

FINAL EVALUATION

**LABORATORIES
FOR HEALTH IN NIGER
(LABO2S)**

EVALUATORS: LAURENT MALATO AND PHILIPPE LEPÈRE - TEAM
EVALUATION DATES: AUGUST - NOVEMBER 2023



COUNTRY:
NIGER



BUDGET :
€1,703,183



**LEAD
ORGANIZATIONS:**
Solthis

PARTNERS:
Ministry of
Public Health,
Foundation Mérieux,
RENIP+, Animag TB



START DATE:
01/05/2020

END DATE:
30/08/2023

THE PROJECT**Background**

When this project was submitted, Niger was significantly lagging behind on meeting the UNAIDS 90-90-90 targets. In 2018, 72 % of PLHIV in Niger knew their status, 54 % were receiving antiretroviral treatment and 45 % had an undetectable viral load. In addition, vertical HIV transmission remained high at 26 % (UNAIDS data). Preventing maternal transmission of HIV and early diagnosis in children are therefore key challenges for the country. In terms of HIV-TB co-infection, the mortality rate was estimated at 14 % in 2021, which is high compared to the global target of a 90 % treatment success rate for all those diagnosed. Approximately 68 % of TB patients who tested HIV positive were put on ARV treatment, compared to the target of 98 % in 2021.

Project operating model

The project's approach focuses on strengthening technical platforms as a tool to support the population's health. In recognition of the fact that strengthening laboratories and the associated service provision alone is not enough to improve the health status of patients, the project targeted the whole continuum of care, from promoting demand for access to diagnostic and follow-up tests, through to delivering and using results for patient management, to strengthening the operations and quality of laboratory services. With this in mind, a three-pronged capacity building methodology was set out: individual, structural and environmental.

OBJECTIVES**Overall objective**

The overall project objective is to contribute to improving access to quality care for people living with HIV and people with TB in Niger.

Specific objectives

- The capacity of health care teams and communities of patients are strengthened to ensure PLHIV and/or people with TB have access to diagnostic and follow-up tests, and that the results are used to adapt the care provided to patients.
- The capacity of technical platforms is strengthened to ensure the availability and quality of laboratory services for PLHIV and/or people with TB.
- Capacity is strengthened at national level to develop an integrated HIV and TB laboratory strategy within the health system.

EVALUATION RESULTS

Relevance

The LABO2S project responded to a crucial public health problem in Niger, which was lagging behind in the implementation of the 95-95-95 cascade. Through proposing an intervention based on several components such as: patient accessibility to diagnostic and follow-up tests, improving demand and interpretation of results, supporting sample transportation and involving patient associations. The project was particularly relevant in terms of addressing testing gaps that the country is experiencing and its holistic approach stands out from other projects in the region.

Effectiveness

The project achieved almost all of the indicator targets included in the logical framework. In terms of testing, the project met and exceeded its targets, showing good performance of this component. Progress made by the TB national reference laboratory has earned it its first Stepwise Laboratory Improvement Process Towards Accreditation (SLIPTA) star. A laboratory capacity building plan was developed and led to the recruitment of an additional technician for the HIV national reference laboratory. LABO2S demonstrated flexibility during COVID-19 by implementing a number of activities to ensure continuity of care at project sites (training, awareness via CSOs).

Efficiency

The full project budget was spent, highlighting the capacity of the lead and its partners to implement the activities, despite the operational difficulties encountered.

The results obtained by the project are satisfactory in terms of the allocated resources, however there was variability between the three outcome areas.

Impact

The initial assessments highlighted a weakness in the health system, particularly in terms of access to HIV viral load testing, early infant diagnosis and TB testing. The project identified (and experienced) systemic weaknesses in the health system, including those related to the supply chain. The project implementation teams sought to provide solutions to mitigate these weaknesses. The project also had an impact on how care provision is structured in the two implementation areas.

Sustainability

The project proposed interventions that contributed to strengthening the quality of services provided to patients. The support Fondation Mérieux provided to the national reference laboratory was marked by progress on quality assurance and above all made it possible to instill a «culture of quality». This support can be seen through ownership of the approach and a strong desire to be in it for the long-term. Solthis and the beneficiaries advocated for some of the project activities to be included in the Global Fund HIV – SSR grant and in the 2024 action plans of the beneficiary organizations.



Conclusions and recommendations

Recommendations for the Ministry of Health:

Allocate more human resources to the Directorate of Health Laboratories (DLS) and both health programs. The chronic lack of human resources at the DLS and in the two programs the project worked with caused delays in implementation and result in daily challenges for these bodies to carry out their work.

Recommendations for Solthis:

- ▶ Strengthen the involvement of local partners to enable better ownership during implementation, a sense of accountability and capacity building.
- ▶ Integrate a scale-up plan.
- ▶ Document the cost-effectiveness ratio of activities.

Recommendations for Fondation Mérieux:

- ▶ Strengthen collaboration with the project lead, as part of a consortium.
- ▶ Document the cost-effectiveness ratio of activities.

Recommendations for L'Initiative:

- ▶ Reduce the timeframe to review and validate implementation plans, as it was considered too long.
- ▶ The negotiation phase should not change the initial project outline too much or it should be ensured that budgets are aligned with any added activities.

Recommendations to the Global Fund:

- ▶ Reduce the timeframe to review and validate requests (especially for drugs or essential products).
- ▶ Allow flexibility to have expedited procedures to resolve problems related to supply availability. Do not let the situation continue as long as it did in Niger.

Recommendation for the Grant Management Unit:

- ▶ Have an inclusive approach to technical and implementation partners on quantifications or semi-annual reviews (some partners mentioned a lack of transparency in relation to this).
- ▶ Strengthen the skills of staff in charge of procurement.
- ▶ Strengthen the coordination of the Grant Management Unit with the vertical programs (National HIV/AIDS and Hepatitis Program and the National TB Control Program).

FEBRUARY 2025