

PD-ABS-142
29700

A.I.D. EVALUATION SUMMARY - PART I

1. BEFORE FILLING OUT THIS FORM, READ THE ATTACHED INSTRUCTIONS.
2. USE LETTER QUALITY TYPE, NOT 'DOT MATRIX' TYPE.

IDENTIFICATION DATA

A. Reporting A.I.D. Unit: Mission or AID/W Office (EOP) <u>RDO/SP</u>		B. Was Evaluation Scheduled in Current FY Annual Evaluation Plan? Yes <input type="checkbox"/> Skipped <input type="checkbox"/> Ad Hoc <input type="checkbox"/> Evaluation Plan Submission Date: FY <u>92</u>	C. Evaluation Timing Interim <input checked="" type="checkbox"/> Final <input type="checkbox"/> Ex Post <input type="checkbox"/> Other <input type="checkbox"/>
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D. Activity or Activities Evaluated (List the following information for project(s) or program(s) evaluated; if not applicable, list title and date of the evaluation report.)

Project No.	Project /Program Title	First PROAG or Equivalent (FY)	Most Recent PACD (Mo/Yr)	Planned LOP Cost (000)	Amount Obligated to Date (000)
879-0017	PAPUA NEW GUINEA - CHILD SURVIVAL SUPPORT PROJECT	1989	3/1995	6.407 MILLION	6.407 MILLION

ACTIONS

E. Action Decisions Approved By Mission or AID/W Office Director

Action(s) Required	Name of Officer Responsible for Action	Date Action to be Completed
1. Contractor directed to generate detailed suggestions for a revised strategic plan for Phase II.	PCL DHC	11/93
2. Amend the present TA contract in order to delete language that refers to the obligation to employ Regional Support Units (RSUs) as the main institutional vehicle for implementing the activities foreseen in Phases I and II of the CSSP.	PCL DHC RCO/MANILA	5/94
3. Consider options for assuring availability of key local faculty for the Community Health Nursing Administration (CHNA) diploma course.	PCL DHC	11/93
4. Focus Phase II field concentration on four provinces, rather than all provinces. Revise project "end-of-project-status" (EOPS) indicators.	PCL DHC	11/93

(Attach extra sheet if necessary)

APPROVALS

F. Date Of Mission Or AID/W Office Review Of Evaluation: (Month) _____ (Day) _____ (Year) _____

G. Approvals of Evaluation Summary And Action Decisions:

Name (Typed)	Project/Program Officer	Representative of Borrower/Grantee	Evaluation Officer	Mission or AID/W Office Director
	PATRICK C. LOWRY DAVID H. CALDER		ANTOINETTE FERRARA	DAVID LEONG ACTING REGIONAL DIR.
Signature				
Date	8/03/94		8/5/94	6/5/94

ABSTRACT

H. Evaluation Abstract (Do not exceed the space provided)

This project is an effort to reduce obstacles to improved quality, efficiency, and effectiveness in the delivery of child survival and maternal health services in rural areas of Papua New Guinea (PNG). The formal goal of the project is to reduce child and maternal mortality in PNG; the formal purpose is to improve service delivery for maternal and child health (MCH) care in rural areas. The project is being implemented largely through a team of contractors from a U.S. firm working intimately with the GPNG (primarily the Dept. of Health (DOH), but also as necessary with other GPNG bodies, other donors, and provincial authorities).

This mid-term evaluation's field work in PNG was carried out in March-April 1993 by a team of external evaluators on the basis of a review of documents, field visits, as well as interviews with GPNG officials, contractor staff, donor agency representatives, and USAID staff. The major findings and conclusions are:

- * Achievements have been made despite a financial crisis in GPNG related to falling revenues from mining; an extremely high level of decentralization of management authority in GPNG; major staff changes at the high levels in the DOH; deterioration in the law and order situation in rural areas and a consequent cut-back in outreach activities by health staff; and realization that some of the design assumptions proved to be incorrect over time.
- * The CSSP has made progress in achieving its objectives. Many technical "products" are evident and being applied in PNG. Organizational issues remain unresolved in the decentralized GPNG system and need to be reconsidered by the project.
- * The development of Regional Support Units (RSUs) was an original project focus, but it is now clear that these units are not viable as a strong force and they no longer are a high GPNG priority. The project should consider other organizational mechanisms to achieve project objectives.
- * There were commendable technical support activities performed to help the DOH and provinces strengthen the content of PNG's rural health services. An impressive array of technical documents, curricula and audio-visual material, all centered appropriately on child survival technologies and messages, had been produced by energetic collaborators.

COSTS

I. Evaluation Costs

1. Evaluation Team		Contract Number OR TDY Person Days	Contract Cost OR TDY Cost (U.S. \$)	Source of Funds
Name	Affiliation			
ELVIRA BERACOCHEA	DATEX/FUTURES GROUP, CONSUL- TANT	DATEX/FUTURES	\$73,000	CSSP THRU DATEX/FUTURES IQ C
JOHN GILLESPIE	DATEX/FUTURES GROUP, CONSUL- TANT	IQ C NO. PDC 5929-I-		
PETER HEYWOOD	DATEX/FUTURES GROUP, CONSUL- TANT	115.00		

2. Mission/Office Professional Staff
Person-Days (Estimate) _____

3. Borrower/Grantee Professional
Staff Person-Days (Estimate) _____

A.I.D. EVALUATION SUMMARY - PART II

SUMMARY

J. Summary of Evaluation Findings, Conclusions and Recommendations (Try not to exceed the three (3) pages provided)

Address the following items:

- | | |
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| <ul style="list-style-type: none"> • Purpose of evaluation and methodology used • Purpose of activity(ies) evaluated • Findings and conclusions (relate to questions) | <ul style="list-style-type: none"> • Principal recommendations • Lessons learned |
|--|--|

Mission or Office:

RDO/SP

Date This Summary Prepared:

7/94

Title And Date Of Full Evaluation Report: JUNE 3, 1994

A REPORT ON THE INTERIM EVALUATION OF THE CHILD SURVIVAL SUPPORT PROJECT IN PAPUA NEW

GUINEA

Purpose of Activity Evaluated: This project is an effort to reduce obstacles to improved quality, efficiency, and effectiveness in the delivery of child survival and maternal health services in rural areas of Papua New Guinea (PNG). The formal goal of the project is to reduce child and maternal mortality in PNG; the formal purpose is to improve service delivery for maternal and child health (MCH) care in rural areas.

Purpose of Evaluation and Methodology Used: The purpose of the mid-term evaluation was to assess project activities thus far. It was to document accomplishments and problems; examine the systems and working arrangements of the project for appropriateness for phase II operations; assess the appropriateness of the key institutional mechanism targeted by the project; examine the technical focus of the activities; examine the assumptions used in project design; assess the performance of the various parties involved in implementation in PNG; state opinion(s) on the state of the project as it neared transition into its second stage; comment on progress and appropriateness of training and special studies; and assess whether project expenditures were within budget.

The methodology used by a team of external evaluators included a review of documents, field visits, as well as interviews with GPNG officials, contractor staff, donor agency representatives, and USAID staff.

Findings and Conclusions: The evaluation team concluded that the CSSP has made progress towards achieving project goals and objectives despite the social, political, economic, and bureaucratic constraints that are part of the complex and changing context in PNG, in the health sector and more broadly.

Project Design Assumptions and EOPS Indicators: Many of the project design assumptions no longer were valid because of rapidly changing circumstances in PNG. The original EOPS indicators were not realistic given the situation in PNG. More realistic indicators may be process indicators, rather than outcome or impact, indicators, depending upon the availability or realizable, timely and valid information that can be used to judge project status and whether baseline information is available. The team commented that the institutional basis for Phase II was not sufficiently clear in the project's plans. They recommended that expert contractor assistance was needed very soon, to generate a revised strategic plan for Phase II.

Regional Support Units: In light of instability in GPNG's internal decentralization-centralization relationships with the provinces, and given GPNG decision no longer to emphasize the development of RSUs and management and technical centers, the project should re-examine the roles of various organizations to determine what organizational means can be used to accomplish objectives. There was a recommendation that USAID and the contractor should agree to amend their present contract in order to delete language that refers to the obligation to employing RSUs as the main institutional vehicle for implementing the activities foreseen in Phases I and II of the CSSP.

Community Health Nursing Administration (CHNA) Diploma Course: Background studies and analysis have been completed; a curriculum is designed and a course already is in progress. However, there had been difficulties in achieving staffing with qualified faculty. There was a recommendation that the project should help ensure that further cycles of CHNA diploma course are supported by permanent human resources; options should be considered for assuring availability of key local faculty for the CHNA diploma course.

Focus on Delivery of Rural Health Services: The team suggested that GPNG intentions for recentralization of health services might provide the project an opportunity to refocus GPNG efforts on more effective delivery of rural health services. This would be work on increasing budgets for rural patrols; management and supervision; better logistics and more supplies; improved immunization services and case management; in-service training, with particular effort at service delivery levels; increasing safety of childbirth; etc.

Focus on Selected Provinces Rather Than All Provinces: The team recommended a focus on four provinces, as there were insufficient project resources to cover the entire country.

Research: There was a substantial body of research and studies either completed, in-process, or in preparation. However, there had been some delays in establishing and using the project's mechanisms for conceptualizing and agreeing upon a research agenda, reviewing and approving proposals, and for implementing the research activities. The evaluators suggested that increased attention might be directed at research training in PNG.

ATTACHMENTS

K. Attachments (List attachments submitted with this Evaluation Summary; always attach copy of full evaluation report, even if one was submitted earlier; attach studies, surveys, etc., from "on-going" evaluation, if relevant to the evaluation report.)

A Report on the Interim Evaluation of the Child Survival Support Project in Papua New Guinea,
by Elvira Beracochea, John Gillespie, and Peter Heywood. Fieldwork: March-April 1993

COMMENTS

L. Comments By Mission, AID/W Office and Borrower/Grantee On Full Report

A full draft of the evaluation report was used extensively in deliberations among GPNG, the TA contractor, and USAID that led to a revised "strategic plan" for Phase II of the project, which was discussed in detail with near final drafts being proposed by approximately Sept.-October 1993.

However, by October 1993 the USAID Mission was receiving early warnings about a Mission close-out and an early termination of all Mission projects in the region. That led to a several-month period of extreme uncertainty as to the future of the project. Ultimately, the USAID/Washington decision formalized in March 1994 stated that the project would have to terminate two years and five months prematurely with nearly \$3 million less than originally budgeted.

In June 1994, the Project Grant Agreement with the GPNG was revised to reflect the changes related to the early project closure. However, despite early project closure, the modifications planned for the project were consistent with the recommendations from the evaluation.