1. Outline of the Project

**Country:** Republic of Colombia  
**Project Title:** Project for Strengthening the Integral Rehabilitation System for Persons with Disabilities, Especially for Victims of Landmines

**Sector:** Social Security  
**Cooperation Scheme:** Technical cooperation

**Division in Charge:** Social Security Section, Human Development Department  
**Total Cost:** 250 million yen

**Period of Cooperation:** August 2008 – August 2012  
(R/D signage): August 4, 2008

**Partner Country’s Implementation Organizations:**  
Programa Presidencial para la Acción Integral contra Minas Antipersonal (PAICMA); Ministerio de Salud y Protección Social (MSPS); Hospital Universitario del Valle (HUV); Fundación IDEAL (IDEAL); Hospital Universitario San Vicente Fundacino (HUSVF); El Comité de Rehabilitación (COMITE) Department of Health of Valle Prefecture; Department of Health of Antioquia Prefecture

**Supporting Organization in Japan:** National Rehabilitation Center for Persons with Disabilities

**Related Cooperation Scheme:** Grant Assistance for Grass-Roots Human Security Project

1-1 Background of the Project

Colombia has been strewn with many landmines over four decades of civil war between illegal armed entities such as an anti-government insurgent group called Fuerzas Armadas Revolucionarias de Colombia (FARC: “Revolutionary Armed Forces of Colombia”), and the government forces. Ordinary people are frequently victimized by landmines.

Under such circumstances, a major cause of disabilities is landmines. Although the third-level and fourth-level hospitals, where the landmine victims undergo rehabilitation, have rehabilitation personnel of a certain level of quality and quantity such as physiotherapist and occupational therapist, no team approach among the rehabilitation personnel has been adopted. The implementation of adequate rehabilitation is required for improvement of Activities of Daily Living (ADL) for persons with disabilities.

Based on the above, eight C/P organizations including Programa Presidencial para la Acción Integral contra Minas Antipersonal (PAICMA: “Presidential Program for Mine Action”), the Ministry of Health and Social Protection*, the Health Department of Valle del Cauca Prefecture (hereinafter Valle Prefecture) and the Health Department of Antioquia Prefecture and four medical organizations, started the Project for Strengthening the Integral Rehabilitation System for Persons with Disabilities, Especially for Victims of Landmines (hereinafter the “Project”), in August 2008. The project duration is four years and is due to end in August 2012.

(*The government structure changed in November 2011. The Ministry of Social Protection was changed into the Ministry of Health and Social Protection. This summary uses the new name.)

1-2 Project Overview

1) **Overall Goal**

Integrated rehabilitation for persons with disabilities, especially for victims of landmines, is included in the CONPES (Consejo Nacional de Política Económica y Social) No. 80, that is, National Socio-Economic Policy Deliberation Council Document.
(2) Project Purpose
The quality of integrated rehabilitation for persons with disabilities, especially landmine victims, in Valle and Antioquia Prefectures is improved.

(3) Output
Output 1: The capacity of professionals for functional rehabilitation at HUV, IDEAL, HUSVF, COMITE in Valle and Antioquia Prefectures is strengthened.
Output 2: In the four target medical facilities (HUV, IDEAL, HUSVF, COMITE), the guides on amputation rehabilitation and visual impairment rehabilitation are utilized.
Output 3: The Project-related organizations and people in the target areas learn the rights, responsibilities, institutions for persons with disabilities, especially landmine victims, in order to have access to the services that have been stipulated in the laws and regulations.
Output 4: The Project-related organizations* and people in the target areas deepen their knowledge on emergency treatment for victims of landmines before treatment in a medical facility in order to prevent infection and secondary disability.
(*Two among these organizations had their names changed. This summary uses the new names.)

(4) Input
1) Japanese Side
   Expert: Long-Term Experts 4 persons / Short Term Experts 8 persons (gross total)
   Training in Japan: 26 persons
   Equipment: 14.19 million yen
   Local Operation Expenses: 52.33 million yen

2) Colombian Side
   C/P allocation: 14 persons
   Facility / equipment: Office for Japanese Experts (HUV, HUSVF)
   Local Operation Expenses: 847,999,007 Colombia Peso

2. Evaluation Team

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<tr>
<th>Members</th>
<th>Title</th>
<th>Name</th>
<th>Position / Organization</th>
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<tbody>
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Type of Evaluation: Terminal Evaluation
### 3. Results of Evaluation

#### 3-1 Confirmation of Results

#### 3-1-1 Achievement of Outputs

Each of the Outputs has been achieved.

In relation to the Output 1, professional staff members of the four target medical facilities utilize at work the knowledge that they had acquired in the training.

HUV often utilizes the ADL evaluation form. It also uses knowledge on amputation rehabilitation on a daily basis. IDEAL also utilizes knowledge of ADL regularly. HUSVF uses the ADL evaluation form most frequently, and then knowledge of amputation rehabilitation and visual impairment rehabilitation. The situation at COMITE is essentially similar to that at HUSVF. The questionnaire survey on the four target medical facilities shows that 99.6% of the professional staff members use on a day-to-day basis the knowledge that they acquired in the training.

Regarding the Output 2, HUV formulated an amputation rehabilitation guide. HUSVF made visual impairment rehabilitation guides for the totally blind and those with low vision. All the four target medical facilities use the amputation rehabilitation guide, and HUV and HUSVF use the visual impairment rehabilitation guides.

As regards the Output 3, the MSPS and a Long-Term Expert formulated teaching materials for dissemination such as textbook and picture-card show. IDEAL and COMITE, the two NGOs that are C/Ps to the Project, conducted training on the rights and responsibilities of persons with disabilities in the target areas by the cascade method. In the questionnaire survey after the training, 98% of the participants in Valle Prefecture and 82.5% in Antioquia Prefecture answered that they had acquired knowledge on rights, responsibilities and institutions in relation to the services stipulated by laws or regulations for persons with disabilities, especially victims of landmines.

In relation to the Output 4, training on emergency treatment before treatment at a medical facility has been conducted by prefectural budget in each target prefecture. The Antioquia Prefecture health department outsourced the implementation of training to Antioquia University; the Valle Prefecture health department, to a private professional organization called RELIEF. Antioquia University is familiar with medical activities in communities. RELIEF specializes in emergency medical service. The training on dissemination of emergency treatment prior to treatment at a medical facility has been implemented for participants such as nurses, assistant nurses, regional health nurses, stakeholders on transport in local areas, those responsible for public health in local government, community leaders, volunteer firefighters, community youth leaders, and people in charge of the disaster prevention section of local government. Emergency medical personnel and those responsible for dissemination at the local level gave high marks to the Guide for Basic Protocol for Emergency Treatment before Visiting a Medical Facility, this has been used as textbook in the training, as easily understandable. In the questionnaire survey after the training, 79.3% of the participants responded that they had acquired knowledge on the emergency treatment before treatment at a medical facility for persons with disabilities, especially landmine victims.

#### 3-1-2 Achievement of the Project Purpose

The Project Purpose has been achieved.

The professional personnel of the four target medical facilities have a common language among them, set policies on treatment to patients, and undertake rehabilitation as a team. The policies on treatment have been set in a way that respects what the patients want. The goals of treatment have been clearly set, and the rehabilitation process has been made easily understandable for patients. Moreover, the patients’ attitude toward the treatment has changed for the better.
The activities of the Project cover the rehabilitation process from emergency treatment in case of injury by landmines, route for assistance, treatment at a medical facility, and patients’ reintegration into society. Therefore, it is fair to say that the quality of integrated rehabilitation has been improved.

The four target medical facilities disseminate to other medical facilities the knowledge on integrated rehabilitation which has been acquired through training. In addition, according to the questionnaire survey for the four target medical facilities, 97.4% of the patients were satisfied with the medical services they received.

In relation to the Output 3, among the participants in the training on the rights and responsibilities of persons with disabilities, 66.96% of the participants in Valle Prefecture and 76.74% of them in Antioquia Prefecture still disseminate what they learned in the training. Regarding the Output 4, among the participants in the training on emergency treatment before treatment at a medical facility, 85% of them in Valle Prefecture and 58% in Antioquia Prefecture continue to disseminate the knowledge that they acquired in the training.

Thus the indicators set in the PDM have been achieved.

3-2 Summary of Evaluation Results

(1) Relevance

At the time of the Terminal Evaluation, the Project is relevant to the Colombian government’s policies on rehabilitation of and support to landmine victims as well as persons with disabilities. More concretely, the Project is consistent with the United Nations Convention on the Rights of Persons with Disabilities, CONPES No.80 which is the present disability policy, the National Development Plan which has remarks on rehabilitation, and the Law on Victims. The Project also matches Japan’s ODA Country Assistance Policy for Colombia.

The Project meets the needs of the target areas and beneficiaries, and provides guidance on integrated rehabilitation to the four target medical facilities in a concrete fashion.

The cooperation method of dissemination activities is appropriate as a means of project implementation. Given the accumulation of Japan’s experiences in assistance to the same areas, the Project has a competitive advantage. Therefore, the Project has high relevance.

(2) Effectiveness

The effectiveness of the Project is high. The Project has mostly achieved the Outputs, contributing to the achievement of the Project Purpose of “The quality of integrated rehabilitation of persons with disabilities, especially landmine victims, in Valle and Antioquia Prefectures is improved.”

Regarding the effectiveness of the way in which the Project Purpose and the Outputs were set, the Output 1 and the Output 2 are directly related to the Project Purpose in terms of improvement of the quality of integrated rehabilitation. The Output 3 is meant to improve the knowledge of persons with disabilities, including landmine victims, on their rights and responsibilities including access to medical services, so that they can use the services, be rehabilitated toward a way of life that they desire, and get back into society after rehabilitation.

The activities of the Output 4 help improve the quality of integrated rehabilitation by disseminating the knowledge and skills to prevent infection and secondary disability of landmine victims, and minimize the extent of the injury, thereby making the subsequent rehabilitation process smooth.

Therefore, the four Outputs contribute to achieving the Project Purpose of improving the quality of integrated rehabilitation.

(3) Efficiency

The efficiency of the Project is high owing to the content, amount, quality, and duration of the inputs, as well as the achieved Outputs.
The inputs by the Japanese and Colombian sides have been made in a timely manner. The experts were dispatched efficiently. The Chief Advisor was dispatched for two years in the middle period of the Project to build the foundation of the Outputs 1 and 2. Then the Short-Time Experts were dispatched. The C/P organizations formulated teaching materials on rehabilitation based on the module and the textbook that were used in the training in Japan, and disseminated the materials to other organizations and relevant professionals.

The materials for raising awareness on rights and responsibilities were made by utilizing capable local human resources. The training on treatment before visiting medical facilities was delegated to external organizations that were knowledgeable about characteristics of the target areas. Thus, fully utilizing local resources and the cascade method for dissemination made the efficiency of the Project high.

(4) Impact

The impact of the Project is high. The Overall Goal is highly likely to be achieved. Furthermore, the ripple effects of the Project in various areas and levels are evident.

<Possibility of Achievement of the Overall Goal>

At present, there is a CONPES working group in the National System on Disabilities Committees* at the central level. In the working group, the Social Protection Section of the MSPS takes the lead in preparing a draft new CONPES, and trying to have it approved by the cabinet-level deliberation committee. PAICMA is taking part in this undertaking. A new CONPES is highly likely to refer to integrated rehabilitation for landmine victims.

(*A system of formulating, implementing, and monitoring policies on disabilities through a deliberation council or committee on disabilities at the central, prefecture, and local levels in which representatives of relevant organizations take part).

<Other Ripple Effects>

The target areas have been expanded by the Colombian government budget as well as the C/Ps’ high ownership and commitment. Required activities have also been added and implemented. The dissemination for rights and responsibilities of persons with disabilities has invigorated organizations run by such persons. The organizations have begun lobbying for effective disability policy at the local administration level. Moreover, understanding towards persons with disabilities including landmine victims has been enhanced at the local level. Community residents have become more aware of persons with disabilities as well as the rights and responsibilities of such persons.

(5) Sustainability

Whereas the Project’s sustainability in terms of policy is high, institutional, organizational, and financial sustainability face issues to address. Judged comprehensively from the policy, institutional/organizational, financial, and technical aspects, the sustainability is less high.

3-3 Factors That Contributed to the Effects of the Project

(1) Factors Related to Planning

The revision of the Project Design Matrix (PDM) through appropriate management guidance was a major contributing factor to the effects of the Project. The revision made the indicators more concrete, the activities more focused, and each organization’s roles and responsibilities clearer.

HUV and HUSVF joined the Project because they had received Japan’s Grant Assistance for Grass-Roots Human Security for upgrading their facilities prior to the Project.
(2) Factors Related to the Implementation Process
The major factors that have enhanced the efficiency of the Project are the strong commitment and high degree of ownership of the stakeholders. The cooperation of the National Rehabilitation Center for Persons with Disabilities, the Project’s partner organization in Japan, made the training in Japan possible. The training enabled the Project to have effective inputs that suited the progress of its activities. Furthermore, after going back to Colombia, the Colombian trainees disseminated what they had learned in Japan, contributing greatly to the effects of the Project. The training by the cascade method also helped to make the Project effective. Finally, utilizing local resources to the maximum possible extent contributed to good outputs in each activity.

3-4 Problems and Factors That Caused Them

(1) Factors Related to Planning
The project target areas cover two prefectures and the target medical facilities include public hospitals, private hospitals, and NGOs. Thus the attributes, the relationship with the Project, and the extent of involvement in the Project differed by organization. It took many discussions and much time among the parties above to ascertain the progress of the activities and make decisions, especially in the early period of the Project.

(2) Factors Related to the Implementation Process
The size of the rehabilitation facility and the content of treatment varied among the target medical facilities, and it was difficult to have them produce uniform outputs. It was especially time consuming to produce a uniform guide.

3-5 Conclusion
The Outputs and the Project Purpose have been achieved owing to the efforts of the Colombian and Japanese sides.

The relevance of the Project is high. The content of the Project’s cooperation meets the needs of the target areas and is line with the Colombian policies on disabilities and landmine victims as well as Japan’s assistance policy toward Colombia.

The effectiveness of the Project is also high because the Project Purpose and the Outputs have been mostly achieved.

The efficiency of the Project is high. The training in Japan had been effectively implemented, and the C/Ps took initiative in the Project, both of which made the Project efficient in terms of the size of the inputs and the extent of achievement of the Outputs.

The impact of the Project is high because the Overall Goal is highly likely to be achieved and the ripple effects of the Project are evident in disability policies at the local level, change in people’s awareness towards persons with disabilities, as well as attitudes of persons with disabilities themselves.

Such high level of achievement in spite of the presence of many C/Ps is mainly because of the high ownership and commitment of the Colombian side.

The Project’s sustainability will be more secure if a strategy on integrated rehabilitation is implemented as a concrete policy and the system to promote the project activities is strengthened in the institutional and financial aspects.

3-6 Recommendations
(1) To make integrated rehabilitation well established, the regulations of medical service remuneration (Plan Obligatorio de Salud: POS) must cover all the treatment items of integrated rehabilitation. Then the integrated rehabilitation model must be introduced nationwide. The
stakeholders of the Project need to push the Colombian government to implement the actions above.

(2) At the four target medical facilities, it is necessary to set up a database on rehabilitation services, accumulate evidence on treatment and rehabilitation of persons with disabilities, and systematize research activities and practices.

(3) It is essential to incorporate the concept of integrated rehabilitation in the curricula of educational institutions that nurture rehabilitation professionals.

(4) The ADL evaluation form for children is needed in the near future although it was not part of the scope of the Project.

(5) Cooperation among the stakeholders of the Project is a key to establish and promote integrated rehabilitation.

(6) Relevant organizations must maintain and strengthen the monitoring system on the project activities in order to continue them.

(7) The next CONPES on the national disability policy must incorporate descriptions on integrated rehabilitation for persons with disabilities, especially landmines victims.

3-7 Lessons Learned
In order to nurture a high level of ownership in C/P organizations, it is essential to encourage them to be independent and take initiative rather than lead them. If there is any problem, the Japanese side must look into its cause and background together with the C/P organizations.