SOCIAL IMPACT ASSESSMENT: COUNTRY SNAPSHOT



ETHIOPIA



Location: Hawassa

BACKGROUND

Located in the Addis Ketema sub-city of Hawassa Operating since 1985

Core services

266 children are being cared for in family-like alternative care37 children are being cared for in kinship care469 children are being supported through family strengthening services

Supporting services

- 1 kindergarten
- 1 early childhood care and education centre
- 1 primary school
- 2 secondary schools
- 1 dairy farm
- 1 medical centre

Methodology

In February 2015, a social impact assessment was carried out at SOS Children's Village programme Hawassa. It involved interviewing around 80 former participants of the programme, as well as carrying out stakeholder interviews with programme staff, community-based organisations and local authorities. It was the pilot assessment of the newly developed social impact assessment methodology in the organisation and was led by a UK-based external consultant, i.e. The Research Base, together with two local researchers.

The assessment aimed to determine the impact of SOS Children's Villages in Hawassa, in terms of the following:



Eight key dimensions of well-being were assessed through interviews with former participants. For each dimension, former participants were given a rating, on a scale of 1 to 4, where 1 is the most positive.



Six dimensions of impact at the community level were assessed, based on desk review and the findings of semi-structured interviews with key programme staff and representatives of other relevant stakeholders. For each

dimension, researchers assigned a rating, on a scale of 1

to 4, where 1 is the most positive.



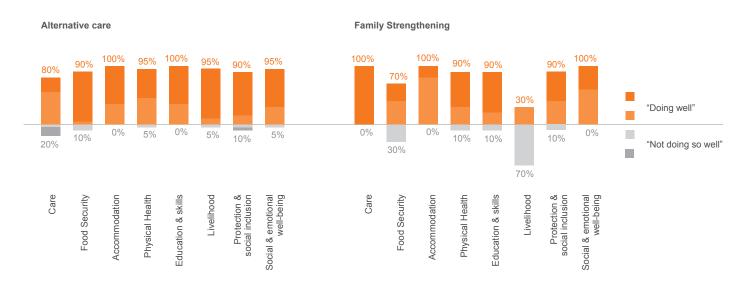
Social return on investment (SROI)

This quantified the social impact of the programme in financial terms. It was calculated by comparing the cost of inputs to the financial benefits of the programme for individuals, the community and society.¹

Results

Overall, the findings provide evidence that SOS Children's Villages has had a positive impact on the lives of the children who participated in the programme.





The findings show that former programme participants - of both family strengthening and family-like alternative care - are generally doing well in most of the given dimensions of personal well-being.

In family-like alternative care, 95% of former participants are performing well in at least 6-of-the-8 dimensions. The majority of former participants are performing 'well' in terms of parental obligations towards their own children and family relationships and support networks, education and skills, physical health, and social and emotional well-being. Livelihood and accommodation were noted as areas for improvement. The majority of respondents, however, reported that their education and training had been sufficient to secure their current job, but that sometimes their salary does not cover expenses related to their accommodation.

In the case of family strengthening, 70% are doing well in at least 6-of-the-8 dimensions. Critically, all children are still in the care of their families, indicating that the primary goal of strengthening the family to prevent family separation has been achieved. Encouragingly, almost all former participants are doing well in education, despite nationally low literacy rates of 55% and low secondary enrolment amongst 15-24 year olds. As shown in the bar chart, livelihood and accommodation are dimensions with scope for improvement. For accommodation, it was the poor quality of living conditions and lack of space that led to relatively low scores in that dimension. The former participants are also struggling to cover the basic needs of themselves and their dependants, which accounts for the unsatisfactory scores in the livelihood dimension.

2 Community level

Overall, it is clear that SOS Children's Villages Ethiopia has had an impact on the social support systems in Hawassa, particularly through capacity building for community networks and individuals. The existing systems for supporting vulnerable children and families and child pro-

tection are strong in Hawassa, but there are challenges related to widespread poverty and limited resources. An area for improvement is increasing capacity in the community and increasing collaboration with government and other stakeholders.

3 Social return on investment (SROI)

	SROI = benefits*: costs	SROI	€1 returns additional	
Alternative care	SROI of 3:1	180%	€1.80	
Family strengthening	SROI of 13:1	1154%	€11.54	
Overall	SROI of 4 : 1	295%	€2.95	

^{*}The value of benefits was rounded to the closest integer.

In alternative care, there is a benefit-cost ratio of 2.80:1 which means that an investment of €1 yields benefits worth €2.80. The programme has an SROI of 180% which means that an investment of €1 returns an additional €1.80 on top of the initial cost. In family strengthening, there is a benefit-cost ratio of 12.54:1 which means that an investment of €1 yields benefits worth €12.54. The programme has an SROI of 1154% which means that an investment of €1 returns an additional €11.54 on top of the initial cost.

The **overall** benefit-cost ratio is 3.95:1, which means that an investment of €1 yields benefits to society of €3.95. The programme has an overall SROI of 295%, which means that an investment of €1 returns an additional €2.95 on top of the initial cost.

It should be noted that a meaningful comparison cannot be made between the SROI figures for family strengthening and family-like alternative care. The participants of each service have different starting points and levels of vulnerability. Children entering family-like alternative care are particularly disadvantaged. A higher investment in these children including more intense direct support services over a longer period of time is needed. The average duration of stay of former participants in the programme was 12 years, meaning that the organisation invested a larger amount of resources over more than a decade to support these children in every aspect of their development. Had these children not been supported, there would most likely be a cost to society, negatively impacting on the next generation of children and societal benefits. Thus, a higher SROI with family strengthening is to be expected. The children in family strengthening live with their families and the organisation provides supporting services to these families over a shorter period of time. On average, a family received family strengthening services for 5 years.

The way forward

In general, the results for family-like alternative care and family strengthening show that the programme is having a significant impact on children, their families and communities. However, the results also reveal some areas for improvement, that need to be addressed going forward. The main recommendations include:

- A focus on vocational training and employability skills to improve employment outcomes for children
- More efforts needed to maintain and strengthen the relationship of children in alternative care with their families and communities of origin, with a view to improving their integration into society
- Continued investment in knowledge sharing and capacity-building with communities
- Increased collaboration with government and other stakeholders
- Increased efficiency could be achieved through upskilling staff to more effectively mainstream programme monitoring and evaluation systems

SOS Children's Village Hawassa and SOS Children's Villages Ethiopia as a whole have incorporated the recommendations, learnings and areas for improvement into their planning for the future in order to improve programme quality and the impact of the programme on the lives of children, families and their communities.



Imprint:

Authors: SOS Children's Villages International;

Design: Johanna Romillo; Coverphoto: Nicole Nassar;

Publisher: SOS Children's Villages International, Brigittenauer Lände 50, 1200, Vienna, Austria

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