Table 19. Characteristics of health facilities (n=37)

Gender based violence services Treatment for survivors of gender-based			
violence	47.4	61.1	54.1
Case management for gender-based violence	21.1	50.0	35.1
Providers who believe the facility has a strong			
gender-based violence referral system	84.2	88.9	86.5
Fees			
Client health card	15.8	33.3	24.3
Laboratory	5.3	22.2	13.5
Imaging	0.0	16.7	8.1
Contraceptive commodities	0.0	5.6	2.7
Fee wavering procedures			
Fee exemption, no payment expected	0.0	16.7	11.1
Fee discounted	100.0	16.7	44.4
Service not provided, asked to come back when			
able to pay	0.0	16.7	11.1
Fee covered by community health insurance	0.0	16.7	11.1
Other	0.0	33.3	22.2

Family planning providers were asked about the reproductive services available for adolescents. Table 20 shows that while contraceptive services were mostly available in these facilities, especially for short-term methods and implants, other reproductive health services were less available. Pregnancy testing for adolescent clients was available in 64.9 percent of facilities, testing and treatment for sexually transmitted infections was only available in 56.8 percent and 37.8 percent of facilities, respectively. In general, facilities in the intervention area were less likely to offer these services than facilities in the comparison area, the exception being offering IUDs and implants. Seventy-eight percent of the facilities had mainstreamed YHFS, while 13.5 percent offered separate areas of youth clients, and 3 facilities (8.1%) did neither. Most facilities (83.8%) reported additional practices to maintain the privacy and confidentiality of youth clients, including offering separate hours (54.1%), separate counseling or examination rooms (45.9%), or separate waiting rooms (13.5%). Half of facilities reported having non-judgmental practices in place (54.1), though this was more common in the intervention area (73.7%). Some of these practices included offering advice (mentioned by 6 providers), using codes to "hide their secret" (n=1), proving adolescents "freedom to express their feelings" (n=1), and providing trainings outside of the health center (n=1). Providers mentioned the importance of privacy and ensuring security (n=6).

Table 20. Services available to adolescents

	Intervention %	Comparison %	Total %
Services available			
Information and counselling on RH sexuality and	70.0	04.4	00 5
safe sex Testing for sexually transmitted	78.9	94.4	86.5
infections/reproductive tract infections	42.1	72.2	56.8
Treatment for sexually transmitted infections/			
reproductive tract infections	31.6	44.4	37.8
Pregnancy testing	63.2	66.7	64.9
Oral contraceptive pills	84.2	94.4	89.2
Injectable contraception	89.5	94.4	91.9
Condom use or dual method use	89.5	94.4	91.9
IUDs	68.4	44.4	56.8
Implants	89.5	83.3	86.5
Emergency contraception	63.2	77.8	70.3
Mainstreamed YFHS			
Mainstreamed	78.9	77.8	78.4
Separate	10.5	16.7	13.5
Neither	10.5	5.6	8.1
Additional practices to maintain privacy and	00 F	77.0	00.0
confidentiality of youth	89.5	77.8	83.8
Separate hours for adolescents	63.2	44.4	54.1
Separate counseling/examination room	36.8	55.6	45.9
Separate waiting room	15.8	11.1	13.5
Other	10.5	5.6	8.1
Any non-judgmental practices			
Yes	73.7	33.3	54.1
No	26.3	66.6	45.9

Opinions of family planning providers

When asked whether the health facility was doing a good job making family planning services accessible to adolescents (marital status not specified), 52.6 percent of intervention and 72.0 percent of comparison area providers agreed. When asked what the facilities needed to do to improve accessibility for adolescents, 20 providers gave suggestions. These included the need for a separate space for adolescents (n=8), improvement in "inputs" (n=6), awareness creation (n=3), training on long-term methods for adolescents (n=2), among others (results not shown).

Table 21 shows results from asking providers questions related to the provision of family planning services based on the age and/or marital status of clients. The table shows that most providers felt that it is unacceptable for unmarried adolescents to be sexually active (89.2%) (totals not shown in the table). However, the majority also felt that it was acceptable for unmarried adolescents to use contraception (89.2%). Most providers would provide a method to a client who has not had any children (91.9%) or was unmarried (91.8%). There was some variation in whether parental consent would be required for clients under the age of 17, with 31.6 percent of providers in the intervention area and 6.0 percent in the comparison area agreeing or strongly agreeing that they would. Most providers would provide long-term methods to adolescents (86.4%), explain that

methods could be used in secret (97.3%), or discuss all methods whether a client is married or not (97.3%). Finally, only 24.3 percent of providers disagreed or strongly disagreed that the decision to have children should be left up to the man, though this response was more common in the intervention area (36.9%) than the comparison area (11.0%).

Table 21.	Family	planning	provider	opinions
		plaining	providor	opiniono

It is acceptable for:		Strongly disagree %	Disagree %	Agree %	Strongly agree %
Unmarried adolescents to be sexually active	Intervention	63.2	31.6	5.3	0.0
	Comparison	67.0	17.0	3.0	0.0
Unmarried adolescents to use contraception	Intervention	5.3	10.5	52.6	31.6
	Comparison	0.0	6.0	50.0	44.0
l would:					
Provide a method to a client who has not had	Intervention	0.0	5.3	57.9	36.8
any children	Comparison	0.0	11.0	44.0	44.0
Provide a method to an unmarried client	Intervention	0.0	0.0	52.6	47.4
	Comparison	0.0	17.0	33.0	50.0
Require parental consent before giving family	Intervention	47.4	21.1	10.5	21.1
planning to youth <17 years	Comparison	22.0	72.0	6.0	0.0
Provide a long-acting method to an	Intervention	10.5	5.3	36.8	47.4
adolescent client if she wanted it	Comparison	6.0	6.0	39.0	50.0
Explain methods that can be used without	Intervention	0.0	0.0	57.9	42.1
people knowing	Comparison	0.0	6.0	67.0	28.0
Discuss all methods whether a client is	Intervention	0.0	5.3	36.8	57.9
married or not	Comparison	0.0	0.0	28.0	72.0
I believe:					
The decision about the number of children	Intervention	15.8	21.1	26.3	36.8
should be left up to the man	Comparison	0.0	11.0	44.0	44.0

Sustainable Development Goal Analysis Grid

Overall performance on the six dimensions in intervention and comparison woredas

Table 22 summarizes the baseline result for the overall YCFBR, two intervention, and two comparison woredas. The summary includes a description of the content for each dimension. Further detailed results and interpretations of the dimensions, themes, and goals for each of the four woredas separately can be obtained by request from Dr. Mitiku at Jimma University.

Table 22. Performance summary from assessment of sustainable development goal dimensions, four woredas
in the Yayu Coffee Forest Biosphere Reserve (YCFBR), December 10, 2021

				ion woredas and Yayu)	Comparison woredas (Bilo Nopha and Hurumu)	
Dimension	Average weighting	Average performance	Average weighting	Average performance	Average weighting	Average performance
Social	2.1	71%	2.2	76%	2.0	66%
Ecological	1.9	65%	2.0	66%	1.9	63%
Economic	1.8	66%	1.9	67%	1.8	66%
Cultural	2.5	78%	2.4	76%	2.6	80%
Ethical	3.0	90%	3.0	93%	3.0	87%
Governance	2.0	75%	2.3	78%	2.0	71%

Scoring and interpretation:

<20%: Critical situation. The dimension or theme is negatively affected by the policy, strategy, program, or project (PSPP).

20%-39%: Problematic situation. The dimension or theme is insufficiently considered in the PSPP.

40%–59%: Improvable situation. The dimension or theme is poorly considered in the PSPP.

60%–79%: Satisfactory situation. The dimension or theme is considered in the PSPP.

80%–100%: Excellent situation. The dimension or theme is strongly considered in the PSPP.





The overall performance of the social dimension in the YCFBR was indicated to be "satisfactory," with a score of 71 percent, though the intervention woredas scored higher (76%) than the comparison woredas (66%). This dimension is composed of themes including poverty, water, food, health, safety, education, community and their involvement, human settlement, and gender. Each of these themes have different goals. All goals were discussed with FGD participants except human settlement, which was not considered relevant for this activity. The FGD participants reflected that though there are some projects in the biosphere, most projects focus on training, and that is not considered sufficient to reduce poverty, especially for the most disadvantaged groups – women and youth. The poverty rating in this region varied from a low of 40 percent in Bilo Nopha (barely "improvable"), to 70 percent in Hurumu ("satisfactory"). Access to water was rated to be 70 percent in Chora and Yayu whereas it was rated to be 52 percent and 58 percent for Bilo Nopha and Hurumu respectively, implying that due attention is needed in the latter two woredas.

The discussion also revealed that capacity building for healthcare professionals and the community in general, was ongoing for improving the health of the community, reaching a high score of 79 percent for Chora woreda. Although it was noted that there are health posts in all kebeles, health centers have not started in full capacity. Nevertheless, family planning and maternal and infant health interventions were seen to be strongly supported. Equality between men and women and the promotion of independence of women and girls were rated to be "satisfactory" in all woredas participating in the discussion. Participants in Yayu woreda supported their response by indicating that there are gender focal persons in all sectors, and joint land titling for husband and wife are common. However, the discussion showed that even though positive efforts were underway, cultural beliefs about the social value of the unequal roles and status relationships of men and women was still viewed as a major challenge of women's and girl's empowerment. Safety and community involvement were rated to be the highest goals implemented in the woredas.

Ecological dimension

The overall performance of the ecological dimension in the YCFBR was scored the lowest among the dimensions (65%), and similar between the intervention woredas (66%) and comparison woredas (63%). The dimension was rated at 1.9 overall, not quite at a level of "important." The ecological dimension is measured based on six themes: ecosystems, biodiversity, resources, outputs, land use and climate change. The FGD participants agreed that the government gives some attention to this area, noting too that there are some projects operating in this area due to strategically important crops, such as coffee and honey, that are part of the YCFBR ecosystem. Accordingly, there is some awareness creation on ecosystems and local people are responding by planting coffee shade trees to combat desertification. The overall effort made for maintaining the ecosystem was rated only as "satisfactory" for all woredas, varying from 60 percent for Bilo Nopha to 69 percent for Yayu. There is also some attempt at protecting biodiversity, lowest in Bilo Nopha at 45 percent, to more "satisfactory" situations in all other woredas, with the highest in Hurumu woreda (70%). Participants noted that there are efforts in place for protecting symbolic species, such as different types of bees and plants, through delineating the YCFBR and awareness creation. This goal also needs more attention in Bilo Nopha woreda (rated at 45%), which needs further

efforts to improve the existing situation. Participants further discussed some problems related to implementing plans for prudent use of renewable resources on the one hand, and sustainability problems on the other, saying that often projects are implemented with short-term plans and activities, and once they phase out, continuity of the activities is a challenge. Land use was also seen as having problems. The FGD participants emphasized that even though it is not common to clear forests for conversion to other farming systems, there are instances where people plant trees, such as eucalyptus, that are less sustainable. In addition, there is an expansion of coffee producing in YCFBR, which has negative effects on biodiversity. The FGD participants also raised the issue that while people live within, and are dependent on, the YCFBR, they do not have any license or use right to use the land in the core areas, and thus feel that they are easily displaced at any time.

Climate change is also one of the goals within the ecological dimension. Participants stated that even though there are some efforts to promote energy saving stoves, agroforestry and climate smart agriculture, measures such as greenhouse gas quantification are not assessed.

Economic dimension

Economics was another low-performing dimension in the biosphere reserve. This dimension was rated to be "satisfactory" with almost equal scores in the intervention woredas (67%) and comparison woredas (66%). The dimension was weighted as 1.8, the lowest of the dimensions, at a "desirable" level. The economic dimension is evaluated based on eight themes; this work focused on five: economic viability, work, wealth and prosperity, entrepreneurship, and energy. The FGD participants explained that there are some kebeles where youth are organized and working on income generating activities, such as nursery sites, buying and selling coffee, vermicost production from coffee husk, and beehives. Youth who are organized into the cooperatives have legal receipts and are well connected to markets in selling their produce. The income of these groups is audited, and they will be transferred to medium enterprises after three years if they continue performing well. However, there are very few youths who get this opportunity. Furthermore, it was noted that there are situations where youth are "short sighted" and "looking for a short cut" to accumulate wealth. This was seen to present a huge challenge for the cultivation of an entrepreneurship culture. Finally, tourism was mentioned as an area with much potential and for which there is no current infrastructure or support.

Cultural dimension

Overall, the cultural dimension showed a "satisfactory" situation as its performance level was 78 percent, with a score of 76 percent in the intervention woredas and 80 percent in the comparison woredas. The cultural dimension consists of four themes; three were used: transmission of cultural heritage, cultural diversity of the communities, and contribution of culture to development. These themes had different levels of performance, with some achieving ratings of "excellent" (e.g., cultural diversity was scored at a level of above 85 percent for all the woredas). However, the FGD participants raised the concern that the transmission of a culture of conservation from parents to children is diminishing. This theme was rated to be only 55 percent in Chora woreda showing the need of improvement so that the current generation will develop the same respect for nature as past generations.

Nevertheless, the high performance of the overall cultural dimension and that of cultural diversity can be considered as very good opportunities for planning and executing different community-based project interventions in the area.

Ethical dimension

The assessment results indicated that the average performance level of the ethical dimension of the overall biosphere was "excellent" with a score of 93 percent for the intervention and 87 percent for the comparison woredas. The dimension consists of five themes, but we focused on two: responsibility and peace. The results show an "excellent" rating, indicating that the dimension and the involved themes and goals were strongly considered in previous PSPPs. The highest performance within the considered ethical dimension themes were "acting with responsibility" and the "existence of peace," with average performance scores of 95 percent and 90 percent respectively. In addition to the cultural dimension indicated above, the high performance of the ethical dimension can also be considered as an opportunity for designing and successfully implementing various interventions aiming at improving the performance of other dimensions.

Governance dimension

The overall performance of the governance dimension was scored as "satisfactory" (75%), with a rating of 78 percent for intervention and 71 percent for comparison woredas. The governance dimension consists of eight themes; we used four: institutions, participation and citizenship, information, and innovation. Participants emphasized the governance dimension as the third highest performing dimension next to the ethical and cultural dimensions. Similar to the cultural and ethical dimensions, the strong performance of the governance dimension can offer additional opportunity for successful project interventions. The high overall performance of the governance dimension was the result of the improved performances of other themes and goals considered in the assessment, though it should be noted that the respondents were themselves from the government sector. Some of the themes and goals that showed better performance included institutional effectiveness, accountability and inclusiveness, limiting opportunities for corruption, participation and citizenship, and access to information and use of appropriate communication mechanisms. On the other hand, innovation-related themes and goals such as optimizing innovation potential and diversifying options, encouraging the implementation of new solutions, promoting access to knowledge and technologies, and managing risks associated with new technologies were rated lower, and as a result, need further attention for improvement. The FGD participants discussed that even though the different sectors come together and collaborate where needed, there is little experience in co-implementing and co-monitoring activities in a multisectoral approach. Often sectors work in their own corridor.

Results of informational interviews

Among the 38 kebeles included in the study, only 10 were identified to have active forest management groups. The summary below includes information from the 10 IIs related to these kebeles and their 30 PFMs.

Kebele	Number of PFMs	Number of members (total)	Number of females (total)	Number of youths (total)
Intervention area				
Achibo	3	18	6 (33%)	6 (33%)
Leka	3	16	4 (25%)	N/A
Chega	3	69	13 (19%)	3 (4%)
Dapo Tobo	3	18	3 (17%)	3 (17%)
Comparison area				
Hanamogu	3	300	75 (25%)	15 (5%)
Ireyo	3	200	55 (28%)	90 (45%)
Inetaro	3	160	28 (18%)	42 (26%)
Keresi	3	23	1 (4%)	1 (4%)
Jeto	3	130	67 (52%)	10 (8%)
Karo Mariyam	3	440	104 (24%)	49 (11%)

Table 23. Characteristics of forest management groups in study area kebeles

Intervention area

The four kebeles in the intervention area with active PFM included Achibo and Leka (in Yayu woreda) and Chega and Dapo Tobo (in Chora woreda). Each of the kebeles has three established groups, involving a total of 121 individuals, involving 26 women (21% of participants) and 12 youth (10% of participants). With the exception of Dapa Tobo, women had leadership positions in all groups, though youth were more often included as stakeholders/members and not in leadership positions. The functioning of the groups varied quite widely; in Dabo Tobo, the forest management groups were at their infant stage, as they were recently established by the FUTURES project. In contrast, the three PFM groups in Achibo (also established by FUTURES) were functioning and were considered to be very effective in managing the forest. Here, the area of forest managed by the three groups was said to be better conserved than the area where the users are not grouped, even though livelihoods are based on the forest and people attempt to clear and thin the forest for coffee plantation. Chega had the three largest PFMs in the intervention area. However, the groups were not currently functioning and this was thought to have led to the acute threatening of forest areas for farmland and worsening degradation.

The informants from Achibo, Leka, and Chega, while agreeing that the groups need to be strengthened to mitigate biodiversity loss, forest degradation and deforestation, all felt local government and government support for these efforts needs to be strengthened. The informant from Chega added that weak government support for forest management will lead to climate change in these areas and beyond. The informant from Leka suggested that the government must give attention to the improvement of livelihoods, and in so doing, can offset the pressure on the forest. The informant from Leka also advised that the sanctioning mechanism needs to be stronger for those who clear the forest for their own benefit.

Comparison area

The six kebeles in the comparison area with established PFMs include Hanamogu, Iriyo (in Alge Sachi woreda), Inetaro, Keresi (in Hurumu woreda), Jeto, and Karo Mariyam (in Bilo Nopa woreda). All groups include at least one woman and youth as stakeholders and in leadership positions. All informants reported the PFMs are functioning, though as with the kebeles in the intervention area, there were some differences. The large PFMs in Alge Sachi were said to be functioning well; Hanamogu PFMs were thought to need attention for effective co-ordination between the government and NGO sectors and needed training on sustainable forest management. The PFM groups in Iriyo were awaiting carbon trading, which is expected to enhance the group's benefit from the forest, that had been promised by various NGOs. The Inetaro PFMs were reportedly functioning well, though it was noted that further training was desired. While PFMs were thought to be working effectively in Keresi, these were the smallest PFM groups in the comparison area kebeles, and it was felt that the forest conservation level has declined and needs further interventions to achieve sustainable forest management. Groups in Jeto were said to be functioning well, but it was felt that the groups should add more members to ensure effective management of forest resources. The groups in this kebele had the highest percentage of female members of any of the sampled kebeles, at 52 percent. In contrast to Jeto, PFMs in Karo Mariyam are the largest in any of the sampled kebeles but were said to be less functional because members do not give much attention to the groups.

In sum, the informants in the comparison area kebeles mentioned the functioning of PFMs could be improved with additional members, additional trainings, and better coordination between government and NGOs.

Discussion

The baseline data collection effort collected information from a representative sample of 1,113 women, 37 facility-based family planning providers, four woreda-level focus groups, and 10 informational interviews in the intervention and comparison kebeles. Data collected through the women's interviews show that the intervention and comparison areas are similar at baseline across individual and household characteristics, livelihood practices, agricultural and forest practices, family planning and reproductive health behavior, and gender-related attitudes. Typical respondents were married, in a household with 4–5 members, employed (by a family member), and had a fairly low level of literacy. Approximately three-fourths of respondents owned land and/or animals and had their names included on the land titles. About one-third of households reported participating in forest user groups, soil and water conservation/watershed management campaigns, and/or women's associations. Approximately 60% of households experienced some type of shock to their livelihoods during the 12 months prior to the survey.

A surprisingly small percentage of respondents reported use of the forest for non-timber products. While 10.2% of households in the intervention area reported using the forest to grow coffee, only an additional 1.9% reported using the forest for wild coffee. This finding appears to be at odds with the recognized importance of coffee growing for the livelihood of farmers in this area.

In matters of household decision-making, joint-decision making between husbands and wives predominated, with most women reporting they had "a lot of influence" in the decision-making. Most women agreed that they are expected to contribute to household income generation. Of note, approximately one in five women earning an income reported that their husband alone makes the decisions about how it is to be spent.

Almost all interviewed women were not accepting of sexual activity among unmarried adolescents, additionally, 70 percent did not approve of contraceptive use for sexually active unmarried adolescents. Similarly, the majority of family planning providers were not accepting of sexual activity among unmarried adolescents, however, almost all reported that they would provide contraception for these clients. It is not clear if these results represent a social bias against adolescent sexual activity but support for (or recognition of) the importance of contraceptive use for sexually active adolescents, or, if it is an artifact of the wording of the question or response categories. Future qualitative data collection activities can revisit this issue.

Some significant differences arose between the intervention and comparison areas, as noted in the results section. For example, women in the intervention area were less likely to have received secondary education and households in the intervention kebeles were more likely to be food secure (though one in five households was severely food insecure). Households in the intervention area were closer to the Yayu boundary and were more likely to perceive that the availability of the forest was changing (17.1% vs. 6.0%), though respondents were split on whether they thought it was increasing or decreasing. Other differences included that household members in the intervention area were more likely to be avere more likely to obtain family planning services at a health post rather than a health center, and more likely to have positive attitudes about the quality of care at health posts than were households in the comparison area. A similarly high perceived quality of care is not reported for adolescent clients. Households in the intervention area were less likely to have

received training in biodiversity conservation, yet more likely to have had life skills training for female household members ages 16–19. A summary of key outcome indicators included in the FUTURES MEL plan are shown in Table 24. The table provides the estimates for the intervention area. Of note, a surprisingly high percentage of respondents reported current family planning use (75%) given that the recent Ethiopia Demographic and Health Survey estimated that 40.7 percent of married women in the Oromia region currently used a modern contraceptive method (EPHI and ICF, 2021). The large difference between estimates calls into question the validity of this baseline estimate; it is possible the data collected are not accurate due to issues with questionnaire implementation, respondent's understanding of the question, or social desirability bias to give a response viewed as "correct." A high level of knowledge of family planning was also found; this may be due to the initiation of FUTURES activities as well the fact that most respondents were ages 20 years or older and were mothers, with relatively few adolescent respondents and respondents that had not had any children.

The table also indicates fairly high levels across all outcome areas. Exceptions to this are the percentage of women who are active users of financial services; participation in PFMs; and the application of various improved crop production practices, technologies, and inputs. A low percentage of family planning providers have received any recent YFHS training. Though not an indicator in the MEL plan, food security in the intervention area is also an issue that needs improvement.

Performance Indicators	Baseline data*	
Increased use of family planning/reproductive health care by women and young people		
1.1 Percentage of women of reproductive age who are using (or whose partner is using) a modern contraceptive method	76.8%	
1A.1 Percentage of individuals who know where to access modern family planning services	95.7%	
1A.3 Percentage of women whose partner supports use of modern contraception for		
themselves or their partners Users	93.8%	
Non-users	54.5%	
1A.4 Percentage of individuals referred for family planning/reproductive health services by FUTURES staff Operationalized as: Percentage of women referred to family planning services by someone	12.2%	
other than self or partner 1B.1 Quality of youth-friendly health services		
Operationalized as:	78.9%	
Percentage of facilities providing mainstreamed YFHS Percentage of facilities providing non-judgmental services	73.7%	
Percentage of family planning providers that received YFHS training within last 12 months	32.0%	
Percentage of family planning providers that would provide a long-term method to an adolescent client if she wanted it	84.2%	
Percentage of family planning providers that feel their facility is doing a good job making family planning services accessible	52.6%	

Table 24. Summary of outcome indicators

Improved livelihood opportunities for women and young people	
2.2 Percentage of women capable of participating equitably in economic activities (Agency)	
Operationalized as: Percentage of women who strongly agree/agree that they have a lot of	
influence in	
Decision-making on wage employment	84.7%
Revenue generated from crop-production or marketing	83.8%
Revenue generated from livestock production and marketing	80.9%
2.3 Percentage of women who meaningfully participate in economic decision-making in (a)	
the household and/or (b) their workplace/community (Relations)	
Operationalized as: Percentage of women reporting	
Women alone or joint decision making for household purchases	73.4
Women alone or joint decision making for how to spend wife's earnings	76.7
Women alone or joint decision making for how to spend husband's earnings	75.0
2A.2 Percentage of women who are active users of financial services	
Bank account	29.5%
Access to credit	14.4%
Improved forest conservation practices	
3.1 Number or percentage of people that have applied at least three practices to protect their	
livelihoods from negative impacts of climate-related shocks and stresses	
Operationalized as:	
Percentage reported any shocks in last 12 months	60%
Most common responses:	
Rely on savings	20.9%
Reduce expenditures	20.6%
Reduce experiationes	
3.2 Percentage of farmers who adopt improved agricultural practices (top 5 listed)	66.6%
3.2 Percentage of farmers who adopt improved agricultural practices (top 5 listed)	
Fertilizer micro-dosing	59.7%
Fertilizer micro-dosing Improved seed	
Fertilizer micro-dosing Improved seed Row planting	59.7% 59.1% 39.7%
Fertilizer micro-dosing Improved seed Row planting Animal manure application	59.7% 59.1%
Fertilizer micro-dosing Improved seed Row planting	59.7% 59.1% 39.7%
Fertilizer micro-dosing Improved seed Row planting Animal manure application	59.7% 59.1% 39.7%
Fertilizer micro-dosing Improved seed Row planting Animal manure application Agrochemical application	59.7% 59.1% 39.7%
Fertilizer micro-dosing Improved seed Row planting Animal manure application Agrochemical application 3A.1 Number/percentage of functioning forest management groups in a kebele	59.7% 59.1% 39.7% 39.8%

3A.5 Percentage of farmers aware of improved crop production practices, technologies, and	
inputs	>/=70.0%
Fertilizer micro-dosing, improved seed, row planting, compost application, animal	
manure application	50–69%
Crop rotation, agrochemical application	30–49%
Mixed or inter-cropping, green manure application, fallowing	=29%</td
Minimum tillage, mulching, integrated pest management, agroforestry, climate smart	
agriculture	

* Intervention area only

A measure of respondent's attitudes towards cross-sectoral messaging shows that about half of respondents felt that improving their household's livelihood could help improve forest conservation (55.6%), though the percentage was slightly higher in the intervention area (64.6%). Though this measure is not included as a key outcome, it may serve to help assess the penetration of cross-sectoral messaging.

The SDGAG assessment shows varying levels of performance for the key sustainable development dimensions. These differences can be described in terms of performance differences among the dimensions within the woredas and, to some extent, in terms of the differences between the woredas. Despite the different performance ratings, the results generally show that all assessed dimensions are above the level of "improvable" according to SDGAG scoring categories. Among the six dimensions considered, the performance levels of economic and ecological dimensions were reported to be lower as compared with other dimensions across all the woredas and for the entire YCFBR at large. On the other hand, the highest performance was generally shown for cultural and ethical dimensions for all cases assessed. The governance dimension also demonstrated promising results for most of the woredas and for the biosphere level at large except Bilo Nopha, where it was indicated to be one of the lowest performing dimensions. Finally, the results indicated that development sectors mainly work separately from each other, signaling a weak multisectoral approach.

Limitations

The information collected in the baseline survey does not necessarily reflect the baseline situation in the kebeles with partial implementation, as these were not included in the sampling strategy. The sampling approach used for the women's survey identified the female head-of-household or spouse of the head-of-household with the objective of obtaining a large amount of information about the household and its members from a single respondent. As a consequence, a high proportion of non-adolescent married women were interviewed. Their responses may not be representative of all women of reproductive age in these kebeles, as women who have never married, are divorced, or widowed are underrepresented. However, it is likely that unmarried women were represented to some degree in the information generated about household members. Likewise, information generated about male and (unmarried) female adolescents and adult men comes as members of households and is not directly obtained from them. While obtaining information directly from all target populations is ideal for understanding attitudes, opinions, and experiences, it was not logistically possible for the baseline. Midterm qualitative data collection approaches are intended to address some of these information gaps.

The baseline data showed some important differences in the intervention area as compared to the non-intervention comparison area. This result is not surprising, given that the selection of the FUTURES program implementation area was not random, and was based on many factors that may make the intervention area "unique", including among others, the location of the kebeles in reference to the Yayu forest and the presence of other development programs acting in the area. The planned quasi-experimental design using a difference-in-differences analysis at endline, remains a strong evaluation choice that can adjust for the potential confounders identified at baseline.

Due to caution surrounding data collection during the on-going COVID-19 pandemic as well as security concerns and delays related to the State of Emergency in Ethiopia, the timing of the baseline data collection came after the initiation of FUTURES project activities. This may have impacted outcomes for which the intervention area showed higher performance than the comparison area. These are noted in the report as best possible.

Midterm data collection will focus on qualitative methods and endeavor to address many of the limitations noted in this report- including the direct inclusion and participation of female and male adolescents and youth and male adults in the evaluation, and a deeper investigation of the links between reproductive health, agriculture, conservation, and livelihoods, and how gender interacts with these.

Recommendations and next steps

Based on the baseline data collection effort, the following implementation responses are recommended:

- Implementation of activities that increase women's access to financial services. Women's access to a bank account or credit was less than 30% in the intervention area.
- IIs and survey results related to low participation in PFMs confirmed the importance of organizing and supporting PFM groups.
- Strengthening forest user groups to conserve the existing forests and encourage tree planting and management will be helpful. There are promising steps towards planting trees on degraded lands to conserve forests and to mitigate the effects of climate change. However, such initiatives were less common among intervention areas than comparison areas. Working towards realizing the anticipated benefits from forests could have a multiplier effect in this regard.
- Capacity building through training and demonstrations on methods of improved agricultural practices could improve their adoption. While the survey found a high level of knowledge of improved agricultural practices, the adoption was very low, especially for minimum tillage, mulching, green manure, compost application, agroforestry, integrated pest management and climate smart agriculture.
- There is high food insecurity in the study area, with less than 50 percent of households reporting food security and one out of five households in the intervention area reporting severe food insecurity. Activities designed to increase the adoption of agroforestry and climate smart agriculture may improve productivity and food security in these households over time.
- Inclusion of family planning messaging in cross-sectoral activities involving men. Among nonusers, only 54 percent felt their husband or partner would be supportive of future family planning.
- Reproductive health services, especially testing and treatment of sexually transmitted diseases, were not adequately available at health facilities. Implementation of activities that provide information about sexually transmitted diseases, gender-based violence, and reproductive health more generally, and where to obtain these services, will help improve access.
- Implementation of activities to provide updated YFHS training to facility-based and HEW family planning providers, as 58 percent in the intervention area had no training or updates in the past two years.
- Implementation of activities at the community and provider level to address consequences of negative attitudes about sexual activity among unmarried youth. Negative attitudes about adolescent sexual activity were observed in both women's and provider's data.
- SDGAG analysis points to prioritized effort needed in the areas of ecologic, economic, and governance dimensions.

As a result of the baseline findings, next steps include:

- Discuss findings and implications for implementation activities and future MEL activities
- Update the MEL plan based on indicator operationalization during baseline data collection
- Consider baseline results in planning for mid-term data collection

Conclusions

The FUTURES project aims to achieve sustainable forest biodiversity and improved reproductive health and livelihoods of women and young people in the Yayu Coffee Forest Biosphere Reserve through an integrated, multi-sectoral approach. Baseline data were collected in December 2021 to obtain information on key agricultural, conservation, health, livelihood, and gender behaviors and attitudes. The data collected were quantitative from women of reproductive age living in intervention and comparison areas of the YCFBR, and family planning providers working in health posts and health centers serving these areas. Qualitative data related to the performance of various development sectors at the woreda level were also collected, and informational interviews were conducted to obtain data on participation and functioning of PFM groups. The report presents findings, recommendations, and next steps based on the analysis of these baseline data.

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Appendix 1. Data Collection Tools

- A. Women's survey
- B. Family planning provider's survey
- C. Sustainable Development Analysis Grid

Appendix 1a.

Womens_Questionnaire_v14

Field	Question		Answer		
data_collector_name (required)	Data collector name				
data_collector_phone_number (required)	Data collector phone number E.g. 0911304050				
survey_date (required)	Indicate the date:				
region (required)	01) Region:	1 Oromia			
zone	02) Zone	buno_bede	elle Buno Bedelle		
		illubabo	Illubabor		
woreda (required)	03) Name of woreda	alge_sachi	Alge Sachi		
			Bilo Nopa		
		chora	Chora		
		doreni	Doreni		
		hurumu	Hurumu		
		yayu	Yayu		
kebele (required)	04) Name of kebele	1 Alge			
		2 H/Mog	ñ		
		3 Yagere			
		4 S/Ganj			
		4 S/Ganj 5 Iriyo			
		6 Samba	to		
		7 Supe c			
			8 Chokorsa Dayu		
		9 Ali			
		10 M/Cag			
		11 M/Ekel			
		12 L/A/Bo	na		
		13 Jato			
		14 Semar	0		
		15 Deleks	а		
		16 Dilbi			
		17 SiboNo	ogo		
		18 Chega			
		19 Abdalla	аа		
		20 Bero N	luri		
		21 Halelul	Hadesa		
		22 Tobo			
		23 Diduu			
		24 H/ Abb	0		
		25 D/ Har	00		
		26 Sibo			
		27 Keresi			
		28 Sonta			
		29 Hurum	u Town		
		30 T/Yobi			
		31 Inatarc			
		32 Yembo			
		33 Witate			
		34 Leka			
		35 Achibo			
		36 J/Shon			
		37 Bo/Me			
and (required)	07) Decard the CDC point of the boundhold	38 Kemise			
gps (required)	07) Record the GPS point of the household. Please wait fill the accuracy is less than 5m. It will record automatically.				
note_hhvisit	HOUSEHOLD VISIT				
note_hhvisit_2	Household visit details				
instance_name	What is the name of the head of the household?				
hhv_1 (required)	Household visit 1: Is there anyone in the house?	1 Respon	dent is at home		
	If there is no one in the house, please schedule next visit, and save the questionnaire.	0 Respon	dent NOT at home		
eligible_1 (required)	Is there a woman who is eligible for this study?	1 YES			
	Married women between age 15 - 49 are eligible. < br/>/f the women head of the household is NOT eligible for this study, please	0 NO			

Field	Question	Answer
hhv_2 (required)	Household visit 2: Is there anyone in the house?	1 Respondent is at home
	If there is no one in the house, please schedule next visit, and save the questionnaire.	0 Respondent NOT at home
eligible_2 (required)	Is there a woman who is eligible for this study?	1 YES
	Married women between age 15 - 49 are eligible. < br/>br/>If the women head of the household is NOT eligible for this study, please	0 NO
	skip this household.	
hhv_3 (required)	Household visit 3: Is there anyone in the house? If there is no one in the house, please schedule next visit, and save the questionnaire.	1 Respondent is at home
1000/0 0 0 10 10		0 Respondent NOT at home
eligible_3 (required)	Is there a worman who is eligible for this study? Married wormen between age 15 - 49 are eligible. shr/if the wornen head of the household is NOT eligible for this study, please skip this household.	1 YES 0 NO
read_consent (<i>required</i>)	Hello. My name is	
consent_granted (required)	May I begin the interview now? Would you like to participant in this study?	1 Respondent agrees to be
consent_granted (required)	wyound you like to participant in this study?	interviewed
		0 Respondent does NOT agree to be
		interviewed
note hh charactersitcs	READ: First, I would like to ask you some questions about your household.	Interviewed
	01) Observe main material of the roof of the dwelling. Record observation	11 NO ROOF
q01 <i>(required)</i>	01) Observe main material of the root of the dwelling. Record observation	
		12 THATCH/MUD 13 SOD
		21 MAT/ PLASTIC SHEET
		22 REED/BAMBOO
		23 WOOD PLANKS
		24 CARDBOARD
		31 METAL/CORRUGATED IRON
		32 WOOD
		33 FIBER/ASBEST
		34 CERAMICITILES
		35 CEMENT
		36 ROOFING SHINGLES
		96 OTHER
q01_other (required)	01.other) Please specify the other?	Contraction and the second second
q02 (required)	02) What is the main source of drinking water for members of your household?	11 PIPED INTO DWELLING
		12 PIPED TO YARD/PLOT
		13 PIPED TO NEIGHBOR
		14 PUBLIC TAP/STANDPIPE
		21 TUBE WELL OR BOREHOLE
		31 PROTECTED WELL
		32 UNPROTECTED WELL
		41 PROTECTED SPRING
		42 UNPROTECTED SPRING
		51 RAIN WATER
		61 TANKER TRUCK (BOTI)
		71 CART WITH SMALL TANK
		81 SURFACE WATER (RIVER/DAM
		LAKE/POND/STREAM/CANAL/
		IRRIGATION CHANNEL)
		91 BOTTLED WATER
		96 OTHER
q02_other (required)	02.other) Please specify the other?	
q03 (required)	03) What type of fuel does your household mainly use for cooking?	1 ELECTRICITY
		2 LPG
		3 NATURAL GAS
		4 BIOGAS
		5 KEROSENE

Field	Question	Answer
		6 CHARCOAL
		7 WOOD
		8 STRAW/SHRUBS/GRASS
		9 AGRICULTURAL CROP
		10 ANIMAL DUNG
		96 OTHER
q03_other (<i>required</i>)	03.other) Please specify the other?	SS Official
q04 (required)	04) Does this household own any livestock, herds, other farm animals, or poultry?	1 YES
		0 NO
q05	05) How many of the following animals does this household own?	I Post Post
	IF NONE, RECORD '00'. http://www.ecord.if.gs.or.more, RECORD '95'. http://www.ecord.igs.	
q05_a (required)	05.a) Milk cows, oxen or bulls?	
q05_b (required)	05.b) Other cattle?	
q06_c (required)	05.c) Horses, donkeys, or mules?	
q05_d (required)	05.d) Camels?	
q05_e (required)	05.e) Goats?	
q05_f (required)	05.f) Sheep?	
q05_g (required)	05 g) Chickens or other poultry?	
q05_h (required)	05.h) Beehives?	
q06 (required)	06) Does any member of this household own any agricultural land?	1 YES
100 fredances	or provident memore or this nonserior own any spirchtural statute	0 NO
207 (required)	07) How many timade lights or bactars of agricultural land do members of this bausability and	U NO
q07 (required)	07) How many timads, kerts, or hectars of agricultural land do members of this household own?	4 704072
q07_a (required)	07.a) What was the unit used in answering the previous question?	1 TIMADS
		2 KERTS
		3 HECTAR
q08 (required)	08) Is your name on the title deed for any land that is owned?	1 YES
		0 NO
q09 (required)	09) Do you own this house either alone or jointly with someone else?	1 ALONE
		2 JOINTLY
		3 DO NOT OWN THIS HOUSE
q10	10) Does your household have:	
q10_a (required)	10. a) Electricity?	1 YES
110_0 (reduindy	To: B/ Elocation and	0 NO
- 40 L A		
q10_b (required)	10. b) A radio?	1 YES
		0 NO
q10_c (required)	10. c) A television?	1 YES
		0 NO
q10_d <i>(required)</i>	10. d) A non-mobile telephone?	1 YES
		0 NO
q10_e <i>(required)</i>	10. e) A computer?	1 YES
		0 NO
q10_f (<i>required</i>)	10.f) A refrigerator?	1 YES
1 - 1 - 1 - 1 - 1 C		0 NO
n10 a /required ¹	10. g) A table?	
q10_g <i>(required)</i>	IV. 9/ A Labre P	1 YES
		0 NO
q10_h <i>(required)</i>	10. h) A chair?	1 YES
		0 NO
q10_i (<i>required</i>)	10. i) A bed with cotton/sponge/spring mattress?	1 YES
		0 NO
q10_j (<i>required</i>)	10. j) An electric mitad?	1 YES
		0 NO
q10_k (required)	10. K) A kerosene lamp/pressure lamp?	1 YES
		0 NO
11	11) Does any member of this household own:	11 11 11 11 11 11 11 11 11 11 11 11 11
q11_a (required)	11. a) A watch	1 YES
	1	0 NO
a11 b (maujuad)	11 b) & mobile abone()	
q11_b (required)	11. b) A mobile phone?	1 YES
		0 NO
	11. c) A bicycle?	1 YES
q11_c <mark>(required)</mark>		
q11_c (required)		0 NO

Field	Question	Answer
q11_e (required)	11. e) An animal-drawn cart?	1 YES
		0 NO
q11_f (required)	11. f) A car or truck?	1 YES
		0 NO
q11_g (required)	11. g) A bajaj?	1 YES
		0 NO
q12 (required)	12) Does any member of this household have a bank account or microfinance savings account?	1 YES
412 (rodanoa)	12) Does any member of this notisenor have a bank account of micromance savings accounts	0 NO
10 Z		
q13 (required)	13) What are the major livelihood/income earning activity for the household?	1 CROP PRODUCTION
		2 LIVESTOCK PRODUCTION
		3 OFF-FARM SELF EMPLOYMEN FOREST EXTRACTION (TIMBE POLE, CHARCOAL, FIRE WOOD,)
		4 OFF-FARM WAGE EMPLOYMENT, NON-TIMBER FOREST PRODUCTS (COFFEE HONEY, SPICES)
		5 REMITTANCES
		96 OTHER
q131	Crop production	1 YES
		0 NO
q132	Livestock production	1 YES
		0 NO
q133	Off-farm self-employment, forest extraction (timber, pole, charcoal, fire wood,)	1 YES
		0 NO
q134	Off-farm wage employment, non-timber forest products (coffee, honey, spices)	1 YES
1001	on rom wege employment, non-timber lenest predicts (cance, nendy, species.)	0 NO
-405	Polenker (202	
q135	Remittances	1 YES
		0 NO
q1396	Other	1 YES
		0 NO
q13_other (required)	13.other) Please specify the other	
note_demographics	READ: Now I will ask some questions about yourself and the members of the household.	
q101 <i>(required)</i>	101) How long have you been living continuously in (NAME OF CURRENT CITY, TOWN OR VILLAGE OF RESIDENCE)? IF LESS THAN ONE YEAR, RECORD '00' YEARS	
q102 <mark>(required)</mark>	102) How old are you?	
q103 (required)	103) What is your current marital status?	1 MARRIED/IN UNION
		2 SINGLE/NEVER MARRIED
		3 DIVORCED OR SEPARATED
		4 WIDOWED
q104_a (required)	104.a) Have you attended any formal education?	1 YES
		0 NO
q104_b (required)	104.b) What is the highest level of school you have attended?	1 PRIMARY
		2 SECONDARY
		3 TECHNICAL/VOCATIONAL
		4 HIGHER
q105_intro	105) Now I would like you to read this sentence to me. SHOW CARD TO RESPONDENT: IF RESPONDENT CANNOT READ WHOLE SENTENCE, PROBE Can you read any part of the sentence to me?	
q105_reading_card	Good health for all.	
	Parents love their children.	
	Farming is hard work.	
	Birds fly high in the sky.	
q105 (required)	105) Record reading level	1 CANNOT READ AT ALL
		2 ABLE TO READ ONLY PART OF
		THE SENTENCE
		3 ABLE TO READ WHOLE
		SENTENCE
		4 BLIND/VISUALLY IMPAIRED
q106 (required)	106) What is your religion?	1 ORTHODOX
		The second
		2 MUSLIM

field	Question	Answer
		4 PROTESTANT
		5 WAKEFANA
		6 TRADITIONAL
		96 OTHER
106_other (required)	106.other) Please specify the other?	
108 (required)	108) How many children have you given birth to? If no child please write 0	
108_daughter (required)	108.a) How many of them are Female?	
108_son (required)	If no daulers, please write 0 108.b) How many them are Male?	
109 (required)	If no sons, please write 0 109) Including yourself, how many people currently live in your household?	
	UCAA DHIIRAA	
h_members_note_1	READ: I would like to find out some information about each of these household members.	
h_members_note_2	One at a time, please tell me who (else) lives in the household with you? LIST EACH MEMBER ON A SEPARATE LINE	
lousehold Members (1)		(Repeated group)
q110_a (required)	110.a) Name	
q110_b (required)	110.b) What is [q110_a]'s relationship to you?	1 Husband/Partner
		2 Daughter
		3 Son
		4 Mother
		5 Father
		6 Sister
		7 Brother
		8 Niece
		9 Nephew
		96 Other
q110_other (required)	110 other) Please specify the other?	
q110_c (required)	110.c) Is [q110_a] male or female?	1 MALE
d lio_c (ledaned)	The ons [driv_a] male on remainer	2 FEMALE
q110_d (required)	110.d) What is [q110_a]'s age in years?	2 FEMALC
-110 - (If less than 1 year write 0.	
q110_e (required)	110.e) What is [q110_a]'s highest level of education? IF OVER AGE 5	0 NO FORMAL EDUCATION
	T. STRICTION S.	1 PRIMARY
		2 SECONDARY 3 TECHNICAL/VOCATIONAL
-440.6 (4 HIGHER
q110_f (required)	110.f) What is [q110_a]'s current marital status? IF OVER AGE 15	1 MARRIED/IN UNION
		2 SINGLE/NEVER MARRIED
		3 DIVORCED OR SEPARATED
q110_g (required)	110.g) What is [q110_a]'s current occupation?	4 WIDOWED
	IF OVER AGE 15	
q438 (required)	438) Is [q110_a] engaged in any community event?	1 YES
		0 NO
q439 (required)	439) During the last 12 months, do you think that [q110_a] was involved /participated in volunteerism or any issues	1 YES
	of social responsibility in the community?	0 NO
q440 (required)	440) During the last 12 months, do you think that [q110_a] was involved /participated informally with someone or	1 YES

field	Question	Answer
q435 (required)	435) Do you have regular discussions with [q110_a] on issues related to:	1 a) Sexuality
	Please read all the options and select all that apply.	2 b) Family planning
		3 c) Menstural cycle, hygiene and
		management
		4 d) Relationships
		5 e) STI/HIV/AIDS
		6 f) Unwanted Pregnancy
		7 g) Early marriage
		8 h) Sexual harrassment
		0 None of the above
q4351	Sexuality	1 YES
		0 NO
q4352 q4353	Family planning Menstural cycle, hygiene and man agement	1 YES 0 NO 1 YES
	Monstanai cyclo, nygiono ana managomone	0 NO
- 405 4		
q4354	Relationships	1 YES
		0 NO
q4355	STI/HIV/AIDS	
q4355	STI/HWADS	1 YES
q4355	STINHIVAIDS	
		0 NO
	STI/HIV/ADS Unwanted Pregnancy	0 NO 1 YES
q4356	Unwanted Pregnancy	0 NO 1 YES 0 NO
q4356		0 NO 1 YES
q4356	Unwanted Pregnancy	0 NO 1 YES 0 NO
q4356 q4357	Unwanted Pregnancy	0 NO 1 YES 0 NO 1 YES 0 NO
q4356 q4357	Umwanted Pregnancy Early marriage	0 NO 1 YES 0 NO 1 YES 0 NO 1 YES 1 YES
q4356 q4357 q4358	Umwanted Pregnancy Early marriage Sexual harrassment	0 NO 1 YES 0 NO 1 YES 0 NO 1 YES 0 NO 0 NO
	Umwanted Pregnancy Early marriage	0 NO 1 YES 0 NO 1 YES 0 NO 1 YES 0 NO 1 YES 1 YES
q4356 q4357 q4358 q4350	Unwanted Pregnancy Early marriage Sexual harrassment None of the above	0 NO 1 YES 0 NO
q4356 q4357 q4358 q4350	Umwanted Pregnancy Early marriage Sexual harrassment	0 NO 1 YES 1 YES 1 YES 1 YES
q4356 q4357 q4358 q4350	Unwanted Pregnancy Early marriage Sexual harrassment None of the above	0 NO 1 YES 0 NO
q4356 q4357 q4358 q4350 q4350 q437 (required)	Unwanted Pregnancy Early marriage Sexual harrassment None of the above	0 NO 1 YES 1 YES 1 YES
4355 4357 4358 44350 44350 4437 <i>(required)</i> ate_livelhood	Image: Image and the above Alapha and the above Alapha and the above Alapha and the above	0 NO 1 YES 0 NO
4355 4357 4358 4350 4350 437 (<i>required</i>) 4437 (<i>required</i>)	Image: Image and the above 289 Do you (would you) allow [q110_a] to use family planning? READ: Now I'm going to ask you questions about your work and livelihood practices.	0 NO 1 YES 1 YES 1 YES
q4356 q4357 q4358 q4350 q4350 q437 (required) ste_livelhood 201 (required)	Image:	0 NO 1 YES 0 NO
q4356 q4357 q4358 q4350 q4350 q437 (required) xte_livelhood 201 (required) 202 (required)	Image Unwanted Pregnancy Early marriage Sexual harrassment None of the above 429) Do you (would you) allow [q110_e] to use family planning? READ: Now I'm going to ask you questions about your work and livelihood practices. 201) Have you done any work in the last 12 months? 202) What is your occupation? That is, what kind of work do you mainly do?	0 NO 1 YES 0 NO
q4356 q4357 q4358 q4350 q4350 q437 (required) xte_livelhood 201 (required) 202 (required)	Image:	0 NO 1 YES 1 YES 1 NO 1 YES 1 NO 1 YES 1 NO
q4356 q4357 q4358 q4350 q4350 q437 (required) xte_livelhood 201 (required) 202 (required)	Image Unwanted Pregnancy Early marriage Sexual harrassment None of the above 429) Do you (would you) allow [q110_e] to use family planning? READ: Now I'm going to ask you questions about your work and livelihood practices. 201) Have you done any work in the last 12 months? 202) What is your occupation? That is, what kind of work do you mainly do?	0 NO 1 YES 1 YES 0 NO 1 YES 2 NO
q4356 q4357 q4358 q4350 q4350 q437 (required) xte_livelhood 201 (required) 202 (required)	Image: Constant of the above Algo: Al	0 NO 1 YES 0 NO
q4356 q4357 q4358 q4350 q4350 q437 (required) 201 (required) 202 (required) 203 (required)	Image Unwanted Pregnancy Early marriage Sexual harrassment None of the above 429) Do you (would you) allow [q110_e] to use family planning? READ: Now I'm going to ask you questions about your work and livelihood practices. 201) Have you done any work in the last 12 months? 202) What is your occupation? That is, what kind of work do you mainly do?	0 NO 1 YES 1 YES 0 NO 1 YES 2 NO
q4356 q4357 q4358 q4350 q4350 q4350 q437 (<i>lequired</i>) q201 (<i>lequired</i>) 202 (<i>lequired</i>) 202 (<i>lequired</i>)	Image: Constant of the above Algo: Al	0 NO 1 YES 1 FOR FAMILY MEMBER 2 FOR SOMEONE ELSE 3 SELF-EMPLOYED
q4356 q4357 q4358 q4350 q4350 q437 (<i>required</i>) q437 (<i>required</i>) 201 (<i>required</i>) 202 (<i>required</i>) 202 (<i>required</i>)	Image: Constant of the above Algo: Al	0 NO 1 YES 1 YES 1 YES 1 FOR FAMILY MEMBER 2 FOR SOMEONE ELSE 3 SELF-EMPLOYED 1 THROUGHOUT THE YEAR
q4356 q4357 q4358 q4350 q4350 q437 (<i>required</i>) q437 (<i>required</i>) 202 (<i>required</i>) 203 (<i>required</i>) 204 (<i>required</i>)	Image: Image Imag	0 NO 1 YES 1 YES 1 NO 2 FOR SOMEONE ELSE 3 SEL-F.EMPLOYED 1 THROUGHOUT THE YEAR 2 SEASONALLY/PART OF THE YEAR 3
q4356 q4357 q4357 q4358 q4350 q4350 q437 (required) q437 (required) 201 (required) 202 (required) 203 (required) 204 (required)	Image: Constant of the above Algo: Al	0 NO 1 YES 0 NO 2 FOR SOMEONE ELSE 3 SELF-EMPLOYED 1 THROUGHOUT THE YEAR 2 SEASONALLY/PART OF THE YEAR 3 3 ONCE IN A WHILE 1 CASH ONLY
q4356 q4357 q4357 q4358 q4350 q4350 q437 (required) q437 (required) 201 (required) 202 (required) 203 (required) 204 (required)	Image: Image Imag	0 NO 1 YES 0 NO 2 FOR SOMEONE ELSE 3 SELF-EMPLOYED 1 THROUGHOUT THE YEAR 2 SEASONALLY/PART OF THE YEAR 3 ONCE IN A WHILE 3 ONCE IN A WHILE 1 CASH ONLY
q4356 q4357 q4357 q4358 q4350 q4350 q437 (required) q437 (required) 201 (required) 202 (required) 203 (required) 204 (required)	Image: Image Imag	0 NO 1 YES 0 NO 2 FOR SOMEONE ELSE 3 SELF-EMPLOYED 1 THROUGHOUT THE YEAR 2 SEASONALLY/PART OF THE YEAR 2 SASIONALLY/PART OF THE YEAR 3 ONCE IN A WHILE 1 CASH ONLY 2 CASH AND IN-KIND 3 IN-KIND ONLY
q4356 q4357 q4358 q4350	Image: Image Imag	0 NO 1 YES 0 NO 2 FOR SOMEONE ELSE 3 SELF-EMPLOYED 1 THROUGHOUT THE YEAR 2 SEASONALLY/PART OF THE YEAR 3 ONCE IN A WHILE 3 ONCE IN A WHILE 1 CASH ONLY

Field	Question	Answer	
q206_a (required)	206.a) I have a lot of influence in household decision-making on wage employment paid in cash or in-kind.	5 STRONGLY AGREE	
	200.a) Frave a lot of initiatice in notisenold decision-making on wage employment paid in cash of in-kind.	4 AGREE	
		3 NIETHER AGREE/DISAGREE	
		2 DISAGREE	
		1 STRONGLY DISAGREE	
q206_b (required)	206.b) I have a lot of influence in household decision making on revenue generated from wage employment paid in	5 STRONGLY AGREE	
	cash or in-kind.	4 AGREE	
		3 NIETHER AGREE/DISAGREE	
		2 DISAGREE	
		1 STRONGLY DISAGREE	
1207 (required)	207) Do your earnings contribute to the household income?	1 YES	
		0 NO	
q208 (required)	208) Do you have an account in a bank or other financial institution that you yourself use?	1 YES	
4200 (regared)	200) Do you have an account in a bank of other initiation institution that you you ser user		
		0 NO	
q209 <mark>(required</mark>)	209) In the last 12 months, did you have access to credit?	1 YES	
		0 NO	
q210 <mark>(required)</mark>	210) What was the source of credit?	1 MICROFINANCE	
		2 BANK	
		3 COOPERATIVE	
		4 LOCAL SAVINGS GROUP	
		5 TRADITIONAL LENDER	
		96 OTHER	
q210_other (required)	210.other) Please specify the other?	a alteration	
q211 (required)	211) In the last 12 months, were you refused credit, unable to borrow or unable to borrow the desired amount?	1 YES	
		0 NO	
q212 (required)	212) Who usually decides how the money you earn will be used: you, your (husband/partner), or you and your	1 RESPONDENT	
	(husband/partner) jointly?	2 HUSBAND/PARTNER	
	(recording borrior) fourty -	3 RESPONDENT AND	
		HUSBAND/PARTNER JOINTL	
		4 RESPONDENT HAS NO	
		EARNINGS	
		96 OTHER	
q212_other (required)	212.other) Please specify the other?		
q213 (required)	213) Who usually decides how the money your husband/partner earns will be used: you, your (husband/partner), or you and your (husband/partner) jointly?	1 RESPONDENT	
		2 HUSBAND/PARTNER	
		3 RESPONDENT AND	
		HUSBAND/PARTNER JOINTL	
		4 RESPONDENT HUSBAND HA	
	_	NO EARNINGS	
		96 OTHER	
-040		30 OTTER	
q213_other (required)	213.other) Please specify the other?		
q214 (required)	214) Would you say that the money that you earn is more than what your (husband/partner) earns, less than what he	1 MORE THAN HIM	
	earns, or about the same?	2 LESS THAN HIM	
		3 ABOUT THE SAME	
		4 HUSBAND/PARTNER HAS NO	
		EARNINGS	
		8 DON'T KNOW	
q215 (required)	215) Who usually makes decisions about making major household purchases?	1 RESPONDENT	
and the state of t	,	2 HUSBAND/PARTNER	
		3 RESPONDENT AND	
		HUSBAND/PARTNER JOINTL	
		4 SOMEONE ELSE	
		96 OTHER	
q215_other (required)	215.other) Please specify the other?		
q216 (required)	216) Who usually makes decision about your daughter(s) working outside of the household for pay?	1 RESPONDENT	
	- · · , · · · · · · · · · · · · · · · ·	2 HUSBAND/PARTNER	
		3 RESPONDENT AND	
		HUSBAND/PARTNER JOINTL	
		4 THE DAUGHTER HERSELF	
		5 SOMEONE ELSE	
		96 OTHER	

Field	Question	Ansı	wer
q217 (required)	217) Who usually makes decisions about your son(s) working outside of the household for pay?		1 RESPONDENT
	2 m) who addully makes decisions about your soliday working dataled of the notabilition pays		2 HUSBAND/PARTNER
			3 RESPONDENT AND
			HUSBAND/PARTNER JOINTL
			4 THE SON HIMSELF
		ł	5 SOMEONE ELSE
			6 OTHER
q217_other (required)	217.other) Please specify the other?		
q218 (required)	218) Who usually makes decision about sending your children to school?		1 RESPONDENT
	a la ante e na concreta de 🗶 e mentando de concreta e concreta de la Carlo de concreta dan obre dan entre dan este concreta dan este c		2 HUSBAND/PARTNER
			3 RESPONDENT AND
			HUSBAND/PARTNER JOINTL
			4 SOMEONE ELSE
		g	6 OTHER
q218_other (required)	218.other) Please specify the other?		
219 (required)	219) (If under age 30) Have you received life skills training in the past 12 months?	1	YES
	Examples of life skills training include >br/>Decision making Problem Solving		NO
q220 (required)	220) Did you participate in crop production and marketing in the last 12 months?		YES
dran (rodan ody			NO
q221	221) Please say whether you "Strongly agree", "Agree", "Neither agree nor disagree", "Disagree" or "Strongly	~	
4221	disagree" with the following two statements:		
q221_a (required)	221.a) I have a lot of influence in household decision-making about crop production and marketing.	5	STRONGLY AGREE
4221_a (royanou)	22 r.a) i nave a lot or initialite in nouseriola decision-making about crop production and marketing.		AGREE
			NETHER AGREE/DISAGREE
			DISAGREE
			STRONGLY DISAGREE
-204			
q221_b (required)	221.b) I have a lot of influence in household decision making on revenue generated from crop production and		STRONGLY AGREE
	marketing.		AGREE
			NETHER AGREE/DISAGREE
	222) Did you participate in livestock production and marketing in the last 12 months?		DISAGREE
			STRONGLY DISAGREE
q222 (required)			YES
			NO
q 223	223) Please say whether you "Strongly agree", "Agree", "Neither agree nor disagree", "Disagree" or "Strongly disagree" with the following two statements:		
q223_a (required)	223 a) I have a lot of influence in household decision making about livestock production and marketing.	5	STRONGLY AGREE
		4	AGREE
		3	NIETHER AGREE/DISAGREE
		2	DISAGREE
		1	STRONGLY DISAGREE
q223_b <mark>(required)</mark>	223. b) I have a lot of influence in household decision making on revenue generated from livestock production and marketing.	5	STRONGLY AGREE
		4	AGREE
		3	NIETHER AGREE/DISAGREE
		2	DISAGREE
		1	STRONGLY DISAGREE
q224 (required)	224) Did you participate in non-agricultural economic activities: small businesses, self-employment, wage	1	YES
	employment, buying and selling in the last 12 months?	C	NO
q225	225) PPlease say whether you "Strongly agree", "Agree", "Neither agree nor disagree", "Disagree" or "Strongly disagree" with the following two statements:		
q225_a (required)	225.a) I have a lot of influence in household decision making about non-agricultural economic activities: small	5	STRONGLY AGREE
una una una contra contra contra entre encontra (CCC)	businesses, self-employment, buying and selling.		AGREE
			NIETHER AGREE/DISAGREE
			DISAGREE
			STRONGLY DISAGREE
2225_b (required)	225.b) I have a lot of influence in household decision making on revenue generated from non-agricultural economic		STRONGLY AGREE
	activities: small businesses, self-employment, buying and selling.		AGREE
			NETHER AGREE/DISAGREE
			DISAGREE
			STRONGLY DISAGREE
note_afm	READ: Next, I will ask about your agricultural practices and access to forest resources.		
q301	301) In the last 12 months did you or any member of your household participate in the following group(s)?		
17.7.1	Please read all the options and select all that apply.		

Field	Question	Answer
q301_a (required)	301.a) Cooperatives	1 YES
		0 NO
q302_a (required)	302.a) Do you/they hold a leadership position in the group?	1 YES
		0 NO
q301_b (required)	301.b) Micro and small enterprise (MSE)	1 YES
		0 NO
q302_b <mark>(required)</mark>	302.b) Do you/they hold a leadership position in the group?	1 YES
		0 NO
q301_c (required)	301.c) Village leadership committee	1 YES
		0 NO
q302_c (required)	302.c) Do you/they hold a leadership position in the group?	1 YES
		0 NO
q301_d (required)	301.d) Forest user groups, green legacy (tree planting campaign)	1 YES
		0 NO
q302_d (required)	302.d) Do you/they hold a leadership position in the group?	1 YES
		0 NO
q301_f (required)	301.f) Soil and water conservation /watershed management campaigns	1 YES
		0 NO
q302_f (required)	302.f) Do you/they hold a leadership position in the group?	1 YES
		0 NO
q301_g (required)	301.g) Women's associations or women's self-help groups	1 YES
		0 NO
q302_g (required)	302.g) Do you/they hold a leadership position in the group?	1 YES
		0 NO
q301_h (required)	301.h) Village savings and loan association (VSLA)	1 YES
		0 NO
q302_h (required)	302 h) Do you/they hold a leadership position in the group?	1 YES
		0 NO
q301_i (required)	301.i) Youth associations or youth self-help groups	1 YES
		0 NO
q302_i (required)	302.i) Do you/they hold a leadership position in the group?	1 YES
		0 NO
q301_j (<i>required</i>)	301.j) Youth saving and loan associations	1 YES
		0 NO
q302_j (required)	302 j) Do you/they hold a leadership position in the group?	1 YES
		0 NO
q301_k <mark>(required)</mark>	301.k) Others?	1 YES
		0 NO
q301_K_other (required)	301.other) Please specify the other?	
q302_k (required)	302.k) Do you/they hold a leadership position in the group?	1 YES
		0 NO
q301_e (required)	301.e) In the last 12 months did you or any member of your household participate in Participatory forest	1 YES
	management (PFM)	0 NO
q302_e (required)	302.e) Do you/they hold a leadership position in the group?	1 YES
		0 NO
q303 (required)	303) What services does the household get from participation in the PFM group?	1 ADVICE ON SUSTAINABLE
	More than one response is possible.	FOREST MANAGEMENT
		2 TRAINING ON HOW TO
		HARVEST FOREST COFFEE
		3 TRAINING ON HOW TO HAN
		BEEHIVES ON TREES
		4 TRAINING ON HOW TO HARVEST SPICES AND MEDICINES
		5 TRAINING ON HOW TO HARVEST TIMBER
		6 TRAINING ON BIODIVERSIT
		96 OTHER
		0 None of the Above
q3031	Advice on sustainable forest management	1 YES
	And a second	and the product of the second s

Field	Question	Answer
q3032	Training on how to harvest forest coffee	1 YES
		0 NO
q3033	Training on how to hang beehives on trees	1 YES
-2024		0 NO
q3034	Training on how to harvest spices and medicines	1 YES 0 NO
q3035	Training on how to harvest timber	1 YES
		0 NO
q3036	Training on biodiversity conservation	1 YES
		0 NO
q30396	Other	1 YES
*2020	More of the Albaura	0 NO
q3030	None of the Above	1 YES 0 NO
q303_other (required)	303.other) Please specify the other?	0 140
q304 (required)	304) How do you judge the performance of the PEM?	1 VERY GOOD
door (reduined)	contraction de jourge de performance of the Firms	2 GOOD
		3 NEITHER GOOD NOR BAD
		4 BAD
		5 VERY BAD
q305 (required)	305) Why isn't your household a member of PFM?	1 THERE IS NO PEM IN MY AREA
		2 THERE IS NO FOREST IN
		REACH OF MY HOUSEHOLD
		3 I DON'T SEE ANY ADVANTAGE
		OF MEMBERSHIP INTO PFM
		96 OTHER
q305_other (required)	305.other) Please specify the other?	
q306 (required)	306) Does the household have any interest to be a member of PFM?	1 YES
		0 NO
q307 (required)	307) IF NO: Why or why not?	
q308 (required)	308) Do you harvest coffee?	1 YES
Tana I Antonio		0 NO
q308_a (required)	308a) If you harvest coffee, is your coffee certified to any of the private sustainability standards (PSS)?	1 YES 0 NO
2300 (required)	309) To which private sustainability standards (PSS)?	
q309 (required)		1 RAINFOREST ALLIANCE 2 FAIRTRADE
		3 ORGANIC
		4 FAIRTRADE AND ORGANIC
		96 OTHER
q3091	q309.1) Rainforest alliance	1 YES
		0 NO
q3092	q309.2) Fairtrade	1 YES
		0 NO
q3093	q309.3) Organic	1 YES
		0 NO
q3094	309.4) Fairtrade and organic	1 YES
		0 NO
q30996	q309.96) Other	1 YES
		0 NO
q309_other (required)	309 other) Please specify the other?	
q310 (required)	310) Have you ever heard about the following crop production, soil and water conservation practices, technologies and inputs? Please read all the options and select all that apply.	1 a) Minimum tillage
		2 b) Fertilizer micro-dosing
		3 c) Compost application
		4 d) Animal manure application
		5 e) Green manure application
		6 f) Improved seed
		7 g) Row planting
		8 h) Fallowing
		9 i) Mulching 10 j) Crop rotation
		11 k) Mixed or inter-cropping
		12 I) Agrochemical application
		- Wildings control approximation

Field	Question	Answer
		13 m) Integrated pest management
		14 n) Agro-forestry (fruits such as
		avocado and garden coffee)
		15 o) Climate smart agriculture
		0 None of the aboves
13101	Minimum tillage	1 YES
		0 NO
3102	Fertilizer micro-dosing	1 YES
10102	Total London doubly	0 NO
13103	Compost application	1 YES
3103	Composi application	0 NO
	(a)	
13104	Animal manure application	1 YES
		0 NO
q3105	Green manure application	1 YES
		0 NO
3106	Improved seed	1 YES
		0 NO
13107	Row planting	1 YES
		0 NO
13108	Fallowing	1 YES
12100	Fanowing	0 NO
q3109	Mulching	1 YES
		0 NO
q31010	Crop rotation	1 YES
		0 NO
q31011	Mixed or inter-cropping	1 YES
		0 NO
31012	Agrochemical application	1 YES
		0 NO
q31013	Interested a set man assesset	
431013	Integrated pest management	1 YES
		0 NO
q31014	Agro-forestry (fruits such as avocado and garden coffee)	1 YES
		0 NO
1 31015	Climate smart agriculture	1 YES
		0 NO
q3100	None of the aboves	1 YES
		0 NO
311 (required)	311) Do you have practical knowledge and skills for:	1 a) Minimum tillage
lo i i hodanody	Please read all the options and select all that apply.	2 b) Fertilizer micro-dosing
		3 c) Compost application
		4 d) Animal manure application
		5 e) Green manure application
		6 f) Improved seed
		7 g) Row planting
		8 h) Fallowing
		9 i) Mulching
		10 j) Crop rotation
		11 k) Mixed or inter-cropping
		12 I) Agrochemical application
		13 m) Integrated pest managemen
		14 n) Agro-forestry (fruits such as
		avocado and garden coffee)
		15 o) Climate smart agriculture
		0 None of the aboves
3111	Minimum tillage	1 YES
		0 NO
13112	Fertilizer micro-dosing	1 YES
		0 NO
q3113	Compost application	1 YES
	deprivation	0 NO
j 3114		
	Animal manure application	1 YES

Field	Question	Answer
q3115	Green manure application	1 YES
		0 NO
q3116	Improved seed	1 YES
		0 NO
13117	Row planting	1 YES
		0 NO
q3118	Fallowing	1 YES
		0 NO
q3119	Mulching	1 YES
		0 NO
q31110	Crop rotation	1 YES
-04444		0 NO
q31111	Mixed or inter-cropping	1 YES
-24442	A manufacture front front and	0 NO
131112	Agrochemical application	1 YES
-04440	Intervented a set or an example	0 NO
q31113	Integrated pest management	1 YES
q31114	Agro-forestry (fruits such as avocado and garden coffee)	0 NO
P1117	warmanaania (uma andu sa mundana qun Aquinau chulaa)	1 YES 0 NO
q31115	Climate smart agriculture	1 YES
491110	Cimitate Sinart agriculture	0 NO
q3110	None of the aboves	1 YES
40110		0 NO
q312 (required)	312) Have you ever applied:	1 a) Minimum tillage
to in field and	Please read all the options and select all that apply.	2 b) Fertilizer micro-dosing
		3 c) Compost application
		4 d) Animal manure application
		5 e) Green manure application
		6 f) Improved seed
		7 g) Row planting
		8 h) Fallowing
		9 i) Mulching
		10 j) Crop rotation
		11 k) Mixed or inter-cropping
		12 I) Agrochemical application
		13 m) Integrated pest management
		14 n) Agro-forestry (fruits such as
		avocado and garden coffee)
		15 o) Climate smart agriculture
-24.24		0 None of the aboves
13121	Minimum tillage	1 YES 0 NO
q3122	Fertilizer micro-dosing	1 YES
10122	Perunzer micro-dosing	0 NO
q3123	Compost application	1 YES
45125	Compost application	0 NO
q3124	Animal manure application	1 YES
40124	Anmai manure application	0 NO
q3125	Green manure application	1 YES
10120		0 NO
13126	Improved seed	1 YES
Nerson's	This or ou soou	0 NO
13127	Row planting	1 YES
10 M		0 NO
13128	Fallowing	1 YES
5		0 NO
q3129	Mulching	1 YES
		0 NO
q31210	Crop rotation	1 YES

Field	Question	Answer
q31211	Mixed or inter-cropping	1 YES
		0 NO
q31212	Agrochemical application	1 YES
		0 NO
q31213	Integrated pest management	1 YES
		0 NO
q31214	Agro-forestry (fruits such as avocado and garden coffee)	1 YES
		0 NO
q31215	Climate smart agriculture	1 YES
	×.	0 NO
q3120	None of the aboves	1 YES
40.120		0 NO
aging (required)	313) Have you applied the following in the past 12 months:	
q313 (required)	Please read all the options and select all that apply.	1 a) Minimum tillage
		2 b) Fertilizer micro-dosing
		3 c) Compost application
		4 d) Animal manure application
		5 e) Green manure application
		6 f) Improved seed
		7 g) Row planting
		8 h) Fallowing
		9 i) Mulching
		10 j) Crop rotation
		11 k) Mixed or inter-cropping
		12 I) Agrochemical application
		13 m) Integrated pest managemen
		14 n) Agro-forestry (fruits such as
		avocado and garden coffee)
		15 o) Climate smart agriculture
		0 None of the aboves
13131	Minimum tillage Fertilizer micro-dosing	1 YES
40101		0 NO
-2422		
q3132		1 YES
12122		0 NO
q3133	Compost application	1 YES
		0 NO
q3134	Animal manure application	1 YES
		0 NO
q3135	Green manure application	1 YES
		0 NO
q3136	Improved seed	1 YES
		0 NO
q3137	Row planting	1 YES
		0 NO
q3138	Fallowing	1 YES
		0 NO
q3139	Mulching	1 YES
40100	muching	0 NO
-04040		biological sector and the sector sect
q31310	Crop rotation	1 YES
		0 NO
q31311	Mixed or inter-cropping	1 YES
		0 NO
131312	Agrochemical application	1 YES
		0 NO
j31313	Integrated pest management	1 YES
		0 NO
q31314	Agro-forestry (fruits such as avocado and garden coffee)	1 YES
		0 NO
131315	Climate smart agriculture	1 YES
		0 NO
q3130	None of the aboves	1 YES
Field	Question	Answer
----------------------------	---	---
q314 (required)	314) Has anyone in your household received training in the past 12 months for the following crop production, soil	1 a) Minimum tillage
	and water conservation practices, technologies and inputs:	2 b) Fertilizer micro-dosing
	Please read all the options and select all that apply.	3 c) Compost application
		4 d) Animal manure application
		5 e) Green manure application
		6 f) Improved seed
		7 g) Row planting
		8 h) Fallowing
		9 i) Mulching
		10 j) Crop rotation
		11 k) Mixed or inter-cropping
		12 I) Agrochemical application
		13 m) Integrated pest management
		14 n) Agro-forestry (fruits such as
		avocado and garden coffee)
		15 o) Climate smart agriculture
		0 None of the aboves
q3141	Minimum tillage	1 YES
		0 NO
q3142	Fertilizer micro-dosing	1 YES
		0 NO
-0110		
q3143	Compost application	1 YES
		0 NO
q3144	Animal manure application	1 YES
		0 NO
q3145	Green manure application	1 YES
		0 NO
-0140		
q3146	Improved seed	1 YES
		0 NO
q3147	Row planting	1 YES
		0 NO
q3148	Fallowing	1 YES
or 1 - Frank (1997)		0 NO
2112		- Andrew Contraction of the second
q3149	Mulching	1 YES
		0 NO
q31410	Crop rotation	1 YES
		0 NO
q31411	Mixed or inter-cropping	1 YES
		0 NO
q31412	Agrochemical application	1 YES
		0 NO
q31413	Integrated pest management	1 YES
		0 NO
q31414	Agro-forestry (fruits such as avocado and garden coffee)	1 YES
1	· · · · · · · · · · · · · · · · · · ·	0 NO
-04445		
q31415	Climate smart agriculture	1 YES
		0 NO
q3140	None of the aboves	1 YES
		0 NO
q315 (required)	315) Which organization gave the training?	1 MINISTRY OF AGRICULTURE
2 ·	SELECT ALL MENTIONED	2 SUSTAINABLE LAND
		Processing and a state of the second s
		MANAGEMENT
		3 FUTURES
		4 NABU
		5 FARM AFRICA
		96 OTHER
q3151	Ministry of agriculture	1 YES
40.01	minary of dynamic	
		0 NO
q3152	Sustainable land management	1 YES
		0 NO
q3153	Futures	1 YES
3.5		0 NO

Nabu Farm africa Other 315 other) Please specify the other? 316) Is Yayu forest in reach of your household? 317) How many minutes do you need to walk to find the nearest boundary at the moment? 318) How many minutes did you need to walk to find the nearest boundary 5 years ago? 319) Do you grow coffee in the forest?	1 YES 0 NO 1 YES 0 NO 1 YES 0 NO 1 YES 0 NO 1 YES 1 YES 1 YES 1 YES 1 YES 1 YES 1 YES
Other 315.other) Please specify the other? 316.other) Please specify the other? 316.) Is Yayu forest in reach of your household? 317) How many minutes do you need to walk to find the nearest boundary at the moment? 318) How many minutes did you need to walk to find the nearest boundary 5 years ago?	1 YES 0 NO 1 YES 0 NO 1 YES 0 NO 1 YES 0 NO
Other 315.other) Please specify the other? 316.other) Please specify the other? 316.) Is Yayu forest in reach of your household? 317) How many minutes do you need to walk to find the nearest boundary at the moment? 318) How many minutes did you need to walk to find the nearest boundary 5 years ago?	0 NO 1 YES 0 NO 1 YES 0 NO
315.other) Please specify the other? 316.) Is Yayu forest in reach of your household? 317) How many minutes do you need to walk to find the nearest boundary at the moment? 318) How many minutes dd you need to walk to find the nearest boundary 5 years ago?	1 YES 0 NO 1 YES 0 NO
315.other) Please specify the other? 316.) Is Yayu forest in reach of your household? 317) How many minutes do you need to walk to find the nearest boundary at the moment? 318) How many minutes dd you need to walk to find the nearest boundary 5 years ago?	0 NO 1 YES 0 NO
316) Is Yayu forest in reach of your household? 317) How many minutes do you need to walk to find the nearest boundary at the moment? 318) How many minutes did you need to walk to find the nearest boundary 5 years ago?	1 YES 0 NO
316) Is Yayu forest in reach of your household? 317) How many minutes do you need to walk to find the nearest boundary at the moment? 318) How many minutes did you need to walk to find the nearest boundary 5 years ago?	0 NO
317) How many minutes do you need to walk to find the nearest boundary at the moment? 318) How many minutes did you need to walk to find the nearest boundary 5 years ago?	0 NO
318) How many minutes did you need to walk to find the nearest boundary 5 years ago?	
318) How many minutes did you need to walk to find the nearest boundary 5 years ago?	1 YES
	1 YES
319) Do you grow coffee in the forest?	1 YES
	7 1. March 1.
	0 NO
320) Do you use the forest to collect timber products?	1 YES
	0 NO
321) Do you use the forest to collect non-timber (other than coffee) forest products?	1 YES
	0 NO
322) What are the main non-timber forest products you collected?	1 WILD COFFEE
	2 HONEY
	3 SPICES
	4 MEDICINES
	5 FUEL WOOD
	6 CHARCOAL
	7 CONSTRUCTION POLES
	96 OTHER
Wild coffee	1 YES
	0 NO
Honey	1 YES
	0 NO
Spices	1 YES
	0 NO
Medicines	1 YES
	0 NO
Fuel wood	1 YES
	0 NO
Charcoal	1 YES
	0 NO
Construction poles	1 YES
Construction pores	0 NO
Other	1 YES
oure	0 NO
202 others Diagon choolik the other?	0 110
	1 Yes
way nav an analashing of the relation of an goal of an the last life years?	0 No
	2 Don't Know
30/1) Do you think the evailability of the forest is increasing decreasing or polithor?	1 INCREASING
5247 25 you think the availability of the forest is increasing, decreasing, of heither r	2 DECREASING
	3 NETHER
325) Do you think the increase (decrease in fact mediately or daw?	1 FAST
229) po you minik me increase/uecrease is rasi, modelate, or slow?	2 MODERATE
	3 SLOW
208) Milliont are the 4 most important source of the develope 0 (Linux development) the following source of	
	1 EXPANSION OF AGRICLTURE
	2 EXPANSION OF COFFEE
	3 OVER-EXPLOITATION OF FOREST PRODUCTS
	4 SETTLEMENT EXPANSION
	5 LIVESTOCK FREE GRAZING
207) What will be paper if the surrent forget source dealing transformed and the sector of	
321) what will usphere in the content rotest cover decline trend couplines?	1 SHORTAGE OF TIMBER 2 SHORTAGE OF POLE
	The source of the second second
	3 SHORTAGE OF FIREWOOD 4 SHORTAGE OF CHARCOAL
	321) Do you use the forest to collect non-timber (other than coffee) forest products? 322) What are the main non-timber forest products you collected? Wild coffee Honey

Field	Question	Answer
		5 SHORTAGE OF WATER
		6 SHORTAGE OF FORAGE
		7 SHORTAGE OF FODDER
		96 OTHER
		0 None of the above
q3271	Shortage of timber	1 YES
1		0 NO
q3272	Shortage of pole	1 YES
90212		0 NO
q3273	Shortage of firewood	1 YES
43213	Shortage of mewood	0 NO
0074		and the second se
q3274	Shortage of charcoal	1 YES
		0 NO
q3275	Shortage of water	1 YES
		0 NO
q3276	Shortage of forage	1 YES
		0 NO
q3277	Shortage of fodder	1 YES
		0 NO
q32796	Other	1 YES
		0 NO
q3270	q3270) None of the above	1 YES
•	A sub- sub-man di Mili di Antonio di Mili di Antonio di Antonio di Antonio di Antonio di Antonio di Antonio di A	0 NO
q327_other (required)	327 other) Please specify the other?	0110
		4 1/00
q328 (required)	328) Are you/your family committed to contribute to reversing the deforestation/forestation degradation trend?	1 YES
		0 NO
q329 (required)	329) How do you want to contribute?	1 PLANTING OF SEEDLINGS
		2 PARTICIPATION IN PFM
		GOVERNMENT PROGRAMS (SLMP, REDD+, RIP, WATERSHED MANAGEMENT
		4 MODERNING OUR AGRICULTURAL TECHNOLOGIES
		96 OTHER
		0 None of the aboves
q3291	Planting of seedlings	1 YES
		0 NO
q3292	Participation in pfm	1 YES
		0 NO
q3293	Participating in government programs (slmp, redd+, rip, watershed management)	1 YES
494.99	r a topating in goronnent programs (anip), saar, np, materanda managementy	0 NO
e9304	Madaming aur agricultural technologies	and the second sec
q3294	Moderning our agricultural technologies	1 YES
40043400		0 NO
q32996	Other	1 YES
		0 NO
q3290	None of the aboves	1 YES
		0 NO
q329_other <mark>(required)</mark>	329.other) Please specify the other?	
q330 (required)	330) During the last 12 months, did the household clear forest to establish agricultural fields?	1 YES
		0 NO
q331 (required)	331) What is the area of land cleared in timads, kerts, or hectars?	and the second sec
q331_a (required)	331.a) What was the unit used in answering previous question?	1 TIMADS
	A second s	2 KERTS
		3 HECTAR
alla (required)	200) During the last 40 months, did using household the found to the	
q332 (required)	332) During the last 12 months, did your household thin forest to give crops more space?	1 YES
		0 NO
q333 (required)	333) What is the area of land thinned in timads or kerts?	
	333.a) What was the unit used in answering the previous question?	1 TIMADS
q333_a (required)		1 1111100
q333_a <mark>(required)</mark>		2 KERTS 3 HECTAR

Field	Question	Answer	
1334 (required)	334) Do you believe that improving your household's livelihood can lead to improvements in forest management?	1 Yes	
		0 No	
		2 Don't Know	19
225 (required)	335) In the last 12 months, did the household participate in crop production?	and the second second	•
1335 (required)	335) In the last 12 months, did the nousehold participate in crop production 7	1 YES	
		0 NO	
1335_a (required)	335.a) How many types of crops did your household produced in the last 12 months?	-	
Crops (1)		(Repeated group)	
note_crops	One at a time please list the crops that were produced in the last 12 months.		
q336 (required)	336) Name of crop produced?	maize	Maize
		coffee	Coffee
		sorghum	Sorghum
		teff	Teff
		wheat	Wheat
		barely	Barely
		faba_bean	Faba bean
		peas	Peas
		chick_pea	Chick pea
		haricot_bean	Haricot bean
		soy_bean	Soy bean
		potato	Potato
			Sweet potato
		yam	Yam
		1	
		taro	Taro
		vegetable	Vegetable
		enset	Enset
		banana	Banana
		avocado	Avocado
		mango	Mango
		pineapple	Pineapple
		pepper	Pepper
		rice	Rice
			Khat
		khat	
		papaya	Papaya
		guava	Guava
		96	Other
q336_other (required)	336.other) Please specify the other?		
q337 (required)	337) Was [q336] marketed or consumed by the household?	1 MARKETE	D
		2 CONSUME	ED
		3 PART OF I	T IS CONSUMED AN
		PART OF I	
a220 (manufact)	236) To when did you call the [e236]0	1 COOPER	
q338 (required)	338) To whom did you sell the [q336]?		
		2 LOCAL TRADER	
		1	FROM DISTANT TO
		4 TRADER	FROM ZONAL CITY
		5 TRADER	FROM ADDIS
		6 DIRECTL	Y ON THE MARKET
		7 PROCES	SING COMPANY
		96 OTHER	
q3381	Cooperative	1 YES	
acces.			
	Les Andres	0 NO	
q3382	Local trader	1 YES	
		0 NO	
q3383	Trader from distant town	1 YES	
		0 NO	
q3384	Trader from zonal city	1 YES	
2015/00/00/6/20 	umaneeranameeranfii.chida u.S.K.S	0 NO	
09995	Trader from addis		
q3385	nauer nom auurs	1 YES	
		0 NO	
q3386	Directly on the market	1 YES	
		0 NO	
q3387	Processing company	1 YES	
	2X Y 22	0 NO	

Field	d Question		Answer			
q33896	Other		1	YES		
			0	VO		
q338_other (required)	338.other) Please specify the other?					
q339 (required)	339) During the last 12 months, did you use any of the following inputs?		1	a) Fertilizer		
			2	b) Pesticides (herbicide,		
				fungicide,)		
			3	c) Seeds and planting material		
				d) Transport for production & sale		
			5	e) Rent in machinery (tractor,		
				harvestor)		
				f) Fuel for irrigation or		
				transportation		
				g) Hired labor h) Other		
				None of the aboves		
q3391	Fertilizer			res		
45581	Lei fuizei		0			
q3392	Pesticides (herbicide, fungicide,)			YES		
40002	r ostoreo (normano, ningerio).		0			
q3393	Seeds and planting material			YES		
40000	cools and planting material		0			
q3394	Transport for production & sale		-	YES		
40004			0			
q3395	Rent in machinery (tractor, harvestor)			YES		
40080	(vent in machinely (lactor, narvestor)		0			
q3396	Fuel for irrigation or transportation			YES		
40000			0			
q3397	Hired labor			YES		
40001			0			
q33996	Other		-	YES		
1			0 1			
q3390	None of the aboves			YES		
			0 1			
q339_other (required)	339.other) Please specify the other?					
q340 (required)	340) In the last 12 months, did you participate in any program interventions related to agriculture, health, or forestry		1	YES		
	management?		0 1			
q341 (required)	341) What programs did you participate in?		-	FUTURES		
	autore de researce. La teste ≢renza de la presenta			ILLU WOMEN AND CHILDREN		
				INTEGRATED DEVELOPMENT		
				ASSOCIATION		
			3	SUSTAINABLE LAND		
				MANAGEMENT		
				FARM AFRICA		
				NABU		
				REDD+		
				OTHER		
q3411	Futures			YES		
herring			0 1			
q3412	Illu women and children integrated development association			YES		
			0 1			
q3413	Sustainable land management			YES		
			0 1			
q3414	Farm africa			YES		
			0 1			
q3415	Nabu			YES		
			0 1			
q3416	Redd+			YES		
			0 1			
q34196	Other			YES		
			0 1	NO		

Field	Question	Answer	
342 (required)	342) Have you planted tree seedlings in the last 12 months?	1 YES	
	and the first free broots and the second	0 NO	
342_a (required)	342.a) How many types of tree seedings you planted?	A	
ree seedings planted (1)		(Repeated group)	
note_trees	One at a time please list the trees seedings you planted?		
q342_b (required)	342.b) Would please tell me the name of tree seedings you planted?	laaftoo	Acacia
			abyssinica
		ambabbeessa	Albizia
			gummifera
			(J.F. Gmel)
			C.A. Sm
		ambabeessa	Albizia
			schimperiana
			Oliv
		waddeessa	Cordia
			africana Lam
		makkanniisa	Croton
			macrostachy
			Hochst. ex
			Delile
		Lookoo_gurracha	Diospyros abyssinica
			(Hiem) F.
			White
		ambaltaa	Entada
			abyssinica
			Steud ex
			A.Rich.
		Lookoo_adi	Elaeodendror
			buchananii
			(Loes.) Loes
		waleensuu	Erythrina
			abyssinica
			Lam. Ex DC
		Baargamoo_baarzaaf	
			globulus Labi
		qilxuu	Ficus vasta
			Forssk.
		giraaviliyaa	Grevillea
			robusta A. Cunn. ex R.
			Br.
		maangoo	Mangifera
		anddigeo	indica L.
		sootalloo	Millettia
			ferruginea
			(Hochst.) Bal
		bahaa	Olea
			Welwitschii
			(Knobl.) Gilg
			G. Schellenb
		birbirsa	Podocarpus
			falcatus
			(Thunb.) R.B
			ex. Mirb.
		qararoo	Pouteria
			adolfi-friederi
		· · · · · · · · · · · · · · · · · · ·	(Engl.) Baehr
		oomii	Prunus africana
			(Hook.F.)
			Kalkman
		bosoga	Sapium
		bosoda	ellipticum
			such a second

Field	Question	Answer	
		gata	(Krauss) P maa Schefflera abyssinica (Hochst. E Rich) Ham
		gaal	tiraa Juniperus procera
		badde	essaa Syzygium guineense
		kan	(Willd.) DC biraa Other
q342_c (required)	342.c) How many [q342_b] tree seedings you planted?		
q342_d (required)	342.d) Where did you planted the [q342_b] tree seedings?	1 Homes	tead
		2 Garder	
		3 Crop fi	
		4 Degrad	
		96 Other	
q342_d_other (required)	342.d.other) Please specify the other?		
q342_e (required)	342.e) What percentage of [q342_b] planted seedings are surviving now?	1 < 25% [4	ess than one out of four
	e vir el ruvar her couraña el falo vir al hanves se can 3e are ser ruv 3 verv		n a quarter)
			One to two out of four
			n a quarter and half)
			Two to three out of four
			an half but less than on
		third)	
			ore than three out of fou
		(almost :	all)
q342_f (required)	342.f) For what purpose did you plant the [q342_b] seedlings?	1 INCOM	E
		2 FOOD	
		3 FORAC	θE
		4 FODDE	ER .
		5 FENCE	
		6 TIMBE	र .
		7 FIREW	OOD
		8 CHARG	COAL
			ND WATER
			ERVATION
			FOR COFFEE
		96 OTHEF	
q342_f1	Income	1 YES	,
4942_11	income	0 NO	
	E.J.		
q342_f2	Food	1 YES	
(and the second s		0 NO	
q342_f3	Forage	1 YES	
		0 NO	
q342_f4	Fodder	1 YES	
-		0 NO	
q342_f5	Fence	1 YES	
-		0 NO	
q342_f6	Timber	1 YES	
		0 NO	
q342_f7	Firewood	1 YES	
		0 NO	
q342_f8	Charcoal	1 YES	
		0 NO	
q342_f9	Soil and water conservation	1 YES	
low opens		0 NO	
q342_f10	Shade for coffee	1 YES	
9072_00		0 NO	
q342_f196	Other	1 YES	
		0 NO	

Field	Question	Ansv	ver
note_fp	READ. Now I would like to talk about family planning - the various ways or methods that a couple can use to delay a avoid a pregnancy.	r	
		1 12	long
q401 (required)	401) In the last 12 months, were you visited by a health extension worker who talked to you about family planning?"		YES
and the second		- proceedings	NO
q402 (required)	402) In the last 12 months, have you visited a health facility for care for yourself or your children?		YES
		0	NO
q403 (required)	403) Who referred you to visit the health facility?		1 SELF
		1	2 HUSBAND/ PARTNER
		ŝ	3 VSLA (Village Saving and Loan
			Association) GROUP
		2	4 HEW (Health Extension Worker)
		Ę	5 Women's development association
		9	6 OTHER
q403_other (required)	403.other) Please specify the other?		
q404 (required)	404) Did any staff member at the facility speak to you about family planning methods?	1	YES
			NO
q405 (required)	405) In the last few months have you:	-	a) Read about family planning in a
d los (lodalisa)	Please read all the options and select all that apply.		pamphlet/posters/leaflets?
		2	b) Read about family planning in a
		2	
		-	newspaper or magazine? c) Seen anything about family
		3	
			planning on the television?
		4	d) Heard about family planning on
			the radio?
		5	e) Heard about family planning at
			community event/conversation?
		6	f) Received a voice or text messag
			about family planning on a mobile
			phone?
		7	g) Seen anything about family
			planning on the internet?
		8	h) heard about family planning at
			VSLA meeting?
		9	i) heard about family planning at
			SAA?
		0	None of the above
q4051	Read about family planning in a pamphlet/posters/leaflets?	1	YES
		0	NO
q4052	Read about family planning in a newspaper or magazine?	1	YES
		0	NO
q4053	Seen anything about family planning on the television?	1	YES
4.000			NO
q4054	Heard about family planning on the radio?		YES
(HOOH	Treard about family planning on the factor		
		-	NO
q4055	Heard about family planning at community event/conversation?		YES
			NO
q4056	Received a voice or text message about family planning on a mobile phone?		YES
		0	NO
q4057	Seen anything about family planning on the internet?	1	YES
		0	NO
q4058	Heard about family planning at VSLA meeting?	1	YES
			NO
q4059	Heard about family planning at SAA?		YES
11.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1			NO
q4060	None of the above		YES
4.000			NO
alos (required)		-	
q406 (required)	406) Do you know of a place where you can obtain a method of family planning?		YES
			NO
q407 (required)	407) Have you or your partner ever sought FP services from the nearest Health Center or nearest Health Post?		YES, NEAREST Health Center
		2	YES, NEAREST Health Post

Field	Question	Ansv	ver
q408 (required)	408) Why haven't you ever sought FP services from the [nearest HC] or [nearest HP]?	1	NO NEED FOR FP
			2 INCONVENIENT OPERATING HOURS
		3	RECEIVE THEM FROM HEALTH
			EXTENSION WORKERS
			BAD REPUTATION
			5 DON'T LIKE THE PERSONNEL
			6 CAN'T GET MY METHOD
		9	7 PREFER TO REMAIN ANONYMOUS
		8	IT IS MORE EXPENSIVE
		8	WAS REFERRED SOMEWHERE
			ELSE
			0 NO FP SERVICES AVAILABLE
		() (6 Other
q4081	No need for FP		YES
		0	NO
q4082	Inconvenient operating hours	1	YES
		0	NO
q4083	Receive them from health extension workers	1	YES
		0	NO
q4084	Bad reputation	1	YES
		0	NO
q4085	Don't like the personnel	1	YES
		0	NO
q4086	Can't get my method	1	YES
		0	NO
q4087	Prefer to remain anonymous	1	YES
		0	NO
q4088	It is more expensive		YES
			NO
q4089	Was referred somewhere else		YES
			NO
q40910	No FP services available		YES
			NO
q40996	Other	1	YES
			NO
q408_other (required)	408.other) Please specify the other?		
q409 (required)	409) Which of the following statements best describes your opinion of the services you received or were provided at	2	I was very satisfied with the service
	the facility:		I received
		1	I was more or less satisfied with th
			services I received
		0	I was not satisfied with the service
			received
q410_hc (required)	410.hc) Have you heard any negative rumors about the FP services offered by nearest Health Center?	1	YES
		0	NO
q411_hc (required)	411.hc) What negative rumors have you heard?		
q412_hc (required)	412.hc) Do you feel the nearest Health Center provide confidential FP services?	1	Yes
			No
		2	Don't Know
q413_hc (required)	413.hc) Do you feel the nearest Health Center provide privacy while offering FP services?	1	Yes
1 N. 2.2 B			No
			Don't Know
q414_hc_fee (required)	414.hc filter) Does the nearst Health Center charge fees for family planning services?		Yes
	and a second		No
			Don't Know
q414_hc (required)	414.hc) Do you feel the cost of family planning services at nearest Health Center is are affordable?		Yes
			No
			Don't Know
a415 hc (required)	415.hc) Do you feel the nearest Health Center or provide respectful care while offering FP services?	1	
q415_hc (required)	415.hc) Do you feel the nearest Health Center or provide respectful care while offering HP services?		Yes

Field	Question	Answer
q416_hc (required)	416.hc) Do you feel that adolescents and youth are provided the same level of respect as older people when	1 Yes
	obtaining FP services at nearest Health Center?	0 No
		2 Don't Know
q410_hp (required)	410 hp) Have you heard any negative rumors about the FP services offered by nearest Health Post?	1 YES
date_ub (redaved)		0 NO
q411_hp (required)	411 hp) What negative rumors have you heard?	
q412_hp (required)	412_hp) Do you feel the nearest Health Post provide confidential FP services?	1 Yes
dets_up (redawed)	412_hb) to you real the nearest nearth rost broade conincentral this services.	0 No
		2 Don't Know
q413_hp (required)	413_hp) Do you feel the nearest Health Post provide privacy while offering FP services?	1 Yes
		0 No
		2 Don't Know
q414_hp_fee (required)	414.hp.filter) Does the nearst Health Post charge fees for family planning services?	1 Yes
		0 No
		2 Don't Know
q414_hp (required)	414_hp) Do you feel the cost of family planning services at nearest Health Post affordable?	1 Yes
		0 No
		2 Don't Know
q415_hp (required)	415_hp) Do you feel the nearest Health Post provide respectful care while offering FP services?	1 Yes
		0 No
		2 Don't Know
q416_hp (required)	416 hp) Do you feel that adolescents and youth are provided the same level of respect as older people when	1 Yes
de to_lib (redaxeo)	obtaining FP services at nearest Health Post?	0 No
	obtaining FF services at nearest nearth Fost	1724 AV88 C
		2 Don't Know
q417 (required)	417) Are you or your partner currently doing something or using any method to delay or avoid getting pregnant?	1 YES
		0 NO
q418 (required)	418) Which method(s) are you or your partner using?	1 FEMALE STERILIZATION
	CIRCLE ALL MENTIONED	2 MALE STERILIZATION
		3 IMPLANTS
		4 IUD
		5 PILLS
		6 INJECTABLES
		7 MALE CONDOMS
		8 FEMALE CONDOMS
		9 EMERGENCY CONTRACEPTION
		10 STANDARD DAYS METHOD
		11 LACTATIONAL AMENORRHEA METHOD (LAM)
		12 RHYTHM/CALENDAR METHOD
		13 WITHDRAWAL
- 4404		96 OTHER
q4181	Female sterilization	1 YES
		0 NO
q4182	Male sterilization	1 YES
		0 NO
q4183	Implants	0 NO 1 YES
q4183	Implants	
	Implants IUD	1 YES
		1 YES 0 NO
q4183 q4184 q4185		1 YES 0 NO 1 YES 0 NO 1 YES
q4184	IUD	1 YES 0 NO 1 YES 0 NO
q4184 q4185	IUD	1 YES 0 NO 1 YES 0 NO 1 YES 0 NO 1 YES 1 YES
q4184 q4185	IUD PILLS	1 YES 0 NO 1 YES 0 NO 1 YES 0 NO 0 NO
q4184	IUD PILLS	1 YES 0 NO 1 YES 0 NO 1 YES 0 NO 1 YES 1 YES
q4184 q4185 q4186	IUD PILLS Injectables	1 YES 0 NO 1 YES 0 NO 1 YES 0 NO 1 YES 0 NO 1 YES 0 NO
q4184 q4185 q4186 q4187	IUD PILLS Injectables	1 YES 0 NO 1 YES 0 NO 1 YES 0 NO 1 YES 0 NO 1 YES 0 NO 1 YES
q4184 q4185 q4186 q4187	IUD PILLS Injectables Male condoms	1 YES 0 NO 1 YES 0 NO 1 YES 0 NO 1 YES 0 NO 1 YES 0 NO 1 YES 0 NO 1 YES
q4184 q4185 q4186 q4187 q4188	IUD PLLS Injectables Male condoms Female condoms	1 YES 0 NO 1 YES 0 NO
q4184 q4185 q4186 q4187	IUD PILLS Injectables Male condoms	1 YES 0 NO 1 YES 0 NO
q4184 q4185 q4186 q4187 q4188	IUD PLLS Injectables Male condoms Female condoms	1 YES 0 NO 1 YES 0 NO

Field	Question	Answer
q4191	Lactational amenorrhea method (lam)	1 YES
		0 NO
q4192	Rhythm/calendar method	1 YES
		0 NO
q4193	Withdrawal	1 YES
		0 NO
q41996	Other	1 YES
		0 NO
q418_other (required)	418.other) Please specify the other?	
q419_year (<i>required</i>)	419) For how many YEARs you or your partner been using this method without stopping? If less than one year write 0 and enter number of months in the next question	
q419_month <mark>(required)</mark>	419) For how many MONTHs have you or your partner been using this method without stopping?	
q420 (required)	420) Where did you obtain this method last time?	1 HC
		2 HP
		3 Government Hospital
		4 Private Health Facility
		96 OTHER
q420_other (required)	420.other) Please specify the other?	
q421 (required)	421) Are you comfortable with the method this method you are using?	1 YES
		0 NO
q422 (required)	422) IF NO: Why not?	
q423 (required)	423) Is the method you are using your preferred method (or your method of choice)?	1 YES
		0 NO
q424 (required)	424) IF NO: Why not?	1 MY METHOD WAS NOT
		AVAILABLE IN THE FACILITY
		2 SERVICE PROVIDER
		ENCOURAGEDE TO USE THIS
		METHOD
		96 OTHER
q424_other (required)	424 other) Please specify the other?	
q425 (required)	425) In your opinion, is your partner supportive of your use of family planning?	1 YES
		0 NO
q426 (required)	426) In your opinion, would your partner be supportive if you wanted to use a method of family planning?	1 YES
		0 NO
q427 (required)	427) Do you think you will use a contraceptive method to delay or avoid pregnancy at any time in the future?	1 YES
	-9-9-00-00-00-00-00-00-00-00-00-00-00-00	0 NO
q428 (required)	428) Would you say that using (not using) contraception is mainly your decision, mainly your (husband's/partner's)	1 MAINLY RESPONDENT
d in a fradmandy	decision, or did you both decide together?	2 MAINLY SPOUSE
		3 JOINT DECISION
		96 OTHER
q428_other (required)	428.other) Please specify the other?	30 OTHER
q429 (required)	429) Before making the decision to use (not use) contraception, did you discuss your options with anyone?	1 HUSBAND/SPOUSE
d rea (rodanoa)	CIRCLE ALL THAT APPLY	2 OTHER FAMILY MEMBER
		3 FRIEND
		4 COMMUNITY HEALTH WORKER
		5 FACILITY-BASED FAMILY
		PLANNING PROVIDER
		0 No one
		96 OTHER
~4201	Husbandispouse	and the second
q4291	Husband/spouse	1 YES 0 NO
~4000	Other family member	
q4292	Other family member	1 YES
- 4000		0 NO
q4293	Friend	1 YES
		0 NO
q4294	Community health worker	1 YES
		0 NO
q4295	Facility-based family planning provider	1 YES
		0 NO
q4290	No one	1 YES
		0 NO

Field	Question	Answer
q4296	Other	1 YES
		0 NO
1429_other <mark>(required)</mark>	429 other) Please specify the other?	
q430 <i>(required)</i>	430) Are you pregnant now?	1 Yes
		0 No
		2 Don't Know
1431 (required)	431) When you got pregnant, did you want to get pregnant at that time?	1 YES
		0 NO
q432 (required)	432) Did you want to have a baby later on or did you not want any more children?	1 LATER
		2 NO MORE/NONE
q433 (required)	433) In the future, would you like to have (a/another) child, or would you prefer not to have any (more) children?	1 HAVE ANOTHER CHILD
		NOW/SOON
		2 HAVE ANOTHER CHILD WITH
		1-2 YEARS
		3 NO CHILDREN/NO MORE
		CHILDREN/CAN'T GET
		PREGNANT
1434 <mark>(required)</mark>	434) How important is access to family planning services to your participation in livelihood and employment	1 VERY IMPORTANT
	opportunities?	2 SOMEWHAT IMPORTANT
		3 NIETHER IMPORTANT/NOT
		IMPORTANT
		4 NOT IMPORTANT
note_gender	READ: In this section, I would like to ask you some questions about your attitudes towards men's and women's roles	
	in this community. Please responsed by saying 1.Strongly disagree , 2. disagree , 3. Neutral 4. Agree 5. Strongly	
iote_q501	agree 501) Please say whether you "Strongly agree", "Agree", "Neither agree nor disagree", "Disagree" or "Strongly	
1010_001	disagree" with the following statements.	
q501_a (required)	501 a) Married women in this community are expected to participate in income-generating activities.	5 STRONGLY AGREE
		4 AGREE
		3 NIETHER AGREE/DISAGREE
		2 DISAGREE
		1 STRONGLY DISAGREE
q501_b (required)	501.b) Married women who earn income are expected to hand over the income to their husband.	5 STRONGLY AGREE
		4 AGREE
		3 NIETHER AGREE/DISAGREE
		2 DISAGREE
		1 STRONGLY DISAGREE
q501_c (required)	501.c) Unmarried women in this community are expected to participate in income-generating activities.	5 STRONGLY AGREE
		4 AGREE
		3 NETHER AGREE/DISAGREE
		2 DISAGREE
		1 STRONGLY DISAGREE
q501_d (required)	501.d) Unmarried women who earn income are expected to hand over the income to their parents.	5 STRONGLY AGREE
		4 AGREE
		3 NIETHER AGREE/DISAGREE
		2 DISAGREE
		1 STRONGLY DISAGREE
q501_e (required)	501 e) Women are capable of leading forest management groups.	5 STRONGLY AGREE
		4 AGREE
		3 NIETHER AGREE/DISAGREE
		2 DISAGREE
		1 STRONGLY DISAGREE
1501_f (required)	501.f) Women are capable of leading village and youth savings and loan (VSLA, YSLA)	5 STRONGLY AGREE
los : Ti findanog)	were realistic and capacity or reading singly and you'll savings and toan (Yours, TOLS)	4 AGREE
		3 NIETHER AGREE/DISAGREE
		2 DISAGREE
		1 STRONGLY DISAGREE
502 (required)	500) If a woman is unmarried, what is her best antian to sam an income?	I STRUNGLT DISAGREE
1502 (required) 1503 (required)	502) If a woman is unmarried, what is her best option to earn an income?	
	503) If a man is unmarried, what is his best option to earn an income?	4 VE0
q504 (required)	504) Does your partner/spouse want you to earn an income?	1 YES 0 NO
		U NO

Field	Question	Answer	
q505a (required)	505.a) It is acceptable for unmarried adolescents to be sexually active.	5 STR	ONGLY AGREE
	u datu a 19. ng mengatak (Den mengatakana kenangkana pengangkana pengangkana pengangkana).	4 AGF	
			THER AGREE/DISAGREE
			AGREE
			ONGLY DISAGREE
q505b (required)	505.b) It is acceptable for unmarried adolescents to use contraception to avoid pregnancy.		ONGLY AGREE
		4 AGF	
		3 NIE	THER AGREE/DISAGREE
		2 DIS	AGREE
		1 STR	ONGLY DISAGREE
q505c (required)	505.c) A couple's decision about the number of children to have should be left up to the man.	5 STR	ONGLY AGREE
		4 AGF	REE
		3 NE	THER AGREE/DISAGREE
		2 DIS	AGREE
			ONGLY DISAGREE
q506 (required)	506) Many different factors can prevent women from getting medical advice or treatment for themselves. When a		he distance to the health
door (redaved)	women is sick and want to get medical advice or treatment, which of the following problem might prevent her from		
		facili	
	seeking medical care?:	1.1.1	etting money needed for advice
			eatment?
		3 c) G	etting permission to go to the
		doct	or?
		4 d) N	ot wanting to go alone?
		0 Don	't know
q5061	The distance to the health facility?	1 YES	
		0 NO	
q5062	Getting money needed for advice or treatment?	1 YES	
40002		0 NO	
q5063	Getting permission to go to the doctor?	1 YES	
		0 NO	
q5064	Not wanting to go alone?	1 YES	
		0 NO	
q5060	Don't know	1 YES	
		0 NO	
note_shocks	READ: Households sometimes experience good and bad events. We would like to ask you about some of the event	s	
	your household may have experienced during the last 12 months.		
q601 (required)	601) During the last 12 months, was your household affected negatively by any of the following events?	1 a)	Disruption of farming or livestoc
	READ OUT EACH SHOCK AND SELECT ALL THAT APPLY		Lower crop yield due to drought
			od, crop disease, or pests
			_oss of livestock or poultry to
			ease or pests
			Significant fall in sales price of
			ps or livestock or poultry?
			Significant rise in food prices?
			End or regular assistance, aid, o
			nittan ces from outside
		hou	usehold
		7 g) l	Business failure
		8 h):	Serious illness or accident of
		hou	usehold member(s)
		9 i) E	Birth in the household
			Death of income earner(s)
			Break-up of household
			vorce/separation/death
			gration)
			gration) heft/looting of cash and other
			perty
			Conflict/violence
			Damage/destruction of dwelling
			r example, burning, flood, winds
		Course Street	0.4
		96 o)	Other
			otner ne of the above
q6011	Disruption of farming or livestock		ne of the above

Field	Question	Ans	we	r
q6012	Lower crop yield due to drought, flood, crop disease, or pests		1	YES
			0	VO
q6013	Loss of livestock or poultry to disease or pests		1	YES
		1	0 1	NO.
q6014	Significant fall in sales price of crops or livestock or poultry?		1	YES
			0 1	NO
q6015	Significant rise in food prices?			YES
				NO
q6016	End or regular assistance, aid, or remittances from outside household			YES
				NO
q6017	Business failure			YES
-0010				10
q6018	Serious illness or accident of household member(s)			YES
q6019	Birth in the household			VO YES
40019	Bitti in the household			NO
q60110	Death of income earner(s)			YES
goorro				NO
q60111	Break-up of household (divorce/separation/death/migration)		-	/ES
a na second di k	provinces to one of province of the second			NO
q60112	Theft/looting of cash and other property			/ES
	n e protes navezan zeron selenne i constructivan i kreatan eta e			NO
q60113	Conflict/violence		1 '	YES
			0 1	NO
q60114	Damage/destruction of dwelling (for example, burning, flood, winds)		1	YES
			0 1	NO
q60196	Other		1	YES
		1	0	NO
q6010	None of the above		1	YES
			0 1	NO.
q601_other (required)	601.other) Please specify the other?			
note_q602	602) Rank the three most significant negative events you experienced in the last 12 months.			2012/00/01 13.01 Paster 19 19 19
q602_a (required)	602.a) First significant negative events you experienced in the last 12 months.			a) Disruption of farming or livestoc
			2	b) Lower crop yield due to drought
			2	flood, crop disease, or pests
			0	 c) Loss of livestock or poultry to disease or pests
			4	d) Significant fall in sales price of
				crops or livestock or poultry?
			5	e) Significant rise in food prices?
			6	f) End or regular assistance, aid, o
				remittan ces from outside
				household
				g) Business failure
			8	h) Serious illness or accident of
			0	household member(s)
				i) Birth in the household
				j) Death of income earner(s) k) Break-up of household
			<u> </u>	(divorce/separation/death
				/migration)
			12	I) Theft/looting of cash and other
				property
				m) Conflict/violence
				n) Damage/destruction of dwelling
			14	n) Damage/destruction of dwelling (for example, burning, flood, winds
			14 96	n) Damage/destruction of dwelling (for example, burning, flood, winds o) Other
			14 96	n) Damage/destruction of dwelling (for example, burning, flood, winds
q602 <u>a_other (required)</u> d603 <u>a(required)</u>	602.a. other) Please specify the other? 603.a) What did your household do in response to these first significant events to try to regain your former welfare		14 96 0	n) Damage/destruction of dwelling (for example, burning, flood, winds o) Other

Field	Question	Answer
		2 RECEIVED UNCONDITIONAL
		HELP FROM
		RELATIVES/FRIENDS
		3 RECEIVED HELP FROM THE
		GOVERNMENT
		4 RECEIVED HELP FROM
		NGO/LOCAL INSTITUTION
		5 OBTAINED CREDIT/TOOK LOAN
		FROM A FINANCIAL
		INSTITUTION
		6 BORROWED FROM RELATIVES
		FRIENDS
		7 SALE OF ASSETS
		(AGRICULTURAL)
		8 SALE OF ASSETS (NON-
		AGROCULTURAL)
		9 REDUCED EXPENDITURES
		10 SOUGHT ADDITIONAL
		WORK/NEW LIVELIHOOD
		11 HOUSEHOLD MEMBER(S)
		MIGRATED
		12 INTENSIFIED FARMING
		14 COLLECTING (SELLING) NON-
		TIMBER FOREST PRODUCTS
		(NTFPs)
		0 NOTHING
		96 OTHER
q603_a1	Relied on savings	1 YES
		0 NO
q603_a2	Received unconditional help from relatives/friends	1 YES
		0 NO
q603_a3	Received help from the government	1 YES
		0 NO
q603_a4	Received help from ngo/local institution	1 YES
		0 NO
q603_a5	Obtained credit/took loan from a financial institution	1 YES
		0 NO
q603_a6	Borrowed from relatives/ friends	1 YES
		0 NO
q603_a7	Sale of assets (agricultural)	1 YES
		0 NO
q603_a8	Sale of assets (non-agrocultural)	1 YES
		0 NO
q603_a9	Reduced expenditures	1 YES
		0 NO
q603_a10	Sought additional work/new livelihood	1 YES
		0 NO
q603_a11	Household member(s) migrated	1 YES
		0 NO
q603_a12	Intensified farming	1 YES
	a real real of the	0 NO
q603_a14	Collecting (selling) non-timber forest products (ntfps)	1 YES
4000_014	concound (semind) non-munical rolest bronders (IBb2)	0 NO
2603.00	Nathing	
q603_a0	Nothing	1 YES
-000 -00		0 NO
q603_a96	Other	1 YES
		0 NO
q603_a_other (required)	603.a. other) Please specify the other?	
q602_b (required)	602.b) Second significant negative events you experienced in the last 12 months.	1 a) Disruption of farming or livestoo
		2 b) Lower crop yield due to drought
		flood, crop disease, or pests
		3 c) Loss of livestock or poultry to
		disease or pests

Field	Question	Answer
		4 d) Significant fall in sales price of
		crops or livestock or poultry?
		5 e) Significant rise in food prices?
		6 f) End or regular assistance, aid, o
		remittan ces from outside household
		7 g) Business failure
		8 h) Serious illness or accident of household member(s)
		9 i) Birth in the household
		10 j) Death of income earner(s)
		11 k) Break-up of household (divorce/separation/death
		/migration) 12 I) Theft/looting of cash and other
		property
		13 m) Conflict/violence
		14 n) Damage/destruction of dwelling (for example, burning, flood, winds
		96 o) Other
q602_b_other (required)	602.b.other) Please specify the other?	0 None of the above
q603_b (required)	603.b) What did your household do in response to these second significant events to try to regain your former	1 RELIED ON SAVINGS
	welfare level?	2 RECEIVED UNCONDITIONAL HELP FROM
		RELATIVES/FRIENDS 3 RECEIVED HELP FROM THE
		GOVERNMENT
		4 RECEIVED HELP FROM
		NGO/LOCAL INSTITUTION
		5 OBTAINED CREDIT/TOOK LOAN FROM A FINANCIAL INSTITUTION
		6 BORROWED FROM RELATIVES/ FRIENDS
		7 SALE OF ASSETS (AGRICULTURAL)
		8 SALE OF ASSETS (NON- AGROCULTURAL)
		9 REDUCED EXPENDITURES
		10 SOUGHT ADDITIONAL
		WORK/NEW LIVELIHOOD
		11 HOUSEHOLD MEMBER(S) MIGRATED
		12 INTENSIFIED FARMING
		14 COLLECTING (SELLING) NON- TIMBER FOREST PRODUCTS
		(NTFPs)
		0 NOTHING
		96 OTHER
q603_b1	Relied on savings	1 YES
8		0 NO
q603_b2	Received unconditional help from relatives/friends	1 YES
		0 NO
q603_b3	Received help from the government	1 YES
		0 NO
q603_b4	Received help from ngo/local institution	1 YES
4000_01	researce rely non-ngeneral managem	0 NO
q603_b5	Obtained credit/took loan from a financial institution	1 YES
4000_00		0 NO
	Borrowed from relatives/ friends	
q603_b6		1 YES

Field	Question	Ansv	ver
q603_b7	Sale of assets (agricultural)	1	YES
		0	NO
q603_b8	Sale of assets (non-agrocultural)	1	YES
		0	NO
q603_b9	Reduced expenditures		YES
		-	NO
q603_b10	Sought additional work/new livelihood		YES
-000 1-11			NO
q603_b11	Household member(s) migrated		YES
q603_b12	Intensified farming		NO YES
d003_012	intensinea rainning		NO
q603_b14	Collecting (selling) non-timber forest products (ntfps)		YES
1			NO
q603_b0	Nothing	1	YES
		0	NO
q603_b96	Other	1	YES
		0	NO
q603_b_other (required)	603.b. other) Please specify the other?		
q602_c <i>(required)</i>	602.c) Third significant negative events you experienced in the last 12 months.	1	a) Disruption of farming or livestoc
		2	b) Lower crop yield due to drought
			flood, crop disease, or pests
		3	c) Loss of livestock or poultry to
			disease or pests
		4	d) Significant fall in sales price of crops or livestock or poultry?
		5	e) Significant rise in food prices?
			 f) End or regular assistance, aid, o
			remittan ces from outside
			household
		7	g) Business failure
		8	h) Serious illness or accident of
			household member(s)
			i) Birth in the household
			0 j) Death of income earner(s)
		4	 k) Break-up of household (divorce/separation/death
			/migration)
		1	2 I) Theft/looting of cash and other
			property
		1	3 m) Conflict/violence
		1	4 n) Damage/destruction of dwelling
			(for example, burning, flood, winds
			6 o) Other
		C	None of the above
q602_c_other (required)	601.c.other) Please specify the other?		Tu termina a constanti a constanti
q603_c <i>(required)</i>	603.c) What did your household do in response to these third significant events to try to regain your former welfare level?		RELIED ON SAVINGS RECEIVED UNCONDITIONAL
	IGAO! I	2	HELP FROM
			RELATIVES/FRIENDS
		3	RECEIVED HELP FROM THE
			GOVERNMENT
		4	RECEIVED HELP FROM
			NGO/LOCAL INSTITUTION
		5	5 OBTAINED CREDIT/TOOK LOAN FROM A FINANCIAL
		6	INSTITUTION BORROWED FROM RELATIVES/ FRIENDS
		7	SALE OF ASSETS
			(AGRICULTURAL)
		8	SALE OF ASSETS (NON-
			AGROCULTURAL)

Field	Question	Answer
		9 REDUCED EXPENDITURES
		10 SOUGHT ADDITIONAL
		WORK/NEW LIVELIHOOD
		11 HOUSEHOLD MEMBER(S)
		MIGRATED
		12 INTENSIFIED FARMING
		14 COLLECTING (SELLING) NON
		TIMBER FOREST PRODUCTS
		(NTFPs)
		0 NOTHING
		96 OTHER
1602 c1	Relied on savings	
1603_c1	Kalled on 294m/82	1 YES 0 NO
1603_c2	Received unconditional help from relatives/friends	1 YES
		0 NO
q603_c3	Received help from the government	1 YES
		0 NO
q603_c4	Received help from ngo/local institution	1 YES
		0 NO
1603_c5	Obtained credit/took loan from a financial institution	1 YES
		0 NO
2002 - 20	Borrowed from relatives/ friends	
q603_c6	Donowed noninelatives/inelias	1 YES
		0 NO
q603_c7	Sale of assets (agricultural)	1 YES
		0 NO
1603_c8	Sale of assets (non-agrocultural)	1 YES
		0 NO
q603_c9	Reduced expenditures	1 YES
		0 NO
q603_c10	Sought additional work/new livelihood	1 YES
		0 NO
q603_c11	Household member(s) migrated	1 YES
1009_011	Household member(s) mgrated	
		0 NO
q603_c12	Intensified farming	1 YES
		0 NO
q603_c14	Collecting (selling) non-timber forest products (ntfps)	1 YES
		0 NO
q603_c0	Nothing	1 YES
		0 NO
q603_c96	Other	1 YES
		0 NO
q603_c_other (required)	603.c.other) Please specify the other?	lo no
q603_c_other (required)	604) During the last 12 months, was your household affected positively by any of the following events?	1 at blau or regulariab for a
1004 (redaxed)	READ OUT EACH SHOCK AND SELECT ALL THAT APPLY	 a) New or regular job for a household member
		2 b) New or increased remittance
		3 c) New government grant/suppo
		4 d) Inheritance, large gift, lottery
		winnings
		5 e) Scholarships
		96 f Other
		0 None of the Above
6041	New or regular job for a household member	1 YES
		0 NO
16042	New or increased remittances	1 YES
5		0 NO
e042	New asserment grant/support	
16043	New government grant/support	1 YES
		0 NO
q6044	Inheritance, large gift, lottery winnings	1 YES
		0 NO
q6045	Scholarships	1 YES
		0 NO

Field	Question	Answer
q60496	Other	1 YES
		0 NO
q6040	q6040.) None of the Above	1 YES
		0 NO
q604_other (required)	604 other) Please specify the other?	
note_food	Before we end, I have a few questions about food consumption in your household.	
q605 (required)	605) In the past four weeks, did you worry that your household would not have enough food?	1 YES
		0 NO
q606 (required)	606) How often did this happen?	1 RARELY (ONCE OR TWICE)
		2 SOMETIMES (3 TO 10 TIMES)
		3 OFTEN (MORE THAN 10 TIMES
q607 (required)	607) In the past four weeks, were you or any household member not able to eat the kinds of foods you preferred	1 YES
	because of a lack of resources?	0 NO
q608 (required)	608) How often did this happen?	1 RARELY (ONCE OR TWICE)
		2 SOMETIMES (3 TO 10 TIMES)
		3 OFTEN (MORE THAN 10 TIMES
q609 (required)	609) In the past four weeks, did you or any household member have to eat a limited variety of foods due to a lack of	1 YES
	resources?	0 NO
q610 (required)	610) How often did this happen?	1 RARELY (ONCE OR TWICE)
		2 SOMETIMES (3 TO 10 TIMES)
		3 OFTEN (MORE THAN 10 TIMES
q611 (required)	611) In the past four weeks, did you or any household member have to eat some foods that you really did not want to	1 YES
	eat because of a lack of resources to obtain other types of food?	0 NO
q612 (required)	612) How often did this happen?	1 RARELY (ONCE OR TWICE)
as the second		2 SOMETIMES (3 TO 10 TIMES)
		3 OFTEN (MORE THAN 10 TIMES
q613 (required)	613) In the past four weeks, did you or any household member have to eat a smaller meal than you felt you needed	1 YES
de la fredances	because there was not enough food?	0 NO
q614 (required)	614) How often did this happen?	1 RARELY (ONCE OR TWICE)
do 14 (reduined)		2 SOMETIMES (3 TO 10 TIMES)
		3 OFTEN (MORE THAN 10 TIMES
q615 (required)	615) In the past four weeks, did you or any household member have to eat fewer meals in a day because there was	1 YES
do to fredaredy	not enough food?	0 NO
q616 (required)	616) How often did this happen?	1 RARELY (ONCE OR TWICE)
do lo (redarea)	oro) now oten did this happen?	2 SOMETIMES (3 TO 10 TIMES)
		3 OFTEN (MORE THAN 10 TIMES)
q617 (required)	617) In the past four weeks, was there ever no food to eat of any kind in your household because of lack of	1 YES
do Li (ledawea)	resources to get food?	
-040 (0 NO
q618 <i>(required)</i>	618) How often did this happen?	1 RARELY (ONCE OR TWICE)
		2 SOMETIMES (3 TO 10 TIMES) 3 OFTEN (MORE THAN 10 TIMES
040 000 000		
q619 (required)	619) In the past four weeks, did you or any household member go to sleep at night hungry because there was not enough food?	1 YES
		0 NO
q620 (required)	620) How often did this happen?	1 RARELY (ONCE OR TWICE)
		2 SOMETIMES (3 TO 10 TIMES)
		3 OFTEN (MORE THAN 10 TIMES
q621 (required)	621) In the past four weeks, did you or any household member go a whole day and night without eating anything	1 YES
100000000000000000000000000000000000000	because there was not enough food?	0 NO
q622 (required)	622) How often did this happen?	1 RARELY (ONCE OR TWICE)
		2 SOMETIMES (3 TO 10 TIMES)
		3 OFTEN (MORE THAN 10 TIMES
q623 (required)	623) Concerning your household's food consumption over the past one month, which of the following is true? Note	1 It was adequate
	that "adequate" means no more or no less than what the respondent considers to be the minimum consumption	2 It was less than adequate
	needs of the household.	3 It was more than adequate
note_end	Thank you for your time and your attention. I asked a lot of questions during this interview and I am very appreciative	
Sector Account access and a sector	of you sharing your responses with me. Thank you for helping us with the research study. Good day to you.	
note_from_data_collectoer	Dear data collector you have successfully completed interviewing this respondent. If you have any note regarding	

Appendix 1b. Family planning provider's survey

Providers_Questionnaire_v13

ield	Question	Answer
ata Collector Information		
survey_date (required)	Indicate the date:	
data_collector_name (required)	Data collector name	
data_collector_phone_number (required)		
	E.g. 0911304050	
supervisor_name (required)	Supervisor name	
lealth Facility Information	01) Destroy	d Ownits
region (required)	01) Region:	1 Oromia
zone	02) Zone	buno_bedelle Buno Bedelle illubabor Illubabor
uness de la marianal	09) Name af warde	
woreda (required)	03) Name of woreda	alge_sachi Alge Sachi bilo_nopa Bilo Nopa
		chora Chora
		doreni Doreni
		hurumu Hurumu
		yayu Yayu
kebele (required)	04) Name of kebele	1 Alge
		2 H/Mogu
		3 Yagere Buno
		4 S/Ganji
		5 Iriyo
		6 Sambato
		7 Supe o1
		8 Chokorsa Dayu
		9 Ali
		10 M/Cage
		11 M/Ekele
		12 L/A/Bona
		13 Jato
		14 Semano
		15 Deleksa
		16 Dilbi
		17 SiboNogo
		18 Chega 19 Abdallaa
		20 Bero Muri
		21 HaleluHadesa
		22 Tobo
		23 Diduu
		24 H/ Abbo
		25 D/ Haroo
		26 Sibo
		27 Keresi
		28 Sonta
		29 Hurumu Town
		30 T/Yobi
		31 Inataro
		32 Yembo
		33 Witate
		34 Leka
		35 Achibo
		36 J/Shono
		37 Bo/Megel
hf two (mailing)	OF) Health facility type	38 Kemise
hf_type (required)	05) Health facility type	1 HEALTH CENTER
bf, outbority (maying 2)	09) Hoelth facility managing authority	2 HEALTH POST
hf_authority (required)	06) Health facility managing authority	1 GOVERNMENT/PUBLIC
		2 PRIVATE
		3 MISSION/FAITH-BASED
		96 OTHER

Field	Question	Answer
hf_location (required)	07) Where is the location of the health facility	1 URBAN
		2 RURAL
gps (<i>required</i>)	08) Record the GPS point of the health facility. Please wait till the accuracy is less than 5m. It will record automatically.	
ealth Facility Visit		
note_hhvisit	health facility VISIT	
instance_name (required)	Name of Health Facility Please write the full name in English, with no abbreviations	
hfv_1 (required)	Is the family planning service provider available for interview?	1 Respondent in the health facil
		0 Respondent NOT in the health facility
hfv_2 (<i>required</i>)	Is the family planning service provider available for interview?	1 Respondent in the health facil 0 Respondent NOT in the health facility
hfv_3 (required)	Is the family planning service provider available for interview?	1 Respondent in the health facil 0 Respondent NOT in the health facility
onsent	STUDY TITLE: Evolution of the FUTUPES are inst. Baceline data solution	
read_consent (required)	STUDY TITLE: Evaluation of the FUTURES project: Baseline data collection UNC Institutional Review Board #21-2143	
	SPONSOR: United States Agency for International Development (USAID)	
	Principal Investigator: Janine Barden-O'Fallon, University of North Carolina	
	Local Investigator: Fikadu Mitiku Abdissa, Jimma University	
	Version Date: September 15, 2021	
	INTRODUCTION	
	This is a consent form for a study to learn about family planning services for youth in this area. The study is funded by	
	USAID through the Data for Impact project and is implemented by Jimma University and the University of North	
	Carolina, USA. This information is being collected as part of an evaluation of the FUTURES project implemented by	
	CARE Ethiopia and it its three partners, Oromia Development Association, Environment and Coffee Forest Forum, and	
	Kulich Youth Reproductive Health and Development Organization. You are being asked to participate because you are	
	a family planning provider at this health facility. Participation means that you will be interviewed by a member of the	
	Jimma University data collection team. We anticipate this interview will take up to one hour.	
	As a participant, you will be asked questions about the family planning services provided at this health facility and your	
	attitudes about services for adolescents and youth. Your responses will be recorded using a tablet or paper form. Your	
	participation is voluntary. We do not expect any risks to you from being in this study. You may not benefit directly from	
	being in this study, but information you share may help improve future training and programming in this area. The study results will be shared with CARE Ethiopia and its partners, USAID and the Packard Foundation.	/
	You do not have to answer any question you do not want to. When you do answer questions, we want you to feel	
	comfortable and answer them as honestly as you can.	
	We will try our best to make sure that your name and all information collected from you stays private and confidential.	
	The only people who will see your responses are research staff who have been trained in confidentiality. When we use	
	the information you give us in writing reports, neither your name nor health facility affiliation will be included.	
	The findings from this study will help CARE Ethiopia, the Packard Foundation, and USAID make decisions on family	
	planning provider training and service provision.	
	There will be no payment for participation in this study.	
	This study was submitted to the Jimma University, College of Agriculture and Veterinary Medicine and Faculty of Public	
	Health Ethical Review Boards and the Institutional Review Board at the University of North Carolina (USA). If you have	
	any questions about this study or the results, you can contact the following. Fikadu Mitiku Abdissa at (+251-471110019 or +251-923612548) at Jimma University.	
	Before you agree to being in this study, we will answer any questions you have. If you join the study, you can ask	
	questions at any time. If you sign below, it will mean that you understand what you have read and you would like to take part in this study.	
consent_granted (required)	In you sign below, it will mean that you understand what you have read and you would like to take part in this study. Would you like to participant in this study?	1 Respondent agrees to be interviewed
		0 Respondent does NOT agree
		be interviewed

	Question	Answer
signature (required)	Signature of Participant	
Questions		
note_101	First, I would like to ask you some questions about this health facility. Please read to the respondent	
q100 (required)	100) Does this health facility use any feedback collection mechanisms?	1 YES 0 NO
q101 (required)	101) What clinic-based feed-back mechanisms does this facility use: Circle all methods mentioned and probe by saying any more?	1 SUGGESTION BOX 2 CLIENT INTERVIEW OR SURVEY FORM 3 OFFICIAL MEETIING WITH COMMUNITY LEADERS 4 INFORMAL DISCUSSION WITH CLIENTS OR THE COMMUNITY 5 COMMUNITY SCORE CAF
q101_other (required)	101.other) Please specify the other	96 OTHER
q102 (required)	102) Does this facility receive any external supervision withen the last 6 months, e.g., from the district, regional, zonal or national office?	1 YES 0 NO
q103 (<i>required</i>)	103) Does this facility receive any supportive supervision for the provision of youth-friendly health services withen the last 6 months?	1 YES 0 NO
q104 (<i>required</i>)	104) Does this facility track family planning referrals?	0 NO
q105 (required)	105) How does this facility mainly track family planning referrals?	1 REFERRAL SLIP/PAPER /PRESCRIPTION 2 MOBILE PHONE REFERR RECEIPT 3 ELECTRONIC REFERRAL RECEIPT 96 OTHER
q105 (required) q05_other (required)	105) How does this facility mainly track family planning referrals? 105. other) Please specify the other	/PRESCRIPTION 2 MOBILE PHONE REFERR RECEIPT 3 3 ELECTRONIC REFERRAL
q05_other (required)		JPRESCRIPTION 2 MOBILE PHONE REFERR RECEIPT 3 ELECTRONIC REFERRAL RECEIPT
q05_other (required)	105.other) Please specify the other	JPRESCRIPTION 2 MOBILE PHONE REFERR RECEIPT 3 ELECTRONIC REFERRAL RECEIPT
q05_other (<i>required</i>) All Questions > HEALTH FACI	105 other) Please specify the other LITY CHARACTERISTICS > Family Planning service provision 106) Does this facility provide (stock the method) or counsel/refer any of the following modern methods of family	JPRESCRIPTION 2 MOBILE PHONE REFERR RECEIPT 3 ELECTRONIC REFERRAL RECEIPT

q106_c (required)		Answer
	106.c) Condoms	1 PROVIDE
		2 COUNSEL ONLY
		0 NEITHER
q106_d (required)	106.d) IUD	1 PROVIDE
		2 COUNSEL ONLY
		0 NEITHER
q106_e (required)	106.e) Implant	1 PROVIDE
		2 COUNSEL ONLY
		0 NEITHER
q106_f (required)	106.f) Emergency contraceptive pills	1 PROVIDE
		2 COUNSEL ONLY
		0 NEITHER
q106_g (required)	106.g) Cycle beads for Standard Days Method	1 PROVIDE
		2 COUNSEL ONLY
		0 NEITHER
q107 (required)	107) Does this facility provide IUD or implant removal on site?	1 YES, REMOVAL OF BOTH
		2 YES, REMOVAL OF IUD ONLY
		3 YES, REMOVAL OF IMPLANT
All Questions > HEALTH FACILI	TY CHARACTERISTICS > Youth Services	0 NO
All Questions > HEALTH FACILI	TY CHARACTERISTICS > Youth Services 108) Are the following services available to youth ages 15-19 at this clinic?	ONLY
q108	108) Are the following services available to youth ages 15-19 at this clinic?	0 NLY 0 N0
		0 NLY 0 NO
q108 q108_a (required)	108) Are the following services available to youth ages 15-19 at this clinic?	ONLY 0 NO 0 NO 0 NO 0 NO
q108	108) Are the following services available to youth ages 15-19 at this clinic?	ONLY 0 NO 0 NO 0 NO 0 NO 1 YES
q108 q108_a (required) q108_b (required)	108) Are the following services available to youth ages 15-19 at this clinic? 108 a) Information and counselling on reproductive health, sexuality and safe sex? 108.b) Testing for sexually transmitted infections/reproductive tract infections?	ONLY ONLY ONLY ONLY ON
q108 q108_a (required)	108) Are the following services available to youth ages 15-19 at this clinic?	ONLY ONLY ONLY ONLY ONV
q108 q108_a (required) q108_b (required)	108) Are the following services available to youth ages 15-19 at this clinic? 108 a) Information and counselling on reproductive health, sexuality and safe sex? 108.b) Testing for sexually transmitted infections/reproductive tract infections?	ONLY ONLY ONLY ONV ON ONV ONV ONV ONV ONV ONV ONV ONV
q108 q108_a (required) q108_b (required)	108) Are the following services available to youth ages 15-19 at this clinic? 108 a) Information and counselling on reproductive health, sexuality and safe sex? 108.b) Testing for sexually transmitted infections/reproductive tract infections?	ONLY ONLY ONLY ONLY ONU
q108 q108_a (required) q108_b (required) q108_c (required)	108) Are the following services available to youth ages 15-19 at this clinic? 108 a) Information and counselling on reproductive health, sexuality and safe sex? 108.b) Testing for sexually transmitted infections/reproductive tract infections?	ONLY ONLY ONLY ONLY ONLY ONV
q108 q108_a (required) q108_b (required)	108) Are the following services available to youth ages 15-19 at this clinic? 108.a) Information and counselling on reproductive health, sexuality and safe sex? 108.b) Testing for sexually transmitted infections/reproductive tract infections? 108.c) Treatment for sexually transmitted infections/reproductive tract infections?	ONLY ONLY ONLY ONLY ONO I YES ONO I YES ONO I YES ONO I YES
q108 q108_a (required) q108_b (required) q108_c (required)	108) Are the following services available to youth ages 15-19 at this clinic? 108.a) Information and counselling on reproductive health, sexuality and safe sex? 108.b) Testing for sexually transmitted infections/reproductive tract infections? 108.c) Treatment for sexually transmitted infections/reproductive tract infections?	ONLY ONLY ONLY ONLY ONLY ONV
q108 q108_a (required) q108_b (required) q108_c (required) q108_c (required) q108_d (required)	108) Are the following services available to youth ages 15-19 at this clinic? 108 a) Information and counselling on reproductive health, sexuality and safe sex? 108.b) Testing for sexually transmitted infections/reproductive tract infections? 108.c) Treatment for sexually transmitted infections/reproductive tract infections? 108.d) Pregnancy testing?	ONLY ONLY ONLY ONLY ONV ONO I YES ONO I NO I YES ONO I NO
q108 q108_a (required) q108_b (required) q108_c (required)	108) Are the following services available to youth ages 15-19 at this clinic? 108.a) Information and counselling on reproductive health, sexuality and safe sex? 108.b) Testing for sexually transmitted infections/reproductive tract infections? 108.c) Treatment for sexually transmitted infections/reproductive tract infections?	ONLY ONLY ONLY ONV ONO I YES ONO I Y
q108 q108_a (required) q108_b (required) q108_c (required) q108_c (required) q108_d (required)	108) Are the following services available to youth ages 15-19 at this clinic? 108 a) Information and counselling on reproductive health, sexuality and safe sex? 108.b) Testing for sexually transmitted infections/reproductive tract infections? 108.c) Treatment for sexually transmitted infections/reproductive tract infections? 108.d) Pregnancy testing?	ONLY ONLY ONLY ONLY ONLY ONV
q108 q108_a (required) q108_b (required) q108_c (required) q108_c (required) q108_d (required)	108) Are the following services available to youth ages 15-19 at this clinic? 108 a) Information and counselling on reproductive health, sexuality and safe sex? 108.b) Testing for sexually transmitted infections/reproductive tract infections? 108.c) Treatment for sexually transmitted infections/reproductive tract infections? 108.d) Pregnancy testing?	ONLY ONLY ONLY ONLY ONV
q108 q108_a (required) q108_b (required) q108_c (required) q108_d (required) q108_e (required)	108) Are the following services available to youth ages 15-19 at this clinic? 108.a) Information and counselling on reproductive health, sexuality and safe sex? 108.b) Testing for sexually transmitted infections/reproductive tract infections? 108.c) Treatment for sexually transmitted infections/reproductive tract infections? 108.d) Pregnancy testing? 108.e) Information and counseling on oral contraceptive pills?	ONLY ONLY ONLY ONV ONO I YES ONO I Y
q108 q108_a (required) q108_b (required) q108_c (required) q108_c (required) q108_d (required)	108) Are the following services available to youth ages 15-19 at this clinic? 108 a) Information and counselling on reproductive health, sexuality and safe sex? 108 b) Testing for sexually transmitted infections/reproductive tract infections? 108 c) Treatment for sexually transmitted infections/reproductive tract infections? 108 d) Pregnancy testing?	ONLY ONLY ONLY ONLY ONU
q108 q108_a (required) q108_b (required) q108_c (required) q108_d (required) q108_e (required)	108) Are the following services available to youth ages 15-19 at this clinic? 108.a) Information and counselling on reproductive health, sexuality and safe sex? 108.b) Testing for sexually transmitted infections/reproductive tract infections? 108.c) Treatment for sexually transmitted infections/reproductive tract infections? 108.d) Pregnancy testing? 108.e) Information and counseling on oral contraceptive pills?	ONLY ONLY ONLY ONLY ONLY ONU
q108 q108_a (required) q108_b (required) q108_c (required) q108_d (required) q108_e (required) q108_e (required) q108_e (required) q108_e (required)	108) Are the following services available to youth ages 15-19 at this clinic? 108.a) Information and counselling on reproductive health, sexuality and safe sex? 108.b) Testing for sexually transmitted infections/reproductive tract infections? 108.c) Treatment for sexually transmitted infections/reproductive tract infections? 108.d) Pregnancy testing? 108.e) Information and counseling on oral contraceptive pills? 108.f) Information and counseling on injectable contraception?	ONLY ONLY ONV ONO ONO ONO ONO ONO ONO ONO ONO ONO
q108 q108_a (required) q108_b (required) q108_c (required) q108_d (required) q108_e (required)	108) Are the following services available to youth ages 15-19 at this clinic? 108.a) Information and counselling on reproductive health, sexuality and safe sex? 108.b) Testing for sexually transmitted infections/reproductive tract infections? 108.c) Treatment for sexually transmitted infections/reproductive tract infections? 108.d) Pregnancy testing? 108.e) Information and counseling on oral contraceptive pills?	ONLY ONLY ONV ONO ONO ONO ONO ONO ONO ONO ONO ONO

Field	Question	Answer	
q108_h (required)	108.h) Information and counselling on IUDs?	1 YE	ES
		0 N	0
q108_i (required)	108.i) Information and counselling on implants?	1 YE	ES
		0 N	
q108_j (required)	108.j) Information and counseling on emergency contraception?	1 YE	
		0 N	
q109 (required)	109) Does this facility provide mainstreamed youth-friendly health services, separate youth-friendly health services, or		AINSTREAMED
	neither?		EPARATE
			EITHER
q110 (required)	110) What does this facility do to ensure the privacy and confidentiality of family planning clients?		ENSURES VISUAL PRIVAC
dine fredancay.	CIRCLE ALL MENTIONED	2 E	ENSURES AUDITORY PRIVACY
		3 A	ASSURES CLIENT CONFIDENTIALITY
			DTHER
		0	NONE
q110_other (required)	110.other) Please specify the other		
q111 (required)	111) Are there any additional practices in place to ensure the privacy and confidentiality of adolescent family planning	1 YE	ES
	clients?	0 N	
q112 (required)	112) What are these additional practices?		SEPARATE HOURS FOR
	CIROLE ALL MENTIONED		ADOLESCENTS
			SEPARATE
			COUNSELING/EXAMINATI
			ROOM
			SEPARATE WAITING ROO
			OTHER
q112_other (required)	112.other) Please specify the other		
q113 (required)	113) Does this clinic do anything to help adolescents and youth feel that they are treated respectfully and are not	1 YE	FS
dire frederiosy	judged for using family planning services?	0 N	
q113_a (required)	113.a) What does this clinic do to help adolescents and youth feel that they are treated respectfully and are not judged	0 14	~
duo_a (redaved)	for using family planning services?		
All Ouestions > HEAI TH FACIL			
	ITY CHARACTERISTICS > Fees		
note_q114	ITY CHARACTERISTICS > Fees 114) Does this facility have a fee for the following items:	1 YE	ES
	ITY CHARACTERISTICS > Fees	1 YE	
note_q114 q114_a (required)	ITY CHARACTERISTICS > Fees 114) Does this facility have a fee for the following items: 114. a) Client health card	0 N	0
note_q114	ITY CHARACTERISTICS > Fees 114) Does this facility have a fee for the following items:	0 NG	o ES
note_q114 q114_a (required) q114_b (required)	ITY CHARACTERISTICS > Fees 114) Does this facility have a fee for the following items: 114. a) Client health card 114. b) Laboratory	0 NG 1 YE 0 NG	o ES O
note_q114 q114_a (required)	ITY CHARACTERISTICS > Fees 114) Does this facility have a fee for the following items: 114. a) Client health card	0 NG 1 YE 0 NG 1 YE	o ES O ES
note_q114 q114_a (required) q114_b (required) q114_c (required)	ITY CHARACTERISTICS > Fees 114) Does this facility have a fee for the following items: 114.a) Client health card 114.b) Laboratory 114.c) imaging (e.g., ultrasound, x-ray)	0 N0 1 YE 0 N0 1 YE 0 N0	0 ES 0 ES 0
note_q114 q114_a (required) q114_b (required)	ITY CHARACTERISTICS > Fees 114) Does this facility have a fee for the following items: 114. a) Client health card 114. b) Laboratory	0 NG 1 YE 0 NG 1 YE 0 NG 1 YE	0 ES ES 0 ES
note_q114 q114_a (required) q114_b (required) q114_c (required) q114_c (required) q114_d (required)	ITY CHARACTERISTICS > Fees 114) Does this facility have a fee for the following items: 114.a) Client health card 114.b) Laboratory 114.c) imaging (e.g., ultrasound, x-ray) 114.d) Contraceptive commodities	0 NG 1 YE 0 NG 1 YE 0 NG 1 YE 0 NG	0 ES ES 0 ES ES
note_q114 q114_a (required) q114_b (required) q114_b (required)	ITY CHARACTERISTICS > Fees 114) Does this facility have a fee for the following items: 114.a) Client health card 114.b) Laboratory 114.c) imaging (e.g., ultrasound, x-ray)	0 NG 1 YE 0 NG 1 YE 0 NG 1 YE 0 NG 1 F F	0 ES ES 0 ES 0 FEE EXEMPTION, NO PAYMENT EXPECTED
note_q114 q114_a (required) q114_b (required) q114_c (required) q114_c (required) q114_d (required)	ITY CHARACTERISTICS > Fees 114) Does this facility have a fee for the following items: 114.a) Client health card 114.b) Laboratory 114.c) imaging (e.g., ultrasound, x-ray) 114.d) Contraceptive commodities 115) What is the procedure if a client is unable to pay for any of the fees associated with family planning services in	0 NG 1 YE 0 NG 1 YE 0 NG 1 YE 0 NG 1 YE 0 NG 2 F	0 ES ES 0 ES 0 EE EXEMPTION, NO PAYMENT EXPECTED EE DISCOUNTED
note_q114 q114_a (required) q114_b (required) q114_c (required) q114_c (required) q114_d (required)	ITY CHARACTERISTICS > Fees 114) Does this facility have a fee for the following items: 114.a) Client health card 114.b) Laboratory 114.c) imaging (e.g., ultrasound, x-ray) 114.d) Contraceptive commodities 115) What is the procedure if a client is unable to pay for any of the fees associated with family planning services in	0 N/0 1 YE 0 N/0 1 YE 0 N/0 1 YE 0 N/0 1 F F 2 F 3 F	0 ES ES ES ES 0 FEE EXEMPTION, NO FEE EXEMPTION, NO FEE DISCOUNTED FEE DISCOUNTED
note_q114 q114_a (required) q114_b (required) q114_c (required) q114_c (required) q114_d (required)	ITY CHARACTERISTICS > Fees 114) Does this facility have a fee for the following items: 114.a) Client health card 114.b) Laboratory 114.c) imaging (e.g., ultrasound, x-ray) 114.d) Contraceptive commodities 115) What is the procedure if a client is unable to pay for any of the fees associated with family planning services in	0 N/0 1 YE 0 N/0 1 YE 0 N/0 1 YE 0 N/0 1 F F 2 F 3 F L	0 ES ES 0 ES ES 0 EE EXEMPTION, NO *EE EXEMPTION, NO *EE DISCOUNTED *EE DISCOUNTED PAYMENT EXPECTED ATER
note_q114 q114_a (required) q114_b (required) q114_c (required) q114_c (required) q114_d (required)	ITY CHARACTERISTICS > Fees 114) Does this facility have a fee for the following items: 114.a) Client health card 114.b) Laboratory 114.c) imaging (e.g., ultrasound, x-ray) 114.d) Contraceptive commodities 115) What is the procedure if a client is unable to pay for any of the fees associated with family planning services in	0 NK 1 YE 0 NG 1 YE 0 NG 1 YE 0 NG 1 YE 0 NG 1 F F 2 F 3 F L 4 S	0 ES ES ES ES CO EE EXEMPTION, NO PAYMENT EXPECTED ESE DISCOUNTED PAYMENT EXPECTED EXMENT EXPECTED ATER ESERVICE NOT PROVIDED,
note_q114 q114_a (required) q114_b (required) q114_c (required) q114_c (required) q114_d (required)	ITY CHARACTERISTICS > Fees 114) Does this facility have a fee for the following items: 114.a) Client health card 114.b) Laboratory 114.c) imaging (e.g., ultrasound, x-ray) 114.d) Contraceptive commodities 115) What is the procedure if a client is unable to pay for any of the fees associated with family planning services in	0 NK 1 YE 0 NG 1 YE 0 NG 1 YE 0 NG 1 YE 0 NG 1 F F 2 F 3 F L 4 S 4 S	0 ES ES ES ES ES EE EXEMPTION, NO PAYMENT EXPECTED PAYMENT EXPECTED ASTRE ESERVICE NOT PROVIDED ASKED TO COME BACK
note_q114 q114_a (required) q114_b (required) q114_c (required) q114_c (required) q114_d (required)	ITY CHARACTERISTICS > Fees 114) Does this facility have a fee for the following items: 114.a) Client health card 114.b) Laboratory 114.c) imaging (e.g., ultrasound, x-ray) 114.d) Contraceptive commodities 115) What is the procedure if a client is unable to pay for any of the fees associated with family planning services in	0 N40 1 YE 0 N40 1 YE 0 N40 1 YE 0 N40 1 F F 2 F 3 F L 4 S 4 S 4 V	0 ES ES ES ES ES ES EE EXEMPTION, NO PAYMENT EXPECTED PAYMENT EXPECTED PAYMENT EXPECTED ATER SERVICE NOT PROVIDED, SSKED TO COME BACK WHEN ABLE TO PAY
note_q114 q114_a (required) q114_b (required) q114_c (required) q114_c (required) q114_d (required)	ITY CHARACTERISTICS > Fees 114) Does this facility have a fee for the following items: 114.a) Client health card 114.b) Laboratory 114.c) imaging (e.g., ultrasound, x-ray) 114.d) Contraceptive commodities 115) What is the procedure if a client is unable to pay for any of the fees associated with family planning services in	0 N4 1 YE 0 N4 1 YE 1 YE	0 ES ES ES ES ES 0 EE EXEMPTION, NO PAYMENT EXPECTED EE DISCOUNTED PAYMENT EXPECTED ATER SERVICE NOT PROVIDED. ASERD TO COME BACK WHEN ABLE TO PAY ACCEPT PAYMENT IN-KINI
note_q114 q114_a (required) q114_b (required) q114_c (required) q114_c (required) q114_d (required)	ITY CHARACTERISTICS > Fees 114) Does this facility have a fee for the following items: 114.a) Client health card 114.b) Laboratory 114.c) imaging (e.g., ultrasound, x-ray) 114.d) Contraceptive commodities 115) What is the procedure if a client is unable to pay for any of the fees associated with family planning services in	0 NK 1 YE 0 NK 1 YE 0 NK 1 YE 0 NK 1 YE 0 NK 1 F F 2 F 3 F L 4 S 4 S 4 S 4 S 6 F 0 K	0 ES ES ES ES ES EE EXEMPTION, NO PAYMENT EXPECTED PAYMENT EXPECTED PAYMENT EXPECTED .ATER SERVICE NOT PROVIDED, ASKED TO COME BACK
note_q114 q114_a (required) q114_b (required) q114_c (required) q114_c (required) q114_d (required)	ITY CHARACTERISTICS > Fees 114) Does this facility have a fee for the following items: 114.a) Client health card 114.b) Laboratory 114.c) imaging (e.g., ultrasound, x-ray) 114.d) Contraceptive commodities 115) What is the procedure if a client is unable to pay for any of the fees associated with family planning services in	0 N/4 1 YE 0 N/4 1 YE 0 N/4 1 YE 0 N/4 1 YE 0 N/4 1 F 2 F 3 F 4 S 4 S 4 S 4 S 6 F C 0 N/4 1 YE	0 ES ES ES ES ES EE EXEMPTION, NO EEE EXEMPTION, NO PAYMENT EXPECTED EEE DISCOUNTED PAYMENT EXPECTED ATER EDISCOUNTED PAYMENT EXPECTED ASKED TO COME BACK WHEN ABLE TO PAY ACCEPT PAYMENT IN-KIN EEE COVERED BY COMMUNITY HEALTH
note_q114 q114_a (required) q114_b (required) q114_c (required) q114_d (required) q115 (required)	ITY CHARACTERISTICS > Fees 114) Does this facility have a fee for the following items: 114.a) Client health card 114.b) Laboratory 114.c) imaging (e.g., ultrasound, x-ray) 114.d) Contraceptive commodities 115) What is the procedure if a client is unable to pay for any of the fees associated with family planning services in this facility?	0 N/4 1 YE 0 N/4 1 YE 0 N/4 1 YE 0 N/4 1 YE 0 N/4 1 F 2 F 3 F 4 S 4 S 4 S 4 S 6 F C 0 N/4 1 YE	0 ES ES ES ES ES ES ES ES ES ES ES ES ES
note_q114 q114_a (required) q114_b (required) q114_c (required) q114_d (required) q115 (required) q115_other (required)	ITY CHARACTERISTICS > Fees 114) Does this facility have a fee for the following items: 114.a) Client health card 114.b) Laboratory 114.d) Contraceptive commodities 114.d) Contraceptive commodities 115) What is the procedure if a client is unable to pay for any of the fees associated with family planning services in this facility? 115 other) Please specify the other	0 N4 1 YE 0 N4 1 YE 0 N4 1 YE 0 N4 1 YE 0 N4 1 F F 2 F 3 F L 4 S 4 S 4 S 4 S 6 F 0 C 1 YE 1 Y	0 ES ES ES ES ES ES EE EXEMPTION, NO PAYMENT EXPECTED PAYMENT EXPECTED ED DISCOUNTED PAYMENT EXPECTED ATER SERVICE NOT PROVIDED SKED TO COME BACK WHEN ABLE TO PAY ACCEPT PAYMENT IN-KIN FEE COVERED BY COMMUNITY HEALTH NSURANCE DTHER
note_q114 q114_a (required) q114_b (required) q114_c (required) q114_c (required) q115 (required)	ITY CHARACTERISTICS > Fees 114) Does this facility have a fee for the following items: 114.a) Client health card 114.b) Laboratory 114.c) imaging (e.g., ultrasound, x-ray) 114.d) Contraceptive commodities 115) What is the procedure if a client is unable to pay for any of the fees associated with family planning services in this facility?	0 N/4 1 YE 0 N/4 1 YE 0 N/4 1 YE 0 N/4 1 YE 0 N/4 1 F F 2 F 3 F L 4 S 4 S 4 S 4 S 6 F 0 C 0 N/4 1 YE 1 Y	0 ES ES ES ES ES ES EE EXEMPTION, NO PAYMENT EXPECTED EE DISCOUNTED PAYMENT EXPECTED ATER SERVICE NOT PROVIDED SERVICE NOT PROVIDED SER
note_q114 q114_a (required) q114_b (required) q114_c (required) q114_c (required) q115 (required) q115 (required) q115 (required) q116 (required)	ITY CHARACTERISTICS > Fees 114) Does this facility have a fee for the following items: 114.a) Client health card 114.b) Laboratory 114.c) imaging (e.g., ultrasound, x-ray) 114.d) Contraceptive commodities 115) What is the procedure if a client is unable to pay for any of the fees associated with family planning services in this facility? 115.other) Please specify the other 116) Does the facility have a different fee scale for adolescents?	0 N4 1 YE 0 N4 1 YE 0 N4 1 YE 0 N4 1 YE 0 N4 1 F F 2 F 3 F L 4 S 4 S 4 S 4 S 6 F 0 C 1 YE 1 Y	0 ES ES ES ES ES ES EE EXEMPTION, NO PAYMENT EXPECTED EE DISCOUNTED PAYMENT EXPECTED ATER SERVICE NOT PROVIDED SERVICE NOT PROVIDED SER
note_q114 q114_a (required) q114_b (required) q114_c (required) q114_d (required) q115 (required) q115 (required) q115 (required) q116 (required) q116 (required) q117 (required) q117 (required) q117 (required)	TY CHARACTERISTICS > Fees 114) Does this facility have a fee for the following items: 114.a) Client health card 114.b) Laboratory 114.c) imaging (e.g., ultrasound, x-ray) 114.d) Contraceptive commodities 115) What is the procedure if a client is unable to pay for any of the fees associated with family planning services in this facility? 115. other) Please specify the other 116) Does the facility have a different fee scale for adolescents? 117) What is the fee scale for adolescents?	0 N/4 1 YE 0 N/4 1 YE 0 N/4 1 YE 0 N/4 1 YE 0 N/4 1 F F 2 F 3 F L 4 S 4 S 4 S 4 S 6 F 0 C 0 N/4 1 YE 1 Y	0 ES ES ES ES ES ES EE EXEMPTION, NO PAYMENT EXPECTED EE DISCOUNTED PAYMENT EXPECTED ATER SERVICE NOT PROVIDED, ATER SERVICE NOT PROVIDED, ACCEPT PAYMENT IN-KINI FEE COVERED BY COMMUNITY HEALTH NSURANCE DTHER ES
<pre>note_q114 q114_a (required) q114_b (required) q114_c (required) q114_c (required) q114_c (required) q115 (required) q115 (required) q115 (required) q116 (required) q116 (required) q117 (required) All Questions > HEALTH FACIL</pre>	TY CHARACTERISTICS > Fees 114) Does this facility have a fee for the following items: 114.a) Client health card 114.b) Laboratory 114.c) imaging (e.g., ultrasound, x-ray) 114.d) Contraceptive commodities 115) What is the procedure if a client is unable to pay for any of the fees associated with family planning services in this facility? 115) what is the procedure if a client is unable to pay for any of the fees associated with family planning services in this facility? 115. other) Please specify the other 116) Does the facility have a different fee scale for adolescents? 117) What is the fee scale for adolescents? 117) What is the fee scale for adolescents?	0 N4 1 YE 0 N4 1 YE 0 N6 1 YE 0 N6 1 YE 2 F 3 F 4 S 4 S 4 S 4 S 4 S 4 S 4 S 4 S	0 ES S S S S S S S S S S S S S
note_q114 q114_a (required) q114_b (required) q114_c (required) q114_c (required) q115 (required) q115 (required) q115 (required) q116 (required) q117 (required) q117 (required)	TY CHARACTERISTICS > Fees 114) Does this facility have a fee for the following items: 114.a) Client health card 114.b) Laboratory 114.c) imaging (e.g., ultrasound, x-ray) 114.d) Contraceptive commodities 115) What is the procedure if a client is unable to pay for any of the fees associated with family planning services in this facility? 115. other) Please specify the other 116) Does the facility have a different fee scale for adolescents? 117) What is the fee scale for adolescents?	0 N/4 1 YE 0 N/4 1 YE 0 N/4 1 YE 0 N/4 1 YE 0 N/4 1 F F 2 F 3 F 4 S 4 S 4 S 4 5 F 6 F 0 H 1 YE 0 N/4 1 YE 1 YE	0 ES S S S S S S S S S S S S S
note_q114 q114_a (required) q114_b (required) q114_c (required) q114_c (required) q114_c (required) q115 (required) q115 (required) q116 (required) q117 (required) q117 in the product of the	TY CHARACTERISTICS > Fees 114) Does this facility have a fee for the following items: 114.a) Client health card 114.b) Laboratory 114.c) imaging (e.g., ultrasound, x-ray) 114.d) Contraceptive commodities 115) What is the procedure if a client is unable to pay for any of the fees associated with family planning services in this facility? 115) what is the procedure if a client is unable to pay for any of the fees associated with family planning services in this facility? 115. other) Please specify the other 116) Does the facility have a different fee scale for adolescents? 117) What is the fee scale for adolescents? 117) What is the fee scale for adolescents?	0 N4 1 YE 0 N4 1 YE 0 N6 1 YE 0 N6 1 YE 2 F 3 F 4 S 4 S 4 S 4 S 4 S 4 S 4 S 4 S	0 ES S S S S S S S S S S S S S

ield	Question	Answ	ver
q122 (required)	122) In your opinion, does this facility have a strong gender-based violence referral pathway?	1	YES
		0	NO
All Questions > DEMOGR#	HICS AND OPINIONS		
note_demo_opinions	READ: Now I will ask some questions about yourself and your work as a family planning service provider.		
q201 (required)	201) RECORD SEX		MALE
		_	FEMALE
q202 (required)	202) What is your profession?		NURSE (Bsc)
			NURSE (Diploma)
			MIDWIFE (Bsc)
			MIDWIFE (Diploma)
	-		HEALTH OFFICER
			DOCTOR
		7	HEALTH EXTENSION
			WORKER
			PHARMACIST
			MEDICAL LAB. TECH. (Be MEDICAL LAB. TECH.
			(Diploma)
	-	QF	OTHER
a202 other (mauring)	200 other) Diago procify the other	00	Omer
q202_other (required) q203_year (required)	202.other) Please specify the other 203.a) How long (in years) have you worked at this facility?		
aroo_log (reduied)	Record 0 if less than one year, and record months in the next question.		
q203_month (required)	203.b) How long (in months) have you worked at this facility?		
q204 (required)	204) In your current position, and as a part of your work for this facility, do you personally provide any services that are	1	YES
	designed to be youth or adolescent friendly? i.e., designed with the specific aim to encourage youth or adolescent	0	NO
	utilization of family planning?		
q205 (required)	205) Have you received any in-service training, training updates or refresher training on topics specific to youth or	1	YES, WITHIN PAST TWO
	adolescent friendly services? IF YES, was the training, training update or refresher training within the past two years or		YEARS
	more than two years ago?	2	YES, OVER TWO YEARS A
		3	NO TRAININGS OR UPDAT
All Questions > DEMOG	APHICS AND OPINIONS > OPINIONS		
q206	206) Please say whether you strongly agree, agree, disagree, or strongly disagree with the following statements:		
q206_a (required)	206.a) It is acceptable for unmarried adolescents to be sexually active.	4	STRONGLY AGREE
		3	AGREE
		2	DISAGREE
		1	STRONGLY DISAGREE
q206_b (required)	206.b) It is acceptable for unmarried adolescents to use contraception to avoid pregnancy.	4	STRONGLY AGREE
		3	AGREE
			DISAGREE
		1	STRONGLY DISAGREE
q206_c (required)	206.c) If a client wanted it, I would provide a family planning method before she has had children.	4	STRONGLY AGREE
		3	AGREE
			DISAGREE
		1	STRONGLY DISAGREE
q206_d (required)	206.d) If an unmarried client wanted it, I would provide them a family planning method.		STRONGLY AGREE
			AGREE
		2	DISAGREE
		1	STRONGLY DISAGREE
q206_e (required)	206.e) I would require parental consent before providing any contraceptive methods to youth younger than 17 years	4	STRONGLY AGREE
	old.	3	AGREE
		2	DISAGREE
			STRONGLY DISAGREE
q206_f (required)	206.f) Helping a client make an informed choice about a family planning includes explaining contraceptive methods		STRONGLY AGREE
q206_f (required)	206.f) Helping a client make an informed choice about a family planning includes explaining contraceptive methods that can be used without other people knowing about it.	4	AGREE
q206_f (required)		4 3 2	AGREE DISAGREE
q206_f (required)		4 3 2	AGREE
q206_f (<i>required</i>) q206_g (<i>required</i>)		4 3 2 1	AGREE DISAGREE
	that can be used without other people knowing about it.	4 3 2 1 4	AGREE DISAGREE STRONGLY DISAGREE
	that can be used without other people knowing about it.	4 3 2 1 4 3	AGREE DISAGREE STRONGLY DISAGREE STRONGLY AGREE
	that can be used without other people knowing about it.	4 3 2 1 4 3 2	AGREE DISAGREE STRONGLY DISAGREE STRONGLY AGREE AGREE
	that can be used without other people knowing about it.	4 3 2 1 4 3 2 2 1	AGREE DISAGREE STRONGLY DISAGREE STRONGLY AGREE AGREE DISAGREE
q206_g (required)	that can be used without other people knowing about it. 206.g) A couple's decision about the number of children to have should be left up to the man.	4 3 2 1 4 3 2 2 1 1 4	AGREE DISAGREE STRONGLY DISAGREE STRONGLY AGREE DISAGREE STRONGLY DISAGREE

Field	Question	Answer
		1 STRONGLY DISAGREE
q206_i (required)	206.i) I would provide long term contraception to an adolescent client if she wanted it.	4 STRONGLY AGREE
		3 AGREE
		2 DISAGREE
		1 STRONGLY DISAGREE
q207 (required)	207) In your opinion, does this health facility do a good job in making family planning services accessible to	1 YES
	adolescents?	0 NO
q208 (required)	208) IF NO: What could the facility do to improve its accessibility to adolescents?	
note_end	Thank you for your time and for participating in this study. We are very appreciative of your responses.	
note_from_data_collectoer	Dear data collector you have successfully completed interviewing this respondent. If you have any note regarding this interview, please write it here.	

Appendix 1c. SDGAG

The six dimensions of SDG Analysis grid along with their respective themes and goals involved.

Theme	es/Goals	Weight	Assessment	Justification
1.1 Po	verty reduction			
1.1.1	Put in place measures to support the most disadvantaged and most vulnerable within local communities			
1.1.2	Implement measures to support the most disadvantaged and most vulnerable, at the national level			
1.1.3	Contribute to actions seeking to reduce poverty at the supranational level			
Averag	ge weighting and performance: Poverty reduction			
1.2 Wa	nter			
1.2.1	Ensure a potable water supply for everyone			
1.2.2	Ensure adequate quality of water supply according to its uses			
1.2.3	Ensure access to adequate sanitation and hygiene services			
1.2.4	Increase the population's participation in mastering water and improving its management			
Averag	ge weighting and performance: Water			
1.3 Fo	od			
1.3.1	Ensure access to food			
1.3.2	Ensure the nutritional quality of food			
1.3.3	Ensure food security			
1.3.4	Enhance food sovereignty			
1.3.5	Implement sustainable agricultural and fishing practices			
Averag	e weighting and performance: Food			
1.4 He	alth			
1.4.1	Improve and maintain the health of populations			
1.4.2	Ensure access to health care			
1.4.3	Promote preventive interventions in health, healthy environments, and the adoption of healthy lifestyle habits			
1.4.4	Reduce factors likely to cause mental health issues			
1.4.5	Meet the specific needs of maternal and infant health			
1.4.6	Reduce irritants			
Averag	ge weighting and performance: Health			
1.5 Sa	fety			
1.5.1	Create a feeling of security			
1.5.2	Ensure effective safety			
1.5.3	Provide basic safety education			

40	ucotion			
	ucation			
1.6.1	Ensure access to a quality educational system			
1.6.2	Ensure basic functional education for all			
1.6.3	Allow everyone to acquire the level of education they wish to attain			
1.6.4	Allow access to continuing education and training			
1.6.5	Provide education on sustainable development and citizenship			
Averag	e weighting and performance: Education			
1.7 Co	mmunity and their involvement			
1.7.1	Promote community involvement			
1.7.2	Value and recognize personal and collective achievement			
1.7.3	Promote social cohesion			
1.7.4	Promote connections			
1.7.5	Allow for the development of self-esteem and self confidence			
1.7.6	Improve the independence and resilience of communities			
Averag	le weighting and performance			
1.8 Hu	man settlements			
1.8.1	Ensure access to housing			
1.8.2	Prioritize sustainable mobility			
1.8.3	Build sustainable infrastructures			
1.8.4	Promote sustainable cities and human settlements			
1.8.5	Work to make the real estate sector secure and reliable			
1.8.6	Promote equity and territorial solidarity			
Averag	e weighting and performance: Human settlements			
1.9 Ge	nder			
1.9.1	Seek to implement equal rights without gender distinctions			
1.9.2	Seek gender equity			
1.9.3	Promote the independence of women and girls			
Averag	e weighting and performance: Gender			
Averaç	ge weighting and performance: Social dimension			
	DLOGICAL DIMENSION: Seeks to address the need for a q nable resources, and to redefine the relationship between			and for
2.1 Eco	osystems			
2.1.1	Develop knowledge of ecosystems and the species that depend on them			
2.1.2	Preserve continental ecosystems			
2.1.3	Restrict the biological, chemical, and physical degradation of the soil			
2.1.4	Combat desertification			
2.1.5	Preserve marine and coastal ecosystems			
2.1.6	Establish objectives for restoring degraded ecosystems			
		1	1	

2.2 Bio	diversity			
2.2.1	Encourage biodiversity protection			
2.2.2	Protect rare, threatened, and at-risk species			
2.2.3	Raise awareness of symbolic species			
Averag	e weighting and performance: Biodiversity			
	sources			
2.3.1	Preserve the resources needed to sustain life in ecosystems			
2.3.2	Choose low-impact resources			
2.3.3	Plan for the prudent use of renewable resources			
2.3.4	Plan for the prudent use of non-renewable resources			
2.3.5	Optimize resources that are at the end of their life			
Averag	e weighting and performance: Resources			
2.4 Out	tputs			
2.4.1	Identify liquid, solid, and gaseous outputs and the impacts of releasing them into the environment			
2.4.2	Minimize outputs			
2.4.3	Minimize impacts			
2.4.4	Manage hazardous waste properly			
2.4.5	Limit global pollutant emissions			
Averag	e weighting and performance: Outputs			
2.5 Lan	nd use			
2.5.1	Optimize land use			
2.5.2	Limit usage conflicts			
2.5.3	Maintain landscape diversity			
Averag	e weighting and performance: Land use			
2.6 Clir	mate change			
2.6.1	Quantify greenhouse gas emissions			
2.6.2	Reduce GHG emissions			
2.6.3	Increase carbon sinks			
2.6.4	Compensate for greenhouse gas emissions			
2.6.5	Plan for adaptation measures to respond to the new climate reality			
Averag	e weighting and performance: Climate change			
Averag	e weighting and performance: Ecological dimension			
	NOMIC DIMENSION: Seeks to address the material needs mmunities.	and financ	ial empowerme	nt of individuals
3.1 Res	sponsible production			
3.1.1	Producing quality goods and services			
3.1.2	Ensure balance between needs and the goods and services produced			
3.1.3	Promoting eco design from a product life cycle perspective			
3.1.4	Promote sustainable industrialization			

3.1.5	Implement extended producer responsibility	
	e weighting and performance: Responsible production	
	sponsible consumption	
3.2.1	Facilitating access to goods and services	
3.2.2	Encourage responsible purchasing and consumption	
3.2.3	Encourage responsible investment	
	e weighting and performance: Responsible consumption	
	onomic viability	
3.3.1	To ensure economic viability	
3.3.2	To encourage responsible sources of funding	
3.3.3	To limit the financial risks	
3.3.4	To limit the return on capital	
	e weighting and performance: Economic viability	
3.4 Wo		
3.4.1	To promote access to an occupation	
3.4.2	To ensure fair value for people's work	
Averag	e weighting and performance: Work	
3.5 We	alth and prosperity	
3.5.1	To stimulate exchanges between people and societies	
3.5.2	To aim for wealth growth	
3.5.3	To establish sustainable tourism practices	
3.5.4	To limit the possibility of capital flight	
Averag	e weighting and performance: Wealth and prosperity	
3.6 En	ergy	
3.6.1	To ensure access to reliable and affordable energy services	
3.6.2	To promote the use of energy with less impact	
3.6.3	To plan a wise use of energy	
Averag	e weighting and performance: Energy	
3.7 En	trepreneurship	
3.7.1	To develop an entrepreneurial culture	
3.7.2	To support entrepreneurial capacity	
3.7.3	To ensure equitable access to means of wealth production	
Averag	e weighting and performance: Entrepreneurship	
3.8 Ec	onomic models	
3.8.1	To eliminate distortions from economic models	
3.8.2	To value social and solidarity economy	
3.8.3	To maintain or integrate traditional economic models with the dominant economy	
3.8.4	To support emerging and innovative economic models	
Averag	e weighting and performance: Economic models	
Avera	ge weighting and performance: Economic dimension	

	TURAL DIMENSION: Seeks to address the need to affirm, ural traits.	express, pi	rotect, and pi	romote the diversity
4.1 Tra	nsmission of cultural heritage			
4.1.1	To promote individual expression, freedom and pluralism of beliefs, opinions and identities			
4.1.2	To ensure the conservation, restoration, and compensation of the cultural heritage			
4.1.3	To recognize cultural representations of the environment			
4.1.4	To develop knowledge of the past and of history			
4.1.5	To value and support linguistic diversity			
Averag heritag	e weighting and performance: Transmission of cultural e			
4.2 Cu	Itural and artistic practices			
4.2.1	To encourage cultural expression			
4.2.2	To affirm the plural and evolving nature of culture			
4.2.3	To recognize the importance of minorities and their contributions to society			
4.2.4	To provide access to culture through education at all levels			
Averag	e weighting and performance: Cultural and artistic practices			
4.3 Cu	Itural diversity			
4.3.1	To promote interculturality			
4.3.2	To ensure equity between cultures			
4.3.3	To support the diversity of cultural expressions			
Averag	e weighting and performance: Cultural diversity			
4.4 Co	ntribution of culture to development			
4.4.1	To promote the emergence of a cultural industry that generates jobs and wealth			
4.4.2	To make explicit the links between culture, development, employment, and economic prosperity			
4.4.3	To ensure an equitable sharing of innovations arising from cultural assets or traditional knowledge			
Averag develop	e weighting and performance: Contribution of culture to oment			
Averag	ge weighting and performance: Cultural dimension			
5. ETH values	ICAL DIMENSION: Seeks equity needs, consistency needs	s, and the n	eed to identi	fy with common
5.1 Res	sponsibility			
5.1.1	To act with integrity and transparently	1		
5.1.2	To apply the precautionary principle			
5.1.3	To respect human rights	1		
5.1.4	To assume responsibility for human beings, other living beings, and non-living beings			
5.1.5	To balance individual freedom and collective responsibilities			
5.1.6	To promote the adoption of sustainable lifestyles			
Averag	e weighting and performance: Responsibility			

5.2 Pe	ace		
5.2.1	To promote a culture of peace and non-violence		
5.2.2	To search for peaceful solutions to conflicts		
5.2.3	To work towards post-conflict resolution and reconstruction		
5.2.4	To foster a sense of justice		
Averag	e weighting and performance: Peace		
5.3 Be	nevolence		
5.3.1	To increase accessibility		
5.3.2	To offer compensation to affected individuals and groups		
5.3.3	To develop community spirit and solidarity		
5.3.4	To embrace otherness		
Averag	ge weighting and performance		
5.4 Sh	aring		
5.4.1	To maximize benefits		
5.4.2	To ensure a redistribution mechanism		
5.4.3	To respect common goods		
Averag	ge weighting and performance: Sharing		
5.5 Eth	hical process		
5.5.1	To question ethical goals		
5.5.2	To develop an ethical dialogue		
5.5.3	To promote the emergence and sharing of common values		
5.5.4	To ensure consistency between actions and values		
Averag	e weighting and performance: Ethical process		
Avera	ge weighting and performance: Ethical dimension		
	/ERNANCE DIMENSION: Seeks to participation and citizer e need for effective institutions.	nship, democracy a	nd transparency needs,
6.1 Ins	titutions		
6.1.1	To improve the effectiveness, accountability, and inclusiveness of institutions		
6.1.2	To ensure access and equality in the face of justice		
6.1.3	To limit opportunities for corruption		
6.1.4	To encourage competence		
Averag	e weighting and performance: Institutions		
6.2 To	ols and processes		
6.2.1	To integrate sustainable development into management processes		
6.2.2	To optimize the use of instruments for operationalizing sustainable development		
Averag	e weighting and performance: Tools and processes		
6.3 Pa	rticipation and citizenship		
6.3.1	To promote engagement and mobilization around a common vision		
6.3.2	To encourage stakeholder Participation and citizenship		
	•		

	ge weighting and performance: Governance dimension	
Averag resilier	e weighting and performance: Risk management and ace	
6.8.5	To provide for adaptations to changes	
6.8.4	To promote an equitable distribution of risks	
6.8.3	To consider the perception of risk	
6.8.2	To apply the principle of prevention	
6.8.1	To identify risks	
6.8 Ris	k management and resilience	
Averag	e weighting and performance: Innovation	
6.7.5	To manage risks associated with new technologies	
6.7.4	To promote access to knowledge and technologies	
6.7.3	To encourage the implementation of new solutions	
6.7.2	To promote research and development	
6.7.1	To optimize innovation potential and diversify options	
6.7 Inn	novation	
Averag	e weighting and performance: Information	
6.6.5	To be accountable in a transparent way	
6.6.4	To establish monitoring and evaluation measures	
6.6.3	To provide basic information to decision-makers	
6.6.2	To use the appropriate communication mechanisms	
6.6.1	To ensure access to prior, relevant, comprehensible and fair information	
6.6 Inf	ormation	
Averag	e weighting and performance: Local integration	
6.5.3	To ensure systemic coherence	
6.5.2	To include specific local issues	
6.5.1	To respect the legal context	
6.5 Lo	cal integration	
Averag	e weighting and performance: Subsidiary	
6.4.3	To ensure consistency among the various levels of decision making	
6.4.2	To promote the accountability of actors	
6.4.1	To bring decision-making closer to stakeholders	
6.4 Su	bsidiary	
Averag	e weighting and performance: Participation and citizenship	
6.3.7	To make exercising active citizenship possible	
6.3.6	To consider the level of acceptability	
6.3.5	To develop partnerships	
6.3.4	To recognize the contribution of donors	
6.3.3	To ensure the inclusiveness of participatory mechanisms	

Appendix 2. Data Collection Team

Number	Name	Sex	Role and Responsibility
1.	Derresa Bulcha	Male	Coordinator
2.	Tolcha Techane	Male	Supervisor
3.	Abdi Tesfa	Male	Enumerator
4.	Zanaba Kedir	Female	Enumerator
5.	Gelane Hinsarmu	Female	Enumerator
6.	Alemitu Worku	Female	Enumerator
7.	Garamu Motumma	Male	Supervisor
8.	Chaltu Dabi	Female	Enumerator
9.	Burtukan Tolera	Female	Enumerator
10.	Meti Gemechu	Female	Enumerator
11.	Zahara kedir	Female	Supervisor
12.	Dr. Itu Gemeda	Female	Enumerator
13.	Fozia Ali	Female	Enumerator
14.	Nigatu Ararso	Male	Enumerator
15.	Gadise Idilu	Female	Enumerator
16.	Hawi Gemechu	Female	Supervisor
17.	Kumela Deksisa	Male	Enumerator
18.	Marta Hailemariam	Female	Enumerator
19.	Kasech Tibebu	Female	Enumerator
20.	Akima Kedir	Female	Enumerator

Appendix 3. Household shocks in 12 months preceding survey

	Intervention	Comparison	Total	Unweighted
	%	%	%	number
Experienced any shocks	60.6	60.8	60.7	676
Ν	555	558		1,113
Shocks experienced:				
Significant rise in food prices	77.5	83.7	82.2	546
Loss of livestock or poultry to disease or pests	36.1	27.7	29.7	* 214
Lower crop yield due to drought, flood, crop disease, or pests	19	19.6	19.5	132
Disruption of farming or livestock	15.7	12.6	13.4	96
Serious illness or accident of household member(s)	8.9	8.7	8.7	59
Business failure	3.6	6.7	5.9	35
Significant fall in sales price of crops or livestock or poultry	3.5	3.0	3.1	22
End of regular assistance, aid, or remittances	3.5	2.0	2.4	19
Death of income earner(s)	3.3	2.3	2.6	19
Birth in the household	1.8	2.7	2.5	15
Conflict/violence	2.3	2.0	2.1	15
Theft/looting of cash and other property	2.0	2.0	2.0	14
Break-up of household (divorce/separation/death/migration)	2.1	1.2	1.4	11
Damage/destruction of dwelling	0.3	1.5	1.2	6
Other	0.6	0.3	0.4	3
Shocks reported as most significant (n=676)				
Significant rise in food prices	53.5	63.8	61.3	398
Loss of livestock or poultry to disease or pests	21.1	13.2	15.1	114
Lower crop yield due to drought, flood, crop disease, or pests	9.4	9	9.1	63
Disruption of farming or livestock	6.2	3.3	4	32
Serious illness or accident of household member(s)	3.3	4.6	4.3	26
Business failure	0.3	1.4	1.1	6
Significant fall in sales price of crops or livestock or poultry	0.6	1.2	1.1	6
End or regular assistance, aid, or remittances	0.3	0.0	0.1	1
Death of income earner(s)	1.8	1.4	1.5	11
Birth in the household	0.3	0.0	0.1	1
Conflict/violence	0.3	0.3	0.3	2
Theft/looting of cash and other property	1.5	0.9	1.0	8
Break-up of household (divorce/separation/death/migration)	0.6	0.3	0.4	3
None of the above	0.6	0.6	0.6	4
Other	0.3	0.0	0.1	1
Response to shocks reported as most significant (n=616)				· · ·
Reduced expenditures	20.6	19.8	20.0	226
Relied on savings	20.0	19.2	19.6	224
Nothing	16.2	13.2	13.6	160
-				6
Other	0.7	0.4	0.4	

Positive events experienced 12 months preceding the survey (n=196)				
New or regular job for a household member	7.2	10.7	9.8	100
New or increased remittances	5.6	6.9	6.6	70
New government grant/support	1.6	0.6	0.8	12
Inheritance	1.4	0.5	0.8	11
Scholarships	0.2	0.4	0.3	3

* p-value < 0.05

Data for Impact

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