Evaluation of projects of telemedicine and e-health network in Cabo Verde for the period 2011–2017 - Summary of final report

The subject of the evaluation are telemedicine and e-health projects provided through development cooperation by the Republic of Slovenia (RS) to Cabo Verde, which form the integrated telemedicine and e-health programme in the country. The objectives of the evaluation are to provide a review and analysis of the project results in the period between 2011 and 2017, to analyse their alignment with the needs of Cabo Verde, on one hand, and Slovenian development cooperation policy, on the other, and to provide recommendations for the development of future policies, projects and activities.

The report finds that Slovenian development cooperation directed €1.3 million of funds to Cabo Verde between 2011-2017 for telemedicine and e-health projects. Project activities addressed the health and education target areas stipulated in the Agreement between the Government of the Republic of Slovenia and the Government of Cabo Verde. While two project phases were planned initially (2011-2014), telemedicine projects were extended for an additional phase on the basis of bilateral satisfaction with the donation. The evaluator considered the three project phases as part of a cohesive telemedicine and e-health programme, as evidenced by the continuity and cohesion of activities throughout the evaluation period.

In general, we find that telemedicine projects financed by Slovenia were successful, effective and efficiently delivered. The telemedicine and e-health projects are found to be fully in line with the national priorities of Cabo Verde and both political leaders and medical professionals are very satisfied with the establishment of the national telemedicine programme. The high priority of the project on the national agenda translated into ownership of the program by all key stakeholders. The telemedicine network is integrated into the healthcare system of Cabo Verde, and the country committed to the project as demonstrated via financing of the national (coordinating) telemedicine centre, provision of adequate space for videoconferences in all telemedicine centre locations, and employment of two full time administrators for telemedicine. These measures, in turn, are key for ensuring sustainability of the national telemedicine programme.

The main outcomes of the projects are the reduction in the number of patient evacuations and necessary transfers to the main hospitals, leading to lower public health costs, and better treatment of patients. Additionally, the telemedicine projects contributed to improving Cabo Verde's medical capacity by training and educating doctors and nurses (via virtual library, video conferencing), positively influencing the quality of care and treatment of patients.

Despite the Republic of Slovenia disposing with relatively low resources for international development cooperation, Slovenia is considered to be an important donor in the recipient country and is recognized as a key partner in developing healthcare capacities. Politically, the Republic of Slovenia enjoys sufficient visibility, a result of clear division of development areas between different donors; indeed, Slovenia is the only financier of telemedicine. Project cooperation has also strengthened bilateral relations between the two countries, paving the way for potential further cooperation in other areas.

At the level of end users, Slovenia's visibility is much lower: because the country does not have proprietary expertise in the field of telemedicine solutions, doctors primarily recognise IVeHF to be the provider of the projects. The projects are also much better aligned with Cabo Verdean strategies (in the field of medicine) than with Slovenian ones (in the area of development cooperation). Namely, we find no
explicit objectives of gender equality, environmental protection, eradication of poverty or protection of human rights; although some effects can be observed, they are secondary to improving quality of healthcare and relieving the national healthcare budget. This can in part be associated with the fact that the cross-cutting objectives of gender equality and environmental protection were incorporated in project designs of international development cooperation only in 2016.

Though the telemedicine programme can be considered a success, we find there to be, after the conclusion of phase III in 2018, a sufficient number of telemedicine centres to cater to the Cabo Verdean population. This, combined with low proprietary telemedicine expertise leading to suboptimal visibility of RS, leads us to recommend to the MFA that it discontinues with financing telemedicine in Cabo Verde. We propose, instead, to divert funding to other areas of cooperation or other developing countries, better in line with Slovenia’s own competitive advantage and specialisation areas.