End of Term Evaluation Report

Sundarbans Eye Health Service Strengthening Project
Project number 61812

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Submitted by Tropical Health
Executive Summary

Background Information
The Sundarban’s Eye Health Service Strengthening Project was a five-year project (2013-2018) covering 19 administrative blocks of West Bengal (collectively known as the Sundarbans) with a population of 4.7 million. Almost half of the population (47%) belong to marginalised groups such as Scheduled Castes and Tribes and over 40% of households live below the poverty line.

Description of project
The project’s goal was to “contribute towards the elimination of avoidable blindness in the Sundarban’s region of West Bengal by 2020” by 1) Improving coverage and access to affordable, quality eye health services, 2) Increasing awareness and improving attitudes towards eye health in target communities and 3) Increasing the capacity of governmental and non-governmental institutions to deliver eye health services. The project worked with three established non-governmental organisation (NGO) partners and the State government to create 17 Vision Centres (VC) covering all 19 administrative blocks in the Sundarbans. It provided screening, referral and treatment services supported with awareness raising, outreach work and training for cadres of community level staff and volunteers in the government and informal health sectors.

Purpose of Evaluation
The evaluation aimed to review the achievements of the project against objectives and outputs as detailed in the project documents, focusing specifically on understanding key successes and challenges in the implementation of the project, to help inform the future design of Sightsavers programmes and identify any further cross-cutting or organisational level lessons and recommendations.

Evaluation approach
The evaluation used a combination of quantitative and qualitative assessment of project management data and insights from project personnel at regional and community level. Visits were made to three project sites and learning workshops were conducted with the project management team.
Main findings

**Relevance**

The project was highly relevant, well aligned with government health policy and tailored to the local Sundarbans geographic and demographic profile. It selected partners strategically and engaged diverse, relevant cadres of community level personnel.

**Effectiveness**

The project achieved most of its service delivery and system strengthening targets, overcoming a series of operational challenges throughout the project’s lifetime. Attention is required to the balance of effort devoted to quantitative targets and quality issues.

**Efficiency**

The project had several simultaneous areas of focus each with associated delivery pressures (large scale service provision in a challenging context, achieving full cost recovery and piloting Management Information System (MIS) and Geographical Information System (GIS) innovations). The number, scale and pacing of these elements in combination was problematic and clear prioritisation was needed. The project experienced problems in commissioning some major elements, which could have been foreseen with fuller scoping at an earlier stage.

**Impact**

The prevalence of blindness, severe and moderate visual impairment in Sundarbans has reduced from above the national average to below. The eye health care system has been strengthened with seventeen new VCs serving communities that had previously had poor access, and improved procedures and standards in the NGO and government facilities involved in the project. Attention is needed to embed the changes achieved.
**Sustainability**

The project model of tapering financial support to VCs combined with investment in business planning built in a strong focus on sustainability. Most VCs were transitioning to cost recovery status by the end of the project. Community level ownership of the programme was not formally established and project partners are concerned that the level of awareness-raising activity will reduce.

**Scalability/replication**

The project’s model and approaches combined system strengthening in NGO and government sectors; a set of strategically located VCs staffed with specifically trained local personnel and engagement of large cadres of local health workers and volunteers. GIS and online MIS were piloted. All of these elements are replicable in similar contexts, subject to appropriate phasing. The paediatric element requires separate design.

**Coherence/coordination**

Co-ordination among the project partners worked well and the project elements (screening, training, awareness raising and service delivery) were coherent with each other. Coordination with government health services was mostly strong but challenges persisted in coordination with the education sector. The project’s MIS remained a combination of offline and online, with compatibility and continuity problems.

**Conclusions**

The project achieved most of its main objectives in a challenging context and the prevalence of blindness, severe and moderate visual impairment in Sunderbans has reduced significantly. NGO and government partners have worked together to improve service provision using standardised approaches. A financially sustainable VC model has been developed and tested, with promising early indications. Innovative online MIS and GIS have been piloted and shown to be applicable, with substantial learning about the process.
Recommendations

**Main Recommendation**

**Project design**

1. Allow sufficient time for holistic analysis of the operational context including local population demographics, attitudes and behaviours; market conditions; local government and other stakeholders’ readiness to engage.

2. Consider children’s projects separately, or at least as a dedicated stream within a larger project. Obtain specialist paediatric input throughout programme design, implementation and evaluation.

3. Allow sufficient lead time before full implementation

**Monitoring, evaluation and learning**

4. Ensure future programmes develop a comprehensive monitoring and evaluation strategy with appropriate oversight, staff resource and budget, covering all elements of the project logframe

5. Promote the timely sharing of learning and experience during project implementation

**Research**

6. Ensure study populations and sampling for baseline/ endline surveys are matched to the project’s target populations.

7. Ensure maximum value is obtained from data collected for the project

**Programme management and oversight**

8. Formalise local stakeholder engagement through suitable existing or new committee structures (as recommended in MTR)

9. Concentrate on leveraging and building a reputation for quality service provision throughout the care chain offered.

**Sustainability**

10. Ensure attention to sustainability is embedded in all elements of the project and included in the logframe, focusing on outcomes and impacts.
## Evaluation Criteria Rating

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<tr>
<th>Evaluation Criteria Rating</th>
<th>Description</th>
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<tbody>
<tr>
<td><strong>Excellent</strong></td>
<td>There is strong evidence that the project <em>fully meets all or almost meets all aspects</em> of the evaluation criterion under consideration. The findings indicate <em>excellent</em> and <em>exemplary</em> achievement/progress/attainment. This is a reference for highly effective practice and an Action Plan for positive learning should be formulated.</td>
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<tr>
<td><strong>Satisfactory</strong></td>
<td>There is strong evidence that the project <em>mostly meets</em> the aspects of the evaluation criterion under consideration. The situation is considered <em>satisfactory, but there is room for some improvements</em>. There is need for a management response to address the issues which are not met. An Action Plan for adjustments should be formulated to address any issues. Evaluation findings are potentially a reference for effective practice.</td>
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<tr>
<td><strong>Attention</strong></td>
<td>There is strong evidence that the project <em>only partially meets</em> the aspects of the evaluation criterion under consideration. There are <em>issues which need to be addressed and improvements are necessary</em> under this criterion. Adaptation or redesign may be required and a clear Action Plan needs to be formulated.</td>
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<tr>
<td><strong>Caution</strong></td>
<td>There is strong evidence that the project <em>does not meet the main</em> aspects of the evaluation criterion under review. There are <em>significant issues which need to be addressed</em> under this criterion. Adaptation or redesign is required and a strong and clear Action Plan needs to be formulated. Evaluation findings are a reference for learning from failure.</td>
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<td><strong>Problematic</strong></td>
<td>There is strong evidence that the project <em>does not meet</em> the evaluation criterion under consideration and is performing very poorly. There are <em>serious deficiencies</em> in the project under this criterion. There is need for a strong and clear management response to address these issues. Evaluation findings are definitely a reference for learning from failure.</td>
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<tr>
<td><strong>Not Sufficient Evidence</strong></td>
<td>There is <em>not sufficient evidence</em> to rate the project against the criterion under consideration. The project needs to seriously address the inability to provide evidence for this evaluation criterion.</td>
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