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PROJECT APPRAISAL REPORT (PAR)

1. PROJECT NO. 524-0102	2. PAR FOR PERIOD: 15 April 1975 TO 30 June 1976	3. COUNTRY Nicaragua	4. PAR SERIAL NO. 77-4
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6. PROJECT TITLE **B# 20216**
Health Sector Assessment (HSA)

6. PROJECT DURATION: Began FY 1975 Ends FY 1976	7. DATE LATEST PROP NA	8. DATE LATEST PIP NA	9. DATE PRIOR PAR
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10. U.S. FUNDING	a. Cumulative Obligation Thru Prior FY: \$ 75,000	b. Current FY Estimated Budget: \$ 65,000	c. Estimated Budget to completion After Current FY: \$ 140,000
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11. KEY ACTION AGENTS (Contractor, Participating Agency or Voluntary Agency)

a. NAME	b. CONTRACT, PASA OR VOL. AG. NO.
Instituto Nutricional de Centroamerica y Panama (INCAP)	Contract
American Public Health Association (APHA)	Contract
Edward L. Kadunc	Contract

I. NEW ACTIONS PROPOSED AND REQUESTED AS A RESULT OF THIS EVALUATION

A. ACTION (X)			B. LIST OF ACTIONS	C. PROPOSED ACTION COMPLETION DATE
USAID	AID/W	HOST		
x			The only new action proposed is follow-up and review of the information being developed for low priority health programs. A terminal PAR will be prepared in June 1977.	December 1976

D. RE-PLANNING REQUIRES	<input type="checkbox"/> REVISED OR NEW: <input type="checkbox"/> PROP <input type="checkbox"/> PIP <input type="checkbox"/> PRO AG <input type="checkbox"/> PIOT <input type="checkbox"/> PIO/C <input type="checkbox"/> PIO/E	E. DATE OF MISSION REVIEW August 26, 1976
PROJECT MANAGER: TYPED NAME, SIGNED INITIALS AND DATE James E. Sam.	MISSION DIRECTOR: TYPED NAME, SIGNED INITIALS AND DATE Emerson J. Melaven, Acting Director	

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II. PERFORMANCE OF KEY INPUTS AND ACTION AGENTS

A. INPUT OR ACTION AGENT CONTRACTOR, PARTICIPATING AGENCY OR VOLUNTARY AGENCY	B. PERFORMANCE AGAINST PLAN							C. IMPORTANCE FOR ACHIEVING PROJECT PURPOSE (X)					
	UNSATISFACTORY		SATISFACTORY			OUT-STANDING		LOW	MEDIUM		HIGH		
	1	2	3	4	5	6	7		1	2		3	4
1. INCAP						X						X	
2. APHA							X					X	
3. Edward Kadunc						X						X	

Comment on key factors determining rating **INCAP** played a key part in developing nutritional information and analysis for the HSA. They sent highly skilled and dedicated consultant personnel to work closely with GON team members. They produced a thorough highly professional report that identified the major nutritional problems and constraints. Their report was stronger in the health and social phase of nutritional analysis than in the agricultural aspects. - **APHA** supplied several consultants to assist with the HSA. The consultants were highly professional, flexible, and effective, **APHA** responded rapidly to the consultant needs of the HSA, and consultant reports were complete and received on schedule. - **Mr. Kadunc** was performing in his first professional role after graduating with an **M.P.H.** He was completely dedicated, knowledgeable, efficient and flexible. He worked effectively with the Nicaraguan team and was completely fluent in Spanish.

4. PARTICIPANT TRAINING	1	2	3	4	5	6	7	1	2	3	4	5
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Comment on key factors determining rating

5. COMMODITIES	1	2	3	4	5	6	7	1	2	3	4	5
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Comment on key factors determining rating

Commodities were mostly in the form of office equipment. The quality of the equipment purchased locally was excellent and added significantly to improving the working environment.

6. COOPERATING COUNTRY	a. PERSONNEL											
		1	2	3	4	5	6	7	1	2	3	4
	b. OTHER											
Financial contribution				X								X
							X				X	

Comment on key factors determining rating **The financial contribution** of the GON was above what they programmed in all areas. Present plans are to continue the activities of the HSA, especially in support of nutrition developmental activities. The activities of the HSA are now completely supported by the GON.

Personnel made available from health agencies were respected professionals but without sufficient experience to execute the complexities involved in a sectorial assessment. Personnel were dedicated but needed greater exposure to planning methodologies, analytic skill development and project writing before being assigned to a national level health sector planning team.

7. OTHER DONORS	1	2	3	4	5	6	7	1	2	3	4	5
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* (See Next Page for Comments on Other Donors)

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II. 7. Continued: Comment on key factors determining rating of Other Donors

PAHO also assisted in the coordination of the INCAP activities and was helpful in recommending consultant personnel in several health areas.

III. KEY OUTPUT INDICATORS AND TARGETS

A. QUANTITATIVE INDICATORS OF MAJOR OUTPUTS		TARGETS (Percentage/Rate/Amount)					END OF PROJECT
		CUMU- LATIVE PRIOR FY	CURRENT FY		FY ____	FY ____	
			TO DATE	TO END			
	PLANNED						
	ACTUAL PERFORM- ANCE						
	REPLANNED						
	PLANNED						
	ACTUAL PERFORM- ANCE						
	REPLANNED						
	PLANNED						
	ACTUAL PERFORM- ANCE						
	REPLANNED						
	PLANNED						
	ACTUAL PERFORM- ANCE						
	REPLANNED						
B. QUALITATIVE INDICATORS FOR MAJOR OUTPUTS		COMMENT:					
1. Presentation of Health Sector Assessment Document		The HSA (26 volumes) was presented to the President within 10 days of the target date. This report was the most complete and analytic ever presented by a GON health group or agency. This assessment proved to be a wealth of information and significantly assisted with the preparation of the subsequent loan paper.					
2. Establishment of a health sector analysis group.		COMMENT: The HSA group was formed promptly and with a full complement of personnel. The HSA group is still involved in the analysis and development of health sector programs.					
3.		COMMENT:					

IV. PROJECT PURPOSE

A. 1. Statement of purpose as currently envisaged.

2. Same as in PROP? YES NO

To determine the adequacy of existing curative and preventive services with special attention to rural health services.

B. 1. Conditions which will exist when above purpose is achieved.	2. Evidence to date of progress toward these conditions.
1. Descriptive analysis of health services, available in Nicaragua and utilization of these services.	1. The HSA concentrates on the health services available through governmental institutions. This analysis was intensive and thorough. There are gaps in the analysis of the private health sector services given by physicians, pharmacists, indigenous healers and midwives.
2. Description of national health sector policy.	2. The HSA report gives a complete description of major aspects of GON health policy through analysis and a description of the results of the Chinandega Conference which summarized GON health policies and goals.
3. Description of the determinants of malnutrition and analysis of effects of alternative policy.	3. The HSA report gives a complete description of nutritional problems with additional detailed information available in the form of the INCAP consultant report and Nutrition Sector Assessment. Alternative policy development is being undertaken through a nutrition grant.
4. Analysis of the constraints affecting administration in the health sector.	4. The HSA stresses that administrative problems relate back to health manpower training and subsequent difficulty in execution of complex administrative procedures.

V. PROGRAMMING GOAL

A. Statement of Programming Goal

To determine the content and the costs, including external financing, of a program to improve health services in Nicaragua.

B. Will the achievement of the project purpose make a significant contribution to the programming goal, given the magnitude of the national problem? Cite evidence.

The completion of the HSA, with an initial estimation of strategy and costs to alleviate the major health problems, has already moved the Nicaraguan Health Sector far along towards a better perception and more feasible solution of their health problems. From the HSA, the GON moved rapidly into planning for a health loan with A.I.D. and preliminary discussions with I.D.B. These loan sponsored activities should move the GON into a favorable position to control the major disease problems. The HSA team, however, is still analyzing lower priority information which should assist the GON to develop strategies and programs to alleviate less important health programs.