

Pakistan: Family Planning

Ex post evaluation report

OECD sector	13030 - Family planning	
BMZ project ID	1998 664 50	
Project executing agency	Social Marketing Pakistan Ltd/Greenstar	
Consultant	-	
Year of ex post evaluation report	2009 (2009 random sample)	
	Project appraisal (planned)	Ex post evaluation (actual)
Start of implementation	Q2 1999	Q2 2002
Period of implementation	30 months	20 months
Investment costs	EUR 4.95 million	EUR 5.13 million
Counterpart contribution	EUR 0.86 million	EUR 1.04 million
	(Sales proceeds)	(Sales proceeds)
Financing, of which Financial Cooperation (FC) funds	EUR 4.09 million	EUR 4.09 million
Other institutions/donors involved	-	-
Performance rating	3	
Relevance	2	
• Effectiveness	3	
• Efficiency	2	
Overarching developmental impact	3	
• Sustainability	3	

Brief description, overall objective and project objectives with indicators

The FC programme's overall objective was to contribute to a reduction in birth rate while guaranteeing individual freedom of choice. In addition, the programme aimed to contribute to the reduction of infant, child and maternal mortality in the medium to long term. This was to be achieved through the improved provision of modern contraceptive methods in towns and suburban districts (programme objective). The target group was identified as town dwellers earning low to middle incomes.

Over a period of 20 months from May 2002 to December 2003, the programme financed the supply of condoms and intra-uterine devices (IUDs), which were distributed through private sales outlets and through Greenstar Clinics, the private health establishments supported by the programme. It also financed promotional activities as well as advanced training for sales personnel and for the specialist staff at Greenstar Clinics. The programme executing agency was Greenstar/Social Marketing Pakistan, a Pakistani NGO which received professional support from Population Services International (PSI).

Total costs amounted to EUR 5.13 million. The FC funds of EUR 4.09 million financed the foreign currency for the supply of goods and also local implementation costs. The difference against the total cost of EUR 1.04 million was financed by the proceeds of contraceptive sales.

Programme design / major deviations from original planning and their main causes

This programme followed on from two other Social Marketing projects financing the procurement and marketing of condoms and IUDs (BMZ nos 1994 65 006 and 1996 65 092), which were also supported by German FC. As with the earlier programmes, Greenstar, the executing agency, received support supplementary to the German FC project from the UK's Department for International Development, which was primarily responsible for the financing of oral and injectable contraceptives. In addition, UNFPA (the United Nations Population Fund) supplied a limited amount of additional contraceptives. The Packard Foundation and USAID (the United States Agency for International Development) supported the executing agency in promotional and communication activities.

As set out in the project appraisal report of 15 December 1998, the project comprised the following components:

- procurement of condoms and intra-uterine contraceptives;
- marketing the contraceptives through private sales outlets and Greenstar Clinics;
- carrying out promotional activities;
- training for sales personnel and Greenstar Clinics medical staff.

After the scheduled funding for the project was reduced from the original DEM 20 million (EUR 10.2 million) to DEM 8 million (EUR 4.09 million) (see progress report dated 22 May 2001), the volume of contraceptive sales planned was reduced from 279 million to 62.9 million condoms (0.6 million CYP¹) and from 122,000 to 52,500 IUDs (0.2 million CYP). However, despite this reduction, with 194 million condoms and 216,000 IUDs sold, more than three times as many contraceptives were distributed compared to what had been envisaged in the 2001 revision to the plan.

Greenstar delegated the nationwide distribution of the contraceptives to private wholesalers, who had also been responsible for this task in the previous phases of the programme. While condoms were made available at pharmacies and other outlets, the sale of IUDs was limited to pharmacies and clinics. Greenstar still receives no customer information from the wholesalers, so data on regional distribution of the contraceptives can only be obtained from independent research.

Main conclusions from the impact analysis and performance rating

<u>Relevance (rating 2)</u>: The basic concept of this development programme is to provide women, through improved access to modern contraceptive methods and suitably structured advertising campaigns, with the opportunity to limit the number of unwanted pregnancies. In view of Pakistan's continuing high birth rate, the programme objectives still conform to the objectives of the Government of Pakistan. Moreover the programme contributes, albeit indirectly and over the long term, to two of the Millennium Development Goals (reduction of child mortality and improvements in maternal health), and thereby to the overall objectives of German DC (Developmental Cooperation). However, it appears that coordination between the Pakistani Government and the various donors active in the field of reproductive health is still in need of improvement. Despite this shortcoming, we rate the project's relevance as good.

¹ CYP = Couple Year Protection. The project appraisal uses the standard calculation measure of 100 condoms per CYP, whereas the latest thinking allows 120 condoms per CYP.

<u>Effectiveness (rating 3):</u> The programme objective was to ensure an improved supply of condoms and IUDs, primarily to the urban population. The programme's main target group were those living on low to middle incomes in the towns and suburban areas. Between 1996/97 and 2006/07, the contraceptive prevalence rate (CPR) using modern methods increased only slightly, by three percentage points. Information on access to contraceptives has only recently been collected by Greenstar, and this data is being verified through surveys which have yet to be completed. Based on the results of the ex post evaluation visits to clinics and sales outlets (which are not claimed to be representative), it is reasonable to assume that Greenstar has contributed to ensuring the ongoing, improved provision of contraceptives to the intended target groups within easy-to-reach urban areas. Since the improvement in CPR was only modest, and surveys have not yet confirmed the improved availability of contraceptives, we rate the project's overall <u>effectiveness</u> as <u>satisfactory</u>.

<u>Efficiency (rating 2)</u>: Using the funds budgeted, the programme has significantly surpassed its target volumes. More than three times the planned number of CYPs were distributed. With total costs of EUR 5.13 million against 2,373 million CYP sold, the programme achieved an efficiency of EUR 2.16/CYP, representing excellent value. The project's overall <u>efficiency</u>, measured at programme completion, is rated as <u>good</u>. However, in view of the substantial expansion in advertising to promote contraceptive use, there is now a concern that Greenstar's efficiency indicators will deteriorate in the future.

<u>Overarching developmental impact (rating 3):</u> The overall objective was defined as making a contribution to reducing unwanted pregnancies and to improving reproductive health. Achievement was measured using reduction in birth rate as an indicator. The fertility rate (total fertility rate, TFR) fell from an average of 4.4 children per woman in 2001-2003 to 4.1 in 2006-2007. The birth rate (crude birth rate, CBR) dropped slightly from 28.7 births per 1,000 people in 2002 to 28.4/1,000 in 2008. When evaluating achievements against the overall objective, it must be borne in mind that Greenstar currently covers only around 30% of the contraceptive market. In view of the CPR, which is rather low by regional standards, it is fair to assume that there is still scope to reduce unwanted pregnancies and improve reproductive health. Taken altogether, we rate the <u>overarching developmental impact</u> as <u>satisfactory</u>.

Sustainability (rating 3): The appraisal report had placed a strong focus on ensuring sustainability. If sustainability is simply viewed in this context as ensuring the continuation of earlier programme activities financed by the German FC, then it can be shown that, thanks to supplementary contributions from the German FC and other donor partners, the programme has continued along similar lines to the present date. However, there appear to be grounds for concern that finance for contraceptives is not guaranteed beyond mid-2010. Due to inadequate donor support, therefore, it will probably not prove possible to carry forward one of the project's core activities. Sales proceeds over the duration of the programme covered 20% of costs. This figure deteriorated in the following years. In 2008, the proportion of implementation costs met by sales revenues fell to a mere 15%. In view of the high population growth rate, sustainability of the effects achieved (stabilisation or slight improvements in birth rate and in CPR using modern contraceptive methods) can only be guaranteed for the coming generations by the provision of continually increasing levels of support. Because of the project's limited financial sustainability, and because the project's longterm impact is not guaranteed, we rate the project's sustainability as satisfactory.

<u>Overall assessment (rating 3)</u>: Taken altogether, the project achieved satisfactory results.

General conclusions and recommendations

Investigations into how to reach the various regional sales markets have only recently begun. In the future these studies should be carried out and evaluated on a regular

basis. In addition, Greenstar should examine in much more detail how and whether the main target groups are being reached.

To date, substantial resources of finance and personnel have been committed to supporting the Greenstar clinics without, as the executing agency itself has recently identified, any guarantee of the quality of these clinics. It is not enough simply to award a private service provider with a quality accreditation for completing a programme of advanced training; we must also ensure that the holder of the quality accreditation continues to deliver premium, high quality reproductive health services. Moreover, a critical evaluation of the actual contribution made by these clinics to the overall objectives of the Social Marketing project is essential. The results of this analysis may well lead to a new strategic direction for this component.

Abbreviations used

CBR	Crude Birth Rate
CPR	Contraceptive Prevalence Rate
CYP	Couple Year Protection
FC	Financial cooperation
IUD	Intrauterine Device
PSI	Population Services International
TFR	Total Fertility Rate

Notes on the methods used to evaluate project success (project rating)

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

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

A rating of 1 to 3 is a positive assessment and indicates a successful project while a rating of 4 to 6 is a negative assessment and indicates a project which has no sufficiently positive results.

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

Sustainability level 1 (very good sustainability)

The developmental efficacy of the project (positive to date) is very likely to continue undiminished or even increase.

Sustainability level 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.)

Sustainability level 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.

Sustainability level 4 (inadequate sustainability)

The developmental efficacy of the project is inadequate up to the time of the ex post evaluation and an improvement is very unlikely. This rating is also assigned if the sustainability that has been positively evaluated to date is very likely to deteriorate severely and no longer meet the level 3 criteria.

The <u>overall rating</u> on the six-point scale is compiled from a weighting of all five individual criteria as appropriate to the project in question. A rating of 1 to 3 indicates a "successful" project while a rating of 4 to 6 indicates an "unsuccessful" project. In using (with a project-specific weighting) the five key factors to form an overall rating, it should be noted that a project can generally only be considered developmentally "successful" if the achievement of the project objective ("effectiveness"), the impact on the overall objective ("overarching developmental impact") <u>and</u> the sustainability are considered at least "satisfactory" (rating 3).