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AN EVALUATION OF THE
AMERICAN PUBLIC HEALTH ASSOCIATION

(APHA)

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A REPORT PREPARED BY:

- William E. Alli, M.A. -- Member
- Marschal D. Rothe, B.A. -- Member
- Harry B. Harris, B.S. -- Rapporteur d'un Comité

DURING THE PERIOD:

April 15, 1976 -- December 31, 1976

R.I.D.
Reference Center
Box 1000 NE

APHA EVALUATION

The purpose for this evaluation was to comply with the PHA Program Requirement to perform an annual evaluation of each active project.

The evaluation was conducted by AID/W personnel. The media of field reports, AID/W reports, a staff visit and reports from U.S. based consultants formed the background material for reaching a conclusion and making three recommendations.

The evaluation team determined that: 1) the APHA organization has done a good job during the period evaluated; 2) in order to fulfill future anticipated tasks, its services should be expanded to include an evaluation design officer and a secretary/steno; and 3) the present contract should be renewed.

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AN EVALUATION OF THE
AMERICAN PUBLIC HEALTH ASSOCIATION

(APHA)

I. INTRODUCTION

A. PURPOSE OF EVALUATION

To determine the efficiency and effectiveness of the American Public Health Association (APHA) in the management of the Consultation and Evaluation Services required by country programs and by the Office of Population.

B. TEAM COMPOSITION

Since an intensive evaluation using outside consultants had been completed last year, it was decided to do an in-house evaluation using professionals from within PHA/POP and PHA/PROG. The evaluation team was organized as follows:

William E. Alli, M.A. Program Analyst
Evaluation, PHA/PRS - Member
Marschal D. Rothe, B.A. Program Analyst
PHA/POP/IEC - Member
Harry B. Harris, B.S. Special Assistant
PHA/POP/FPSD - Chairman and Rapporteur

The team met initially on April 1976 and reviewed pertinent documents pertaining to APHA and prior evaluations. It was decided that the present evaluation should be based on reports and documents available in AID/W and on a mail questionnaire sent to the field and AID/W personnel.

C. SCOPE OF WORK

It was agreed that the scope of work for the evaluation team should include the following:

1. A staff visit to the local headquarters to ascertain its location, organization, office procedures, administrative capabilities and possibilities for expansion.
2. A survey of Population and Humanitarian Assistance (PHA) personnel stationed in Washington, D.C., to determine their assessment of APHA's consultation and evaluation effectiveness.
3. A survey of PHA Population Officers stationed overseas to obtain their assessment of the effectiveness of APHA services based upon their experiences with specific consultants/evaluators.
4. A survey of several Consultants to determine their personal experiences with services provided by APHA.

II. BACKGROUND

A. CONTRACT

In 1970 a contract was initiated with the American Public Health Association to provide "Field Support Technical Assistance." The contract provided that APHA should develop and maintain a file of qualified professionals in a broad range of technical skills who were willing to accept short-term assignments overseas. Subsequently, the contract was amended to include assignments to evaluation teams which would work under the direction of project managers to fulfill the agency requirement for periodic (every two years) evaluations of programs under the grant or contract.

APHA would handle necessary travel arrangements, pay the per diem and honoraria for the services. The office would also arrange for publication of the report and provide such secretarial assistance as required by the consultant in Washington.

1. APHA was selected to help AID/PHA/POP carry out part of its worldwide population/family planning program responsibilities because of its unique ability to provide timely, appropriate consultants. The consultants are highly qualified personnel who help AID/W and Lesser Developed Countries (LDCs) fulfill specific population/FP requirements through execution of short-term consultations and/or evaluations.

2. The American Public Health Association (APHA) International Division has an office which is established and located in Washington, D.C.

3. The provisions of the current contract, dated May 30, 1975, as amended by changes concern:

- Adequate administrative support for consultants.
- Establishing and maintaining the Consultant Register.
- Competency to effectively backstop requests for consultants in the following areas:
 - Family Planning Administration
 - Contraception Program Management
 - Maternal and Child Health
 - Demography and Vital Statistics
 - Training Centers
 - Nursing Centers
 - Nursing Services
 - Information, Education and Communication (IE&C) Media
 - Women and Voluntary Organizations
 - Logistics
 - Research and Evaluation

The last evaluation of APHA was performed March 31, 1975, by a team consisting of one AID/W employee and two outside consultants. A review of the four recommendations revealed that three have been implemented. The fourth was a recommendation "that where detailed sub-classifications of a field already exist, and are recognized by the profession, the candidate be asked to identify his specialities." It was felt by APHA officials that the listing of detailed sub-classification of twelve Fields

would create an unnecessarily complex management problem. Furthermore, the present APHA list is being used effectively to meet program requirements.

B. FUTURE WORK

In the future AID will have growing needs for evaluation designs, evaluation implementations and consultancies to LDCs. To meet the needs, APHA or a similar type organization will be needed as long as AID continues to assist LDCs in reducing their growth rate.

III. FINDINGS

A. SITE VISIT

APHA was organized and equipped to recruit, assign and backstop the consultants required for the worldwide population/family planning tasks requested to date. A review of the APHA Register revealed that the International Division had over eleven hundred consultants readily available for worldwide service. There were at least fifty consultants listed for each of the specialties required by PHA/POP. The average length of a consultation was 20.6 man/days encumbered and used. The number of personnel utilized was 77, and the average cost was \$3,368.49 (\$3,368.49 = 18 months average - 6/2/75 - 11/30/76). See Table I Appendix (18 months period).

APHA's International Division does not have a principal officer with major responsibilities for designs of evaluations. In the past, consultants have been used principally to overcome the difficulties. In the future, these difficulties could be overcome if a person were assigned to the function of part-time (50% initially) Evaluation Design Officer supported by a part-time secretary/stenographer. In view of the projected increase in AID's use of the APHA for evaluation design and implementation, such an increase in staff should be a part of an amendment of solicitation/modification of Contract.

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B. SURVEY EXTRACTS

Extracts of field responses received from the Population Officers stationed overseas, AID/W Project Managers and consultants as to the effectiveness of the APHA were overwhelmingly favorable.

C. COUNTRY RESPONSES TO SURVEYS

Country responses to the Evaluation Questionnaires are shown as Table II. The responses to the Consultation Questionnaire are shown as Table III.

1. Evaluation of the "University of West Indies in Jamaica."

"I have nothing but the highest praise for the way in which Malcolm Merrill and Howard Hough have organized their office to handle with efficiency and dispatch, the fielding of consultants. Their personal assistance in facilitating travel arrangements, providing objectives of the consultation, form to be completed and report guidelines is most appreciated.

I am unclear about whether background materials which bear directly or have implications for the consultation are usually furnished. For some consultations this material will not be available, where it is, prior consultant reports and current country material, available within the agency or related agencies, could strengthen the continuity and immediate relevancy of the consultants assistance. Supportive information might also include current information on resources known to the agency which could be considered in planning realistic follow-up recommendations. It might further strengthen the consultation if their materials could be discussed in a briefing session at the APHA office if the consultants route could be so arranged.

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During the consultation I have always felt I could depend on the APHA office to provide support if needed and they have always been most helpful after consultancy."

Elizabeth W. Clark, Dr. P.H.
Professor Of Public Health,
University of Hawaii at Manoa

2. APHA Consultant

. . . "The APHA staff, especially Mr. Hough and Dr. Malcolm Merrill, were most supportive to me during the entire period of my assignment. Full

details of the assignment were provided by Mr. Hough by telephone prior to my arrival in Washington.

Background material bearing on the country program and the assignment was made available from earlier APHA consultants, particularly the report of the evaluation team headed by Dr. Carol D'Onofrio, Berkeley, and from the APHA country files in Washington. Briefings with APHA staff in Washington, followed by a joint meeting with PHA/POP staff were arranged by Mr. Hough and efficiently carried out.

. . . . Backstop services from APHA while I was in Jamaica were excellent. . . . My only negative reaction is that I have had no feedback on what happened in Jamaica as a result of my consultancy. This is no reflection on APHA. It might be useful, however, to have some mechanism, perhaps in APHA, to include ex-consultant in the linkage concept noted in my letter to Mr. Hough, particularly in the long-term scheme of things if they are to become involved again with that country or in other assignments. . . .

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Alton E. Wilson
Ex-Population Officer
USAID/Jamaica

3. Harvard University:

. . . "I have no suggestion as to how APHA might have improved their support because their pre and post assignment support was entirely satisfactory and facilitated the consultancy assignment quite adequately."

Dr. James E. Austin

4. GE-TEMPO Project on Population/Economic Growth Analysis by Dr. B. Thomas Walsh

"With reference to the several evaluations which Dr. B. Thomas Walsh carried out under APHA contract, one recurring complaint appeared. Dr. Walsh

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complained that it took him an inordinate amount of time to get a reasonably error-free typed draft out of the APHA secretariat. Unfortunately, I can only report his complaint; I cannot evaluate its legitimacy. Since the secretarial services provided by APHA are a critical input to the completion of evaluations, you may want to include this point in the checklist used by the evaluation team." *check*

Carl J. Hemmer, Chief
PHA/POP/PPD

5. Three projects: PLATO, GE-TEMPO, and the Socio-Economic Analysis Staff of the Bureau of the Census

"Our experience with APHA consultation services actually covers the period June to December 1976 during which three project evaluations were completed for this office by Dr. Walsh. . . . In all three cases we found the management services provided by APHA to be satisfactory. The only difficulties encountered concerned secretarial services provided the consultant by the contractor which were more on an "as available" basis and occasionally caused some delay in production. It is also to be noted that due to this lack of "dedicated" secretarial service, there was no allowance for proof reading between the draft and final versions of the report. This resulted in a fairly large number of errors in all three final reports." *check*

Gerald P. Patrick
PHA/POP/PPD

6. SYNTAX

"The few suggestions I have to make are in relation to the functional aspects of consulting through the APHA program, rather than in the general management area. First, it has been my experience on some few occasions that adequate terms of reference were not available prior to undertaking a particular assignment. I would suggest the AID Mission or the host *check*

country government be requested to send the necessary background information directly to a particular consultant prior to departure. It has also been my experience that in some cases the AID mission is not really cognizant of the procedural aspects relating to an APHA consultation. It might help were APHA to once again inform each mission as to the responsibilities of the consultant and the obligation of the AID mission to provide needed support services. I consider this particularly important if APHA is sending a consultant who may be unfamiliar with AID in-country procedures. -rec

The only other suggestion I can make is that there be more interaction among consultants who are doing work in a particular country and the sharing of consultant reports on particular countries and/or subject areas. I frequently have the feeling that I am re-asking questions which were probably asked in the past by another consultant." Rec

Robert H. Smith, Ph.D.
APHA Consultant

IV. RECOMMENDATIONS

1. That the contract be amended to add a part-time (50% initially) Evaluation Design Officer supported by a part-time secretary/steno to the APHA International Division. It will be his responsibility to make sure the evaluation team works within the broad guidelines of agency evaluation requirements. Rec.
2. That the amended contract be renewed for two additional years, effective March 1, 1977.

TABLE I
CONTRACT COST AND PERSONNEL

6 1/2 YEARS

	AID/csd/2604 6/2/70 - 6/1/75 5 YEARS		AID/pha/C-1100 6/2/75 - 11/30/76 18 MOS.		TOTAL 6/2/70 - 11/30/76 6 1/2 YEARS
Task Assignments Rec'd	154		52		206
Completed	133	1)	42	2)	175
Work performed for:					
LDC	128		17		145
AID/W	5		25		30
Consultants Required	200		77		277
Consultant M/Ds used	4,840.		1,478.5		6,318.5
Staff M/Ds used	2,575		1,365		4,140
Budgeted	\$ 1,549,255.		\$ 750,000.		\$ 2,229,555.
Expended	\$ 1,471,949.		\$ 462,226.		\$ 1,934,175.
Breakdown of Expenditures					
Consult. Costs	\$ 844,496.		\$ 241,648.	3)	\$ 1,086,144.
Core Opr. Costs	\$ 385,084.		\$ 144,570.		\$ 529,654.
Overhead	\$ 242,369.		\$ 76,008.		318,377.

- 1) 18 were cancelled and 3 carried forward to C-1100.
2) 3 were cancelled and 7 are currently ongoing.
3) An additional \$95,485. is encumbered for current assignments.

TABLE II - EVALUATIONS*

II. EVALUATIONS (8 Consultancies, 15 Different Countries)	<u>YES</u>
A. Was the consultant's arrival at post timely?	12
B. Was the assigned consultant professionally capable of performing the assigned task?	14
C. Was the assigned Mission accomplished?	12
D. Was the consultant's report presented to the host country?	6

*Eight Evaluation teams visited fifteen different countries plus two where work was done entirely in Washington.

TABLE III

COUNTRY RESPONSES TO 12 ASSIGNMENTS
(13 Consultants)

I. Consultancies (12 Countries)	<u>YES</u>
A. Was the consultant's arrival at post timely?	9
B. Was the assigned consultant professionally capable of performing the assigned task?	10
C. Was the assigned mission accomplished?	10
D. Was the consultant's report presented to the host country?	8
E. The Host Country's reaction to the recommendations were:	
1. Accept	5
2. Modify	5
3. Reject	0
F. Do you believe the host country would like to use APHA Consultants in the future?	9

TABLE IV

PRINCIPAL OFFICIALS CONTACTED

- Dr. Malcolm H. Merrill, Associate Executive Director, Division of International Health Programs, American Public Health Association, Washington, D.C.
- Mr. Howard E. Hough, Project Coordinator, Division of International Health Programs, American Public Health Association, Washington, D.C.
- Mr. Thomas Reece III, Deputy Population Officer, USAID/Indonesia, Jakarta, Indonesia
- Mr. Lenni W. Kangas, Population Officer, USAID/Philippines, Manila, Philippines.
- Dr. Andrew Haynal, Population Officer, USAID/Pakistan, Islamabad, Pakistan.
- Mr. Arjuna Abayomi-Cole, Population Officer, USAID/Jamaica, Kingston, Jamaica.
- Mr. Alton Wilson, APHA Consultant, Napa, California.
- Dr. Elizabeth W. Clark, APHA Consultant, East-West Center, Honolulu, Hawaii.
- Mr. Scott W. Edmonds, Population Officer, USAID/Thailand, Bangkok, Thailand.
- Mr. Samuel Taylor, Population Officer, USAID/El Salvador, San Salvador, El Salvador.
- Mr. Steven H. Singer, AID Officer, USAID/Benin, Cotonou, Benin.
- Dr. Harold Haight, Population Officer, USAID/Ecuador, Quito, Ecuador.
- Mr. John Paul James, Population Officer, USAID/Guatemala, Guatemala City, Guatemala.
- Sr. L. Lopez, Population Officer, USAID/Costa Rica, San Jose, Costa Rica.
- Mr. Wilbur Wallace, Population Officer, USAID/Tunisia, Tunis, Tunisia.
- Mr. Douglas P. Broome, Population Representative, USAID/Gambia, Banjul, The Gambia.
- Mr. John D. Peabody, Population Officer, USAID/Honduras, Tegucigalpa, Honduras.
- Mr. Albert P. Disdier, Mission Director, USAID/Morocco, Rabat, Morocco.
- Mr. Thomas T. Harriman, Population Officer, USAID/Korea, Seoul, Korea.
- Dr. Felix Hurtado, Population Officer, USAID/Panama, Panama City, Panama.
- Dr. James E. Austin, Associate Professor of Business Administration, Harvard University, Boston, Mass.
- Dr. Robert H. Smith, Syntex Inc., Columbia, Maryland, APHA Consultant.
- Mr. Carl J. Hemmer, Chief, PPD, PHA/POP
- Mr. Gerald P. Patrick, PPD, PHA/POP