

Ministry of Foreign and European Affairs, Directorate for Development
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EVALUATION - AIDE AU DEVELOPPEMENT DE LA SANTE

Executive summary

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The evaluation was conducted by South Research. The Ministry publishes below a summary of the main results of this exercise. Observations, assessments and recommendations expressed in this document represent the views of the evaluators and do not necessarily reflect those of the Ministry.

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EXECUTIVE SUMMARY

The evaluation of Aide au Développement de la Santé (ADS) projects in Laos is part of the evaluation commissioned by the Ministry of Foreign and European Affairs (MAEE) of Luxemburg of four non-governmental development organizations (NGDOs). The purpose of the evaluation is twofold: (i) to analyze the organizational and management structure and human capacities of NGDOs in Luxemburg and to analyze relations with local partners in the field; (ii) to assess the value of projects according to the criteria commonly used in the field of evaluation, as defined by the OECD/DAC, namely: relevance, effectiveness, efficiency, impact and sustainability. This evaluation was carried out through documentary study and semi-structured interviews, notably during the field mission to Laos between 8 and 14 May 2019.

ADS focuses on the field of cardiovascular health in developing countries. The projects in Laos are implemented through regular missions (six or more per year) of an ADS team (including a cardiologist, cardiac surgeon, perfusionist, engineer, manager, as well as others if the agenda requires it), and are carried out in partnership with the Lao Ministry of Health and the ILLC. What characterizes ADS is that it is not a “professional” development cooperation organization, but an organization composed of professionals from the health sector, a feature that is reflected in its structure and approach, and which also explains some of the findings of this evaluation.

Main findings

Through the projects of ADS, the Laotian population has access to healthcare that once required travel to Thailand, with the cost of such treatment and travel being far beyond the reach of the vast majority of Laotians. The theoretical and practical training offered by ADS to medical and paramedical staff at the ILLC and the Mahosot Hospital is also evaluated as very relevant. When trying to assess the relevance of ADS’ interventions at a more societal level, the analysis differs according to the point of view adopted. On the one hand, the relevance of an intervention that seeks to develop such a highly specialized service in a country where primary health care in rural areas suffers from a significant lack of investment can be questioned. On the other hand, the fact that this specialization is introduced by an NGO circumvents the challenges or obstacles that would arise in terms of human and financial resources if the service were developed by the Laotian Ministry of Health, and hence could be seen as a necessary intermediate step that has generated and facilitated its development.

In terms of effectiveness, the strengthening of the cardiac surgery and cardiology capacities of the Laotian medical staff and the interventions in the field of cardiac surgery are very effective. As for the efforts made to build capacity in the field of hospital management, the findings are more nuanced. Several factors hinder an implementation of what has been learned, most notably the structure and hierarchy at the ILLC and the Mahosot Hospital, as well as the broader social and political context, which results in staff having very limited or no room for maneuver. Indeed, the management of the ILLC, as well as the national political structure that determines health sector funding and decision-making processes, has an undeniable influence on the achievement of results and their sustainability, as well as on efficiency.

In terms of impact, it can be noted that the changes targeted by ADS projects are much more at the level of the direct beneficiaries than at the societal level. While it is possible that the ADS

interventions have contributed to changes beyond the level of direct beneficiaries (e.g. prevention and sensitization efforts, or training, etc.), due to a lack of monitoring at this level, the relevant actors do not have the data to be able to comment on these changes and, hence, to analyze how to increase these contributions.

The evaluation analyzed sustainability at different levels. With respect to the organizational and institutional sustainability, the findings are very positive when considering the knowledge and capacities developed through the interventions. The ILLC and the provincial hospitals have been able to develop performing cardiac services, 10 cardiologists have been trained and, at the ILLC level, adult cardiac surgery teams can operate independently and a pediatric cardiology department is being set up. However, the gap between the senior and junior teams is a challenge. The sustainability of ADS efforts depends partially on the future of the ILLC, which is currently highly uncertain due to the changes affecting the Mahosot Hospital. ADS sees the arrival of the Chinese as an exit strategy, but it is not clear how this strategy will manifest itself. In terms of financial sustainability, there are several challenges, the most important being a lack of (financial) commitment and a lack of resources on the part of the Laotian government. At the societal level, the evaluation highlighted the need to invest more in the ownership of the Laotian medical and paramedical staff.

As for partnership relations, it can be seen that there is a clear relationship between ADS and the Laotian Ministry of Health, but that despite the elaboration of a Memorandum of Understanding, not all arrangements are respected by the Laotian Ministry of Health, particularly because of the challenges in financing the health sector and the complex decision-making processes. In relation to the ILLC, there is mutual respect between key staff and ADS for the skills and professionalism of the actors involved. On the other hand, with regard to the day-to-day operation of the ILLC, especially during missions, the relationship between ADS and the ILLC staff sometimes seems to adopt characteristics of that between a donor and an the executers of a project.

Strategic recommendations

The work carried out by ADS is humanitarian rather than development cooperation, even though more recent orientations, such as a stronger emphasis on training, are more in line with the latter approach. In order to ensure the sustainability of the project and achieve a greater impact, **it is a “development cooperation” approach that should underpin ADS’ work. Above all, this orientation would require a more systematized approach.**

This orientation starts, first, from the **needs identified and prioritized by the Laotian actors involved** (i.e. the Ministry of Health, ILLC, Mahosot Hospital, provincial hospitals, etc.) in the field of capacity building. Now, the particular context (the end of ADS projects planned for 2021, the opening of the new Mahosot Hospital planned for 2020) presents a very concrete framework in which these reflections could be carried out. Following this diagnosis, an elaborated **operational plan** could present the actions identified to meet these needs, but also the objectives targeted. Capacity building in this context requires an integrated approach that includes different components (transfer/development of medical knowledge and skills, materials support, hospital management support). A third key element of a more systematized approach is **monitoring and evaluation**. This last point should make it possible to monitor the implementation of the actions, to evaluate the results obtained, and to analyze whether the objectives set are achieved. If this is not the case, the action plan must be adapted. The evaluation showed that ADS is very active in the field of the second component (actions aimed at capacity building), but also that the first and third components (needs

identification, and monitoring and evaluation) are much less developed or not developed. Such an approach should make it possible to increase the ownership of the project by the Laotian partners, as well as the mutual accountability of the partners involved. In the same way, **goal-oriented work can ensure that the project can contribute to more structural changes** (a more efficient health system, improved access to health care, etc.).

Financial sustainability is the fundamental challenge. However, this issue has not yet been clearly addressed and there is every indication that it will require a firm commitment on the part of the Laotian authorities. In an ideal scenario, a redistribution system should be able to be implemented so that the less well-off can access the services and operations offered by the ILLC. The quality of ILLC interventions is indeed of such a high standard that it could contribute to reducing the travel to Thailand of Lao nationals who can afford to travel there for cardiac treatment and surgery. It is reasonable to assume that these revenues could give a considerable boost to the funding of the ILLC, in particular if it had an independent administration and funding system, or at the very least encourage the authorities to invest in the development and strengthening of this sub-sector. Given the changing context, it is therefore important to **establish a dialogue between ADS, ILLC and the Laotian authorities to discuss the strengthening of this sector and its sustainable/structural inclusion in the Laotian government's health policy**. This dialogue should also address pediatric surgery, in order to establish a **transitional system** that covers the period between the withdrawal of ADS and the moment when Laotian doctors can fully assume these tasks. In this regard, ADS and the Lao Ministry of Health should also examine the possibility of starting new partnerships to continue the work if it should appear that the Lao Ministry of Health is not able to assume this component financially.