

### Cote d'Ivoire: Family Planning and HIV Prevention

## **Ex-post evaluation report**

OECD sector	13030 - Family planning	
BMZ project ID	1999 66 417	
Project executing agency	Ministry of Health/Agence Ivorienne de Marketing Social (AIMAS)	
Consultant	Population Services International (PSI)	
Year of ex-post evaluation	2008	
	Project appraisal (planned)	Ex-post evaluation (actual)
Start of implementation	Q 2 2001	Q 2 2001
Period of implementation	42 months	54 months
Investment costs	EUR 10.7 million	EUR 13.3 million
Counterpart contribution	EUR 3.07 million	EUR 3.5 million
Finance, of which FC funds	EUR 6.39 million	EUR 9.77 million
Other institutions/donors involved	-	-
Performance rating	Good (Subrating 2)	
Relevance	Good (Subrating 2)	
Effectiveness	Very good (Subrating 1)	
Efficiency	Good (Subrating 2)	
Overarching developmental impacts	Good (Subrating 2)	
Sustainability	Good (Subrating 2)	

# **Brief Description, Overall Objective and Programme Objectives with Indicators**

The overall objective of the project, Family Planning and HIV Prevention, was to make a contribution to reducing the incidence of HIV and population growth in Côte d'Ivoire, while assuring individual freedom of choice. The intended change towards responsible sexual and reproductive behaviour was to be facilitated through the adequate provision of subsidised oral contraceptives and condoms for increased use by the sexually active population of Côte d'Ivoire, applying a sustainable and cost-efficient social marketing approach.

The project objective indicators set were: increased sales of the condom brand, Prudence, and the oral contraceptive, Confiance, higher per capita use of contraceptives by specific target groups (particularly youth) and a cost recovery ratio of the social marketing organization, AIMAS, through sales revenues of at least 70%.

The project financed condoms and oral contraceptives, communication and educational measures and consultancy costs, equipment and vehicles. Founded in 2002 on the initiative of KfW Entwicklungsbank, the Ivorian Social Marketing Agency (AIMAS) was the implementing organisation.

The project target group was the entire sexually active population in the country with priority given to groups at high risk of HIV infection due to their sexual behaviour. The project benefited women in particular by improving their health and abilities for self-determination thanks to easier access to modern methods of family planning and HIV prevention and, with that, their children as well.

### Project Design/Major Deviations from Original Planning and Main Causes

The project was to implement the following main elements for improving reproductive health:

- Procurement of 146 million and sale of over 136 million condoms (the remaining 10 million condoms to be sold after completion of the project term),
- Procurement and sale of 4.2 million cycles of oral contraceptives,
- Development and implementation of appropriate educational and promotion campaigns (IEC).

These measures were carried out as planned. As of September 2002, however, the programme, which had started in July 2001, was affected by political unrest due to an armed rebellion by troops in the North of the country, which continued until 2006. The consultant, Population Services International (PSI), withdrew its long-term adviser for security reasons in November 2004 and steered the project from outside from then on. The wholesalers also terminated their sales in the North. Since AIMAS as a non-political NGO continued to have access to the North of the country, the population could still be supplied, though only through its own sales staff instead of via the wholesalers.

### **Key Results of Impact Analysis and Performance Rating**

The project directly targets the poor population, especially as the IEC measures were largely carried out in areas with poor inhabitants, who are able to afford the subsidized products. It is allotted the marker ODP. Women benefit from increased awareness and the contribution to improving maternal health, but also due to the smaller workload of having to care for family members infected with HIV (marker G 1). The project does not have any marked environmental impacts (ER 0). It could not make any contribution to good governance, since it was carried out outside of government institutions - to its advantage - and the country was in a state of civil war during Phase II (PD/GG 0).

We assess overall developmental efficacy as follows:

Relevance: We may assume that through the sale of condoms and oral contraceptives along with the related educational work, the project had the potential to contribute to raising contraceptives prevalence rates and, with that, to reducing HIV/AIDS incidence and improving reproductive health in the country. The posited results chain is thus plausible. Combating HIV/AIDS and improving mother-child health are priorities for the Ivorian Government, as evident from current strategic documents. AIMAS has close ties with the Ministry of Health and Public Hygiene and the Ministry of the Fight Against HIV and is held in high regard for its successful work. All major partners take part in the AIMAS governing board, from the government to the Citizens Union, which attests to its good integration and acceptance. During Phase II, donor consultation only played a limited role as most donors had withdrawn from Côte d'Ivoire due to the political crisis. Coordination with UNFPA is currently difficult, because the free condoms it provides are flooding the market. The overall objectives of the FC project conform with MDGs 5-6 (Improve maternal health; Combat HIV/AIDS, malaria and other diseases) and hence with key goals of German development cooperation. At present, Cote d'Ivoire is not a priority country of German development cooperation. The relevance of the project is rated as good (Subrating 2).

Effectiveness: The annual sale of condoms was increased from 29.3 million in 2002 to 31.5 million in 2005. As a result of the good sales at project start, the relevant indicator was adjusted in 2004 from 125 million to 136 million condoms (for the overall term). This was met in full at the end of the project with 136 million condoms sold. This must be rated as particularly successful considering that the wholesalers suspended trade in the North due to the hostilities and AIMAS deployed its own sales personnel more in response to this. The planned sales volume of oral contraceptives (3.8-4 million cycles) was also surpassed by 0.2 million. In addition, the target groups were informed about responsible sexual behaviour through special educational programmes on radio and television as well as through direct communication. The effectiveness of the project is rated as very good (Subrating 1).

Efficiency: In the course of reorganising the Social Marketing Agency at the beginning of Phase II and the concurrent take-over of the project by an Ivorian NGO, staff cutbacks were made. The move to a less expensive building also saved on costs, which made a tangible contribution to operational efficiency. The sales proceeds of the project were regularly used to finance further IEC measures during Phase II. The products were priced to be affordable for the poor as well. Altogether, the demand for and acceptance of the condoms and oral contraceptives was very high. Planned price increases for condoms to raise efficiency could not be made due to opposition from the health ministry. The costs per couple year of protection averaged EUR 11, which is within the range for populous countries. Efficiency is therefore assessed as good (Subrating 2).

Overarching developmental impacts: It is plausible to assume that the overall objective of making a contribution to reducing the HIV incidence as well as population growth in Cote d'Ivoire was attained. The rate of HIV infection was reduced from 10% in 1999 to 3.9% in 2007, to which the project contributed through educational work and the provision of high quality condoms. The birth rate was lowered from 5.7 children per woman (1994) to 4.6 (2005). Contraceptive prevalence (CPR) is, however, still low (4%)

in 1995, 9% in 1999, 11.6 % in 2005, 13% at present), although an increase was recorded up to 2005. Current figures indicate that CPR has been on the decline since. A major beneficial side effect intended by social marketing programmes is the establishment of a condom market, where none exists. At the beginning of the project, Prudence was the predominant condom brand in 1996, but a variety of products are now available, also from commercial suppliers. The exact size of the total market is currently unknown. Altogether, the <u>overarching developmental impacts</u> merit the assessment good (Subrating 2).

<u>Sustainability:</u> One indication of the sustainability of AIMAS' educational messages is the rise in demand for condoms even in rural areas and the increasing openness of the condom market for private-sector brands. A social marketing programme that conducts health education and offers and sells the related products needs to be subsidised to ensure access to sexual and reproductive health for the poor population in particular, especially in a poor country like Cote d'Ivoire. This will largely remain the case in the medium term as well. The amount of sales proceeds already earned by AIMAS shows, however, that it is able to bear a larger part of the costs itself: The cost recovery ratio through sales revenue rose to 89% in 2005, 19% above the anticipated minimum rate of 70% at project appraisal. <u>Sustainability</u> is therefore assessed as good (<u>Subrating 2</u>).

Weighing up these aspects, <u>altogether</u>, we attest the programme <u>good developmental</u> <u>efficacy (Subrating 2)</u>.

#### **General conclusions**

The foundation of an Ivorian social marketing agency proved to be advantageous during the civil war period in particular, as it was acknowledged by all sides as an independent and non-political organisation. This enabled it to continue the educational work even under difficult circumstances without falling victim to attacks. Cooperation with NGOs can therefore prove to be particularly expedient in conflict situations and fragile states.

### Notes on the methods used to evaluate project success

### Assessment criteria

Projects are evaluated on a six-point scale, the criteria being relevance, effectiveness, efficiency, overarching developmental impact and sustainability. The ratings are also used to arrive at a final <u>assessment of a project's overall developmental efficacy</u> The scale is as follows:

Developmentally successful: ratings 1 to 3			
Rating 1	Very good result that clearly exceeds expectations		
Rating 2	Good result, fully in line with expectations and without any significant shortcomings		
Rating 3	Satisfactory result – project falls short of expectations but the positive results dominate		
Developmental failures: Ratings 4 to 6			
Rating 4	Unsatisfactory result – significantly below expectations, with negative results dominating despite discernible positive results		
Rating 5	Clearly inadequate result - despite some positive partial results, the negative results clearly dominate		
Rating 6	The project has no impact or the situation has actually deteriorated		

### <u>Sustainability</u> is evaluated according to the following four-point scale:

Rating 1	Very good sustainability	The developmental efficacy of the project (positive to date) is very likely to continue undiminished or even increase.
Rating 2	Good sustainability	The developmental efficacy of the project (positive to date) is very likely to decline only minimally but remain positive overall. (This is what can normally be expected.)
Rating 3	Satisfactory sustainability	The developmental efficacy of the project (positive to date) is very likely to decline significantly but remain positive overall.  This rating is also assigned if the sustainability of a project is considered inadequate up to the time of the ex post evaluation but is very likely to evolve positively so that the project will ultimately achieve positive developmental efficacy.
Rating 4	Inadequate sustainability	The developmental efficacy of the project is inadequate up to the time of the ex post evaluation and an improvement that would be strong enough to allow the achievement of positive developmental efficacy is very unlikely to occur.
		This rating is also assigned if the developmental efficacy that has been positively evaluated to date is very likely to deteriorate severely and no longer meet the level 3 criteria.