

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 <u>USAID/TUNIS</u> (ES# <u>664-89-ES-002</u>)	B. Was Evaluation Scheduled in Current FY Annual Evaluation Plan? Yes <input checked="" type="checkbox"/> Slipped <input type="checkbox"/> Ad Hoc <input type="checkbox"/> Evaluation Plan Submission Date: FY <u>89</u> Q <u>2</u>	C. Evaluation Timing Interim <input checked="" type="checkbox"/> Final <input type="checkbox"/> Ex Post <input type="checkbox"/> Other <input type="checkbox"/>
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)
664-0331	Family Planning and Population Development Project	85	6/89	8,317	7,785

ACTIONS

E. Action Decisions Approved By Mission or AID/W Office Director	Name of Officer Responsible for Action	Date Action to be Completed
Action(s) Required		
1. Conduct budgetting and programming exercise with ONFP staff	Putman/RONCO ONFP	Jan. '89
2. Increase prices of CSM products and add new ones to the line	ONFP	Jan. '89
3. Extend PACD	Putman	March '89
4. Assess Management training needs	Putman/RONCO ONFP	June '89
5. Decide on whether additional OR can be undertaken	Putman/RONCO	July '89
6. Conduct Cost Recovery Study	Putman/RONCO ONFP	Nov. '89
7. Conduct Self Sufficiency Study	Putman/RONCO ONFP	Dec. '89
8. Develop alternative organizational plans for CSM with ONFP	Putman/RONCO ONFP	Jan. '90

(Attach extra sheet if necessary)

APPROVALS

F. Date Of Mission Or AID/W Office Review Of Evaluation: FINAL REVIEW (Month) 3 (Day) 1 (Year) 89

G. Approvals of Evaluation Summary And Action Decisions:

	Project/Program Officer	Representative of Borrower/Grantee	Evaluation Officer	Mission or AID/W Office Director
Name (Typed)	Diana Putman	Hedi M'Henni ONFP	Nancy Hooff/PROG	Jonathan Sperling
Signature	<i>Diana B. Putman</i>	<i>Hedi M'Henni</i>	<i>Nancy Hooff</i>	<i>Jonathan Sperling</i> Acting Director
Date	March 28 '89		3/30/89	

ABSTRACT

Evaluation Abstract (Do not exceed the space provided)

The project's purpose was to increase contraceptive prevalence by 9% by 1989 through contraceptive social marketing (CSM), operational research (OR) projects, institutionalization of family planning in medical and paramedical curricula, provision of in-service training to staff; and improved program management. The project is also intended to help the ONFP take steps to eventually become independent of significant donor support. The project also provides technical assistance, and commodities to the Office National de la Famille et de la Population (ONFP) which is responsible for project implementation. RONCO, the prime contractor for the project, coordinates all sub-projects. This mid-term evaluation was conducted for USAID by an independent evaluation team on the basis of a review of project documents, visits to rural health facilities in three governorates, and interviews with project personnel.

The purpose of this mid-term evaluation was to perform an overall assessment of project achievements to date, and to develop recommendations on priority actions to be implemented during the final stages of the project.

The project is one to one and a half years behind schedule due largely to delays in securing the TA contractor. Overall progress in completing most project activities is good.

-Major activities of training, and to a lesser degree, CSM and OR have been successful in their early phases. The Management component of the project paper has not received sufficient attention to date.

-Assumptions related to project purpose and output are generally valid.

-It is recommended that the Project Activity Completion Date be extended an additional two years during which self-sufficiency and cost-recovery studies should be undertaken. Joint planning by the ONFP with other ministries is to be encouraged; and ONFP's annual action plans should be accompanied by projected budgets. The CSM organizational structure recommended in the Project Paper should be implemented. Management courses should immediately be given at the ONFP with an emphasis on the case method and budgetting.

Lessons Learned: The notion of self-sufficiency is difficult to introduce to an agency that has benefitted from donor largesse for twenty years.

C O S T S

I. Evaluation Costs

1. Evaluation Team		Contract Number OR TDY Person Days	Contract Cost OR TDY Cost (U.S. \$)	Source of Funds
Name	Affiliation			
Shelly Ross Larson		30	77,490 USD	Project
Effat Ramadan		30		"
Charles Tilquin		10		"
Joseph Via		7		"
2. Mission/Office Professional Staff		3. Borrower/Grantee Professional		
Person-Days (Estimate) <u>20</u>		Staff Person-Days (Estimate) <u>50</u>		

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: USAID/TUNIS	Date This Summary Prepared: Finalized 3/89	Title And Date Of Full Evaluation Report: Mid Term Evaluation of the USAID/Tunisia Family Planning and Pop. Dev. Proj. Feb.89
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PURPOSE OF THE EVALUATION AND METHODOLOGY USED

The purpose of this mid-term evaluation was two-fold: (1) to consider the appropriateness of activities undertaken under the project and their contribution to attaining the project's intended outputs and purposes, while documenting impediments encountered to implementation of project activities; (2) to assess the contribution of this project to the overall Tunisian objectives and strategy for family planning in Tunisia and to the Office National du Planning Familial et de la Population's (ONFP) ability to translate family planning objectives and strategies into action programs. Most pertinent project documents, reports, and studies were reviewed, and interviews were conducted with project staff and contractors, USAID officials, ONFP field staff, Ministry of Public Health (MOSP) staff, and Ministry of Social Affairs (MAS) staff. The team made three field trips.

PURPOSE OF ACTIVITIES EVALUATED

The project purpose is to increase contraceptive prevalence by 9% by 1989 through contraceptive social marketing (CSM), operational research (OR) projects designed to assist in improving program management, institutionalization of family planning in medical and paramedical curricula, provision of in-service staff training and improved program planning and management. The project paper stated "emphasis is needed on developing more systematic program review so that the Tunisian program can become independent of significant donor support. Support for transfer of service delivery to the private sector and to GOT agencies other than the ONFP is needed."

FINDINGS AND CONCLUSION

According to the Demographic Health Survey conducted in 1988, by 1987 the crude birth rate had decreased to 29.3 (from 31.6 in 1983) and in 1988 the contraceptive prevalence had risen to 40.9%. Thus the project goal is being achieved, and the project purpose is within 2.2 percentage points of being met.

Management: With respect to internal management changes, interdepartmental committees within the ONFP have been established to encourage cooperation between departments at headquarters and five interregional training groups have also been set up. Management practices, however, remain an issue. Although the establishment of the committees has improved the flow of information within ONFP headquarters, the management information system (MIS) called for in the Project Agreement has only been partially established; thus program directors do not have a fully accurate view of results of service delivery activities in the field.

ONFP staff have begun to develop annual work plans, but these plans would be more easily carried out if they were tied to annual budgets that clearly delineated line item costs and expected source of revenues, including those from external donors.

Another problem relates to motivating ONFP staff at all levels to perform at maximum capacity. In part this is a result of job descriptions not having clearly defined goals, making it difficult to judge good performance. Moreover, in Tunisia, the use of incentives tied to excellence in job performance is difficult to accomplish with a government agency. Techniques used by the private sector to encourage staff achievements seem to work, however, and might merit further consideration in some form for ONFP staff.

ONFP staff have not focused sufficient attention on upgrading skills in the problem areas identified above or in CSM, training and OR. No effort has been made to develop a management training plan. Moreover, ONFP has not always assigned counterparts to work with external consultants, with the result that when the TA assignment ends, fully developed capacity at ONFP does not exist to carry on the work that had been started.

Integration: With respect to integration, formal collaboration is increasing between ONFP, the MOPH, and MSA. This has been made easier because the ONFP has returned to its previous status of reporting to the MOPH. Furthermore, the ONFP, MOH and MSA have not developed an agreed upon definition of integration.

CSM: ONFP leadership is, in general, favorably disposed towards the CSM effort, as evidenced by its involvement in the following accomplishments:

1. A considerable enhanced distribution system, with computerized tracking and private sector billing and a group of medical detailers trained and stationed in five critical locations, should pave the way for greater availability of CSM products.
2. An active IEC component, with method-specific promotion in the media and pharmacies, is in place and should be useful in the area of improved knowledge and use.
3. The price of the CSM low-dose oral contraceptive sold in pharmacies has been increased, improving the prospects for cost recovery.

The CSM unit to be established under the project agreement has neither the staff nor the status necessary to become an effective player within the ONFP.

A number of opportunities for expanded and improved marketing exist:

- . Increased involvement of private physicians would strengthen the program.
- . Other products could also be offered such as the IUD and foaming tablets.
- . The price of the condom should be raised.

As a totally governmental effort, the Tunisian CSM is something of an anomaly. Most CSM programs are managed by a private distribution company to take advantage of marketing skills that are more readily available in the private than in the public sector. The difficulties encountered by the CSM unit in hiring qualified staff and the low status accorded to the unit might be bypassed if the program were to be privatized. Various options are suggested that address ways to approach organizational reform of the CSM unit, both in the short-term and over the long-term. This is a good time for ONFP to consider these proposals.

IEC: The IEC project component has been well executed. Two media campaigns have been undertaken. Prior to message development for the first campaign, a market research survey of 1,500 persons was conducted to assess reactions to the family planning program. For both media campaigns, focus groups led by ONFP staff met as part of the marketing research component.

Training: The performance in the academic (pre-service) training component has been very good. Family planning modules are being institutionalized in the professional curricula for social workers, nurses, midwives, and physicians. In a commendable departure from the letter of the Project Agreement, the in-service component has been expanded to include post-graduate training for recent graduates in midwifery and nursing. Long and short-term training have been carried out in accordance with the Project Paper. Two students are receiving long-term training abroad, and 15 individuals have participated either in conferences or in such short-term training activities as observation visits.

Operational Research: OR staff should be credited for having successfully embarked on four research projects and for having under consideration five more. The project design was overly ambitious. The number of studies to be undertaken was clearly beyond the capability of the OR staff. Specifically, that staff is small, only eight, mostly junior personnel, although on occasion supplemented with staff from the Medical Department; they are involved with other research activities; the OR Department is weak in the area of data processing capabilities; and transport has not always been available.

Natural Family Planning: The natural family planning program has a minimal impact on fertility rates, but does appear to impart certain skills to the illiterate women it enrolls. However, the educators do not inform their clients of other family planning methods and the program does not collaborate with the national family planning program (i.e., ONFP) in any form.

RECOMENDATIONS

1. The Bilateral should be extended two years until June 1991.
2. A full-fledged cost-recovery/cost-effectiveness study should be conducted in the near future; a comprehensive self-sufficiency study should be planned in the next two-years.
3. The plan of action developed each year by the ONFP Directors should be accompanied by a projected annual budget.
4. The ONFP, MOSP and MAS should annually engage in a joint planning exercise, evaluating the results of the previous year and setting FP targets for the next year for each ministry.
5. The organizational structure for CSM at ONFP as set forth in the Project Paper should either be completed or the Project Paper amended.
6. The ONFP should assess management training needs at central and regional levels, prepare a management plan, and begin training in the fundamentals of management using the case method. Budgetting courses for managers would be beneficial.

Lesson Learned

When a program has been nurtured for over twenty years by donors, introducing the notion of self-sufficiency, and preparing the program for donor withdrawal, requires seven to ten years.

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.)

Evaluation Report in English and French.

COMMENTS

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

The Mission has very mixed feelings about the work performed by the evaluation team. The team members were able to grasp a number of the key issues in the project and did a good job in their pre-departure oral debriefing to the Mission and the government. Overall, the draft recommendations they made at that time were pertinent, appropriate and relevant for improving project implementation. Fortunately the ONFP and the Mission immediately began to act upon many of the recommendations.

With regard to the written product, however, the team and the contractor did not do a very good job. The team produced two draft reports which had so many factual inaccuracies that much of the report had to be rejected despite in-depth and detailed reviews by the Mission. The final report is a compromise version because the contractor was unwilling to spend any more time trying to work with the team leader. One reason the report does not address many of the policy issues requested by the SOW is that one team member dropped out just before the evaluation began and a second person was ill and only participated half time. But, the team leader was inexperienced, unable to grasp the project from a broad perspective and incapable of writing well. We are disappointed as well that the team was unwilling to take a historical perspective in order to realistically ground the project's achievements within the longer term framework of family planning development in Tunisia.