# Health Sector ODA Experiences and Evaluations

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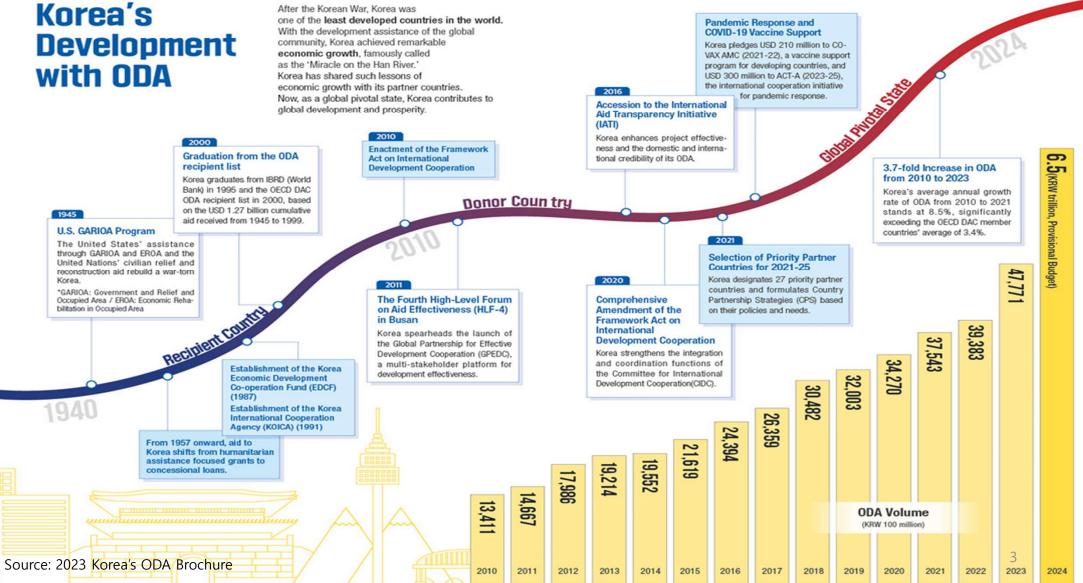
# About KOFIH

### The Korea Foundation for International Healthcare (KOFIH)

is a public agency under the Ministry of Health and Welfare of the Republic of Korea. By holding the legacy of the late Dr LEE Jong-wook, the sixth WHO Director-General, KOFIH provides government-level health assistance to partner countries, North Korea, overseas Koreans and migrant workers residing in Korea, contributing to promoting international cooperation and practicing humanitarian values.







## Country Partnership Strategy (CPS)

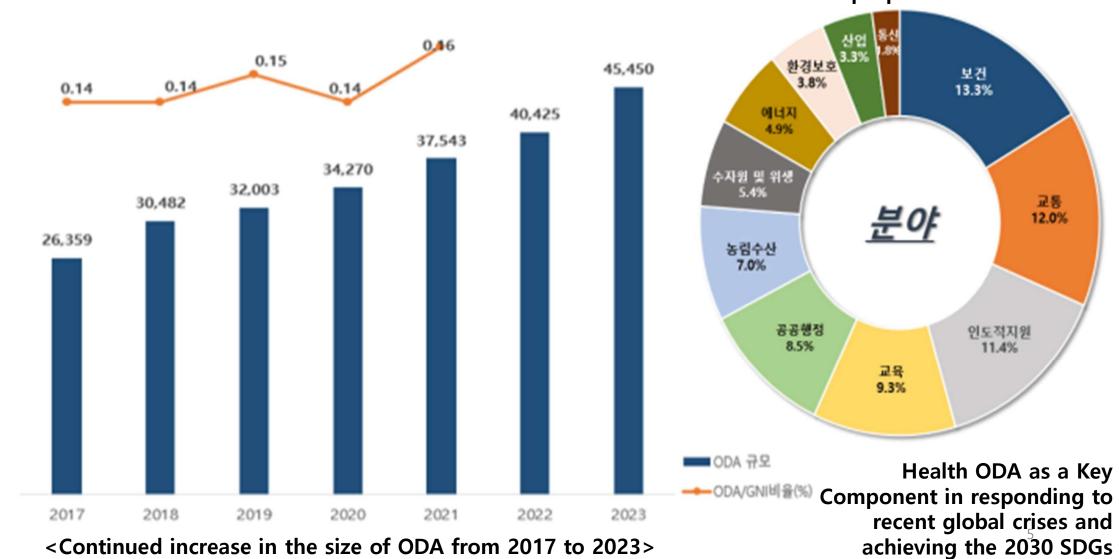
Korea's
ODA core partner countries are 27 for 2021-25

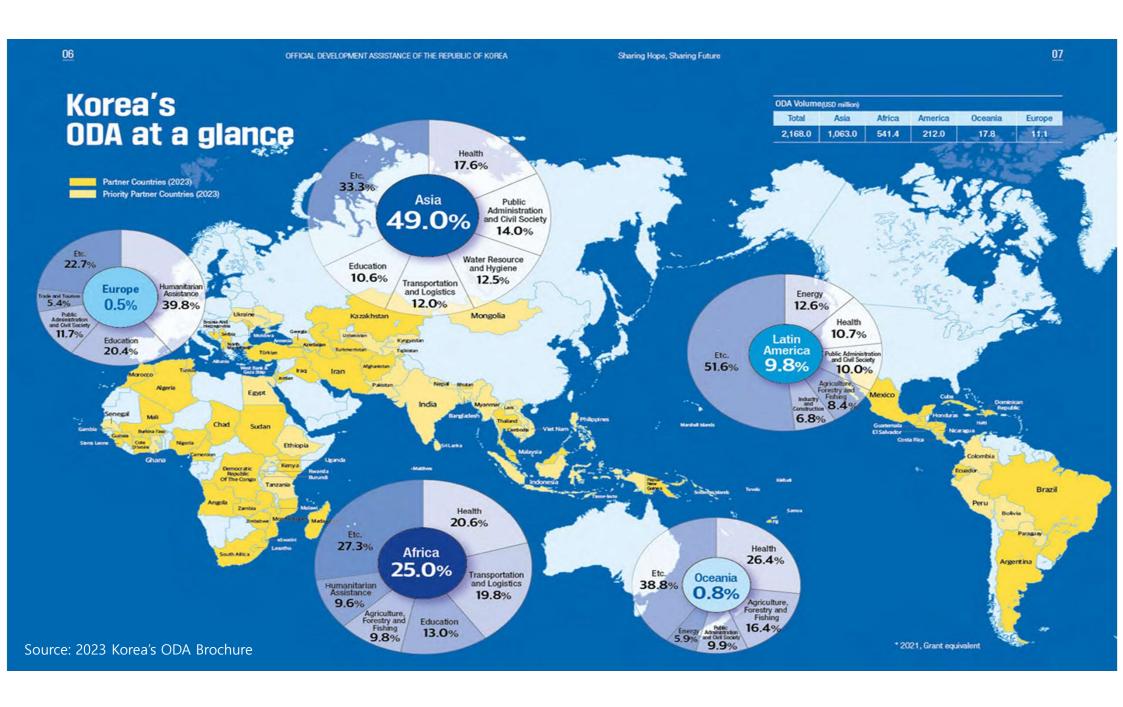
Asia (12 countries)		Africa (7 countries	)	Middle East and CIS (4 cou	intries)	Latin America (4 count	ries)
Bangladesh	<u>±</u>	Ethiopia	7	Kyrgyzstan	<u>+</u>	Bolivia	<u>*</u>
Cambodia	<u> </u>	* Ghana	<u> </u>	Uzbekistan	Ŧ	Colombia	$\overline{\tau}$
Indonesia	<b>±</b>	Egypt	Ŧ	Ukraine	<u>+</u>	Paraguay	*
Lao PDR	<u> </u>	Rwanda	<u>¥</u>	Tajikistan	<u> </u>	w Peru	<u> </u>
Mongolia	<u>+</u>	Senegal	<u>+</u>				
<b>★</b> Myanmar	<u>↓</u>	Tanzania	<u> </u>				
Nepal	<u>↓</u>	Uganda Uganda	Ŧ				
C Pakistan	<u>+</u>						
Philippines	<u> </u>						
Sri Lanka	<u> </u>						
Vietnam	<u>↓</u>						
India	<u> </u>					4	

Source: odakorea.go.kr

### Overview of Korea's ODA

## Health sector ranks first in terms of proportional allocation





## Overview of Korea's Health Sector ODA

< Health Sector ODA Budget >

(Unit: Billion KRW)

Year	2019	2020	2021	2022	2023	2030 (Exp ected)
Net ODA (Billion KRW)	3,200.3	3,427.0	3,754.3	3,938.3	4,771.1	6,400.6
Health Sector Loan ODA	1,906	1,171	1,700	2,470	2,770	3,812
Health Sector Grant ODA	1,343	1,602	1,658	1,780	1,963	2,686
The total health ODA budget a cross all departments	3,249	2,773	3,358	4,250	4,733	6,498
The size of the Ministry of Health and Welfare (KOFIH) budget**	542.8(16)	584.5(21)	677.4(20)	619.7(14)	663.3(13)	1,085.6

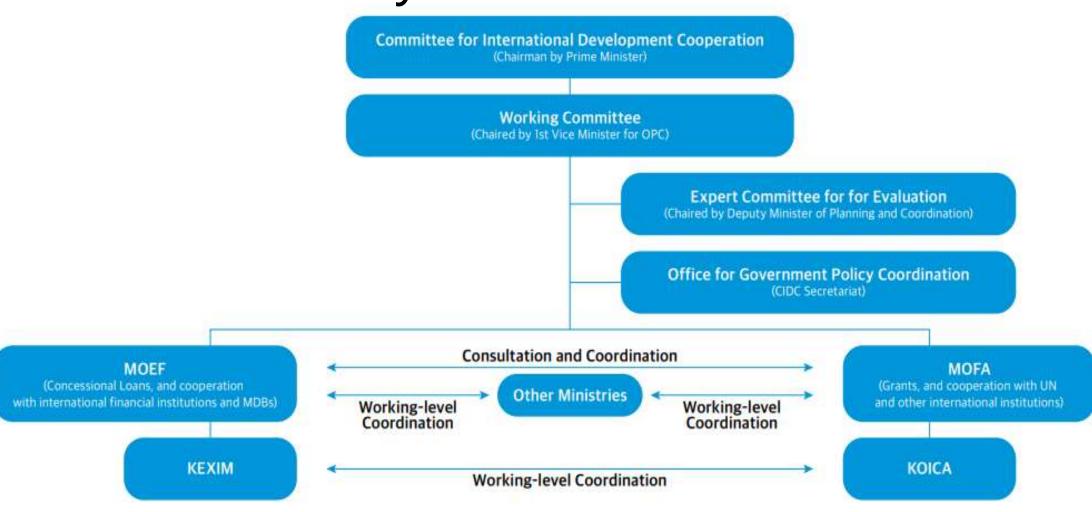
Source: Comprehensive Strategies for International Development Cooperation by Year from the International Development Cooperation Committee (2019-2023, based on finalized amounts)

### Types of Aid

Туре	Type of finance	Type of aid
Dila di di	Grants: Transfers in cash or in kind for which no legal debt is incurred by the recipient	<ul> <li>Budget support</li> <li>Core contributions and pooled programs and funds</li> <li>Project-type interventions</li> <li>Experts and other technical assistance</li> </ul>
Loans (Non-grant): Transfers in cash or in kind for which the recipient incurs legal debt		<ul> <li>Scholarships and student costs in donor countries</li> <li>Debt relief</li> <li>Administrative costs not included elsewhere</li> <li>Other in-donor expenditures</li> </ul>
Multilateral aid	Contributions and capital subscriptions to international organization	organization and concessional loans to international



# Korea's ODA System



Source: 2020 KOREA ODA WHITEPAPER

### Health Sector ODA

Korea supports resilient healthcare capacity and strong healthcare systems to promote good health in partner countries.

### **Global Cooperation**

Global cooperation is essential for the prevention and eradication of major infectious diseases such as COVID-19, AIDS, tuberculosis, and malaria.

### Korea has committed

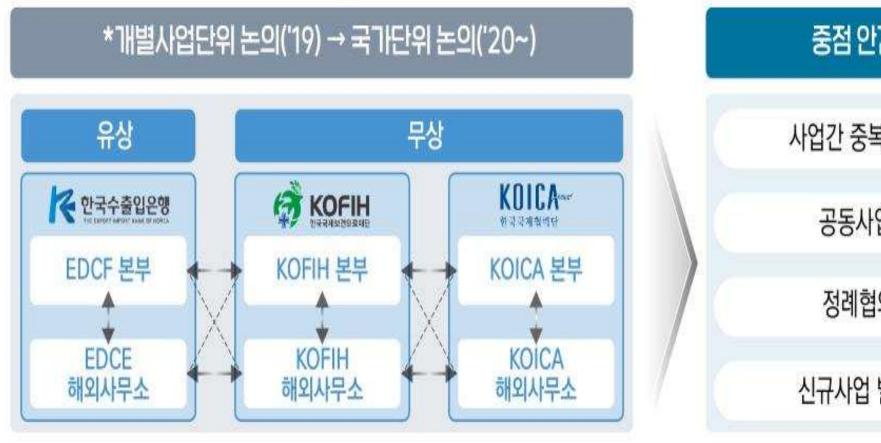
- ◆ USD 200 million to the **Global Health Security Agenda** (GHSA) (2021-25)
- ◆ USD 300 million to **ACT-A** (2023-25)
- ◆ USD 100 million to the **Global Fund** (2023-25)

### **Key ODA Projects**

- ♦ (KOFIH) Integrated Maternal and Child Health Promotion Program in Western Cambodia (Phase 2) (2017-21)
- ♦ (KOICA) Project for Comprehensive Primary Health Care Strengthening in 2 Regions of Northern Ghana (2022-27)
- ♦ (KOICA) Project for the Establishment and Capacity Building of Intensive Care Unit in Medical City, Baghdad, Rep.of Iraq (2016-24)
- ♦ (EDCF-KOICA) Central Region Center for Nuclear Medicine & Radiotherapy at Danang Hospital Investment Project (2013-18)

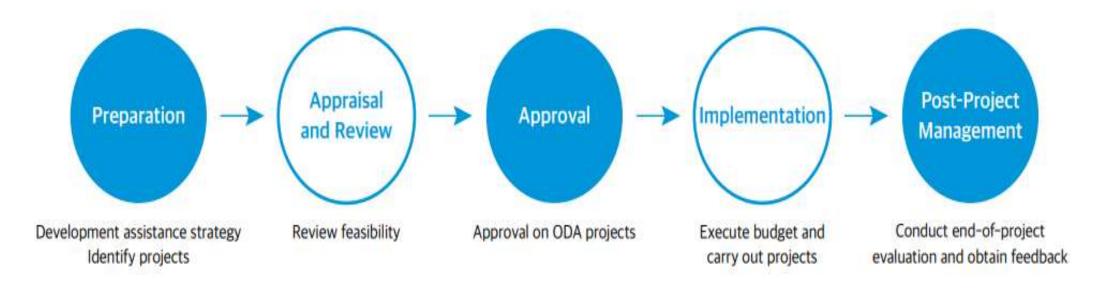
Source: 2023 Korea's ODA Brochure

## Health ODA project collaboration & linkage systems





# ODA Implementation Procedures

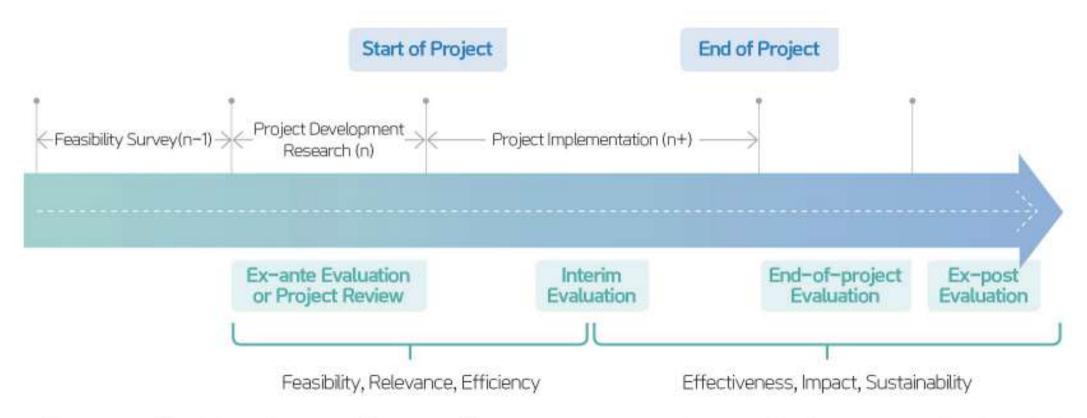


### In principle grant projects proceed in the following order:

"project identification"  $\Rightarrow$  "receipt of Project Concept Paper (PCP)"  $\Rightarrow$  "feasibility study"  $\Rightarrow$  "selection of candidate projects"  $\Rightarrow$  "implementation survey and preparation of implementation plan"  $\Rightarrow$  "selection of implementing partners and project implementation"  $\Rightarrow$  "project evaluation"  $\Rightarrow$  "post-project management."

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## **ODA Evaluation Procedures**



\* The criteria (feasibility, relevance, efficiency, effectiveness, impact, and sustainability) are measured as described above for a project subject to project/ program evaluations. Different evaluations (by country program, theme, type, etc.) may apply to each project based on its features.

# KOFIH's ODA Project Key Achievements and Evaluation

### Dr LEE Jong-wook Fellowship Program

### **Cumulative total**

From 2007 to the present, 1,500 healthcare personnel in 30 countries were trained through this program.



#### Asia (12 countries, 870 people)



#### Africa, Latin America, and the Middle East (18 countries, 630 people)





Training Course for Clinical Experts



Training Course for Biomedical Engineers



Training Course for Health Policy Administrators



Course for Health Financing and Economics





Training Course for Infectious Disease Specialists

Epidemiology/Clinical Diagnosis & Treatment / Diagnous & Rosearch



Course for **Graduate Degrees** 

Nursion / Medical Education / Healthcare Policy / Biomedical Engineering / Basic Medical Science



Training Course for Health Professional Education



Leadership Course for Health Policy Management

> South Sudan 9













(3)





63 Paraguay



Mozambique

0



### Estabilishing National EMS system in Uganda

'16, National Emergency Medical Service Project proposed by Uganda MoH



'17~22, 35 Million US Dollar KOFIH-Uganda bilateral project on EMS implemented



'17~22, Total 44 EMS personals including 31 clinical, 9 policy, 4 Engineers have been trained through LJW



'22 Invited by Cameroon government to share the outcome

### 1. Capacity Building through Dr LEE Jong-wook fellowship Program

Invitational Trainings: Relevant healthcare professionals from National and Regional Referral and district hospitals have been trained in Korea to develop the skills and establish the emergency referral system in their institutions

### 2. Infrastructure and System Support through ODA Project

- > Construction of facilities such as emergency rooms
- > Establishment of infrastructure such as support for essential diagnostic equipment such as ultrasound
- Development of National Guidelines for Emergency Referral System (Officially Est. in 2022), on-site training of emergency medical personnel, etc.

### 3. Outreach activities by KGA Alumni

> KGA Alumni group provides BLS trainings to motorcycle drivers, police officers, and school teachers and students annually



### Establishing a Pediatric Cardiac Surgery team in Ethiopia

Step 1: On-site visit to identify the gap and provide consultations



Step 2: Invitational Training in Team Units to train in an advanced setting



Step 3: Support Local Spread-out led by the team leader from the invitational training



Step 4: E-learning contents development during COVID-19



Step 5: Sandwich Program to complete the specialist's training

- ➤ '15~20, 6 cardiac surgery and 2 interventional cardiology training sessions have been conducted in Ethiopia by Korean Experts' team.
- → '16~19 Total of 9 doctors and nurses from TASH, a public university teaching hospital under Addis Ababa have been trained in Korea
- ~ '19~, Knowledge sharing and spreading within TASH, led by the team leader("Key Champion") of the invitational program.
   32 doctors and nurses participated in On-site training.
- ➤ In 2020, First successful cardiac surgery operation by local team
- ➤ '20-21, Due to COVID-19 Pandemic, On-line training materials are developed and total of 22 doctors and nurses participated.
- → '23~, designing a sandwich program to certify the fellows who
  finished the invitational training as specialists



### Strengthening National Biomedical Engineering System

2012~ Invitational Training of BMEs



#### 2015~ 2018

Organized Local Training Programs (Laos, Ghana, Tanzania)



Best performing Local Trainees: priority for the invitational training



2019~
Developed National
BME System
Strengthening
Projects



2022~

Multi-year bilateral project developed by the fellows

### > National Gap Analysis

 Since 2016, Human Resource Mapping of the national biomedical engineers have been conducted in order to find the gap and identify proper candidates for training

#### Invitational trainings for ToT trainers to fill the gap

- Fellows develop the curriculum and organize training sessions to share the knowledge among the BMEs all over the country
- Every year, over 30 local engineers per country are being trained locally in Laos, Ethiopia, Ghana, and Tanzania
- Best Performing trainee of the local program will be given an opportunity to be recommended for the next invitational program to Korea

### National BME System strengthening project developed by the fellows

 Fellows, MoH, and KOFIH co-developed the multi-year bilateral cooperation project implemented from 2022

		근무인력	16년	17년	18년	19년	20%
:1	가나 보건부 (HQ)	7	중급 1명	상급 1명	중급 1명	상급 1명	
2	가나 보건청 (HQ)	15		중급 1명	상급 1명		
3	지역 보건청 (Great Accra)	12		중급 1명	상급 1명	중급 1명	상
4	지역 보건청 (Volta)	13	중급 1명	상급 1명			2000
	지역 보건청 (Central)	9					PAPER
6	지역 보건청 (Eastern)	15					
7	지역 보건청 (Ashanti)	11					
8	지역 보건청 (Brong Ahafo)	8					The State of the Control of the Cont
9	지역 보건청 (Northern)	10					8
10	지역 보건청 (Upper East)	7			중급 1명	상급 1명	
11	지역 보건청 (Upper West)	4					
12	지역 보건청 (Western)	11					- Ag124C
13	Korle-Bu Teaching Hospital	12					Section 1
14	Komfo-Anokye Teaching Hospital	10					No. of the last of
15	Capecoast Teaching Hospital	5					
16	Tamale Teaching Hospital	5					
	중계	154		참기	연수생: 7명	, 12회	Section (ACC)



### Cambodia ODA Country Program Evaluation (2023)

#### (The Scale of ODA)

- Over the past six years (2016-2021), our ODA support to Cambodia amounted to a total of KRW 569 billion, more than doubling in size (from KRW 66.5 billion in 2016 to KRW 140 billion in 2021). Among bilateral donor countries, Korea ranks fourth with 11.5% following Japan (31.7%), France (15.3%), and the United States (14.2%).
- Based on the priority cooperation sectors for Cambodia, the support is allocated as follows: transportation (KRW 180 billion, 32%), health and sanitation (KRW 121 billion, 21%), and water management (KRW 86.4 billion, 15%). These sectors account for 86% of the total support to Cambodia.
- (Regarding on Health Sector) there is a growing need to address the rising demand for chronic disease response and to expand the exploration of digital health, which is prioritized in the Pentagon Strategy.

### (Health Sector-specific) 'Positive' evaluation of the effectiveness

- The "Integrated Maternal and Child Health Improvement Project" in the western region (KOFIH) supports the local government budget, priorities and the scope of activities are defined from the early stages of the project, and implementation status is systematically managed, resulting in achievements such as a reduction in maternal and child mortality rates
- have increased the number of deliveries at health centers from 2 times a month to 20-30 times, and the maternal mortality rate has decreased from 10-20 per year to fewer than 5.

Source: The 48th Committee for International Development Cooperation(CICD)

< '16~'21년 對캄보디아 ODA사업 규모 >



< '16~'21년 對캄보디아 ODA사업 중점협력분야 비중 > (ODA Korea 실적통계)



# 30 high TB burden countries

### **KOFIH 10 overseas offices**

- ♦ (Asia) Lao PDR, Sri Lanka, Uzbekistan, Myanmar, Cambodia, Vietnam
- ◆ (Africa) Ghana, Ethiopia, Uganda, Tanzania

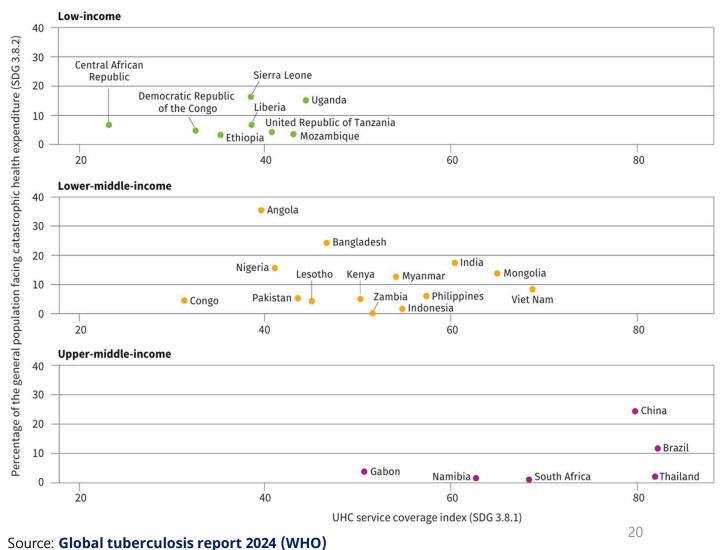
### **KOFIH** projects on TB

- ◆ Philippines Tuberculosis Control Capacity Strengthening Project ('10~'21)
- ◆ Uganda National Tuberculosis Control Capacity Building Project ('17~'21)

Local residents waiting for TB examination in DetecTB mobile bus supported by KOFIH



UHC service coverage index (SDG 3.8.1)<sup>a</sup> and percentage of the general population facing catastrophic health expenditure (SDG 3.8.2),<sup>b</sup> 30 high TB burden countries,<sup>c</sup> stratified by income group<sup>d</sup>



NO.	Current Projects	Period	Budget(백만원)
1	라오스 감염병 진단 및 검역체계 구축사업 Diagnosis and Quarantine System Building Project for Communicable Disease Control in Lao PDR	2019-2025	4,487
2	<b>캄보디아 서북부 국경지역 감염병 관리대응 역량강화사업</b> Strengthening for Communicable Disease Control and COVID-19 Response of Border Region in Northwest Cambodia	2023-2025	2,432
3	키르기스스탄 국립감염병원 시뮬레이션센터 운영관리 컨설팅사업 Consulting Project for the Management and Operation of the National Simulation Center at the Kyrgyzstan National Infectious Disease Hospital	2023-2025	1,250
4	에티오피아 짐마존 결핵환자 발견체계 구축 및 진단역량 강화사업 Enhancing Tuberculosis Case Detection through Capacity Building and Strengthening Diagnostics in Jimma Zone, Ethiopia	2021-2025	1,800
(5)	우간다 감염병 예방 및 대응체계 강화사업 Strengthening the Health System to Prevent, Detect, and Respond to Infectious Diseases in Uganda	2022-2026	9,628
6	탄자니아 국립공중보건 실험실 진단 및 연구역량 강화를 통한 감염병 감시 및 관리체계 구축사업 Strengthening the National Public Health Laboratory through Capacity Building of Infectious Disease Control and Management in Tanzania	2023-2027	4,656
7	<b>이종욱펠로우십 프로그램</b> Dr Lee Jong-Wook Fellowship Program	Annually-based (continues)	-
	Total		24,253

### National Tuberculosis Control Capacity Building Project in Uganda

#### > Goal

 To support the implementation of the National Strategic Plan for Tuberculosis Control which is part of the National Health Policy of the Uganda Ministry of Health by providing technical assistance for the National Tuberculosis Reference Laboratory (NTRL) and building capacity of health workers

### Project Period & Budget

2017-2021 (KRW 1.67 billion in total)

### Project Details

- Building TB control governance capacity in TB vulnerable areas
- Strengthening TB control capacity of health professionals at the National Tuberculosis Reference Laboratory and in TB vulnerable areas
- Improving the environment of TB laboratories and supporting diagnosis equipment
- Supporting awareness-raising programs for local residents

# National Tuberculosis Control Capacity Building Project in Uganda - Evaluation Rating Results

Criteria	Evaluation Aspect	Score			
	<ul> <li>Relevance with host country's development strategy, beneficiary demand, priorities, ROK government aid strategy, and SDG objectives</li> </ul>	Ø	3	2	1
1. Relevance	o Project design and structure	4	€	2	1
	Adaptation to environmental changes and risk management	4	€	2	1
	Average point (a)	3.3 / 4 points			

o Rationale: The project aligns with the SDGs, and the policy and priorities of the recipient country's government. It reflects the demand of the beneficiaries. The project design and structure are appropriately established in support of the objectives. Additionally, the project incorporates a risk management plan to respond to environmental changes.

	Cost efficiency	•	3	2	1
2 Efficience	Duration efficiency	•	3	2	1
2. Efficiency	o Level of achievement in relation to resource allocation	<b>4</b>	3	2	1
	Average point (b)		4 / 4	points	

Rationale: The project is considered highly efficient in terms of both cost and duration. It was efficient
in achieving outputs and performance objectives.

3.	<ul> <li>Level of attainment of planned deliverables and performance objectives</li> </ul>	4	3	2	1
Effectiveness	o Equity and fairness of outcomes for vulnerable groups	•	3	2	1
and Impact	o Positive or negative effects on socio-economic systems	Ø	3	2	1
	Average point (c)		4 / 4	points	

• Rationale: The project successfully achieved planned outputs and performance objectives. The outcomes contributed to achieving health equity among vulnerable populations and communities. The project is evaluated as having positive social and economic impacts.

# National Tuberculosis Control Capacity Building Project in Uganda - Evaluation Rating Results

4.	o Financial and institutional capacity	4	3	0	1
	o Human resource capacity and maintenance system	4	•	2	1
Sustainability	<ul> <li>Sustainability relative to planned objectives</li> </ul>	4	•	2	1
	Average point (d)		2.7 / 4	points	

<sup>•</sup> Rationale: The financial sustainability of the project is considerably low, but the human capacity in the recipient country is deemed excellent. Concerns arise regarding the sustainability of the maintenance system, but actual sustainability could be achieved if both the system and finances are strengthened.

	<ul> <li>Internal coherence: Synergy effects with projects of other Korean implementing partners</li> </ul>	0	3	2	1
5. Coherence	<ul> <li>External coherence: Synergy effects with projects of donor agencies from other countries</li> </ul>	0	3	2	1
	Average point (e)		4 / 4	points	

o Rationale: The project is effectively aligned with other initiatives of the foundation. Furthermore, it seems plausible for it to be integrated with projects from agencies of other donor countries.

Total score (a+b+c+d+e)	18
Overall Evaluation Rating	Highly successful

# National Tuberculosis Control Capacity Building Project in Uganda - Lessons Learned

#### Success Factors

- (Achieving International Accreditation) Through this project, NTRL obtained accreditation for medical laboratory testing (ISO 15189) and external
  conformity assessment (ISO 17043), gaining credibility for testing and technical support not only domestically but also in neighboring countries.
- (Best Practice in Aid Harmonization) Through collaboration and synergies with the Dr. Lee Jong-wook Fellowship Program and other KOFIH projects (emergency medical services), the project has fostered empowerment and enhanced sense of ownership among beneficiaries in the recipient country.

#### Recommendation

- (Strengthening the Specimen Transportation System) To prevent delays in specimen transportation, it is crucial to establish regional hub laboratories and enhance their capacities. Delays in specimen transportation can negatively affect testing times and subsequently delay appropriate tuberculosis treatment. Hence, the proposal emphasizes building regional laboratories or enhancing the existing transport systems.
- (Enhancing the Use of Village Health Workers in Cost-Effective Disease Management) Throughout the project, active case finding has been effectively implemented by conducting ongoing tuberculosis refresher training for Village Health Team (VHT) members. These individuals are responsible for identifying people who have been in close contact with tuberculosis patients or those who have succumbed to the disease. It is essential to continue providing refresher training to these members and to increase the scope of active case finding as a critical strategy in combating tuberculosis.
- (Setting Key Performance Indicators and Strengthening Performance Management) Consistent maintenance of key performance indicators during the project period is necessary. The proposal suggests systematic performance management strategies such as PDM (Project Design and Management) indicator-based achievement monitoring forms, and indicator definitions.

## KOFIH's Healthcare ODA Strategy



Expansion of Healthcare ODA in scale and area with following directions;

### Integrated support of essential packages

Support for strengthening customized healthcare systems by country and region to prepare for healthcare crises including the emergence of new infectious diseases and the increase in the burden of chronic diseases

➤ PHC Impact Initiative (PHC to 'more people', 'more affordable', 'more services')
Emphasizing the importance of strengthening the primary healthcare system as an essential means for Universal Health Coverage (UHC) in the context of the global complex health crisis

Individual support for a specific target: Mother and Child Health Project in A, Tuberculosis control project in B, NCD management project in C

Integrated support for health
system: 'Regional health +
medical equipment maintenance
+ healthcare workforce
development + emergency
medical service system' Package

Source: 2024 LJW KOFIH

## KOFIH's Healthcare ODA Strategy



- ➤ the LEE Jong-wook School for Global Health: Enhancing sustainability by specializing and modularizing each training course, expanding new courses, and expanding professional cooperation organizations to brand the international health workforce development program
- Implementation-oriented healthcare system and policy consulting

### Governance and Policy

 Strengthening operational capabilities for institutional cooperation such as the National Health Insurance Service and National Health Institute

### **Hospital Operation**

 Disseminating operation and management consulting and capacity building on tertiary hospitals built with a support from Korean government(EDCF loan project)

### System Establishment

 Establishing Sustainable disease response system model based on Korea's experience in overcoming global health security crises

Source: 2024 LJW\_KOFIH

### Fellowship Program

# **ODA Training** for Global Healthcare Professionals



Important Considerations

- 1. Global Health Status Analysis
- 2. Analysis of manpower(gaps, needs) by country
- 3. Consider the level of demand
  - ➤ Level 1: patient care
  - ➤ Level 2: Service Provider
  - ➤ Level 3: Infrastructure
  - ➤ Level 4: Social/Economical/Political Environment
- 4. Comprehensive and systematic manpower training plan
- Technical and financial support for application of the training outcomes in each country's health system

Source: 2024 LJW\_KOFIH

# KOFIH's Healthcare ODA Strategy



### < Expansion of support for region-specific key projects and package type projects >

Region	Key Project Area	Package
Southeast Asia	- Establishment of an integrated primary healthcare strengthening system, including mother and child health, infectious diseases, health insurance, and c hronic diseases	For strengthening the primary healthcare system, promote integrated health system strengthening including local healthcare,
Africa	<ul> <li>Infectious disease management centered on integrated primary healthcare</li> <li>Enhancement of preventable disease management capabilities such as non-infectious diseases</li> </ul>	medical personnel, emergency medical se rvice, medical resource management, and disease and patient registration managem ent
Central Asia	- Enhancement of facility capacity in emergency medical service, cancer, and hospital operations	System consulting-oriented package: Health
Latin America	- Strengthening digital health, health promotion, health insurance, and health care information systems in connection with science and technology and ICT O DA strategy	
Pacific Island Country	- ICT-based education and preventable disease management such as non-infecti ous diseases	Expansion Package: Non-infectious diseas es, digital health, health promotion, etc.

(\*) Basic essential support → Capacity building → Industry-linked projects in key areas for each stage of healthcare development

Source: KOFIH's Master Plan Implementation Strategy 2024-2030

# Thank you

