Internal Ex-Post Evaluation for Technical Cooperation Project

Country
Laos

The Project for Strengthening for Health Services for Children (KIDSMILE)

I. Project Outline

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Project Cost	608 million yen	
Project Period	November, 2002 - October, 2007	
Implementing Agency	Ministry of Health (MOH), Vientiane Provincial Health Office, and Oudomxay Provincial Health Office (PHO)	
Cooperation Agency in Japan	National Center for Global Health and Medicine	
Related Projects (if any)	Other donors' cooperations: • World Bank: The Health System Reform and malaria Control Project (1995-2001) • Asian Development Bank: The Primary Health Care Project including Oudomxay provinces (until 2000) • WHO: Technical and financial supports	
Background	Under the serious situation for high maternal and child mortality rates the government of Lao PDR has been making efforts to achieve the Millennium Development Goals (MDGs) by 2015. On the other hand, due to the limited coverage of the health service network in the country, people in remote communities had limited access to the health services. Therefore, the government of Lao PDR requested the government of Japan for technical cooperation to strengthen maternal and child health services in the country.	
Inputs	 Japanese Side Experts 8 experts in 4 areas for Long term, 37 experts in 18 areas for Short term Trainees Received: 42 persons in 14 courses Third-country training: 90 persons Equipment: 52 million yen Local Cost:0.92 million yen Others: 50 million yen 	 Laos Side Staff allocated: 72 counterparts in MOH, Vientiane Provincial Health Office, and Oudomxay Provincial Health Office. Equipment: None Buildings and facilities: project office space in MOH, Vientiane Provincial Health Office, and Oudomxay Provincial Health Office. Others: 218 million kip.
Project Objectives	Overall Goal 1. The health standard of children is improved in the target provinces (Vientiane and Oudomxay). 2. Practical systems established by the Project are utilized beyond the central level and the target provinces. Project Purpose Management system for child health services is strengthened among the MOH and the target provinces (Oudomxay and Vientiane) with various levels' participation. Outputs - Training information system is established at the target provinces and at central level. - The network system is strengthened at the target provinces and at central level. - Minimum Requirements (MR) and Integrated Management for Childhood Illness (IMCI) are established at the target provinces and at central level. - Capacity of Information, Education and Communication (IEC) is improved at the target provinces and at central level. - Activity cycle of planning, implementation, monitoring, evaluation and feedback are carried out at the target provinces and at central level.	

II. Result of the Evaluation

Summary of the Evaluation

In order to reduce maternal mortality rate and child mortality rate, strengthening of health network as well as improvement of health management system were key issues in Laos.

This project has achieved the increase in the access of under-5 population and the improvement of quality of health services at both provincial and district health facilities through strengthening management system for child health service in the target provinces. The Project also achieved the decrease in the under-5 mortality rates for the overall goal of improving the health standard of children in target provinces while the Project partially achieved the nationwide extension of the health management system such as Minimum Requirement (MR) for another overall goal of utilizing practical system established by the project. As for sustainability, some problems have been observed in terms of financial, technical and institutional aspects due to the limited budget and technical skills.

Also the weak management affects the continuity of some of IEC activities and Training Information System (TIS). For relevance, the project has been highly relevant with Lao development policy, development needs as well as Japan's ODA policy. For efficiency, project cost slightly exceeded the plan. In the light of above, this project is evaluated to be satisfactory.

1 Relevance

This project has been highly relevant with the National Socio-Economic Development Plan (NSEDP) and the Health Strategy 2020 to improve health service coverage, development needs for capacity development in child health care to reduce infant and child mortality, as well as Japan's ODA policy at the time of planning/project completion. Therefore, its relevance is high.

2 Effectiveness/Impact

The Project has achieved its project purpose of the increase in under-5 population having the health services at provincial or district facilities and the decrease in the dissatisfaction rate health services users at those health facilities, and well functioned MR, which is a quality management system to improve district hospitals in the two target provinces.

For the overall goal, improvement of health standard of children in the target provinces was verified at the time of ex-post evaluation despite the limited statistical data (the latest national population census in Laos is year of 2005). In Vientiane Province, according to the Vientiane PHO, the under-5 child mortality rate decreased to 35 per 1,000 live births in 2011 from 50 per 1,000 live births in 2002. In Oudomxay, according to the health service record at the Oudomxay Provincial Hospital, there were only 40 cases of the under-5 child mortality during 2006-2010. The Project also partially achieved another overall goal. The system established by the Project, such as MR and the Communication Network have been utilized nationwide and IMCI which was promoted by the Project is further smoothly implemented. In particular, MR, which had been developed by the Project for district hospital, has been expanded to health centers by MOH. Therefore, its effectiveness/impact is high.

3 Efficiency

While inputs were appropriate for producing outputs of the project and project period was as planned (ratio against plan: 100%), project cost slightly exceeded the plan (ratio against plan: 122%). Therefore, efficiency of the project is fair.

4 Sustainability

The Lao health policy incorporated the development of the MRs guideline and its nationwide extension as well as the nationwide Child Health Campaign. However, while the structure of executing agency has been sustained since the implementation of the Project, some constraints such as the limited number of staff and double assignment of administrative and technical works affect continuity of the activities for improvement of health management. In terms of technical aspects, the personnel trained by the Project still keep their skills and knowledge about MRs, IMCI or the Communication Network and they are training other personnel through the on the job training basis (OJT). IEC is partially sustained through utilization of the IEC skills introduced by the Project for community health education. However, the activities of TIS are not sustained any more due to insufficient communication and coordination among the different sections within PHOs. Also the limited technical skills of staff in charge hamper the extension of activities related to IEC. In terms of financial aspects, while the high continuity of MRs and IMCI activity is likely to be ensured because of the approach which intensely focused on strengthening management capacity and required less amount of budget, the activities of IEC and Communication Network, rely on the financial supports by the donors due to the limited budget for PHOs and the District Health Offices (DHOs). Therefore, sustainability of the project is fair.

III. Recommendations & Lessons Learned

Recommendations for Implementing agency:

In order to ensure and enhance the sustainability of the project effects, it can be recommended that regular monitoring and supervision by MOH for PHOs, and by PHOs for DHOs are necessary to be institutionalized. In order to strengthen the management of delivering health services, such regular monitoring and supervision is important to promote good communication among those organizations as well as deeper understandings by local health staff on meaning of each activity.

Lessons learned for JICA:

In order to promote the nationwide extension of the systems developed by JICA's cooperation, as in the case of MR, it is necessary to involve the central level at early stage. It results to have an impact for decision making of policy level in order to prioritize the activities related to the project outcomes in the policy and to standardize and incorporate them into routine work without extra budget. In addition, close coordination and communication among MOH and Development Partners are important to develop an integrated policy, strategy and standards in order to avoid duplications and inconsistency and to efficiently mobilize financial resources from government or other donors.



Child Illness Check Up at District Hospital



MR Monitoring Chart of District Hospital