



Health System Strengthening for Human Capital Development in Eswatini (P168564)

EASTERN AND SOUTHERN AFRICA | Eswatini | Health, Nutrition & Population Global Practice |
IBRD/IDA | Investment Project Financing | FY 2020 | Seq No: 6 | ARCHIVED on 20-Jan-2023 | ISR53522 |

Implementing Agencies: Kingdom of Eswatini, Ministry of Health

Key Dates**Key Project Dates**

Bank Approval Date: 22-Jun-2020

Effectiveness Date: 10-Dec-2020

Planned Mid Term Review Date: 20-Mar-2023

Actual Mid-Term Review Date:

Original Closing Date: 30-Sep-2025

Revised Closing Date: 30-Sep-2025

Project Development Objectives

Project Development Objective (from Project Appraisal Document)

The project development objective is to improve the coverage and quality of key reproductive, maternal, neonatal, child and adolescent health (RMNCAH), nutrition and NCD services (hypertension and diabetes) in Eswatini.

Has the Project Development Objective been changed since Board Approval of the Project Objective?

No

Components Table

Name

Component 1: Improve health service delivery to increase the coverage and quality of health services to build human capital:(Cost \$14.50 M)

Component 2. Increase community demand for RMNCAH, nutrition and NCD services:(Cost \$2.00 M)

Component 3. Strengthen the MOH's stewardship capacity to manage essential health and nutrition services and project activities:(Cost \$3.50 M)

Component 4: Contingent Emergency Response

Overall Ratings

Name	Previous Rating	Current Rating
Progress towards achievement of PDO	<input type="checkbox"/> Moderately Satisfactory	<input type="checkbox"/> Moderately Satisfactory
Overall Implementation Progress (IP)	<input type="checkbox"/> Moderately Unsatisfactory	<input type="checkbox"/> Moderately Unsatisfactory
Overall Risk Rating	<input type="checkbox"/> Substantial	<input type="checkbox"/> Substantial

Implementation Status and Key Decisions

The project was approved by the Board on June 22, 2020 and became effective on December 10, 2020. The project is part of the broader development agenda to support Eswatini's response to the COVID-19 pandemic and its economic recovery during and post-COVID-19 to foster sustainable development, primarily through strengthening the health system to deliver high quality services to the people and boosting Eswatini's human capital.

Since the last mission in May 2022, implementation of the planned activities has slowly progressed with some tangible results on the ground: The Ministry of Health (MoH) has further scaled up training of health care workers (HCWs) to deliver high impact essential health services across the



continuum of care. For example, the non-communicable disease (NCD) team has trained 475 out of 811 targeted HCWs on NCD service package. As a result, 159 out of 239 clinics are offering decentralized NCD services. As of October 2022, 1,690 out of 3,218 targeted Rural Health Motivators have been trained on community-based health and nutrition including NCDs. The MoH is in the process of procuring/distributing equipment and commodities for NCD and nutrition services such as speculums for cervical cancer screening and ready-to-use therapeutic food for treatment of malnourished children. Also, the construction of the Operations Centre for the Central Medical Stores (CMS) and the offices and workshops for Biomedical Engineering Unit and Health management Information System Unit is currently on schedule and 60 percent and 24 percent complete respectively. The Quality Program has completed the quality assessment in 12 facilities in FY22/23 and is developing the continuous quality improvement plans and quality of care standards with support from the technical assistance under the project.

Risks

Systematic Operations Risk-rating Tool

Risk Category	Rating at Approval	Previous Rating	Current Rating
Political and Governance	Substantial	Substantial	Substantial
Macroeconomic	Substantial	High	High
Sector Strategies and Policies	Low	Low	Low
Technical Design of Project or Program	Moderate	Moderate	Moderate
Institutional Capacity for Implementation and Sustainability	Substantial	High	High
Fiduciary	Moderate	Moderate	Moderate
Environment and Social	Moderate	Moderate	Moderate
Stakeholders	Moderate	Moderate	Moderate
Other	--	--	--
Overall	Moderate	Substantial	Substantial

Results

PDO Indicators by Objectives / Outcomes

Improved coverage of key RMNCAH, nutrition and NCD services				
▶ Percentage of patients diagnosed with hypertension and/or diabetes who are managed at the PHC level (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	58.00	63.00	75.00	90.00
Date	31-Dec-2020	31-Mar-2022	30-Sep-2022	30-Sep-2025



▶ Percentage of children under 5 years of age provided with a basic package of nutrition specific services (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	32.00	27.00	33.00	55.00
Date	31-Dec-2020	31-Mar-2022	30-Sep-2022	30-Sep-2025

▶ Percentage of adolescents served or reached with quality sexual and reproductive health services (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	0.00	0.00	60.00
Date	31-Dec-2020	31-Mar-2022	30-Sep-2022	30-Sep-2025

Improved quality of RMNCAH, nutrition and NCD services				
▶ Percentage of pregnant women receiving at least 4 ANC that meet defined quality standards (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	8.60	10.00	18.00	50.00
Date	31-Dec-2020	31-Mar-2022	30-Sep-2022	30-Sep-2025

▶ Percentage of target health facilities that meet a minimum standard of quality as measured by a Health Facility Quality Index (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	0.00	71.00	70.00
Date	31-Dec-2020	31-Mar-2022	30-Sep-2022	30-Sep-2025
Comments:	71% is based on a limited number of health facilities (6 health facilities).			

Intermediate Results Indicators by Components

Improve health service delivery to increase coverage and quality of health services				
▶ People who have received essential health, nutrition, and population (HNP) services (Number, Corporate)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	195,519.00	145,123.00	294,360.00
Date	31-Dec-2020	31-Mar-2022	30-Sep-2022	30-Sep-2025
Comments:	Actual data have been updated based on the revised definition.			



<input type="checkbox"/> People who have received essential health, nutrition, and population (HNP) services - Female (RMS requirement) (Number, Corporate Supplement)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	109,434.00	91,370.00	202,887.00
<input type="checkbox"/> Number of women and children who have received basic nutrition services (Number, Corporate Breakdown)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	170,053.00	107,525.00	179,360.00
Date	31-Dec-2020	31-Mar-2022	30-Sep-2022	30-Sep-2025
<input type="checkbox"/> Number of deliveries attended by skilled health personnel (Number, Corporate Breakdown)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	25,466.00	37,607.00	115,000.00
Date	31-Dec-2020	31-Mar-2022	30-Sep-2022	30-Sep-2025
<input checked="" type="checkbox"/> Percentage of women receiving post-partum check-up within 14 days (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	60.20	80.00	90.00	80.00
Date	31-Dec-2020	31-Mar-2022	30-Sep-2022	30-Sep-2025
<input checked="" type="checkbox"/> Number of people screened and diagnosed with hypertension (Number, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	22,624.00	25,430.00	28,005.00	30,890.00
Date	31-Dec-2020	31-Mar-2022	30-Sep-2022	30-Sep-2025
<input checked="" type="checkbox"/> Number of people screened and diagnosed with diabetes (Number, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	6,740.00	8,101.00	9,092.00	9,740.00
Date	31-Dec-2020	31-Mar-2022	30-Sep-2022	30-Sep-2025
<input checked="" type="checkbox"/> Number of HCWs trained on RMNCAH, nutrition and/or NCD services (Number, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	192.00	464.00	358.00



Date	31-Dec-2020	31-Mar-2022	30-Sep-2022	30-Sep-2025
► Number of facilities using eLMIS for supply management (Number, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	3.00	3.00	22.00
Date	31-Dec-2020	31-Mar-2022	30-Sep-2022	30-Sep-2025
► Proportion of health facilities using CMIS for routine reporting (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	54.00	67.00	68.00	80.00
Date	31-Dec-2020	31-Mar-2022	30-Sep-2022	30-Sep-2025
► Percentage of target health facilities that received at least one comprehensive quality assessment applying the appropriate checklist and protocol, and received adequate feedback from RHMT (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	0.00	100.00	90.00
Date	31-Dec-2020	31-Mar-2022	30-Sep-2022	30-Sep-2025
Comments:	100% is based on a limited number of health facilities			
► Satisfaction rates of clients with the quality of health services (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	0.00	84.00	75.00
Date	31-Dec-2020	31-Mar-2022	30-Sep-2022	30-Sep-2025
Comments:	84% is based on an assessment of 9 sites.			

Increase community demand for RMNCAH, nutrition and NCD services

► Number of community health workers (CHWs) including rural health motivators (RHMs) trained to conduct community sensitization & outreach on RMNCAH, Nutrition and NCD services (Number, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	533.00	1,690.00	2,500.00
Date	31-Dec-2020	31-Mar-2022	30-Sep-2022	30-Sep-2025

► Number of people reached with RMNCAH, nutrition and NCDs specific communication as part of targeted SBCC interventions (Number, Custom)



	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	50,544.00	58,615.00	82,000.00
Date	31-Dec-2020	31-Mar-2022	30-Jun-2022	30-Sep-2025
► Number of client-based digital applications' users (Number, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	0.00	0.00	78,000.00
Date	31-Dec-2020	31-Mar-2022	30-Sep-2022	30-Sep-2025

Strengthen MOH's stewardship capacity to manage health & nutrition services and project activities				
► Number of updated regulations, policies and strategies for MOH (Number, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	0.00	0.00	17.00
Date	31-Dec-2020	31-Mar-2022	30-Sep-2022	30-Sep-2025
► Number of MOH management staff at national and regional level trained (technical and leadership) (Number, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	0.00	0.00	64.00
Date	31-Dec-2020	31-Mar-2022	30-Sep-2022	30-Sep-2025
► Percentage of target health facilities with at least one HCW sensitized on GBV guidelines (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	0.00	91.00	90.00
Date	31-Dec-2020	31-Mar-2022	30-Sep-2022	30-Sep-2025

Performance-Based Conditions

Data on Financial Performance

Disbursements (by loan)

Project	Loan/Credit/TF	Status	Currency	Original	Revised	Cancelled	Disbursed	Undisbursed	% Disbursed
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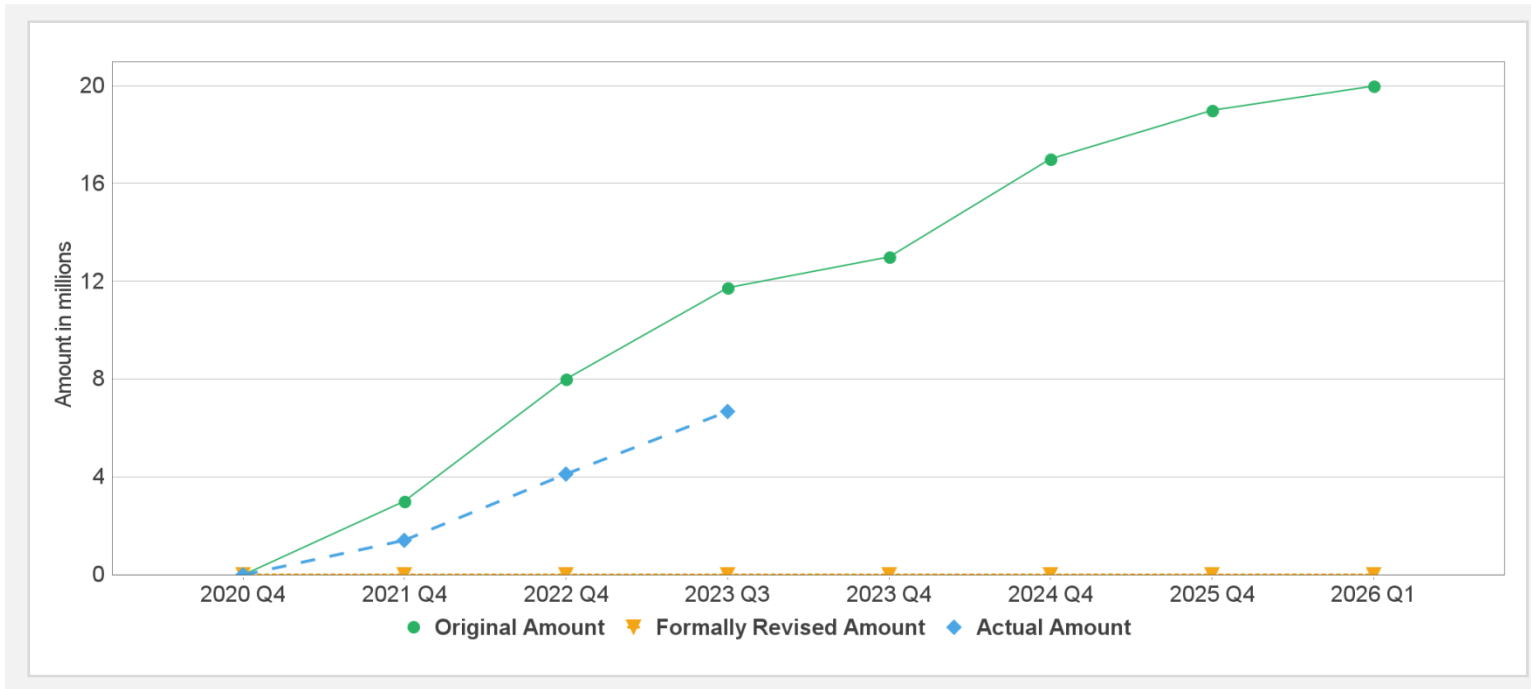


P168564	IBRD-91260	Effective	USD	20.00	20.00	0.00	6.72	13.28	<div style="width: 34%; height: 10px; background-color: #28a745;"></div>	34%
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Key Dates (by loan)

Project	Loan/Credit/TF	Status	Approval Date	Signing Date	Effectiveness Date	Orig. Closing Date	Rev. Closing Date
P168564	IBRD-91260	Effective	22-Jun-2020	04-Dec-2020	10-Dec-2020	30-Sep-2025	30-Sep-2025

Cumulative Disbursements



Restructuring History

Level 2 Approved on 10-May-2022

Related Project(s)

There are no related projects.