

A.I.D. EVALUATION SUMMARY - PART 1 15W 98494

<b>A. Reporting A.I.D. Unit</b> USAID/Ethiopia	<b>B. Was Evaluation Scheduled in Current FY Annual Evaluation Plan?</b> Yes <input checked="" type="checkbox"/> Slipped <input type="checkbox"/> Ad Hoc <input type="checkbox"/> Evaluation Plan Submission Date: FY 96__ Q 1__	<b>C. Evaluation Timing</b> Interim <input type="checkbox"/> Final <input checked="" type="checkbox"/> Ex Post <input type="checkbox"/> Other <input type="checkbox"/>
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D. Activity or Activities Evaluated					
Project No.	Project/Program Title	First PROAG or Equivalent	Most Recent PACD (Mo/Yr)	Planned LOP Cost (000)	Amount Obligated to Date (000)
6630010.00	Support to AIDS Control (STAC) Project	1992	9/95	5,535*	2,535

\* Additional funds dedicated to STAC include \$3,000,000 OYB Transfer and AID/W/G/PHN core funds amounting to \$1,681,000

ACTIONS		
E. Action Decisions Approved by Mission or AID/W Office Director	Name of Responsible Officer	Date Action to be Completed
<b>Actions Required</b> 1. Discuss and define relationship with GOE re HIV/AIDS activities; develop management modalities. 2. Mechanisms for future AIDSCAP/E activities under ESHE need to be discussed and developed 3. Closeout of Handbook 13 Grant to World Health organization; discuss future WHO Grants under ESHE. 4. Follow-up of delivery of all commodities purchased through WHO Grant. 5. Follow-up of reimbursement of money from MOH to AIDSCAP 6. Examine sustainability and planned future HIV/STD activities among NGOs funded under STAC 7. Closeout report for STAC project	Barbiero/Abate	1/96
	Barbiero/Abate/AIDSCAP	3/96
	Abate/Rocha/Barbiero	2/96
	Abate	2/96
	Barbiero/Abate	2/96
	Abate	3/96
	CBarbiero/Abate/VKBarbiero	6/96

APPROVALS				
F. Date of Mission or AID/W Office Review of Evaluation: (Month) (Day) (Year)				
G. Approvals of Evaluation Summary and Action Decisions:				
	Project/Program Officer	Representative of Borrower/Grantee	Evaluation Officer	Mission or AID/W Office Director
Name	Victor K. Barbiero		Victor K. Barbiero	Margaret P. Bonner
Signature				
Date	2/15/96			2/16/96

## ABSTRACT

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

#### Project Summary.

The Goal of the STAC Project was to increase the capability of the National AIDS Control Program (NACP) to reduce the transmission of HIV within the Ethiopian population. The Purpose of the project was to strengthen specific institutions in order to expand the scope, scale and effectiveness of government and private interventions in their control of the sexual transmission of HIV.

USAID/E signed the Support to AIDS Control(STAC) Project with the Transitional Government of Ethiopia (TGE) on September 28, 1992. On September 28, 1993, USAID/E amended the project to provide additional funds, to expand the coverage area for STD services, to modify selected original project outputs, and to extend the Project Assistance Completion Date (PACD) to September 30, 1995. There are also linking support components for condom procurement and a Handbook 13 Grant to the World Health Organization for the procurement of drugs and medical commodities. During the implementation of the STAC project, the Mission was in the process of designing a comprehensive portfolio of health activities under the new Essential Services for Health in Ethiopia (ESHE) Project. Future HIV/AIDS/STD prevention and control activities, subsequent to the end of the STAC Project will be incorporated within the ESHE Project.

The STAC project concentrated on providing integrated HIV/AIDS prevention and control activities in four focus sites and Addis Ababa. These integrated activities included STD case management in four focus sites at health center and health station levels; HIV/AIDS education in schools; condom social marketing; and, community-based HIV/AIDS interventions. Through focus site intervention teams, collaboration between the public sector and NGOs within the focus sites was encouraged. An additional sixteen STD sites were strengthened to promote improved STD diagnosis and treatment. Other planned project components included training, a behavioral research small grants program, and NGO activities focussing on out-of-school youth and other high risk groups.

#### Evaluation Methodology:

One evaluator from the International Science and Technology Institute (ISTI) and one evaluator from REDSO/ESA/PH carried out an eighteen-day evaluation of project activities. The evaluation focused on a review of existing documentation related to the STAC Project and on an extensive scheduling of interviews both in Addis Ababa and in field sites. The evaluation team visited three of the four focus sites with additional visits to project-supported schools, NGOs, and health stations. Personnel from the MOH divisions of Finance, Planning and of STD/HIV/AIDS, from WHO, from AIDSCAP/E and AIDSCAP's Regional Office, from NGOs and from the Mission participated as resource persons.

#### Summary of Final Evaluation Findings:

The STAC Project has achieved considerable success in achieving most project outputs and in responding to the midterm evaluation recommendations. The evaluators noted that the GOE and other national collaborators, the AIDSCAP-Ethiopia Team, and USAID-Ethiopia collaborated effectively in applying a proactive approach to many STAC challenges. Responding to midterm evaluation recommendations, project collaborators acted responsibly in terminating non-productive activities, such as the behavioral research small grants program while focusing renewed and concentrated efforts on developing the managerial and administrative capacities of NGOs and of regional health bureaus. The evaluation team took special note of the STAC Project's innovative approach to the formation and active project integration of multidisciplinary Focus Site Intervention Teams (FSIT), with specific attention to the FSIT role in providing collaboration and coordination in the use of limited resources.

The evaluation team provided recommendations for follow-up and support activities for each of STAC's six technical components and for future capacity building associated with HIV/AIDS/STD control and prevention activities in Ethiopia. In addition, the evaluation team provided an analysis of "lessons learned" in three key areas: the importance of collaboration, the importance of systematic support and follow-up, and the importance of innovation. Summarizing lessons learned, the team concluded that collaboration among AIDSCAP, USAID, NGO, and Focus Site personnel was an essential element contributing to the project's overall success. The team also concluded that future projects would benefit from increased attention to the importance of administrative and management planning and support for logistics and materials development. The team also noted that, as a lesson learned, subsequent project designs should pay increased attention to the importance of impact analyses for selected initiatives such as those involving capacity building of NGOs. Finally, to reflect its overall positive evaluation of the STAC Project's achievements, the team concluded its evaluation by noting that projects with designs similar to the STAC's would gain considerable advantage from an exposure to the innovative ways in which the STAC Project's managers had effectively used FSITs, Multi-Partner Sexual Contacts(MPSCs), and NGOs in the promotion of the project's goal and purpose.

COSTS				
I. Evaluation Costs				
1. Evaluation Team Name	Affiliation	Contract No OR TDY Person Days	Contract Cost OR TDY Cost (US\$)	Source of funds
William Le Roy Emmet	ISTI	24	\$21,281	USAID/E REDSO
Victoria Wells	REDSO/ESA/PH	5		
2. Mission/Office Professional Staff Person-Days (Estimate) 4			3. Borrower/Grantee professional Staff-Person Days (estimate) 4	

A.I.D. EVALUATION SUMMARY - PART II

SUMMARY		
<p><b>J. Summary of Evaluation Findings, Conclusions and Recommendations</b> (Try not to exceed the three (3) pages provided)  Address the following items:</p> <ul style="list-style-type: none"> <li>• Purpose of evaluation and methodology used</li> <li>* Purpose of activity (ies) evaluated</li> <li>* Findings and conclusions (relate to questions)</li> <li>* Principal recommendations</li> <li>• Lessons learned</li> </ul>		
Mission or Office: HPN	Date This Summary Prepared: 2/1/96	Title & Date of Full Evaluation Report
<p><b>Purpose of evaluation :</b></p> <p>The purpose of this external evaluation was to assist the Government of Ethiopia and USAID in documenting the final status of project implementation of USAID/Ethiopia's <i>Support to AIDS Control (STAC)</i> Project (663-0010) and to determine whether the objectives of the project have been achieved. The evaluation was also tasked with identifying successes and constraints to achieving project objectives and to provide recommendations on future HIV/AIDS prevention and control activities in line with the USAID/Ethiopia's <i>Essential Services for Health in Ethiopia (ESHE)</i> Project.</p> <p><b>Evaluation Methodology:</b>  One evaluator from the International Science and Technology Institute (ISTI) and one evaluator from REDSO/ESA/PH carried out an eighteen-day evaluation of project activities. The evaluation focused on a review of existing documentation related to the STAC Project and on an extensive scheduling of interviews both in Addis Ababa and at the sites. The evaluation team visited three of the four focus sites with additional visits to project-supported schools, NGOs, and health stations. Personnel from the MOH divisions of Finance, Planning and of STD/HIV/AIDS, from WHO, from AIDSCAP/E and AIDSCAP's Regional Office, from NGOs and from the Mission participated as resource persons.</p> <p><b>Purpose of activities evaluated</b></p> <p>The Goal of the STAC Project was to increase the capability of the National AIDS Control Program (NACP) to reduce the transmission of HIV within the Ethiopian population. The Purpose of the Project was to: <u>Strengthen specific institutions in order to expand the scope, scale and effectiveness of government and private interventions in their control of the sexual transmission of HIV.</u></p> <p>USAID/E signed the Support to AIDS Control (STAC) Project with the Transitional Government of Ethiopia (TGE) on September 28, 1992. On September 28, 1993, USAID/E amended the project to provide additional funds, to expand the coverage area for STD services, to modify selected original project outputs, and to extend the Project Assistance Completion Date (PACD) to September 30, 1995. A midterm evaluation was carried out in August 1994. There are also linking support components for condom procurement and a Handbook 13 Grant to the World Health Organization for the procurement of drugs and medical commodities. During the implementation of the STAC project, the Mission was in the process of designing a comprehensive portfolio of health activities under the new Essential Services for Health in Ethiopia (ESHE) Project. Future HIV/AIDS/STD prevention and control activities, subsequent to the end of the STAC Project will be incorporated within the ESHE Project.</p>		

## SUMMARY (Continued)

The STAC project concentrated on providing integrated HIV/AIDS prevention and control activities in four focus sites (Awassa, Nazareth, Bahar Dar, Mekele) and Addis Ababa. These integrated activities included STD case management in the four focus sites at health center and health station levels; HIV/AIDS education in schools; condom social marketing; and, community-based HIV/AIDS interventions. Through focus site intervention teams, collaboration between the public sector and NGOs within the focus sites was encouraged. An additional sixteen STD sites were strengthened to promote improved STD diagnosis and treatment. Other planned components of the project were offshore MPH training for health communicators, a behavioral research small grants program, and NGO activities focussing on out-of-school youth and other high risk groups. However, long-term training was pursued under another funding mechanism.

### Key Findings and conclusions

#### General

The STAC Project achieved considerable success in achieving most project outputs. The GOE and other national collaborators, the AIDSCAP-Ethiopia Team, and USAID-Ethiopia adopted innovative strategies in responding to the goals and objectives associated with the project's many technical areas. Among those innovations which the evaluation team found was most impressive was the formation of *Focus Site Intervention Teams (FSIT)*.

#### STD Prevention and Control

Scheduled renovations of nineteen of twenty clinical sites have been completed with renovation of the final clinic scheduled for completion in February of 1996. During the LOP, 11,804 STD patients were treated in the four focus sites. As assessed by a September 1995 STD Component Evaluation, the steady growth in STD patients using focus sites is a possible indication of improved client confidence in the focus sites' ability to effectively treat STDs. Twenty-eight health personnel were trained in TOT/STD management. All clinical personnel interviewed at the four focal sites and at the peripheral clinical sites were aware of the advantages of STD syndromic management and, largely engaged in its application. However, to assist in improved management of STDs, follow-on activities should complete GC sensitivity studies in the remaining site (Gondar) of the two identified test sites.

#### Support for Information, Education and Communication (IEC)

The STAC project has made considerable progress in reaching expected IEC project outputs. Anti-AIDS Groups are functioning in thirty-six schools and an estimated 86,000 students have been reached. Three baseline KABP studies of out-of-school youth were conducted by NGOs and, under NGO grants, more than 110,000 of these youths have been reached with resulting IEC materials and activities. Three material development workshops were carried out with the result that more than 300,000 STD/IEC copies of different materials were distributed. The targeted training support by STAC of more than 600 *Multi-Partner Sexual Contacts (MPSCs)* as group leaders and the distribution of STD/HIV IEC materials to more than 14,000 additional MPSCs represents a significant project achievement.

#### Condom Promotion and Condom Social Marketing

The PSI condom social marketing program (CSM) exceeded all project targets. The CSM has established a management information system, set up 9,500 condom sales outlets and nine regional satellite hubs throughout Ethiopia, and undertaken an ambitious program of nontraditional IEC strategies designed to promote knowledge of AIDS and the use of condoms. As a result, PSI/DKT/CSM succeeded in selling more than 36,800,000 condoms within the life of project (LOP).

#### Increased NGO/PVO Involvement

STAC has supported five large competitive grants (approximately \$40,000 each), six mid-size (approximately \$5-10,000 each) grants, and seven small grants via its Rapid Response Fund (approximately \$1,000 each). AIDSCAP has organized five workshops with a major focus on developing NGO capacity in such areas as adult learning, evaluation, and target communication. Under the NGO/PVO project component, innovative approaches to IEC communication (role playing, peer education, and educational pamphlets/posters, videos and dramas focused on specific target groups) have resulted in contacts with 139,000 individuals.

#### Behavioral Research Grants Program

Despite the best efforts of the GOE, of USAID-E and of AIDSCAP-Ethiopia, the impasse on behavioral research associated with establishing a working relationship with Addis Ababa University was not resolved. However, under AIDSCAP-E, the STAC Project oversaw the completion of a *Targeted Intervention Research on Community Perceptions of Sexually Transmitted Illnesses (TIR)* which provides guidance for future direction of Ethiopia's STD control and prevention initiatives.

## SUMMARY (Continued)

### Surveillance and Research

Progress on surveillance continues to hamper Ethiopia's ability to accurately estimate the extent of AIDS and HIV in Ethiopia's population. However, STAC's success in building the technical capacity of regional and health facility staff should provide sufficient support for the development of localized initiatives focused on improved surveillance with high-risk groups.

### Preventive Commodities

The evaluation team has concluded that, while orientation of health center staff in biohazardous waste disposal and in prevention of HIV transmission in the health care setting has been delayed, health center staff are sensitized to the importance of these issues and would welcome assistance in the application of procedures to effectively address these two health facility disease control issues.

### Project Management

With reference to AIDSCAP's own internal management of ongoing activities, the evaluation team has concluded that AIDSCAP-Ethiopia's direction is to be commended for their dedication and effectiveness in managing the project's progress. All indications are that the management relationship between USAID-Ethiopia and AIDSCAP-E has been facilitative and focused on the importance of respecting each partner's role in reaching project objectives. Although there is an outstanding financial reimbursement issue which remains to be resolved, staff from the MOH (central, regional, and health service levels) USAID, AIDSCAP-E, and staff associated with NGOs are also to be commended for their attention to the importance of collaboration and cooperation in fulfilling many of the project's objectives. However, although the evaluators recommend continuation of activities under AIDSCAP, AIDSCAP senior management should direct their attention to defining more cost-effective means of supporting field-level activities. AIDSCAP's Regional office should also make available targeted and sustained technical assistance over the next nine months, especially for regional capacity building.

### Capacity Building

The evaluation team has noted staC's considerable progress in contributing to capacity building, especially within the following project areas:

#### Area of Concentration

#### Focus of Capacity Building

#### STD Prevention and Control

• The establishment and upgrading of focal sites and the training of health personnel.

#### Information, Education, Communication (IEC)

• Development of skills in material production and in innovative education and communication strategies.

#### NGO/PVO Involvement

• Development of an organizational and professional capacity to contribute effectively to future Ethiopian STD/AIDS interventions and initiatives,

#### Condom social marketing

• Development of the capacity of a large core of Ethiopian entrepreneurs to intervene effectively in the commercial success of a program with a marked social focus.

## PRINCIPAL RECOMMENDATIONS

### General Recommendation

• The evaluation team recognizes that the current USAID support for AIDSCAP-E terminated on September 30, 1995. Nevertheless, we recommend that USAID should continue AIDSCAP-E activities through the August 1996 termination of AIDSCAP-W/FHI contract, provided that GOE endorsement is obtained. We further recommend that activities should focus on those activities which were included in 1996 draft work plans developed jointly by AIDSCAP-E and representatives of the focus sites. Agreement to these two recommendations by both the Government of Ethiopia and by the Government of the United States of America will avoid disruption and stoppage of USAID-supported STD/AIDS activities. In addition, USAID/W support for activity continuation will provide sufficient time for USAID and the GOE and all other interested parties to respond to the following key recommendations.

## SUMMARY (Continued)

### General Management Recommendations

- USAID and the MOH/GOE should collaborate in defining lines of communication, oversight and collaboration governing future AIDSCAP and USAID-E assistance in STD/HIV control and prevention.
- AIDSCAP's senior management should direct their attention to defining more cost-effective means of supporting field-level activities.
- AIDSCAP's Regional office should make available targeted and sustained technical assistance over the next nine months especially for regional capacity building.
- USAID-E and the GOE will need to devote considerable and sustained attention to the development of concrete long-term planning for support of STD/HIV control and prevention activities.

### STD Prevention and Control Recommendations

- Scheduled drug sensitivity studies should be completed as expeditiously as possible. Once completed, the study results should be disseminated through a workshop format. The Ministry of Health should then be in a position to promptly develop and disseminate modified STD treatment guidelines to all health providers.
- AIDSCAP-E should work with central and regional MOH officials to review and act upon the findings and recommendations of both the TIR and the STD Component evaluation.
- Health center supplies, IEC equipment, laboratory equipment, diagnostic supplies, and drugs currently stored in Addis should be delivered to their intended recipients without delay.
- AIDSCAP-Ethiopia should organize a workshop with participation of key members of each FSIT with the objective of documenting lessons learned.
- For the next nine months, AIDSCAP-E should engage the long-term services of a qualified local Ethiopian technical consultant to assist AIDSCAP-E on technical issues, including those which would be of interest to the MOH's Department of Epidemiology.
- Central and regional health authorities should ensure that all cases of suspected HIV seropositives are screened and reported.
- Finally, it is recommended that the Government of Ethiopia reexamine its guidelines on HIV testing to permit HIV testing for those asymptomatic clients who should request it.

### Support for Information, Education and Communication (IEC) Recommendations

- AIDSCAP-E should continue its program of support for dissemination of IEC material with a strong emphasis on high school-age students.
- As guidance for the future, AIDSCAP-E should undertake to initiate an impact assessment of its IEC activities.

### Condom Promotion and Condom Social Marketing Recommendations

- PSI/CSM should continue to explore innovative ways of expanding the market for condoms including working with non-traditional outlets such as the MPSCs.

### Increased NGO/PVO Involvement Recommendations

- AIDSCAP-E should undertake a thorough analysis of each NGO's progress in ensuring completion of its targets with the objective of developing a planned program of completion and phaseout of all such activities. In completing the analyses, evaluators should objectively assess the impact of each NGO's intervention.

### Surveillance and Research Recommendations

- The evaluation team recommends that, in direct collaboration with the GOE/MOH, USAID should serve as a catalyst in bringing together all potential contributors with the goal of defining a concrete approach to responding to the need for improved national disease surveillance instruments and protocols.
- The evaluation team further recommends that the GOE and AIDSCAP-E collaborate in providing focused surveillance training for selected GOE regional and health facility staff.

### Preventive Commodities Recommendations

- AIDSCAP should continue to assist the GOE in the initiation of training activities and follow up visits focused on decreasing HIV transmission in health care settings and appropriate disinfection and disposal of biohazardous materials.

## SUMMARY (continued)

### Capacity Building Recommendations

- STD Prevention and Control: AIDSCAP-E should continue to support refresher training for health facility staff.
- IEC: Continued support of the development of Anti-AIDS groups, MPSCs and an expanded training program for peer educators will help strengthen the gains so far accomplished.
- NGO: Continued support of NGOs and an objective evaluation of their impact is essential.

### Project Management Recommendations

•Consensus Building: The GOE and USAID should work together to respond to the following questions:

- a. Is AIDSCAP a viable support mechanism for the future of Ethiopia's STD/AIDS control and prevention program?
- b. How can the MOH and USAID best work together in terms of ensuring and strengthening effective collaboration, oversight, and coordination in the direction of future initiatives under ESHE and AIDSCAP?

Impact Analysis: AIDSCAP should immediately plan a schedule of impact analyses with technical support from its regional and central offices.

### Forward Planning:

- GOE and USAID senior-level personnel should work together to define ways in which future STD/AIDS control and prevention activities can be supported within the auspices of the ESHE Project.
- If the GOE determines that the need for additional funding or for specific categories of funding for STD/AIDS prevention and control exceeds USAID support capacity, USAID should, at the GOE's request, be prepared to provide appropriate planning and workshop assistance to the GOE for the purpose of facilitating a coordinated donor approach to Ethiopia's National STD/AIDS Prevention and Control initiative.

### Lessons Learned

#### -- The importance of collaboration

If the evaluation team's assessment of the STAC Project's considerable success is indeed valid, much of the credit for success can be assigned to the high degree of collaboration among the project's many partners. Examples of the importance of this lesson can be seen in:

- USAID/E and AIDSCAP-E collaboration resulting in a clear and facilitative definition of the parameters of their partnership;
- Central and regional levels of the MOH collaboration in promoting decentralized management of the assisted regional bureaus resulting in active involvement of regional bureau personnel in the management of focus site activities; and
- GOE, USAID, and WHO collaboration on letter grants for supplies and equipment resulting in efficient and timely procurement of drugs, medical supplies and equipment.

#### -- The importance of systematic support and follow-up

Careful planning, systematic support, and objective and planned follow-up - including attention to the need for impact analysis - for all activities should represent basic components of all future STD/AIDS control and prevention support activities.

#### -- The Importance of Innovation

The evaluation team believes that the importance of innovation in promoting progress toward specified objectives is the lesson of paramount importance to be drawn from the STAC Project experience. This lesson was clearly demonstrated in such initiatives as:

- The formation of interdisciplinary FSIT to coordinate focus site activities and to collaborate in the planned use of limited resources;
- The use of selected MPSCs to serve as group leaders in promoting the use of condoms among an acknowledged high risk group; and
- The enthusiasm and imagination employed by selected NGOs in employing peer educators to deliver a compassionate but clear communication on high-risk behavior and the need for behavior change.

## ATTACHMENTS

**K. Attachments (List attachments submitted with 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)**

Complete evaluation report attached.

## COMMENTS

### L. Comments by Mission, AID/W Office and Borrower/Grantee on Full Report

- The Evaluation team has met the demands outlined in the scope of work. The evaluators were able to get a broad picture of project activities and visited three out of four focus sites, as well as activities in Addis Ababa. The recommendations, particularly with regard to program management and forward planning are important and appreciated.
- The Mission recognizes the need for AIDSCAP senior management and AID/W to direct their attention to more cost-effective means of supporting field level activities. Over the past year, the Mission has been uncomfortable with the allocation/attribution ratio associated with field support funds for AIDSCAP. This has led the Mission to reconsider the mechanisms of support for future HIV/AIDS activities in the future.
- The Mission will take up with WHO and the MOH the urgent dispatch of health center supplies and drugs currently stored in Addis Ababa.
- The Mission will ensure that the GC chemosensitivity studies are completed as soon as possible and that their results be disseminated and included in revised national STD treatment guidelines. Similarly, information obtained through the Targeted Intervention Research on Community Perceptions of Sexually Transmitted diseases, should be disseminated so as to positively affect future provision of STD services.
- The Mission has noted the importance of carrying out impact analyses and will ensure that under future HIV/AIDS activities impact analyses will be considered. In addition, in order to examine the sustainability of NGO activities started under the STAC project, the Mission will discuss future NGO plans for HIV/STD activities and examine possible ways of funding such activities either through USAID or through leverage with other donors.
- The Mission appreciates recommendations on the importance of contact tracing for all confirmed HIV seropositives, but thinks that this may not be feasible in Ethiopia at present. The issue of voluntary HIV testing is timely, and it is hoped that the Government of Ethiopia will re-examine its guidelines.
- Although the importance of developing regional capacity for behavioral research is noted, it is unlikely that research protocols can be developed and followed up under the HIV/AIDS activities at the moment. This matter will be further considered under the ESHE operational research agenda.
- The Mission would like to express its appreciation for the positive feedback from this evaluation and emphasis on how activities can be improved for the future stressing the importance of collaboration with all partners.

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