



TERMS OF REFERENCE

**Evaluation of the Subregional level of Technical Cooperation-
Subregional Program Coordination - Caribbean**

Country and Subregional Coordination Office
Pan American Health Organization

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I. Context and Description of the Evaluation

The Office of Caribbean Coordination (OCPC) was established in 1978 in Barbados. Its purpose was the delivery of technical cooperation to Barbados, the nine Organization of Eastern Caribbean States (OECS) and the three French Departments in the Americas (FDAs); coordination of the components of the PAHO subregional program in the Caribbean and provision of requests of direct technical support to other PAHO/WHO Country Offices in the Caribbean.

The process for realignment and reorganization of the OCPC began in 2003 with assessments of the office's responsiveness to the needs of the countries. In particular, it was felt by OECS Member States, that the technical cooperation could be greatly improved with greater presence of PAHO in the countries themselves. In-country presence it was felt, would allow for focused attention on the health challenges with which they were faced. This process coincided with the approval of the 2004 PAHO/WHO Regional Program Budget Policy, which formalized the subregional level of technical cooperation as a functional level within the Organization. It allowed for the redistribution of the CAR budget into a country component and a subregional component.

In 2005, a proposal for the reorganization of the OCPC and an analysis of the administrative and financial implications for the re-organization and realignment of the OCPC prepared by ANU Consulting Services of Antigua were presented. The proposal highlighted the need for a review of business practices, changes in administrative structure, changes in human resources requirements, and increased requirements for remote access to corporate information among other recommendations. The organizational re profiling was completed by HRM in coordination with a Barbados based consulting firm, Caribbean Catalyst Inc.

The division of the OCPC into two offices with a shared corporate administration core in the PAHO Barbados office took effect from 6 October 2006. The expected outcomes of this restructuring excerpted from the ANU Consulting Inc. Report included the following:

- “An enhanced presence by PAHO/WHO at country level, not only quantitatively but also qualitatively. This has the potential to move

PAHO's TC significantly in the direction requested by the Governments of the OECS in general and the Ministers of Health in particular.

- The absorptive capacity at country level as regards the utilization of the TC has the potential for significant improvement. Towards this end, there will be in-country support provided by the National Focal Points and the Country Programme Officers.
- The services at subregional level would be more meaningfully coordinated and thus directed to the areas of need. This would include the CARICOM/PAHO TC programme.
- The partnerships at the wider Caribbean levels would be strengthened through increased advocacy with the lending institutions both regionally and internationally, and bilateral agencies. This in turn could positively impact PAHO's ability to garner extra-budgetary resources for the expansion of its work.”¹

A new Representation or Country Office was established to focus solely on the needs of the ten English-speaking countries and territories of the Eastern Caribbean, as well as the French Departments of the America: Guadeloupe, French Guiana and Martinique. The new Representation, the Office of Eastern Caribbean Countries was headed by a fully accredited PAHO-WHO Representative for Barbados and the Eastern Caribbean Countries.

This development freed the OCPC to focus entirely on the Subregional technical cooperation and to strengthen PAHO's engagement with 'the Caribbean Subregional integration mechanism, the Caribbean Community, CARICOM and its various bodies and organs; and to build synergistic partnerships with the subregional institutions such as the University of the West Indies, the Caribbean Nursing Body and the Caribbean Association of Medical Councils, etc.

PAHO's subregional technical cooperation was to specifically focus on those on those common public health issues, which would benefit from economies of scale and for which agreement on proposed collective responses and actions would produce a far greater impact rather than an individual country response.

It is now over ten years since the restructuring of the OCPC took place. The OCPC which was assigned responsibility for the subregional level of technical cooperation has gone through some changes as a result of greater streamlining within the organization of what the subregional technical cooperation entails. In 2014 the post of Caribbean Program Coordinator which headed the OCPC was

¹ Aymer, Sam R., ANU Consulting Services Towards an enhanced PAHO/WHO Technical Cooperation to Barbados and the Eastern Caribbean: A revised Dispensation, September 2005

reprofiled to that of Subregional Program Coordinator and the office was renamed Subregional Program Coordination-Caribbean (SPC-CRB). It works within the framework of the PAHO/WHO Subregional Cooperation Strategy 2016-2019 which responds to and is aligned to the Caribbean Cooperation in Health, now in its 4th iteration CCHIV. CCHIV is the regional health agenda for joint action for health in the Caribbean. PAHO's Subregional Program Coordination Office is in charge of working with partners at the subregional level including the Caribbean Public Health Agency (CARPHA) and CARICOM. The office continues to share administration with the OECC.

The subregional level works with partners and institutions to support health and development interventions that serve English-speaking countries, as well as Dutch and French-speaking countries in the Caribbean region.

English-speaking Caribbean countries include: Antigua and Barbuda, the Bahamas, Barbados, Belize, Grenada, Jamaica, St. Kitts and Nevis, Saint Lucia, St. Vincent and the Grenadines, Dominica, Guyana, Trinidad and Tobago, Anguilla, Bermuda, British Virgin Islands, Cayman Islands, Montserrat and Turks and Caicos Island.

Dutch speakers include Aruba, Curacao, Saint Maarten, Suriname and the Netherlands Overseas Territories (Bonaire, Saba and Saint Eustatius).

French-speaking areas of the Caribbean include Haiti, French Guiana, Guadeloupe, Martinique and Saint Martin.

II. Overall Purpose of the Evaluation

The purpose of the evaluation is to review the political/strategic, technical/programmatic, and administrative/managerial functioning of the Subregional Program Coordination office and make recommendations for improved operations.

The evaluation intends to support decision making and organizational learning and improvement. The subregional Caribbean office was established much earlier than other newly established subregional offices and its experience may therefore provide valuable insights for other subregions. This evaluation will serve as an example to other subregions (Central America and South America) as it reflects on strengths, weaknesses, best practices and lessons learned.

III. Objectives (Main and Specific)

- Determine the extent to which needs for technical cooperation at the subregional level in the Caribbean are being met effectively and efficiently.
- Review the human resources and determine whether functions match what is needed in the subregion in the context of the Caribbean Cooperation in Health-Phase IV (CCHIV); the PAHO Subregional Cooperation Strategy (SCS) which cover the health and development agenda of the major political integration mechanism in the Caribbean; and the biennial work plan.
- Make recommendations to improve processes, methods and policies for PAHO's work at the subregional level in the Caribbean.

IV. Scope and Timeframe

A comprehensive desk review will include a review of documents covering the historical development leading to the dedicated focus on the subregional level by the OCPC, then SPC-CRB, as of 2006 to analyze the current status of operations at the Subregional level in the Caribbean.

The subregional level of PAHO's Caribbean office focusses on the production of collective subregional-level interventions that contribute to and support the achievements of PAHO/WHO's member states in the Caribbean: Barbados, the Bahamas, Antigua and Barbuda, Belize, Granada, Jamaica, St, Kitts and Nevis, St. Lucia, St Vincent and the Grenadines, Aruba, and Curacao, Haiti, and Guyana (among others). PAHO's subregional office focuses on working with subregional entities to achieve health goals, in particular the office works with CARICOM, and CARPHA.

Services may involve travel to Barbados and other countries of the region to meet with major integration partners (CARPHA and CARICOM) to facilitate analysis of the reach and impact of the Caribbean subregional technical cooperation, and possibly may also involve travel to Washington DC.

The evaluation will examine how the subregional Cooperation office in the Caribbean is functioning by examining: political/strategic,

technical/programmatic, and administrative/managerial dimensions of its operations.

V. *Criteria and Key Evaluation Questions*

This evaluation will review findings on the basis of internationally agreed criteria of efficiency, effectiveness, impact and relevance. The evaluation will respond to key questions related to the three dimensions mentioned above.

1. *How well has the current Subregional Cooperation model operated and how does it contrast to the previous models?*

A. Which model is more effective in terms of advancing subregional and regional health and development priorities? (Technical-programmatic objectives)

B. To what extent does this model overlap with national health and development priorities overseen by PAHO/WHO Representatives in Member States? (Political/strategic dimension)

C. If there is an overlap, how can this be prevented?

2. *Are strategic and programmatic choices for Technical Cooperation aligned with the health needs and priorities of the subregion and its partner institutions (CARICOM, CARPHA, UWI, Financial Institutions eg. CDB etc?)*

A. How responsive is the Subregional Program Coordination to the needs of the major subregional entities addressing health?

B. How effective is the Subregional Program Coordination in achieving outcomes/outputs in the Subregional cooperation strategy?

C. How does the Subregional program coordination contribute to the CARICOM framework for health?

D. How does the subregional program partner with subregional financial institutions?

3. *To what extent does the technical cooperation provided by PAHO in the Caribbean Subregional office achieve desired results?*

A. Would these outcomes have been achieved without the pooling of resources at subregional level?

B. What unintended outcomes were achieved, if any? What key features of the model enhanced or prevented the achievement of desired results as per the Subregional Cooperation Strategy and BWP?

C. What were the results, strengths and weaknesses of the subregional Caribbean Cooperation model?

4. *To what extent are shared functions within PWR-ECC and SPC-CRB, such as pooled procurement, and pooled human and financial resources, contributing to enhanced efficiency and effectiveness of administrative and technical operations? (Administrative/managerial dimension).*

A. Is there any overlap or duplication of administrative, financial or human resource arrangements?

B. Are the administrative, financial or human resource arrangements commensurate with the ECC/SPC office needs?

C. Are there any recommendations for improvement? What best practices or lessons learned may be helpful for other subregional offices?

VI. *Methodology and Data Collection Strategies*

This exercise will require consultations through interviews and surveys with PAHO entities at the country, subregional and regional levels, including CARICOM, CARPHA and other subregional partners.

Evaluators will conduct a SWOT analysis of the political/strategic, technical/programmatic and administrative/managerial functioning of the Subregional Program Coordination Office - Caribbean (SPC-CRB).

Evaluators will complete an analysis of the efficiency and effectiveness in regard to shared administrative functions, for the ECC and SPC.

Evaluators will also conduct a survey with key stakeholders and partners on their perception of the role and impact of the technical cooperation with the SPC-CAR.

Interviews with key stakeholders and partners on their perception of the role and impact of the technical cooperation with the SPC-CRB.

Evaluators will refine the methodology in their inception report.

The Evaluation will follow guidelines by the [WHO Evaluation Practice Handbook](#) and follow the [United Nations Evaluation Group Norms and Standards \(2016\)](#).

VII. *Users of the Evaluation*

The Director, the EXM, the Office of Country and Subregional Coordination, CSC (then Country Support Unit), the Country and

Subregional Coordination, PWRs in Caribbean Country Offices, CARICOM, CARPHA and as well as other subregional entities.

VIII. Evaluation Management Group (or Working Group) and Supervision

The consultant will report directly to the Country Program Advisor, Country and Subregional Coordination and will coordinate with the PWR ECC and the Subregional Program Coordinator- Caribbean.

A working group will advise the Country Program Advisor, Country and Subregional Coordination and will comment on the draft reports.

IX. Evaluator(s) Skills

The evaluator or team leader should have the following qualifications and skills:

A university degree in one of the health or social sciences with a postgraduate degree at the Master's level in public health, political sciences, health administration, international relations or a field related to international public health policy development.

At least ten years of combined national and international experience in the field of public health.

A very good understanding of the health situation of the Caribbean including the epidemiology, governance structures, health systems and services and culture and lifestyle and how this impacts health in the subregion. Specific experience and knowledge of how the PAHO offices located in Barbados function would be an asset.

Previous experience in analyzing managerial approaches, organizational governance and cultures, re profiling and institutional strengthening.

Excellent research and evaluation skills including experience with a variety of evaluation methods and approaches

Excellent written and oral communication skills in English, in particular very strong writing skills.

X. *Submission Requirements*

Interested applicants should submit the following documents:

- a. Curriculum Vitae and a cover letter with an indication of availability, relevance of background and past experience, as well as a technical and financial proposal (expected compensation). The technical proposal shall be brief and explain how the evaluator or team would approach this assignment within the proposed time frame.
- b. Other supporting material including copies of papers or links to previous evaluation reports as well as a brief technical proposal about how they would approach this assignment. Proposal will be submitted according to the instructions included in the RFP document.

Interested applicants should submit a brief proposal to evaluation@paho.org by 26 April 2019.

