

LOVE IN ACTION ETHIOPIA (LIAE)

LIAE BRIEF PROFILE WHAT WE DO



LIAE's Profile is

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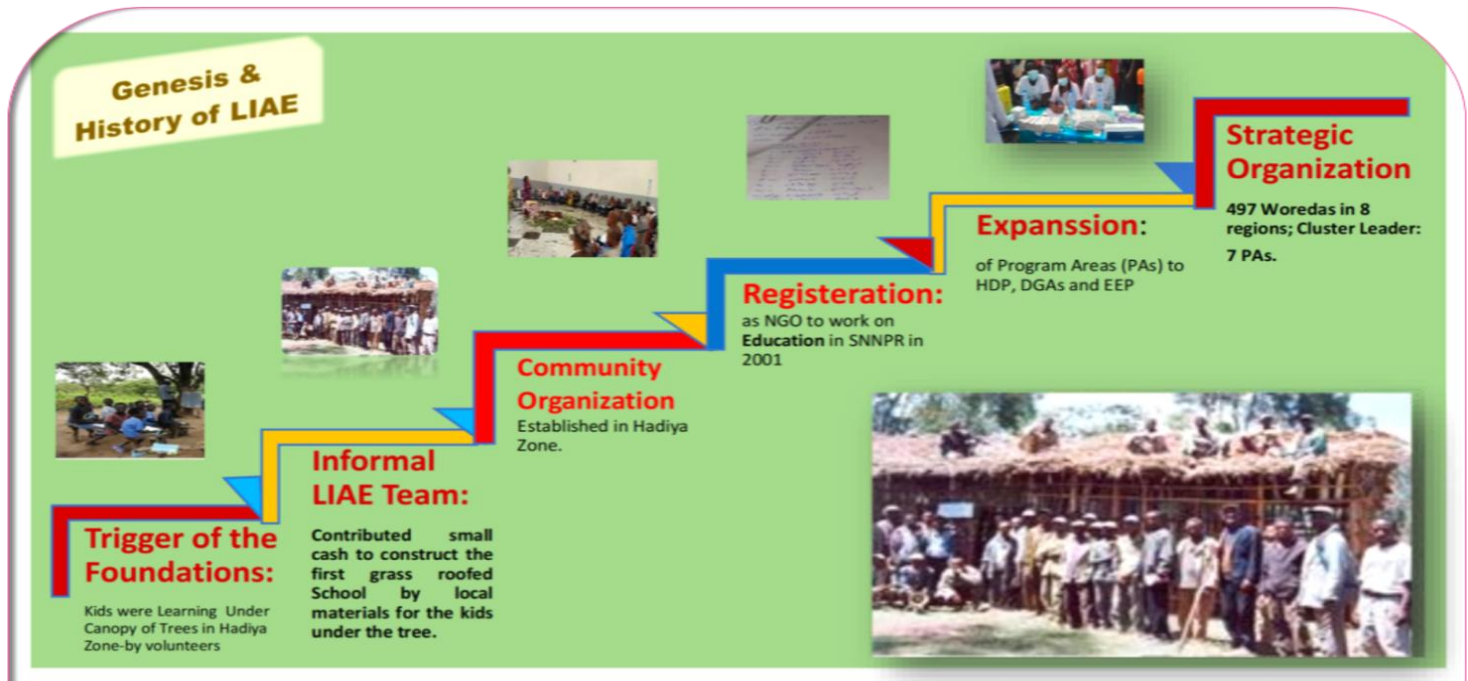
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Brief Profile of Love In Action Ethiopia (LIAE)

1. Introduction and Background

1.1. Genesis and History of LIAE: A Story of Resilience and Impact



The Beginnings (2001)

In 2001, a group of passionate individuals led by Mr. Yohannes Amado Duba, Aklilu GebreMichael Shomoro, and 18 other founding members came together to form Love in Action Ethiopia (LIAE). They were driven by a shared vision—to address the glaring educational disparities in their homeland, the Hadiya Zone.

While traveling through rural Ethiopia, Mr. Yohannes saw children learning under trees, with no proper classrooms, desks, or supplies. These schools were run by volunteers with no government support. The community was trapped in poverty, unable to even build basic shelters for education.

The First Grass-Roofed School

Determined to act, the founders mobilized their networks. Mr. Yohannes, the initiative setter, engaged key figures like Brigadier General Bahailu Kende and Mr. Aklilu, a university student at the time. Their discussions evolved into action.

With barely any funds, they pooled money to buy nails—the only material they could afford. The community, skilled in traditional construction, built a grass-roofed school—an unpleasant structure with mud floors, no walls, and makeshift furniture. Students wrote on their knees sitting on stones. Teachers were teaching using wood-made black boards prepared of black ashes, and river stones as chalk. It was far from perfect, but it was a start.

Formalizing the Vision

From 2000 to 2001, the group held countless discussions in Addis Ababa, debating how to create lasting change. They agreed: government efforts alone weren't enough. They needed an NGO—one free from personal agendas and focused solely on community needs.

In 2001, they secured a tiny, rundown office in Afencho Bare. With no funds, they relied on broken donated furniture. Mr. Aklilu, temporarily out of university due to protests, became the first coordinator, while Mr. Yohannes took the helm as Executive Director.

Early Struggles and Successes

The early years were brutal. Fundraising efforts failed repeatedly. Skeptics dismissed them. Members walked miles for meetings, only to be stood up—phones were a luxury. Yet, they persisted. A breakthrough came in 2003—their first major funding: 150,000 ETB from SNNPR HAPCO. Hope was reignited. Then, between 2003 and 2006, LIAE achieved significant success by securing six projects, including construction contracts. This period marked the organization's first major peak in accomplishments.

Crisis and Near-Collapse (2006-2007)

Success was fleeting. By the end of 2006, LIAE collapsed. Projects ended. Staff shrank from 20 to 3 unpaid volunteers. Offices closed. Debts piled up. The board considered shutting down. But in 2007, at rock bottom, Mr. Aklilu stepped up to fight against the crisis. With no salary, he led a desperate revival effort. The board, skeptical due to his low experiences but out of options, agreed.

The Comeback (2008-2010)

A three-day strategy session birthed a new plan: expand beyond education into health, economic empowerment, and social accountability. Six grueling months later—a miracle happened and LIAE secured 3 million ETB in funding. Debts were cleared. Offices reopened. Hope returned.

Transformation (2010-2013)

By 2010, LIAE's revival caught attention. A landmark USD 1.6 million (current value of 200M ETB) grant from USAID/Save the Children propelled them forward together with other similar big projects. For the first time, LIAE had vehicles, sufficient coordination cost coverages, stable funding, and national recognition. Despite this remarkable and unprecedented success in LIAE's history, rapid growth also introduced challenges. Certain returning founders prioritized personal interests over the organization's goals. In response, LIAE enforced legal and institutional measures, removing those who threatened its integrity to safeguard its mission.

Rapid Growth (2013-2025)

Over its operational period, LIAE scaled into a transformative national initiative, directly impacting 1.7 million people across 10 regions. Its growth was fueled by data-driven strategies, cross-sector collaboration, and adaptive innovation. Below are the four pillars that underpinned its success:

Clear Mission & Holistic Focus: LIAE's impact was anchored in a well-defined mission targeting seven key areas:

- Education (e.g., school constructions, literacy programs, teacher training)
- Health (e.g., disease prevention, care and treatment)
- Economic Empowerment (e.g., livelihood, job creation, vocational training)
- 4 additional strategic priorities (e.g., climate resilience, social accountability)
- Strategic Partnerships for Scale: Collaboration amplified LIAE's reach through:
 - 380+ government partnerships (policy alignment, resource sharing)
 - 48+ donor organizations (funding diversification, including multilateral agencies)
 - 20+ sub-partners CSO capacity building (national and regional)
- Innovation as a Driver: LIAE pioneered scale-able solutions to its operations, such as:
 - Digital platforms for real-time monitoring and service delivery.
 - Crisis response frameworks (e.g., rapid aid deployment during disasters).
 - Sustainable funding models (e.g., social impact bonds, public-private hybrids).

Awards & Recognition: LIAE's excellence was validated by 38+ prestigious awards, including:

- USAID/LCD Certificate of Achievements.
- Ministry of Health TB support recognition certificate
- 2020 Champion Award for TB.
- ESAP annual cup award.
- So many others.

From a grass-rooted school to a national movement, LIAE's journey proves that small acts of courage can ignite monumental change. Today, it stands as a testament to what determination, unity, perseverance, and selfless leadership can achieve.

Key Learning

Our history as one of the leading CSOs reflects a commitment to balancing rapid growth with sustainability, ensuring both immediate impact and long-term institutional resilience. Through experience, we've learned that success hinges on dedication, SMART strategies, professionalism, and sustained engagement—key elements in reviving struggling organizations. Transparency has been vital in securing trust and funding, while every setback has strengthened our adaptability to operational, cultural, and organizational challenges.

We learn the legacies endure, reminding us that institutional strength is built on visionary dedication and unwavering integrity. In connection to this, at the heart of LIAE's journey stand two extraordinary leaders whose contributions shaped its destiny. As we honor their contributions, we carry forward their spirit—ensuring LIAE remains a beacon of impact and inspiration for generations to come.

Honoring the Legacy of LIAE's Visionary Leaders

Mr. Yohannes, a founding visionary, laid the groundwork for LIAE's mission, turning a fledgling initiative into a national force. His steadfast leadership in the early years established a foundation that continues to inspire progress today.

Equally transformative was Mr. Aklilu GebreMichael Shomoro, the other founder, and the architect of LIAE's revival. When the organization neared collapse in 2008, he stepped in without compensation, sacrificing personal security to lead its rebirth. From makeshift offices with volunteer teams, he expanded LIAE's scope beyond education into health, economic empowerment, and social accountability. Under his guidance, LIAE secured critical funding, reached 1.7 million beneficiaries, and earned national recognition. His intellect, empathy, and selflessness redefined leadership, proving that true change begins with courage and sacrifice.

1.2. Background

Love In Action Ethiopia (LIAE) is a not-for-profit organization established in 2001 at the federal level to serve hard-to-reach; under-served, most vulnerable, most at risk, and marginalized segments of the population and areas; including children, youth, and women in 497 woredas of eight regional states of the country namely: Addis Ababa; Gambella (in all Woredas); Sidama, South West, B/Gumuz, Amhara, SNNPR, Oromia regions. We focus on five major thematic programs. In the area of health, LIA-E has been implementing SBCC; Bio-Medical, and Structural support programs to improve access, quality, efficiency, and equity of health services in the areas of HIV, Malaria, TB, SRH, WASH, Nutrition, and others. In the education program, the driving forces behind our inclusive education approach are: deliberate interest for children and youth holistic development, reaching the hard-to-reach population, improving academic performance and thinking ability of youth/children, special education, and marginalization through building 5 resource centers and 20 school facilities: and supporting more than 72 schools directly. On capacity building programs LIAE follows a business model that can enhance the capacity of institutions including sub-partners, and the community in a way that improves sustainability and ensures self-ownership. Since its establishment, LIAE directly benefitted 1.5 million beneficiaries 61% of whom are women/girls. So far, LIAE has been working in more than 395 Woredas of four regional states in partnership with more than 40 donor organizations and 280 government signatory offices. Likewise, LIAE has well well-developed and seasoned capacity to manage achievements, results, and project processes and properly handle the work performed with greater competencies required, the required technology, well-motivated and equipped staff, and the organizational structure grounded at the grassroots. We have also special knowledge and experience in the implementation of various programs in hardest-to-reach areas.

1.3. Governance

Unlike in many other NGOs, 50% of members of the governance organs of LIAE were organized from the direct beneficiaries and community representatives. The General Assembly (GA) was the supreme organ for LIAE, which was selected from representatives of government offices, founders, FBOs/CBO leaders, beneficiary representatives, and other relevant groups. It is generally responsible for the evaluation and approval of annual reports, audits, and annual plans, opening of new offices, assignments of management board, etc. But later on, due to the strategic advantage of the board-led organization; starting from fiscal year 2022, roles constitutionally assigned to GA were legally transferred to the management board as a new supreme organ of

the organization. In addition to these, the management board is responsible for the development of organizational policies and operating procedures, approval of financial amounts above a certain limit, quarterly evaluation of administrative, grant, financial, and program performances, evaluation of performances of the management and executive director, and the like. The board meets quarterly and regularly. The day-to-day management of the organization is handled by LIAE management; the executive director, Unit Directors, and Program Managers are part of it. The hierarchical arrangements of project operation reporting and supervision systems are: Unit Directors; followed by department managers and Branch office Area Managers: Coordinators; Officers; Site Coordinators; Community Facilitators and Social Workers.

1.4. Strategic Framework

Progressive part of the previous strategic phases, LIAE has crafted a five-year strategic direction to align itself with the strategic goals of the organization and the needs and assets of the community (New People/Community Led and Asset Based Yardstick -New-PLAY). In this connection, the organization's business model for innovations is linked to meaningful participation of the community, holistic and inbuilt-sustainability improvement actions that smoothly safeguard self-reliance and self-ownership, strategic partnership, inclusive (not only integrated) program implementation, empowerment of all actors of LIAE.

1.5. Human Resources

The new and increasing organizational capacity is creating opportunities to re-focus or redesign the requirements of appropriate human resources profiles to uphold and maintain the anticipated services. LIAE has designed and been effectively implementing various useful policies for human resource management in ways that can increase the performances of all staffs. That includes: human resource policy, vetting and ineligibility policy guidelines, ethics policy, fraud policy, human trafficking guide, safeguarding policy, anti-sexual harassment policy, child protection policy, and the like.

Due to LIAE's commitment to closely serve the communities at the grassroots, the organization has focused on strengthening regional and satellite offices in project operation areas. Currently, LIAE has organized staffs with diverse professional backgrounds including Health System Management, HIV/TB/SRH Program Management, Project Management, Communication, M And E, IT, Finance, Economics, Grant Management, Administration and Logistics Management, Gender, Education, Organizational Leadership, Community Mobilization, Governance, etc.

1.6. Strategic Objectives

The revised strategic objectives of LIAE are:

- To expand access to quality, equitable, and effective health and Nutrition Services.
- To strengthen education and skill development programs.
- To engage in environmental protection and enhancements, food, agriculture, and fishery development programs.
- To ensure economic security at the household level and further development.
- To promote emergency and relief initiatives and programs.
- To improve the capacity of community and government systems and structures.
- To advance actions on deliberative democracy, peace building, public accountability, and good governance.

To address these strategic objectives, LIAE has developed a seasoned technical capacity to manage its projects with greater competencies necessary, the required technology, and the organizational structure grounded in grassroots.

1.7. Partnership and Networking

In connection to Partnership and Collaboration, LIAE learned that effective partnership and structured collaboration have improved long-term HIV prevention and care actions and improved project outcomes. To create reliable outcomes, sustain project results, expand treatment coverage, and strengthen program management, on HIV programs LIAE created and strengthened the capacity of key stakeholders including all level relevant government health offices, health facilities (Public, NGO, Government), sub-partner CSOs as the key bearer of project responsibility (if any), health facilities and their staffs, TWGs, CCCs, all forms of Volunteers, Traditional Groups, PLHIV Associations, PENTA Families, Most At Risk Families, FBOs/CBOs, and other stakeholders which newly mapped at startups of the projects. LIAE has been also playing a coordination role in joint planning, implementation, monitoring, and experience-sharing platforms to build the technical capacity of the key stakeholders.

As capacity improvements and maintenance to sub-partners, LIAE also undergo an organizational and technical capacity assessment to diagnose capacity gaps and has been providing legal, financial, and technical support grossly to more than 10 NGOs (sub-partners under different projects); 70 HIV/AIDS clubs or associations; 2 major Universities; 176 Idirs (CBOs) including women Iddirs; 45 Schools; more than 30 various government offices; etc. This includes planning,

strategic thinking, service delivery, policy formulation, M and E system development, quality improvements, data system strengthening, documentation, and the like.

1.8. Recognition-On Community Activities

LIAE has received more than 35 different types of letters/certificates of recognition for its exemplary results/achievements, good collaborations, and meaningful life changes conveyed. LIAE has received official recognition from the Gambella region for its leading contribution to the reduction of HIV prevalence from 6.5% when it started implementation to the lately 4.8%. Besides, under the one-year USAID-Local Capacity Development (LCD) program, LIAE remarkably improved its level of capacity; by successfully addressing the identified organizational gaps and taking improvement actions. The USAID-LCD team evaluated the improvement results by all categories and awarded LIAE with a CERTIFICATE OF ACHIEVEMENTS. In 2021 LIAE received the Annual Gambella Region Presidential Award for its successful implementation of HIV projects, contribution to strengthening the government health systems, contribution to the reduction of the prevalence of HIV, promotion of education programs, and the like, which was one of the prestigious awards of the region.

1.9. Cross Cuttings

1.9.1. Diversity

The issues of diversity have comprehensive impacts on the management of government and NGO projects in any place in the country. So, LIAE during the implementation of its projects tried to create adequate space to accommodate diversity. Mainly in the woredas, there were diverse groups in terms of culture, language, and ethnic background that called for accommodating intervention. Therefore, through all its projects, as one of the cross-cutting agendas, LIAE designed strategies to respond to the diversified needs of the target beneficiaries and active/positive engagement of key stakeholders. LIAE has a place to recognize and address cross-cutting social differences respectfully and in nonpartisan ways. LIAE also has a program to empower marginalized communities in a way this effort can boost integration/inclusion; this includes the fight against Minority based Violence (MBV).

1.9.2. Key Stakeholders Management:

LIAE has developed different models for stakeholders and community engagements through their representative institutions. For instance, through practical experiences and learning we learned

that the Community Mobilization Cycle (CMC) model could guarantee the active participation of the community in the project execution process and played a vital role in building a strong sense of ownership among the target community which was significantly ensure sustainability of the program. We systematically implemented the CMC cycle in six phases of the community action cycle: Preparation; Organization; Exploration and Mapping; Community Re-Planning; Joint Actions: and Evaluation and Monitoring.

As a new model, recently we have discussed to developed also centralized stakeholders' engagement strategies including developing integrated organogram for them.

1.9.3. Gender Equality

LIAE understands that this is a fundamental human right provision that is a foundation for peaceful co-existence and sustainable development of its project areas. LIAE works on equitable access to quality services for girls and women, including education, health, economic empowerment, protection, and other related services. LIAE works on women/girls' social challenges related to early marriage, HTP, marginalization, HIV service provision, girls' education, girls' skill training, economic empowerment, girls' labor, etc.

1.9.4. Gender-Based Violence:

LIAE, as an organization working in remote areas where incidences of GBV are high, has designed mainstreamed strategies to address violence against women and girls, especially girls and women of under-served, marginalized, minority, and most at-risk community groups. There are interventions/ strategies designed in the organization to comprehensively address the physical, verbal, psycho-social, sexual, and socioeconomic violence of girls and women. In the case of GBV, the range of activities include developing a workable system for education/SBCC, girls' empowerment, planning, program integration, policy framework, reporting system, safeguarding, livelihood stability, career linkage and developments, and legal protection.

1.9.5. Safeguarding and Protection:

LIAE is committed to building a safe environment for children and adults where they are protected from any form of abuse, exploitation, and violence that can cause harm to their well-being. It has developed a policy that aims to set out its commitment to safeguard and protect vulnerable people in our work and to provide a clear protocol and framework for safeguarding and discharging our duty of care towards vulnerable people. The policy also aims to ensure that our staff, volunteers, and partner organizations provide an appropriate and effective safeguarding response whenever a concern for a child, young person, or adult's welfare and

safety is raised or when an incident has been reported to ensure that appropriate action is taken to protect and support anyone that is affected. This policy and the associated safer working guide and vetting policy will also clarify the safeguarding parameters that we expect our partner organizations to observe as a prerequisite for collaborative work. The policy and intervention framework mainly focuses on the delivery of safeguarding responsibilities, safeguarding implementation, safe programming, reporting and resolving safeguarding complaints/allegations/incidents, confidentiality, information sharing, reviewing media and communication, monitoring, and safeguarding management and incidents reporting flow chart. This will be implemented through the use of various safeguarding program tools: statement of commitment to the child/other beneficiaries protection policy; character reference; tools mentioned on LIAE's code of conduct procedures; incident report/Application form by the victim; incident resolution form; risk assessment templates, and the like.

1.10. Lists of Our Major Partners

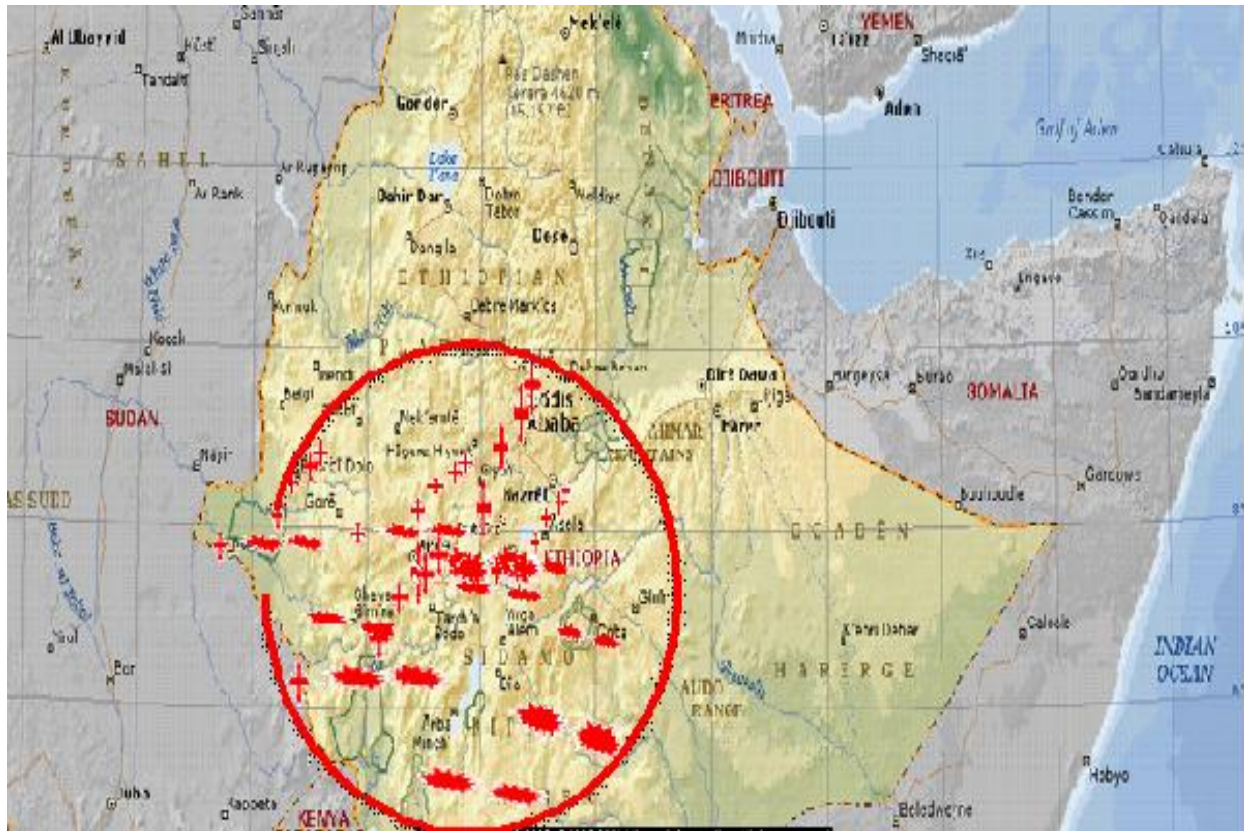
1.10.1. More than 260 Various Government Line Offices

1.10.2. Local Networks/Consortium

1.10.3. Other CSOs

1.10.4. Major Donors:

1. USAID/PACT Ethiopia
2. USAID/PACT-Y-CHOICES
3. Japan Embassy
4. British Embassy
5. USA Embassy
6. Basic-Education Network Ethiopia
7. HAPCO-SNNPR
8. Global Fund for Children
9. USAID/Geneva Global Inc.
10. USAID/PSI
11. USAID/World Learning Inc.
12. Stitching-Kinderpostzegel Netherland-Education Program
13. Stitching-Kinderpostzegels Netherland-SRH program
14. DVV International
15. Initiative Africa
16. Irish Aid/C-CCRDA
17. USAID/PATH/FGAE
18. USAID/Save the Children-USA
19. USAID/PSI-Ethiopia
20. USAID/World Learning Inc.
21. USAID/Project Hope
22. World Bank/MA-ESAP2
23. CSSP
24. CSSP/SHAFOCS
25. CSSP/AED
26. CSSP/ADV
27. SIDA/IA
28. EU/Retrack
29. Health Poverty Action (HPA)
30. Members
31. SNNPR-HAPCO
32. BMZ/KKS-Germany
33. Education Development Trust Fund (EDT)
34. Treatment Action
35. LIAE General Fund
36. Diaspora Community
37. Volunteers and Members
38. KNCV-Netherlands
39. Others



Major Intervention Areas:

2. Programs Descriptions:

2.1. Active Project Since 2023/24

- 1. FFHPCT/USAID**
- 2. Scale up on Integrated Adolescent and Youth Health Activities of LIAE SRH and GBV programs/LIAE**
- 3. KPP/PSI/USAID**
- 4. TB-LON KAP Activity for DES/USAID**
- 5. TB-Reach Wave 11/ Stop TB Partnership /UNOPS**
- 6. The ASCENT DR-TB project/TAG/KNCV**
- 7. TB Advocacy by Global Fund and MOH**
- 8. HIV Prevention on DICs by Global Fund and MOH/ISHIDO**
- 9. Increase uptake of RI and HPV Vaccination /GAVI**
- 10. USAID Community Nutrition Program**
- 11. Combating Youth Unemployment /BMZ-KKS**
- 12. COVID-19/TAG/KNCV**
- 13. ESAP-3 Gambella Region /VNG**
- 14. ESAP-3 South & South West Regions/VNG**
- 15. Education Capacity Building Project/EDT**
- 16. Research on Zero-Dose Children/BMG-F**
- 17. Three IDP Support Projects**
- 18. Project on Substance Abuse/CSSP**

Project Names Acronyms: FFHCT: Family Focused HIV Care and Treatment; ESAP/MA: Ethiopian Social Accountability/Management Agency; TPT: TB Preventive Therapy; BGM-F: Bill Gate and Melinda Foundation; ES: Economic Empowerment; ETD: Education Development Trust; KPP: Key and Priority Population; IDP: Internally Displaced

2.2. Health and Nutrition Development Programs (HNDP)

Overview: This department aims to strengthen access and coverage of quality, equitable, and effective health services and information focusing on fostering five major intervention areas:

Health and Nutrition Education-SBC: provide a combination of minimum and structured/curriculum-based education to the community at risk through one-to-one outreach; group sessions; organizing community-wide events that will be integrated with referral to clinical services and provision of preventive health materials.

Bio-medical services provision: design minimum bio-medical services to target beneficiaries in direct and indirect service delivery approaches.

Nutrition services delivery: provision of age appropriate and standard nutrition services to the target communities.

Provide structural support: these are responses focusing on strengthening the capacity of key stakeholders and community supports for reducing vulnerability.

Ensuring quality, equity and efficiency of health services: this intervention is considered as a cross-cutting process and approaches to all health activities.

Health Program Development Summary

LIAE has built a strong reputation and extensive experience in health initiatives, primarily in HIV, but it has also executed diverse projects in tuberculosis (including CRD, DR-TB prevention and treatment, and TPT). Additionally, the organization works in sexual and reproductive health (SRH), addressing early marriage, female genital mutilation (FGM), and other harmful traditional practices (HTP). Other focus areas include preventing eye and intestinal diseases among marginalized groups, immunization and vaccination programs, WASH (water, sanitation, and hygiene), COVID-19 prevention, mental health, integrated adolescent and youth health services, and emergency nutritional support.

HIV/AIDS Program

2004-2007: LIAE's journey in HIV/AIDS programming began in 2004, three years after its establishment in 2001. What started as a fledgling initiative soon grew into a large-scale, life-saving intervention, reaching 365 sites across 81 districts—from the highlands of SNNPR (41 Woredas) to the bustling streets of Addis Ababa's Bole sub-city (15 Woredas), the vast Oromia region (17 Woredas), and the vulnerable communities of Gambella (8 Woredas). Over 24 years, LIAE has channeled \$25.7 million into combating HIV, transforming countless lives.

A pivotal shift came in 2007 when LIAE became a PEPFAR and USAID implementing partner, securing stable funding that allowed its HIV programs to thrive without interruption. Before

this milestone, projects were supported by regional bodies like the SNNPR HAPCO offices and different embassies in Ethiopia. However, the first flagship PEPFAR/USAID-backed initiatives took root in Oromia in 2007, marking a new era of expanded impact.

Beyond adult interventions, LIAE also prioritized youth/children empowerment, securing USAID/PACT-Y-CHOICES and Irish Aid funding to bolster school health programs, university HIV programs, out-of-school youth clubs, and government health systems—ensuring the next generation could access critical HIV prevention and care.

2008-2010: We began implementing a more focused HIV care and support/treatment program for PLHIVs and OVCs in 2008, based on the lessons learned. USAID/Path Inc. provided funding for this. In another youth program, from 2008 to 2010, LIAE offered university students in SNNPR a comprehensive HIV education and skill development program supported by Irish Aid/CCRDA.

2010-2020: Through the construction of our evidence and existing experiences, from 2010 to 2013, LIAE successfully designed, implemented then completed the TRANSAction program which was focusing on the Most At Risk Population (MARPs). The project, named "HIV/AIDS Prevention, Care and Support Services for MARPs in South West Corridor," was supported by USAID/Save the Children USA. Reaching MARPs residing in eight towns in SNNPR and Oromiya regions was the target. The project has a total agreed-upon budget of around 1.56 million USD. It focused on the implementation of structured BCC programs, direct clinical service provision, theme-based outreaches, economic empowerment, IPC renovations, and health material promotion and distributions, the like.

In 2012, LIAE further strengthened its capacity on MARPs intervention as a crucial follow-up and more focused program to TRANSAction. The newly launched program was called the MULU/MARPs program. It was a 2 million USD program, that ended in 2019. The goal of this particular program is to support and strengthen KPs or KPPs in 14 towns in the Gambella, SNNPR, and Oromiya regions. Moreover, in terms of expansion of service volume, ensuring yields, and successful completion of anticipated deliverable in the areas of SBCC, biomedical services, structural supports, and economic empowerment for MARPS, LIAE was one of PSI's largest partners.

As a complimentary program to the above-stated health-facility-based MULU/MARPs program, LIAE also implemented two projects focusing on direct community-level care; and worksites as one of the overlooked targets by MULU/MARPs program; these programs were planned to deliver direct community HIV care and treatment services as reinforcement programs to the facility based MULU/MARPs program. Firstly, in connection to the worksites, from 2015-2018

LIAE implemented successfully a project called HIV care and treatment program to MULU/Worksite, which focused on reducing behavioral risk factors among mobile communities of the mega work sites in South West Development Cluster in Gambella and SNNPR regions. It was funded by USAID/World Learning Inc. Secondly, in regards to the community HIV program, from 2017 to 2019 LIAE had also successfully implemented and showed exemplary performances in the Community HIV Care and Treatment Program for PLHIVs and OVCs. This is realized through strengthening of various community volunteers (CRPs, CEFs, Case Managers, UHEW TWG, etc.) and different HIV testing and counseling modalities; retention and adherence services; community-based care services; case management systems, networks of referral linkages; quality assurance arrangements; and performance management systems. It was funded by PHE/USAID.

2020-2025: Among the Most-At-Risk People (MARPs), which include Key Targets for HIV (KTH) and Priority Populations for HIV (PPH), LIAE has expanded, strengthened, and qualified its HIV intervention efforts during this time.

Since 2020, USAID has chosen LIAE as one of its primary partners for three years, to boost family-focused HIV services' availability and demand to reduce HIV new infection and AIDS mortality by 2025, the program planned to significantly achieve the three UNAIDS goals of 95:95:95. Additionally, it increased HIV mitigation services for children who were at risk. These services concentrated on case detection; connecting undiagnosed children with HIV to treatment; improving their health outcomes through HIV viral load suppression; and building interpersonal, family, and community norms to achieve protection from risk of HIV and violence among 9 to 14-year-old children. Regarding outcomes, the project has meaningfully contributed to the reduction of HIV prevalence in the community (for instance from 6.5% to 3.67% in the Gambella region); and strengthened utilization of data to monitor service delivery and conduct quality improvement of programs in the Gambella region. Generally, from FY20 to FY25 LIAE has successfully delivered the highest performances that reached 100%+ in all indicators of HTS+; HTS-; Care and treatment Care including enhanced Adherence; Viral Load Suppression; OVC Comprehensive Care; OVC prevention; DSDM; etc. As qualitative performances, LIAE also has won competition and presented four best practices as abstracts to USAID global competition platform on HIV testing performance, promotion of HIV performance improvement cultures, quality project, and stakeholder engagement strategies, which were selected among so many abstracts collected from all over the world.

Drop-In Centers (DICs) for Female Sex Workers Services

A Safe Space for Health and Empowerment. Female sex workers (FSWs) in Ethiopia face heightened health risks, including HIV/AIDS, STIs, unplanned pregnancies, and gender-based violence, along with social stigma and economic marginalization. To address these challenges, LIAE established Drop-In Centers (DICs)—safe, non-judgmental spaces where 8600 FSWs and their children can access healthcare, nutrition support, skills training, and social protection, since 2014 in collaboration with various flagship programs of USAID.

Sexual and Reproductive Health Rights (SRHR) Program

Since 2010, LIAE has carried out several projects centered on integrated and direct SRHR activities in partnership with various donors. These programs have improved the social and economic status of girls at risk and affected by various forms of GBV through education and integrated economic interventions, to reduce SRHR difficulties including early marriage, FGM, early forced sex, other HTPs, and the like, in SNNPRs and Gambella Region. These programs further aimed to accomplish strategic goals of reducing the social and economic obstacles faced by girls; enhancing girls' understanding, attitudes, behaviors, and skills regarding SRH practices and life leadership; encouraging girls to participate in school; enhancing the provision of SRH services for girls; raising the income of parents of girls or young women by giving them access to financial services and self-helping groups; raising community awareness; reducing GBV; and strengthening government structure and systems capacity in improved SRHR intervention. Up to now, the projects have directly benefited 57585 girls and their families, as well as 300,000 indirect beneficiaries.

Tuberculosis/TB and Other Lung Diseases Program

The most common infectious disease in Ethiopia is tuberculosis (TB), which kills more people there than HIV and malaria put together. Both TB and its complicated form, drug-resistant TB (DR_TB), kill 19,000 Ethiopians annually and infect more than 152,000 citizens.

To implement person-centered interventions throughout the patient pathway and the continuum of care for TB services, LIAE will integrate TB prevention, care and treatment services, and education; with Leprosy and Other Lung Health Prevention, during the next five years as part of the government's national five-year TB Strategic Plan (NSP). It focuses on important interventions such as case management; infection control; offering TBLLD services that are vulnerability and gender-responsive by centering on the Integrated Community Care (ICC) models; decentralizing comprehensive and accessible care within PHCU; fostering

community-based and unified data management systems, and increasing engagement of key stakeholders and actors.

LIAE has had a successful experience working on the TB program, partnering with the KNCV TB Foundation Wave 7 as an implementer. We implemented a project entitled “Improving TB Preventive Treatment for under-five Children through the engagement of women’s indigenous associations in Ethiopia. The project took an innovative approach by using women only as ‘Iddirs’ as the main implementer of activities. It was implemented in 10 health centers in Addis Ababa, 42 woredas in Gamo, and 15 woredas in Gofa Zone. In this project, we were able to facilitate putting 939 eligible children on TB preventive therapy, which was more than the initially targeted number. 99% of the children who were put on TB preventive therapy completed treatment. The performance success and the social impact the project brought have led to its publication in a prestigious medical journal (BMJ).

LIAE is also starting implementation of Wave 11 as a prime partner of Stop TB Partnership’s TB REACH initiative which is a multi-lateral funding mechanism, that provides grants to partners for testing innovative approaches and technologies aimed at increasing the number of people diagnosed and treated for TB, decreasing the time to appropriate treatment and improving treatment success rates in collaboration with its sub partners and technical assistance partners namely:—Organic Health Care Service, Ethiopian Kale Heywot Church Development Commission (EKCDC), American Thoracic Society, the Pan African Thoracic Society, and the Mayo Clinic, and Arba Minch University.

In recent, LIAE has been diligently collaborating on the implementation of the IMPAACT4C-19 diagnostic, Therapeutics, and Promotion of COVID-19 Self-Test program for internally displaced persons (IDPs) in the Amhara and Tigray regions. This crucial project, funded by UNITAID and expertly led by the Treatment Action Group (TAG), has been a resounding success. In 2022, Small Scale Research was also conducted on the self-test utilization in the Tigray region.

Currently, LIAE started to implement the project in title with USAID TB Local Organization Network Key Affected and Vulnerable Population (USAID TB LON KAP) Activity in Developing Regional States in collaboration with BPDO in Gambella, B/Gumuz, Somale, and Afar regional states. From October 2023 to September 2028, with a total grant of US\$10 million; LIAE is responsible for implementing the program in two regional states. More significantly, LIAE was awarded with an achievement certificate from USAID for its work on the Local Capacity

Development Program; and it was "Global TB Elimination Champions" on the CDC's World TB Day 2020.

We are currently implementing a Tuberculosis (TB) advocacy and awareness project in partnership with the Global Fund, as well as the Federal Ministry of Health. This initiative is being carried out in collaboration with seven experienced Civil Society Organizations (CSOs) across all regional states of the country. The project focuses on developing and disseminating tailored TB messaging through electronic and print media, including radio, television, and printed educational materials. Additionally, high-level national and regional advocacy workshops are being conducted, led by TB survivors, affected communities, and CSOs, to strengthen policy engagement and community mobilization. To improve service delivery, healthcare workers and program managers are receiving training on people-centered and human rights-based approaches to TB care. Lastly, informational kits are being produced and distributed to households impacted by TB and drug-resistant TB (DR-TB), ensuring affected individuals have access to vital resources and support. Through advocacy and media campaigns, we have a significant impact, reaching approximately 5 million people. That's a great achievement!

Nutrition Program

It is one of the Key Focuses of LIAE's Strategic Objectives. In its mission to promote child survival, reduce poverty, and protect vulnerable communities, LIAE has placed nutrition at the heart of its strategic objectives. Recognizing that malnutrition undermines health, economic stability, and social development, LIAE implements integrated programs that address immediate nutritional needs while strengthening long-term resilience. Through targeted interventions, partnerships, and community-based initiatives, LIAE is making significant strides in combating hunger and improving well-being across Ethiopia. Besides, LIAE's strategy goes beyond short-term food aid—it combines economic empowerment, health interventions, and community education to break the cycle of hunger and poverty.

LIAE's Work Is Guided by Three Fundamental Goals:

Ensuring Child Survival and Development – Malnutrition is a leading cause of child mortality and stunted growth. LIAE prioritizes nutrition-specific interventions, such as emergency food aid and maternal-child health programs, to safeguard children's futures.

Protecting Children from Exploitation and Abuse – Food insecurity often forces children into hazardous labor or early marriages. By providing nutritional support and safe spaces, LIAE helps keep children in school and out of harm's way.

Reducing Poverty Through Household Resilience – Chronic hunger perpetuates poverty. LIAE combats this by empowering families with economic opportunities, ensuring they can afford nutritious food and withstand crises.

Key Interventions & Achievements

A. Economic Empowerment for Sustainable Nutrition: Adequate nutrition requires financial stability. LIAE’s economic initiatives include:

Cash Transfers: Supported 348 destitute households (1,740,000 ETB) to meet basic needs.

Village Savings & Loan Associations (VSLAs): Established 224 groups to help communities save and invest in sustainable food and nutrition.

Entrepreneurship Training: Equipped 5,200 women and youth with business skills and trained 500 unemployed youth in income-generating activities.

B. Nutrition on Emergency: LIAE provides life-saving assistance to the most vulnerable, including Emergency food aid for 2,210 street children during COVID-19 and nutritional support for 4,870 internally displaced persons (IDPs) and 1,600 marginalized individuals. Delivered nutritional support to 5000 people or about 200 households affected by floods and conflict.

C. TB-Nutrition Integration: The relationship between undernutrition and TB is bidirectional and complex. Undernutrition has been observed to be linked to an increased likelihood of developing TB, and most individuals with TB disease experience weight loss and nutritional deficiencies due to loss of appetite, nausea, and malabsorption. We provided care and treatment integrated TB-Nutrition support to more than 10000 IDPs and refugees in Gambella and B/Gumuz regions.

D. Community-Based Nutrition Programs: Sustainable change requires grassroots engagement. In collaboration with USAID/Feed the Future Nutrition program, LIAE has been implementing a program that aims to improve the nutritional status of adolescent girls, women, and young children by promoting 11 high-impact nutrition behaviors. The project focuses on three key areas: enhancing demand for nutrition services, improving access to quality care, and strengthening cross-sector coordination. Under the first objective, efforts include boosting community knowledge, encouraging health-seeking behaviors, and increasing engagement through platforms like Pregnant Women Conferences and Community Nutrition Days. Over 1,700 women attended conferences, while 3,090 community actors participated in nutrition outreach events. Additionally, 496 Community Nutrition Volunteers and Health Extension Workers received training to assess needs and implement programs.

The second objective ensures better service delivery by strengthening 1500 professionals in primary healthcare facilities, front-line worker capacity, and supply chains. Quarterly reviews and joint planning sessions help identify gaps and improve nutrition service demand.

Finally, the project enhances multisectoral coordination by working with 80 local Food and Nutrition Technical Committees to prioritize needs and develop action plans. Innovations like household mapping and digital solutions further integrate nutrition services.

Through these efforts, the initiative fosters sustainable improvements in nutrition, empowering communities and strengthening health systems across Ethiopia.

Drop-in Centers (DICs): in collaboration with USAID we have been offering dietary counseling, nutritious meals, cooking classes, and peer education for more than 6600 female sex workers and their children in DICs since 2012.

Immunization Program

We have been implementing HPV Vaccine and Routine Immunization (RI) Project aiming on protecting health through vaccination in collaboration with GE/GAVI program.

In Southern Ethiopia's Burji, Gardula, and Konso Zones, preventable diseases remain a significant public health challenge due to low vaccination coverage. Recognizing this, LIAE launched the HPV Vaccine and Routine Immunization (RI) Project to increase vaccine uptake, particularly among vulnerable groups. The project focuses on two key areas: routine Immunization (RI) for children (0-2 years) who are either zero-dose (unvaccinated) or under-immunized (missing critical doses like DTP3); and HPV Vaccination for girls aged 9–14 (both in and out of school) to prevent cervical cancer and other HPV-related diseases. It directly benefits 36,000 community members (21,600 females and 14,400 males) in South Ethiopia.

WASH Program

LIAE focuses on Water, Sanitation, and Hygiene (WASH) initiatives, particularly benefiting marginalized children, women, and youth. The organization has implemented WASH projects in schools and communities, including building 120 gender-separated latrines and 5 water sources, while also restoring essential WASH infrastructure in areas affected by drought and conflict. Similarly, through widespread hygiene awareness campaigns, over 250,000 individuals have been educated on topics such as handwashing (especially during the COVID-19 period), menstrual hygiene, and water purification. In the 20 schools built by LIAE, upgraded WASH facilities have made/renovated learning environments safer and helped lower girls' absenteeism.

In regions with prevalent early marriages and harmful cultural practices, LIAE has introduced mobile and fixed WASH teams, set up girls' WASH centers in schools, distributed hygiene supplies, and backed community-driven sanitation programs (CLTS). Promoting inclusivity, LIAE founded the Harotessa Association—run by experts from marginalized backgrounds—which combines local WASH advocacy with healthcare support for socially excluded groups.

LIAE operates with a WASH professional team experienced in public health, gender, and project management, guided by robust gender equality, safeguarding, and anti-corruption policies.

Some of the major projects have been led by the department include:

1. Comprehensive, Integrated, Institution and Community-Based HIV/AIDS Intervention/Mainly BCC Program/: As you guessed from its name, this program is multi-sectorial in its approach, has given strong priority to major stakeholders of the program, and is implemented using community-based approaches. This program was funded by Geneva Global Inc and the grant has been capacitating our organization to expand HIV/AIDS education and care program to in and out of school youth, married couples, the general community, OVC and PLWHA in Algee and Sachee Woreda and Metu Town of Illubabaor Zone in Oromiya Region. By developing and adopting manuals more than 1200 volunteers/peer educators and peer promoters/ were trained to reach 59292 people (23442 female and 35850 male) on structured, small group-based, and skill-based HIV/AIDS education and VCT. Besides, in five years more than 364 volunteers (health workers) had been trained to deliver care and support services to 5855 MARP groups including PLWHA and OVC. Besides 42 Para counselors and community mobilizers had been trained and reached more than 2781 people using community outreach programs in the area of care and support-related services like nutritional support to bed ridden and their families, VCT, PMTCT, ARV, and Sexual and Reproductive Health and Privilege (SRHP). Moreover, more than 60 bedridden PLWHA have been receiving clinical care and support from trained care providers and voluntarily working health workers on ARV, PMTCT, and other internal and physical health problems. It is Geneva Global Inc/USAID funded project. As an outcome, the program trained 1,200+ volunteers, empowered 59,292 people with HIV education, stabilized the lives of 5,855 MARPs, and provided sustainable care to 60+ bedridden PLWHA.

2. Prevention Education to Youth, Children, and Adults Including Care and Support Options and Involving Community Engagement Strategies (or we call it sometimes Y-CHOICES)/BCC Program/: It is an HIV/AIDS education-focused program encompassing mainly youngsters from age 10-24 years and adults focusing on women. It is institution-based and BCC strategies oriented on its approach targeting mainly High/Primary Schools, Out-of-School Youth clubs, CBOs/FBOs, Alternative Basic Education Centers, and Health Centers. Accordingly, this intervention covers 9 High schools, 9 primary schools, 9 Out-of-schools, 9 Iddirs, 9 Health Centers including 1 hospital, and 9 ABECs found in 7 woredas of Hadiya Zone,

SNNPR. Through training staffs of Community Mobilizers and 550 volunteers on mentoring/counseling in the area of health education including SBCC on HIV, nutrition, and other communicable diseases of the area; PMTCT, ARV, VCT, SRHP, etc., Youth Action Kit Implementation, Club Management Strategies, and Community Dialogue, we reached more than 34,300 in school, out of school youth and children in standardized, quality and skill based peer education program in small groups(We call it Youth Action Kit /YAK). About 3375 out-of-school youth and parents had received training on mentoring and counseling skills and 1575 parents and women had been counseled and tested and referred to nearby health institutions for various health care services like VCT, PMTCT, ART, Sexual and Reproductive Health and Privilege (SRHP) and others depending on their needs and known health situations. We have also been training leaders of CBO/Idirs, school administration bodies, Woreda and Zone Officials, and other key leaders to integrate our HIV/AIDS education programs and care and support services at the community level. As an outcome, the program trained 550+ volunteers, then empowered 34,300+ youth and increased knowledge through providing HIV education, counseling, and health referrals to 1,575+ women and parents.

3. HIV/AIDS Prevention, Care and Support Services for MARPs / Mainly BCC Program/:

–USAID TransACTION Program implemented “HIV/AIDS Prevention, Care and Support Services for MARPs in South West Corridor,” targeting MARPs in eight towns: Hosanna, Worabe, Butajira, Alem-Gena, Sebeta, Wolliso, Tulubullo, and Wolkite. The project had a \$1.56 million (approx. 30 million ETB) budget.

Key activities included BCC, direct clinical services, outreach, referral/linkages, non-clinical palliative care, capacity building, economic strengthening, IPC construction, and health material distribution. Over 46,794 MARPs were reached through group and peer-based education with 823 trained peer educators. More than 76,780 individuals received HIV testing and STI diagnosis. Nearly 948,685 condoms were distributed.

Support services were provided by 32 community care workers, 23 lay counselors, and 16 nurse supervisors, reaching 8,615 PLHIVs and families. With HAC support and financial institution collaboration, 808 MARPs formed 51 Self-Saving Groups (SSGs), and had self-saving over 914,598 ETB. They received training in carpentry, barbering, poultry/beef farming, entrepreneurship, financial literacy, and bookkeeping, leading to diversified income sources. Their current capital totals 1,631,608 ETB. Additionally, 1,595 MARPs, gatekeepers, HAC members, and community leaders were trained. Sub-grants totaling 6,413,625.62 ETB were provided to HACs to support project planning, implementation, and evaluation.

Through joint efforts with worksites and industries, over 30,000 workers were reached with HIV/AIDS education and service packages.

As an outcome, the project enhanced MARP health access, increased testing/condom use, strengthened livelihoods, and improved community awareness through peer education and institutional partnerships.

4. The MULU/MARPs HIV Prevention Program (MULU/MARPs):

This five-year project aims to support national goals of reducing new HIV infections by 50% through standard combination prevention services for MARPs and highly vulnerable groups. It is implemented across 14 towns in Gambella, SNNPR, and Oromia regions.

The program offers BCC, biomedical, and structural interventions. With training for 974 peer educators mobilization of 2,000 gatekeepers, and coordination with government offices, the project reached 10,556 Female Sex Workers (FSWs), 500

HIV-positive FSWs, 6,672 clients of FSWs, 4,343 waitresses, 181 widows/divorced women, and 511 long-distance truck drivers through structured peer sessions. Using Private and Public Networks (PPNs), 22,290 individuals received biomedical services via referrals, voucher systems, and structured HTC outreach. Community-wide events at hotspots reached 41,041 people, promoting HTC, GBV awareness, condom use, and SBCC education on opportunistic infections and nutrition. Over 2 million condoms were distributed through 1,000 fixed/mobile outlets—1.5 million in Gambella alone. LIAE supported 119 PLHIV associations, 14 MARPs Task Forces, and 111 SSGs with 2,220 members, offering vocational and skill-based training to enable income-generating activities.

The five-year project was funded by USAID/Population Services International (PSI) with a budget of \$2 million. Qualitatively, LIAE's MARP programs enhanced infection prevention, improved referrals to quality services, boosted MARP program visibility, expanded service demand, encouraged behavior change, and promoted economic empowerment and gender equality. The Gambella HIV program received significant national media coverage, including national TV features and repeated airings on SNNPR and Oromia radio stations, increasing public awareness and program visibility.

5. MULU Work Sites: It is funded by USAID/World Learning Inc to provide comprehensive SBCC education; bio-medical including treatment services and structural services to work site community and MARP groups working in gold mining and plantations. It was implemented by LIAE in 21 sites of the Gambella region and provides direct services to 35722 MARPs or priority groups in work sites including gold mining sites, large-scale farmings, industries, etc.

6. Campus Culture Renaissances Destined for Attainable Behavioral Change (C-CRDA-BC) Funded by CCRDA/Irish Aid /BCC Project/: The overall objective of the project is to reduce the spread of HIV among University society focusing on students through the promotion of abstinence, being faithfulness as desirable behavior for young people and promotion of other behavioral change techniques for most at risk targets of the campus. The project focuses on Abstinence and being faithfulness (AB) and other prevention mechanisms beyond A or/and B encompassing mainly students whose ages range from 17-35. This project uses an institution-based approach targeting mainly students and the intervention covers two Universities namely Hawassa and Dilla. The total target population who was reached by the trained 200 students/ teachers peer educators using various outreach education programs is 16450 students.

7. Strengthening Community Response to HIV/AIDS (SCRHA) /Partly BCC Project/: The project increased access to palliative care for 156 PLHIV and 204 OVC focusing on economic empowerment schemes through training 36 health extension workers as volunteers. Likewise, the project improved the capacities of CSOs through facility upgrading, staffing, and training. The program provided SBCC education on FP and RH, nutrition for bedridden adults and adolescent men/boys and women/girls, HCT/STI, PMTCT, and ART, and delivered community-driven economic, nutritional, and material, psycho-social, and medical support. It is funded by FGAE/PATH. It was a four-year program that was implemented in the selected woredas of Hadiya Zone, SNNPR. It is a USAID/Path Ethiopia-funded project.

8. CSWs and Child Care Project: The major purpose of the project is to support girls engaged in Commercial Sex Work (CSWs) to develop sustainable livelihoods to move out of CSWs and for street children to reduce risk behaviors. The project helps the community members act to reduce the risky behaviors of commercial sex workers and clients of commercial sex workers change attitudes toward CSW. Likewise, the project provided livelihood-based education to underage commercial sex workers to act to protect their sexual health and ensure economic stability. Peer educators also use their skills to provide training and help CSWs to develop alternative livelihoods. The project volunteers also empower vulnerable and street children through locally creating social and economic opportunities. It has been implemented in one town in Hadya Zone, SNNPR. The project reached more than 3745 CSWs and street children through its integrated health services and economic empowerment activities. It is funded by the EU/Retrak.

9. Community HIV Care and Treatment Project (CHCT): It was funded by USAID/Project Hope Ethiopia Office. It has been implemented in the Gambella and Addis Ababa regions. This program used a case management framework consistent with PEPFAR guidance and integrating critical elements of HAPCO's community-based HIV/AIDS care, treatment, and support guidelines by using the existing Care Coalition Committee/Counsel-CCCs/CCs; PLHIVs as Community Resource Person; Health Extension Workers; etc that are responsible for beneficiary recruitment, coordination of community-based HIV/AIDS services, quality of services and graduation of beneficiaries. The major activities were HIV Testing Services (HTS)-providing ICT and assisted HIV-self test services for clients who refused to go to health facilities; Care and Support-Comprehensive care and support activities, Tracing and reengage of LTFU clients, Support Groups, VSLA, and CAGs/PICADs; Digitizing community-based case management. It had a 12,300,000.00 ETB (about 400,000.00 USD) investment portfolio and reached more than 25000 clients.

10. Family-Focused HIV Prevention Care and Treatment (FFHPCT): The first implementation phase of this project covers three years (2020/2021 to 2022/2023) and is directly funded by USAID. The second phase of the three-year program started on October 1, 2023. It is an HIV epidemic control grant for local orphan and Vulnerable Children Services in eight SNUs of the Gambella region. It is a three year. The major priority objective of the projects is to increase access & demand for family-focused HIV services that reduce HIV incidence in the community through: increasing adherence and retention of ART through targeted community case management including adherence counseling and support, disclosure, and psycho-social services for PLHIV; implementation of community-based differentiated care model, including health care managed groups and adherence clubs to improve adherence and retention on ART and achieve viral load suppression; improving linkage to and uptake of GBV services by strengthening referrals to health facilities for PLHIV exposed to GBV in communities; providing mental health and psychosocial support services (MHPSS) for PLHIV and HIV affected target population; providing a comprehensive service for OVC; and preventing or reducing HIV and violence among 9 – 14-year-olds. The other or second major objective of the project is to strengthen the utilization of data to monitor service delivery, generate evidence for decision-making processes, and conduct quality improvement of program services. We planned/will plan to directly reach about 12500 beneficiaries including OVCs and PLHIVs. The total allocated budget is about 1.2 million USD.

11. Sexual and Reproductive Health (SRH) Privileges Services and Information funded by Kinderpostzgeles: The goal of the project is to increase access to quality, comprehensive, and youth-friendly Sexual and Reproductive Health and Privileges (SRHP) information and services for girls and young women. LIAE was implementing the project in 4 woredas of Hadya Zone and recently is also planning to scale out to other adjacent zones. More than 10000 girls and young women, 4304 students, 4500 men & boys, 111 members of mainstreaming committees, 30 Journalists, 18 FGMPs/TBAs, 18 CHEWs/HP, 72 Teachers/Facilitators, 6000 Family Members, 15,000 CD groups, 3650 Idirs & Religious Leaders & Members have benefited from the education, economic strengthening programs, clinical services, etc. of this specific project. The total indirect beneficiaries were, (that included people reached using; Mass & Mini media) 169383 people (150,000 via mini media, Parents Day 9000, Champions Community 10,000, Orientation/Sensitization/Launching workshops 365, and Government Orientation 18).

12. HER-CHOICES: This project is an SRH project and has a goal to contribute to the improvement of the social and economic status of affected girls through education and integrated economic interventions that lead to reduced SRH problems in Hadiya (Shashogo Woreda) and Silte (Hulberg and Sankura Woredas) zones of SNNPRs. The project has set out to achieve six strategic objectives to mitigate girls' social and economic challenges; to improve Girls' knowledge, attitude, practices, and skills towards the SRH practices and life leadership; to foster girls' school participation; to improve SRH services provision for girls; to improve income of parents of girls or young women by access to financial services and self-helping groups; to create community awareness and to strengthen government structure and systems capacity in improved SRH practices; and improved school participation for girls through trainings and conversations. LIAE has reached 3900 married and single girls and more than 25000 other intermediary project targets directly. The total budget for the project is 10,196,797.50 ETB.

13. TPT Project: Improving TB Preventive Therapy among under-five Children through Engagement of Women's Indigenous Associations in Ethiopia: This is an innovative and new community-based TB intervention approach. The general goal is to improve TB preventive therapy uptake among under-five children with contact to index TB cases in implementation areas from 54% to 98% through the implementation of two specific objectives: building the capacity of 60 women iddirs and engaging them in the strengthening of TPT for under-five children; supporting the monitoring and treatment observation of under-five children on TB preventive therapy and get at least 95% of children complete the treatment. In collaboration

with UNOPS/KNCV-Tuberculosis, LIAE served the target population using the community-based TB preventive treatment approach under TB REACH Wave 7 by building the capacity of women-led self-support groups called Iddirs. This program achieved 99% treatment completion rates in nearly 1000 children in 24 districts. Moreover, on World TB Day 2020, LIAE and its staff were recognized as “Global TB Elimination Champions”.

14. Zero Dose Children Program: LIAE researched reaching Zero Dose Children in 130 remote sites/areas of SNNPR, Gambella, B/Gumuz, and Oromiya Regions; and funded by Project Hope/Bill & Melinda Gates Foundation. The goal of the project is to generate evidence that informs the steps along the IRMMA Framework toward reaching under-immunized and zero-dose children in under-served settings in Ethiopia. Specifically, it is to identify where and who are zero dose children and missed communities, why are children being missed, and what families that live in under-served communities think, feel, and do about vaccines. It is also intended to reach the most feasible and cost-effective strategies for reaching zero-dose children and under-immunized children and monitor and measure how sufficient quality data to be made available sufficient and timely resources reaching the right administrative levels to facilitate reaching zero-dose children. The project also advocates which voices influence key decision makers in particular communities if the modalities of the service are worth investing and what evidence and argument will be most compelling for advocacy agencies.

15. IMPAACT4C19 Program: we have started to implement the project on catalyzing community advocacy and demand creation for COVID-19 diagnostics and therapeutics for IDPs in the Amhara region which was supported by UNITAID/ Treatment Action Group (TAG) from 2022 to 2023. The goal is to contribute to the national preparedness in establishing demand creation to support accessible preventive, diagnostic, and therapeutic modalities of COVID-19 among internally displaced people located in Debre-birhan township, Ethiopia by August 2022. The project created demand to COVID-19 prevention, diagnosis and therapies through knowledge sharing to 165000 people; created better access to preventive, diagnostic and therapeutic services of COVID-19 among 10000 internally displaced people; and built the capacity of 200 volunteers, government leadership and other community structures on advocacy and prioritization of COVID-19 services among the IDPs.



The sample pictures show challenges of Health Service Provision at rural settings.

2.3. Education and Skill Development Programs (ESDP)

ESDP is one of LIAE's longest-running initiatives, designed to build community problem-solving abilities, values, and skills—starting with foundational education and extending across all levels.

LIAE's education program focuses on enhancing access, quality, equity, and efficiency in the education system. The organization has extensive experience in school construction, removing educational barriers, and improving school performance through collaboration with local education offices. Core interventions include school system support, active learning methods, student cognitive development, community engagement, school leadership mentoring, teacher training (short- and long-term), and infrastructure development.

To date, over 1,350 teachers have been supported in their professional growth: 300 at diploma level, 50 at BA/BSc or MA/MSc levels, and 1,000 via short-term trainings. LIAE has built and fully furnished 20 new schools, serving over 41,500 children (in 10 year's period data). Additionally, 50 schools were strengthened through classroom and library construction, laboratory support, girls' health corners, WASH facility development, mother-tongue material translation, and the promotion of active learning and early childhood education.

LIAE also targets harmful social norms impacting children's education by innovatively addressing child labor, child violence, FGM, and early marriage. The organization works closely

with local governments, communities, and stakeholders to strengthen education systems and structures.

Since 2004, LIAE has enabled access to education and skills training for 251,606 individuals—including out-of-school children, girls, youth, women, and adults—through formal and informal learning, SBCC, life skills, WASH education, adolescent nutrition, and economic support. Furthermore, 3,377 women and married girls have benefited from the livelihood-led adult literacy program.

2.3.1. Key Sub-Sectors in ESDP

- **Access Creation (AC):** Expand educational and skill development opportunities while reducing socio-economic barriers that limit access.
- **Quality Improvement (QI):** Enhance the overall quality of education through deliberate and targeted interventions.
- **System Advancement (SA):** Strengthen systems within schools and education offices to ensure better service delivery.
- **Equity Enhancement (EE):** Eliminate obstacles preventing marginalized groups from accessing education.

2.3.2. Major Activities Performed under the ESDP Department Were

	Key Intervention	Major Activities
	Creating Access to Education:	<ul style="list-style-type: none"> Construction of Schools (Full or part of the schools) Renovation of Schools Establish Boarding Schools Furniture and Equipment Support Educational Material support Laboratory, Learning Centers and Library Strengthening Life Skill and Vocational Skill Training Play Centers Establishment-especially for O-level children Introduce Active Learning and Thinking Schools Programs Establishment of Rural Community and Library Centers Health Corners establishments to girls-access perspective
	Improving Quality of Education Services:	<ul style="list-style-type: none"> Schools Social Responsibility-focusing on children life changes Education owners' creation and strengthening at community. Active Learning Program Thinking School Approach: for students, school, etc Implementing and strengthening School Social Dialogues through Mini-Media Teachers Training: short term and long term Capacity Building: TA supports, leadership training, qualified teachers' recruitment, etc Evidence generations-qualitative and quantitative
	Increasing Education Efficiency	<ul style="list-style-type: none"> Expansion of low-cost schools Promotion of roles of CSR Expansion of Community Need and Asset Based Education Program Supports Policy Dialogues ASAP-education programs
	Ensuring Equity	<ul style="list-style-type: none"> Gender Perspective: Girls Education Child Labors-CLEF Promotion of roles of CSR Marginalization Community Education Stigma and Discrimination Service Supply Side Perspective

2.3.3. Summary of Quantitative Achievements

REACHED					
21200 KSHs and Education Intermediaries Engagment	251606 Community Education Related School Mobilization and SBCC	1350 Teachers Training and Education (Short Term and Long Term	51606 children (mostly out of school) got access to education	20 Schools and 5 resource centers constructed	3800 out of school children freed from harmful labour and enroled in schools



Fig: Services newly established by LIAE

Few of the projects implemented under ESDP include:

1. Adult Education and Livelihood-Led Women Literacy Projects:

In partnership with Pact-Ethiopia, LIAE has been implementing these projects in six Woredas of the SNNPR-Hadiya Zone. The initiative includes both Alternative Basic Education (ABE) for children and a functional adult literacy program. As a continuation of the adult literacy work, a pilot functional literacy program specifically for women was introduced in one of LIAE's target areas. Multiple stakeholders, including the Women's Association, were engaged in executing the program. Facilitators were recruited to carry out the learning sessions. However, it became evident early on that these facilitators required training in adult education methodologies. In

response, Pact-Ethiopia and LIAE organized several Training of Trainers (TOT) programs involving all relevant stakeholders from the pilot Woredas.

The objectives of the training were:

- To train Women AFL facilitators in adult learning methodologies (Andragogy)
- To communicate the goals of the Women AFL Program
- To orient women focal persons, recognized as key stakeholders
- To build a shared understanding of the program

This program directly reached 12,200 adults and 3,377 women.

2. Child Education Program:

This was a seven-year (10 million ETB) initiative aimed at providing Alternative Basic Education for children and non-formal adult education tailored to local contexts, with the broader goal of enhancing rural livelihoods. A core focus was on educational and recreational services for marginalized groups and youth in rural settings.

The program targeted the empowerment of the Gafat Beta Israel (GBI) ethnic minority and surrounding communities through ABE, enabling children to acquire academic and life skills. This approach was designed to promote socioeconomic integration and participation in local development efforts.

Key initiatives involved were building and furnishing schools, translating educational content into local languages, creating guides and textbooks, training volunteers and Parent Mobilization Teams (PMTs), providing capacity building support to Teachers and school leaders, construction of playgrounds, establishment of health services, and providing life skills training for children, families, and communities.

This program directly benefited over 28,381 children, youth, women, and other vulnerable groups, including 5,600 members of the GBI community.

3. Stopping Child Labour through Education, Awareness-Raising, and Networking (S-CLEAN):

This project promotes awareness and stakeholder engagement in child care and protection, advocating the belief that every child belongs in school and should not be engaged in labor. The Objectives include: Increasing access to quality education for out-of-school children; Enhancing supportive governance and social environments; Strengthening economic opportunities for low/no-income families; Promoting awareness among local investors and

business people on child wellbeing; and Empowering marginalized groups through social and economic inclusion.

Direct beneficiaries include 4,537 out-of-school children and 16,750 parents and volunteers. The project is funded by SKN-Netherlands with a total budget of 7.0 million ETB.

4. Mitigating Girls' Education Challenges:

This initiative is designed to overcome key challenges hindering girls' education, focusing on improving Access, Efficiency, Quality, and Equity. Carried out in the Silte and Hadiya Zones, the project seeks to increase educational opportunities for girls, enhance the quality of instruction, and promote gender equality alongside greater community involvement.

The project directly benefits 3,512 girls and 18,500 intermediaries, while an estimated 250,000 community members are expected to gain indirectly. The program is funded by the European Union in collaboration with the Ethiopian Muslims Relief and Development Association (EU/EMRDA).

Core Activities: Partnering with government bodies and public institutions to broaden access to education. We were, equipping six targeted schools with 130 sets of practical learning aids to support classroom instruction; hosting awareness sessions for 1200 parents, focusing on family planning, nutrition, and early childhood development; providing 30 display shelves to showcase educational resources; delivering professional development through training for 130 teachers and facilitators; and improving the physical and recreational learning environments by installing: 6 merry-go-rounds; 6 four-meter-long slides; 6 two-seater swings; 6 four-stage climbing ladders; 6 balance beams; and Developing playgrounds in six schools.

5. Gender Equality Project: MAKING CHANGE HAPPEN:

This project aimed to improve the social and economic conditions of girls through education and integrated economic strategies. It sought to reduce Gender-Based Violence (GBV) and youth substance abuse in Hadiya (Shashogo Woreda) and Silte (Hulbarag and Sankura Woredas), SNNPR. Key stakeholders, including health workers, teachers, and volunteers, played crucial roles in facilitating services and fostering positive attitudes toward GBV and substance abuse issues. School clubs and youth groups served as platforms for sharing information. Community conversation sessions also helped change harmful behaviors and practices.

The project included outreach efforts to extend positive practices beyond the target kebeles through student and community volunteer engagement. It also promoted youth

opportunities—especially for girls and women—through active citizenship and social enterprise models, helping to reduce the social, economic, and political effects of GBV and substance abuse. Over the two-year project duration, 25 Kebele were directly involved; 35,096 people were directly supported; and 102,500 people were indirectly benefited.

6. Mitigating Young School Girls Social-Economic Challenges through Comprehensive, Institutionalized and Inclusive Actions (MYSGC).

To support girls' education, a project funded by SIDA/Initiative Africa was launched in Wachamo Preparatory and Heto Secondary Schools in the Hadiya zone of SNNPR. The initiative introduced the Thinking School Approach (TSA) to enhance the academic performance, life skills, and social standing of high school girls. As a result, 5,470 girls showed improved academic outcomes; and 2,200 students, teachers, and school leaders were trained by international trainers from South Africa on TSA for fostering leadership and critical thinking. The project also strengthened the school environment by engaging 2,750 girls, boys, and parents in discussions on gender and communication, leading to positive behavioral change. Moreover, school systems were reinforced to better support girls' overall well-being.

7. Achieving improved learning outcomes for children from a resource-poor (AILO)

The key objective of the project was to improve learning outcomes of children particularly girls, from resource poor families, with focus on early reading comprehension for better overall achievement throughout primary education and beyond. The operational areas of the project was Addis Ababa City Administration.

Accordingly, the projects supported the learning outcomes of 10,360 children particularly girls, from resource-poor families on early reading comprehension. It provided more than 30 sets of learning materials and 30 sets of children's playing and learning facilities. The project also provided practical training to 60 teachers and facilitators on improving the learning outcomes of children in their respective schools. We also conducted three training sessions on parent education on family size management, nutrition, and child development for 200 parents.

It was funded by CSSP Ethiopia Program which is a multi-donor funded (contribution from UK, Ireland, Sweden, and Norway).

8. Employable Organic Farming Training to Rural Women Groups, Integrating With Literacy and Saving Activities, and Involving Community Engagement Strategies in SNNPR, Lemo Woreda of Hadiya Zone:

With support from the CSSP Ethiopia Program, a project was implemented in Addis Ababa to boost early reading comprehension among 10,360 children—especially girls—from low-income families. Aimed at improving long-term academic success, the initiative provided over 30 sets of learning and play materials, and trained 60 teachers and facilitators in effective teaching methods. Additionally, 200 parents participated in workshops covering family planning, nutrition, and child development, contributing to a more supportive learning environment at home.

9. Rural Village Library Network and Youth Resource Centre (RLN) Establishment Projects:

To bridge the rural-urban knowledge gap, LIAE established four fully equipped Community and Youth Resource Centers across SNNPR and Illubabor Zone. These centers—located in Shone, Digba, Dipa, Algee, and Sache—serve as hubs for reading, training, and community engagement, offering programs on HIV/AIDS awareness, sanitation, literacy, income-generating activities, and sexual and reproductive health. LIAE also enhanced the capacity of 20 school libraries and labs with technical and material support and built eight Information Prevention Centers in high-risk towns across Oromia and SNNPR to deliver SRH education, counseling, and preventive services. The initiative was backed by international donors including the British and Japanese Embassies, Save the Children USA, Initiative Africa/SIDA, and Geneva Global/USAID.

10. Promoting Equity, Efficiency and Effectiveness in Gambella TARGET Schools (P3Es):

In response to the low early education indicators in Ethiopia's Gambella region, a two-year project funded by the Education Development Trust (EDT) was launched to improve early-grade learning outcomes. Gambella, an emerging and under served region, faces unique challenges—including low pre-primary and primary enrolment, weak infrastructure, and complex social dynamics. The Education Statistics Annual Abstract (2018/19) revealed that the region's gross and net enrolment ratios for pre-primary stood at 55% and 29%, far below the national averages and the Sustainable Development Goal (SDG 4.2) targets.

Studies by LIAE in 2017 identified key barriers to girls' education: early marriage, polygamy, gender-based violence, inheritance customs, dowry-driven marriages, and cultural biases against educating daughters. These challenges disproportionately affect girls and contribute to

persistent gaps in school attendance and performance. To address these issues, the project focused on four strategic areas:

Community Engagement: LIAE worked to strengthen local education systems through active community involvement. By equipping Parents-Teachers-Student Associations (PTSAs) and Kebele Education and Training Boards (KETBs) with tools and strategies, the initiative encouraged civic engagement and accountability in school improvement efforts.

Teacher Performance: Using LIAE's School Capacity Development (SCD) approach, teacher assessments, and audits were conducted to promote inclusive teaching and effective instruction in basic literacy and numeracy, ultimately improving the quality of education in the targeted schools.

Inclusion and Diversity: The project aimed to empower girls to remain in school while dismantling learning barriers for marginalized groups, including internally displaced children, children with disabilities, and mobile populations. This involved supporting Girl Clubs, Inclusive Education Resource Centres (IERCs), and delivering training on gender inclusion for educators and administrators.

School Leadership: School principals and supervisors received targeted training to strengthen data systems and decision-making processes. This component promoted evidence-based planning and cross-school learning to build stronger, more responsive school leadership. The project reached nine schools across Makoy District in Gambella—serving Adura, Gier, Kutguar, Kondey, Bolok, Bildak, Ketema Zuria, Tomrok, and Worach. It directly benefited 50 PTSA/KETB members (20 women, 30 men) per kebele, 108 teachers (40 women), 4,500 students (including 5% with disabilities), and 18 head teachers. It also sought to install a culture of gender equity and inclusion while improving student outcomes, especially for girls. Expected outcomes include improved community involvement, stronger school leadership, increased girls' participation and performance, and more inclusive, data-driven educational environments. The project ultimately aimed to create a replicable model for raising education standards in one of Ethiopia's most disadvantaged regions.

11. Integrate WASH Programs with Social Accountability and Education Project:

LIAE integrated its WASH (Water, Sanitation, and Hygiene) program across its various projects, recognizing the need for improved sanitation, hygiene, and potable water supply, particularly in rural and remote areas with limited access. One key approach was WASH education, where beneficiaries in target kebeles were organized into small groups (5-10 people) to promote environmental sanitation and hygiene through volunteer-led education. Additionally, the organization supported farmers by providing toilet facilities for each household, constructing over 55 low-cost toilets in collaboration with local communities and government offices.

A significant challenge for the marginalized 'Gafat Bete Isareal/GBI community and surrounding populations was limited access to potable water. LIAE addressed this by renovating one major spring and two smaller ones, as well as improving water points for the target communities. These renovations followed a collaborative assessment with the woreda water, mines, and energy office, which led to a detailed budget proposal. However, due to budget constraints, the construction of new water points could not be completed, though efforts were made to maintain the existing pipeline between Olewa and Megacho Kebeles of Hadiya Zone, Gibe Woreda. The assessment report also proved valuable in securing additional funding for future water-related projects.

In the Hadiya Zone of SNNPR, LIAE tackled the issue of water scarcity in 20 schools located in hard-to-reach areas. Since these schools lacked water both within the premises and in nearby kebeles, the organization constructed 8 dug water wells using low-tech methods and 12 locally-made wells, ensuring access to clean water, crucial for the survival and well-being of the school communities.



2.4. Economic Empowerment & Development Programs (EEDP)

This program is designed to focus on expanding economic opportunities and enhancing the livelihoods of both youth and adults.

Key elements:

SBCC: Enhance behavior change communication (BCC) to foster an entrepreneurial mindset.

Livelihood: Improve the livelihoods of low-income households.

Job Creation: Increase job opportunities for youth by diversifying into high-yield sectors.

Policy: Develop and advocate for alternative economic policies.

The overall strategic business development approach aims to create and implement eight progressive growth models. These models will strengthen small business associations, progressing from micro-enterprises to larger investment groups. Each stage will have its own set of minimum service standards and flexible timelines, aligning with government initiatives for the self-reliance of small business associations.

A few of the significant projects being carried out under the EEDP include:

1. Capacity building support to Gafat Beta Israel-BGI Minority and socially marginalized groups:

The service package includes education, health, advocacy, economic empowerment, and psycho social support for GBI (Gafate Bete Israel) communities through direct services and referral mechanisms. LIAE surveyed the causes and effects of GBI community marginalization. The report showed GBI children were more disadvantaged than other local children, facing limited access to government and NGO-provided health and education services. Key health issues included poor hygiene, reproductive health problems, early marriage complications, TB, and HIV/AIDS. The project aimed to empower marginalized groups through early childhood education, health, adult literacy, job creation, vocational training, advocacy, and awareness campaigns. It was successful, with high recognition from the local government and community. The key activities included:

- Supporting GBI-C economic empowerment groups with finance, materials, and training.
- Organizing coffee ceremony learning and discussion groups for health education.
- Preparing manuals for these groups.
- Providing critical treatment for 100 bed-ridden children.
- Conducting health campaigns for 15,000 people from GBI and dominant communities.
- Training Anti-Marginalization Volunteers.

- Giving access to prevention education, helping participants change attitudes and practices.
- Providing clinical support for intestinal and eye treatments.
- Involving community representatives and beneficiaries in a joint evaluation with the Zone Finance and Economic Department.
- Organizing self-esteem-building campaigns for marginalized women and children.
- Briefing government and religious leaders on empowering disadvantaged children.
- Encouraging association members to become active in past programs through seed capital and training support.

150 adolescent girls benefited from economic empowerment, and 350 out-of-school children were reached through education. Community activities reached over 3,500 GBI members and 25,000 from the mainstream community. Psychosocial and advocacy actions were integrated across all activities. The project ran for six years in Hadiya and Kembata Zones, SNNP Regional State, in collaboration with Global Fund for Children.

2. Fostering/Improving the Social-Economic Level through Comprehensive and Inclusive Actions (ISEL-CIA) among the Socially Marginalized Gafat Bet Israel Communities or BGI-C:

In various parts of SNNPR—particularly Hadiya and Kembata Tembaro Zones—marginalized caste groups known as "BGI-Cs" face deep-rooted social and economic exclusion. A 2007 assessment by Love in Action Ethiopia (LIAE) estimated the BGI-C population in these zones to exceed 60,000. A 2015 LIAE survey revealed a 94% illiteracy rate. On average, each household had nearly seven children, far above the national average of 4.8. Yet, only about one child per household attended school, & most only reached the primary level (grades 1–4).

To tackle this marginalization, LIAE provided education access to over 950 BGI-C children and vocational training for around 300 women and girls. These programs included skills in food preparation, balanced nutrition, and energy-efficient tools, helping participants generate income. Additionally, the Health and Well-being program, funded by the Global Fund for Children, reached about 10,000 BGI-Cs, covering HIV/AIDS, reproductive health, family nutrition, hygiene, and sanitation.

Exemplary Achievements: LIAE began working with BGI-C communities in 2006. In 2009, it launched the "WHEEL MODEL," a holistic approach addressing marginalization through education, health outreach, structural intervention, and livelihood support. The model aimed at inclusive, sustainable integration.

Initially, LIAE encouraged BGI-C children to attend nearby community schools. However, social stigma—especially from the dominant Welleba group—discouraged both BGI-C and Welleba families from sending children to mixed schools. Attempts to open BGI-C-only schools in rented spaces in 2007 also failed to gain traction.

In response, LIAE conducted a community assessment in 2009 and launched the Combination Intervention Program (CIP). This strategy emphasized building schools in areas with both high BGI-C populations and strong demand for education. Eight Alternative Basic Education Centers (ABECs) were constructed, serving over 8,000 students—950 from BGI-C communities.

The new ABECs became inclusive platforms where both BGI-C and Welleba students learned together. Over 20 BGI-C parents joined school management committees, and nine BGI-C facilitators were hired and enrolled in diploma programs with Hossana Teacher Training College. Even Welleba facilitators received anti-discrimination training. As a result, BGI-C students gained confidence and equal access to education, social activities, and support, successfully promoting integration and inclusion.

LIAE also launched an economic empowerment initiative, training 300 girls in leadership, entrepreneurship, health, and modern pottery-making. These girls formed three legal associations, connected with credit services, and were provided a fully equipped pottery production center. These associations now hold a combined capital of 500,000 ETB. This initiative was supported by Kinderpostzegeles-Netherlands and the Global Fund for Children.

The project aimed to improve social and economic inclusion for the BGI-C community in Gibe Woreda, Hadiya Zone. It directly benefits 8,046 BGI-C individuals and indirectly supports 18,863 members of the general community across 15 kebeles. Led by LIAE in collaboration with the Alliance for Poverty Eradication and Development (APED) and Harotessa Association Ethiopia, the project integrates SBCC tools, asset-building, nutrition, skill development, savings and credit services, and better access to education and healthcare. It also strengthened local systems to implement inclusive programs based on the watershed approach of the CSSP.

3. Integrated Economic Empowerment Program to LIAE Vulnerable and Most-At Risk Groups:

The project focused on reducing HIV, TB, SRH, and NCD vulnerabilities by addressing both behavioral and structural factors like poverty and unemployment. LIAE integrated economic empowerment into its health programs to help reduce infection risks by improving livelihoods. This included support for vulnerable groups such as female sex workers, PLHIVs, widows, and at-risk children through self-saving and income-generating groups.

The approach followed three implementation phases—Organization, Strengthening, and Sustainability—with activities like:

- Establishing and legalizing savings groups
- Providing vocational and business training
- Offering micro-credit support
- Monitoring and sharing best practices

By embedding this model into five health and education projects, LIAE formed 135 business groups, benefiting over 1,470 people.

4. Phase-2: Improving the Social-Economic Status through Comprehensive and Inclusive Actions (ISEL-CIA) among the Socially Marginalized GBI-C:

Love in Action Ethiopia (LIAE), with sub-partners Alliance for Poverty Eradication, Development (APED) and Harotessa Association Ethiopia, identified the deep-rooted marginalization of the GBI community through years of work in SNNPR, particularly Hadiya Zone. This project aimed to integrate the Hard-to-Reach GBI community with mainstream society by providing targeted social and economic services. It was implemented in 15 Kebeles of Soro Woreda, Hadiya Zone, SNNPR, with funding from CSSP2/British Council. The key interventions included access to sustainable income, quality education, health services, policy advocacy, and stakeholder engagement. It directly benefited 39,201 individuals, including 7,200 from the GBI community, and indirectly reached 25,000 people.

Key Achievements

- 200 GBI members in 10 Self-Saving and Helping Groups gained sustainable income.
- Education access, quality, and equity improved for 700 GBI children; 37 parents engaged in school management; 100 teachers trained; 24,807 community members mobilized.
- Health outcomes improved for 6,646 GBI individuals through better access, to education, and housing.

- Capacity building was provided to 302 staff and community leaders through training, mentoring, and technical support.
- Social marginalization was addressed via community communication strategies and advocacy, reaching 6,034 stakeholders, including policymakers.



Fig. Pottery material production and business saving by GBI-communities.

5. Promotion of Start-up Businesses (SB) into Innovative Businesses (IB) among the unemployed Youth (PSI-Y):

The overall goal of the program is to enhance the livelihoods and overall well-being of unemployed youth. It specifically aims to establish, strengthen, and transition Small Business Groups (SBGs) into Innovative Business Groups (IBGs) over a five-year period, thereby improving the lives of newly unemployed youth. This will be achieved by integrating them into High Yield Business Sectors (HYBSs) through small-scale enterprises. The project is funded by the German Federal Ministry for Economic Development in collaboration with KKS (BMZ/KKS).

Key Expected Outputs

As a result of implementing the project objectives, the following outcomes are anticipated:

- Capacity-building packages delivered to 10,000 individuals (with at least 50% being women).
- 50 SBGs (500 members total) enhanced their skills in business development and management.
- All 50 SBGs qualified for financial support.
- Strengthening of more than 10 local business networks and linking them to small business programs.
- 5 SBGs (50 members) gained access to appropriate technologies.
- Awareness was created among 65,000 people, with linkages to the project.

- 1,200 Youth Mirror-Groups engaged to promote the project concepts.
- 300 small businesses were empowered and successfully transitioned into IBGs.
- 12 staff members were trained, and LIAE benefited from capacity development support.

Note: Target groups may be counted multiple times if they receive more than one key service.

The target Groups are classified:

Direct Beneficiaries:

Approximately 12,634 individuals (primarily youth aged 14–50, accounting for 99% of this group) will receive structured and standardized service packages, financial investment, and direct engagement with the project.

Indirect Beneficiaries:

An estimated 265,250 individuals—including community members, government stakeholders, and others—will benefit through unstructured outreach such as mass campaigns, IEC materials, and media efforts.

Major Implementation Steps (Chronological Activity Flow)

- Conduct feasibility study and project design.
- Launch and sensitize stakeholders through workshops and re-planning activities.
- Select youth groups per LIAE's ES Guideline.
- Provide ES program orientation to 10,000 youth, followed by peer-led, curriculum-based education targeting 500 SB groups (10,000 members)
- Form and legally structure 50 SBGs, including by-laws, licensing, passbooks, and savings boxes
- Facilitate regular SBG meetings and sign MOUs with LIAE.
- Conduct Training-of-Trainers (TOT) sessions and cascaded capacity building on Core Business Knowledge (CB-AK)
- Initiate personal savings in SBG group bank accounts.
- Guide SBGs in local market assessment and development of group business proposals
- Establish business linkages with 10 key stakeholders.
- Provide matching funds based on ES Guideline criteria.
- Identify suitable small-scale technologies and connect 5 SBGs accordingly.
- Begin business operations, including documentation and record-keeping
- Facilitate access to credit and financial support.
- Conduct promotional campaigns showcasing SBG's success to other youth.
- Develop and implement IBG transition plans (including SAK design, SOPs, and performance assessments)

- Conduct TOT and cascade training for 30 IBGs
- Provide IBGs with technical, financial, and technological assistance.
- Perform impact assessments and final evaluations with signatory institutions and KSS.
- Transfer outcomes and business groups to key stakeholders, particularly government offices and credit institutions

2.5. Capacity Building (CDP)

The department is responsible for strengthening the capacities of relevant institutions and communities, as well as promoting LIAE's three identified cross-cutting agendas.

Key aspects

- **Institutional:** Strengthen systems and structures of sub-partners and government organizations for improved service delivery.
- **Community:** To foster capacity and engagement of new and existing platforms of the community.
- **Cross-Cuttings:** Consider and integrate marginalization, gender, and disability with all the programs of activities.

LIAE focus areas under CDP

2.5.1. Community Capacity Building

Throughout its program implementation, LIAE has strategically prioritized capacity building and sustainable partnerships with community-based organizations, religious institutions, HIV/AIDS committees, and advisory groups. From the start, the organization fostered collaboration by conducting regular consultations and formalizing responsibilities through agreements, enabling these structures to assume leadership even after project funding ended. To ensure sustainability and local ownership, LIAE introduced the Community Mobilization Cycle (CMC), which engaged communities through a structured six-phase process. In the Preparation Phase, an Advisory Committee (AC) composed of community leaders and stakeholders was formed to map target areas and populations. The Organization Phase involved launching sensitization workshops and orienting stakeholders about the project goals. In the Exploration Phase, the AC assessed community capacity needs and socioeconomic challenges. These insights informed the Community Re-Planning Phase, where action plans were co-created with the community. During the Action Phase, LIAE and local teams collaborated to execute the plans while strengthening local capacities. Finally, the Evaluation Phase facilitated joint assessments with AC members, government officials, and beneficiaries.

Over the course of the project, LIAE supported more than 270 grassroots entities—ranging from HIV/AIDS clubs and school management committees to faith-based and community organizations—empowering them to lead local interventions.

2.5.2. Institutional capacity

In parallel, institutional capacity was reinforced through sub-grants provided to 15 NGOs, 35 government offices, and HIV/AIDS Associations. These partnerships were governed by contracts aligned with LIAE’s sub-partnership policy, ensuring transparency and accountability. More than 46 million ETB was disbursed to facilitate various initiatives under programs like ESAP, Education, TB, Advocacy, and TransACTION. LIAE’s structured capacity-building package addressed governance, finance, administration, IT, and gender inclusion, among others. Sub-partners were trained in internal controls, performance management, and policy formulation. LIAE also provided onsite mentoring, organized joint monitoring efforts, and promoted collaborative learning through substantial involvement plans.

2.5.3. Networking

A key component of this effort was strengthening networks with other organizations. LIAE partnered with forums such as the Hadya Zone NGO Forum, CCRDA, SHAFPCS, and the Basic Education Network (BEN), Education Clusters, promoting cross-sector collaboration to boost program effectiveness.

2.5.4. Cross-Cuttings

As one of the key capacity-building approaches, LIAE also embedded cross-cutting strategies, particularly around gender, youth, and protection. To enhance service uptake and protection of vulnerable groups, the organization improved referrals and community-based responses to gender-based violence (GBV). This included training on GBV screening and response, conducting awareness dialogues, distributing SBCC materials, and fostering girl-friendly environments. Advocacy efforts focused on promoting inclusion and safeguarding the rights of beneficiaries, particularly young girls and OVCs (Orphans and Vulnerable Children).

As part of its work with Most Vulnerable Children (MVCs), LIAE targeted children and caregivers affected by poverty, displacement, HIV/AIDS, and GBV. Services supported MVCs through access to shelter, education, health care, and psychosocial support. Categories included orphans, children of key populations, displaced families, minorities, and those facing stigma or disability. These interventions aligned with international definitions and best practices for supporting children impacted by HIV and related vulnerabilities.

2.5.5. Infrastructure Development

Finally, LIAE addressed broader community needs through infrastructure development and research. Projects included building two water facilities, five rural roads, and over 20 community shelters. In addition, LIAE conducted six research studies, ten capacity assessments, and 20 rapid assessments to continually refine its programming and understand the evolving needs of communities and partner organizations.

2.5.6. Organizational Development:

LIAE has established the OD department and works on **the Organizational Development of itself and its sub-partners. This is a** typically structured approach used by LIAE to strengthen the capabilities, systems, and performance of itself and the developing sister local organizations (sub-partners) it works with. Here's a breakdown of the concept:

- **Capacity Building** – Strengthening skills, systems, and structures.
- **Governance and Leadership** – Enhancing leadership practices and decision-making.
- **Strategic Planning** – Guiding the organization with a clear vision, mission, and objectives.
- **Monitoring & Evaluation (M&E)** – Improving data use, accountability, research, knowledge management, and communication.
- **Financial Management** – Ensuring sound budgeting, accounting, and reporting.
- **Human Resources** – Strengthening policies, staffing, and training systems.
- **Property Management:** develop a system to create efficient property management.

2.5.7. Subpartners:

Sub-partners are developing, often local, organizations that LIAE supports or collaborates with to implement programs. Organizational Development for sub-partners may include:

- **Training & Mentorship** – Building the sub-partner's technical and operational skills.
- **System Strengthening** – Helping establish HR, financial, and M&E systems.
- **Compliance Support** – Assisting in meeting donor or government requirements.
- **Resource Mobilization** – Developing skills for fundraising and sustainability.
- **Technical Assistance** – Offering expertise in areas like health, education, or community development.

2.6. Emergency and Relief Program (ERP)

LIAE's Emergency Response Program (ERP) Capacity

LIAE and its partners effectively and efficiently reach crisis-affected populations, ensuring access to lifesaving services, information, and humanitarian aid, particularly for the most affected people (MAP). In connection with this program, LIAE has supported IDPs from SNNPR, Gambella, Amhara, Afar, and Tigray.

Key Sub Programs:

- **Emergency Preparedness:** Coordination, assessments, and readiness activities under ERP.
- **Humanitarian Assistance:** Immediate aid for affected populations and MAPs.
- **Emergency Care:** Community and institution-based care for crisis victims.

LIAE's Emergency Relief Projects Under ERP (2020-Present):

Since 2020, LIAE has been actively responding to crises across Ethiopia, providing emergency aid to internally displaced persons (IDPs) from regions like SNNPR, Gambella, Amhara, Afar, and Tigray. These interventions have addressed urgent needs arising from the COVID-19 pandemic, severe flooding, and conflict-induced displacement.

A. Emergency Support for Street Children During COVID-19

The pandemic disproportionately impacted street children, leaving them without food, shelter, or protection. Labeled as Most-Affected Street Children (MASC), many faced heightened risks of infection due to a lack of sanitation and social support. LIAE's project aimed to assist 2,000 vulnerable children in Addis Ababa and Hadiya Zone by providing: Daily meals and hygiene kits (masks, sanitizers, soap); Psychosocial support and risk-awareness campaigns; and A structured data system to track beneficiaries. Funded by SKN-Netherlands, Project Hope-Ethiopia, and LIAE's resources, the initiative strengthened community efforts to protect street children long-term.

B. Flood Relief in Gambella: Amid the COVID-19 crisis, Gambella faced devastating floods after days of nonstop rain. Partnering with regional authorities, LIAE delivered emergency aid to over 2,000 adults and 250 orphans and vulnerable children (OVCs), offering food, shelter, and essential supplies.

C. Aid for Northern Ethiopia IDPs: Following the Tigray conflict, thousands were displaced to Debre Berhan. LIAE provided food, clothing, and recreational materials to 3,200 IDPs.

Additionally, the organization encouraged local communities to share celebrations with displaced families, resulting in aid worth 1.5 million ETB reaching 1,800 people.

D. Family-to-Family (F-to-F) Support for Hadiya Zone IDPs: A 2022 report revealed over 30,950 Hadiya Zone IDPs, with 404 still stranded in Hosanna camps. Many lost homes due to ethnic violence, receiving minimal assistance. LIAE's F-to-F program connected diaspora donors with displaced families, ensuring: Immediate relief: Food and cash transfers for 1,500 people (300 households), prioritizing pregnant/lactating women and large families; Long-term stability: Training on resource mobilization and coping strategies; and Advocacy: Workshops with government bodies to prioritize IDPs in jobs and healthcare. The project also provided special support to 250 lactating and pregnant mothers and women-headed families who received emergency food packages without considering the criteria. Through strategic partnerships and community engagement, LIAE's ERP projects have continued delivering critical aid while fostering sustainable recovery. The F-to-F model, in particular, demonstrated how diaspora involvement can amplify impact, offering both immediate relief and hope for long-term resilience.

The project also provided post-support orientation to the IDP Coordination Committee/Counsel (ICC) to be responsible for ensuring continuous follow-up of project temporary supports, maintaining relationships with diaspora communities, and protecting the safety of IDPs and proper use of materials after the closing of the food assistance. LIAE had also assigned matching funds for the project and made financial contributions which was tremendous and valuable to effectively and efficiently facilitate the program. The valuable contributions of the diaspora were publicly acknowledged by high-level officials and mainstream media. This recognition helped strengthen ties by reducing misunderstandings between the diaspora and the local government. In the long term, such efforts ensured the continued support of the diaspora in the future.



Some of the sample pictures of our Emergency and Relief Activities are

2.7. Environmental Protection and Enhancements, Food, Agriculture Programs (AFP)

The Department is responsible for environmental protection, food production and standards, agriculture, and fisheries focusing on rural communities of Ethiopia.

Key aspects:

- **Environment:** Strengthen environmental protection and enhancement strategies.
- **Food:** Improve food production and standards.
- **Agriculture and Fisheries:** Improve yields of production in agriculture and fishery sectors through the adoption of technology and increase efficiency and effectiveness.
- **Policy:** Generation and advocacy on the environment, food, agriculture, and fishery policy alternatives.

LIAE Implemented Project under AFP

A. Integrated Adult Literacy and Agricultural Education for Farmers: The project recognized that low literacy levels significantly hinder the economic conditions and farming

practices of targeted farmers. To address this, the adult literacy program aimed to enhance farmers' basic literacy and numeracy skills, empowering them to improve agricultural productivity.

Key Activities:

- Training volunteers, facilitators, and school teachers in adult education methodologies (Andragogy) to effectively support farmers. The training Objectives were to Equip Adult Functional Literacy (AFL) facilitators with adult education techniques; Clarify the goals of the AFL program; Orient women's focal persons as key stakeholders; and Foster a unified understanding of the program;
- Engaging stakeholders from pilot Woredas to ensure alignment with environment agendas and collaboration.
- Through this project, LIAE directly reached 12,200 adults, including 3,377 women. The projects were funded by PACT-Ethiopia and DVV International.

B. Women-Led Literacy Program for Female Farmers

The LIAE project also supported 3,377 women and married girls through a livelihood-focused adult literacy initiative, addressing their specific educational and economic needs that focused mainly on agricultural sectors specially in vegetable production.

2.8. Democracy, Public Accountability, Peace, & Good Governance Programs. (DAP-GP)

This department will work on the promotion of deliberative democracy concepts assuming that the capacity of citizens to be reasonable, cooperate, unify, and shape their views based on rational debate and the views of others to strengthen the capacity of peacebuilding, good governance, and accountability and democratic decision makings activities and processes. Citizens should reach consensus decisions for the interest of their localities or regions that self-interests have no place to occupy in the processes.

Key aspects

- **Peace Building:** To create environments and provide services for sustainable peace and co-existences, reconciliations; conflict resolution, integration of services with civil society and law mechanisms and address underlying structural and societal issues.
- **Good Governance:** To foster social/public accountability and transparency, performances on service delivery and resource management, and transparency.
- **Democracy:** To deepen democratic values in all the political processes of the state.

LIAE Projects under DAP-GP:

1. Ethiopian Social Accountability Program: it works on the promotion of Social Accountability practices and values of Health, rural road access, WASH, and Education Sectors that focus on providing quality services to citizens, especially to vulnerable groups. It has been implemented in SNNPR, Gambella, and Oromiya Regions. It has continuously been implemented for the last 10 years by investing a total budget amount of 31,740,333.00 ETB to reach about 50000 people directly and 1.7 million people indirectly.

Social accountability is understood as the process and approach by which ordinary citizens, who are the users of public basic services, voice their needs, preferences, and demands for improved and effective public basic services delivery and policies; and hold policy-makers and service providers accountable for weak or non-performance. On the demand side, social accountability requires that citizens understand and put into practice, their rights and responsibilities concerning access and use of basic public services. It aims to build capacities of and empower citizens, communities, and civic groups to demand better basic services and hold service providers accountable. On the supply side, social accountability requires that government officials and service providers develop and establish mechanisms and procedures to listen to citizens' voices and demands and to respond with appropriate policies and solutions to service deficiency in a time-bound manner. When effectively implemented, mainstreamed, and practiced, social accountability promotes and fosters collaborations and partnerships between government and citizens resulting in effective, efficient, and quality basic service delivery and responsible use of the same. It also addresses financial transparency and good governance challenges of the citizens at local and regional; levels. Some of the key strategies used in this project are:

Community and Citizen Level Researches, Implementation of Social Accountability Cycle, Joint Action Plans (JAP), JAP Monitoring and Evaluations, Mass Media Promotion, Community Wide Promotion, Financial Transparency and Accountability (FTA) strategies, anti-corruption movements, intervene and engage on good governance and democratic values, gender budgeting, etc.



Fig. ESAP program community activities and media promotion through regular radio programs

2. Peace Building Project: In collaboration with Pact Ethiopia LIAE has implemented various structured interventions aimed at preventing violence and conflicts for bringing about lasting peace. Traditional leaders, opinion leaders, youth group leaders, activists, leaders from women league groups, civic institution leaders, government office leaders, political leaders, religious leaders and opposition party group leaders, and various leaders from informal political groups and media communities have received intensive 5-10 days training. In this connection, more than 2000 leaders have received curriculum-based and peer-based/separate training on peacebuilding; co-existences; conflict resolution; mentoring on peace building; and promotion of values for peace and democracy. The various ethnic groups affected by recurrent conflicts in Gurage Zone, Welkite Town, Kebena, and Abeshge Woredas are incorporated into the target groups. At the end of each training, there were reconciliation and mentoring ceremonies for leaders from different ethnic groups. At the end of each training session, there were also planning sessions organized for the trainees on how to mobilize the community for the same causes and agendas. Finally, a big and warm closing ceremony was organized for all trainees and other participants of the project.

3. Performance Measurements Management (PMM)

LIAE operates across a wide range of sectors, addressing social, economic, environmental, and political challenges. LIAE's performance is internally evaluated based on key areas that reflect its effectiveness, impact, and sustainability. Here are the major areas used to assess its performance:

A. Mission & Vision Alignment

An effective NGO must have a clearly defined mission that remains relevant to its target beneficiaries. Programs should consistently align with their stated goals while demonstrating adaptability to evolving societal needs and contextual challenges (e.g., shifting from direct aid to community meaningful engagements and systemic advocacy in response to needs and policy gaps).

B. Governance & Leadership

The Management Board of seven members serves as the cornerstone of LIAE's governance, acting as the supreme decision-making body with full accountability. It is organized from different backgrounds and regions. It sets policies, approves budgets, and ensures compliance, upholding the organization's mission through ethical leadership and independent oversight. To

strengthen integrity, the Executive Director participates as a non-voting member, preventing conflicts of interest.

LIAE's structure is organized into four units, each led by four directors; namely Grant, Administration Finance Unit; Program Unit; Organization Development Unit and MELR Unit. These units have managers, coordinators, officers, and community-level staff operating under clear hierarchies. A Delegation of Authority Policy (that includes well-defined organogram) describes responsibilities, minimizing overlaps and ensuring efficient leadership.

Transparency and accountability are reinforced among board members through structured self-evaluations, specialized subcommittees, fraud and safeguarding reporting, and strict ethics policies/guidelines and systems. Furthermore, a Board Code of Ethics and conflict-of-interest policy safeguard impartiality, while proactive risk management mitigates threats. Together, these measures create a robust governance framework, fostering stakeholder trust and ensuring LIAE operates with integrity, accountability, efficiency, and long-term impact.

C. Program Effectiveness & Impact

LIAE believes that success is measured by tangible outcomes—such as reduced poverty rates, meaningful engagement of the target community, and improved service access—backed by data-driven monitoring and evaluation. We also believe that sustainable impact ensures lasting benefits for communities, moving beyond short-term interventions.

In regards to program performance management, we focus on strengthening and expanding integration of program management with LIAE's Monitoring, Evaluation, Learning, and Reporting (MELR) System.

LIAE has established a robust MELR (Monitoring, Evaluation, Learning, Research, and Reporting) system to effectively track and manage the performance of over 50 projects funded by diverse sources, including USAID, World Bank, EU, DFID, Irish Aid, BMZ, Global Fund, and embassy-based grants. Given the varying thematic focuses of these projects, LIAE has developed the institutional capacity to efficiently manage multi-donor initiatives while maintaining high accountability and learning standards on basis of tangible evidences.

Key MELR Frameworks & Guidelines

To ensure systematic project oversight, LIAE has developed: MELR Policy & Guidelines – Standardizing monitoring and reporting processes; Data Quality Assurance (DQA) & Routine Data Quality Assessment (RDQA) Guidelines – Ensuring accuracy and reliability; Quality Improvement Guidelines – Enhancing program implementation; and Accountability & Learning Guides – Facilitating evidence-based decision-making.

As key functions of the MELR System, beyond performance tracking, LIAE's MELR system: Generates and documents evidence-based lessons to improve program management; Strengthens data auditing and quality control in collaboration with government and community structures including technical working groups; Standardizes methodologies for performance management and impact assessment; Supports participatory data collection, including Participatory Videos (PV), performance reports, and indicator verification; and Automates data management from grassroots to institutional levels for real-time insights.

Likewise, LIAE ensures accountability through four key players and pillars: Beneficiaries (monitoring), Signatory Offices (control agreements/feedback), Donors/Partners (oversight), and Community Leaders (participation/prioritization). All of them are aligned with national policies and donor requirements.

D. Financial and Grant Management & Transparency

LIAE has designed effective finance management policies and implementation frameworks to ensure efficient fund allocation, diversified revenue streams (grants, donations, partnerships), strong internal control systems, transparent and automated budget management systems, and strict compliance with financial audits and reporting standards to build donor trust and operational credibility.

LIAE has a computerized finance system with policies (Financial, Sub award, Audit, Anti-Fraud, Compliance, Cost Share, Cost Allocation, etc.). It ensures proper fund management, donor compliance, and accountability through strong internal control systems. The key functions are: finance and grant administration, monitoring, coordination, and support. Besides, the finance and grant unit, with skilled staff and segregated roles, ensures accurate record-keeping and timely reporting. Separate bank accounts are maintained for each donor, with the Executive Director and other two directors as signatories.

E. Administrative Capability

In LIAE this department has three sub-functions:

e.1. Human Resource (HR) Management

With LIA's expanding scope, there is a growing need to realign HR strategies to meet organizational demands. LIAE has implemented key policies—such as the HR Manual, Ethics Policy, Fraud Policy, Safeguarding Policy, Anti-Harassment Guidelines, and others—to enhance staff performance. The department oversees recruitment, performance management, staff development, succession planning, benefits administration, and HR IT systems, ensuring a structured and efficient workforce.

e.2. Property Management

Procurement: LIAE follows a structured 9-step procurement cycle, covering compliance, needs assessment, supplier lists development, procurement plan design, plan approval, purchase request preparation, negotiations, purchasing, recording, and evaluation.

Asset Management: The department staffs focus on planning, inventory control, operations, maintenance, and disposal of assets.

Logistics Management: in LIAE the key responsibilities include storage, safety handling, and transportation of goods.

e.3. Communication (Admin Level)

This unit manages internal and external administration-related communications, including media relations, content editing, social media, web updates, IEC material production, meeting facilitation, and policy implementation, ensuring smooth information flow across the organization.

F. Stakeholder Engagement & Accountability

As part of our mission statement, beneficiaries must be actively involved in program design and feedback loops. Transparency (e.g., public reports, open data) and partnerships with governments, businesses, and local communities enhance legitimacy and reach. LIAE has also a structured stakeholder management policy, ensuring smooth collaboration with government offices and external partners in planning, operations, compliance, risk assessment, and performance monitoring.

G. Operational Efficiency

To maximize impact, LIAE prioritizes cost-effective program delivery, strategic technology use (e.g., digital tools for scaling), and strong staff/volunteer management (training and retention). Special focus is given to automating financial and MELR (Monitoring, Evaluation, Learning, and Reporting) systems due to their critical role in operational efficiency. Likewise, LIAE's IT Department developed a five-year advancement plan, approved by management, which includes updated policies on security, access control, software approval, risk management, and confidentiality. The system integrates with key functions—program operations, HR, document management, and budget monitoring (BMS)—ensuring compliance and streamlined or efficient workflows.

H. Advocacy & Policy Influence

Through time LIAE learned that high-performing NGOs shape policies and public awareness through evidence-based campaigns (e.g., climate action, human rights) and collaborations with policymakers or international bodies. As a result, LIAE has already started to refocus itself on advocacy and policy influence program directions.

I. Risk Management & Adaptability

LIAE primarily operates in hard-to-reach, remote, high-risk, and under served regions. Over time, the organization has built robust systems, capacities, and expertise in crisis preparedness—including conflict and disaster response. These capabilities enable LIAE to:

- **Monitor and Adapt:** Track and implement adaptive strategies to ensure operational continuity.
- **Strengthen Safeguarding:** Maintain strong policies and systems to protect staff, beneficiaries, and representatives.
- **Ethical Standards & Integrity:** We have developed systems and commitment to ethical fundraising, fraud prevention, inclusiveness and safeguards LIAE's reputation and social impact.
- **LIAE's Security Risk Management Framework** is also designed to safeguard its staff, assets, and operations. LIAE implements an annual Security Plan and adopts a structured Security Risk Management (SRM) Framework. This framework ensures systematic risk assessment and response, particularly in high-risk humanitarian environments. The SRM Framework focuses on: analysis of risks, creating action plans, monitoring threats in real-time, decentralizing leadership, protecting assets, supporting affected individuals, and hiring locally for adaptability and resilience.

J. Innovation & Learning

LIAE is transitioning from 'donor-driven' priorities to research and evidence-based programming even though collaboration with donors is the key part of our operations. This shift aligns with leading NGOs that:

Embrace Innovation – Adopting local approaches, tech solutions, and alternative funding models.

Learning – Using successes and setbacks to refine strategies.

Invest in Research – Scaling proven approaches through data-driven insights.

Furthermore, LIAE has conducted studies on early child education challenges, HIV KAP, COVID-19 impacts, marginalization, Zero Dose Children (Oromia, SNNPR, Gambella, B/Gumuz), Citizen's Participation-CRC surveys (14 woredas), youth unemployment (SNNPR),

and other areas. Additionally, assessments were done to develop strategic road maps for high-risk and hard-to-reach areas, including war-affected regions like Tigray. LIAE is also committed to routine mapping, evaluation, and baseline activities of programs and projects.

K. Tools used:

To assess these dimensions, LIAE start to LIAE's Organizational Performance Measurement Tools and frameworks like:

- Logical Framework Approach (Log Frame) for project design and evaluation.
- Social Return on Investment (SROI) to quantify social impact.
- Global Reporting Initiative (GRI) Standards for sustainability reporting.
- ISO 26000 for guidance on social responsibility.
- Environment Return on Investment (EROI) is a metric used to evaluate the financial and environmental benefits of sustainability initiatives relative to their costs. It helps organizations assess whether investments in green technologies, conservation efforts, or eco-friendly practices deliver meaningful returns both economically and ecologically.

L. LIAE's Performance Management Summary

- Mission & Vision – Clarity, relevance, and adaptability.
- Impact – Measurable outcomes, sustainability, data-driven M&E.
- Financial Health – Efficient funding use, transparency, compliance.
- Administrative competencies, Procurement, and Communication efficiency
- Governance – Strong board, delegation, structure, ethical leadership, and legal adherence.
- Stakeholders – Beneficiary inclusion, partnerships, transparency.
- Operations – Cost-effectiveness, tech integration, staff management.
- Advocacy – Policy influence, campaign success, collaborations.
- Risk Management – Crisis preparedness, adaptability, safeguarding, Ethics – Anti-corruption, DEI, integrity in operations.
- Innovation – New solutions, learning culture, R&D investment.

LIAE is implementing these performance measurement structures to ensure a comprehensive yet concise overview, suitable for reports, strategic planning, or stakeholder briefings including beneficiaries, government partners, and donors.

4.Sub-Partnerships

We have developed a sub-grant management policy and framework for sub-award management. Recognizing the need for localized expertise, we led a consortium and partnered with 15 major sub grantees including USAID, UNOPS/TB Reach program, Global Fund/TB program, World Bank/VNG programs, and others- that each has brought unique strengths. Our role as the prime involved oversight, building the capacity of sub-partners, compliance, and reporting, and ensuring alignment with funder expectations. We facilitated regular coordination, controlled program performances, provided technical assistance, and streamlined financial disbursements. Through transparent communication and shared goals, LIAE works to strengthen the partnership and collective impact, demonstrating how prime-sub grantee collaboration can amplify success when roles are clearly defined.

5.Recognition

LIAE is recognized as a model NGO for its ability to mobilize local stakeholders, as evidenced by more than 38 recommendation letters and certificates from government ministries/offices and donors including a USAID certificate of achievements in the USAID/LCD program. LIAE's impactful work has also earned recognition, including the Gambella President's Yearly Award, underscoring its commitment to community-driven initiatives in reducing the high prevalence of HIV/AIDS in the region.

6. Active Network Memberships

LIAE actively engages in strategic partnerships with a wide range of influential networks and organizations, strengthening its impact across various sectors. Among its key collaborators are:

- Different Zones/Regions NGO Forum (with over 12 member organizations), fostering grassroots development and advocacy.
- Basic Education Network (BEN), is dedicated to improving access to quality education nationwide.
- Consortium of Christian Relief and Development Associations (CCRDA), is a major force in humanitarian and community development initiatives.
- SNNPRS HIV/AIDS Forum of Civil Societies (SHAFOCS), working to combat HIV/AIDS through awareness and support programs.
- Ethiopian Civil Society Organizations Council (ECSOC), is a pivotal body in coordinating more than 8000 civil society organizations' efforts across Ethiopia.
- Healthy Environment, Healthy Family (PHE), integrating health and environmental sustainability.

- National Education Cluster, ensuring cohesive efforts in education policy and implementation.
- GF Country Coordination Mechanism (CCM), plays a crucial role in health funding and policy alignment.

Beyond mere membership, LIAE holds leadership roles in several of these networks, including serving on the executive boards of ECSOC and CCM, where it helps shape policies, drive strategic decisions, and amplify the voices of marginalized communities. These collaborations reflect LIAE's commitment to multi-sectoral partnerships, ensuring sustainable development, advocacy, and inclusive growth across Ethiopia.

7. Organization Development Unit (ODU)

The Organization Development Unit (ODU) at LIAE oversees the above-stated stakeholder engagement, design strategy of the organization, design policies, development manuals, and SBCC materials, lead sub-grantee management, lead partnerships, and resource mobilization to enhance program effectiveness. The unit focuses on, high-level results.

Stakeholder Management & Communication Strategy development and implementation.

Strategic Partnerships & Low-Cost Social Investment: as already mentioned LIAE is a member of networks and is often recognized as a model NGO for its community mobilization success. The community mobilization key strategy is the Low-Cost Social Investment Approach, where projects are designed to require minimal donor funding while maximizing government and community contributions. For example, in an education initiative, communities donated 12.2 million Birr (cash, labor, materials) and 120 hectares of land, while the government provided salaries, land, and logistical support worth 5,619,088 Birr—exceeding LIAE's contributions.

Regional Collaboration & Policy Influence: as already mentioned, given the hard-to-reach project areas, LIAE prioritizes partnerships with regional/zonal governments and NGOs. It integrates stakeholders into project planning and committees to ensure alignment. Additionally, LIAE has organized policy dialogues on critical issues like FGM, early marriage, and GBV, supported by donors. It also employs security measures to counter instability, shifts focus to local resource mobilization amid changing donor priorities and promotes need-based approaches to overcome localization challenges.

8. Key Organizational Learning

Key Learnings

8.1. Citizen-Led Governance: We learned that People are Power

Through Ethiopia's social accountability program, citizens' priorities were fully integrated into local government budgets. All woreda (district) Joint Action Plans (JAPs) were adopted as official sector plans. Strengthened by capacity-building for committees on financial transparency, successful project areas now qualify for direct development funding, ensuring citizen needs are met.

8.2. Surpassing HIV Testing Targets

LIAE exceeded its annual HIV testing goals early, with self-testing becoming a vital alternative during COVID-19. Success stemmed from client-focused demand creation, hotspot mapping, and 12 customized and strategic approaches that boosted performance.

8.3. Wheel Model for Marginalized Communities

LIAE shifted from broad community programs to a targeted Wheel Model, focusing on Education, Health, Economic Empowerment, and Advocacy. This approach significantly improved marginalized groups' socioeconomic conditions and changed mainstream attitudes toward inclusion.

8.4. Ending Child Labor Through Education

After 20 years of prioritizing girls' education, LIAE identified child labor as a major barrier. The Child Labor Free Zone (CLFZ) project ensured 100% school enrollment in targeted areas through community-government committees, guaranteeing all children access to education.

8.5. Resolving Ethnic Conflict in Gurage Zone

Past peace efforts failed due to political bias. LIAE introduced non-political, curriculum-based training for 12 ethnic groups over 60 days, emphasizing coexistence. Cultural exchanges, symbolic gestures (like flower exchanges), and joint peace committees fostered lasting reconciliation.

8.6. Key Stakeholder Engagement

LIAE developed a structured guideline to systematically identify and engage all stakeholders under a unified command framework for each project. This approach has significantly

improved project performance by minimizing overlaps and ensuring balanced stakeholder participation—preventing under utilization or over-reliance on certain groups. The coordinated engagement strategy has enhanced efficiency and accountability across project areas. These initiatives demonstrate how citizen engagement, adaptive programming, and conflict-sensitive approaches drive sustainable change.

9. Best Practices

High Program Performance Culture (HPPC): For over two decades, Love in Action Ethiopia (LIAE) has been a driving force in community development, implementing impactful projects across 497 districts in Ethiopia. Recognized by donors, government partners, and local communities for its exceptional project performance, LIAE attributes much of its success to fostering a High Program Performance Culture (HPPC), supported by seven inclusive methodologies.

Strategic Stakeholder Engagement & Organizational Growth: Understanding the importance of collaboration, LIAE designed a dedicated organogram to strategically engage key stakeholders. This innovative approach transformed participation dynamics, fostering greater confidence, equity, and meaningful involvement among project partners.

Boosting HIV Case Identification in Gambela: In the Gambela region, LIAE’s Quality Improvement (QI) Initiative led to a remarkable leap in HIV case identification, with the HTS_INDEX yield soaring from 7% to 19%—a testament to the organization’s commitment to health system strengthening.

Emergency Response to COVID-19: When the COVID-19 pandemic struck, spreading fear and uncertainty, LIAE acted swiftly. Leveraging reserve funds and donor support, the organization launched a multi-pronged emergency intervention, including:

- Safe, structured, and community-based education
- Distribution of critical health materials
- Support for at-risk communities’ basic needs
- Strengthening local government systems
- Online training for staff and leadership on COVID-19 management

These efforts not only protected beneficiaries but also amplified advocacy, mobilized communities, and enhanced the resilience of ongoing projects.

Addressing Socio-Economic & Political Challenges: Operating in an environment marked by economic instability, political insecurity, and ethnic conflicts, LIAE recognized the urgent need for sustainable solutions. In response, the organization developed a five-year strategic plan, prioritizing economic empowerment and emergency relief programs. These initiatives

have already made tangible differences in the lives of vulnerable communities while contributing to national economic recovery efforts.

Through adaptive strategies, inclusive engagement, and bold leadership, LIAE continues to create lasting impact—transforming challenges into opportunities for growth and resilience.

10. General Outcomes of Organizational Programs

10.1. Program Adoption & Sustainability

- High demand and acceptance for programs increased among communities and government offices.
- Successful institutionalization of programs ensured long-term sustainability.
- Expanded reach to hard-to-access communities and high-risk groups.
- Strengthened stakeholder participation and local ownership.

10.2. Economic & Social Empowerment

- Improved economic conditions for underserved individuals and marginalized groups.
- Reduced social barriers for vulnerable populations.
- Increased women's participation in economic and social decision-making.
- Some high-risk groups (e.g., commercial sex workers) transitioned to income-generating activities (IGA) and peer education.

10.3. Education & Youth Development

- Increased demand for education, especially in rural areas.
- Significant rise in girls' education enrollment.
- Children gained academic knowledge and essential life leadership skills.
- Schools developed sustainable resources to enhance education services.

10.4. Health & Well-being

- Greater demand for health services, including ART and condom use.
- Improved health outcomes and stability for PLHIV (People Living with HIV) families.
- Enhanced family protection, education, and safety measures.

10.5. Capacity Building & Organizational Growth

- Strengthened skills of local project stakeholders.
- Improved service quality and performance culture.
- Enhanced organizational reputation and community trust.
- Increased support and visibility for LIAE's initiatives.

10.6. Family & Community Transformation

- Parents developed better parenting skills through prevention programs.
- Girls gained emotional and inspirational empowerment for self-protection.
- Boys took greater responsibility in addressing gender issues.
- Stronger family relationships fostered holistic development.

11. Love In Action Ethiopia's Sustainability Strategy

LIAE high-level sustainability strategies are essential for ensuring long-term impact, operational resilience, and alignment with global sustainability goals like the UN Sustainable Development Goals (SDGs). We designed a sustainability strategy called the Integrated or 'Inbuilt' Sustainability Approach (ISA). This means that LIAE embeds sustainability into its project cycle and overall organizational management by engaging stakeholders including donor partners, beneficiaries, community committees, and government bodies to foster ownership, improve credibility, attract more funding, and maximize their impact, especially long-term impacts. Some of the dimensions of LIAE's ISA are:

Alignment Sustainability: In its commitment to sustainability, LIAE has carefully examined major global sustainability frameworks to ensure they resonate with its Mission, Vision, and Strategic Objectives. By doing so, the institution aligns its programs with key international agreements—such as the Paris Agreement and Biodiversity COP—while also tracking relevant indicators to measure progress. Guided by the triple-bottom-line approach, LIAE adopted a balanced focus on People, Planet, and Profits/Social Benefits (3P). This means that every initiative not only considers environmental responsibility but also social equity and long-term community benefits. Through this integrated strategy, LIAE ensures that its actions contribute meaningfully to global sustainability goals while staying true to its core values.

Social Sustainability: Strengthening community structures through training, workshops, and outreach ensures collective problem-solving beyond the project lifespan. We promote *Community-Centric & Inclusive Programs* that help to create Community Financial Resilience through participatory, social transformational (measured in SROI) and inclusive decision-making by communities. So far, we have been working on stakeholder training programs on social change management, resource mobilization, networking skills, and social marketing that enhance program visibility and future support. LIAE consistently integrates sustainability campaigns into every phase of its project cycles and processes, ensuring environmentally and socially responsible practices at all levels.

Economic Sustainability: As an organization dedicated to poverty alleviation, we try to adopt and integrate economic empowerment and livelihood programs into all our strategic initiatives as a cross-cutting program. Our business development models and other interventions are designed and adapted to ensure measurable financial progress for beneficiaries of all programs in the organization. To sustain long-term success, we provide post-project support, including Access to loans and Technical follow-ups to the business development groups. This support enables beneficiaries to maintain and grow their

independent businesses, create stability, improve their social outcomes, foster self-reliance, and continue economic improvement. We have also started to use revolving business or economy models in our youth business development strategies.

Institutional Sustainability

LIAE has started ensuring financial resilience by diversifying funding through grants, donations, social enterprises, and impact investing. It establishes endowment funds, implements cost-saving measures, and adopts digital and green practices. Partnerships with local governments, donors, and market networks, LIAE tries to enhance long-term sustainability, with community-led systems extending beyond project timelines. As a result, LIAE's funding model caps international contributions at 60%, sourcing 40% locally, alongside income-generation strategies and supportive legal frameworks. Staff and volunteers are trained on sustainability best practices.

To ensure program sustainability, LIAE integrated a proven High-Performance Culture (HPC) strategy since 2020 through mindset shifts, HPC Committees, JSSI/RDQA integration, micro-planning, and real data management. Additionally, Risk-Based Management Systems (RBMS)—its strategies and tools adapted from USAID—are applied across operations (especially MELR and finance) to identify, assess, and mitigate risks. This ensures efficient resource use, fraud prevention, donor compliance, and disaster risk reduction (DRR) in programs, and increases adaptability in planning and scenario settings for future sustainability challenges.

Ecological Sustainability: Environmental awareness is integrated into all programs including health, education, economic empowerment, agricultural/manufacturing activities to minimize ecological harm. LIAE has integrated EAP (Environmental Assessment Plan), EAR (Environmental Assessment Report), EARP (EAR Performance Review) to project management structures through training and tool development.

Knowledge Management and Communication: To enhance organizational learning and efficiency, we have established a comprehensive Knowledge Management and Communication framework. This includes structured guidelines, dedicated systems, and assigned personnel to ensure knowledge is systematically organized and effectively disseminated to key stakeholders. Best practices, lessons learned, case studies, and research findings are carefully documented and shared through digital and media platforms, encouraging wider adoption and replication of successful strategies. To further strengthen our approach, we have integrated IT and AI solutions for advanced data management, enabling smarter decision-making and precise impact measurement.

Policy Influence: We are actively engaged in advocacy and policy influence by *campaigning* on socio-economic and environmental issues; leveraging data-driven research to inform policymakers; and integrating person-centered and human-rights-based programs across all initiatives to drive systemic and cultural change. In collaboration with Technical Working Groups (TWG) and government partners, LIAE advocates for vulnerable populations and high-risk behaviors—shaping federal and regional policies to strengthen protections and secure essential resources for those in need.

Partnerships & Multi-Stakeholder Collaboration: To maximize impact, we forge strategic alliances with governments, private companies, and NGOs, enabling scalable solutions. LIAE is committed in joining various global and national sustainability networks, to align with best practices and amplify our reach. Additionally, we harness public-private partnerships (PPPs) to drive large-scale initiatives, combining resources and expertise for greater effectiveness. As organization, we are practically committed to collaboration as the foundation for enduring transformation and drive sustainable change for the future.

12. Major Project Summary in the Last 5 Years

Departments	Period	Title and Brief Description of The Project	Donor/Partner	Total Estimated Budget
Health	2021-2025	Title: Family Focused HIV Prevention Care and Treatment: By support from USAID/PEPFAR LIAE has been delivering family-focused HIV prevention, testing, care services and interventions for vulnerable children which is an integrated program to serve families living with HIV who are newly diagnosed, at high risk of default or do not achieve viral suppression, in Gambella region.	USAID	2.5 million USD)
Capacity Building	2013 to 2024	Title: Ethiopian Social Accountability Program: it works on promotion of Social Accountability practices and values of Health, WASH and Education Sectors that focus on providing quality of services to citizens especially to vulnerable groups including OVCs/HVCs. It has been implemented in SNNPR, Gambella and Oromiya Regions.	World Bank/VNG International in	35 M ETB
Health	2013 to 2021	Title: Her-Choice Project: It aims to foster ggirls' capacity and participation through education and integrated economic support to make independent life decisions. The project increased number of girls who feel they can exercise control over their own lives, especially with regards to marriage and increased participation of schools, teachers, parents and community to fight against early marriage and economic security of young women in SNNPR.	Kinderpostzegeles Netherlands	10,196,797.50 ETB
Health	2010 to 2025	Title: USAID MULU/MARPs Program: it aimed for Providing HIV care and treatment services to Most At Risk Populations- MARPs and Key Populations-KPs that includes SBCC, Bio-Medical, Economic Empowerment using self-saving group empowerment models and local capacity building programs. LIAE implemented this program in SNNPR, Oromiya and Gambella Regions.	PSI/USAID Fund	16020742 ETB (About 2 million USD)
Health	2018 to 2020	Title: Community HIV Care and Treatment (CHCT): It aimed to provide HIV care and treatment services to PLHIVs It includes providing Care and Treatment services; HIV Testing and Counselling services; Establishing and Strengthening PLHIVs Village Saving and Loan Association (VSLA); and Strengthening ART Adherence and Viral Suppression supports at community levels in Gambella and Addis Ababa regions.	Project Hope/USAID Fund	12,300,000.00 ETB (about 400,000.00 USD)
Capacity Building	2019 to 2020	Title: Project on Community Peace Building: it aims to promote peace building, conflict early warning, conflict prevention and resolution though provision of trainings, organization of workshops and discussion sessions in conflict prone areas of SNNPR and Oromiya regions	PACT Ethiopia	4 million ETB
Capacity Building	2018 to 2020	Title: Project for empowering Gafate Beta Israel-GBI Communities: it was for Improving the Social-Economic Level through Comprehensive and Inclusive Actions (ISEL-CIA) among the Socially Marginalized Gafat Beta Israel Communities (GBI-C) dwelling in SNNPR	British Counsel/CSSP2	3770595.00 ETB
Health	2020 to 2022	Title: TPT/TB Program: it is for improving TB Preventive Therapy among under-five children through engagement of Women's Indigenous Associations in SNNPR and Addis Ababa regions.	TB Reach Wave 8/KNCV-Netherlands	5 million ETB

Health	2023 to 2026	Title: USAID TB Local Organizations Network for Key Affected and Vulnerable Population (KAP) Activity in Developing Regional States (DRS)	BICDO/USAID	1.4 M USD
Health	2020 to 2022 then 2024	Title: Family Focused HIV Prevention, Care and Treatment, in AA	MEKDIM Ethiopia (USAID Fund)	4.5 million ETB
Economic Empowerment	2022 to 2026	Title: Promotion of Start-up Businesses (SB) into Innovative Businesses (IB) among the unemployed Youth (PSI-Y) in SNNPR Region. The project developed a progressive model (Pre-Organization Stage to Maturity) to build capacity of Small Businesses-SBs which compliment with the government supports on self-reliance and incentives.	BMZ: German Federal Ministry for Economic Cooperation and Development	780000.00 Euro (42 M ETB)
Health	2022 2023	Title: Pilot program on Catalyzing Community Advocacy and Demand Creation for COVID-19 Diagnostics and Therapeutics and Promotion of Self-Test for IDPs in Amhara and Tigray region.	Unitaid/TAG and HPA, FFHPCT SKN-Netherlands	135000.00USD
Capacity Building	2021 to 2023	Title: Emergency Supports to IDPS from Amhara, Afar and Tigray Regions.	LIAE/Internal Sources and Diaspora	3.00 M ETB
Education	2021 to 2022	Title: Promoting Equity, Efficiency and Effectiveness in education sectors focusing on Gambella TARGET Schools (P3Es)	Education Development Trust Fund (EDT)	4 M ETB
Health	2022	Title: Research on Reaching Zero Dose Children in Remote Areas of SNNPR, Gambella, B/Gumuz, and Oromiya Regions	Bill & Melinda Gates Foundation	4 M ETB
Health	2024-2028	Title: Expanded access to quality, equitable, and effective health and nutrition services to OVC and PLHIVs in Gambella and AA	USAID/FHI360	20 M ETB
Health	2024-2026	Title: Provide Immunization supports	GAVI/GE	20 M ETB
Health	2024 - 2026	Addressing the dual burden of chronic respiratory diseases and tuberculosis through strengthened capacity at primary health care settings in Ethiopia	UNOPS/TB Reach Program	72 M ETB
Health	2025-2027	Title: Integrated HIV Service for KPP In Community DICs	Global Fund and MOH	66 M
Health	2024 -2026	Title: USAID-Quality Health Care	USAID/JSI	18 M ETB
Health	2025-2027	Title: TB Strengthening Provision of Equitable and Sustainable Anti-TB Services to All At-Risk Communities in Ethiopia	Global Fund and MOH	84 M ETB

Annex:

I. Table of Acronyms

Acronym	Full Form/Explanation	Context/Program
LIAE	Love In Action Ethiopia	The organization's name.
SBCC	Social and Behavior Change Communication	Health programs (HIV, TB, SRH).
SRH	Sexual and Reproductive Health	Health programs focusing on women/girls.
GBV	Gender-Based Violence	Cross-cutting program focus.
WASH	Water, Sanitation, and Hygiene	Integrated into health/education programs.
PLHIV	People Living with HIV	HIV care and treatment programs.
OVC	Orphans and Vulnerable Children	HIV/education support programs.
MARPs	Most At-Risk Populations	HIV prevention programs (e.g., MULU).
KPP	Key and Priority Populations	HIV programs (USAID-funded).
DIC	Drop-In Center	Safe spaces for female sex workers (FSWs).
TPT	TB Preventive Therapy	TB programs (e.g., TB REACH Wave 7).
DR-TB	Drug-Resistant Tuberculosis	TB programs (e.g., ASCENT project).
IDP	Internally Displaced Persons	Emergency relief programs.
FFHPCT	Family-Focused HIV Prevention, Care, and Treatment	USAID-funded HIV program.
ESAP	Ethiopian Social Accountability Program	World Bank/VNG-funded governance program.
MELR	Monitoring, Evaluation, Learning, and Reporting	Organizational performance system.
DQA	Data Quality Assessment	MELR framework component.
RDQA	Routine Data Quality Assessment	MELR framework component.
CMC	Community Mobilization Cycle	Stakeholder engagement model.
VSLA	Village Savings and Loan Association	Economic empowerment programs.
SSG	Self-Saving Group	HIV/MARPs livelihood programs.
CSSP	Civil Society Support Program	Multi-donor-funded capacity-building.
PMM	Performance Measurement Management	Organizational evaluation framework.
HPPC	High Program Performance Culture	Organizational strategy for excellence.
SROI	Social Return on Investment	Impact measurement tool.
GAVI	Global Alliance for Vaccines and Immunization	Immunization programs (HPV/RI).

RI	Routine Immunization	GAVI-funded vaccination projects.
ABE	Alternative Basic Education	Non-formal education programs.
CLFZ	Child Labor-Free Zone	Education protection initiative.
GBI-C	Gafat Beta Israel Community	Marginalized group empowerment programs.
PHE	Population, Health, and Environment	Integrated development programs.
FGM	Female Genital Mutilation	SRH/GBV prevention programs.
HTP	Harmful Traditional Practices	Cross-cutting focus (e.g., early marriage).
MULU	-(USAID HIV program name)	MARPs-focused HIV prevention.
TAG	Treatment Action Group	TB/COVID-19 programs.
UNOPS	United Nations Office for Project Services	TB REACH funding partner.
BMZ	German Federal Ministry for Economic Cooperation and Development	Youth economic empowerment programs.
KNCV	KNCV Tuberculosis Foundation	TB programs (e.g., ASCENT).
EDT	Education Development Trust	Gambella education projects.

I. History of LIAE

History and Genesis Love in Action Ethiopia (LIAE)

A Journey of Resilience and Transformation

Genesis

Love in Action Ethiopia, a local non-profit organization, was established in 2001 by visionary leader Mr. Yohannes Amado Duba, Aklilu GebreMichael Shomoro, and eighteen other founding members from the Hadiya Zone. These individuals represented their community and various professional backgrounds. These members included:

1. B. Gen Bahailu Kende
2. Mr. Adise Amado
3. Mr. Lakewu Aboda
4. Mr. Tessema Chamiso
5. Mr. Estifanose Kemiso
6. Mr. Abebe Lintiso
7. Mr. H/mariam Babanta
8. Mr. Mulugeta Habet
9. Ms. Frehiwot Kemiso
10. Mr. Daniel Turago
11. Mr. Getachew Haile
12. Mr. Abera Ossamo
13. Mr. Liranso Digagdo
14. Mr. Girma Suledolo
15. Mr. W/Tsadike Somano
16. Ms. Amareche Getachew
17. Mr. Kacha Deseta
18. Mr. Abera Tumedado

History

Education Under Canopy of Trees:

As illustrated in the above photograph, Mr. Yohannes witnessed around 2000 while traveling through his rural homeland - young children receiving basic literacy and numeracy instruction beneath trees, their lessons facilitated by volunteers from nearby faith-based organizations.

This account was both astonishing and deeply concerning, especially when compared to conditions in other parts of the Hadiya Zone (SNNPR region). It revealed a severe and troubling social issue in rural areas near the zone's main town. Many of us had assumed that the government addressed such problems—at least in areas close to larger towns—and had never encountered or even heard of "schools under trees."

Unfortunately, we later discovered that the affected communities, students, and even the supposed staff of these unarranged schools felt helpless due to the absence of government support. They lacked critical information and were unable to seek alternative solutions, whether internally or externally. Our findings also highlighted the extreme poverty and lack of social services in the area, mirroring challenges seen elsewhere in the country. Annually, families exhausted their limited resources before they could even afford basic industrial materials to construct rudimentary shelters for their poorly equipped local schools.

Building the First Grass-Roofed School

The vision for the first grass-roofed school began with personal connections and heartfelt conversations among a small group of individuals deeply affected by the educational hardships in their community. At the center of this effort was Mr. Yohannes, who shared a deeply troubling story with close friends and family, including Mr. Aklilu, Brigadier General Bahailu, and others old enough to grasp the gravity of the situation. These discussions were not merely exchanging ideas but emotional appeals that fostered a shared sense of urgency.

Mr. Yohannes, then the director of Entoto MYC Elementary School at that time, had a particularly close relationship with Brigadier General Bahailu, allowing them to engage in meaningful dialogues about the challenges facing local education. Similarly, Mr. Aklilu—then a student at Addis Ababa University by the time and a tutor for the Brigadier General’s son—had contributed to the conversations about the challenges. Despite his youth, Mr. Aklilu contributed significantly by fueling discussions, generating ideas, and inspiring courage among the group. His bond with Mr. Yohannes, rooted in friendship and mentorship, became a driving force in shaping their collective resolve to act.

What began as informal talks soon evolved into a determined effort to transform concerns into tangible solutions. The group, along with others in their community, started brainstorming ways to address the lack of proper schooling—even if it meant starting with the most basic improvements. Their first step was modest yet revolutionary: transitioning from a school under a tree to a small, community-built structure. Under Mr. Yohannes' leadership, the founding members rallied together, pooling their meager resources to raise enough funds to purchase nails. This small but crucial contribution empowered local communities to construct their grass-roofed school, drawing on their traditional building expertise—skills honed from years of crafting homes in the area. This school was an unpleasant, open-walled structure with a grass roof, a muddy floor, and no furniture. Unlike the open walls of urban dream homes designed for luxury, this school’s exposed sides symbolized necessity, not choice. The students wrote on rough paper resting on their knees, and sitting on stones, while lessons were taught on a makeshift blackboard crafted from black ash-covered wood. White stones from nearby riverbanks served as chalk, and tree branches were fashioned into rudimentary doors and windows. There were no staff rooms, no clean water, and no formal administration—just a single, multi-grade classroom where learning persisted against all odds. Yet, other school-related matters were still handled in private neighborhood homes or beneath trees.

Born from neglect, a community's collective efforts built schools where none existed for 150 children, that this was proving small efforts can spark a monumental impact.

Informal Discussions and Conceptualization of the Vision

Amid these challenges, Mr. Yohannes, the planner of the initiative, held repeated informal discussions with key figures such as Mr. Aklilu, B/G Bahailu, and a few other founding members. Their conversations revolved around strengthening and formalizing support systems for underprivileged communities in the Hadiya Zone, particularly in addressing educational needs. These discussions began in 2000 and became a recurring topic whenever they met in different parts of Addis Ababa.

The group explored ways to mobilize resources and extend assistance to vulnerable groups in their home regions, especially those severely affected by crises. A central idea was about how to inspire the educated elite within their community to contribute to their respective regional developments. At the same time, the team voiced, challenged, and criticized existing service providers for neglecting education in high-risk, high-need areas.

The Need for Collective Action

The founding members seriously discussed that addressing educational disparities presented too immense a challenge for government efforts alone. During a critical strategic meeting, members stressed the fundamental importance of collaborative community engagement in the development of the new initiatives. They reached a clear consensus that any new organization the founding members formed should operate within the NGO framework and must remain free from personal agendas and instead actively incorporate all willing stakeholders.

Establishing the Organization

After prolonged informal deliberations, the group resolved to open an office for the new organization. However, at the time, registration required proof of operational capacity, including staff and infrastructure. Despite severe financial constraints, they secured a small, poorly equipped office in Addis Ababa's Afencho Bare area. The space was cramped, uncomfortable, and lacked basic amenities like proper electricity, water, and sanitation.

During the turbulent year of 2001, when university protests led to academic disruptions, Mr. Aklilu found himself with an unexpected break from his studies. This circumstance presented an opportunity to appoint him as the organization's first official coordinator of the office. Simultaneously, Mr. Yohannes assumed leadership as executive director, bringing his educational experience from Entoto Mekanesh Yesus Church School to the nascent organization. It was during this formative period that the group formally adopted the name "**Love In Action Ethiopia**," symbolizing their commitment to compassionate service.

Early Struggles and Determination

With minimal resources, the founders relied on donated broken furniture and second-hand supplies to set up the office. Working conditions were harsh. Transportation and meal costs were a constant struggle, especially for students like Mr. Aklilu. Mr. Yohannes, who also worked as a school principal, had limited funds to contribute. Despite these hardships, the group persevered and fueled by a shared vision and spirit of future success. The small financial contributions from B/G Bahailu and other members kept the organization afloat, covering essential registration, establishment, and fundraising expenses. Though 2001 was a year of immense difficulty, the unwavering solidarity among the founders remained a powerful and unforgettable force.

Legal Registration

At the time, we had a limited understanding of the legal and compliance requirements. Fortunately, a few individuals with NGO experience guided us through the registration process. After some time, the Federal Ministry of Justice assessed our capacity and commitment, ultimately approving the registration of our new organization, Love in Action Ethiopia (LIAE), on August 21, 2001. We made efforts to ensure all registrations complied with local laws, tax regulations, and reporting standards. As a result, that day marked a new beginning—much like a birth. Despite our initial lack of expertise, we took several steps from 2021 onward to advance our vision.

Clarify Our Vision & Mission

The new vision was clear: expanding access to education and community services, with every member contributing their utmost. From the start, we went door-to-door, explaining our mission—to remove barriers to learning and uplift underserved areas, particularly the founders' birthplaces. We engaged local elites and donors, persisting despite skepticism and financial constraints. Lacking resources, we presented handwritten proposals, often facing dismissals. Doubts from educated locals sometimes left us disheartened. Members walked long distances for meetings, only to be stood up—communication was difficult without phones. Yet, an unwavering belief in our purpose kept us going. Challenges tested us, but our commitment never wavered. For one year, we tirelessly mobilized urban and rural communities, laying the groundwork for lasting change. Moving forward, maintaining this clarity and unity will be key to transforming aspirations into real impact.

Fund Raising

For years, our team faced countless setbacks—emotional appeals, campaigns targeting local businesses and donors, and relentless efforts that yielded little to no financial support. From 2001 to late 2002, every step felt discouraging, with fundraising attempts proving futile. Yet, it wasn't just about the money; it was about proving that collective action could spark extraordinary change. Starting an NGO at that time was an uphill battle, with low community engagement and little promise of success. However, everything changed in mid-2003 when we secured our first major funding—150,000 ETB from SNNPR HAPCO. This breakthrough became a turning point in our organization's history, reigniting our team's faith and energizing us for future efforts.

Building Our Team & Network

Since 2002, we began with two permanent staff members and later expanded to seven due to increased support. Mr. Yohannes was appointed as the Executive Director of the organization, while Mr. Aklilu contributed as a volunteer and advisor in the organization. Financially, founding member Ms. Frehiwot and her husband, Lakew, also provided key support. The board, led

by B/G Bahilu Kenede, along with the General Assembly members, became more engaged and motivated to drive the organization's growth. Additionally, we recruited numerous skilled volunteers and employees who shared our vision, many of whom also assisted in fundraising efforts.

Critical Conflicts

The organization faced a major crisis when conflicts arose among a few numbers of founding members, leading to a temporary suspension of activities. These tensions stemmed from clashing interests among a few senior leaders, which disrupted operations and threatened the organization's stability. Recognizing the severity of the issue, the government—along with the general assembly and board—intervened to assess the situation. After a thorough evaluation, decisive action was taken: the problematic members were removed, allowing the organization to restructure and move forward with a renewed leadership framework. This six-month closure was a defining moment, testing the commitment of the remaining founders and stakeholders. Despite the challenges, their belief in the organization's mission kept them fighting for its revival. The crisis, though difficult, revealed cracks in the initial structure that needed addressing, ultimately strengthening the demand for external support and institutional reforms. Interestingly, this turmoil also fueled an ambitious expansion drive. Even though the founders lacked deep expertise in civil society organization (CSO) management at the time, their determination to overcome setbacks led them to push aggressively for growth. The conflict, rather than destroying the organization, became a catalyst for transformation—forcing it to adapt, seek stronger governance mechanisms, and pursue a more sustainable future. This experience proved that resilience, strategic intervention, and a clear vision can turn even the most disruptive conflicts into opportunities for renewal.

The Turning Point

These days, limited resources forced us to adopt creative solutions just to keep the small vision and operations running. One moment, to present a functional workspace for critical donor visits at the field office, we collected

worn-out chairs and tables from kind-hearted individuals—even borrowing furniture from private homes—to temporarily furnish our office. Though humble, these efforts demonstrated our unwavering commitment to the cause. Our persistence bore fruit when, during one of these donor visits, we secured vital funding from PACT Ethiopia and the U.S. Embassy. This support enabled us to construct and rehabilitate schools in the SNNPR, creating lasting educational opportunities for communities in need. This encompassed the grass-root school introduced earlier in history. In this area and its surroundings, we constructed four schools a rural library, and a community center. As our programs expanded, we transitioned from borrowed furniture to permanent offices—establishing bases in Addis Ababa and Hosanna. With gratitude, we returned all the temporary furnishings to their owners, marking a pivotal shift from survival mode to sustainable growth.

This journey reflects our team’s resilience and adaptability—turning scarcity into opportunity, and goodwill into tangible impact. What began with borrowed chairs evolved into strengthened institutions, proving that determination and strategic partnerships can transform even the most modest beginnings into meaningful, enduring change.

Develop a Strategic Plan

In 2004, we launched short-term initiatives targeting two key priorities: (1) improving educational access for children in remote regions, and (2) fostering community development, with a particular emphasis on youth empowerment in rural areas. During this phase, we also began forging strategic partnerships with like-minded organizations, including joining an education consortium to amplify our impact.

Between 2004 and 2006, our efforts gained significant momentum. We secured critical funding and support through six distinct projects funded by various embassies and international donors. These resources enabled us to scale our interventions, including the construction of schools, the establishment of resource centers, and the expansion of youth empowerment programs. This period marked the peak of our early growth, significantly

enhancing our organizational visibility and solidifying our presence in the communities we served.

The Collapse and Struggle for Survival (2006–2007)

Our early success was short-lived. By 2006, the organization faced a devastating collapse. All projects were phased out due to a lack of sustainable planning, funding diversification, and adaptive strategies to secure new resources. As a result, we could no longer pay staff salaries, cover office rent, settle legal disputes, or meet basic administrative costs. The impact was catastrophic:

- Staff were reduced from 20 paid employees to just 3 unpaid volunteers.
- All six projects were terminated, leaving no active programs.
- Our 500 volunteers disbanded as we could no longer coordinate them.
- Legal penalties piled up, including construction retention fines.
- Offices were forced to close when we could no longer afford rent.
- We lacked even the minimal funds to retrieve materials from shut-down offices or maintain government compliance.

Frustration and despair spread among founding members, staff, and volunteers. The board seriously considered dissolving the organization, especially after the executive director and remaining staff resigned under the strain.

A Last-Ditch Effort to Survive

Amid this crisis, Mr. Aklilu, one of the founding members, stepped forward. Despite the board's skepticism—due to his lack of traditional NGO experience and concerns about his age—he insisted on leading the reorganization. Recognizing the urgency, he offered to work part-time without salary or benefits, solely driven by a commitment to the cause.

After intense deliberation, the board reluctantly agreed in July 2007 to avoid closure and allowed Mr. Aklilu to begin rebuilding LIAE with the support of a few remaining founders and board members. It was a desperate move—but the only hope left.

The Comeback of LIAE (2008-2010)

Following the financial collapse and reputational crisis, LIAE was left in ruins. Most members had abandoned the organization, and its future seemed hopeless. Yet, against all odds, the newly appointed executive director and his unpaid team refused to give up.

A New Beginning: Strategy & Resilience

In a critical three-day meeting, the team conducted a deep analysis of past failures and identified key lessons. They determined to rebuild, they crafted an expanded, multi-sectoral strategic plan, shifting beyond education to include health, economic empowerment, social accountability, and other critical areas. This bold vision was presented to the board and shared with partners, marking a decisive turn in LIAE's approach.

Execution & Breakthrough

With unwavering commitment, the team began implementing the new strategy, designing projects aligned with its objectives. They addressed past mistakes head-on, pursuing funding opportunities with relentless focus, despite having no guarantee of salaries. Their confidence grew as the team embraced change, driven by a belief in their mission rather than financial security.

After six exhausting months of relentless lobbying, strategic networking, and intensive proposal development, their perseverance finally bore fruit. In early 2009, LIAE secured 3 million ETB in critical funding—a testament to rebuilt trust from both new supporters and previous donors who believed in the organization's renewed vision. This lifeline not only saved the organization but also enabled it to: settle outstanding debts and legal penalties; restore staff and board morale; reopen and upgrade offices, signaling stability; regain donor trust, leading to additional funding in 2010; and a renewed future.

The turnaround was nothing short of miraculous. Where there was once despair, LIAE now had a clear path forward, stronger capacity, and a

revitalized vision. The darkest chapter had become the foundation for its most resilient era.

A Defining Era of Transformation (2010–2013)

This period marked a true restoration for LIAE—a testament to resilience, strategic vision, and relentless effort. By mid-2010, our organization had demonstrated significant progress through impactful projects, rapidly accumulated expertise, and dedicated work in health-related initiatives. These achievements positioned us to successfully engage with USAID and the Save the Children Program, securing a landmark funding of approximately USD 1.6 million (equivalent to 200 million ETB at the time).

This transformative support was not limited to financial backing—it also included critical operational assets such as vehicles (a first in LIAE’s history), robust administrative resources, and comprehensive coordination funding. This milestone reinvigorated our founding members and stakeholders, reigniting their passion for the organization’s mission and triggering a remarkable shift in capacity, visibility, and operational scale.

Beyond immediate gains, this breakthrough enabled LIAE to expand into new strategic areas, including social accountability, economic empowerment, and education, further diversifying our impact. However, this resurgence also brought challenges. While many founding members enthusiastically rejoined the revitalized organization, others sought to exploit its renewed prominence and resources for personal gain. LIAE confronted these issues decisively, employing legal, diplomatic, and institutional measures—consulting government bodies, the management board, and the general assembly to ensure transparency and accountability. Through structured resolutions, individuals with conflicting interests and disruptive agendas were removed, safeguarding the organization’s integrity and future.

Emerging stronger, the new leadership and team at LIAE demonstrated that perseverance turns obstacles into opportunities. By embracing innovation as a

guiding principle, the organization fortified its strategic direction, ensuring sustainable progress. With unwavering determination, LIAE not only reclaimed its stature but also set the stage for a future defined by growth, influence, and transformative change. This era stands as proof that true progress is born from resilience—and with persistence, even the greatest challenges become stepping stones to success.

Fast Growth/ Two Strategic Years (2013-2025)

This is the time when LIAE experiencing comprehensive and rapid growth faces unique challenges and opportunities in strategic development. The key drivers of the fast growth in LIAE are due to LIAE having developed and implemented Clear Mission Alignment - Strong alignments with pressing social needs based on evidence that comprises meaningful participation of the community and all stakeholders. Secondly, I have brought proven Impact to reach more than 1.7 million people directly through the construction of so many schools, diverse health services, community education, advocacy, and others focusing on vulnerable groups in 497 districts in 10 regional states since 2001. These demonstrable results attract funding and support. Thirdly, we build strategic partnerships including direct collaborations with 380 government offices, more than 48 major donors, and a leading consortium of more than 20 CSOs. Fourthly, LIAE tried to build firm policy frameworks (>30 policies) to control its operations, ensure accountability, and comply with donor requirements. Fifthly, it also builds a digital system that can help leverage technology for decision-making, evidence generation, outreach, and other organizational operations. In six places, it has developed crisis management capacity that helped LIAE to strengthen its crisis response system internally and externally including positioning to address emerging national and regional challenges. It is highly recognized and started to develop its development models and standard programs with a detailed theory of changes for the community problems. It also ensures financial sustainability by identifying strategic priorities and creating decentralized management structures that root up to the community level. As a result, it diversified its funding sources (grants, donations, social enterprise) and tried to build

reserve funds for stability. Now it is one of the organizations preferred to be part of the national initiatives and platforms including Global Fund CCM memberships to the National CSO counsel leadership. Thus, generally, LIAE is one of the strategic CSOs in the country.

Mr. Yohannes's commitment as a founding member is valued and his leadership at the beginning of the organization was incredible. The organization and its successors will not forget this impact and Mr. Aklilu is always thankful for his support as a mentees, especially at the beginning of the organization.

As one of the founding members, Mr. Aklilu GebreMichael Shomoro's unwavering dedication transformed Love in Action Ethiopia (LIAE) from near-collapse into a national force for change. Taking leadership in 2008 without pay, he mortgaged his future to revive the organization, working tirelessly from makeshift offices with volunteers. His visionary leadership expanded LIAE's mission beyond education to health, economic empowerment, and social accountability, securing critical funding and partnerships that propelled its growth. Under his guidance, LIAE reached 1.7 million beneficiaries across Ethiopia. Mr. Aklilu's legacy—rooted in sacrifice, intellect, and empathy—proves that transformative leadership begins with selfless action, inspiring generations to come.

A Period of Accelerated Growth (2013–2025)

This era marked LIAE's transformation into a nationally recognized, high-impact organization, navigating both rapid growth and complex challenges. During this pivotal period, LIAE successfully designed and executed two groundbreaking strategic plans that fundamentally reshaped our organization and amplified our impact. These plans were not merely documents, but living roadmaps and blueprints for innovation and systemic; Achieve Operational Excellence and Redefine Sustainable Development. It was a period we brought the following few achievements:

Mission-Driven, Evidence-Based Impact: LIAE's success stemmed from its sharp alignment with Ethiopia's most pressing social needs, backed by rigorous data and deep community engagement. Since 2001, our programs have directly reached over 1.7 million beneficiaries in 10 regional states in 497 districts through: Education: Construction of schools, literacy programs, and advocacy for marginalized groups; Health: Diverse service delivery, from maternal care to disease prevention; Community Empowerment: Grassroots education, social accountability initiatives, and economic upliftment; and others. These measurable results strengthened donor confidence and attracted sustainable funding.

Strategic Partnerships for Scale: This multi-stakeholder approach enabled LIAE to maximize reach and influence. LIAE cultivated an extensive network of collaborators, including 380+ government offices (ensuring policy alignment and local ownership); 48+ major international and local donors (securing diversified funding streams); 20+ leading CSOs in consortiums (amplifying collective impact); grossly mobilized more than 1250 employees and 18500 volunteers.

Institutional Strength & Accountability: To sustain growth, LIAE built: 30+ robust policy frameworks (ensuring compliance, transparency, and operational efficiency); A digital transformation strategy (leveraging technology for data-driven decisions, monitoring, and outreach); and A crisis response system (preparing for emerging national and regional challenges).

Innovation & Financial Sustainability: LIAE moved beyond traditional NGO models by: Developing its own evidence-based development frameworks/models (with clear theories of change) including economic empowerment models; Decentralizing management (empowering community-level decision-making); Diversifying revenue (grants, donations, and social enterprises); and Establishing reserve funds (ensuring stability amid economic fluctuations).

National & Global Recognition: Today, LIAE stands as a distinguished organization, celebrated for its outstanding contributions to development and social impact. With a remarkable collection of over 38 prestigious awards, certificates, and trophies, LIAE has been consistently recognized for its excellence. Among its many accolades are the USAID/LCD Program Certificate of Achievement, the TB Champion Award in 2020, the Gambella President's Prestigious Award, the ESAP Annual Knowledge Management Performance Cup, and the Project Hope Final Performance Award, among many others. These recognitions, among many others, reflect LIAE's dedication to driving meaningful change. Beyond its awards, LIAE has solidified its reputation as a trusted and dependable partner for Ethiopia's most critical development initiatives. The organization holds executive and leadership roles in the Global Fund Country Coordinating Mechanism (CCM), Ethiopia Civil Society Organization (CSO) Counsels platforms/ECSOS (over 8,000 member organizations); JCC (currently modified to Ministry of Labor and Skills) Advisory Board, and others.

Through these achievements and partnerships, LIAE has proven itself not just as an award-winning institution, but as a pivotal force in Ethiopia's progress, bridging gaps between communities, government, and international stakeholders to foster sustainable development.

Honoring Foundational Leadership

Mr. Yohannes: As a vision setter and founding member, Mr. Yohannes' early leadership was instrumental in shaping LIAE's vision. His dedication laid the groundwork for what would become a national movement, and his legacy continues to inspire.

Mr. Aklilu GebreMichael Shomoro: Honestly speaking he is the Architect of LIAE's Revival. When LIAE faced a near-collapse in 2008, Mr. Aklilu stepped forward without compensation, mortgaging his future to resurrect the organization. Leading from makeshift offices with volunteer teams, his visionary leadership expanded LIAE's mission beyond education into health, economic empowerment, and social accountability. Under his guidance, LIAE:

Secured transformative funding and partnerships; Scaled impact to 1.7 million beneficiaries; and Evolved into a nationally respected institution. His sacrifice, intellect, good behavior, and unwavering empathy redefined leadership—proving that true change begins with selfless action. Mr. Aklilu’s legacy lives on, inspiring future generations to lead with courage and conviction.

Few Learning as Conclusion

Our history shows that as one of the leading CSOs in the country, we strive to balance rapid expansion with sustainable growth by prioritizing both short-term results and long-term institutional strength within our core program management. Through experience, we’ve found that success depends on dedication, well-structured SMART strategies, professionalism, and sustained engagement—key factors in revitalizing struggling organizations. Transparency, we learned, is essential to maintaining funding and trust. Every setback has served as a vital lesson, helping us adapt to organizational dynamics, operational challenges, and cultural shifts.

Major Geographic Locations and Major Donors

Since 2001 LIAE reached

497 Districts of:

Gambella Region

South Eth Region

Central Ethiopia Region

South West Region

Sidama Region

Oromia Region

Amhara Region

Tigray Region

B/Gumuz Region

Addis Ababa



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