ETHIOPIAN ELDERLY AND PENSIONERS NATIONAL ASSOCIATION (EEPNA)

OLDER PEOPLE FRIENDLY SOCIAL ACCOUNTABLITY GUIDE

PREPARED BY YEM CONSULTANT INSTITUTE PLC

Addis Ababa, June 2018

OLDER PEOPLE FRIENDLY SOCIAL ACCOUNTABLITY GUIDE

Table of Contents

Abbreviations & Related Terms

Acronyms and Definition for Related Terms

AMG	Apex Monitoring Group
BoFED	Breau of Finance and Economy Development
BPR	Business Processing Reengineering
CBOs	Community Based Organisation
ChSA	Charities and Societies Agency
CRC	Citizen Report Card
CSA	Central Statistical Authority
CSO	Civil Society Organisation
CSP/R	Charities and Societies Proclamation/ Regulation
CSC	Community Score Card
CSRP	Civil Service Reform Program
DSWP	Developmental Social Welfare Policy
ESAP2	Ethiopian Social Accountability Programme II
GO	Government
GRB	Gender Responsive Budgeting
GTP-II	Growth and Transformation Plan-II
HIV/AIDS	Human Immune Virus/Acquired Immune Disease Syndrome
IDOP	International Day of Older Persons
MoE	Ministry of Education
MoFEd	Ministry of Finance and Economy Development
MoH	Ministry of Health
MoWCA	Ministry of Women and Child Affair
MSC	Most Significant Change
NGO	Non-Government Organization
OCM	Older Citizens Monitoring
OPFSA	Older People Friendly Social Accountability
OPMG	Older People Monitoring Groups
PPB	Participatory Planning and Budgeting
PETS	Public Expenditure Tracking Survey
PLWHA	People Living with HIV/AIDS
PSNP	Productive Safety Net Program
SA	Social Accountability
SAC	Social Accountability Committee
SDGs	Sustainable Development Goals
UNCR	United Nation Convention on the Rights
WASH	Water Sanitation and Hygiene
Definition of related terms to Older People Friendly Social Accountability	
Elderly persons	Elderly persons/people simply refers to people that are 60 years of age and above.
Kebele	Refers to the smallest administrative unit in Ethiopia government set up.
Woreda	Means "District" the next administrative unit which consist 10-30 Kebeles
Basic Services	Means water, sanitation, food and adequate nutrition, health, education, housing and other social services such as life and asset saving information.
Basic needs	People need to be well fed, properly clothed, and adequately housed and fulfill the access to economic, social services and facilities and spiritual opportunities
Poverty	Poverty in its most general sense is the lack of necessities such as basic food, shelter, medical care, and safety that are commonly thought necessary based on shared values of human dignity.
Social pensions	Means regular, non-contributory and unconditional cash grants made to older people
Social protection	Is a set of formal and informal interventions that aim to manage social and economic risks, vulnerabilities and overcome deprivations, through various means for all people and facilitates equitable growth.
Vulnerability	is a set of conditions and processes resulting from physical, social, economical and environmental factors which increases the susceptibility of a community to the impact of hazards.
Community conversation	Aim to improve communication between community members and Woreda officials. They provide an opportunity for Woreda officials to listen to and understand a community's concerns and decisions in order to integrate them into planning and implementation processes.

ACKNOWLEDGEMENTS

1. INTRODUCTION

1.1.Brief Note on Older People Situation in Ethiopia

With a population close to 95 million, Ethiopia is the second most populous country in sub Saharan Africa. The proportion of young population under the age of 15 is 46.1% while the proportion of population in the working age group (15-64) is 51.2%. The proportion of population aged 64 years and above is 2.7%.

According to some studies the basic problems for older people in Ethiopia are access to food, shelter; lack of education, health problems; loneliness and depression as the major problems facing older people. Moreover; the range of problems that elderly people in Ethiopia are facing is continually increasing as societies are engaged in ongoing conflicts, experience enormous economic difficulties, natural disasters, health problems and a weakening of reciprocal relationships among families[1].

The social networks people cultivate during their life course could be very essential to accessing support in later years. Such support may include information on available health services as well as using these health services effectively. Social networks can also mitigate the negative effects of loneliness and alleviate feelings of alienation and isolation that can actually be detrimental to health, especially in old age. Feelings of isolation and alienation can sometimes make men indulge in risk behaviors, such as drinking excessively which itself has major health implications[2].

The extended family system provided in this regard a reliable support structure for people who were no more in a position to support them due to old age. Since recent years however, with the advent of 'modernization' and urbanization in particular, poverty has severely eroded the traditional family structure and exposed the elderly to vulnerability and social neglect. As a result it is a sad but common event to witness in Ethiopia today a good number of the elderly denied of their basic socio-economic rights and suffering from ill health and lack of basic life necessities, food, shelter and clothing in particular and even worse, with some elders forced to beg on the streets[3].

Poverty and social neglect are having a visible negative effect on the socio-cultural status of the elderly in the Ethiopian society. Elders who were treated with love and respect and served society as 'path-finders' and ' social-mediators' in times of tense and conflict situations both at the family and community level, but now older people could not enjoy their 'prestigious' social position in society as before.

1.2. Overview on Human Right and Responsibilities

What are human rights? Human rights are also called natural rights. It is argued that they belong to people just because they are human beings. People are entitled to them regardless of where they live in the world or of their position in society. It doesn't matter what a person's race, ethnic, sex, age, class, language, beliefs, culture or religion is, or how much money or education a person has, we all have the same human rights[4].

---

[1] Abdi Ayana; Lund University Department of Sociology (2012): "Who takes care of the Elderly in Ethiopia when Reciprocal Relationships Breakdown?"

[2] Gender, aging, poverty and health: Survival strategies of older men and women in Nairobi slums, 2014

[3] EEPNA, 2015: Organizational Development (OD) Mission Report

[4] The Universal Declaration of Human Rights, in 1948

There are many international documents that deal with human rights, for example, the Universal Declaration of Human Rights. Many countries with different social, political and economic systems have signed this document. This means that even though they may have different ways of doing things and different beliefs, they believe basic human rights apply to everyone. But not all people agree on the interpretation of such rights and how they should be put into practice. There is also debate about which human rights are most important and which are less important. The Ethiopian Federal Constitution of 1995 specifically addresses human rights and democratic rights, which includes aspects of economic, social and cultural rights[5].

Legal rights and moral rights: Legal rights are rights laid down in laws. Laws are made by parliament and they may give people certain rights. For example, it was once a legal right to own slaves because there were laws that allowed this, even though it went against the human rights of the people who were slaves. There are also moral rights. For example, even though people over a certain age may have a legal right to drink alcohol, others may believe that they do not have a moral right to do so. Different people have different ideas of what is moral and what isn't moral. Some communities may practise moral codes that go beyond what the law says. People may engage in campaigns to turn what they believe are moral rights or human rights into legal rights.

Indivisibility of human rights: Rights are often divided into different categories such as first, second and third generation rights, or civil and political rights, socio-economic rights and collective and cultural rights. But while it may be convenient to put these rights in categories, in reality they all overlap with each other and are completely interdependent. For example, for people to be able to use their right to vote effectively, they must have other rights like the right to attend political meetings, to have freedom of speech and to be free to move anywhere. Political rights are also strongly linked to socio-economic rights: if people don't have food to eat, a roof over their heads, or running water, then they might see little value in their right to vote or to join a political party[6].

The three generations of rights are traditionally described as follows:

First generation: civil and political rights and freedoms (examples include, the right to life, to vote, freedom of speech, to assemble and to demonstrate).

Second generation: social and economic rights (examples include the right to basic services, access to housing, land, health care, education and the right to earn a living).

Third generation: collective rights and cultural rights; these are also called community rights (examples include environmental rights, the right of all people to self-determination and the right to development).

Rights and responsibilities: This is very important term for both human right and Social Accountability (SA) process. For every right that a person has there is usually a responsibility that is connected to that right. For example, you have a right to freedom of expression, but a responsibility not to tell deliberate lies about someone else. There is a general responsibility to respect and be tolerant of other peoples' rights. The government also has responsibilities in terms of rights. Four examples of rights and responsibilities are given below.

a) **The right to life**:
   Your duty: not to hurt someone so as to threaten their life.
   The state's duty: to pass a law to stop the death sentence.

b) **Right to privacy**:
   Your duty: to knock on someone's door before entering their home.

---

[5] EFDRE Constitution 1995

[6] International Covenant on Economic, Social and Cultural Rights (1966)

<u>The state's duty</u>: to keep people's information about themselves private and confidential, for example a woman who wants to have an abortion should know that this information will be kept private.

c) Right to education:

<u>Your duty</u>: to send all your children to school.

<u>The state's duty</u>: to build enough schools and provide enough teachers so that everyone can go to school and get a proper education.

d) Right of access to health care, food, water, social security:

<u>Your duty</u>: to look after and care for public water pumps and to keep these in proper working order not to pollute rivers that people are using for drinking water to throw household litter in a proper place away from people's homes to pay taxes and duties for services to the Woreda council.

<u>The state's duty:</u> to provide a rubbish removal service to all communities to provide clean running water to all communities not to turn people away from hospitals if they need care.

Conflicts in rights: There are times when one person's right will conflict with the rights of another person. It is acceptable in certain situations to limit rights, if it is reasonable to limit them in the situation, and it is justifiable in an open and democratic society that is based on equality and freedom. Where there is a conflict of rights and each person thinks their right is more important than the other person's right, the courts may be approached to decide whose right is more important in a particular situation. Examples of limitations on rights[7]:

a) A school which follows Hindu traditions and customs refuses to take a child into the school because the child is not a Hindu. The school says they have a right to practise their own religion, culture and belief. The parents of the child argue that it is their right to send their child to any school of their choice. They say their child has a right to education. The conflict is about the right to education versus the right to practise your own religion, culture and beliefs.

b) In a rural community some people make a living by chopping down trees for firewood that they sell to the public. The government has appointed an official to protect the environment and to stop people from chopping the trees down. The conflict is about the right to choose how to earn a living, versus the right to an environment that is protected so that people can always live there.

How can we resolve conflicts of rights on our own? It is important to remember when there is a conflict between two people's rights, that it is acceptable to either limit one person's rights or limit both people's rights. *One of the ways that people can avoid conflict is by being more tolerant of other people's rights and views. A tolerant person will accept that other people have different opinions to them and will allow them to express these without getting aggressive towards the person.*

People should be encouraged to try and resolve their own conflicts before turning to the courts or other ways. These are some examples of how people can resolve conflicts:

- Try and involve an outside party to come and mediate between the parties in conflict. Any person who is called in as a mediator should be respected by both parties.
- Go to your nearest parliamentary constituency office for advice.
- Get advice about your rights from a paralegal in an advice office.
- Report the problem to the local police if you think it is a problem that they can investigate.
- Speak to other people and if necessary form a lobby or pressure group.

---

[7] Charter of Fundamental Rights of the European Union (2000)

- Report the problem to your local government representative.
- Report your case to a statutory body such as the Ethiopian Human Rights Commission or Ombudsman.

Creating a human rights culture in Ethiopia; a human rights culture means people in a society understand what their rights are and understand that they have a duty to respect and tolerate other people using their rights. Fundamental Rights and Freedoms guarantee our rights and says we can defend our rights in court. This will go a long way towards creating a human rights culture. But building a human rights culture depends mostly on the attitudes of individuals, and the respect and tolerance that they show towards other people[8].

People are tolerant when they learn to accept and live with the differences in other people, whether it is their attitudes, actions, cultures, religions, and so on. For example, a tolerant person will accept that other people have different opinions to their own, and they will allow them to express these without shouting at them or assaulting them. So, tolerance means:
- to show respect towards other people;
- to use negotiation and mediation when there is a problem between two or more people;
- to be patient with other people;
- to be a good listener;
- to be slow to get angry when someone has a different perspective or opinion.

1.3. Objectives and Framework of Older People Social Accountability Guide

As stated on the ToR (see the attachment); Older People are often denied their rights due to inappropriate policies, laws and services do not exist, or ,where they do, older people are not aware of their entitlements, selection processes do not benefit the most vulnerable older people, older people lack identification to prove their entitlement, older people cannot afford to pay for services, services are too far away or transport costs are too high, waiting times are too long, service providers discriminate against older people and etc.

The Experience and expertise older people have in the community and the role they play as careers, advisers, mediators, mentors and source of household income, grant them the trust and let them to be the sole source of information for good governance and accountability. Moreover they are also considered as the good advocators for their own and the general public interest.

Hence with an aim to promote dialogue between older people, governments and service providers, group of selected older people was established as Older Citizens Monitoring Groups (OCMG) to ensure age friendly social accountability and voice for right and entitlement of older people at all regions and national level in Ethiopia. For EEPNA Older Citizens Monitoring is a process through which older people gather evidence about their access to entitlements and use this evidence to lobby for improvements. It is a process that promotes dialogue between older people, civil society organizations, governments and service providers. Groups of older people monitor their access to services they are entitled to and lobby for improvements.

OCMG is one curtail approach of applying Social Accountability. To ensure older people participation and benefit with in socio-economic and political process of the nation, it is important to have older people voicing group all over the nation guided under one system contextualizing to their grassroots aspects. As citizen Monitoring is not a one spot event rather it is a regular and continues process where the group come together, set the issue they want influence, and identify decision-makers they

---

[8] *HelpAge International (2013): Entitled to the same right.*

need to target, develop strategies they have to follow gathering and organizing their argument evidences and key points.

Objectives of Older People Friendly Social Accountability Guide
- ❖ Develop OPFSA Guideline or manual that Older People Monitoring and other older people advocate groups easily understand and apply;
- ❖ Contextualize Older People right, entitlement, needs and priority in the social accountability process and tools;
- ❖ Recommend applicable and all inclusive Social Accountability system that Older People understand and well address their roles, values, contribution, vulnerability, protection and participation at all aspects.

Based on the above EEPNA practices and objectives; the consultant group adopted **the following basic methods/approach in the preparation of OPFSA Guideline**:

1) Integration of Older People Monitoring Group (OPMG) with the Social Accountability Committee (SAC) at local level;
2) During the application of OPFSA integrate male and female older persons with the new young generations; first it is important to transfer/transmit their knowledge and experience and secondly to enhance the advocacy role of the young for older people need and demand;
3) EEPNA can apply OPFSA, based on SA tools and process focusing mainly on right and policy issues and then follows the older people basic service demand and needs (particularly very important to apply in the health sector and PSNP);
4) Similar to the Social Accountability Process; NGOs/CSOs will serve as a facilitators during OPFSA implementation.

2. POLICIES AND STANDARDS RELATED TO OLDER PEOPLE IN ETHIOPIA

2.1. Review Result of National Policy and Plan of Action

The term 'elderly' or older person has different meaning in different countries; it is mainly explained and is related to chronological age, functional age as well as retirement age. According to the UN definition older persons are those people whose age is 60 years and over**.** The definition has gained acceptance in Ethiopian context as it coincides with the country's official retirement age. The Social Insurance Scheme, which is a contributory pension scheme, provides benefits in old age, invalidity, survivors and employment injury for 1 per cent of Ethiopians.

Ethiopia is one among the poorest countries in the world, it is also understood that disease, protracted war, recurrent drought, absence of good governance are some among the many problems facing the country. These problems together with the modern way of life caused by growing urbanization and modernization are now eroding the culture of intergenerational solidarity and mutual support that has been existing for a very long time and this increased the vulnerability of the society in general and older persons in particular.

Poverty become more acute among older persons because once they are exposed to it, it is much more difficult for them to come out of it. Health problems, lack of balanced diet, shelter, unsuitable residential areas, absence of family and community support, absence of social welfare coverage, limited social security services, absence of education and training opportunities, limited employment and income generating opportunities are some of the factors contributing to the poverty of older persons. In Ethiopia, particular emphasis is given to older persons under difficult circumstances

which include: older women, older persons with disabilities, rural elderly, displaced elderly and those affected by HIV/AIDS[9].

Objectives of Older People Policy Plan of Action

✧ Expand and strengthen services for the older persons based on community participation.
✧ Encourage the participation of older persons to make use of their accumulated knowledge and rich experience in bridging about development.
✧ Give attention to the rights and needs of older persons to make them part of the country's development plans and poverty reduction strategy.
✧ Identify the issues of older persons and work on them by listing specific objectives and activities.
✧ Co-ordinate concerned government and nongovernment organizations so as to enable them contribute their participation in realizing the objectives of the Older People Plan of Action.
✧ Facilitate conditions to link the issues of Ethiopian older persons with international efforts to eventually gain cooperation and support.

According to the policy, here are basic sectoral standards and policy action activities to be applied during SA process to demand the right of older people:

a) Health and Well-being

The health policy of Ethiopia affirms health service focusing on prevention. According to global and regional policies, all human beings have the right to get health services and facilities without discrimination based on age, gender or race.

Main activities of the policy actions

❖ Developing a curriculum aimed at increasing the number of professionals in the field of ageing to deal effectively with health problems of older persons.
❖ Providing successive trainings to older persons with regard to hygiene, sanitation diseases and their symptoms, first aid, long term care, and the use of medicines.
❖ Facilitate conditions that will help older persons to get adequate food, adopt healthy and balanced eating habits so that they can protect themselves from diseases.
❖ Give special attention through policy supported measures to enable poor older person receive **free medical services**.
❖ Given priority for older persons in getting medical services at specially arranged schedules.
❖ Encourage older persons to take HIV/AIDS tests and help them get counseling services and drugs for those infected with the virus.
❖ Facilitate condition for older persons with physical injuries and disabilities so that they get prosthetic orthotic appliance and wheel chairs.

b) *Family and community care*

There is no other institution that can fully replace family to provide care for older persons in countries where extended family system is widely exercised, family takes responsibility in providing irreplaceable care for the overwhelming majority of rural older persons. Therefore, strengthening of family care is the priority will have significant advantage to provide older persons the necessary care while they are in their home environment. The second option will be encouraging community care.

Main activities of the policy actions

▪ Build the social and economic capacity of the poor older people family.
▪ Expand community based and community centered care for older persons.

---

[9] Ministry of Health (2011); HIV AIDS report

- Undertake in a coordinated manner economic and cultural development programs and activities that will help to sustain the traditional mutual support among generations.
- Take concrete measures that will reduce poverty at family level and alternative actions to mitigate shortage of residential houses and congestion.
- Provide special support to those households providing care and support for the elderly and support the efforts of self-help initiatives and cooperation among older persons.
- Provide technical and professional supports for the community based age care organizations.

c) *Rights of the elderly*

Basic needs of the elderly are met when their rights to obtain food, shelter, health services, employment income generation, social insurance, credit, education and training on equal basis, live in areas of their choice, participate actively on issues of their concern, legal protection, support from community and institutional services, free to practice their faith and receive special services and lead a dignified life.

Main activities of the policy actions

- Enable the young generation to be familiar about the rights of the elderly and about the positive image of ageing in schools and outside to acquire knowledge and to teach others.
- Lobby policy makers and executive bodies to enable older persons to make their voice heard when laws concerning their issues are enacted.
- Make all stakeholders participate in preparing plans and designing program related to protection of the right of older persons.
- Encourage and support the establishment of cooperatives and self-help groups through which older persons can exercise their rights.

d) *Housing and Living Environment*

The elderly can possibly be lonely, frail and left without support when younger members of the family migrate to urban centers for varied reasons.

Main activities of the policy actions

- Facilitate the construction of homes free of charge for voluntary families assisting lonely older persons within their premise.
- Enable older persons who want to live in their previous area of residence to get houses with priority and at lower price.
- Devise working procedures that facilitate access the elderly to receiving pension allowances, market, medical, recreational etc. services near their area of residence.
- Make the elderly beneficiaries and participants of poverty reduction program.
- Foster ways through which older persons that cannot farm their land or harvest their products can get support from the community.
- Devise strategies to help poor older persons who are without support to get land, oxen, seeds, farming tools/implements etc.
- Integrate older persons who want to return to areas of their residence by extending the necessary support.
- Devise ways to enable older persons possess houses of their own and repair houses of poor older persons and make them suitable for movement.
- Consider the design of social and infrastructural services and facilities appropriate with the needs of older persons.
- Obtain transportation service access free of charge or reduced prices for older persons.
- Ensure the participation of older persons when housing policies or buildings and roads are designed.

e) **Social Security**

Those covered by social security programs in Ethiopia at present are old age, survivors, invalidity, and injury at work, while compensation for illness, medical service and maternity allowance are included in the proclamations of civil service and the labor law. So far uncovered social security benefits are family allowance and unemployment insurance. The pension law covers only government employees and this account only 16 per cent of the total ageing population. The other service that enables older persons earns middle level income is social pension. The purpose is to enable poor older heads of households earn sufficient minimum income by providing them assistance based on work.

Main activities of the policy actions
- Establish social security system based on gender equity and in particular develop social protection system.
- Establish a system based on research that enables to update pension allowance in line with current cost of living.
- Provide the necessary support to those older persons who cannot take their pension allowance in person.
- Collaborate with undertakings aimed at studying investment opportunities that can increase the size of pension fund.
- Create awareness on how to develop the culture of saving money at younger ages to be used in later years.
- Conduct studies to explore possibilities for social security to be covered by the private sector as its expansion greatly contributes to the reduction of poverty.

f) *Education and Training*

It is the responsibility of all concerned bodies to promote the rights of older persons to learn acquire knowledge and get training by creating and raising awareness among educational and training institutions, mass media and the society in general.

Main activities of the policy actions
- Work to make gerontology, geriatrics and similar disciplines be parts the country's educational curriculum.
- Assist older persons to have access to continued education without any discrimination.
- Foster the enhancement of the productivity of older persons through access to appropriate education and training according to their choice and potential.
- Provide access for older persons with disabilities to special education and training opportunities equitably.
- Create intergenerational solidarity aimed at transferring knowledge and experience among generations.

g) *Employment and Income Generation*

It goes without saying that income of older persons decline when they retire or interrupt employment due to old age. Older persons need to get proper employment, credit service or various appropriate supports to be able to generate sufficient minimum income.

Main activities of the policy actions
- Change the attitude of older persons who refrained from being employed as a result of their perception of themselves as unproductive.
- Undertake awareness raising works to change the attitude of the community and employers using different means to get rid of biases against the competence and productivity of older persons.

- � Create awareness and encourage the participation of older persons in job creating projects, issues of employment, credit provisions etc.
- ✿ Encourage older persons to engage in small scale and micro enterprises.
- ✿ Enable older persons to lead independent life; expand their employment opportunities by providing them with land, seeds, and farm implements and by helping them find market for their products/services.
- ✿ Ensure older persons access to credit and saving services to enable them secure reliable income.
- ✿ Support and assist development proposals initiated by older persons themselves.
- ✿ Ensure that older persons are considered in trainings given to farmers and pastoralist alike to help them be engaged in modern agricultural practices by abandoning the outmoded ones.

h) **Poverty Reduction**

Poverty among Ethiopian older persons like other developing countries is prevalent and deep rooted. The causes of the problems are frequent economic crises, general backwardness, civil war and drought. The cumulative effect of these causes has exposed older person to abject poverty

Main activities of the policy actions

- ❖ Undertake awareness raising interventions about the importance of older person's participation in poverty reduction among older persons.
- ❖ Ensue that the needs of older women, the oldest old, displaced and older persons with disabilities are included in poverty reduction strategies and implementation program.
- ❖ Foster the socio – economic participation of older persons and enable them benefit from development.
- ❖ Provide legal support for women's access to resources equitable to men.

i) *HIV/AIDS*

HIV/AIDS affect older persons directly and indirectly. While taking care of the sick and looking after their grand children, their chance of being infected by the virus is very high. Due to lack of awareness and information many older persons are directly infected by the virus during the time when they take care of the sick.

Main activities of the policy actions

- ✿ Give awareness for older persons to protect themselves from HIV/AIDS and take HIV tests.
- ✿ Provide economic, social and psychological assistance to older persons who have members in their family with HIV/AIDS.
- ✿ Encourage the participation of older persons in the prevention and control of HIV/AIDS by making use of their leadership role in various social issues.

j) **Gender and Older Persons**

The number of Ethiopian elderly women over 90 years of age reached 5000 in 2000 while that of men of the same age group was only 2400. Many older women shoulder multiple responsibilities of caring the sick, raising orphan and vulnerable children and children who lost their parents because of HIV/AIDS and provide care for older persons who must stay at home because of old age.

Main activities of the policy actions

- ✚ Ensure full participation of older women at Kebele, Kifle-ketema, Wereda, Zone, Regional levels and in councils of people's representatives and federation, by taking advantage of conducive environment created to ensure the equality of women.
- ✚ Encourage older women to form their own organizations; co-operatives self-support associations etc. in order to enable them protect their basic human rights.

k) *Food and Nutrition*

Majority of older persons in Ethiopia has poor health and are physically weak as a result of low standard of living, lack of balanced diet insufficient and unreliable income.

Main activities of the policy actions
- ❖ Provide education for older persons, care providers and the community at large about the minimum daily requirements and calorie intakes of older persons so that they can use foods which are rich in protein, vitamins and minerals.
- ❖ Enable older persons to have equitable access to food and clean water.

l) *Emergencies*

People are displaced from their comfortable homes as a result of natural and manmade disasters. Displacement and immigration engender complicated social, psychological and economic crises, for all people under the threat. Children, women and older persons who cannot protect themselves are more vulnerable.

Main activities of the policy actions
- ☞ Integrate older person's indigenous knowledge and traditional practices with modern technology, to undertake programs of soil and water conservation.
- ☞ Undertake programs of voluntary resettlement of communities from drought prone area to fertile area with sufficient, extensive and intensive awareness raising activities and enable older persons and representatives of the community visit these resettlement areas in advance.
- ☞ Provide the necessary support to reunify older persons with their spouse and children to regain their family life and recover from their traumatic experiences.
- ☞ Design projects with the participation of older persons and implement them in collaboration with voluntary organizations that enable displaced older persons to regain properties such as land, farming tools, etc they lost and enable them settle in their original places.

m) *Protection of life and property*

Older persons are vulnerable and exposed to fraud, abuse of property, robbery, intimidation, marginalization, and rape, deprivation of the right of inheritance, confiscation, and inhuman acts. Hence, older people need the necessary information and be protected against any type of threat.

Main activities of the policy actions
- ❖ Reduce the fear of older persons by strengthening security activities in and around markets, religious sites, public services and other areas commonly used by older persons.
- ❖ Establish efficient and effective systems that enable and develop the practice of reporting without delay whenever violence against older person is committed.

2.2. Policy Implementation and Monitoring Structure

At Federal level, the Ministry of Labor and Social Affairs (MOLSA) will assume the central responsibility to perform the coordination of activities. Each BOLSA has the responsibility to coordinate activities in its respective region.

The steering committee members will be drawn from house of peoples' representatives BOLSAs, regional national association of the elderly, public figures etc. On the other hand a technical committee consisting of MOLSA, relevant federal ministries and agencies, national association of the elderly, the media, support providers from mass organizations religious and traditional social organizations, professionals in the field of ageing etc. The steering committee will be headed by the state minister of MOLSA. Head of Elderly & Disability Affairs Department will be the secretariat of

the committee. The technical committee will be chaired by head of the Elderly and Disability Affairs department and its secretariat will be the team leader of Elderly Affairs. The technical committee will meet four times a year and the executive committee twice a year. Six regional states will join the meetings of the executive committee in rounds.

MoLSA coordinates the National Plan of Action for Older Persons, which aims to mainstream the cross-cutting issues of older persons in sectoral plans. Based on this, efforts have been made to coordinate the concerned actors to contribute to the wellbeing of older persons in their respective sectors. However, since the action plan was not budgeted, satisfactory services were not delivered to address the cross- cutting issues and needs of older persons[10].

3. OLDER PEOPLE FRIENDLY SOCIAL ACCOUNTABLITY: Concept and Rational

3.1. Older People Friendly Social Accountability (OPFSA): Concept and Process

3.1.1. Social Accountability Concept

Accountability is obligations of public power holders to account for or take responsibilities for their actions/inactions; therefore accountability exists because power holders must respond to citizen demand[11].

Social Accountability: *A process where* Citizen voice their needs, preferences and **demands** for better information, governance, basic services, and resource allocation;
 a) Citizen can hold service providers and power holders to be **accountable** (responsiveness) and **transparent** (openness for information) for their weak performance:
 b) *Accordingly, power-holders*/service providers need to be **responsive** and **open** for service users' appropriate demands and information.

In the case of OPFSA implementation the older people, younger group and other comunity groups are considered as citizen (user), whereas MOSA, BOLSA and all stakeholders related to older people service delivery are considered as service provider and policymakers. Accordingly; the existence of accountability can be measured by the degree of service providers and policy holder's responsiveness for older people citizens.

3.1.2. Service Standards/Entitlements

A Service Standard is the ideal level of service that should be achieved, within the political, social, cultural and economic context (there is no true absolute and universal standard).Within a national Service Standards framework, each Woreda in consultation with the regional administration sets service delivery targets (sector plans) and monitors the attainment of those targets. The Service Standards are also known as the **entitlements** of citizens, or the **norms** of service delivery that have to be met by the different sector offices and service delivery facilities. When government introduces Service Standard and policies for each sector and concerned instructions, it avoids ambitious demands from citizen[12].
 • It raises awareness both for service providers and users on the service standard and user entitlements and rights;

---

[10] *Ministry of labour and Social Affairs; National Social Protection Policy of Ethiopia, 2012 (page 11)*

[11] Ackerman, J.M, 2005, *Social Accountability in the Public Sector: a conceptual discussion*, Paper No. 82, Washington D.C., World Bank,

[12] ESAP II Service Standard Guideline (2017); prepared by YEM Consultant Institute Plc

- The transparency thus created allows citizens and OPMG and regulatory bodies to easily and regularly monitor the performance of service providers and power holders against a certain standard, and to assess the nature and magnitude of a service issue;
- Helps to identify the responsible actors at local government level, improves their commitment to the task and facilitates the resource allocation processes;
- Helps to assign roles and responsibilities for service improvements to responsible actors, and creates better relationship between users, providers and decision makers.

For service providers, the service standards and targets serve as a mechanism to monitor their progress and to focus on delivering quality basic right and socio-economic services to the older people and the community they serve. Therefore, the service standards and policy actions help them to assess thee quality, effectiveness, efficiency, accessibility and responsiveness of public institutions and service providers in their provision of basic rights and social services. Ultimately, the service standards and policy entitlements help the elderly and young people to hold service providers and Woreda officials accountable for their commitments to citizens. Although a convention would only be legally binding on ratifying the state but also the private and voluntary sectors need standards for the provision of services that respect older people's rights (see the following examples).

- ❖ The health Institutions shall have all the facilities and services and lists of all medicines depending on their levels (there is clear service standard for all citizen).
- ❖ Productive Safety Net Program (PSNP) will provide for aged, labour-poor, sick, pregnant, children (<18) people a direct support and they are entitled to 12 months support.
- ❖ Water and sanitation services are also entitled for all citizen (more relevant for older people), it is also important to deliver training for older people on sanitation, health care and utilization of medicine.
- ❖ Information, accessibility and safety measures for older and disabled persons for proper utilization services and facilities.

3.1.3. Tripartite Relationship to Implement OPFSA[13]

In the Ethiopia context, OPFSA must be conceived in relation to the country governance structures to easily institutionalize its approaches and mechanisms within the normal governance structure. At Woreda level there are three main actors in the overall governance structure: Woreda councils (political accountability), Woreda administration (administrative accountability) and citizens (Social Accountability). The elected councilors are accountable to citizens and the Woreda administration is accountable to the council and to citizens for their actions and decisions. The older citizens are not passive recipients of services but have the responsibility to deliver feedback and ensure the services and rights of elderly are delivered and respected in a transparent and accountable manner.

All three stakeholders are accountable towards each other. Woreda Councils elect officials to be responsible for oversight and key decisions, while the Woreda Administration implements those decisions and the citizens are the monitors of the services and provide feedback to the council and officials. In this tripartite relationship, all stakeholders mutually work together towards ensuring accountability and transparency of service delivery and respect of human right. This responsibility does not solely rest with one stakeholder but rather their relationship reinforces and strengthens accountability mechanisms inside and outside government institutions.

Most regional states are responsible for the policy formulation and oversight of government services, while the lower levels of government are responsible for the actual implementation of policy actions

---

[13] Adapted from ESAP2 Capacity Building Guide (2013)

and delivery of basic services. Therefore, it is important to understand government national, regional and Woreda structure, role, responsibility, basic functions and standards in service delivery and policy implmentation. Citizens can use the information to establish a dialogue with service providers and Woreda officials to discuss the various barriers to achieving the designed targets and standards. Ultimately, understanding the role, function and service standards will enable communities to hold service providers/officials accountable for their commitments to citizens at all level.

3.2. The Need for Older People Friendly Social Accountability

Why Older People Friendly Social Accountability?
- � OPFSA empowers older people to claim their rights; and voice as recipients and bonafide citizens and citizen groups;
- ✎ OPFSA enhances the development and builds the responsiveness of the government, which ultimately improves citizen and government relationship;
- ✎ OPFSA enables older persons to access existing services and schemes; and share their experiences and challenges for the young generation;
- ✎ OPFSA tools serves as evidence based monitoring instrument to influence policy, legislation and the service delivery provision.

Older People Friendly Social Accountability (OPFSA) is participatory approach which is focused mainly on the need and demand of older people (men and women) together with the young generation and older community group to transfer skill and practice, to narrow the inter generation gap. Older people needs, preferences and demands are analyzed based on the entitlements mentioned within the older people programs, policies and sectoral standards; to hold policy-makers and service providers accountable for their performance and commitments for older people. This means that older people friendly social accountability should be able to:
- ❖ Participate effectively in government planning budgetary processes, service provisions monitoring and implementation program/projects related to older people;
- ❖ Take the initiative to hold service providers and government officials accountable, and share their views, needs and priorities regarding public service planning, budgeting and implementation.

The main purpose is twofold; on the service sides the members are required to learn existing policies, basic rights and service standards that are being provided, then gather information through a set of tools and interpret data and analyze if the services being provided are in line with the policy actions and standards. On the other hand, it analyzes if older people's needs are addressed through budgetary measures and if the allocated budgets are considering older people men and women interest and being executed for the targeted needs of older persons.

Thus, social accountability provides platform for both older persons and policy makers or service providers to work collaboratively in closing the gap both on the demand and supply side of the equation that would make constructive engagement, and thus improved, efficient, and equitable service delivery reality. To effectively support the implementation of various international and local commitments to older people, we must develop innovative solutions and creative ideas that help to equip elderly, their communities and civil society to mobilize demand for accountability for the realization of older person's rights. In this respect, OPFSA that engage older people and the young generation, civil society organizations, those are demand-driven and operate from the bottom-up,

are of particular relevance[14]. It has the potential to remove barriers to improve policy gaps, efficiency and effectiveness of services for older person's inclusion[15].

More specifically, OPFSA helps to improve the quality of governance (especially by improving the responsiveness of government officials and accountability mechanisms and systems), to increase the effectiveness of development (particularly by enhancing transparency and accountability in the implementation of policy actions for older persons), and to empower older people and the young generation and other citizen with existing policies and programs on older persons rights and enhance their advocacy in the management of older people affairs.

3.3. Social Accountability Implementation Framework for Older People

Phases of SA Process: A project passes through five phases in its life cycle. These include Programming, Identification, Formulation, Implementation, and Evaluation and Audit. Similarly OPFSA process will also follows similar direction i.e. Identification/Collecting Information, Implementing the SA Tools, Interface Meeting, Joint Action Plan and Monitoring/Evaluation, Institutionalization & Sustainability. During the whole phases of SA process there is sensitization on human right, social accountability process and tools to build the capacity of older people; other citizens, government and concerned stakeholders.
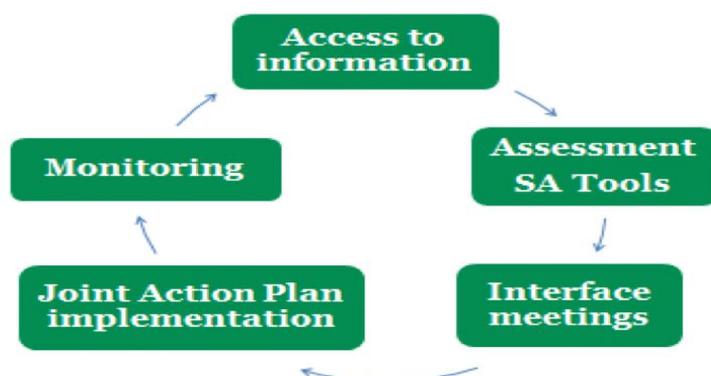
The first stage is to enable older citizens to access information about policies and programs and service standards, budgets and planned targets. This is followed by a period in which service providers and users employ a variety of different 'tools' to assess the current level of service. The implementing NGOs then can organise Interface Meetings between the service users and providers/ policy makers to agree on reforms which are set out in a Joint Action Plan (JAP). Older People Monitoring Groups (OPMG) are formed to lead the assessment process and to steer the implementation and monitoring of these plans which is the final stage, although the whole process can be repeated or replicated with a different service.

---

[14] *Malena, C. with Forster, R. and Singh, J. (2004) Social Accountability: An Introduction to the Concept and Emerging Practice, Social Development Paper 76, World Bank: Washington DC, p. 3.*

[15] *Adapted from Save the Children (2016); Child Focused Social Accountability Guideline.*

4. OLDER PEOPLE FRIENDLY SOCIAL ACCOUNTABLITY BASIC TOOLS

4.1. Community Score Cards (CSC)[16]

The CSC can also serve for ODFSA implementation to monitor policy and service provision; through which older persons and the successive generation can monitor policy actions and service delivery quality, access, efficiency and effectiveness for older people. It helps for elderly and their families to give information on issues that are practical and vital and give constructive feedback to service providers and policy makers, government officials and elected councils about their performance, and enables service providers, government officials and council to learn directly from older people about their services, which are working well & which are not.

Concept of Community Score Card: Community Score Card (CSC) is a mechanism through which older people and other stakeholders monitor the quality, access, efficiency and effectiveness of community based public services. It provides the opportunity for citizens to analyse any particular service they receive based on policy actions, service standards and approved local plans, to express their dissatisfaction, to provide encouragement if good work is done - and further suggest measures to be taken if flaws still remain behind.

Basic Characteristics of Community Score Card
- Conducted at micro, local, and/or facility levels;
- Uses the community as the unit of analysis: in the case OPFSA; older people are the primary target groups and the younger citizen are involved to support and sustain the process);
- Generates information/issues through FGD (older men and women, younger men and women, and service providers);
- Enables maximum participation and ownership by older people and the larger local communities;
- Emphasize joint immediate response and joint decision making;
- Identifies potential reforms through mutual dialogue and collaboration.
- As opposed to being a one-time event, Community Score Card initiatives are typically conducted at regular intervals to track performance and identify additional ways to improve service-delivery performance.

Community Score Card implementation phases and steps

Phase 1: The planning and preparatory phase
A thorough and well planned preparation is one of the determinants for successful implementation of the Community Score Card. In most cases, it is recommended that preparatory groundwork should begin earlier to mobilizing the community (older men and women, youth groups). The most crucial steps of the planning and preparatory phase are:
- Identification of scope; this includes the identification of relevant the service sector (e.g. water & sanitation, education, health, agriculture, rural road) and identification of geographic coverage (Region, Zone, Woreda, Kebele).
- Examine all policy and service aspect (criteria) to be monitored (quality, access, efficiency, effectiveness, participation, satisfaction etc.).
- Preliminary stratification of communities; sensitization with a view to ensure maximum participation of service users, service providers and other stakeholders through field visits, awareness campaign and advocacy work on social accountability for basic services.

---

[16] Adapted from YEM Consultant Institute Plc CSC Manual (2013)

- Determining the sample size of the older people and other citizen group to be involved during the FGD; identify the type and number of FGD and avoid social exclusion.
- Developing a work plan; arranging the required materials/logistics and manpower (train lead facilitators etc.).
- Identify inputs: Conducting rapid assessment which involves identification of the facilities, physical assets, service inputs and entitlements for the chosen sector. It is used to gather the supply side information and publicize the information on the availability and/or uses of key inputs for the service.

Phase 2: Developing Community Score Card

This is the most critical phase in the implementation of the community score card process. Since it involves older persons and concerned stakeholders to create better understanding about the older people right and responsibility, to realize different perceptions and attitudes about the service provision, and also to handled with due care, diligence, and wealth of information about the service delivered for elderly. Accordingly; developing a CSC comprises the following steps:

Step 1: Organize the Community Gathering
1) Organize sessions and brief the citizen groups about the purpose and the methodology of CSC application to generate solution for the demand of older people;
2) Divide participants into focus group discussion on the basis of gender, age group social mapping (considering the representatives of villages, Kebeles and Woredas);
3) Assign facilitators per each FGD (each group consist 20-25 partcipants): two persons per group, a leader and a note taker.

Step 2: Develop the Input Tracking Matrix
Service users often do not know the entitlements available to them. The input-tracking matrix records the differences between what users are entitled to receive and what a service provider is actually providing. The purpose of the activity is not only to increase transparency in relation to the availability of resources (thereby empowering older people) but also to identify areas in which there are discrepancies between entitled and actual resources (see filled Input Tracking Matrix as follows).

Table CSC 1: Example Input Tracking Matrix for Older People

Input	Entitlement (policy actions, standards, local plans designed for OP)	Actual (older people and stakeholders perception, what is really happened)	Remark/Evidence
Include issues of older persons in all the process of poverty reduction programs.	Mandated in the policy action	The actual participation of elderly in all the process of planning is invisible.	From actual observation
Facilitate access for elderly to receiving pension allowances, market, medical, recreational etc. services near their area.	Mandated in the policy action	Better implemented in towns than rural areas	Research results
Help poor older persons who are without support to get land, oxen, seeds, farming tools etc.	Mandated in the policy action and local strategic plans.	It is delivered by NGOs and local government in most areas	From actual observation and Woreda plans
Deliver successive trainings on: hygiene, sanitation diseases, first aid, long term care & the use of medicines.	Mandated in the policy action	Delivered for the citizen in general, no special training for older persons.	Feedback from the community
Support poor older person to receive free medical services.	Mandated on policy action & sectoral standards	The policy is not much known and practiced.	Feedback from the community

Step 3: Generating and Prioritizing Issues.
In this step first as many as possible issues need to be generated by asking like:
- How are things going on with services in your locality?
- What services & programs are going well? What don't work well?

Subsequently, the group needs to agree on the most relevant issues that are most important and urgent to deal with first. The group is expected to give reasons for their choice. This can be made graphically explicit by ordering the issues in a table.

Table CSC 2: Tabularized Issues and Priorities

Issue	Priority issues	Reason
Behaviour of health personnel to older people	Behaviour of health personnel	They are not at work on time and they behave badly for the patients
Existence of protracted process to get free medical care	Good governance challenges to get free medical care	Time taking to get the paper for free medical care.
Lack of medicine	Shortage of medicine	Usually the medicine not available at the drug store.
Less support mechanism for poor older people in the local area (economic and labor, care and training support)	Weak health, training and economic support for older people.	Older people and others complain on the available poor support for vulnerable groups at local level.

Step 4: Developing Indicators & Matrix for Scoring
The facilitation teams (community note taker and facilitator from each group) will meet and share the various issues generated. From the mix of issues from different groups a list of common major issues is identified. For each issue an indicator is developed and listed in a Scoring Matrix as exemplified below.

Table CSC 3: Example for Scoring Matrix

Group Name:	Date:	Service Monitored:	Woreda/Kebele:
Indicators		**Score**	**Reason or suggestion**
Indicator 1. Support mechanism for poor older people (economic and labor, care and training support) for older people		2	Scanty support (no permanent support system)
Indicator 2. Availability of medicine for older people		1	This There is some medicine for infection only
Indicator 3. Quality of health service - Behaviour of health personnel - Lack of laboratory test		2	Some health personnel insult and undermine the patients

After the completion of preparing the indicators and matrices, the facilitation teams go back to their respective community.

Step 5: Continue the CSC process with older people and the young groups
The following activities are to be undertaken under this step.
- Present the indicators for the whole group and build consensus.
- Then disperse to their previous groups, so that each group will give their own score.
- Performance scoring: Use scales for performance scoring (it can be 1-5, or any traditional counting method). The group needs to agree on the scores either by vote, preferably by consensus. The scoring card could be expressed in a qualitative term i.e. very bad, bad, just ok, good, very good.
- Explanation for each score and suggestions for reform and improvement are required.

Step 6: Consolidating the CSC
- Develop the matrix that will record scores from all the focus groups so that the score can be consolidated (combined for each indicator).
- Facilitators will convene a meeting with the representatives from the focus groups. The representatives share scores from each of their groups and the scores are inserted in the matrix and facilitators guide the discussion by asking questions such as, looking the different scores, which show the real picture/situation? The purpose is to come-up with representative scores either by taking the average, or preferably by consensus.

Table CSC 4: tabularized Consolidated Scoring Matrix

Indicators	Focus group scores			Consolidated Scores
	"A" Older Men (OM) group scores	"B" Older Women (OW) groups scores	"C" Youth Men & Women group scores	
Indicator 1...	OM1	OW1	Y1	Average of OM1 OW1 Y1
Indicator 2..	OM2	OW2	Y2	Average of OM2 OW2 Y2
Indicator 3..	OM3	OW3	Y3	Average of OM3 OW3 Y3

Phase 3: Conducting Service Providers Self-evaluation Scorecard
This phase of the process involves service providers to evaluate the performance of their services. The process is more or less the same with the user community score card described in Phase 2 but not exactly identical. Under this process, there may not be need for group formation since the size is very small and they are represented from related government sectors and administrative officials. When the participants are many, there may be a need to form groups, and thus to consolidate the group scores.

Phase 4: Interface/Reform Meeting
The CSC helps both sides to come together, identify the reasons for feeble services and find out solutions for the problems identified. To bring this all together, in this phase an interface meeting is conducted to develop a joint Action Plan and arrange for follow-up and institutionalization mechanism.

4.2. Budget Process and Budget Transparency in Ethiopia

Ethiopian Government Budget: A budget is a plan that tells us the amount and source of funds to be allocated for the provision of certain services among the priority lists. A government budget is prepared by the Federal, regional, Woreda and City Administrations. A budget essential details the priorities of government in financial terms.

Recurrent budget: is spending on items that are consumed and are repeated every budget year such as salaries for teachers, health workers, offices' operational costs, medicines, books and electricity. The largest share of the budget is dedicated to employees' salaries.

Capital budget: is spending on items that will last for several years, like buildings, roads and water points. Once constructions under the capital budget are completed, the maintenance and service provision in most cases is assigned to the recurrent budget.

Source of Government Revenue: sources of the Federal and regional budgets are:
- Domestic revenues which includes tax on income and business profits, value added taxes, export duties and different service fees and charges;
- External donor support from UN agencies and bilateral aid from foreign governments;
- Loans from World Bank and/or African Development Bank and other countries.

The federal and regional governments have responsibilities for raising revenue; however most regions do not have sufficient revenue to fulfill their planning and budgetary requirements. All the regions receive a federal block grant which makes up the bulk of the share of the region's budgets. More than 70% of the budget sources in most regions and about 90% for the emerging regions come from federal government subsidies. The remaining 5-30% of the budget comes from the regions' own revenue sources. Regions' revenue sources are mainly from income taxes, agricultural and urban land taxes, urban land lease fees, service fees and charges.

<u>**Regional planning and budgeting process**</u>: The annual budget process at regional level has to go through the following six basic stages for the cycle to be complete:
- **Budget Preparation**: BOFED estimates physical resources available: federal subsidy, own revenue, foreign loans and aid. Regional Bureaus, Zonal Offices, Woredas and urban administrations submit draft budget plans to BOFED, with careful distinctions made between recurrent and capital budgets.
- **Review**: BOFED reviews the draft budget and then passes to the Regional Cabinet for endorsement.
- **Approval**: The Regional Cabinet discusses and endorses the budget and transfer formula. The endorsed budget is then presented to the Regional Council (elected representatives of citizens from Woredas and urban administrations) for appropriation and allocations to sector bureaus, Zonal offices, Woredas and Urban Administrations.
- **Appropriation**: After approved budgets have been determined and adjusted, allocations are made. BOFED notifies each sector office of its respective budget.
- **Expenditure**: Budget implementation by different bureaus, offices, Woredas and urban administrations takes place and detailed records are kept.
- **Auditing**: Regional BOFED auditors reconcile expenditures with approved budgets and make sure that there have been no financial irregularities.

Woreda planning and budgeting process
- Preparation of work plans by sector offices and cost centers during February-May;
- Revenue estimates are compiled by the Woreda Finance and Economic Development Department during February-March;
- Budget call (and sometimes notification of estimated block grant) issued by Regional Bureaus of Finance and Economic Development or the Zonal offices during February-May. Budget ceilings are included in these budget calls;
- Preparation of draft budgets are done by sector offices based on the budget calls during March-May;
- Consolidation and submission of budget request based on the sector offices' budgets is compiled by Woreda Finance and Economic Development Departments during May-June;
- The Regional cabinet discusses, agree and endorse the budget. The Regional Council approves appropriation and notification of block grant is sent out by July;
- Adjustments to block grant and finalization of capital budget are compiled jointly by sector bureaus and Woreda Finance and Economic Development Department during July-August;
- The recommended budget is then presented to the Woreda council by the Woreda Finance and Economic Development Department during August-September;

The Woreda Council then approves the budget by September and the sector offices are responsible for developing action plans based on the approved budgets and plans also during September;

The budget is then implemented by sector offices accordingly.

The Ethiopian Budget Calendar: The budget process involves many stakeholders at various levels of government and those outside of government. Each country's budget process is different for a varieties of reasons, but what is most crucial is to create awareness on the various stages of the budget, learn who are the stakeholders involved in these stages, and when do these stages happen and what are the possibilities of citizen participation during these stages.

Phases	Indicative Time-Frame	Activities and Responsible Bodies
Planning	Tikmt15 (Oct 25)	MoFED[17] prepares macroeconomic and fiscal plans for the next three years.
	Hidar 20 (Nov 29/30)	The House of Federation sends to MoFED either new or the existing formula for the disbursement of support budget for the regional states.
	Tir 15 (Jan 24/25)	MoFED finalizes the budget plan.
Preparation of support budget	Hidar 30 (Dec 09/10)	MoFED notifies the indicative amount of budget support to the federal states as per the decision of the House of Federations.
Budget Call	Tir 30 (Feb 09/10)	MoFED sends out budget call letters to the concerned public bodies.
	Megabit 30 (April 09/10)	MoFED presents the Consolidated budget to the Council of Ministers.
Budget Approval and Notification	Sene 30 (July 7)	Parliament approves the budget which has already been screened by the Council of Ministers and the Budget Committee HoPR
	Hamle 7 (July15)	MoFED.
Submission of Fiscal & Fiscal Plans & Reports	Nehase 09 (Aug 17/18)	Budget recipient public bodies shall submit fiscal & financial plans according to the budget approved for them.
	Within 15 days of the first quarter of the budget year	Budget recipient public bodies shall submit performance reports for the first quarter of the year; annual reports shall be submitted by 09 Nehase (Aug 17/18).

Source: Based on the 2003 E.C MoFED Budget Administration Guideline.

Tips as to what can be done during each budget phase
❖ During the budget formulation phase citizens can:
• Give input to the annual proposed physical plan and budgeting at kebele level;
• Identify the community contribution for the year.
❖ During the budget legislative phase citizens can:
• Attend the Council Budget Approval Meeting;
• Get information from office of finance and economic cooperation;
• Get information from the local radio, the notice board or gazette.
❖ During the budget execution phase citizens can:
• Participate in the evaluation;
• Question sector offices on budget implementation performances (public hearing);
• Check accounts and disbursement reports;
• Look into project implementation reports.
❖ During the budget audit phase citizens can:
• Participate in public meetings on the audit report by the committee of accounts.

---

[17] This Ministry is now changed into MOFEC- Ministry of Finance and Economic Cooperation

Reporting on Expenditure and Auditing: Monthly reports on expenditure and activities are prepared by WoFED and sector offices. Woredas consolidate the expenditure reports and submit to Zones or BoFEDs on a monthly basis. Internal auditors check the accounts regularly. In some Woredas this is done weekly, in others monthly or quarterly. Quarterly reports on expenditure are also submitted to the Woreda Council.

When the budget year ends the accounts are closed. The accounts are regularly audited and evaluated by sector offices internal auditors to determine if funds are fully accounted for and have been used to acquire value for money. Auditors from the regional audit bureau sometimes audit the Woreda accounts. In some regions, Woredas that are to be audited are randomly selected; in others the regional auditors are only sent to Woredas where the internal audit indicates some kind of problem.

4.3. Participatory Planning and Budgeting (PPB)

Participatory planning and budgeting is a process through which the citizens decides on and contributes to decisions made on the available public resources. Citizens can participate directly or through organized groups in the different stages of the budget cycle. PPB bridges the gap between the government's budget allocations and the citizens' demand for voice and participation, reduce poverty, and improve transparency and social accountability. Although Participatory Planning and Budgeting (PPB) significantly vary from one context to another, it can be broadly defined as: *"a mechanism (or process) through which the population decides on, or contributes to decisions made on, the destination of all or part of available public resources".*

Citizens participate directly or through organized groups in the different stages of the budget cycle, namely budget formulation, decision making, and monitoring of budget execution.

There is no single model of PPB, nor would it be desirable to have one, because the experiences are the products of the reality of each region, of its local history, civic culture, and the organization of its civil society, the available resources and also the administrative culture of the governments which administer them.

The potential of Participatory Planning and Budgeting
a) *Increasing the efficiency of budget allocation:* The government budget often does not reflect the citizen's priorities. PPB has the potential to create an intra-governmental system within the local government that brings the demand side closer to community budget planning. It offers a set of well codified mechanisms for citizens to define and incorporate their own priorities into the public budget. Hereby, PPB helps to allocate scarce resources to those citizens who need them most, and to push forward the decentralization agenda.

b) *Improving accountability and management:* Citizens very often complain that the government is not solving their problems and they often lack access to fiscal and budgetary information. Uninformed perceptions about government capacity and how public resources are managed lead to public discontent. PPB creates mechanisms for citizens and the civil society and government to discuss budget constraints together make trade-offs and optimize the use of scarce public resources. This can also lead to improved accountability mechanisms i.e. budget decisions become more acceptable, and easier to be approved by decision-makers due to an open dialogue between citizens and government.

c) *Increasing trust between citizens and government:* Government budgets are often perceived as too complex and technical for citizens to understand. By involving citizens in the

budgeting process, PPB potentially helps to increase people's understanding of and control over how taxes are collected and how public budgets are formulated and executed. This in turn helps to increase the legitimacy of the government and the trust citizens have in their authorities, and increase tax revenues.

d) ***Reducing social exclusion and poverty:*** The traditional budgeting process can sometimes contribute to social exclusion (older people, disability and marginalized social groups) and poverty due to elite capture by limiting resources available for services to the poor. The social learning process embedded in PPB can be an effective instrument to increase the understanding of citizens' rights and duties as well as government functions and responsibilities, potentially breaking traditional systems of patronage.

e) ***Strengthening democratic practices:*** The PPB process educates citizens about their right on information, to voice their opinion, to vote for public policy priorities, and to hold decision makers accountable for allocation and utilization of government budget.

Basic Steps for Implementing a PPB Process for OPFSA:

Step 1: Sharing information (older people and relevant citizen groups): At this stage CSOs/NGOs can organize groups of community (including older people monitoring group) to conduct an independent meeting about the need and demand of older People. NGO/CSOs can also host a Woreda wide meeting with the public to share with them the rules of the PPB process, provide update on the Woreda development plan and priorities, update on the past and current budget execution and the past revenue trend and the future forecast (with the collaboration of WoFED). Information should also include: budget transparency and the previous year Woreda sectoral and social affaire budget allocation and expenditure as learning practice.

Step 2: Community Participation Forums: the aim of these meetings is to enable older people to identify their needs and priorities and elect representatives for their Kebele and Woreda level. In this case Older People Monitoring Group members can be part of a multi-stakeholder Kebele forum from the various Kebeles of the Woreda that will present each Kebles views to the Council and the budget council. In these forums the Kebele communities are also orientated on the PPB process and the follow-up activities to be undertaken, ranking of their priorities and the preparation of the budget for these priorities.

Step 3: Multi-kebele PPB Forum: the elected delegates from the Kebeles (which includes OPMG) and the government representatives will be part of this Woreda level forum. This forum will discuss the priorities and budgets of the various Kebele level meetings and create a final participatory budget proposal and submit shadow report for the Woreda Coucil. This is not an easy process as the elected delegates might not have the same skills as the government officials, thus empowering the elected delegates is crucial.

Step 4: Woreda council: the final participatory budget proposal is then presented to the council for debate, amendments and final approval. In this process the OPMG and other citizens can only observe and not participate in the Woreda council budget approval meeting.

Step 5: community monitoring of budget execution: when the participatory budget proposal is approved by the Woreda council and resources are made available by the Regional administration, the OPMG and citizens should have access to the final approved budget of their Woreda and can start planning how they will monitor the execution of the budget in various Kebeles and at Woreda level.

4.4. Social Audit (SAu)

Social audit is an independent evaluation of the performance of an organization and its attainment of social goals. It enables an organization to assess and demonstrate its social, economic and environmental benefits. A social audit will not only examine the financial status and performance of an organization but also the contribution it has made to the lives to the people it is supposed to serve.

How different is social audit compared to other audits?
Financial audits are focused on the verification, reliability and integrity of financial information. An operational audit focuses on establishing standards of operation, measuring performance against standards, examining and analysing deviations, taking corrective actions and reappraising standards based on experience are the main focus. A Social Audit provides an assessment of the impact of older people budget or support, through systematic and regular monitoring on the basis of the views of its stakeholders.

What are the benefits of social auditing for local government officials?
- The information from a social audit can provide crucial information about the local government ethical performance and how stakeholders perceive the services offered by the government;
- Social auditing helps managers to understand and anticipate stakeholder concerns as it provides information about the interests, perspectives and expectations of different services users (such as older people need and demand);
- Social auditing identifies specific organizational improvement goals and highlights progress on their implementation and completeness;
- The social auditing requires openness and this can further enhance accountability through the sharing of public information with the general public;
- Social auditing is also useful in helping local government or institutions to re-align their priorities with the expectations of citizens.

What are the benefits of social auditing for Older Group and other citizens?
- ❖ Enhances the capacity of OPMG about budget process and social auditing skill and practice;
- ❖ The process can increase public awareness of service delivery and policy gaps and concerns on budget allocation and expenditure;
- ❖ It can assist in building trust between older people and service providers;
- ❖ It can contribute to improved accountability of public officials towards Older People and others socially excluded groups.

Steps of conducting a Social Auditing Tool

Step 1: Defining objectives: In this step, the actors (older people and other stakeholders) are involved in identifying the objectives, the service/project to be audited, the time frame of the audit and the factors or indicators for the audited.

Step 2: Identifying stakeholders: It is important to identify a wide variety of stakeholders that should include the government from different sectors or levels, services providers or private contractors, representatives of civil society organizations, beneficiaries and service provider staff members. It is important to include older people and other socially excluded groups as part of the stakeholders as well.

Step 3: Collecting and analysing data: Social audits generally collect information through *interviews, focus groups, surveys, quality tests, compilation of statistics, case*

studies, and participant observation and evaluation panels. Any of these methods can be used in a blended approach. The choice of methods is dependent on the context, sector and objectives. Official government records are often used to track service delivery performance, but the challenge in this is that too often officials do not want to share such records or the records are kept in a way that is not user friendly. It is important to have government support (like FTA) early to ensure access to essential information. Government officials should be convinced of the potential benefits of the process.

Step 4: Dissemination of Information: After the data is collected, the findings are shared with the various stakeholders for feedback. It is important to involve the citizens who were involved in the collection of information. The citizens can verify the information by indicating whether services were delivered as it was stated in government official records. Where a social audit has been implemented stakeholders have used various methods from songs, street plays and banners to explain the process and publicize the Social Audit.

Step 5: Holding of public meeting: The findings of a social audit are shared at a public meeting organised and facilitated by a neutral party, often a local CSO. If the Social Audit was conducted at Kebele, Woreda, Regional or at a National level, it is important to host several hearings to ensure that every citizen is able to participate in this forum. The rules of conduct during the meeting should be explained up front and everyone should adhere to it. The citizens should share their findings of the social audit first, and then the public officials or service providers should respond to the findings and commentary of the citizens. The **Interface Meeting** should be concluded with public officials or service providers indicating their commitments to take up the issues raised by the citizens.

Step 6: Follow-up and reporting: After the public hearing, the final Social Audit will be compiled. The report should be disseminated as widely as possible to government, media and other stakeholders. The report should include recommendations for government officials to address the issues identified in the report that can be used for advocacy with government to address issues of corruption and mismanagement. Then the OPMG can follow-up for its improvement with the collaboration of concerned institutions.

The role of the Office of the Auditor-General
- Develop and strengthen the overall audit system of Ethiopia to ensure the access to necessary information for the proper management and administration of the plans and budget of the Government;
- Determine if all public funds of the Government have been collected and used appropriately according to the law, regulations and budget;
- Undertake financial and performance audits of government offices and institutions;
- Submit reports to the Finance & Budgetary Affairs Standing Committee of Parliament. Audited entities are required to report back to the Committee on what they have done in response to the recommendations of the Auditor-General & this Committee.

4.5. Citizen Report Cards (CRC)[18]

In the context of OPFSA, Citizen Report Card (CRC) is participatory survey that solicits systematic feedbacks on the access, quality, efficiency and effectiveness of Older People services. CRC provides an empirical bottom-up assessment of the reach and benefit of Older People services. It serves to identify the key constraints that older people face in accessing services and benefiting from older people policy actions and programs (like PSNP).

---

[18] Adopted from PANE (2011) and Save the Children Guide (2016).

The overall objective of utilizing Citizens' Report Cards is to get feedback from Older People and their family about the older people support based on the existing policies and standards. Thus, CRC generate older people and families' feedback on policy actions, plans and service delivery provision for older people and their family. Moreover, the CRC investigates about service delivery institutions for older people and the satisfaction older people and their family about the service provisions.

Benefits of Employing Citizens Report Cards

As a diagnostic tool: The CRC can provide citizens including older people and governments with qualitative and quantitative information about prevailing standards and gaps in service delivery. It also measures the level of older people awareness about their right and entitlements. Thus, the CRC:

- Is a powerful tool for monitoring service delivery and their right;
- Provides a comparative picture about the access and adequacy of services;
- Compares feedback from different locations to identify segments where service provision is significantly weak and in need of improvement.

As an accountability tool: The CRC reveals areas where the institutions responsible for service provision have not achieved the expected and agreed service delivery standards for older people. The results can be used to identify and demand specific improvements in services and policy action implementation and duty bearers can be held accountable for working towards addressing the specific issues on the basis of the feedback provided.

As a benchmarking tool: The CRC can, if conducted periodically, track changes in service quality over time. A comparison of findings across CRC will reveal fluctuations in the degree of service delivery. It can therefore be useful to conduct CRC before and after introducing a new Older People related development programmes to measure its impacts.

As transparency tool: Communities and citizens feedback can expose extra cost beyond mandated fees while using public services. The CRC also conveys information regarding the proportion of the population who pay extra fees.

Steps to Follow for the Implementation of CRC

Specific CRC methodologies may vary depending on the context. A clear pre-requisite to apply CRC is the availability of local technical capacity who understands the issues that are the objectives of the CRC survey and develop the questionnaires, conduct the surveys and analyze results. The followings are key steps for the actual utilization of CRC:

a) **Identifying focal institution**: The role of the focal institution will be to take an active lead and the overall management of the CRC processes. This institution need to have expertise on how to implement the CRC and Older People friendly system based on program intervention within the particular sector where older people critically use it and have more demand need from the service. However, it is advisable to conduct the CRC survey internally to institutionalize the processes in the organization if the implementing partner has technical capacity on research and survey.

b) **Identifying Issues through FGDs** (Service Providers, Older People and their Families)**:** Defining the research objectives is a critical step. Secondly, it is important to differentiate the

scope and criteria such as access, quality, costs, and responsiveness need to be discussed and agreed upon.

c) **Designing the Survey Instrument:** After the issues have been identified, these are incorporated into the design of the survey instrument. Questions are developed for service users (Older People and their Families) and providers to evaluate the services according to the issues identified. The questions have to be drafted in a way to avoid bias (leading) and in a language that is appropriate and easily understood and can be responded to in a straight forward manner by the respondents of the survey.

Sample questions of CRC in the health sector:
  ✧ **Awareness:** Do you know that you can get free medicine? (Yes/No)
  ✧ **Availability:** Does your village have the health facility? (Yes/No)
  ✧ **Access:** How far away is the facility from your home?
  ✧ **Usage:** Which facility do you normally use for major illness? (woreda hospital/private center/village health post)
  ✧ **Reliability:** Was the doctor present when you went for treatment most recently? – (Yes/No)
  ✧ **Quality:** How long did you have to wait to meet the doctor?
  ✧ **Behavior**: What do you feel about the behavior of the doctor treating you? (Fully satisfied/Somewhat satisfied/Not satisfied)
  ✧ **Satisfaction**: How do you feel about the quality of treatment? (Fully satisfied/ Somewhat satisfied/Not satisfied)
  ✧ **Reasons**: Why are you dissatisfied?
  ✧ **Costs:** How much did you pay for treatment?
  ✧ **Hidden costs:** Did you pay any extra money for getting medicine from the health facility? (Yes/No)

---

d) **Framing a Scientific Sample:** In this stage the population sampling is done. The reason for sampling is to ensure that the survey results are scientifically representative of the older people. Not all older people and their family in the district or sub-district will be surveyed so it is important to ensure that the survey is representative. The sampling method can be for instance stratified or a random sampling method.

e) **Training for Enumerators:** Filed worker/enumerators should be the ones administering the survey. They should need to be trained on the content of the survey and how they will administer it.

f) **Conduct the Survey:** In this stage the enumerators are administering the questionnaire with the sampled participants. The focal institution managing the survey should ensure that there is a lead supervisor appointed to verify and check the process for any challenges that come up in conducting the survey.

g) **Coding, Analysis and Interpretation:** During this process the survey results are captured in a computerized system and can be used for analysis and interpretation. The data collected might be so extensive that it is not possible to manually analyze the information and therefore the data needs to be captured in a computer system like SPSS.

h) **Presentation of Findings:** The information needs to be compiled in an accessible manner. The results need to show the background of the process, the rationale for the CRC, the questionnaire design, and the key results. The findings should also indicate recommendations. The findings should be shared to the decision makers, service providers, children and their representatives.

i) **Interface Meeting:** The interface meeting is a multi-stakeholder forum where citizens including older peple and their families, communities' representatives, Woreda officials, service providers and regional administration stakeholders can discuss the results of the CRC and the next steps they will jointly undertake to resolve the challenges.

j) **Follow-up and institutionalization:**

- Follow-up as necessary to encourage action and change on the part of the concerned issues.
- Take steps to institutionalize periodic surveys as a source of feedback on the performance of service providers.

Strengths and Challenges of Employing Citizens Report Card

Strengths:
- ❖ SA CRC questionnaire have to be precise to the point and smart (3-4 pages for one sector and for all five sectors not more than 10);
- ❖ CRCs can be used to assess either one public service or several services simultaneously;
- ❖ The feedback can be collected from large segments of the population through careful sampling;
- ❖ CRCs are quite technical and thus there may not be a need for a major citizen mobilization effort to get the process started;
- ❖ Perceived improvements in service quality can be compared over time or across various public agencies involved in service provision.

Challenges:
- ⬥ CRCs require a well thought out dissemination and interface meeting strategy so that getting public agencies take note of citizen feedback and take the required action to correct weaknesses.
- ⬥ In locations where there is not much technical capacity, CRCs may be difficult to design and implement.
- ⬥ If there is an error in sampling, the quality of service may not be reflected in the survey results.

---

5. MONITORING STRATEGIES FOR OLDER PEOPLE DEMAND RESPOSIVNESS

HelpAge International has been implementing the Older Citizens Monitoring (OCM) approach in several countries around the world since 2002. This manual, based on experience in Ethiopia, is the first systematic guidance for those wishing to replicate the approach in their own locations[19].The success of the initiative is based on the joint capacity building of Woreda and citizens, focused on development plans and policies, budget literacy, budget monitoring, beneficiary led-service monitoring, and on a community fund that provides leverage for dialogue and money for action.

Older citizens monitoring is a process which promotes dialogue and interaction between older people, civil society organisations and governments. In this approach, groups of older citizens are formed in order to develop and monitor policies and practices that affect them. Older people are becoming empowered to influence resource allocation decisions and make local governments accountable to their communities. Similar to the ESAP; the approach enhances joint responsibility and accountability of service providers to citizens. Older people and their communities are enabled to define and analyse their own problems, make their own recommendations about strategies for action, and take the shared role in implementing those actions.

Older people are elected by their communities to form monitoring groups. Following training, these monitoring groups consult their communities to identify their priorities for inclusion in woreda government development plans. Each monitoring group selects representatives for an "apex"

---

[19] *HelpAge International (2009); Older Citizens Monitoring in Ethiopia: a handbook.*

monitoring group, which meets with Woreda officials every three months at a steering committee. The OCM approach fosters gender balance, giving women an opportunity to be in decision making forums

At these meetings, the priorities of the communities are discussed; plans made and progress towards agreed targets monitored. The Apex Monitoring Group representatives take information back to their communities, and hold further discussions to feed into the next quarterly meeting. In this way systematic monitoring is established.

The main steps of OCM approach are:
a) Establishing structures;
b) Develop skills and capacity;
c) Implement monitoring activities through SA tools and other methods (like community conversation).

The establishment of Older People Monitoring Groups (OPMG) and selection of Apex Monitoring Group (AMG) representatives are essential parts of the community meeting. The apex monitoring group representatives have an essential role in taking community discussions to Woreda level, and in bringing back information from Woreda meetings to the community. The main functions are to represent and discuss the ideas and opinions of OPMGs and to monitor how Woreda government development plans are implemented and key services are delivered. They have a responsibility to meet with the OPMGs in their Kebeles to explain the results of meetings and discuss the plans which have been made. Members participate in a range of trainings and planning meetings together with Woreda officials to develop the OCM approach.

The Woreda steering committee is an essential structure. The committee is the principal mechanism to ensure that the issues identified by OPMGs are directed to the Woreda government. The steering committee consists of all AMG members, representatives of the partner NGO, and Woreda officials. The committee meets every three months to discuss activities during the preceding period and makes plans for the next three months. The committee is also responsible for approving projects for financing from the community fund. The steering committee includes six AMG members (three women and three men), sector offices representatives (water, education, health, food security, economic and finance bureau), Woreda administration and NGO staff, making a total of 15 people altogether. All the SA process is integrated with Social Accountability Committees (SACs) and all relevant stakeholders (for further information see www. esap2.org.et and yemconsultant.com).

6. CONCLUDING REMARK

The established as older citizens monitoring Groups (OCMG) at all regions and national level in Ethiopia, can be considered as good opportunity to ensure age friendly social accountability and voice for right and entitlement of older people. This guide will help to promotes dialogue between older people, civil society organizations, governments and service providers and enhance policy and service delivery improvements through the selected OPFSA tools process. Therefore, EEPNA should focusing mainly on right and policy issues and then follows the older people basic service demand and needs (particularly very important to apply in the health sector and PSNP).

Older People Friendly Social Accountability (OPFSA) is participatory approach which is focused mainly on the need and demand of older people (men and women) together with the young generation to transfer skill and practice, to narrow the inter generation gap. Older people needs, preferences and demands are analyzed based on the entitlements mentioned within the older people

programs, policies and sectoral standards; to hold policy-makers and service providers accountable for their performance and commitments for Older People.

On the other hand, understanding Ethiopian budget process, involving in the process of PPB and exercising Social Auditing are vital OPFSA tools where older people need apply. This will help to analyzes if older people's needs are addressed through budgetary measures and if the allocated budgets are considering older people men and women interest and being executed for the targeted needs of older persons.

The first stage is to enable older citizens to access information about policies and programs and service standards, budgets and planned targets. This is followed by a period in which service providers and users employ a variety of different 'tools' to assess the current level of service delivered to older people and other citizen. The implementing NGOs then can organise Interface Meetings (IR) between the service users and providers/ policy makers to agree on reforms which are set out in a Joint Action Plan (JAP). Older People Monitoring Groups (OPMG) are formed to lead the assessment process and to steer the implementation and monitoring of these plans which is the final stage, although the whole process can be repeated or replicated with a different service.

7. ANNEXES
7.1.   Term of Reference for Preparing OPFSA