



Ethiopian Baseline Report

**Covid-19 and The Youth Question in Africa:
Response, Impacts and Prevention Measures in the
IGAD Region**

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Acronyms

CBO – Community Based Organization

CCRDA- Consortium of Christian Relief and Development Association

CPI - Consumer Price Index

COVISAF- COVID-19 Vertically Integrated Social Accountability and Advocacy Framework

COYOQA – COVID-19 and Youth Question in Africa

CSO – Civil Society Organization

EPHI - Ethiopian Public Health Institute

ERCS - Ethiopian Red Cross Society

ESAP - Ethiopia Social Accountability Program

FTAC - Financial Transparency and Allocation Committee

FBO – Faith Based Organization

FHIDO - Future Hope Integrated Development Organization

GDP - Gross Domestic Product

HFPS-F - High-Frequency Phone Survey of Firms

HIDO - Hiwot Integrated Development Organization

IGAD - Intergovernmental Authority on Development

IDRC - International Development Research Centre

IRB - Institutional Review Board

IVR - Interactive voice response

OSSREA - Organization for Social Science Research in Eastern and Southern Africa

PPE - Personal Protective Equipment

PSNP - Productive Safety Net Program

SAC - Social Accountability Committee

SNNPR - Southern Nations Nationalities and People Region

SPSS - Statistical Package for Social Science

WFP - World Food Program

USD – United States Dollar

Key Findings

- Among the 269 study participants, only 1% of them were mobilized to participate in policy design.
- Nearly all of the respondents (98%) have reported that they were not involved in formulating COVID-19 peace and security policy. Similarly, the great majority of the study participants (83%) reported that they are not aware of any policy that provide for youth participation in the COVID-19 response.
- About three forth (74%) of the participants have indicated that the budgets allocated for the COVID-19 response were not made public.
- Our finding revealed that the level of meaningful youth engagement in SA (i.e. active participation of young people on equal terms with adults in designing, planning, implementing, monitoring and evaluation) of COVID-19 related programs is different from organization to organization.
- Most frequently mentioned enabling factors for meaningful youth engagement in COVID-19 response were: presence of easily accessible and adequate number of youths, growing interest of development partners, availability of youth organizational structures (Youth and Volunteers Coordination Office, Youth Associations, Youth centers, Youth Clubs etc.), advancement of technology (e.g. social media, virtual meetings, online information sources), presence of sound guidelines/policies and urging nature of the problem and the attention given at national and global levels.
- The major barriers for meaningful youth engagement in social accountability of COVID-19 response were: limited knowledge and experiences of youth on social accountability, lack of youth engagement culture, weak youth led structures/ youth clubs/ youth associations, young people's lack of trust in the existing youth structures, inadequate financial and other resources to youth engagement, political and religious turmoil, poor collaboration and coordination among stakeholders, non-participatory policies and laws.
- The most common factors identified as challenges that constrain youths engagement in the COVID-19 response were limited budget (49%), followed by limited time (32%), reluctance of the government (24%) and limited capacity of both the government and youths (20%).

1. Introduction

Ethiopia is located in the center of the Horn of Africa. It shares borders with Sudan and South Sudan to the west; Eritrea to the north and north-east; Djibouti & Somalia to the east; Somalia and Kenya to the south. It covers an area of 1.14 million square kilometers (944,000 square miles). The country is structured as a federation of Ten States (killil) as of the writing of this report: Tigray, Afar, Amhara, Oromia, Somali, Benishangul-Gumuz, Southern Nations Nationalities and People Region (SNNPR), Gambella, Sidama and the Harari Regional States; and two Chartered Cities - Addis Ababa and Dire Dawa. (1)

Ethiopia is one of the poorest countries in the world ranking 173 out of 189 countries in terms of human development index.(2) Agriculture remains the foundation of the Ethiopian economy, employing 66 percent of the total workforce, although accounting for only 33 percent of the country's GDP. (3, 4)

With more than 117 million people and population growth rate of 2.6% (2021 estimate), Ethiopia is the second most populous nation in Africa after Nigeria; and the 12th in the world rank. (5-7) Ethiopia is a country of young people where 70% of its population is less than 35 years of age and about 30% is classified as youth (15-29 years of age). (8) About 78% of Ethiopia's population is rural based with 22% residing in urban settings. (9)

Since the COVID-19 pandemic first broke out at Wuhan, China in December, 2019, it has caused more than 14 million cases and more than 4 million deaths as of mid-July, 2020. (10-12) The pandemic has triggered simultaneous financial, supply, demand, health, etc. shocks to the world economy by forcing governments to implement partial and full closure of businesses in response to contain the pandemic. (13)

2. Statement of the problem

The emergence of COVID-19, which has metamorphosed from a small outbreak to a global pandemic and a public health emergency of international concern, has resulted huge socio-economic impacts on poor countries like Ethiopia. Whilst epidemiologists and public health personnel are focused on the devastating health impacts, there is evidence to suggest that the widespread socio-economic and political impact of COVID-19 has adversely affected communities and economies especially among the young people.

Young people in Africa have significant challenges realizing their rights during this period of the COVID-19 pandemic. They are undergoing a lot of challenges such as climate change, state fragility, poor governance, economic and social inequalities and inequities, discriminatory social norms, human rights violations among others. Yet few countries offer opportunities for the youth to participate in political processes or in designing programs and policies that aim at addressing these issues. (14) Also over half of youth policies are not designed to meet the unique needs of young people. (15)

There is increased focus within the development community on governance and its role in achieving better service delivery. Social accountability mechanisms play a key role in improving governance, increasing development effectiveness and promoting empowerment and can be applied to a number of fields and issues. In this regard, young people, women and men aged 15 to 35 years, should play a meaningful role in social accountability in their countries. Meaningful participation of young people especially the marginalized would strengthen implementation, improve outcomes and fulfill the right of young people to participate in shaping and monitoring decisions that affect them.

The importance of youth participation has been recognized in several international declarations such as the United Nations Convention on the Rights of the Child (CRC) ratified in 1989. (16) The National Youth Policy (2004) of Ethiopia also recognizes the importance of youth, "to participate, in an organized manner, in the process of building a democratic system, good governance and development endeavors, and benefit fairly from the outcomes".(17)

However, the existence of many barriers such as persistent gender inequality, youth poverty, limited awareness of youths on policies related to youths, limited involvement of youths in the decision-making processes and in the livelihoods of their communities, limited participation of youths in volunteering programs especially for young women hinder youth's active participation

in socio-economic, political and cultural life in Ethiopia. In addition, lack of financial, human and communication capacities constrain youth-led organizations in scaling up youth mobilization. (17) The lockdown and social distancing has mostly affected the participation of young people in social, civic, political and economic activities. With high rates of unemployment, school closures and closure of informal sector activities, youth are bearing the brunt of this disease in more ways than the public health impact. It is against this background that the insights, experiences, perspectives of youth are important in COVID-19 responses. Focusing on young women and men from different socio-economic, political and cultural backgrounds, and from both urban and rural areas, high school and university students as well as youth living in streets and informal settlements, the research will generate evidence for policies and actions.

3. Literature Review

Youth are being referred to as the “torchbearers” of the 2030 SDG Agenda and have a pivotal role to play both as beneficiaries of actions and policies under the Agenda and as partners and participants in its implementation. (18)

There were 1.2 billion young people aged 15 to 24 years globally in 2015, accounting for 16 per cent of the global population. The active engagement of youth in sustainable development efforts is central to achieving sustainable, inclusive and stable societies by 2030, the target date for the sustainable development goals, and to averting the worst threats and challenges to sustainable development, including the impacts of climate change, unemployment, poverty, gender inequality, conflict, and migration. (18)

In Africa, the number of youth is growing rapidly. The Africa youth population aged 15-24 which was 226 million in 2015, accounting for 19 per cent of the global youth population of that time, is projected to increase by 42 percent by 2030. It is expected to continue to grow throughout the remainder of the 21st century, more than doubling from current levels by 2055. (19)

Such high number of youth population, if healthy, skilled, and gainfully employed, can be a catalyst for accelerated social and economic development. Today Africa is the only region in the world where the working-age population is expected to continue expanding well beyond 2035, especially sub-Saharan Africa. Having more people of working age and fewer dependents (children and elders) can boost economic growth simply because a larger share of the population is productive, a phenomenon called the demographic dividend. Economists have estimated that the

demographic dividend contributed 25-33% to the Asian Tigers' economic growth in the 1980s. The concrete possibility of "reaping the demographic dividend" depends crucially on the extent to which the working age population is actually employed. However, if employment is low, informal, or provides only subsistence levels of income, there is no "demographic dividend" and an increasing population can actually become a burden to development: it may reduce the availability of resources for investment; become a source of social instability and institutional fragility; and create additional pressure on infrastructure, especially in urban context. (20, 21)

Ethiopia, is a country of young where 70% of its population is less than 35 years of age and about 30% is classified as youth. (5-8) The country has a total of about 21.5 million pupils enrolled in primary and secondary education. Of these pupils, about 16.2 million (76%) are enrolled in primary education. However, about 70% of 15-24 year olds youths in Ethiopia, have not completed primary education (i.e. approximately 16% of youth have no formal education and 54% of youth have attained at most incomplete primary education). Nearly 55% of female youth of secondary school age are out of school compared to 46% of male youth of the same age. (22)

3.1. COVID-19 impact and response

Since the COVID-19 pandemic first broke out at Wuhan, China in December, 2019, it has caused more than 14 million cases and more than 4 million deaths as of mid-July, 2020. (10-12) Besides health related effects, it has resulted in the fourth most severe global recession of the past 150 years by causing the global activity to have contracted 4.3 percent in 2020. (23) The pandemic has triggered simultaneous financial, supply, demand, health, etc. shocks to the world economy by forcing governments to implement partial and full closure of businesses in response to contain the pandemic. If the pandemic continues for a long period of time, economic recession due to contraction of domestic and global economic activities might happen. The effect of decline in economic growth would make massive disruption in various sectors. (13)

3.1.1. COVID-19 impact and response in Ethiopia

As of 15th, July, 2021, Ethiopia had reported over 277,443 COVID-19 cases and 4,350 deaths. (24) Three days after the first case in the country was recorded on 13th, March, 2020, Ethiopia took several restrictive measures including closure of schools, banning public gatherings and prohibiting of movement across borders. (4, 25)

Later on 8th, April, 2020 federal level State of Emergency was declared enforcing closure of land borders, except for cargo; restrictions on cross-country public transportation and city transportation by limiting the carrying capacity of public transportation providers by half of their regular capacity; prohibition against laying off workers by employers and increasing rents on tenants by property owners. Strict measures like closing of restaurants and limiting movement between rural and urban areas were also undertaken by some administrative regions. However, the restriction against movement across regional states was alleviated as of July, 2020. Overall, the country never undertook a full lockdown that severely restricted movement, imposed curfews, or fully closed all borders. (4)

On 23, March, 2020 the government of Ethiopia announced that it had established a stimulus package of Birr 5 billion (USD 154 million) to be used to build resilience against the virus and to mitigate its potential economic impact. On 27 March, the National Bank of Ethiopia stated that it plans to inject Birr 15 billion (USD 456 million) as liquidity for private banks. (26)

3.1.1.1. Overall Impact on Economic Sector

Prior to the COVID-19 pandemic, the Ethiopia's economy has been growing 9.4% a year on average for a decade since 2010. (27) Agriculture, which was the major contributing sector in earlier times has dropped from 54% in 1995/96 to 33% in 2018/19 while the service sector (39 %) and industrial sectors (29%) accounted for 67% of the Gross Domestic Product (GDP) in the same period. About 70 percent of share of the 29 percent contribution of the industrial sector in the country's GDP in 2018/19 came from the construction sub-sector. (28)

Ethiopia's economy growth has decelerated to 6.1 percent in the 2020, from 8.4% in 2019, largely because of the COVID-19 pandemic. (29) The sectors accounted for most of the observed growth were the services and industry sectors, mainly construction. Agriculture was not affected by the pandemic whereas the hospitality, transport, and communications sectors were adversely affected by the pandemic and the associated containment measures to prevent the spread of the virus. (27, 29)

At the early periods of the pandemic, economists have warned on the effect of the pandemic on the service sector with far reaching implications to total GDP growth as well as to urban unemployment since distributive services (trade, hotel and restaurant, followed by transport and communication) accounting 56 percent share within the service sector and being a staggering 46

percent and 70 percent contribution to GDP growth and urban employment respectively makes it the most important sector in the urban economy. (28)

The near to complete shutdowns of tourism-related activity in Ethiopia, as a response to the pandemic, has significantly affected the country as it as one of the countries having large travel and tourism sectors. Inflation has accelerated, in response to weaker currencies and food price pressures. (23)

Despite an increase in tax revenue by 16%, the tax-to-GDP ratio declined to 9.2% in 2020 from 10% in 2019 due to delayed implementation of tax reforms. Even though, the overall export revenues have increased by 12% in 2020 in Ethiopia, as exports of gold, flowers, coffee, and chat increased, service sector exports declined by about 6%, mostly because of lower revenue from Ethiopian Airlines. Similarly, imports have also declined by 8.1% in 2020. (29)

The pandemic affected foreign direct investment (FDI) to fall 20% to 2.2% of GDP in 2020, and personal remittances to decline by 10% to 5.3% of GDP. Even though poverty was projected to decline from 23.5% in 2016 to 19% by end of 2020, pandemic-driven job losses, estimated at as many as 2.5 million, will impede poverty reduction. (29) However, the pandemic could create a momentum to implement major reforms such as removing inefficient fuel subsidies. (23)

3.1.1.2. Inflation

Inflation reached 20.6% in Ethiopia in 2020, well above the 8% target, due to pandemic-induced supply chain disruptions and expansionary monetary policy. (29) Similarly, the average general inflation rate for the preceding 12 months before December, 2020 was 20.7 percent. This inflation suggests a decrease in a household's purchasing power of money, reflected in a general increase in the prices of goods and services.(29, 30)

Generally, food inflation was 22.1 percent in November. On average, food inflation has remained higher than non-food inflation, which has slightly increased to 15.1 percent. (30)

The November, 2020 food group price indices for cereals and bread shows an increase by 21.1 percent compared to November 2019, and 10 percent for oils and fats since August 2020. (30)

Figure 1: Year-on-year inflation trends

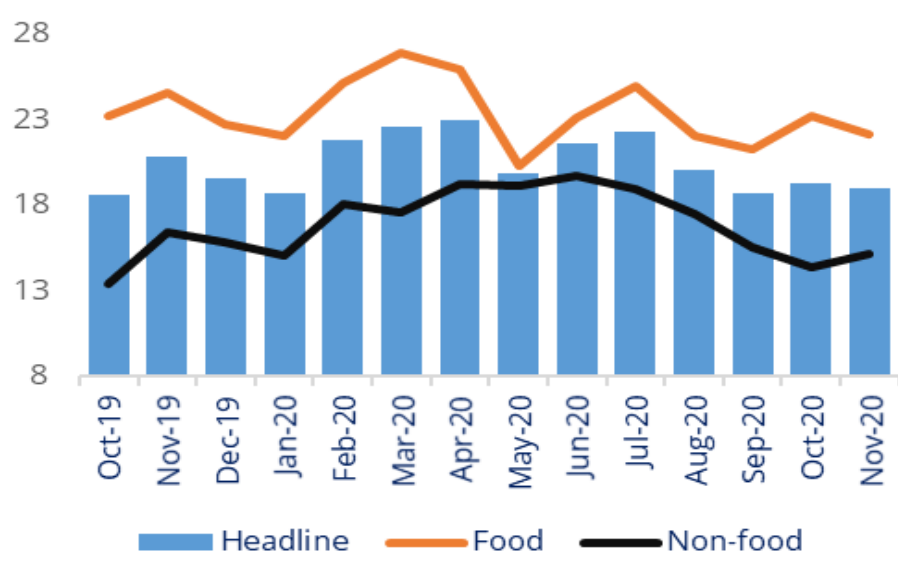


Figure 1 Year on year inflation trends of Ethiopia (WFP VAM Monthly Market Watch for December, 2020)

Figure 2: CPI trends of food groups

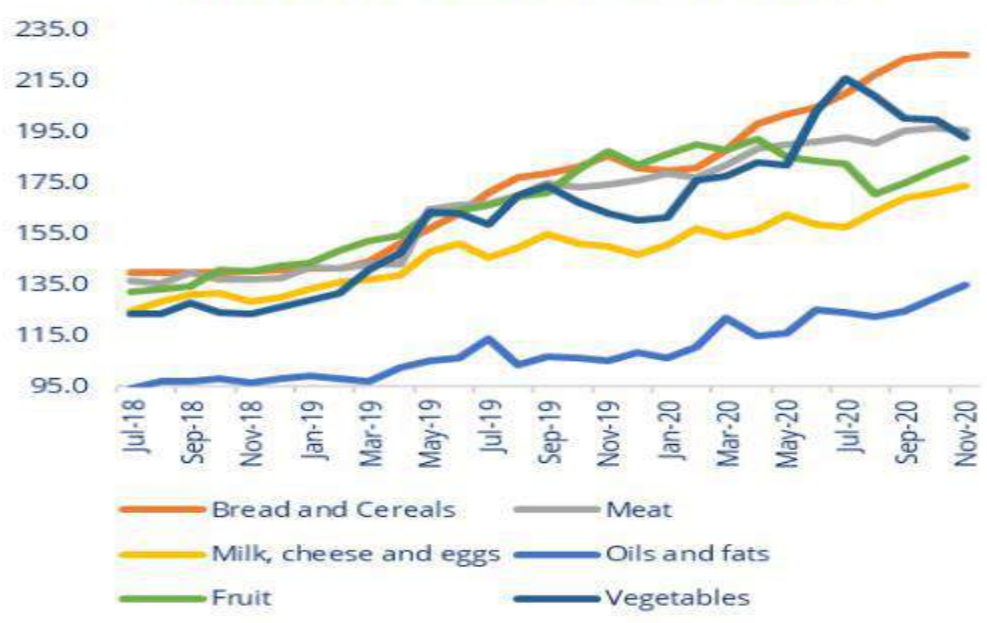


Figure 2 Consumer Price Index (CPI) trends of food groups in Ethiopia (WFP VAM Monthly Market Watch for December, 2020)

The world food program monthly market watch report for the month of December, 2020 indicated that, in Ethiopia, the official exchange rate from November 2019 to November 2020 devalued by 27.1 percent against the US dollar. Exchange rate fluctuations can impact food prices and access to food. If the local currency depreciates relative to the US dollar, food imports get more expensive. This leads to a rise in domestic food prices for imported items and, through substitutions for less expensive ones and shifting consumption, to increasing domestic food prices in general. (30)

3.1.1.3. Employment

The COVID-19 crisis has severely affected labor markets around the world, hurting young people more than other age groups. Globally, youth employment fell by 8.7 per cent in 2020 compared with 3.7 per cent for adults. (31) In the pre-COVID 19 pandemic period youth unemployment rate in Ethiopia stood at 25.3% in 2018 (32)

COVID-19 hit Ethiopian households hardest during the early months of the pandemic. Overtime, the effects, particularly with respect to employment indicators, have subsided.(33) About half of households had experienced either a reduction or a total loss of income by April 2020 while 26 percent still reporting a reduction in total household income in November 2020 since the pandemic according to the World Bank phone survey report. (33)

The World Bank phone survey report indicated that the impact of the pandemic on Employment were severe in early months, particularly in urban areas, with 8 percent of respondents losing their jobs at the onset of the pandemic in April 2020 of which about two third was due to the COVID-19 pandemic. Even though, employment recovered quickly and by September 2020 had reached pre-COVID levels, many respondents previously in more stable types of employment now had more vulnerable jobs.(33)

The observed diverging outcomes on employment dynamics during the COVID pandemic is explained by the existence of extreme difference in the structure of the labor market in urban and rural areas. In rural areas, where 80 percent of the population resides, the main activity is agriculture with most people allocating their productive employment to farming (growing crops and/or raising livestock). In contrast, people living in urban areas are more likely to work in wage employment and work mainly in services and industry.(33)

Over the preceding 12 months as of April 2020, the main means of livelihood for rural households in Ethiopia was farming (83 percent) while a means of livelihood for urban households was wage

employment (47 percent), followed by nonfarm business (31 percent), and farming (24 percent). (33)

All sources of household income in rural areas, including farming activities (i.e., growing crops or raising livestock) were affected by the COVID-19 pandemic. Even though, losses in income from farming at the onset of the pandemic in April 2020 was reported by 25% of rural households, it reduced throughout the pandemic reaching low point in October 2020. (33)

Beyond the pandemic, desert locust invasions and price changes have also affected rural households in Ethiopia. Two locust invasions, the first hit just before the pandemic affecting 57 percent of rural households and the second hit between September and October 2020 affecting about 20 percent of rural households have not caused a major drop in crop output at the national level because the locusts did not hit the high altitude locations where the country's high agricultural potential areas are located. It was concentrated in the eastern parts of the country and covered areas of Afar, Amhara, Somali, and Tigray regions. It was also reported in Dire Dawa and Harare as well as in the Eastern parts of Oromia. (4, 33)

Farmers income was affected from a reduced demand for agricultural products due to increased prices of agricultural products related to limited and irregular transport, high prices of commodities (due to the depreciation and closure of borders) as well as limited wholesalers (border closures). (33)

3.1.1.4. Business Firms

A study conducted by the World Bank (2020) using a High-Frequency Phone Survey of Firms (HFPS-F) interviewing a sample of 436 firms in Addis Ababa every three weeks for a total of six survey rounds between April 15 and September 8, 2020 showed that firm closure has considerably reduced from 42 percent in April to 25 percent in September as restrictions relaxed and activities resumed. The share of firms that operate full time has also increased from 41 percent in May to nearly 60 percent in August and September, 2020. (34)

The report also showed that 82 percent of reported closures was due to drastic decline in demand and forced closure due to the COVID-19 pandemic related restrictions. The COVID-19 pandemic related restrictions particularly affected the operations of service sector firms while lower demand and lower supply of raw materials and intermediate goods affected firms in the industry sector. (34)

3.1.1.5. Food Security

Even though, annual food inflation was 21 percent in Ethiopia just before the pandemic, the inflation estimates from July 2020 shows that year-on-year food inflation was 24 percent. Despite the fact that Ethiopia had been under double digit inflation rate before the pandemic, food price have risen somewhat faster during the pandemic. (4)

Between February and May, 2020 there was about 11% increment in the cost of a healthy diet in Addis Ababa. (4) Regarding the food price dynamics during the pandemic, price changes differ extremely across crops ranging from 33% increment to 12% decrement due to transportation disruptions and border closures resulting in a decline in supply in some area of the country while resulting over-supply in other area. Lower incomes due to COVID-19 disruptions and misperceptions that the virus is transmitted through certain foods also contributed to lower demand, especially in urban areas.(4)

A key factor in determining food availability in Ethiopian is the outcome of the Meher harvest where more than 90 percent of the country's crop output is produced. (4) most households (93 percent) in rural areas were growing crops during this season; and only about 4 percent of households reported difficulties in their harvesting activities due to the pandemic. (33)

Another key factor in determining the harvest is access to key inputs, such as fertilizers, herbicides, and labor. The main challenges that rural households faced especially in early months of the pandemic between June and August were inability to purchase fertilizers and seeds. However, the vast majority of households (over 90 percent) were able to plant normally during the planting season between June and October 2020. (4, 33)

According to the 2019 joint report by World Food Program Ethiopia Office and Central Statistical Agency of Ethiopia, 20.5% of households in Ethiopia were food insecure in 2016. (35) Results from high frequency phone surveys collected between April 2020 and January 2021 by the World Bank, indicated that 39-46 % of households experienced food insecurity during the pandemic in Ethiopia. Severe food insecurity alone is experienced by about 10 % of households. The study also stressed that the food insecurity in rural areas could be understated because of the limitation of the survey to reach only those households with access to a phone. (33)

The joint report indicated that in April 2020, only about 10 percent of rural households received social assistance through any means, either the government, NGOs, or religious institutions, since the outbreak of the pandemic. (33)

The results from high frequency phone surveys conducted by the World Bank showed that about 5 percent of rural households were assisted by the Productive Safety Net Program (PSNP) at the onset of the pandemic with large reduction in the share of households receiving assistance from PSNP over time and reaching less than 1 percent of rural households in November 2020. The PSNP was the most important source of assistance in early months of the pandemic with over half of all households that receive assistance, receiving it through PSNP compared to other means or programs. (33)

The pandemic has resulted in limited urban to urban movement and urbano-phobia which is abandoning of traveling to urban areas by people living in urban peripheries rural areas. (36)

3.2. Civic Engagement of Youth on COVID-19 Response

Students volunteering on awareness creation

Some volunteer students who were staying at home due to the closure of school in order to contain the spread of the virus have participated in creating awareness about the transmission and ways of containing the COVID-19 pandemic among the community they live in.

The students worked together with the Ethiopian Red Cross Society (ERCS) to help their society. The young volunteers created COVID related awareness for the community around taxi stations, bus stations, commercial buildings, train stations, and public

During the busy rush hour, the volunteers and their coordinators use the mobile speaker to amplify their messages. As the taxi queues begin to build up, the volunteers go around sanitizing people's hands.

The ERCS, in partnership with UNICEF, has trained volunteers to work with communities in 134 targeted woredas (districts) in Ethiopia. People living in congested urban areas such as marketplaces, slums, and remote areas with low access to the media will be reached with COVID prevention messages. This will be done mainly through the deployment of 1,500 volunteers from the targeted communities. The partnership aims to reach nine million people. (37)

Helping vulnerable groups

Members of Love in Action Ethiopia have observed increases in the numbers of people begging on the street (including people with well-kept appearances, families, and immigrants) as a result of the impact of lock-down. This causes psycho-social effects including inferiority complexes, hopelessness, frustration, and loss of self-respect, dignity and self-confidence. Physical distancing

is difficult for large families required to live 24/7 in small houses or in single rooms, and crowded inter-generational households often lack basic supplies. Therefore, Love in Action Ethiopia has been engaged in:-

- providing safe, structured, and community-based education about the COVID virus through mass media, mini-media and home-to-home services
- providing psycho-social support using volunteers,;
- mobilizing health materials such as personal protective equipment (PPE), face masks, sanitizers, street-based hand-washing materials;
- addressing basic and immediate needs of the most at risk communities, including food, clothes and hygienic materials;
- strengthening existing implementation systems and structures in local and regional government offices in designing strategies, plans, and follow-up mechanisms to mitigate the transmission of virus;
- building organizational capacity through online mentoring and training of staff and governance team on COVID-19 management. (38)

3.3. Innovative Citizen Engagement during the COVID-19 Pandemic

Radio shows to promote accountable service delivery

As the practice of social accountability in Ethiopia which has evolved as a largely face-to-face process, was challenged by the impact of COVID-19 pandemic, the World Bank through the Ethiopia Social Accountability Program (ESAP), implemented an innovative approach to continue engaging citizens through the media (a new call-in radio show called “Citizens on the Line” that doubled its reaches to 729 districts with in a year). (39)

Repurposing business firms

One of the coping, survival and resilience mechanisms implemented by small business garment industries in Ethiopia against the impact of the pandemic from cancellation or reduction of orders from their customers due to COVID-19-related disruptions was repurposing of the firms for the production of COVID-19-related products. (40)

However, most firms indicated that they need support in securing orders, access to new raw materials, and assistance with employee re-training in order to engage in production of alternative

products. A support provided by Mastercard Foundation for 11 small and medium enterprises (SMEs) in Ethiopia to repurpose their factories to manufacture personal protective equipment (PPE) in the fight against COVID-19 have helped them to continue running their businesses and avoided having to lay off their 1,060 employees, the majority being young women. (40, 41)

Similarly, the World Bank which has been supporting more than 40,000 growth-oriented women-owned enterprises in Ethiopia with access to loans and business training through its Women Entrepreneurship Development program, has developed a new, digital approach to transform the way the government approaches business support using a mobile application which could generate business insights as well as transactional records, to help firms improve operations, maximize profits, and obtain digital credit scores to access emergency loans. In addition it also developed two new financing systems which will bolster the existing credit line to support Ethiopia's women entrepreneurs to withstand the negative economic impacts of the pandemic, and to ensure that Micro Finance Institutions can remain viable in serving them. (42, 43)

Young inventors

Inventors in Ethiopia have been developing devices and gadgets to combat COVID-19. Young innovators such as Ezedine Kamil, who is an 18-year-old student from a rural town in Ethiopian and has 30 inventions to his credit so far of which thirteen have been patented by the organization SaveIdeas, designed and implemented contactless soap dispenser for hand washing. Although not implemented to fully benefit the community due to lack of funding, Ezedine's innovations in response to the pandemic include ventilator from locally available materials; and coronavirus warning device which is a hand watch like apparatus with a sensor to remind people not to touch their faces. (44)

Innovations to improve the safety of healthcare workers and patients

Medical Equipment Maintenance: By working with Tegbareid Polytechnic College (PC) and the Ethiopia COVID-19 Response Team (ECRT), a global volunteer team of more than 1,800 professionals including engineers, doctors, designers, marketers, architects and product managers working to combat COVID-19 in Ethiopia, and an NGO named Lifebox have supported Tegbareid PC and ECRT's Medical Device Maintenance Project. The project was aimed at repairing existing medical devices at a critical time for healthcare facilities in Ethiopia. The equipments maintained,

collected from hospitals across the country, include diagnostic equipment such as patient monitoring systems, pulse oximeters and electrocardiographs.

UV-C Decontamination and Reuse of N95 Respirators: The demand for personal protective equipment (PPE) continues to surpass production, as the number of COVID-19 cases grow continuously. To mitigate the shortage of PPE, Lifebox was also working on a project piloting the use of UV-C radiation to decontaminate N95 masks. (45)

4. Objective of the baseline study

4.1. General Objective

The objective of this baseline study is to establish a benchmark for the implementation of COYOQA project and contribute to a better understanding of context specific and meaningful youth engagement in COVID-19 preparedness, response, capacity, key gaps and support needs at the youth, program and enabling environment level.

4.2. Specific objectives

- (i) To assess the level of youth engagement in social accountability during COVID-19 response
- (ii) To identify factors affecting youth engagement in COVID-19 response
- (iii) To assess the impact of COVID-19 pandemic on youths
- (iv) To assess the level of youth engagement in the Monitoring and Evaluation of COVID-19 response

5. Methods and Materials

A mixed research approach involving both quantitative and qualitative methods was employed to assess the level of youth engagement in social accountability related to COVID-19 response from 09 June 2021 to 16 June 2021.

5.1. Methods and Materials: Quantitative Study

5.1.1. Study Setting

The study was conducted in three randomly selected sub cities of Addis Ababa, namely Yeka, Arada and Nifas Silk. The study was carried out in 3 highly populous areas located in the respective sub-cities.

5.1.2. Study Design and Study Population

A community based cross-sectional study was employed among youths aged from 15 to 35 years in Addis Ababa. We included youths who were permanent resident of Addis Ababa and volunteer to participate in this study.

5.1.3. Sample Size and Sampling Procedure

The sample size was calculated based on one population proportion formula using Epi-info software assuming 95% CI, 5% margin of error, and a 23% for the level of youth engagement taken from a previous study. Accordingly, the minimum sample size for this survey is determined to be 272. Participants were selected using a non-probability quota sampling methods to ensure adequate number of representatives from both males and females. We included youths who were walking through streets of the selected area until we complete our sample size.

5.1.4. Variables of the Study.

Dependent Variable

- Youth engagement in social accountability and advocacy issues in COVID-19 response.

Independent Variables

- Variables related to socio-demographic characteristics such as age, sex, etc.
- Variables related to youths perceived barriers and facilitators related to
 - Knowledge
 - Access to information
 - Community attitude

- Motivation
- Availability of resources
- Availability of platforms
- Governance / political commitment
- Peace and security

5.1.5. Operational Definition

Youth – individuals aged between 15-35 years

Meaningful youth engagement - the active engagement of young people in all phases of the development and implementation of policies, programs and services that affect their lives.

5.1.6. Data Collection Methods and Data Quality Assurance

The data was collected using structured interviewer administered questionnaire administered through SurveyCTO software. The questionnaire includes: background information, mobilization of youths to participate in the COVID-19 response, capacity of youths to participate in the COVID-19 response, partnership with youths in the COVID-19 response, impact of COVID-19 on youths and their communities, involvement of youths in policy engagement and knowledge sharing, accountability in COVID-19 response.

The quality of quantitative data were assured by properly designing and pre-testing the questionnaire, training of data collectors and supervisors, proper coding and categorization of variables. Every day, electronic questionnaires were reviewed for completeness by supervisors and investigators and necessary feedbacks were provided for data collectors in the next morning before data collection.

5.1.7. Data Processing and Analysis

Quantitative data were transferred to the Statistical Package for Social Science (SPSS) version 23 software from the SurveyCTO software for data management and analysis. Descriptive findings were generated and summarized in terms of mean, frequencies, and percentage and presented using tables and appropriate statistical diagrams.

5.2. Methods and Materials: Qualitative Study

We conducted nine key informant in-depth interviews with purposely selected respondents from different governmental and non-governmental institutions to understand the level of meaningful youth engagement in social accountability related to COVID-19 response.

5.2.1. Data collection methods

The data collection method was an in-depth interview. Interviews were carried out by the investigator from 09 June to 16 June, 2021. All participants were interviewed face-to-face on one occasion only. All in-depth interviews were audio recorded and notes were taken during interviews to capture emotions expressed verbally or non-verbally. An in-depth interview-guide prepared in local language (Amharic) was used to guide the interview process. All the interviews were conducted in Amharic. While data collection was on progress, preliminary analysis of the early interviews provided a means to adapt questions and to refine probes considering the important issues emerged. The process of data collection was considered saturated when consecutive in-depth interviews did not bring new information. We concluded data collection after 9 interviews from Ministry of Women Children and Youths (1), Addis Ababa Youth and Volunteer Coordination Office (1), Ethiopian Public Health Institute (2), Addis Ababa Health Bureau (1), Future Hope Integrated Development organization (2) and Hiwot Integrated Development organization (2).

5.2.2. Data processing and analysis

Thematic analysis was carried out. Each in-depth interview was transcribed verbatim by the investigator and one other member of the research team reviewed transcripts for accuracy. Transcripts were first to read several times to get an overall picture and then the information was coded from the data. Then, meaningful concepts were condensed and categorized into broad themes. Participant quotations were selected to illustrate particular issues discussed.

5.2.3. Techniques to enhance trustworthiness

We tried to improve the rigor of the data through prolonged engagement and member checking. Furthermore, we tried to solicit feedback for the transcripts from few participants, who supported the validity of our transcripts.

5.3. Ethical Issue

Ethical clearance was obtained from the Institutional Review Board (IRB) of Ethiopian Public Health Association. Necessary communication was made with all concerned bodies and permission was secured before the data collection process. The purpose of the study was explained to the study participants and participation in the study was completely voluntary. An informed oral consent was obtained from each study participant before data collection.

6. Result and Findings of quantitative study

6.1. Socio-demographic characteristics of the respondents

Overall, 269 respondents have participated in this study giving a response rate of 98.8%. The proportion of male respondents, 147 (54.6%) was slightly higher than females 122 (45.4%).

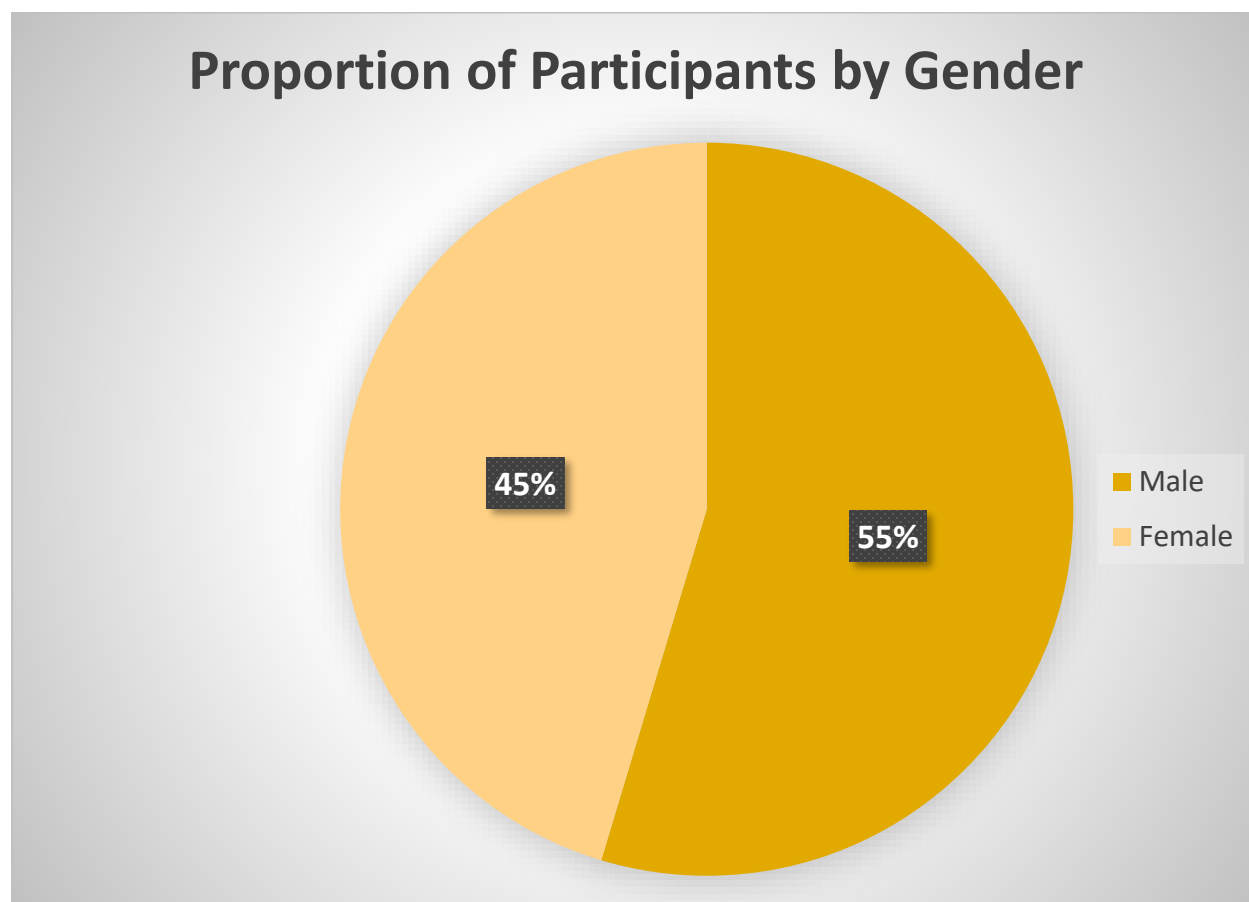


Figure 3 Proportion of Participants by Gender

Majority of the respondents (43%) were in the age group 18-24; while a little higher than one third (36%) were in the age group 25-30; and the rest (21%) were 31-35 years of age.

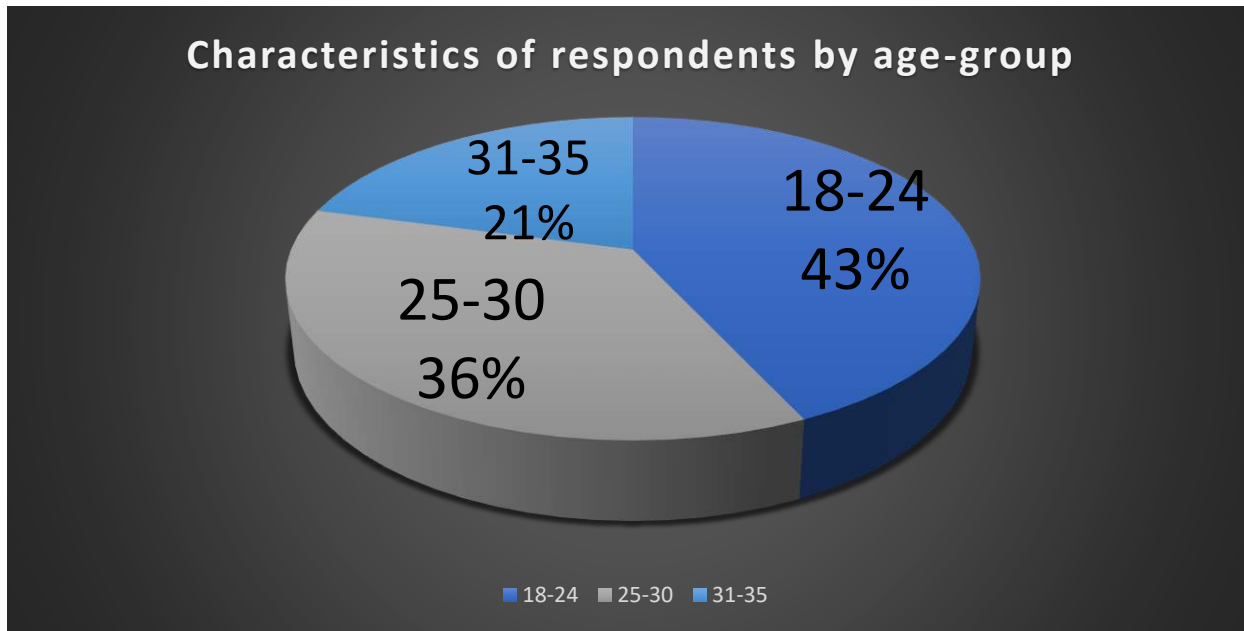


Figure 4 Characteristics of respondents by age-group

Regarding educational attainment of the respondents, slightly higher than one third (35%) of them were undergraduates followed by (25%) with secondary education, while the least proportion of them had primary education (6.7%) and no education (4.5%).

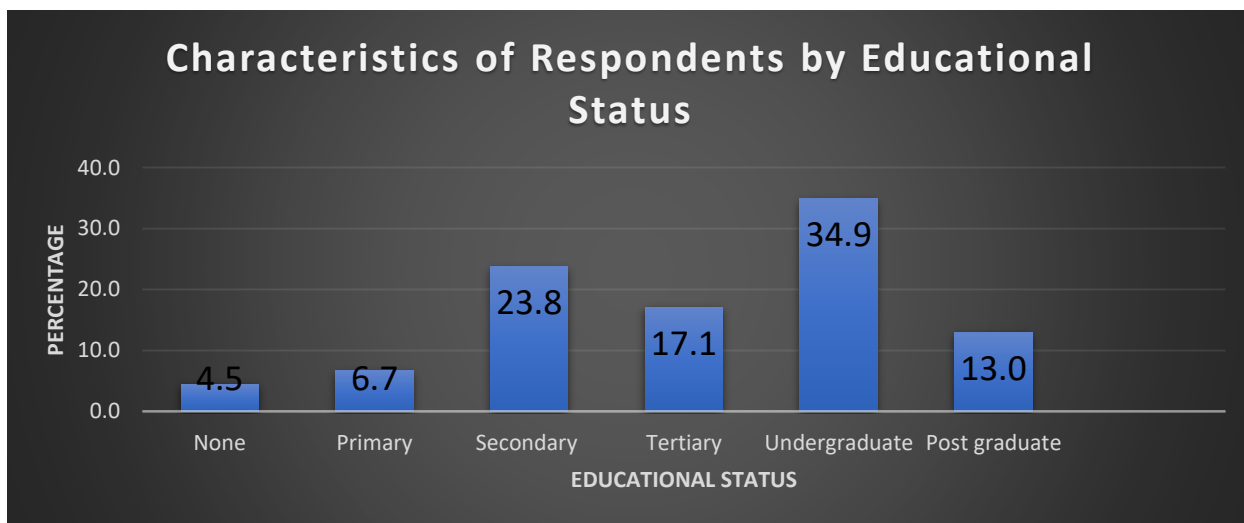


Figure 5 Characteristics of Respondents by Educational Status

About two third (63%) of the study participants reported that they were employed. Among those employed respondents, a little higher than two third of them (67%) were paid employees, whereas the rest characterized the nature of their employment as self-employed (21.8%), casual laborers (9.4%) and other (2%). Table 1 shows detailed demographic characteristics of respondents.

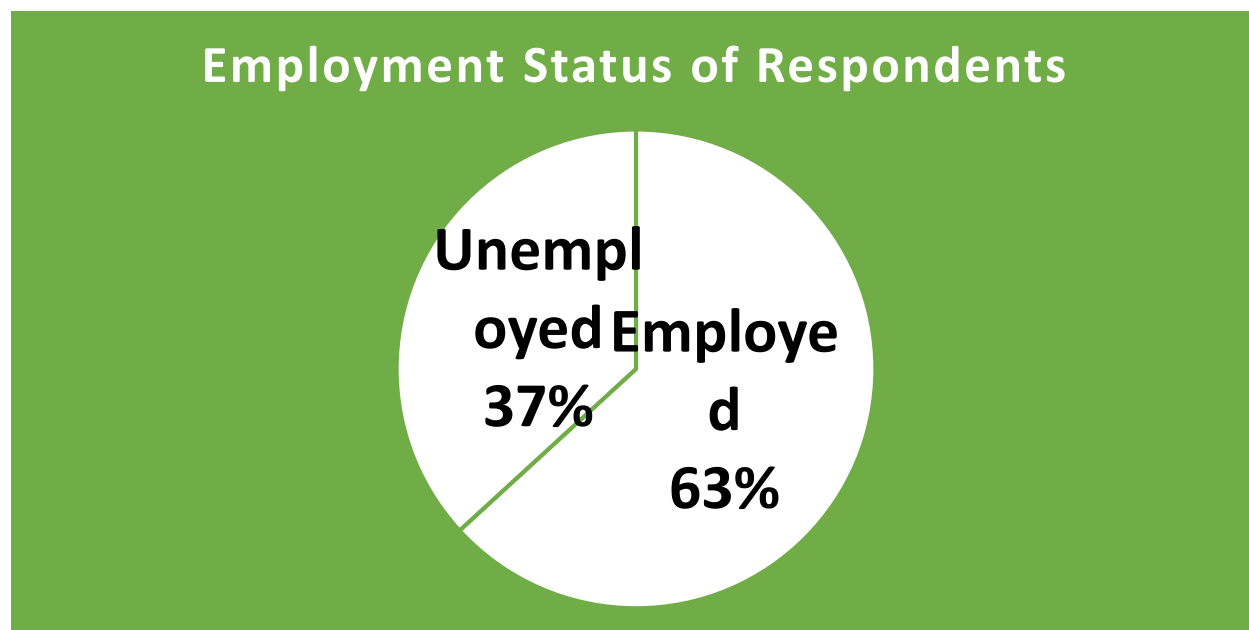


Figure 6 Employment Status of Respondents

Table 1 Socio-demographic characteristics of the respondents

Variable	Category	Frequency	Percentage
Gender	Male	147	54.6
	Female	122	45.4
Age group	18-24	116	43
	25-30	97	36
	31-35	56	21
Educational Status	None	12	4.5
	Primary	18	6.7
	Secondary	64	23.8
	Tertiary	46	17.1
	Undergraduate	94	34.9
	Post graduate	35	13.0

Employment status	Yes	170	63.2
	No	99	36.8
Employment type	Paid employment	114	67.1
	Self	37	21.8
	Casual laborer	16	9.4
	Other	3	1.8
Type of employer	Private	49	43.0
	Public/government	44	38.6
	CSO	15	13.2
	Other	6	5.3
Engagement with youth-led organizations	Yes	78	29
	No	191	71
Area of participation (organization)	International NGO	6	7.7
	National NGO	16	20.5
	Local CSO	14	17.9
	CBO	18	23.1
	FBO	8	10.3
	Other	16	20.5
Organization's main area of work*	Governance	4	5.1
	Health	17	21.8
	Development	24	30.8
	Education	21	26.9
	Environment	6	7.7
	Peace and security	5	6.4
	Transport	3	3.8
	Advocacy	6	7.7
	Other	28	35.9
Duration of engagement	Less than a year	34	43.6
	Two-five years	32	41.0
	Over five years	12	15.4

*Multiple response

Regarding the level of participation in any youth led organization, only (29%) of the respondents have reported that they have association with such organizations while majority of the respondents (71%) reported that they have no association with youth led organization. Among those who had association with youth-led organizations, 23% of them have described the nature of those organizations as CBO, 20.5% as national CSO and other and 18% as local CSO. Similarly, among the respondents who reported that they had association with youth-led organizations, majority (79%) of them described the main area of work of those organizations as education, development, health and other (i.e. 27%, 31%, 22% and 36% respectively). Likewise, among those who had association with youth-led organizations, 43.6% of them have participated for less than a year period, 41% of them have participated for 2-5 years period and 15.4% of them have participated for more than 5 years period.

6.2. Brief overview of Meaningful youth engagement

Out of the total 269 respondents, 184 (68%) were mobilized to participate in the COVID-19 response where, 27.5% were mobilized individually. Other actors who have engaged in the mobilization were government and CBOs (each accounting for about 11%), CSOs (6%), youth organizations (5%), FBOs (<1%) and others (7.4%).

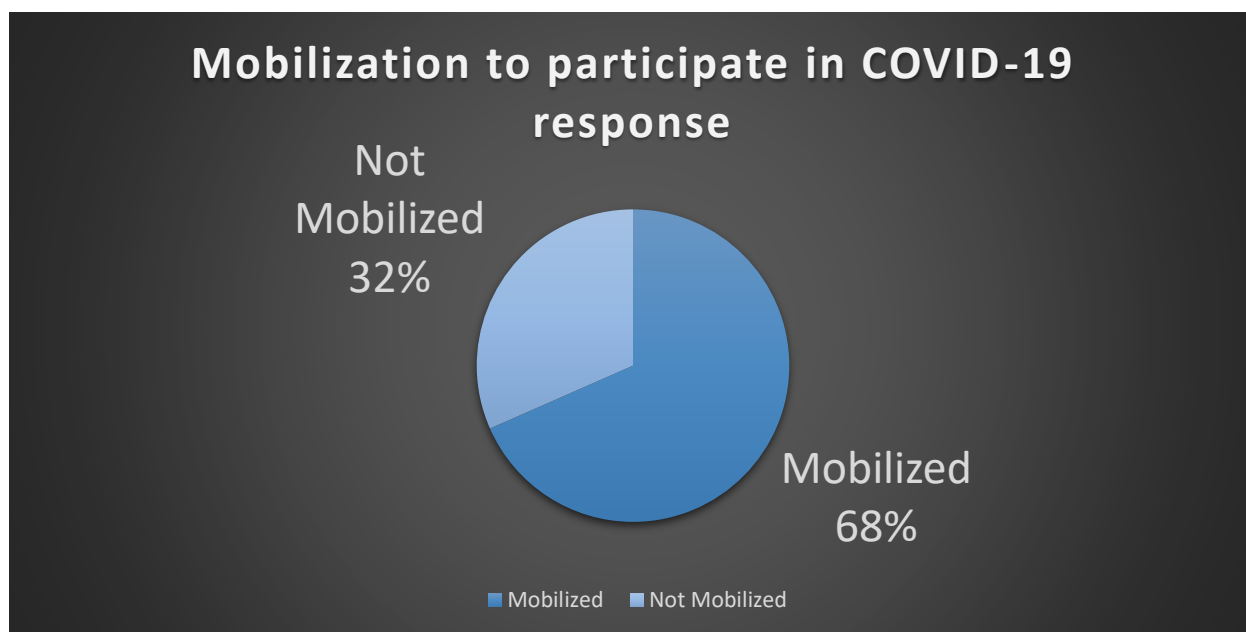


Figure 7 Mobilization to participate in COVID-19 response

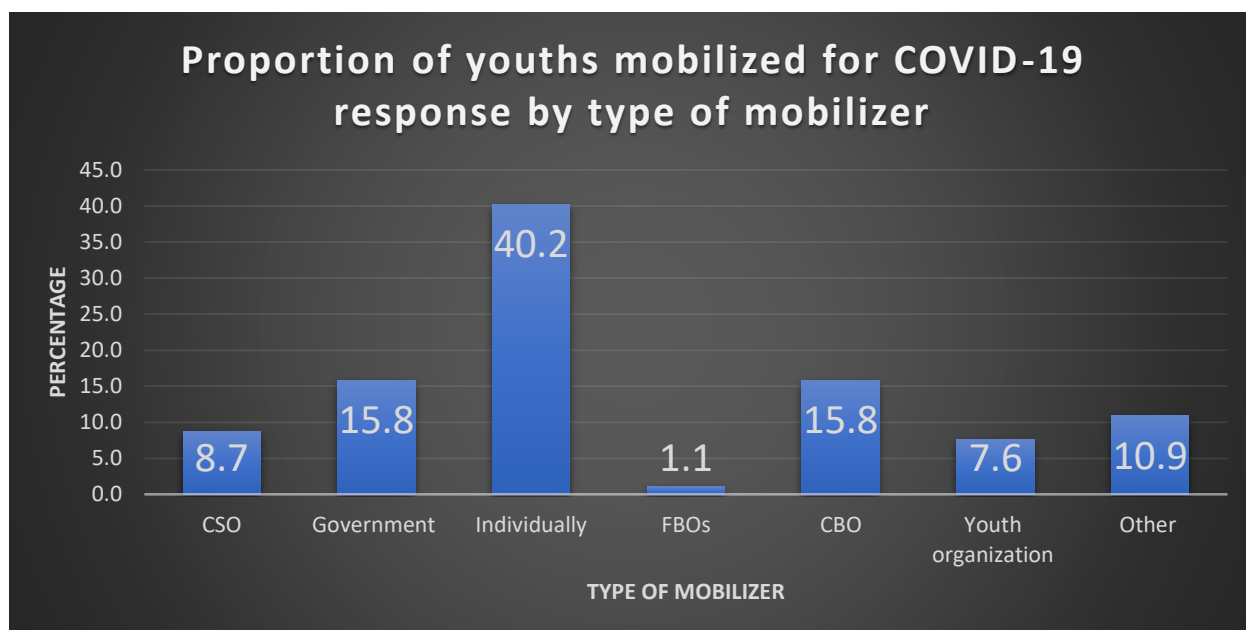


Figure 8 Proportion of youths mobilized for COVID-19 response by type of mobilizer

Among 184 respondents who reported that they were mobilized to participate in the COVID-19 response, only 2 (1%) were mobilized to participate in policy design; while the majority (87%) were mobilized to participate in selection of activities followed by budgeting (12%).

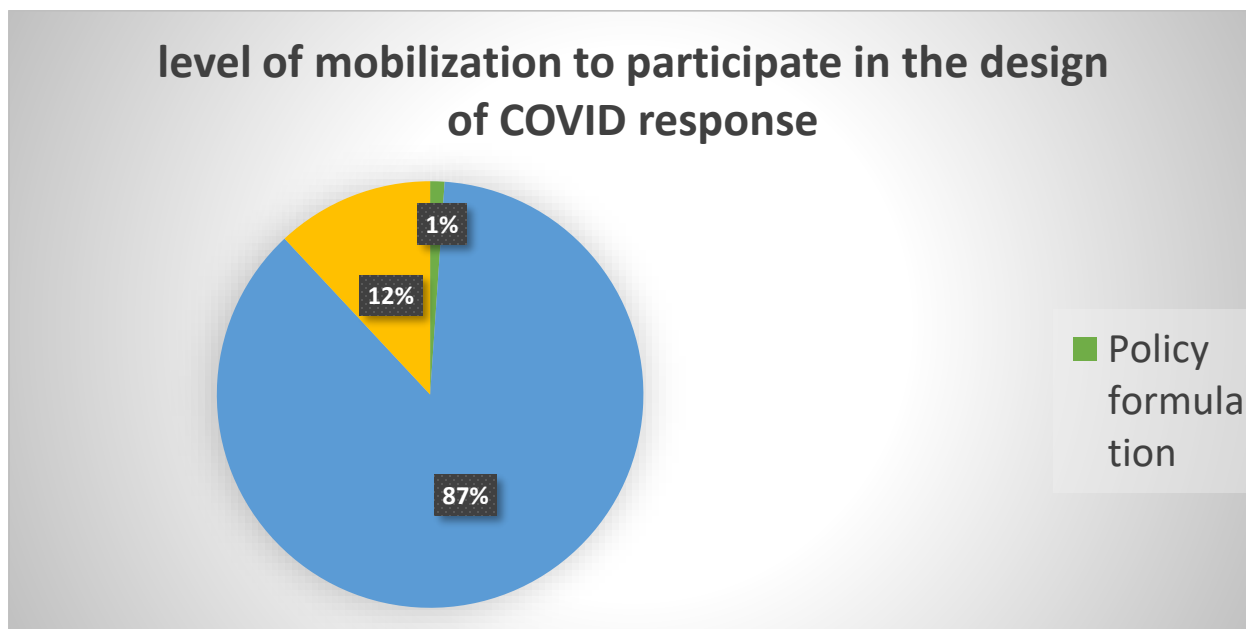


Figure 9 Level of mobilization to participate in the design of COVID-19 response

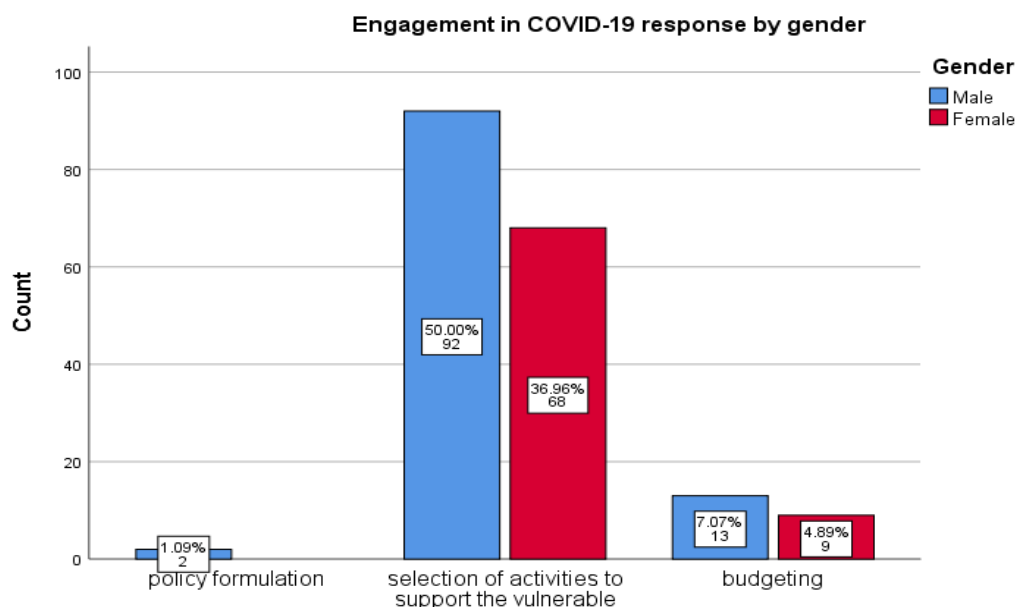


Figure 10 Level of engagement of youths in the COVID-19 response by gender

Likewise, about two third (64%) of the 184 respondents were mobilized to support the response through distribution of COVID-19 materials. Overall, majority (77%) of the 184 respondents who were mobilized to participate in the COVID-19 response, characterized the nature of their involvement as casual/support while the rest 23% indicated that they were involved in administrative, supervisory or other areas.

The major ways that the respondents participated in the COVID-19 -19 response were through delivering food and sanitary materials (about 20%), using social media to spread accountable information (about 18%), ensuring the most vulnerable are not left behind (11.5%), speak out for effective and equitable care (about 9%), and others segmented and various activities (63%). Table 2 shows Level of meaningful youth engagement among youths.

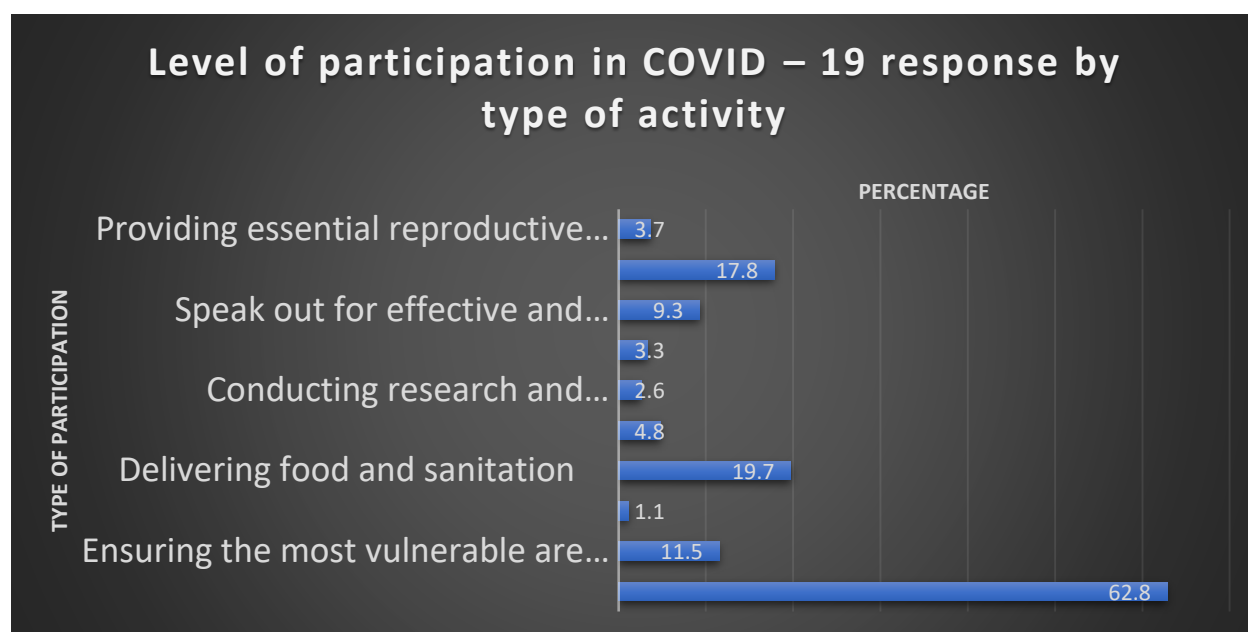


Figure 11 Level of participation in COVID-19 – 19 response by type of activity

Table 2 Level of meaningful youth engagement among youths

Variable	Response category	Frequency	Percentage
How were you mobilized to participate in COVID-19 response?	CSO	16	5.9
	Government	29	10.8
	Individually	74	27.5
	FBOs	2	0.7
	CBO	29	10.8
	Youth organization	14	5.2
	Other	20	7.4
	None	85	31.6
How were you mobilized in the design of COVID-19 response	Policy formulation	2	1.1
	Selection of activities	160	87.0
	Budgeting	22	12.0
	Care for the sick	39	21.2

How were you mobilized to support the COVID-19 response*	Distribution of COVID-19 materials	118	64.1
	Other	59	32.1
Nature of involvement IN COVID-19 response	Casual	141	76.6
	Administrative	16	8.7
	Supervisory	11	6.0
	Other	16	8.7
Participation in COVID-19 response during the current phase of the pandemic*	Providing essential reproductive health and championship	10	3.7
	Using social media and apps to spread accountable information	48	17.8
	Speak out for effective and equitable care	25	9.3
	Championing mental wellness	9	3.3
	Conducting research and development technology	7	2.6
	Harnessing the strength of communication	13	4.8
	Delivering food and sanitation	53	19.7
	Engaging elected officials and law makers	3	1.1

	Ensuring the most vulnerable are not left behind	31	11.5
	Others	169	62.8

* Multiple response

6.3. Enabling Environment (Legislation and laws enacted during COVID-19)

Nearly all of the respondents (98%) have reported that they were not involved in formulating COVID-19 peace and security policy. Similarly, the great majority of the study participants (83%) reported that they are not aware of any policy that provide for youth participation in the COVID-19 response. In addition, only 4.5% of the respondents have participated in lobbying activities related to improvement in the COVID-19 response. Among the 269 study participants, 104 (39%) of them reported that they are aware of the existence of arrest in the government's COVID-19 response. Study participants have also indicated that they are aware of the existence of COVID-19 procurement guideline (23%).

Regarding the government's inclination towards allowing youths to exercise choice of intervention in COVID-19 response, nearly half (44%) of the respondents rated it as good and very good while equivalent proportion (43.5%) of participants rated it as poor and very poor.

6.4. COVID-19 budgets and resources

Regarding incidents of abuse/corruption in the COVID-19 response, 47% of the respondents have reported that they have witnessed fake companies/products in their communities. In addition, 31% and 18% of the respondents have reported that they have witnessed flouting of procurement/logistics procedures and embezzlement of COVID-19 resources respectively; while the rest 39% of the respondents said that they haven't witnessed any of those incidents. On top of that, about three fourth (74%) of the participants have said that the budgets allocated for the COVID-19 response were not made public. Table 3 shows detailed description of study participants' response on witnessing abuse/corruption related to COVID-19 response.

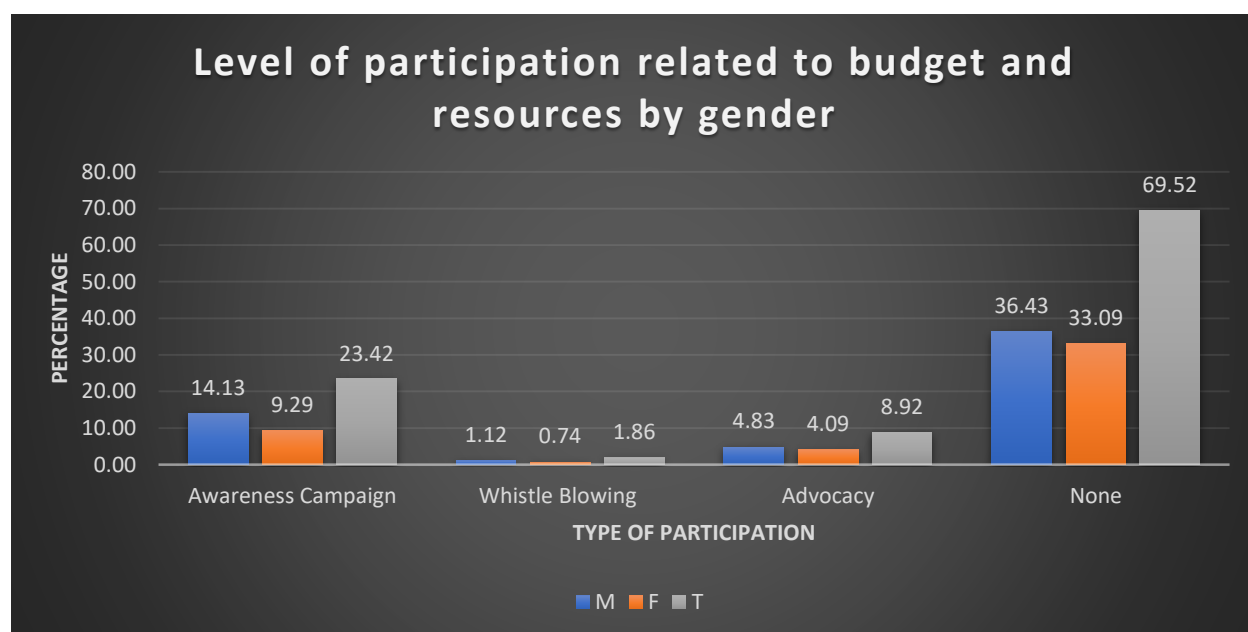


Figure 12 Level of participation related to budget and resources by gender

Table 3 Abuse/corruption related to COVID-19 response

Variable	Response category	Frequency	Percentage
Witnessed any of these*	Fake products	127	47.2
	Flouting of procurement/ logistics procedures	45	16.7
	Embezzlement of COVID-1919 resources	83	30.9
	None	106	39.4
Participated in any of these*	Anti-corruption awareness campaigns	63	23.4
	Whistleblowing	5	1.9
	Advocacy campaigns	24	8.9
	None	187	69.5

* Multiple response

6.5. Youth engagement in monitoring and evaluation

Of all the 269 participants, only 71 (26%) of them were involved in COVID-19 response by government or CSOs. Among the 71 respondents who were involved in COVID-19 response by government or CSOs, those engaged in participatory monitoring of budgets and policy implementation were 8 (3%), in participatory budgeting and oversight were 11 (4%), in social audits such as public hearings to oversee COVID-19 were 1 (0.4%), in co-governance of funds were 2 (0.7%), in interface meetings were 9 (3.3%) and in inclusionary community discussion and assessment of service performance were 5 (2%).

6.6. Technology and information flow

Regarding the existence of mechanisms that were put in place to enable youths to share information on COVID-19 response, majority of the respondents (59%-78%) did not know the existence of these mechanisms at wereda (district) level (59%), at sub-city level (78%), at regional level (78%) and at national level (60.5%).

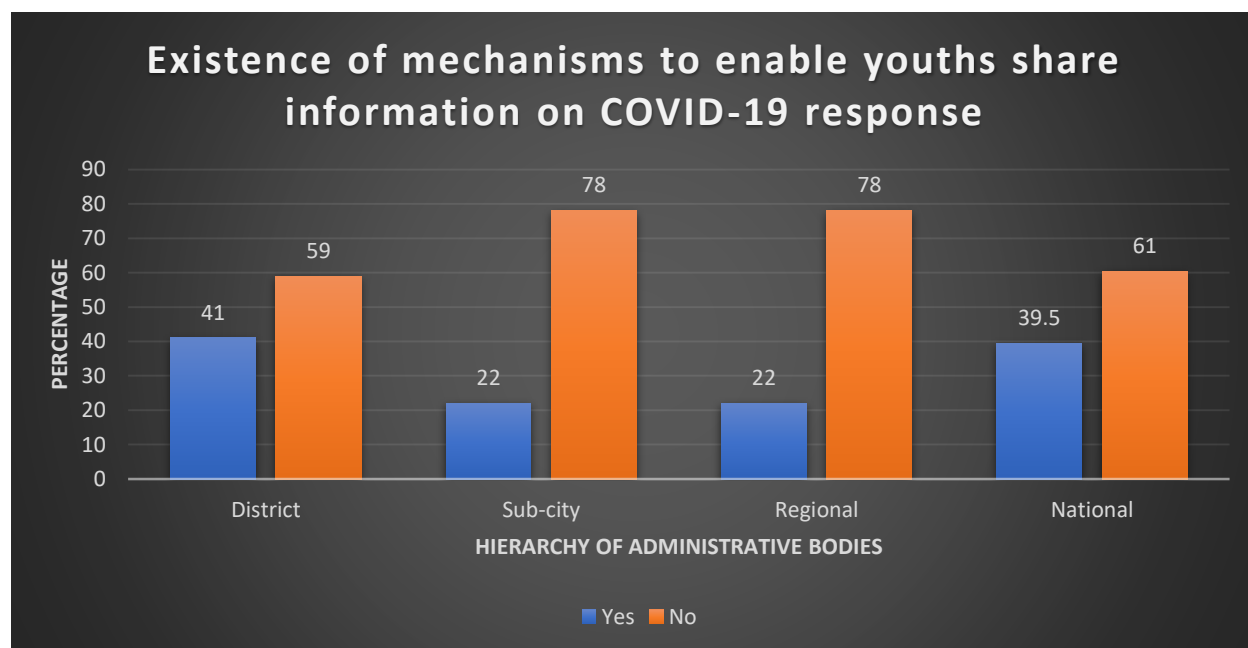


Figure 13 Existence of mechanisms to enable youths share information on COVID-19 response

Among the 269 study participants, about two third (61%) did not participate in any activity related to policy engagement and knowledge sharing. The most common type of activity that youths have

participated in the area of policy engagement and knowledge sharing was communication of good practices in the COVID-19 response (about 32%). Table 4 shows detailed description of the areas of participation in policy engagement and knowledge sharing.

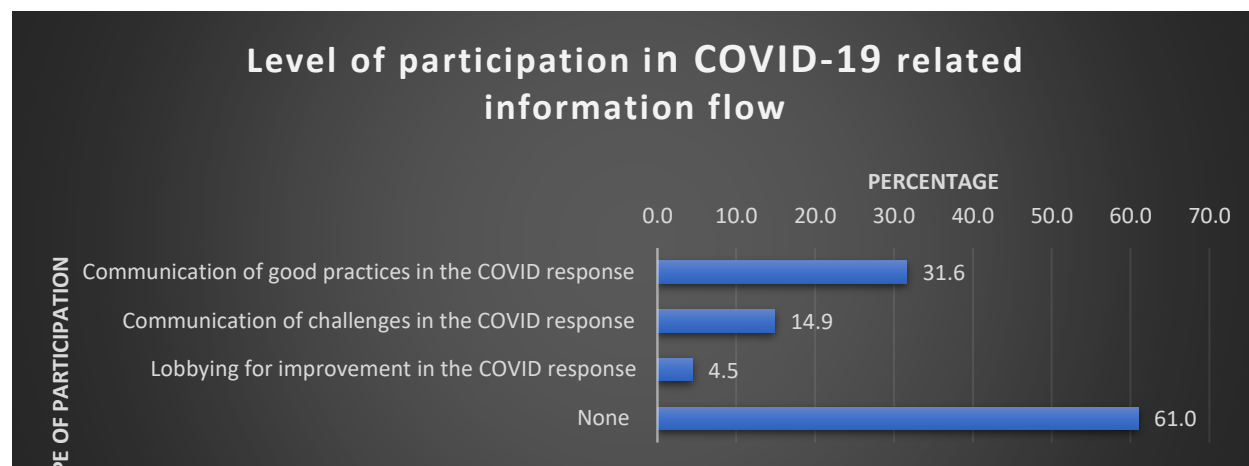


Figure 14 Level of participation in COVID-19 related information flow

Table 4 Areas of participation in policy engagement and knowledge sharing

Variable	Response category	Frequency	Percentage
Participation in policy engagement and knowledge sharing*	Communication of good practices in the COVID-19 response	85	31.6
	Communication of challenges in the COVID-19 response	40	14.9
	Lobbying for improvement in the COVID-19 response	12	4.5
	None	164	61.0

* Multiple response

6.7. Preparedness and Response

The study measured the capacity of youths to participate in the implementation, monitoring and evaluation of the COVID-19 response by asking the respondents to rank certain dimensions of their preparedness to participate in the COVID-19 response. Accordingly, majority (71-94%) of the study participants rated good or very good regarding their knowledge about COVID-19; access

to protective materials; financial resource; knowledge on information on mandates, rights, responsibility and entitlements; ability to demand information; ability to speak out and engage; and motivation to participate in the value chain from inception to accountability. However, participants who said that they have good or very good ability to participate in allocation of money to different activities; and they have ability to participate in follow-up of the way the money was spent are only 13% and 16% respectively.

Of all the 269 participants, only a quarter (26%) of them were involved in COVID-19 response by government or CSOs. When we see the level of their participation by specific activity, the activities that youths participated least were dissemination of audits (0%), social audits – public hearings to oversee COVID-19 (0.4%), co-governance of funds (0.7%), hiring of doctors, nurses, community health workers, wash officers etc. (frontline workers) (0.7%), inclusionary community discussion and assessment of service performance (1.9%) and local transparency (1.9%). Table 5. Shows the level of preparedness and response for COVID-19.

Table 5 Level of preparedness and response for COVID-19

Variable	Response category	Frequency	Percentage
Knowledge about COVID-19	Very Good	151	56.1
	Good	102	37.9
	Poor	11	4.1
	Very poor	5	1.9
Access to Protective Materials	Very Good	122	45.4
	Good	116	43.1
	Poor	28	10.4
	Very poor	3	1.1
Resilience (Financial Resources)	Very Good	61	22.7
	Good	120	44.6
	Poor	78	29.0
	Very poor	10	3.7
	Very Good	16	5.9

Ability to participate in allocation of money to different activities	Good	78	29.0
	Poor	156	58.0
	Very poor	19	7.1
Ability to participate in follow up of money	Very Good	11	4.1
	Good	63	23.4
	Poor	164	61.0
	Very poor	31	11.5
Knowledge of information on mandate right responsibility	Very Good	39	14.5
	Good	136	50.6
	Poor	82	30.5
	Very poor	12	4.5
Ability to demand information from implementers	Very Good	25	9.3
	Good	130	48.3
	Poor	101	37.5
	Very poor	13	4.8
Ability to speak and engage	Very Good	28	10.4
	Good	137	50.9
	Poor	93	34.6
	Very poor	11	4.1
Motivation to participate	Very Good	76	28.3
	Good	114	42.4
	Poor	70	26.0
	Very poor	9	3.3
Involvement in COVID-19 response by	Dissemination of funding information	23	8.6
	Participatory monitoring of budgets and policy implementation	8	3.0

government or CSO*	Hiring of doctors, nurses, community health workers, WASH officers etc. (frontline workers)	2	0.7
	Participatory budgeting and oversight	11	4.1
	Social audits – Public hearings to oversee COVID-19	1	0.4
	Dissemination of audits	1	0
	Co-governance of funds	2	0.7
	Interface meetings	9	3.3
	Inclusionary community discussion and assessment of service performance	5	1.9
	Local transparency	5	1.9
	Local trainers	3	1.1
	Other	23	8.6

* Multiple response

6.8. Challenges of meaningful youth engagement in social accountability

The most common factors identified as challenges that constrain youths engagement in the COVID-19 response were limited budget (49%), followed by limited time (32%), reluctance of the government (24%) and limited capacity of both the government and youths (20%).

Out of the total 269 respondents, 184 (68%) were mobilized to participate in the COVID-19 response. Accordingly, those 184 respondents who reported that they were mobilized to participate in the COVID-19 response have identified culture (48%), economic variables (30%) and access to information (18.5%) as the main factors affecting the level of their involvement in the COVID-19 response. Table 6 shows detailed description of constraints identified by the respondents. Table 6 shows detailed description of constraints identified by the respondents.

Regarding the parts of life affected by COVID-19, half of the respondents have identified that COVID-19 have affected their education. Similarly, 43% of the respondents have identified their employment was affected by COVID-19. The list affected part of life was activism (1%). Over all there is no gender difference related to the parts of life affected by COVID-19.

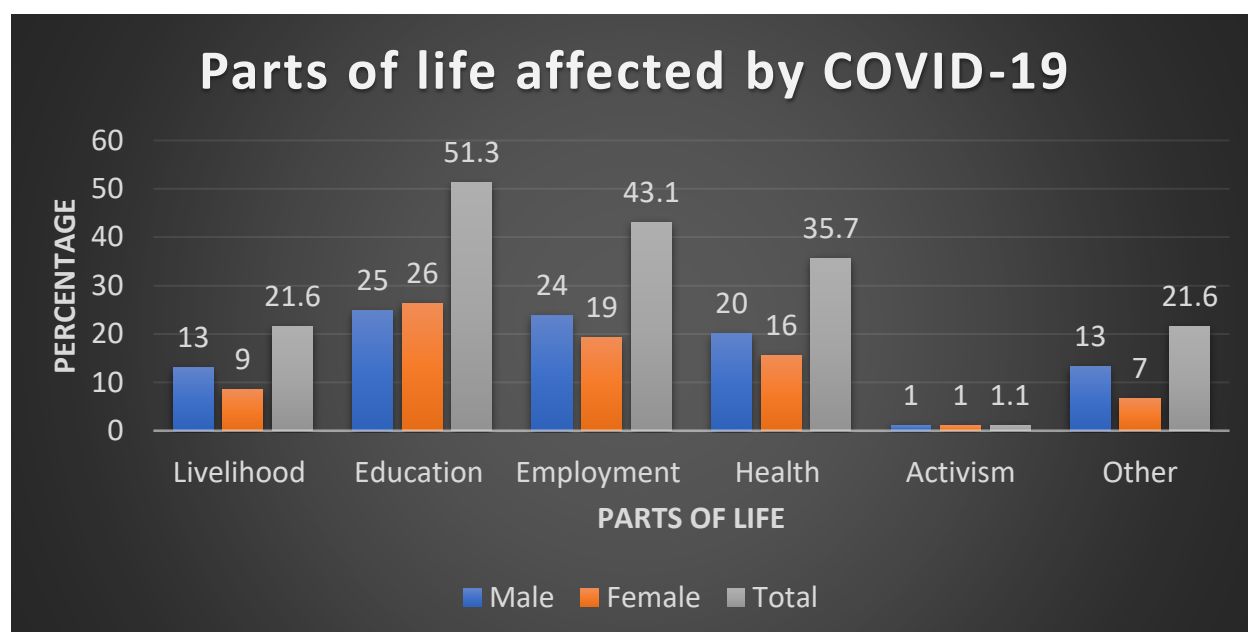


Figure 15 Parts of life affected by COVID-19

Table 6 Constraints and challenges of meaningful youth engagement in social accountability

Variable	Response category	Frequency	Percentage
Engagement constraints in COVID-19 response*	limited budget	132	49.1
	limited time	87	32.3
	Expertize to devote to civic engagement activities	40	14.9
	Reluctance of the government	64	23.8
	Lack of standard operating procedures and guidelines	49	18.2
	Limited evidence on effectiveness of youth efforts	20	7.4

	Internal logistical challenges	29	10.8
	Negative reputation of the government in providing social services	15	5.6
	Limited willingness of youth to participate	45	16.7
	Corruption/favoritism/nepotism	27	10.0
	Social exclusion	17	6.3
	limited capacity of both the government and youths	53	19.7
	None	24	8.9
	Other	42	15.6
Constraints *	Politics	17	9.2
	Culture	88	47.8
	Tolerance for youths opinions	22	12.0
	Laws	18	9.8
	Economic variables	56	30.4
	Access to information	34	18.5
	Other	34	18.5

* Multiple response

7. Findings of Qualitative study

7.1. Meaningful youth engagement in social accountability

Our finding revealed that the level of meaningful youth engagement in SA (i.e. active participation of young people on equal terms with adults in designing, planning, implementing, monitoring and evaluation) of COVID-19 related programs is different from organization to organization. There is no universal framework or guideline that directs youth involvement. Our respondents suggested that meaningful participation of youth can be achieved through deliberate efforts; including budding capacities, establishing an enabling environment, increasing the commitment and determination of young people to be actively involved, and support and frequent follow-up. The following quotation shows the level of youth engagement at different organizations.

“We strongly believe that engaging youths in SA activities of COVID-19 response is a must and very effective approach. We are participating youth’s through our 113 youth personality development centres and 716 youth clubs working in different areas (Health, Art, Sport, blood donation, and red-cross, school....). Youths have been participating in voluntary service through their associations. Some of the activities they were undertaking include hand washing, social distancing, body temperature measurement, poster distribution, street drama and role playing, supporting health facilities, awareness creation, mobilizing and collecting food items etc.” (Addis Ababa Youth and Volunteers Coordination Office)

“We involved youths when we distribute BBC materials like leaflets, brochures and other COVID-19 prevention materials like mask, sanitizers. They supported us a lot in community awareness creation and sensitization. Together with Youths from Addis Ababa Youth association we provide COVID-19 education at school, at different government institutions and to the general community through street drama and role-playing.” Hiwot Integrated Development Organization (HIDO)

“Youth participation should not be periodic; we have to establish well organized ongoing system to ensure sustained and effective youth engagement in social accountability of COVID-19 response or for other emerging pandemics.” (Ministry of Women Children and Youths)

“To engage youths meaningfully, our offices should be open and attractive to youths who want to volunteer their time and energy. We have to create free service opportunities, trust and allow them to work independently. We have to motivate, encourage and support youths so as to empower them towards effective performance” Future Hope Integrated Development Organization (FHIDO)

“Usually, youths accept new things easily, but they are negligent and they have a problem of persistency and require frequent monitoring and follow-up.” Ethiopian Public Health Institute (EPHI)

7.2. Enabling factors of meaningful youth engagement in social accountability

Most frequently mentioned enabling factors for meaningful youth engagement in COVID-19 response were: presence of easily accessible and adequate number of youths, support Growing interest of development partners, availability of youth organizational structures (Youth and Volunteers Coordination Office, Youth Associations, Youth centers, Youth Clubs etc.), Advancement of technology (e.g. Social media, virtual meetings, online information sources), presence of sound guidelines/policies and being a national and global attention.

7.3. COVID-19 Budget and Resources.

Our qualitative finding revealed that COVID-19 budget and other resources are not transparent. No auditing mechanism. Youth are not well informed and aware of amount and type of resources allocated for COVID-19. The following quotation illustrated this finding:

“I don’t think we have a transparent utilization of COVID-19 budget and other resources. Organizations do not want to be transparent and be accountable, that is why they opt to hide their budget and other allocated resources. Let alone youths, we all have not the information on how much budget and resources are allocated, mobilized and funded by the international community for COVID-19. So, if we don’t know how much budget is allocated. It will be difficult to make institutions and service providers accountable.” (Key Informant form Government Institution)

Another key informant form CSOs shared their experience on how they utilize COVID-19 budget as:

“... during inauguration of our programs, we usually present our budget breakdown to stakeholders including youths. Based on the feedback we got we made the necessary revision. As far as we create awareness and disclose resources publicly and be ready to be accountable, the community itself asked us how we utilized COVID-19 resources. We had social accountability committee (SAC) and financial transparency and allocation committee (FTAC), composed of representatives from CSOs, public institutions and beneficiaries. They monitor and audit COVID-19 related activities and Budget regularly and so far there is no negative report.”

7.4. Youth engagement in monitoring and evaluation

Our qualitative respondents agree that participation of youths in monitoring and evaluation of COVID-19 response activities is crucial to improve performance and for efficient and effective implementation of programs. However, due to different reasons like emergency nature of the problem, lack of adequate knowledge and skill on M&E, lack of COVID-19 monitoring and evaluation framework (guideline) etc.. They revealed that youth involvement in monitoring and evaluation of COVID-19 response is not found to be satisfactory. Respondents share us their opinion in this regard as follows:

“Yes, youths should be engaged in monitoring and evaluation of COVID-19-response. But, we need to provide them adequate training on M&E to improve their knowledge and skill so that they can participate meaningfully. Moreover, they have to go through all the process of COVID-19 response programs (i.e. designing, planning, implementing, monitoring and evaluating). We have to create smooth environment to be monitored and evaluated.”(Key informant from CSOs)

“It is difficult to implement M/E activities during emergency situations; we were running towards core activities (i.e. case detection, testing and isolation). We don’t have monitoring and evaluation framework appropriate for emergency situation. In the existing monitoring and evaluation structures and/or committees participation of youths is minimal, indeed.”(Key informant from government institution)

7.5. Preparedness and Response

Our key informants mentioned different COVID-19 preparedness and response interventions being implemented by their organization and the federal government in general to contain the pandemic. Public awareness creation and public education have been the public health strategic efforts. For this purpose the government widely used media messages and ethio-telecom cell-phone ring tones and SMS to remind and create awareness about the public health hygiene responses including frequent hand washing, maintaining a social distancing, and wearing of facemasks to fight COVID-19. In addition, an online platform/website providing short-term courses and trainings was developed by the ministry of health. Furthermore, the government implemented strict and stringent contact tracing after the case report, isolation as well as care, obligatory quarantine, and treatment. The government mobilized the public universities’ dormitories and other private buildings to increase the capacity and number of quarantine centers. After the declaration of a national state of

emergency the country has banned public gatherings and other social activities of more than four people. The ban applied to all religious, governmental, non-governmental, commercial, political, and social gatherings. Further, the government introduced more comprehensive life insurance packages and coverage to protect front-line health workers.

7.6. Challenges of MYE in Social Accountability

Participants were asked to mention potential challenges or barriers of meaningful youth engagement, accordingly, the most frequently mentioned reasons were: Limited knowledge and experiences of youth on social accountability, Lack of youth engagement culture, Weak youth led structures/ Youth Clubs/ Youth Associations, Young people's lack of trust in the existing youth structures, Inadequate financial and other resources to youth engagement, Political and religious turmoil, Poor collaboration and coordination among stakeholders, non-participatory policies and laws. These findings were supported by the following quotations.

“The major problem in our setup is poor economic status because of that youths prioritize other activities to fulfil their daily basic needs. The other disabling factor is stigma- Families don't want their family members to participate in COVID-19 response activities due to fear of infection.” (EPHI).

“Our institutions are not youth friendly; they don't have the necessary services to attract youths. In addition they are complex and bureaucratic. There is no freedom in forming youth associations, clubs etc. It is associated with politics and religion. For example when someone started to volunteer something or be a member of a given youth based organization, he/she will be linked to a particular political group or religious group.” FHIDO.

7.7. Good Practices

One key informant interviewer from the Ethiopian Public Health Institute shared us how they tried to mobilize face mask and access it free of charge for the community. Hereunder, we summarize and present it as a good practice.

Mask Banking: Collecting masks from different individuals, private and public institutions including local and international donors and banking centrally. The primary aim of this initiative was to provide mask free of charge to poor peoples who cannot afford to buy face mask from their pocket. The bank has been distributing millions of masks to different public institutions so that they were able to dispense at least one mask for one customer free of charge.

8. Conclusion

The study found out low level of youth engagement in social accountability related to COVID-19 response. The major barriers for meaningful youth engagement in social accountability of COVID-19 response were: limited knowledge and experiences of youth on social accountability, lack of youth engagement culture, weak youth led structures/ youth clubs/ youth associations, young people's lack of trust in the existing youth structures, inadequate financial and other resources to youth engagement, political and religious turmoil, poor collaboration and coordination among stakeholders, non-participatory policies and laws.

In response to the pandemic, several measures ranging from public health emergency response to the state of emergency have been underway by the Ethiopian government. However, it is found that governmental efforts have not been enough to reduce the spread of the virus.

9. Recommendation

In recommendation, civil societies need to work together, coordinate their work to avoid duplication of effort. They have to engage youths in all phases of their project starting from designing, planning, and implementation to monitoring and evaluation.

The government and other concerned bodies are expected to establish youth friendly youth centres that means youth centres with adequate and necessary materials, recreation centres, and library. Much more is expected from the government in terms of creating awareness about social accountability in COVID-19 response and breaking the bureaucratic process, restrictive policies to create youth friendly youth centres.

Integration and mainstreaming of COVID-19 with other service like youth reproductive health service, school health services for sustained and resilient COVID-19 prevention and control program.

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Annex 1 Baseline Survey Questionnaire (Quantitative - English)



coyoqa_ethiopia_b
aseline_printable.pc

Annex 2 Baseline Survey Questionnaire (Quantitative - Amharic)

የመረጃ ሰብሳቢው ሙሉ ስም:-----

የምስራቅ እና የደቡብ አፍሪካ የማህበራዊ ሳይንስ ጥናት ድርጅት' የማኬሬሬ ዩንቨርሲቲ (ኡጋንዳ) ከሲ.ሲ.አ.ር.ዲ. ኤ (ኢትዮጵያ) እና ከአስሪያ-ኬንያ ቻይተር (ኬንያ) ጋር በመተባበር "ኮቪድ-19 እና የወጣቶችን ጥያቄ በአፍሪካ: ተፅዕኖ፣ ምላሽ እና መከላከል" በሚል ርዕስ የሚሰራ የምርምር፣ የፈጠራ እና አቅጣጫ የሚጠቁም ፕሮጀክት እየተገበረ ነው።

የጥናቱ ዓላማ የኮቪድ-19ን ኢኮኖሚያዊና ማህበራዊ ተጽዕኖ መቀልበስ (ማስተካከል) የሚያስችል የፖሊሲ፣ የውሳኔ ሰጭነትና የትግበራ አቅጣጫ መፍትሄ የሚጠቁም የኮቪድ-19 ቀጥተኛ የተቀናጀ የማህበራዊ ተጠያቂነት መተግበሪያ (ማራመጃ) ማዕቀፍ ማዘጋጀት ነው።

ተአማኒነት ያለውና ዐውዳዊ (ነባራዊ ሁኔታ) ላይ የተመረከዘ አካባቢያዊ መረጃዎችን ለመመዘገብ፣ ለመተንተን (ለመረዳት) እና ለህብረተሰቡና ለመንግስት ፈጣን ግብረ-መልስ በመስጠት የፖሊሲና የትግበራ አቅጣጫ በመጠቀም የኮቪድ-19ን ኢኮኖሚያዊና ማህበራዊ ተጽዕኖ መቀልበስ (ማስተካከል) የሚያስችል የኮቪድ-19 ቀጥተኛ የተቀናጀ የማህበራዊ ተጠያቂነት መተግበሪያ (ማራመጃ) ማዕቀፍ ማዘጋጀት ነው።

እርስዎም ኮቪድ-19ን የሚመለከቱ ተግባራት ላይ ባለዎት ተሳትፎ እና ሞያዊ ክህሎት ምክንያት በዚህ ጥናት ላይ እንዲሳተፉና በፕሮጀክቱ የወደፊት አተገባበር ዙሪያ አቅጣጫ የሚመለከት እንዲሁም ፕሮጀክቱን ወደፊት ለመገምገም የሚያገለግል የመነሻ (የማጣቀሻ) መረጃ እንዲሰጡን እጩ ሆነው ተመርጠዋል።

በመሆኑም ቀጥሎ ለምናቀርብልዎት ጥያቄዎች ምላሽ እንዲሰጡን እንጠይቅዎታለን።

ለመሳተፍ ፈቃደኛ ነዎት

አጠቃላይ መረጃ

የሚገኙበት አካባቢ

ፆታ

እድሜ

የመጨረሻው (ከፍተኛው) የትምህርት ደረጃዎ

አልተማርኩም

አንደኛ ደረጃ

ሁለተኛ ደረጃ

የመጀመሪያ ዲግሪ

ከሁለተኛ ዲግሪ በላይ

1. ስራ አለዎት

የስራ ሁኔታዎን ቢገልጹልኝ

በደመወዝ ተቀጥሬ ነው የምሰራው

የራሴን ስራ ነው የምሰራው

ቋሚ ያልሆነ የጉልበት ስራ ነው የምሰራው

ሌላ ከሆነ ቢያብራሩልኝ

2. ወርሀዊ የገቢዎን በጠን ቢገልጹልኝ

እርስዎ ከወጣቶች ጋር ከሚሰራ ድርጅት ጋር ተሳትፎ አለዎት

የድርጅቱ ሁኔታ ምን ዓይነት ነው

አለም-አቀፋዊ ግብረሰናይ ድርጅት

ሀገራዊ ግብረሰናይ ድርጅት

አካባቢያዊ ግብረሰናይ ድርጅት

ማህበሰብ አቀፍ ድርጅት

ኃይማኖት አቀፍ ድርጅት

ሌላ ከሆነ ቢገልጹልኝ

3. የድርጅቱ ዋነኛ የስራ ዘርፍ በምን ዙሪያ ነው (ምን ላይ ያተኮረ ነው)

በመንግስት አስተዳደር

ጤና

ልማት

ትምህርት

የአካባቢ ጥበቃ

ትራንስፖርት

ሰላምና ደህንነት (ፀጥታ)

ሌላ ከሆነ ቢገልፁልኝ

ማማከር

4. እርስዎ ከዚህ ድርጅት ጋር ተሳትፎ ሲያደርጉ ምን ያህል ጊዜ ሆነዎት

የኮቪድ-19 ዓለም-አቀፍ ወረርሺኝ ሲከሰት እርስዎ በወረርሺኙ ምላሽ ላይ እንዲሳተፉ የተጋበዙት (ጥሪ የተደረገልዎት) (ቅስቀሳ የደረሰዎት) እንዴት ነበር?

ግብረሰናይ ድርጅቶች

በመንግስት

በግለሰብ

በኃይማኖት አቀፍ ድርጅቶች

በማበህበሰብ አቀፍ ድርጅቶች

በወጣቶች ድርጅቶች

ሌላ ከሆነ ቢገልፁልኝ

የለም

5. የኮቪድ-19 ዓለም-አቀፍ ወረርሺኝ ሲከሰት እርስዎ በወረርሺኙ ምላሽ አሰጣጥ ዕቅድ ማዘጋጀት ላይ እንዲሳተፉ የተደረጉት (የተጋበዙት) (ጥሪ የተደረገልዎት) (ቅስቀሳ የደረሰዎት) እንዴት ነበር?

በፖሊሲ ማርቀቅ ስራ ላይ

ተጋላጭ የማህበረሰብ ክፍሎችን መደገፊያ ተግባራትን መለየት ላይ

በበጀት ምደባ ላይ

6. የኮቪድ-19 ዓለም-አቀፍ ወረርሺኝ ሲከሰት እርስዎ ለወረርሺኙ ምላሽ መስጠትን እንዲደግፉ የተደረጉት (የተጋበዙት) (ጥሪ የተደረገልዎት) (ቅስቀሳ የደረሰዎት) እንዴት ነበር?

የታመሙትን መንከባከብ

ለኮቪድ-19 መከላከያ የሚያገለግሉ ቁሳቁሶችን በከፋፈል ለምሳሌ መረጃ መስጫ፣ የአፍና የአፍንጫ መሸፈኛ ጭምብል፣ የንጽህና መጠበቂያ አገልግሎት መስጫዎችን (ቁሳቁሶችን)

ሌላ

7. በኮቪድ-19 ወረርሺኝ ምላሽ መስጠት ላይ እርስዎ ተሳትፈው ከነበረ የተሳትፎዎን መጠን እንዴት ይለኩታል

አነስተኛ

ከፍተኛ

በጣም ከፍተኛ

8. በኮቪድ-19 ወረርሺኝ ምላሽ መስጠት ላይ እርስዎ ተሳትፈው ከነበረ የተሳትፎዎን ሁኔታ እንዴት ይገልጹታል

ድንገተኛ (ወጥነት የሌለው) (አልፎ-አልፎ)/ድጋፍ ማድረግ (መስጠት)

አስተዳደራዊ

የክትትል ድጋፍ መስጠት (መከታተል፣ መገምገም፣ ማማከር)

ሌላ

9. እርስዎ ለነበረዎት የተሳትፎ መጠን ተጽዕኖ ካሳደሩ ጉዳዮች መካከል ዋነኛው ምንድን ነበር

ፖለቲካ

ባህል ለምሳሌ የዝምታ (ያለመናገር) (ያለመሳተፍ) ባህል

የወጣችን ሀሳብ መቀበል

ህጎች

ኢኮሚያዊ ጉዳዮች

መረጃ ማግኘት

ሌላ ከሆነ ቢገልጹልኝ

10. በኮቪድ-19 ወረርሺኝ ምላሽ መስጠት ላይ እርስዎ የነበረዎትን ሚና ጠቃሚነት እንዴት ይለኩታል?

1. ነባራዊውን የማህበረሰብ ጤና አግልግሎት በማጠናከር ላይ

በጣም ጠቃሚ

ጠቃሚ

መካከለኛ ጠቃሚ

በመጠኑ (በትንሹ) ጠቃሚ

2. በዜጎች ማህበራዊና ኢኮኖሚያዊ ህይወት ዙሪያ

በጣም ጠቃሚ

ጠቃሚ

መካከለኛ ጠቃሚ

በመጠኑ (በትንሹ) ጠቃሚ

3. በኮቪድ-19 ወረርሺኝ ምላሽ መስጠት ውጤታማነት ዙሪያ

በጣም ጠቃሚ

ጠቃሚ

መካከለኛ ጠቃሚ

በመጠኑ (በትንሹ) ጠቃሚ

ii. እርስዎ በአሁኑ ጊዜ በኮቪድ-19 ወረርሺኝ ምላሽ መስጠት ላይ በምን መልኩ ተሳትፎ እያደረጉ ነው?

አስፈላጊ የሆኑ የሥነ-ተዋልዶ ጤና አግልግሎት በመስጠት

ማህበራዊ ሚዲያና ሌሎች መተግበሪያዎችን በመጠቀም ትክክለኛ መረጃዎች ማስረጫት

በአኩል ተደራሽ የሆነና ውጤታማ አገልግሎት እንዲኖር ሀሳቤን በመግለጽ

የአዕምሮ ጤናን በማረጋገጥ (በመታገል)(በመደገፍ)

የጥናትና የልማት ስራዎችን በመስራት

Harnessing

ምግብና የንጽህና መጠበቂያ ቁሳቁሶችን መስጠት (ማከፈፈል)

የህዝብ ተመራጮችንና ህግ-እጭዎችን በማሳተፍ (ጋር በመሳተፍ)

ይበልጥ ተጋላጭ የሆኑ የማህበረሰብ ክፍሎች ተደራሽ አንደሆኑ (እንዳልተተው) በማረጋገጥ

ሌላ ከሆነ ቢገልጹልኝ

12. እርስዎ በኮቪድ-19 ወረርሺኝ ምላሽ መስጠት ላይ ለመሳተፍ ያለዎትን ዝግጁነት እንዴት ይለኩታል

1. በኮቪድ-19 ዙሪያ ያለዎትን እውቀት

በጣም ጥሩ

ጥሩ

ደካማ

በጣም ደካማ

- 2. የአደጋ ዝግጁነትና መቋቋም አቅም (እንደ ሳኒታይዘርና የአፍና አፍንጫ መሸፈኛ ጭምብል ያሉ የኮቪድ መከላከያ ቁሳቁስ ማግኘት)

በጣም ጥሩ

ጥሩ

ደካማ

በጣም ደካማ

- 3. የአደጋ ዝግጁነትና መቋቋም አቅም (የገንዘብ ምንጭ)

በጣም ጥሩ

ጥሩ

ደካማ

በጣም ደካማ

- 4. ገንዘብን ለተለያዩ ተግባራት መመደብ (በሚደረግ ምደባ) ላይ የመሳተፍ (ተሳትፎ የማድረግ) (አቅም)

በጣም ጥሩ

ጥሩ

ደካማ

በጣም ደካማ

- 5. ገንዘብ ለተለያዩ ተግባራት እንዴት እንደወጣ ለመቆጣጠር በሚደረግ ክትትል ላይ የመሳተፍ (ተሳትፎ የማድረግ) (አቅም)

በጣም ጥሩ

ጥሩ

ደካማ

በጣም ደካማ

- 6. በሙብት፣ ግዴታ፣ የሰልጣን ገደብ፣ entitelement ዙሪያ ያለዎት ዕውቀት

በጣም ጥሩ

ጥሩ

ደካማ

በጣም ደካማ

7. የኮቪድ-19 ወረርሺኝ ምላሽ መስጠት ስራዎችን እየተገበሩ ካሉ ሰዎች መረጃን የመጠየቅ አቅም

በጣም ጥሩ

ጥሩ

ደካማ

በጣም ደካማ

8. የመናገርና የመሳተፍ ብቃት

በጣም ጥሩ

ጥሩ

ደካማ

በጣም ደካማ

9. የኮቪድ-19 ወረርሺኝ ምላሽ መስጠት ሂደት ውስጥ ከመጀመሪያው እስከ መጨረሻው ሂደት ማለትም ከመነሻ ሃሳብ ማመንጨት (ውይይት) እስከ ተጠያቂነትን ማረጋገጥ ድረስ ለመሳተፍ ያለዎት ተነሳሽነት

በጣም ጥሩ

ጥሩ

ደካማ

በጣም ደካማ

10. የኮቪድ-19 ወረርሺኝ ምላሽ መስጠት ውስጥ ተሳትፎ እንዲያደርጉ በምን መልኩ ነበር ድጋፍ የተደረገልዎት

ስልጠና ከመንግስታዊ አካል

ስልጠና በግብረሰናይ ድርጅት

ስልጠና በመንግስታዊ አካል እና በግብረሰናይ ድርጅት

የገንዘብ ድጋፍ

የቁሳቁስ ድጋፍ

ሌላ ከሆነ ቢገልፁልኝ

ምንም ድጋፍ አልተደረገልኝም

- 11. የስልጠና ድጋፍ አግኝተው ከነበረ ስልጠናው የእርስዎን አካባቢ ነባራዊ ሁኔታ በቀጥታ የሚመለከት እንደነበረ ምን ያህል ይስማማሉ

በጣም እስማማለሁ

እስማማለሁ

አልስማማም

- 12. የስልጠና ድጋፍ አግኝተው ከነበረ ስልጠናው እርስዎ የኮቪድ-19 ወረርሺኝ ምላሽ መስጠት ተግባራትን በመቆጣጠር ዙሪያ ያለዎትን አቅም ማሳደግ ላይ ትኩረት ያደረገ እንደነበር ምን ያህል ይስማማሉ

በጣም እስማማለሁ

እስማማለሁ

አልስማማም

- 13. የኮቪድ-19 ወረርሺኝ ምላሽ መስጠት ላይ ወጣቶች ያላቸውን ሚና በተመለከተ የማህበረሰቡን አመለካከት እንዴት ይገልጹታል

በጣም ጠንካራ

ጠንካራ

መካከለኛ

ደካማ

በጣም ደካማ

- 14. የእርስዎን በኮቪድ-19 ወረርሺኝ ምላሽ መስጠት ተግባራት ውስጥ ተሳትፎ ማድረግን የሚኖሩበት ማህበረሰብ እንደሚደግፈው ምን ያህል ይስማማሉ

በጣም እስማማለሁ

እስማማለሁ

አልስማማም

15. ቀጥሎ ከተዘረዘሩት ውስጥ እርስዎ በኮቪድ-19 ወረርሺኝ ምላሽ መስጠት ተግባራት ውስጥ ተሳትፎ ማድረግዎን ያስተንገሉብዎት ጉዳይ ይናገሩል?

የበጀት (የገንዘብ) ውስንነት

በቂ ጊዜ ሰጥቶ ለመስራት የጊዜ ውስንነት

የዜግነት ተሳትፎ ተግባራት ላይ ለመሳተፍ ሞያዊ ክህሎት

ወጣቶችን ለማሳተፍ የመንግስት/የፕሮግራም መሪዎች (አስተባባሪዎች) ቸልተኛነት

ወጥ የሆነ መተግበሪያ እና መመሪያ እጥረት (አለመኖር)

በወጣቶች ጥረት (ተግባር)(ተሳትፎ) ውጤታማነት ላይ (ዙሪያ) የማስረጃ ውስንነት (የወጣቶች ተግባር ውጤታማነት ዙሪያ በቂ ማስረጃ አለመገኘት)

ውስጣዊ የቁሳቁስ እና መጓጓዣ እጥረት

ማህበራዊ አገልግሎት በመስጠት ዙሪያ መንግስት ከዚህ ቀደም የነበረው አሉታዊ አፈፃፀም (ስም) (ታሪክ)

ወጣቶች ተሳትፎ ለማድረግ ያላቸው ፈቃደኛነት ውስንነት

ሙስና/ ሰራተኛ (ሰራን) በዘመድ አዝማድ መስጠት፣ አድሎ

ማህበራዊ (ተጠቃሚነት) መገለል

ተሳትፎን በመገንባት ዙሪያ የመንግስትና የወጣቶች የአቅም ውስንነት

የለም

ሌላ (በገልጹልኝ)

13. በእርስዎ አመለካከት እርስዎ በኮቪድ-19 ወረርሺኝ ምላሽ መስጠት ውስጥ አስተዋጽኦ እንዲያበረከቱ ክህሎትዎን ለማሳደግ ምን መደረግ አለበት ይላሉ)በአደጋ ዝግጁነት፣ በትግበራ ሂደት፣ በተጠያቂነት)

በግለሰብ ደረጃ

በተቋም ደረጃ

በመንግስት ደረጃ

14. በመንግስት ወይም በግብረሰናይ ድርጅቶች በተከናወኑ የኮቪድ-19 ወረርሺኝ ምላሽ መስጠት ተግባራት ውስጥ እርስዎ ተሳትፎ አድርገዋል (ያደርጉ ነበር)?

አዎ

አይደለም

15. በመንግስት በተከናወኑ የኮቪድ-19 ወረርሺኝ ምላሽ መስጠት ተግባራት ውስጥ እርስዎ የነበረዎትን (የእርስዎን) የተሳትፎ ሁኔታ እንዴት ይገልጹታል?

ያልታቀደ

በደንብ የታቀደ

16. በግብረሰናይ ድርጅቶች በተከናወኑ የኮቪድ-19 ወረርሺኝ ምላሽ መስጠት ተግባራት ውስጥ እርስዎ የነበረዎትን (የእርስዎን) የተሳትፎ ሁኔታ እንዴት ይገልጹታል?

ያልታቀደ

በደንብ የታቀደ

17. እባክዎ እርስዎ የተሳተፉባቸውን የኮቪድ-19 ወረርሺኝ ምላሽ መስጠት ተግባራት የንገሩን

በጄትን የተመለከተ መረጃን ማሰራጨት

አሳታፊ የሆነ የበጄት ቀጥጥርና የፖሊሲ ትግበራን ክትትል (ቁጥጥር)

ሀኪሞችን፣ ነርሶችን፣ የማህበረሰብ ጤና ሰራተኞችን፣ በግልና በአካባቢ ንጽህና ላይ የሚሰሩ ባለሙያዎችን መቆጠር (ግንባር ቀደም ሰራተኞችን)

አሳታፊ የሆነ የበጄት ምደባና በበላይነት መቆጣጠር (ለመከታተል)

ማህበራዊ አዲት- ኮቪድ-19ን በበላይነት ለመከታተል የህዝብ ድምፅ መሰብሰብ (መቀበል) (ማሰማት)

የአዲት ውጤትን ማሰራጨት

በጄትን በጋራ ማስተዳደር

Interface የቀጥታ (አሳታፊ) ስብሰባ (ውይይት)

ሀብረተሰቡን ያካተተ ውይይትና የአገልግሎቶችን ብቃት (የአገልግሎት አሰጣጥን) መለካት (ማጥናት) (መገምገም)

አካባቢያዊ ግልጽነት

አካባቢያዊ አሰልጣኞችን (ማዘጋጀት)

ሌላ ካለ ቢገልጹልኝ

18. በኮቪድ-19 ወረርሺኝ ምላሽ መስጠት ተግባራት ውስጥ የተሳተፉ መንግስታዊ ተቋማት የእርስዎን ድምጽ (ሃሳብ) የመቀበል ሁኔታ እንዴት ይለኩታል (ደረጃ ይሰጡታል)

በጣም ጥሩ

ጥሩ

ደካማ

በጣም ደካማ

20. በኮቪድ-19 ወረርሺኝ ምላሽ መስጠት ተግባራት ውስጥ የሚሳተፉ በግብረሰናይ ድርጅቶች የእርስዎን ድምጽ (ሃሳብ) የመቀበል ሁኔታ እንዴት ይለኩታል (ደረጃ ይሰጡታል)?

በጣም ጥሩ

ጥሩ

ደካማ

በጣም ደካማ

21. እርስዎ በሚኖሩበት በማህበረሰብ ውስጥ በኮቪድ-19 ወረርሺኝ ምላሽ መስጠት ተግባራት ላይ በተሳተፉ መንግስታዊ ተቋማት እርስዎ መረጃ ማግኘት እንዲችሉ (የተመቻቸልዎትን ዕድል) የተደረገበትን ሁኔታ እንዴት ይለኩታል (ደረጃ ይሰጡታል)

በጣም ጥሩ

ጥሩ

ደካማ

በጣም ደካማ

22. እርስዎ በሚኖሩበት በማህበረሰብ ውስጥ በኮቪድ-19 ወረርሺኝ ምላሽ መስጠት ተግባራት ላይ በተሳተፉ በግብረሰናይ ድርጅቶች እርስዎ መረጃ ማግኘት እንዲችሉ የተደረገበትን ሁኔታ (የተመቻቸልዎትን ዕድል) እንዴት ይለኩታል (ደረጃ ይሰጡታል)?

በጣም ጥሩ

ጥሩ

ደካማ

በጣም ደካማ

23. ለኮቪድ-19 ወረርሽኝ ምላሽ የተመደበው በጀት ለህዝብ ይፋ ሆኖ ነበር (ተደርጓል)?

አዎ

አይደለም

24. መልስዎ አዎ ከሆነ፤ የበጀት አጠቃቀሙን በመከታተል ሂደት ውስጥ ወጣቶች ተሳትፎ አድርገዋል?

አዎ

አይደለም

25. መልስዎ አዎ ከሆነ፤ የበጀት አጠቃቀሙን በመከታተል ሂደት ውስጥ ወጣቶች ተሳትፎ ያደረጉት በምን መልኩ ነበር

26. በወረርሽኙ ጊዜ የወጣቶች ሰላምና ደህንነት በምን መልኩ ነበር ተጽዕኖ ያጋጠመው

27. እርስዎ የኮቪድ-19 ሰላምና ደህንነት ፖሊሲ በማርቀቅ ውስጥ ተሳትፏል

አዎ (ተሳትፎ አለሁ)

አይደለም (አልተሳተፍኩም)

28. መልስዎ አዎ ከሆነ፤ በምን መልኩ ነበር ተሳትፎ ያደረጉት

29. የነበረዎትን የተሳትፎ መጠን (ደረጃ) እንዴት ይለኩታል (ደረጃ ይሰጡታል)

ከፍተኛ ተሳትፎ

(በቂ) ተሳትፎ

መጠነኛ ተሳትፎ

ዝቅተኛ ተሳትፎ

አልተሳተፍኩም

30. በኮቪድ-19 ወረርሽኝ ምክንያት ተጽዕኖ የደረሰበትን የህይወትዎን ዘርፍ (ክፍል) ቢጠቅሱልኝ

ጤና

የገቢ ሁኔታ

ትም/ት

ስራ

የማህበረሰብ አንቁነት

ሌላ ካለ ቢገልጹልኝ

31. እርስዎን በኮቪድ-19 ወረርሺኝ ምላሽ መስጠት ተግባራት ውስጥ ለማሳተፍ (እንዲሳተፉ የሚያደርግ)(የሚያስችል) የሚያውቁት ፖሊሲ አለ

አለ

የለም

32. ቀጥሎ ከተዘረዘሩት የኮቪድ-19 ወረርሺኝ ምላሽ መስጠት ተግባራት ውስጥ እርስዎ በየትኛቹ ተሳትፏል

የተሻሉ (ጥሩ የሆኑ) የኮቪድ-19 ወረርሺኝ ምላሽ መስጠት ተግባራትን ማጋራት (ማሳወቅ)

በኮቪድ-19 ወረርሺኝ ምላሽ መስጠት ሂደት ውስጥ ያሉ (ያጋተሙ) ተግዳሮቶችን (ችግሮችን) ማጋራት (ማሳወቅ)

የኮቪድ-19 ወረርሺኝ ምላሽ መስጠት ተግባራትን (ሂደትን) (ስለ)ለማሻሻል የሚመለከታቸውን አካላት ማግባባት

የለም

33. ቀጥሎ ከተዘረዘሩት አካላት ጋር በኮቪድ-19 ወረርሺኝ ምላሽ አሰጣጥ ዙሪያ መረጃ መቀባበል (መቀያየር) (መጋራት) እንዲችሉ ለማስቻል የተዘረጋ የሚያወቁት ማስፈጸሚያ መንገድ (ዘዴ) አለ

ከወረዳ ሃላፊዎች ጋር

አለ

የለም

ከክልል ሃላፊዎች ጋር

አለ

የለም

ከፌዴራል ሃላፊዎች ጋር

አለ

የለም

34. መንግስት ከሚያከናውናቸው የኮቪድ-19 ወረርሽኝ ምላሽ መስጠት ተግባራት ውስጥ ቀጥሎ የተዘረዘሩት ይገኙበታል

ጥቃትን ለመጠቆም (ለማሳወቅ) የሚያስችል መድረክ (መንገድ) (አሰራር)

የኮቪድ-19 የግዥ መመሪያ

ለአዲት በጀት መመደብ

እስር መፈጸም

ክስ ማካሄድ

የሀብት (የገንዘብ) ምንጮች እንዲያገግሙ (እንዲነቃቁ ማድረግ) (ሀብት ቁጠባ)

በኮቪድ-19 ዙሪያ የተዘጋጁ መመሪያችን በተላለፉ (በጣሱ) የሕግ-አስከባሪዎች ላይ የዕርምጃ እርምጃ (ቅጣት) መውሰድ

በማህበረሰቡ ላይ የሚፈጸሙ ያልተገቡ ድርጊቶችን ለሚያጋልጡ አካላት ጥበቃ ማድረግ

የለም

35. ለኮቪድ-19 ወረርሽኝ ምላሽ የመስጠት ተግባራት ውስጥ ቀጥሎ ከተዘረዘሩት ውስጥ እርስዎ እንዲያከናውኑ (እንዲሳተፉ) ለመፍቀድ መንግስት (የሚኖረውን) ያለውን ዝንባሌ እንዴት ይለኩታል (ደረጃ ይሰጡታል)

ምርጫ

በጣም ጥሩ

ጥሩ

ደካማ (ዝቅተኛ)

በጣም ደካማ (በጣም ዝቅተኛ)

ድምጽ መሆን (ማሰማት)

በጣም ጥሩ

ጥሩ

ደካማ (ዝቅተኛ)

በጣም ደካማ (በጣም ዝቅተኛ)

በበላይነት ቁጥጥር ማድረግ

በጣም ጥሩ

ጥሩ

ደካማ (ዝቅተኛ)

በጣም ደካማ (በጣም ዝቅተኛ)

36. ቀጥሎ ከተዘረዘሩት ውስጥ እርስዎ በየትኞቹ ውስጥ እንዲሳተፉ ተጋብዘው ነበር?

ግንዛቤ የማስጨበጫ ዘመቻዎች (እንደ ፀረ-ሙስናና ሌሎች)

በማህበረሰቡ ላይ የሚፈጸሙ ያልተገቡ ድርጊቶችን ማጋለጥ

Advocacy (በተመረጡ ጉዳዮች ዙሪያ የማሳመን (የማግባባት)) ዘመቻዎች

የለም

37. ቀጥሎ ከተዘረዘሩት የጥቃትና የሙስና ክስተቶች ውስጥ በኮቪድ-19 ወረርሺኝ ምላሽ መስጠት ጋር በተያያዘ እንደተከሰተ እርስዎ የሚያወቁት አለ?

የሀሰት ድርጅቶች

ሕግን ያለተከተለ የግዥና የመጓጓዣ አጠቃቀም (አመዳደብ)

ለኮቪድ-19 የተመደበ ሀብት ብዝበዛ

የለም

38. በእርስዎ አካባቢ የሚደረገው የኮቪድ-19 ወረርሺኝ ምላሽ አሰጣጥ ቀጥሎ የተዘረዘሩትን ያሟላ እንዲሆን ምን ሊደረግ ይገባል ብለው ያስባሉ?

ድጋፍ ለታቀደለት (ለሚያስፈልጋቸው) የህብረተሰብ ክፍል መድረስ

ለገንዘብ ዋጋ የሰጠ (ለምናወጣው ገንዘብ ተገቢ የሆነ) የኮቪድ-19 ወረርሺኝ ምላሽ አሰጣጥ ጋር የተያያዙ ግዥዎች

የአፈፃፀም (የመተግበሪያ) መመሪያዎችን ሁልጊዜ መከተል

በተጠያቂነት ዙሪያ ሪፖርት ማዘጋጀት

ሌላ

አስተያየት

ለመሳተፍ ፈቃደኛ ያልሆኑበትን ምክንያት እባክዎ ይግለጹልን

Annex 3 Baseline Survey Questionnaire (Qualitative - English)

COYOQA KEY INFORMANT INTERVIEW GUIDE

Background Information

Name of Organization: _____

Type of organization (Governmental, NGO, CSO, CBO, FBO, and Other Specify)_____

Contact (phone number/email/website): _____

Does your organization work with Youth (15-34 years)? Yes No

What is your role in this regard? _____

Youth Engagement during COVID-19 period

1. How do you see the level of youth engagement and social accountability in COVID-19 response in your organization?
2. How much attention has been given by your organization to youth engagement and social accountability in COVID-19 response?
3. What strategies can be employed to facilitate meaningful youth engagement and social accountability in COVID-19 response?
4. What strategies can be employed to facilitate meaningful CSO engagement in COVID-19 response?
5. How can the government support youth engagement and social accountability in COVID-19 response?
6. Did the government take into account youth's voice in formulating COVID-19 related policies (restrictions, lock downs)? What do you think is the benefit of doing so?
7. What strategies do you advice to institutionalize youth engagement and social accountability in COVID-19 response?

Barriers (Disabling) and Enabling Factors

8. What are the major enabling factors related to youth engagement and social accountability in COVID-19 response?
9. What are the major disabling factors you encountered related to youth engagement and social accountability in COVID-19 response?

Coordination

10. What strategies can be used to create a cadre of skilled actors facilitating and supporting youth engagement and social accountability in COVID-19 response at the community level?
11. How do you collaborate and coordinate your activities with other youth based organizations working on the same area.

COVID-19 Related Funds

12. Are there any strategies used to inform and disclose youths the way COVID-19 funds have been utilized?
13. What strategies can be used to create awareness among youths on the risk and consequence of corruption in the disbursement and allocation of COVID-19 funds?
14. Is there any transparent auditing mechanism to COVID-19 funds in your organization? Is there any CSO/individual youth who was a whistle blower or carried out real-time audits and the publication of audit findings on COVID 19 pandemic resource mismanagement?

Monitoring and Evaluation

15. What innovative strategies can be used to engage youths in the development and implementation of monitoring and evaluation activities towards COVID-19 response activities?

Peace and security

16. How did the peace and security guidelines, measures and policies related to COVID-19 affect the smooth running of operations in your county and institution?

Knowledge Transfer

17. What strategies do you advise to disseminate knowledge gained from such type of studies for concerned bodies?
18. What strategies do you advise to use evidences gained from such type of studies to formulate policies and change to action nationally and across IGAD regions.
19. Finally, is there anything you want to reflect?

The End

Thank You !

Annex 4 Baseline Survey Questionnaire (Qualitative - Amharic)

COYOQA KEY INFORMANT INTERVIEW GUIDE

አጠቃላይ መረጃ

የተቋሙ ስም: _____

የተቋሙ ዓይነት (የመንግስት, ግብረ-ሰናይ፣ ማህበረሰብ አቀፍ, ሀይማኖታዊ, ሌላ _____)

አድራሻ (ስልክ፣ ኢ-ሜይል፣ ፖስታ): _____

የተቋሙ እድሜአቸው ከ18-34 ዓመት ሆናቸው ወጣቶች ጋር ይሰራል? **አዎ አይደለም**

እርስዎ በተቋሙ ውስጥ ያለዎት የሰራ ድርሻ?

የወጣቶች ተሳትፎ

1. በእናንተ ተቋም COVID-19 በተመለከተ በሚደረጉ የመከላከል እና የመቆጣጠር ምላሾች/ስራዎች ላይና በማህበራዊ ተጠያቂነት ዙርያ የወጣቶች ተሳትፎ እና ሃላፊነት ምን ይመስላል
2. COVID-19ን በተመለከተ በሚደረጉ የመከላከል እና የመቆጣጠር ምላሾች/ስራዎች ላይና በማህበራዊ ተጠያቂነት ዙርያ የወጣቶች ተሳትፎ እንዲኖር ተቋማችሁ ምን ያክል ትኩረት ሰጥቶ ሰርቷል/እየሰራ ይገኛል ብለው ያስባሉ
3. COVID-19ን በተመለከተ በሚደረጉ የመከላከል እና የመቆጣጠር ምላሾች/ስራዎች ላይና በማህበራዊ ተጠያቂነት ዙርያ ትርጉም ያለው የወጣቶች ተሳትፎ እንዲኖር ለማድረግ ምን ምን አይነት ስልቶችን መተግበር/መከተል ይገባል ይላሉ
4. COVID-19ን በተመለከተ በሚደረጉ የመከላከል እና የመቆጣጠር ምላሾች/ስራዎች ላይና በማህበራዊ ተጠያቂነት ዙርያ ትርጉም ያለው የሲቪል ሶሳይቲዎች ተሳትፎ እንዲኖር ለማድረግ ምን ምን አይነት ስልቶችን መተግበር/መከተል ይገባል ይላሉ
5. COVID-19ን በተመለከተ በሚደረጉ የመከላከል እና የመቆጣጠር ምላሾች/ስራዎች ላይና በማህበራዊ ተጠያቂነት ዙርያ የወጣቶች ተሳትፎ እንዲኖር መንግስት እንዴት ማገዝ አለበት ብለው ያምናሉ
6. በ COVID-19 ወቅት የሚወጡ ህጎች/ገደቦች/ክልከላዎች የወጣቶችን ድምጽ እና ፍላጎት ምን ያክል ከግምት ውስጥ ያስገቡ ናቸው ብለው ያስባሉ; ይህን ማድረግ ምን አይነት ጥቅም ይኖረዋል
7. COVID-19ን በተመለከተ በሚደረጉ የመከላከል እና የመቆጣጠር ምላሾች/ስራዎች ላይና በማህበራዊ ተጠያቂነት ዙርያ የወጣቶችን ተሳትፎ እንዴት ተቋማዊ አድርጎ ማስቀጠል ይቻላል ይላሉ

ምቹ ሁኔታዎ እና መሰናክሎች/ችግሮች

8. COVID-19 ምላሽ አሰጣጥ ላይ የወጣቶችን ተሳትፎ የሚያግዙ/የሚያፋጥኑ/ ምን አይነት ምቹ ሁኔታዎች አሉ ብለው ያስባሉ
9. COVID-19 ምላሽ አሰጣጥ ላይ ውጤታማ የወጣቶችን ተሳትፎ እዳይኖር የሚያደርጉ ምን አይነት መሰናክሎች/ችግሮች አሉ ብለው ያስባሉ

የሰራ በቅንጅት

- 10. በታችኛው የማህበረሰብ እርከን ደረጃ ወጣቶች COVID-19 ላይ ንቁ ተሳትፎ እንዲያደርጉና በማህበራዊ ተጠያቂነት እንዲኖር የሚያደራጁ/የሚያስተባብሩ አደረጃጁቶችን እንዴት መፍጠር ይቻላል ይላሉ
- 11. ከሌሎች ከወጣቶች ጋር ከሚሰሩ አቻ ድርጅቶች ጋር በተቀናጁ እና ወጤታማ በሆነ መንገድ አብሮ ለመሰራት ምን አይነት ጥረት ታደርጋለችሁ

ኮቪድ-19 ጋር ተያያዥ የሆነ በጀት

- 12. ለ COVID-19 የተመደበ በጀት መኖሩን እና አጠቃቀሙን ወጣቶች በግልጽ እንዲያውቁት ለማረዳግ የተዘረጋ አሰራር አለ (እንዴት ማድረግ ይቻላል)
- 13. ለ COVID-19 ከተመደበ በጀት ጋር በተያያዘ ሙሴና ስለሚያስከትለው ጉዳት የወጣቶችን ግንዛቤ ለመሳደግ ምን አይነት ስልቶችን መተግበር/መከተል ይቻላል
- 14. የ COVID-19 በጀት ግልጽ በሆነ መንገድ ኦዲት እየተደረገ ሪፖርት ይደረጋል ብለው ያስባሉ; ይህን ያደረገ ተቋም እንደ ምሳሌ ሊጠቅሱልን ይችላሉ

ክትትል እና ምዘና

- 15. COVID-19 ምላሽ አሰጣጥን ስራዎችን በተመለከተ የክትትል እና ምዘና ስርአቶችን መንደፍ እና መተግበር ላይ የወጣቶች ተሳትፎ አስፈላጊ ነው ብለው ያምናሉ; ለምን; በምን መልኩ በዓየነቱ ልዩ የሆነ (ዘመናዊ፣ አዲስ ዓይነት) የክትትል እና ምዘና ስርአቶችን መንደፍ እና መተግበር ይቻላል

ሰላምና ፀጥታ

- 16. በ COVID-19 ወቅት የሚወጡ መመሪያዎች/ እርምጃዎችና ፖሊሲዎች በተቋማትና በአጠቃላይ ሀገራዊ መደበኛ (እንቅስቃሴዎች) (ተግባራት) ላይ በምን መልኩ ተጽዕኖ አሳድሯል

የዕውቀት ሽግግር

- 17. COVID-19ን በተመለከተ ከሚደረጉ የመከላከል እና የመቆጣጠር ምላሾች/ስራዎችና በማህበራዊ ተጠያቂነትን በመተግበር የሚገኙ መረጃዎችን ለባለድርሻ አካላት እንዴት ባሉ መንገዶች ማሰራጨት/ማስተላለፍ ይቻላል ይላሉ
- 18. COVID-19ን በተመለከተ ከሚደረጉ የመከላከል እና የመቆጣጠር ምላሾች/ስራዎችና በማህበራዊ ተጠያቂነትን በመተግበር የሚገኙ መረጃዎችን እንዴት ወደ ፖሊሲ ተቀይረው በአገራት ብሎም በምስራቅ አፍሪካ ደረጃ በተቀናጁ እና ተቋማዊ በሆነ መንገድ መተግበር ይቻላል ይላሉ
- 19. በመጨረሻም የቀረ እና ማንሳት የሚፈልጉት ሃሳብ ካለ እድሉን ልሰጥዎት

ወይይታችንን እዚህ ላይ ጨርሰናል
ለትብብርዎ እጅግ በጣም እናመሰግናለን!