



THE WORLD BANK



Evaluating Impact: Turning Promises into Evidence

Health Reform Support Project - Yemen

Team

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1. Background

Project cost 22,200 SDR= \$35,000,000/2008
Project period 6 years 2003-2008
Yemeni Government Contribution \$2,700,000

- ❖ Project Objectives
 - To improve access to and quality of priority national family health and reproductive health programs
 - To develop the capacity of the Ministry of Public Health and Population to manage, plan, and deliver basic health services and priority public health programs at the central level and in ten selected districts in the three targeted governorates
 - The project is in its last year .

1. Background

- ❖ Implementation of project is in 10 districts / three governorates Sana'a, Ibb and Hodiedah
- ❖ Implementation of project also nation wide by supporting Immunization, Malaria and Health Education.
- Project Restructuring
After 26 months of being a most problematic project in the region and subject to be cancelled , WB introduced the Rapid Result Approach (RRA) methodology, and with new ministry leadership and new Project administrator the project applied the RRA and succeeded to be back on track, Project restructured in June 2006 .

2. Results Chain



Inputs

- Labor
 - Regular staff
 - Consultancies
 - Seconded staff
- Goods
- Management
- Money
 - Fund
 - In-kind contribution

Activities

- Renovation & extensions of health facilities and MOPH&P offices
- Procurement of goods (Office and medical equipment)
- Development of protocols and services guideline
- Capacity building
- Awareness campaign
- Procurement of Contraceptives and distribution
- EPI campaigns and out reach

Outputs

- 22 health facilities rehabilitated and equipped (US\$ 5 million)
- Goods procured and distributed (US\$ 10 million)
- Emoc protocols and guidelines available
- 400 service provider and 32 managers trained
- Availability of contraceptives
- Over 4 million child under 5 years immunized

Outcomes

- Service providers performance improved
- Quality of health services improved
- Emoc services introduced
- Access to health services increased
- contraceptives more accessible to beneficiaries

Impact

- improved Mother child health status by decreasing morbidity and Mortality rate

3. Primary Research Questions

- ❑ To which extent health services for Children and women improved?
- ❑ Have the administrative and technical capacities improved?
- ❑ What is the effect of Project on EPI and malaria programs

4. Outcome Indicators

- ❑ **Coverage of fully immunized children under one year of age (12 months) nation-wide by the end of 2008.**
- ❑ **Percentage of women currently using modern family planning methods by the end of 2008**
- ❑ **Malaria indicator: % of households with at least one ITN in intervention areas; % of immunized children**
- ❑ **Increase in the availability of priority maternal and child health programs in the intervention areas: (i) IMCI: Number of IMCI visits in the targeted health facilities , (ii) Number of facilities providing EmOC services**

5. Identification Strategy/Method

- Treatment: women and children in the eligible district
- Control: women and children who are in the neighboring un-eligible districts
- Method: regression discontinuity

6. Sample and data

- ❑ Random sample of house holds in targeted governorates.
- ❑ Sample size = 5% of total targeted population = 2500 citizens
- ❑ Base line survey –Census 2004
- ❑ Follow up survey
 - Socio-economic characteristics
 - Usage from health services
 - Bed net availability at house hold
 - Health profile
 - Current status of health services
 - Benefits from the intervention

7. Time Frame/Work Plan

<u>Activity</u>	<u>Duration</u>
- Design the questionnaire	1 week
- Training enumerators	1 week
- Pre-test	1 week
- Data collection	1 months
- Data processing, coding and entry	1 month
- Data analysis	2 weeks
- Reporting	2 weeks

8. Sources of Financing

- ▣ Project cost 22,200 SDR=
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- ▣ Yemeni Government Contribution
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