



“Effective civil society development and improved access to quality health care for poor people in Georgia” Project

Impact Assessment

Executive Summary



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Executive Summary

Since the 'Rose Revolution' of 2003, the government of Georgia has embarked on sweeping socio-economic reforms. At the core of the reforms lies the neo-liberal vision of a desired society with a small government, thriving market-based economy, and liberal democracy. The health sector provides a clear example of how the afore-mentioned pattern of public policy making impacts on poor people's access to health-care services. Initially, the state reassumed its responsibility as guarantor of accessible and affordable health care provision, putting an emphasis on the development of a comprehensive Primary Health Care (PHC) system. However, in 2006 the government made a U- turn from the initial plans based on PHC model, towards total privatization of all levels of health care provision. This effectively ended any considerable state involvement in, and ultimately influence of, the 'public health care sector'.

The "Effective Civil Society Development and Improved Access to Quality Healthcare for Poor People in Georgia" project aimed at both broadening and strengthening the existing NGO coalition "Future without Poverty" by 'expanding it by a number of local NGOs in 3 target regions. It further intended to monitor the ongoing health care reforms, reporting possible negative developments to the responsible authorities (especially the Ministry of Health, Labour and Social affairs - MOHLSA) and main health service providers in order to recommend possible solutions and press for improvements.

Project activities supported two main project objectives:

- A. To strengthen and broaden the NGO coalition "Future without Poverty"; and
- B. To study the health care situation and to provide policy recommendations to the main actors in the current health care system, especially the Georgian government.

The project was evaluated according a predefined qualitative research protocol of OXFAM GB - Process Tracing - to assess and quantify the extent to which: a) the changes that the project "Effective Civil Society Development and Improved Access to Quality Healthcare for Poor People in Georgia" have taken place; and b) the project itself contributed to these changes.

Concerning the coalition, the project achieved its objectives reasonably well. There is a reasonable evidence that there is both a direct and an indirect causal link between the transfer of knowledge provided by the project and claimed increased knowledge and understanding of the chosen topics by those attending project workshops or an additional training. This applies foremost to local NGOs with lower capacities that seem to have benefited most.

There is also clear evidence of direct link between the project activities and inter-regional cooperation that did not exist before start of the coalition expansion by the project. The one-time, short input in the form of workshops and conferences however, did not lead to additional common activities as campaigning or lobby as the project initially anticipated, participation in the research being a notable exception.

Project partners performed different studies and research on the current situation around health reforms, formulated policy recommendations to improve the situation, and presented these to the main actors: government, pharmaceutical companies, insurance companies and

NGOs. The project had, however, only limited influence on government and insurance companies in its efforts to widen insurance coverage for the population.

The project also tried to document (bad) prescription habits of the doctors to encourage subsequent changes in their behavior. However, that expectation appears to have been quite unrealistic, and the environment not conducive to such change. The project did achieve some changes in the law concerning pharmaceutical companies' behavior, but its implementation is entirely the responsibility of the Ministry of Health. There is, however, ample verbal evidence that government structures - especially MOHLSA - and the Parliament were regularly contacted and provided with feedback regarding what is happening in practice. Information provided by key informants - both representing NGOs and the government - confirm this.

In summary, the project to a large extent succeeded to strengthen and broaden the existing coalition. It succeeded only partially in its attempts to monitor, to report and to recommend on the possible negative consequences of implementing the current health care reforms, and its achievements with respect to the main actors in the current health care provision were rather limited.

Looking into the main reasons for limited success of the intervention in health care structure, two main causes can be identified:

Firstly, the project set its goals and targets very high, after an overly optimistic assessment of possibilities as a NGO, or even as part of the "Future without Poverty" coalition. While broadening of the coalition succeeded well, it did not help much in lobby and advocacy activities. This is due to the time required in building up such a broad-based coalition, but also because of the low capacity of some of its members

Secondly, during the project, privatization that started in 2007 accelerated considerably¹. The Georgian government - especially MOHLSA - became overconfident about their approach and less willing to listen to others, even when negative consequences of the privatization came to light. In fact, they became believers in their free market model disregarding the reality – that it was not delivering affordable health services for Georgians. An estimated 73% of health services are currently financed through out of pocket expense, and there are indications that this proportion is growing. However, both ethical and economic arguments of external actors are neither necessary, nor appreciated. In such an environment, not much can be done by "outsiders" and it should be naïve to expect that any local NGO can seriously influence the course of events. Still, the project probably achieved as much as it could in such difficult environment.

In the given circumstances, the outlook concerning one of the main aims of the project - improvement of accessibility and quality of health care provision for the poor in Georgia - does not (to put it mildly) look very bright.

In its Strategic plan, the Georgian government stresses the importance of monitoring of the ongoing health reforms. If this is not only a empty slogan, the Welfare Foundation, preferably with other well developed NGOs, could play such role – a sort of a watchdog - or at least could assist considerably the Public Defender Office. It is up to Welfare Foundation to decide if it wants to play such role. Nevertheless, in view of the fact that most major donors are withdrawing from the health sector, chances are small that there will be any funds available to do so.

¹ Georgia Health system review, Tata Chanturidze, Tako Ugulava and others, Health system in transition, vol.11, no.8, 2009, p.82-86, European Observatory