

# Internal Ex-Post Evaluation for Grant Aid Project

conducted by Cambodia office: October, 2011

Country	The Project for Infectious Disease Control
Cambodia	

## I. Project Outline

Project Cost	E/N Grant Limit: 905 million yen 1 <sup>st</sup> Phase: 395 million yen 2 <sup>nd</sup> Phase: 232 million yen 3 <sup>rd</sup> Phase: 278 million yen	Contract Amount: 767 million yen 1 <sup>st</sup> Phase: 364 million yen 2 <sup>nd</sup> Phase: 152 million yen 3 <sup>rd</sup> Phase: 251 million yen
E/N Date	1 <sup>st</sup> Phase: August 2003 2 <sup>nd</sup> Phase: August 2004 3 <sup>rd</sup> Phase: August 2005	
Completion Date	November 2006	
Implementing Agency	Ministry of Health of the Kingdom of Cambodia	
Related Studies	Basic Design Study: October 2002-May 2003	
Contracted Agencies	Consultant(s)	Japan International Cooperation System
	Contractor(s)	N/A
	Supplier(s)	(1 <sup>st</sup> Phase) SEM Corporation (2 <sup>nd</sup> Phase) Iwatani Corporation Ogawa-Seiki Co. Ltd., (3 <sup>rd</sup> Phase) Toyota Tsusho Ogawa-Seiki Co. Ltd.
Related Projects (if any)	<p>Japanese cooperations: JICA Technical Cooperation:</p> <ul style="list-style-type: none"> <li>- Maternal Child Health (MCH) Project (1995-2004), MCH Project Phase II (2000.04-2005.03)</li> <li>- Tuberculosis (TB) Control Project (1999.08-2004.07) TB Control Project Phase II (2004.08-2009.07)</li> </ul> <p>Grant Aid:</p> <ul style="list-style-type: none"> <li>- The Project for Improvement of Maternal and Child Health Service (1998)</li> <li>- The Project for Improvement of the National Tuberculosis Center (1999.8-2001.3)</li> <li>- The Project for Improvement of Medical Equipment of the Siem Reap Hospital (2000.4-2001.3)</li> <li>- The Project for Reduction of Infant Mortality Rate and Disease Rate (2001)</li> <li>- The Project for the Construction of National Maternal and Child Health Center (1995.12-1997.3)</li> </ul> <p>Other donors' cooperations: World Bank, UNICEF, AusAID, Center for Disease Control (CDC)/Atlanta, The Global Alliance for Vaccines and Immunization (GAVI)</p>	
Background	<p>Due to the instabilities of political situation and battered economy, people in Cambodia have suffered the poor health status. Poor logistic system of Expanded Programme on Immunization (EPI), and lack of vaccines and related equipment made it difficult to improve the EPI coverage for children. Infant Mortality Rate (IMR) and under-five mortality rate of Cambodia were worse compared with other South-East Asian countries. With the support from foreign donors, Royal Government of Cambodia (RGC) made much effort to combat with these problems. The Directly Observed Treatment with Short-course chemotherapy (DOTS), one of such support was successfully conducted with the JICA TB control project since 1999. However in order to tackle with the epidemic of TB and other vaccine preventable diseases, such as polio and measles, vaccine, drugs, reagents, and related medical supplies and equipment were still insufficient. Therefore, RGC requested the government of Japan for grant aid to improve the immunization rate and increase the TB smear detection rates.</p>	
Project Objectives	<p><b>Outcome</b></p> <p>To improve the immunization rate by improving logistics of EPI (through procurement of vaccines and cold chains etc. ) as well as to increase the TB smear detection rates by procuring anti-tuberculosis drugs and test reagents for smear examination of sputum (The ultimate goal is to prevent the infectious diseases such as TB, and vaccine preventable diseases)</p>	
	<p><b>Outputs</b></p> <p>Japanese Side</p> <ul style="list-style-type: none"> <li>- Procurement of EPI vaccines and cold chains equipment, anti-tuberculosis drugs and test reagents for smear examination of sputum and other EPI logistic equipments</li> </ul> <p>Cambodia Side</p> <ul style="list-style-type: none"> <li>- Provision of safety storage for procured goods</li> <li>- Distribution of drugs and equipments through existing Health delivery system</li> <li>- Securement of the location for incinerator and training of people who deal with incineration of used injections, etc.</li> </ul>	

## II. Result of the Evaluation

### Summary of the Evaluation

With the donors' assistance, the EPI showed the successful results, and target indicators for infectious diseases and MCH were improving. However, further improvement was needed, especially in the field of MCH and communicable diseases.

This project has largely achieved its objectives of improving the immunization rate of measles and polio by improving logistics of EPI, and increasing the TB case detection rate by procuring anti-tuberculosis drugs and test reagents. As a result, the project has achieved the target value of immunization rate for measles and polios for children under one year as well as TB case detection rate of smear (+) pulmonary TB. Furthermore, the appropriate system as well as the network to manage cold chain equipment has been set up under the EPI program of the Ministry of Health. As for sustainability, it was observed that the project has some problems in developing and designing O&M record system for cold chain equipment, particularly motorbikes and pickups, and late disbursement of O&M budget is also a challenge for the project due to part of technical and financial aspect. Therefore, the sustainability of this project is fair.

For relevance, the project has been highly relevant with Cambodia's development policy, development needs as well as Japan's ODA policy at the time of both ex-ante and ex-post evaluation. For efficiency, project period exceeded the plan. In the light of above, this project is evaluated to be satisfactory.

#### 1 Relevance

The project has been consistent with Cambodia's national health sector strategic plan (National Strategic Development Plan (NSDP 2006-2010) as well as the Second National Health Sector Strategic Plan (2008-2015) which focused on MCH and other infectious diseases, development needs in decreasing the mortality and morbidity of TB, HIV/AIDS and MCH-related diseases, as well as Japan's ODA policy, at the time of both ex-ante and ex-post evaluation. Therefore, its relevance is high.

#### 2 Efficiency

Project cost was within the plan (85% against plan). However, project period exceeded the plan due to the fact that it took more time for drug procurement (ratio against plan: 119%, 119% and 97% for each phase). Therefore, efficiency of the project is fair.

#### 3 Effectiveness/Impact

This project has achieved its objectives, for the target value of the year 2010 as shown in the table below, of improving the immunization rate of measles and polio for children under one year by improving logistics of EPI, and increasing the TB case detection rate of smear (+) pulmonary TB by procuring anti-tuberculosis drugs and test reagents. Considering the fact that other donors, such as UNICEF and WHO have also been contributing to EPI programme, it is more correctly to say that the project has achieved its objectives with the combined efforts of such donors contributing to EPI programme.

As for the logistic management, through visiting and interviewing with staff of HCs (some HCs were randomly selected from very remote area, mountainous area, area along Tonle Sap and borders, and from HCs under Operational District (OD) which showed the low immunization rates in the most recent EPI record), it is considered that health staff can properly manage the cold chains and other equipment since the appropriate system and network to manage cold chain equipment has been set up. Especially for the HC level, one or two staff of each HC was assigned to be responsible for EPI program. It is deemed that the cold-chains equipment are appropriately used and managed in most of HCs.

Therefore, effectiveness/impact of this project is high.



Vaccine storage for distribution and outreach activity



Vaccine storage for routine immunization at HC

#### Quantitative Effects

Indicator(unit)	Baseline value (2002:BD Year)	Baseline value 2005-2008	Target value (2010:Target year)	Actual value (201 :Target year)
% of children under one year immunized against Measles	na	79%	85%	93%
% of children under one year immunized against Polio	na	na	90%	92%
TB case detection rate of smear (+) pulmonary TB (%)	57% (*)	66%	>70%	79%

Data source: pp.24 – 25 of Health Strategic Plan (2008-2015) , MOH Cambodia, April 2008 and Annual Report of EPI Program 2010

(\*) Data source from WHO report 2008 p.93 country profile Cambodia

#### 4 Sustainability

There is no problem in the institutional aspect in terms of EPI logistics; however, the project has some problems in current status of operation, maintenance, and management, such as the poor electricity conditions in Sre Ambil OD, improper usage of refrigerators at some HCs, potential shortage of spare parts of cold chain equipment and poor O&M recording. As for the technical aspect, trainings for health staff on EPI, TB smear examination and DOTS have been properly conducted on a regular basis and health staff has acquired sufficient knowledge and skills, but they have some difficulties to repair the major defects of fridges. As for the financial aspect, the budget allocation on EPI implementation has been smoothly done and O&M budget has been properly allocated through Annual Operation Plan (AOP), but there is a minor problem that the disbursement of O&M budget toward HCs is delayed.

Therefore, sustainability of this project is fair.



Guideline board for minor repair

### III. Recommendations & Lessons Learned

#### Recommendations for Implementing agency:

- The Ministry of Health should check the utilization condition of installed equipment on a regular basis, as the iceliner refrigerator installed in Sre Ambil OD was left unused without any maintenance for a long time because of the poor electricity condition. More importantly, the Ministry of Health should take into consideration on using the existing inventory that have been submitted by PHD annually as an effective tool to monitor the condition of installed equipment and provide necessary feedback to provincial level.
- The Ministry of Health should provide O&M staff of HC, OD and PHD with the instruction and know-how to make record or check-list in order to check and follow-up the condition of equipment.
- Somehow, O&M budget is not setting with high priority compared to other important programs of the Ministry and the procedure of budget disbursement is late than the plan due to government procedure, So, the Ministry of Health should consider to decentralize budget to the provincial level by using Decentralization and Deconcentration Mechanism.

#### Lessons learned for JICA:

- The one of the important factors to improve the EPI programme is whether the effective logistic management system from the central level to the HC level can be established. Therefore, it is imperative that the present logistic management system as well as the absorptive capacity of partner country should be carefully examined, so that the foreign assistance can properly fit into the feasible and manageable framework for his/her EPI programme.