

PROJECT EVALUATION SUMMARY (PES) - PART I

1. PROJECT TITLE Health Institutions Improvement 122(d)			2. PROJECT NUMBER 698-0412	3. MISSION/AID/W OFFICE AFR/RA
4. EVALUATION NUMBER (Enter the number maintained by the reporting unit e.g., Country or AID/W Administrative Code, Fiscal Year, Serial No. beginning with No. 1 each FY) ROUTINE Evaluation 698-85-02 <input checked="" type="checkbox"/> REGULAR EVALUATION <input type="checkbox"/> SPECIAL EVALUATION				
5. KEY PROJECT IMPLEMENTATION DATES		6. ESTIMATED PROJECT FUNDING		7. PERIOD COVERED BY EVALUATION
A. First PRC-AG or Equivalent FY 79	B. Final Obligation Expected FY 85	C. Final Input Delivery FY 85	A. Total \$ 5925 B. U.S. \$ 5925	From (month/yr.) 01/79 To (month/yr.) 04/83 Date of Evaluation Review

8. ACTION DECISIONS APPROVED BY MISSION OR AID/W OFFICE DIRECTOR

A. List decisions and/or unresolved issues; cite those items needing further study. (NOTE: Mission decisions which anticipate AID/W or regional office action should specify type of document, e.g., program, SPAR, PIC, which will present detailed request.)	3. NAME OF OFFICER RESPONSIBLE FOR ACTION	C. DATE ACTION TO BE COMPLETED
1. Extend grant period and provide additional funding.	AFR/RA 000013	Mar. 31, 1985
2. Allot additional resources, human & financial, to supervising, monitoring, evaluating and supporting the activities of those institutions.	S&T/HP and AFR/TR, coordinated by AFR/RA	Continuing
3. Convene quarterly meetings of the four institutions in Washington or at the institutions on a rotating basis to exchange information on programs, on Africa health conditions, on potential other donors, etc., looking toward the formal or informal union into a consortium.	Grantees with assistance of S&T/HP and AFR/TR as necessary	Continuing
4. Periodically review the status of requests for decisions by the institutions and respond as quickly as possible. This includes specific matters referred to in Recommendations 12, 13, 15, and 16.	AFR/RA	Continuing
5. Explore possibilities for exchange of technical information.	S&T/DIU, Grantees	Jan. 1986
6. Explore feasibility of forming a consortium to pool grantees capabilities.	Grantees	Jan. 1986
7. Employ Grantee Technical Experts on AID assignments.	A.I.D.	Continuing
8. Provide opportunities for non-degree training.	Grantees	Continuing
9. Integrate International Health courses within Grantee institution curriculum.	Grantees	Continuing
10. Audit Project. Request made to AAA/AFR/PMR May 22, 1984.	RIG/A/W	To be Determined

9. INVENTORY OF DOCUMENTS TO BE REVISED PER ABOVE DECISIONS

<input type="checkbox"/> Project Paper	<input type="checkbox"/> Implementation Plan e.g., CPI Network	<input type="checkbox"/> Other (Specify)
<input type="checkbox"/> Financial Plan	<input checked="" type="checkbox"/> PIC/T	_____
<input type="checkbox"/> Logical Framework	<input type="checkbox"/> PIC/C	<input type="checkbox"/> Other (Specify)
<input type="checkbox"/> Project Agreement	<input type="checkbox"/> PIC/P	_____

10. ALTERNATIVE DECISIONS ON FUTURE OF PROJECT

A. <input checked="" type="checkbox"/>	Continue Project Without Change
B. <input type="checkbox"/>	Change Project Design and/or
	Change Implementation Plan
C. <input type="checkbox"/>	Discontinue Project

11. PROJECT OFFICER AND HOST COUNTRY OR OTHER RANKING PARTICIPANTS AS APPROPRIATE (Name and Title)

James R. Cummiskey
James R. Cummiskey
Project Officer, AFR/RA

12. Mission/AID/W Office Director Approval

Signature *William H. Naylor, Jr.*
Typed Name William H. Naylor, Jr
Director, AFR/RA
Date September 30, 1984

13. **Summary**

Progress in establishing institutional capability has been slower than anticipated. Achieving that purpose for the four institutions will require more time and money. The initial grants are being increased, but that is only part of what is needed. In order to accomplish the original objectives, A.I.D. must also strengthen its monitoring and start to utilize the technical resources of these four institutions in developing its health programs on a worldwide basis.

14. **Evaluation Methodology**

Development Associates, under an IQC contract with AID, provided a team of three specialists in evaluation, with competencies in general development assistance and public health, in training and curriculum development and in financial management to make onsite evaluations at the four institutions.

The purpose of the evaluation was to determine the progress made by each of the four grantee institutions in achieving the stated objectives of its grant agreement, to review problems encountered in carrying out the grants as well as the effectiveness of the administrative controls and procedures adopted by the grantees, and to assess the likelihood of the final achievement of all goals set forth in the grant agreements.

The evaluation was carried out primarily by visits to the four institutions by the evaluation team, by interviews with appropriate members of their faculties and administrative staffs as well as with selected students, and a review of pertinent reports and other documents and accounts.

The four institutions that received grants are:

Meharry Medical College, Nashville, TN	698-0412.1
Howard University, Washington, DC	698-0412.2
Charles R. Drew, Postgraduate Medical School, Los Angeles, CA	698-0412.3
Tuskegee Institute, Tuskegee, AL	698-0412.4

15. **External Factors:**

All of the institutions have faced leadership changes and reorganizations which temporarily delayed the growth or development of their planned strengthening activities. In addition, some reformations have come about and others are planned as a result of intensive

self-evaluations by the leadership of the institutions. The result of these changes is a potential improvement in the readiness of these institutions to respond eventually to needs for their advisory services. This process probably has caused delays for the institutions in achieving one of the major intents of the grant, to prepare themselves to assume roles in providing technical assistance to health providers in Africa and to develop a marketable capacity which would end their dependence on AID for grant as opposed to contract support. However, these changes generally have had a positive effect. Institution building is a slow, deliberate process. Results cannot be anticipated within a five-year time frame under any circumstances. Because of the need to preserve what has been developed and to avoid losing the impetus for growth and improvement which was found at all the institutions, it is suggested that AID extend the period of funding of these four grants and, in effect, agree with the team's findings that more time and funds are required to complete the development process which has been initiated.

16. Inputs

The inputs into these projects were mainly costs of staff salaries and fringe benefits, supplies and equipment, consultant fees, travel costs and the costs of conducting courses, seminars and workshops. There were only minor problems with the delivery of these inputs per se. However, A.I.D. did not accompany these inputs with adequate monitoring. As a result there was some inaction and confusion, delays in project implementation and the internal reorganizations of several of the institutions as they tried to cope with the situation.

The list of inputs is limited to budget items for each institution, it having apparently not been recognized that monitoring had to go with these budgetary outlays in order to assure that the anticipated results would be achieved.

17. Outputs

The outputs were to have involved:

- a. Strengthening the organization through setting up programming and policy-making organs, completing surveys of institutional resources, establishing activity reporting systems, and visiting the African countries to establish linkages.
- b. Increasing educational and training capability through curriculum development and faculty development (visits to African institutions).

- c. Improving research capability through investigating status of current African development projects, conducting literature searches, and cooperating with African institutions in conducting research.
- d. Improving service capability through increased course offerings of relevance to African development, conducting workshops and seminars, and providing technical assistance.

18. Purpose

Project purpose:

To provide funds to research and educational institutions for the purpose of strengthening their capacity to develop and carry out programs concerned with the economic and social development of developing countries.

The evaluators find that progress in institution building is slower than anticipated, but that a start has been made. The organizational problems, among others, that several institutions confronted, are described as part of a normal growth process. More time and money are required to accomplish project purpose. They also recommend more intensive program management by A.I.D.

The accomplishment of project purpose would require that the institutions actually develop and carry out programs in a developing country context. The evaluators suggest that A.I.D. make a deliberate effort to use these institutions to fill some of its technical assistance requirements. This would go a long way toward strengthening capability and also toward demonstrating that capability.

19. Goal

The goal toward which the project contributes is the improvement of the quality of life for the poor majority in developing countries through the prevention of illness and disability, the promotion of health and well-being, and the amelioration of health problems which currently act as major constraints to the social and economic development of these countries. Until the project purpose is achieved its contribution to the goal is minimal

20. Beneficiaries

The target beneficiaries are the populations of developing countries. So far there has been no impact.

21. **Unplanned Effects:**

None

22. **Lessons Learned:**

1. When these grants were given in 1978, the Bureau for Africa did not have experience in managing strengthening grants. The philosophy adopted by the office responsible for management of the grants was to manage them just as other grants were managed. It was not realized that more attention to and communication with the Section 122(d) grantees would be necessary in order to nurture their development. It is now realized that more time and attention is required for strengthening grants. The Agency has determined that the Science and Technology Bureau is in a better position, based on its experience in managing strengthening grants and the worldwide applicability of its projects, than any of the geographic bureaus to take the lead in exploring ways to more actively involve Historically Black Colleges and Universities (HBCUs) in the social and economic development process. The recipient institutions, A.I.D. and the developing countries worldwide will better benefit by having S&T take the lead in future activities designed to utilize the talent and expertise available in HBCUs for a variety of social and economic development activities, including health.

2. Many of the suggestions of the evaluators appear to have merit such as:

- a. A.I.D. allotting additional resources to monitoring;
- b. A.I.D. making a deliberate effort to employ the technical expertise already available in these institutions in its own program development. This was the reason behind the grant program in the first place. Also it would help the institutions to gain practical experience;
- c. The institutions avoiding setting up brand new graduate degree programs in international health that are really not called for and cannot be sustained.

23. **Special Comments**

1. It is important to note that despite minimal A.I.D. monitoring and HBCU institutional growing problems, the grantees appear to have made good use of the resources provided by the strengthening grants. The Section 122(d) grantees won the following A.I.D. contracts and grants for work overseas:

a. The Charles R. Drew Postgraduate Medical School in 1982 competitively won a two-year Indefinite Quantity Contract with A.I.D. in the health care planning and management area;

b. Tuskegee Institute competitively won a PRICORE grant of \$100,000 in 1983 to assist the Government of Liberia extend information about primary health care to rural areas by providing training to school-age children in the formal education system.

c. In August 1984 Howard University was awarded a \$6,500,000 grant to assist the Government of Malawi to improve health care services, train rural health workers and strengthen its health-care institutions. The five-year grant is the largest A.I.D. has ever given th a HBCU. Howard is also one of several universities involved in an A.I.D. \$30,000,000 contract signed with Florida State University to improve the efficiency of the educational systems in many third world countries;

2. An Executive Summary is not presented in connection with this evaluation, because it is a routine evaluation.