



DEFRA Animal Health Systems Strengthening Project External Review

Final Report

Date: April 2025

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Disclaimer

The views expressed in this report are those of the evaluators. They do not necessarily represent those of the funder, Defra, or of any individuals and organisations referred to in the report.

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List of acronyms

AHSS	Animal Health Systems Strengthening
ALB	Arm's-Length Bodies
AMR	Antimicrobial resistance
APHA	Animal & Plant Health Agency
APHW	Animal & Plant Health & Welfare Directorate
BTOR	Back to office report
Cefas	Centre for Environment Fisheries & Aquaculture Science
DAC	Development Assistance Committee
DEFRA	Department for Environment Food and Rural Affairs
DSA	Daily subsistence allowance
FAO	The Food and Agriculture Organization
FCDO	Foreign, Commonwealth and Development Office
GAH	Global Animal Health
GESI	gender equity and social inclusion
HMG	His Majesty's Government
HPAI	Highly Pathogenic Avian Influenza
ICF	International Climate Finance
IHR	International Health Regulations
ISAVET	In-Service Applied Veterinary Epidemiology Training
JPM	Joint Planning Meeting
KI	Key informant
KII	Key informant interview
LMICs	Low- and middle-income countries
MEL	Monitoring, evaluation and learning
MoU	Memorandum of understanding
ODA	Official Development Assistance
OECD	Organisation for Economic Co-operation and Development
OPM	Oxford Policy Management

PT	Proficiency test
QMS	Quality management system
RAG	Red, Amber, or Green
RQ	Review Question
SOP	Standard operating procedure
ToC	Theory of Change
ToR	Terms of Reference
UKHSA	UK Health Security Agency
VfM	Value for Money
VMD	Veterinary Medicines Directorate

Executive Summary

The Animal Health Systems Strengthening (AHSS) project is a £4.9 million project funded by Official Development Assistance (ODA) through the Department for Environment, Food and Rural Affairs (DEFRA). It is delivered in partnership with DEFRA Arm's-Length Bodies (ALBs); the Animal & Plant Health Agency (APHA), Veterinary Medicines Directorate (VMD), and Centre for Environment, Fisheries & Aquaculture Science (Cefas), supported by small, resident, country-based teams. It aims to work with Responsible Authorities in Low- and Middle-Income Countries (LMICs) through bilateral technical assistance to strengthen capabilities and build resilient animal health systems. The project began in April 2022 and is approaching the end of its third year, with ongoing operations in Ghana, Zambia, and The Gambia.

ITAD has been commissioned to conduct a rapid review to:

- Assess the design, implementation and emerging results of the project to strengthen accountability and inform the next comprehensive spending review; and
- Generate learnings to inform the design and implementation of the next phase of the project.

To meet these objectives and deliver timely evidence for both the spending review and Phase 2 decision-making, our assessment has taken the form of a rapid review rather than a full evaluation. The review has been structured around three analytical modules; right things; right ways and right results, with Zambia and Ghana prioritised as focal countries for case studies due to their implementation stages and significant budget allocation compared to The Gambia. In Nigeria, the project has been halted and was therefore not included in the review¹.

- **Right Things:** This module addresses the relevance, coherence and alignment of AHSS project activities.
- **Right Ways:** This module focusses on how effectively and efficiently implementation occurs, examining enablers/barriers to success, sustainability of, and overall value for money of project interventions.
- **Right Results:** This module focusses on early results and whether the envisioned outputs have been achieved.

Core and sub-review questions (RQs) were agreed with DEFRA in the review protocol. Data collection methods were intended to be similar across both countries with some contextual nuance required to suit the implementation model on the ground and the stakeholders engaged. Data for the case studies was collected primarily through documentation and data reviews and key informant interviews (KIIs).

In addition to the country case studies, cross-cutting (i.e. project-level) data was collected to support RQs across all three modules. Similarly to the country case studies, cross-cutting data collection involved documentation, data review and KIIs.

Data analysis methods varied per module and was guided by the corresponding core and sub-RQs, whilst strength of evidence was assessed using the criteria outlined in Table 1.

Conclusions

Right Things

Core RQ1 – Internal and External Coherence: The AHSS project aligns well with His Majesty's Government (HMG) and DEFRA internal and national objectives and partner country priorities, with efforts to avoid duplication. Defra's Oversight Board helps maintain strategic alignment, but

¹ Nigeria was also a focal country in Year 1 but activities were halted in year 2 due to Nigeria's security situation and complex operating environment.

a lack of systematic policy review risks misalignment. A small number of stakeholders feel the project is not fully aligned with DEFRA's international priorities, but this may improve with a shift to 100% International Climate Finance (ICF) funding. Country ownership needs strengthening through political commitment and funding for sustainability.

Core RQ2 – Project Design: World Organisation for Animal Health (WOAH) Performance of Veterinary Services (PVS) Pathway reports provide a technical evidence base, but there's limited use of broader evidence on health system strengthening and health security by the AHSS Project. Key intersections with health security concerns are not well integrated. Resourcing constraints, current partner absorptive capacity, and existing competent authority capacity limit scalability. Addressing these barriers is crucial for effective scale-up.

Right Ways

Core RQ3 – Delivery Effectiveness and Efficiency: The technical expertise of ALB staff and the local network of Country-based staff support project delivery. Beneficiaries are satisfied, especially with training, but internal stakeholders see room for efficiency improvements. Joint planning and coordination with donors enhance delivery, but communication, coordination, human resources, and financial processes pose barriers, causing delays and inefficiencies.

Core RQ4 – Value for Money (VfM): VfM is not well understood or considered across the project, hindering effective monitoring and assessment of economy, efficiency, effectiveness, and equity. A lack of a project-wide strategy for VfM limits improvements in these areas.

Right Results

Core RQ5 – Achievement of Outputs: Gaps in the monitoring, evaluation and learning (MEL) system make tracking progress challenging. While output-level results appear to have been achieved, technical issues and lack of a project logframe complicate interpretation. Barriers such as partner absorptive capacity, infrastructure deficits, and varying government commitment impede results and sustainability. There is no sustainability or exit strategy, risking long-term impact.

Core RQ6 – Mechanisms for Learning: Learning and adaptation systems are not well embedded, with few formal mechanisms and limited evidence of actioning lessons learned. Without regular feedback processes, the project's ability to adapt and learn is restricted.

Recommendations

1. Strengthen the evidence base for the AHSS project design.
2. Identify barriers and enablers to both the delivery of the project and the achievement of results. This should be accompanied by the identification of necessary mitigation measures.
3. Clarify roles, responsibilities and remits, alongside the consideration of an appropriate resourcing model to enable efficient and effective delivery.
4. Strengthen internal mechanisms for communication, collaboration and coordination.
5. Continue to build upon coordination mechanisms in-country and internationally.
6. Address existing gaps in the MEL system to ensure it is able to robustly monitor and document results and facilitate project learning.
7. Strengthen the understanding, monitoring and reporting of VfM across the project.
8. Consider developing a sustainability strategy for the project.

1. Introduction

This section provides an overview of the key elements of the review. It covers the background of the project and its Theory of Change (ToC), and the project's current implementation status. It also outlines the purpose, objectives, scope, and timeline of the review, and sets out the key questions that will guide the review.

1.1. Background

The Animal Health Systems Strengthening (AHSS) project aims to work with Responsible Authorities in Low- and Middle-Income Countries (LMICs) through bilateral technical assistance to build resilient health systems by strengthening capabilities in animal health systems, based on a One Health, all-hazards, system strengthening approach. The aim is to enhance the ability of countries to protect from, detect and respond to, known and emerging diseases; improve food security through stronger, healthier and more productive animals; improve livelihoods; and enhance global health security.

The DEFRA AHSS project is a £4.9m ODA funded project and managed by DEFRA's Global Animal Health (GAH) Division, the ODA Project Management Office (PMO) Team, which is a sub-team of DEFRA's Animal & Plant Health & Welfare Directorate (APHW). It has been delivered in partnership with DEFRA Arm's-Length Bodies (ALBs), which include the Animal & Plant Health Agency (APHA), Veterinary Medicines Directorate (VMD), and Centre for Environment Fisheries & Aquaculture Science (Cefas).

Focussing on both terrestrial and aquatic animal health, the project has been operating in the following focal countries: Ghana, Nigeria, The Gambia and Zambia. Visiting technical experts from DEFRA's ALBs are supported by small resident country-based teams.

The specific objectives are:

- To enhance biosafety and biosecurity through improved veterinary terrestrial and aquatic animal health services, laboratory quality management systems and disease surveillance capabilities to reduce the frequency and impact of animal disease outbreaks and minimise the risk of disease emergence and transmission.
- To enable rapid and effective emergency response to animal disease outbreaks, thus reducing the risk of spillover of animal pathogens into the human population, by developing early warning systems and strengthening intersectoral collaboration of animal and public health systems.
- To improve livelihoods of livestock keepers by reducing losses attributable to disease through strengthened animal health services.
- To tackle gender equity and social equity in veterinary services by ensuring women and other marginalised groups are fairly represented as beneficiaries and in the facilitation and participation of training and development.

1.1.1. Theory of Change

As outlined in the project's ToC, the AHSS project aims to improve animal health systems, particularly for smallholder farmers and vulnerable groups like women, through a One Health approach. Project interventions strengthen veterinary services to better prevent, detect, and respond to diseases, including zoonoses, by focussing on improving surveillance, laboratory capacity, antimicrobial resistance (AMR) management, and emergency preparedness in sectors like aquaculture and apiculture.

Key outputs include enhancing national laboratory systems, building emergency response capacity, and improving veterinary competencies to strengthen regulation and coordination at all levels. By delivering these outputs, the project seeks to build stronger, more resilient animal health systems, at intermediate outcome level. In the longer term, this will enhance global

health security and improve animal production. Ultimately, the project intends to impact the lives of vulnerable populations, particularly smallholder farmers and women, reducing poverty by strengthening livelihoods, increasing food security, and lowering the incidence of zoonotic disease.

1.1.2. Implementation status/timeline

Below is a summary of the implementation timeline of the project, which countries it has operated in over the years and the current implementation status at the time of this review.

- **Year 1 (April 2022 – March 2023):** The project commenced in Ghana, Zambia, and Nigeria, focussing on and building critical partnerships. Landscape reviews and scoping visits were successfully conducted in Ghana, Zambia and Nigeria. These focussed on understanding the landscape, design and development, and building critical partnerships.
- **Year 2 (April 2023 – March 2024):** In response to a request to tackle a novel outbreak of Highly Pathogenic Avian Influenza (HPAI), The Gambia was added as a focal country in June 2023. Due to Nigeria's security situation and complex operating environment, the project decided to pause activities in Nigeria and focused on implementation in Ghana, Zambia, and The Gambia, which all commenced in Year 2.
- **Year 3 (April 2024 – Present):** At the time of this review, the project is active in Ghana, Zambia, and The Gambia. However, due to a phased approach, implementation in Zambia started later, with activities beginning in November 2023, midway through Year 2.

1.2. Review purpose and objectives

The overarching objectives for this project review, which is both summative and formative in nature, are to:

- Assess the design, implementation and emerging results of the project to strengthen accountability and inform the next comprehensive spending review; and
- Generate learnings to inform the design and implementation of the next phase of the project.

The summative aspect of the review will 'look back' at project performance so far, assessing design and implementation and progress towards intended outputs in the Animal Health Systems Strengthening (AHSS) Project ToC, whilst generating learnings on the project's delivery model and partnership approach. The formative aspect of the review will 'look forward' and provide insights for adapting and improving project design and implementation to maximise results and value for money (VfM) as the AHSS project moves into the next phase of delivery.

1.3. Scope and timeline

To meet these objectives and deliver timely evidence for both the spending review and Phase 2 decision-making, our assessment has taken the form of a rapid review rather than a full evaluation. This decision reflects the limited timeframe and the early stage of project implementation. The approach taken was proportionate to the resources available, and, in agreement with DEFRA. Zambia and Ghana were prioritised as focal countries for case studies due to their advanced implementation stages and significant budget allocation compared to The Gambia. In Nigeria, the project had been halted.

The review has been conducted against the original business case and ToC. Subsequently, the project has undergone a substantial re-design, pivoting to ensure alignment to International Climate Finance (ICF) requirements as its assessed funding contribution shifted from 0% to 100% ICF funding. Corresponding revisions to the business case and ToC were made concurrently to the review (see more in the limitations section 2.2).

1.4. Review questions

Core and sub-review questions (RQs) for the review were agreed with DEFRA in the review protocol.²

- **To what extent does the AHSS project demonstrate internal and external coherence?**
 - 1.1. To what extent is the AHSS project aligned with both DEFRA and HMG priorities and projects?
 - 1.2. To what extent is the AHSS project aligned with its partner countries' national government priorities?
 - 1.3. To what extent do partner countries take ownership of joint activities and what is their commitment to continuing project activities in the short and medium term?
- **To what extent is the AHSS project designed in an appropriate way to deliver its objectives?**
 - 2.1 What is the theoretical basis of project design?
 - 2.2. What would be required (from a design perspective) to enable project scale-up?
 - 2.3. To what extent is the AHSS project's partnership approach fit for purpose (with both internal and external partners)?
- **To what extent have AHSS activities been delivered effectively and efficiently?**
 - 3.1. What have been the enablers and barriers (internal and external) to effective and efficient delivery across the different delivery contexts?
 - 3.2. What are the strengths and challenges of the delivery model (in Zambia and Ghana)?
 - 3.3. How does the project's resourcing model impact delivery?
- **To what extent does the AHSS project have systems and processes to ensure value for money?**
 - 4.1. What is a best fit approach to ongoing monitoring of value for money?
- **To what extent has AHSS achieved its intended outputs?**
 - 5.1. What are the enablers and barriers to achieving results?
 - 5.2. To what extent has the project's animal health influencing and advocacy activities contributed to the achievement of project goals, and what key lessons have been learned from this approach?
- **What are the key lessons learned from phase 1 to ensure future progress towards results?**
 - 6.1 To what extent are mechanisms for real time learning harnessed?
 - 6.2 What are the effective mechanisms to facilitating learning both internally with the AHSS project and externally with partners?
 - 6.3 To what extent have learnings identified by the AHSS project been actioned thus far?

It is important to note that, as our understanding of the project evolved, so did the structure and framing of these RQs. Core RQs not only guided the review but also served as overarching questions, summarising insights from their corresponding sub-RQs. In some cases, core RQs were inherently answered through their sub-RQs. As a result, while each sub-RQ is addressed individually, some core RQs are primarily discussed in the conclusions section.

² The review protocol was approved by DEFRA on 6th November, prior to the evaluators commencing data collection.

2. Approach and Methodology

The review was guided by four core principles: grounding in theory (using the AHSS Theory of Change and OECD-DAC criteria), a utilisation-focused approach aimed at informing future phases, agility to respond to time and contextual constraints, and a commitment to equity and inclusion in stakeholder engagement.

It was structured around three analytical modules:

- **Module 1- Right Things [RQ 1&2]** (Relevance and Coherence): examining the appropriateness and strategic alignment of AHSS activities.
- **Module 2- Right Ways [RQ 3&4]** (Implementation and Value for Money): assessing delivery quality and enablers/barriers in Zambia and Ghana.
- **Module 3-Right Results [RQ 5&6]** (Effectiveness and Early Results): identifying early achievements and lessons for future implementation.

The review combined country case studies in Ghana and Zambia with cross-cutting project-level analysis, drawing on key informant interviews and document/data review. A rubric-based assessment was used to structure analysis across relevance, coherence, VfM, and emerging results.

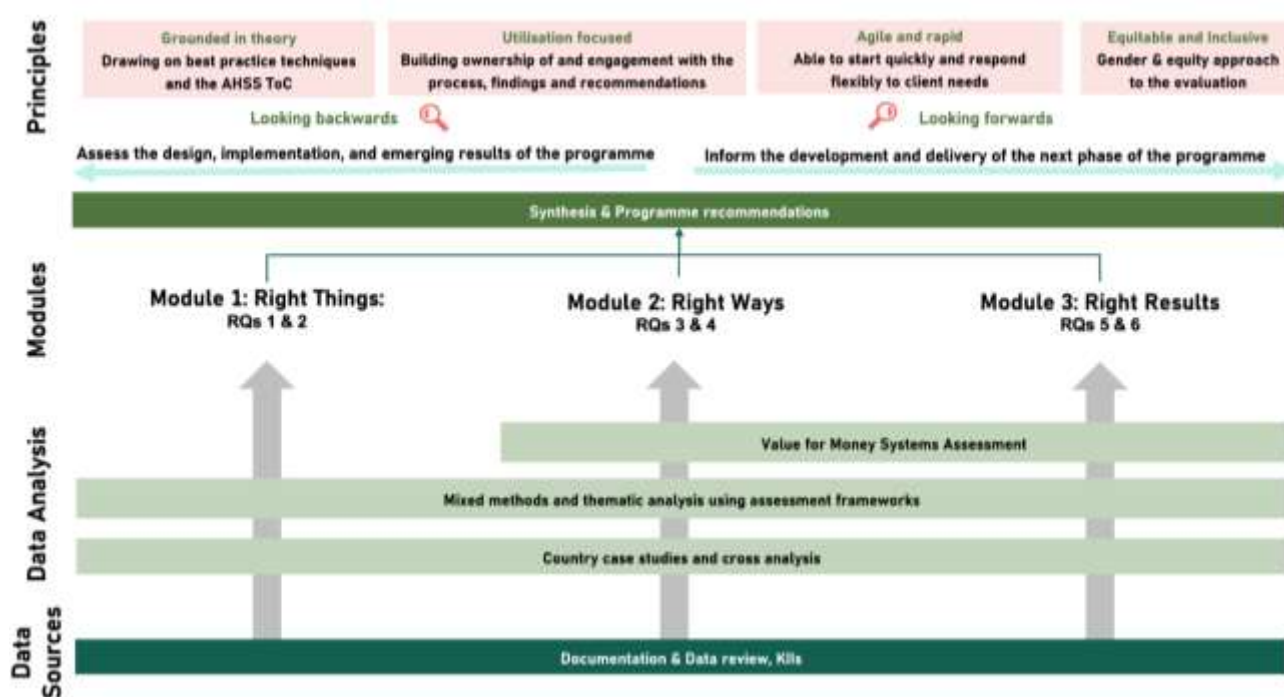


Figure 1: AHSS Project External Review Approach

2.1. Analysis

Data were analysed per module, guided by the core and sub-RQs, using assessment frameworks. Sources included document reviews and KIIs, which were coded and synthesised to identify emerging themes and generate module- and project-level findings. Strength of evidence for each finding was assessed using the criteria in Table 1, ensuring all conclusions and recommendations are based on sufficiently triangulated³ evidence.

³ Triangulation refers to a process of using data from different sources to ensure consistency and strengthen the validity of findings.

Table 1: Framework scoring criteria

Rank	Performance	Strength of evidence ⁴
1	HIGH Evidence that all criteria have been met.	HIGH Evidence comprises multiple data sources, both internal, such as AHSS documentation and external (at least two data sources, such as more than two KIIs from different stakeholder groups) which are of good quality
2	MEDIUM Evidence that most criteria have been met or there have been measures taken to meet all criteria in the near future	MEDIUM Evidence comprises multiple data sources (good triangulation) of lesser quality, or the finding is supported by fewer data sources (limited triangulation for example, only one KII in one stakeholder group) of decent quality
3	LOW Evidence that few criteria have been met or there have been measures taken to meet some criteria	LOW Evidence comprises few data sources across limited stakeholder groups (limited triangulation) and is perception-based or based on data sources that are viewed as being of lesser quality.
4	VERY LOW No evidence that criteria have been met	VERY LOW Evidence comprises very limited evidence (single source) or incomplete/unreliable data. Additional evidence should be sought.

2.2. Limitations

As referenced in the full methodology, the approach outlined has been deemed the most appropriate given the time and resource available, and the stage of implementation of the AHSS programme. As such, there are several limitations that must be acknowledged:

- Original plans to draw on methodologies from theory-based evaluations (such as contribution analysis) were deemed inappropriate due to the nature (pace, resource, implementation phase) of the review and the level of detail (including assumptions) in the programme ToC. We will therefore focus on output-level change and be unable to evidence higher-level change at outcome and impact levels (as per the AHSS programme ToC).
- The scope of the review is limited to the original business case and ToC. It does not incorporate the impending change in funding structure to 100% ICF funding and associated revisions of the business case and ToC, both of which are currently under development.
- Country case studies were limited to Ghana and Zambia based on the resources available for the review, our understanding of the programme funding profile, implementation timelines, and feedback from the AHSS project team. We are aware that the AHSS project also currently implements a smaller suite of activities in The Gambia and formerly

⁴ Where relevant, we have also considered an absence of evidence for certain criteria as 'high', for example if there is no mention of it in any documents reviewed or KIIs.

implemented activities in Nigeria. Therefore, limiting our case studies to Ghana and Zambia means we may miss additional findings and learnings which could have been derived from assessing additional countries.

- At the request of the project, KII guides were shared prior to interviews with the DEFRA Programme Manager and the MEL Officer/Ghana project officer to enable them to check for contextual nuance. However, these were then further disseminated to stakeholders in Ghana, but not Zambia, potentially influencing how Ghanaian informants prepared for and responded to interview questions. During the evaluation, it became apparent that Ghanaian stakeholders had also been provided with a PowerPoint slide deck outlining key achievements and results of the project which was observed being referred to by participants during interviews. This likely introduced bias, reduced objectivity, and impacted data credibility, as key informants may have aligned their responses with the information provided. The extent of this influence remains unclear, as it is unknown how many participants received the information prior to interview. Consequently, the strength of evidence for Ghana-specific findings is less certain.

2.3. Ethics and Safeguarding

Ethics and safeguarding are central to protecting the well-being of review participants, and the team adhered to Itad's policies and procedures to maintain high ethical standards. The team followed safeguarding protocols and ensured that all participants were 18 or older and that interviews with minors did not take place. Informed consent was secured by providing participants with clear information on the review's purpose, methods, risks, benefits, and the voluntary nature of their involvement. Confidentiality was upheld, with steps taken to ensure information could not be traced back to individuals, and these measures were explained through information sheets and consent scripts. All personal data collected has been anonymised before sharing with Defra in this report and will be destroyed at the end of the contract in line with relevant data retention requirements.


Participants were not compensated, and this was clearly communicated from the outset. To minimise bias and promote open discussion, AHSS programme representatives were not present during any key informant interviews.

3. Findings

This section presents the findings from the AHSS Project Review, organised by module. Each RQ is addressed individually, though in some cases, responses to multiple RQs are combined where appropriate. Our approach for addressing each RQ is detailed before the corresponding set of findings. Key headline findings are summarised in tables for each review module to provide a clear and concise overview to the reader.

3.1. Right Things

Table 2: Headline findings for Right Things module 1 with corresponding strength of evidence

	Right Things Module 1: Key Findings	Strength of evidence
Alignment, coherence and country-ownership	Finding 1. The AHSS project demonstrates strong internal coherence with both DEFRA and HMG objectives, with clear alignment across its key documents and governance structures.	High
	Finding 2. Stakeholders perceive AHSS activities to be broadly aligned with national priorities, supported by both country planning documents and mechanisms to maintain coordination, although some misalignment was noted due to the limitations of a technical assistance-only funding model.	Medium
	Finding 3. The extent to which AHSS duplicates or overlaps with other programmes is unclear. However, evidence suggest efforts have been made to minimise duplication risks amongst delivery partners and donors in both Ghana and Zambia.	Medium
	Finding 4. Stakeholders have varying perceptions of the extent to which AHSS project partner countries take ownership of joint activities and demonstrate commitment to sustaining them in the medium term.	Medium
Programme design and scale-up	Finding 5. The AHSS project design is primarily based on the PVS Pathway Reports, used to identify gaps in veterinary services, but wider use of evidence around best-practice (relating to health system strengthening) is limited. Additionally, considerations around how animal health intersects with public health and health security concerns of the country do not appear to have been well integrated	High
	Finding 6. Whilst project documentation suggests a flexible and responsive approach to changing internal and external priorities, in practice the systems and processes to enable this are not in place.	Medium
	Finding 7. Partnerships are governed by clear MoUs and ToRs which are operationalised as intended. However, mechanisms for feedback and reflection are intermittent and not always formalised.	Medium
	Finding 8. There are limitations with the current delivery model which impede the ability to scale-up (see finding 17-18), and a lack of internal clarity on what scale-up would look like in practice.	Medium

3.1.1. Core RQ1: To what extent does the AHSS project demonstrate internal and external coherence?

Approach

This Core RQ focusses on the coherence of the AHSS Project, both internally across DEFRA and HMG and externally with its partners in partner countries. We have explored core RQ1 and sub-RQs 1.1 and 1.2 (focussed on coherence) with an assessment framework that draws on the DAC definition of coherence⁵. This involves examining both internal coherence (considering the synergies and interlinkages between the intervention and other interventions carried out by the same institution/government, as well as the consistency of the intervention with the relevant international norms and standards to which that institution/government adheres) and external coherence (considering the consistency of the intervention with other actors' interventions in the same context). This includes complementarity, harmonisation and coordination with others, and the extent to which the intervention is adding value while avoiding duplication of effort.

Findings

Internal Coherence

Finding 1 (High Strength of Evidence). The AHSS project demonstrates strong internal coherence with both DEFRA and HMG objectives, with clear alignment across its key documents and governance structures. Its business case, ToC, and delivery workplans consistently reflect HMG priorities, particularly in animal health sector and the One Health approach. These documents reference key government strategies and frameworks, ensuring integration within broader policies. The project also supports DEFRA's Priority Outcome 4 (PO4), which focusses on sustainability, resilience, biosecurity, and animal welfare. Interviews with HMG stakeholders further reinforce this alignment, confirming that the AHSS Project is structured to complement existing policies.

To maintain this alignment, the AHSS Project engages in structured cross-HMG collaboration. The Oversight Board, which includes representatives from Foreign, Commonwealth and Development Office (FCDO), UK Health Security Agency (UKHSA), and Department of Health and Social Care, plays a key role in coordinating efforts across departments. Regular cross-Whitehall meetings further facilitate knowledge sharing and integration with other One Health-related teams. These governance mechanisms help ensure that the project remains strategically aligned and responsive to wider government objectives.

We found little evidence of duplication between AHSS activities and other HMG programmes, suggesting that these structured processes are effective in ensuring coherence and alignment. However, the project lacks evidence of an annual systematic process to review and incorporate any changes to HMG policies, which may limit its continued alignment. Some stakeholders also note that DEFRA's international priorities, which focus more on climate change, nature, and biodiversity, do not fully align with AHSS objectives.

External Coherence

Finding 2 (Medium Strength of Evidence). Stakeholders perceive AHSS activities to be broadly aligned with national priorities, supported by both country planning documents and mechanisms to maintain coordination, although some misalignment was noted due to the limitations of a technical assistance-only funding model.

Stakeholders across countries report that AHSS activities align with their national priorities and organisational objectives, particularly by addressing critical gaps in animal health systems. Although country-specific plans were not referenced in the original business case (as countries

⁵ https://www.oecd-ilibrary.org/sites/543e84ed-en/1/3/4/index.html?itemId=/content/publication/543e84ed-en&_csp_535d2f2a848b7727d35502d7f36e4885&itemI60=oe&itemContentTypes=book#chapter-d1e2438

of operation had not been selected at that stage), subsequent documents—including GAP analyses and scoping visit BTORs—refer to key national strategies such as One Health National Action Plans, Ghana’s One Health Zoonotic Disease Prioritisation for Multisectoral Engagement, and Zambia’s National Aquatic Animal Health Strategy. Stakeholders also described how AHSS has adapted planned activities to meet evolving national priorities, with changes reflected in updated workplans.

Multiple mechanisms have been used to maintain alignment of the programme with national priorities. Scoping discussions during the design phase with the Veterinary Services Directorate (Ghana) and the Department of Veterinary Services (Zambia) aimed to ensure alignment from the outset. In Zambia, a technical focal person’s group was established to support joint planning and coordination with government stakeholders. Although Ghana does not have a formal equivalent, joint planning with technical staff has also been reported there. Across both countries, stakeholders positively highlighted AHSS’s responsiveness to local needs and the technical focus of activities.

However, some stakeholders noted a perceived misalignment with broader national priorities, linked to the limitations of AHSS’s delivery model, which provides technical assistance but no direct funding. For some, direct funding was seen as a prerequisite to effectively implementing technical assistance, and its absence was cited as a constraint on full alignment with national priorities.

“Yes, it’s actually addressing a real need in Ghana, because let’s take it like this. We all know that over 70% of the emerging diseases now are more zoonotic, right? And the human health system is developed compared to the animal health system. There has been a big gap that we’ve experienced, and it came to the point that we have to step in, and the government also needed that support to lift up the animal health system.”

“The project team [that] is always here, meeting our director. They also pass through this office after meeting the directors, they come here, they ask us, “What else, what should be done?” I remember having a lot of input.”

Finding 3 (Medium Strength of Evidence). The extent to which AHSS duplicates or overlaps with other programmes is unclear. However, evidence suggest efforts have been made to minimise duplication risks amongst delivery partners and donors in both Ghana and Zambia. There are several organisations delivering animal health system strengthening related activities in both Ghana and Zambia, most notably the Food and Agriculture Organization (FAO) who deliver similar activities to those of the AHSS project. Some stakeholders report known duplication of efforts and challenges with partner transparency (although specific examples were not provided). Others disagree and report that, whilst the risk of duplication is there, they recognise recent efforts by the AHSS project staff, government stakeholders and other donors to coordinate delivery.

Joint planning and in some instances co-delivery with FAO have proven a successful way amongst stakeholders to minimise duplication. For example, in Zambia coordination between FAO and AHSS has led to delivery of DHIS2 training by both partners in different provinces. In Ghana, there were examples of co-delivery or co-funding with FAO. For instance, AHSS sponsored five individuals to attend the In-Service Applied Veterinary Epidemiology Training (ISAVET) led by FAO.

In June 2024, the Ghana AHSS team mapped out the development partners within the animal health space and set up the Ghana Animal Health Development Partners Platform to coordinate the support that the VSD receives from development partners, mitigate duplication and promote a coordinated response to the VSD plan. Similarly in Zambia, the national focal point group is another opportunity, although not including other development partners, to coordinate activities that are happening across government with other donors.

In addition to the AHSS Project initiatives described above, stakeholders in both Ghana and Zambia provided examples of multisectoral stakeholder meetings that exist for partner coordination. However, to what extent these meetings are attended and utilised was not explored in this review. These meetings include the Global Health Security subgroup and One Health coordination/technical working groups in both Ghana and Zambia and the health coordinating partners meeting in Zambia.

“Generally, we’re OK on donor coordination. We have about a dozen formal development partner working groups that have Government of Ghana representation. And then we have another bunch of informal ones without Government of Ghana representation.”

3.1.2. Sub-RQ 1.3: To what extent do partner countries take ownership of joint activities and what is their commitment to continuing project activities in the short and medium term?

Approach

This RQ focusses on country ownership, which has been considered as government and local stakeholders being actively involved in the planning, implementation, and monitoring of AHSS activities and their commitment to allocate resources, establish supportive policies, and take responsibility for sustaining and scaling the initiatives over the long term. This RQ has been explored using perceptions of stakeholders as national government level documentation was not reviewed as part of this review.

Findings

Finding 4 (Medium Strength of Evidence). Stakeholders have varying perceptions of the extent to which AHSS project partner countries take ownership of joint activities and demonstrate commitment to sustaining them in the medium term. While the project’s design, which involves delivering activities in partnership with local government technical staff (including some ALB’s using train-the-trainer approaches) and the presence of country-based teams, theoretically supports country ownership, the “fly-in, fly-out” approach of ALB staff providing TA support, government prioritisation of animal health, and local absorptive capacity can disrupt momentum between visits. Stakeholders questioned government commitment to animal health in a context where resources are constrained, and human health takes precedence. This impacts ownership of activities with key stakeholders, particularly in the long-term. Overall country ‘ownership’ at this stage is concerned with collaboration on activities rather than full government ownership to secure sustainable results.

To mitigate these challenges the AHSS Ghana team is making efforts to integrate activities into national budgets with action plans to ensure local ownership. Notwithstanding these mitigating steps, concerns remain on the sustainability of the work without AHSS funding, primarily due to a lack of national funding, echoing finding 34 (sub RQ5.1).

3.1.3. Core RQ2: To what extent is the AHSS project designed in an appropriate way to deliver its objectives?

Approach

This core RQ focusses on the relevance of the AHSS Project design and if it is fit for purpose to achieve its objectives. The assessment framework addresses RQ2 and is guided by the DAC definition of relevance⁶, assessing whether the intervention’s design and objectives adequately respond to the needs of partners and beneficiaries. It specifically answers sub-RQ2.1 (*What is*

⁶ https://www.oecd-ilibrary.org/sites/543e84ed-en/1/3/4/index.html?itemId=/content/publication/543e84ed-en&_csp_=535d2f2a848b7727d35502d7f36e4885&itemIGO=oecd&itemContentType=book#section-d1e2474

the theoretical basis of project design?) and sub-2.3 (To what extent is the AHSS project's partnership approach fit for purpose, both internally and externally?).

Findings

Finding 5 (High Strength of Evidence). The AHSS project design is primarily based on the PVS Pathway Reports, used to identify gaps in veterinary services, but wider use of evidence around best-practice (relating to health system strengthening) is limited. Additionally, considerations around how animal health intersects with public health and health security concerns of the country do not appear to have been well integrated. Stakeholders believe the PVS Pathway Reports to be appropriate and relevant as the basis of design, despite the PVS Gap Analysis in Ghana being conducted in 2011. Zambia had a PVS Follow-Up report in 2023 and so this is more recent. Opinions regarding relevance did not vary according to country.

The use of evidence on best-practice from wider health systems strengthening, capacity building and overseas technical assistance literature is limited and has not been systematically integrated into the project design. Use of evidence in design centres on technical focus areas and/or activities, with consideration of best practice. Some stakeholders reported several informal discussions regarding appropriate approaches between colleagues with experience of delivering training in these contexts, but there was no systematic review.

Whilst the Joint External Evaluation was mentioned during KIs in the context of One Health it was not frequently referenced. There was little evidence to suggest best-practice approaches to health system strengthening, global health security and other relevant development programming methodologies were integrated within the design or the ToC. There is no mechanism for reviewing evidence around best-practices as it emerges and incorporating it into revisions of key documents.

Finding 6 (Medium Strength of Evidence). Whilst project documentation suggests a flexible and responsive approach to changing internal and external priorities, in practice the systems and processes to enable this are not in place. Whilst perception on the project's ability to adapt and change were mixed, many key informants highlighted that, in practice, formal mechanisms to facilitate adaptive management have not been established. Some stakeholders reported that the project's design allows them to adjust activities within their current technical workstreams based on changing priorities in their country. Conversely, others face challenges due to the project's funding model, which restricts the support it can offer for technical assistance. This is particularly problematic during national outbreaks, as it means the project is unable to provide emergency financial support to national governments.

Finding 7 (Medium Strength of Evidence). Partnerships are governed by clear Memoranda of Understanding (MoUs) and Terms of Reference (ToRs) which stakeholders perceive to be operationalised as intended, however mechanisms for feedback and reflection are intermittent and not always formalised. Despite the centrality of partnerships (both internal with ALBs, and external with government organisations) to project design, details regarding the purpose and nature of the partnerships are not currently reflected in key strategic project documentation. Additionally, many stakeholders reported that whilst they were aware an MoU was in place, the details were unknown to them or responsibility for the establishment and review of the MoU sat at a more senior level. Whilst feedback from partners and reflection on the partnership does occur informally, with regular progress reporting from country projects to DEFRA, wider opportunities for reflection and feedback have not been formalised. Opportunities for learning are discussed further under sub RQ 6.1 (See findings 36 and 37).

3.1.4. Sub-RQ 2.2: What would be required (from a design perspective) to enable project scale-up?

Approach

This sub-RQ focussed on the necessary design elements and strategic considerations that would facilitate the expansion of the program, primarily from the perspective of project stakeholders.


Findings

Finding 8 (Medium Strength of Evidence) There are limitations with the current delivery model which impede the ability to scale-up (see finding 17–18), and a lack of internal clarity on what scale-up would look like in practice. Stakeholders described how the current project model faces internal capacity constraints and human resource limitations linked to a limited total budget. In addition, partner organisations face absorptive capacity constraints such as the availability of training participants, competing donor demands, and the prioritisation of disease outbreak response activities. These issues would need to be addressed and mitigated, as far as possible, in any scale-up plans (see Findings 17–18 for further discussion around challenges with the delivery model).

Stakeholders were aware that scaling up the project was a priority for the future of AHSS but were unsure how this would happen and what it could involve. They noted a lack of clarity internally regarding what scale-up would look like—whether expanding to additional countries or deepening work in existing ones. Some stakeholders felt that more consideration was needed regarding the strengths, limitations and challenges of the current delivery model before concluding on the right approach. For example, in Zambia, there was a strong preference to work more at the community level, particularly with small-scale livestock farmers, highlighting the importance of contextual factors when considering scale-up within existing countries. Any future scale-up should also consider the findings in Core RQ 2, Finding 5, regarding project design and the incorporation of best-practice.

3.1.5. Right Ways

Table 3: Headline Findings for Right Ways module 2 with corresponding strength of evidence

	Right Ways Module 2: Key Findings	Strength of evidence
Efficiency and effectiveness of delivery	Finding 9. While beneficiaries report high satisfaction with project delivery (particularly trainings), gaps in programme management and MEL systems limit the availability of data needed to assess effectiveness and efficiency, and internal stakeholders see scope for improvement.	High
	Finding 10. Joint planning with in-country stakeholders and collaboration with other donors and agencies were key enablers of effective and efficient project delivery, facilitating coordination, resource sharing, and minimisation of duplication.	Medium
Enablers and barriers to delivery	Finding 11. A lack of timely and competitive reimbursement processes was reported by beneficiaries as a barrier for effective and efficient delivery of trainings.	High
	Finding 12. Infrastructural challenges, unreliable electricity, and insufficient equipment have impacted project delivery, particularly in Zambia, where drought-induced power outages have delayed activities. While AHSS has taken steps to mitigate these issues, ongoing resource constraints within government institutions continue to hinder progress.	High
	Finding 13. There are challenges with coordination of ALB activities which have impacted delivery.	Medium
	Finding 14. Similarly, poor coordination within national government ministries and departments can impact the efficiency and effectiveness of delivery.	Medium
	Finding 15. There are a limited number of in-country technical counterparts within delivery agencies and competing partner priorities which can lead to delays in delivery.	Medium
	Finding 16. Slow procurement processes have led to inefficiencies in delivery.	Medium

Strengths and challenges of the model	Finding 17. Limited staff availability across the ALBs, the PMO, and country-based teams presents a significant challenge to effective project delivery and poses a risk to future scale-up.	High
	Finding 18. There is a lack of clarity on roles, responsibilities, and remits across the project.	High
	Finding 19. The technical expertise of AHSS ALB staff is a key strength of the AHSS project delivery model.	High
	Finding 20. Country teams' networks and deep understanding of the local context and systems provide a solid foundation for implementation. This, along with their existing relationships and networks, were considered critical to effective delivery.	Medium
Value for Money	Finding 21. There is no project-wide strategy or approach to ensure value for money.	Medium
	Finding 22. There are insufficient processes in place to monitor project VfM.	Medium
	Finding 23. The project lacks sufficient processes to ensure the appropriate quantity and quality of project inputs are obtained at the right price.	Medium
	Finding 24. Processes to ensure optimal conversion of inputs to outputs (efficiency) could be strengthened.	Medium
	Finding 25. Project outcomes are not currently being measured, limiting the ability to assess the effectiveness of the project.	Medium
	Finding 26. Although equity has not always been sufficiently considered, stronger efforts are now being made to target minority groups, specifically women.	High
	Finding 27. Efforts are needed to improve the understanding, monitoring and reporting of VfM across the project.	High

3.1.6. Core RQ 3: To what extent have AHSS activities been delivered effectively and efficiently?

Approach

This Core RQ focusses on effectiveness and efficiency of project delivery and has been explored primarily through collecting beneficiary feedback and asking stakeholders about their overall perceptions of project delivery. Specifically, we considered efficiency and effectiveness as:

Efficiency: *the acceptability of how activities were delivered (Timeliness, well-coordinated and communicated, sufficiently organised)*

Effectiveness: *whether activities were delivered as expected and whether they met their objectives*

Efficiency and effectiveness were also explored more specifically through sub RQs 3.1 (enablers and barriers), 3.2 (delivery model), 3.3 (resourcing model). In this section we present overall findings non-specific to the sub-RQs.

Findings

Finding 9 (High Strength of Evidence) While beneficiaries report high satisfaction with project delivery (particularly trainings), gaps in programme management and MEL systems limit the availability of data needed to assess effectiveness and efficiency, and internal stakeholders see scope for improvement. Most beneficiaries reported high overall satisfaction with the effectiveness and efficiency of project delivery, particularly regarding training delivery. Trainings were described as highly engaging, practical, and hands-on where appropriate (see Finding 19). Sustained post-training communication, such as through WhatsApp groups, was seen as a valuable enabler for reinforcing learning and seeking clarification. Some participants suggested that trainings could be extended in duration, particularly for hands-on components like dissections, and that post-training assessments or certifications would help validate and communicate their learning. Despite these positive perceptions, internal project stakeholders pointed to delays that affected delivery and contributed to budget underspend, suggesting the need for improvements in efficiency. This contrast between external satisfaction and internal concerns points to the importance of a balanced approach to enhancing both effectiveness and efficiency in project delivery.

At the same time, internal stakeholders highlighted that gaps in programme management and MEL systems restrict the availability of data needed to assess project effectiveness and efficiency. The lack of sufficient data sources or standardised processes limits stakeholders' ability to track progress and make informed decisions. For example, the AHSS Project Management Office (PMO) does not require ALBs to assess activity effectiveness, and where this is done, the methods vary—from follow-up audits to WhatsApp check-ins. These inconsistencies hinder adaptive management and are discussed further in sections 3.1.9 (value for money), 3.2.1 (measurement of project results), and 3.2.5 (learning mechanisms). While the project has received A scores in annual reviews over the past two years, these assessments primarily focus on delivery of outputs and activities. As the project matures, it will be important to demonstrate results at higher levels and ensure that logframe indicators capture not just activities, but also outputs and broader changes (see Core RQ 5).

"So, the materials were well programmed, well planned, well delivered, and even the space, even where the farms were chosen"

"It was very helpful. Eye-opening...most of the things that we probably neglect and don't pay attention [to] very much...very good, informative training"

3.1.7. Sub-RQ 3.1: What have been the enablers and barriers to effective and efficient delivery across the different delivery contexts?

Approach

This sub-RQ focusses on operational factors, both positive and negative, that have impacted project delivery. Our analysis did not find a significant difference between the different delivery contexts, but where a theme has emerged, we have identified the country. As is commonplace in a review⁷, stakeholders shared more insights related to barriers than enablers. It can be understood that barriers described below would therefore be enablers when mitigated against.

Findings

Enablers

Finding 10 (High Strength of Evidence) Joint planning with in-country stakeholders and collaboration with other donors and agencies were key enablers of effective and efficient project delivery, facilitating coordination, resource sharing, and minimisation of duplication. The involvement of in-country focal points and the use of joint planning meetings between ALBs and country teams facilitated the effective delivery of activities and allowed necessary adjustments to be made efficiently. Informants described the careful and detailed planning behind activity delivery as a strength of the approach. Coordination with other donors operating in the same countries also supported delivery, ensuring complementarity and avoiding overlap.

Collaboration and co-delivery with other donors and agencies further strengthened delivery by enabling the sharing of resources and expertise. Partnerships with organisations such as FAO brought in complementary technical expertise—for example, combining FAO's focus on antimicrobial resistance in animals with AHSS's work on apiculture created opportunities to collaborate on policy development and tackle overlapping issues. This collaborative approach not only improved delivery but also reduced the risk of duplication, as discussed further in section 3.1.1. Other delivery-specific enablers are discussed in section 3.1.8 on strengths of the AHSS delivery model.

"In all of the things that we delivered, they were all thought through very carefully with them before it [was] delivered. So, it's always run smoothly"

Barriers

Finding 11 (High Strength of Evidence). A lack of timely and competitive reimbursement processes was reported by beneficiaries as a barrier for effective and efficient delivery of trainings. Training reimbursement is highlighted as a challenge from two perspectives. Firstly, many country-based stakeholders reported that reimbursement for transportation costs has been delayed and the process of chasing for payment puts them in an uncomfortable position. Furthermore, stakeholders described how other donors provide more attractive reimbursement packages, incentivising participants to attend these activities over AHSS activities.

⁷ Negative response bias is often commonplace in reviews which ask participants to reflect on their workplace experiences.

"So, those donors where they give them [DSA]⁸, they [recipients] prioritise those activities at the expense of yours, because you don't give them [DSA]."

Finding 12 (High Strength of Evidence). **Infrastructural challenges, unreliable electricity, and insufficient equipment have impacted project delivery, particularly in Zambia, where drought-induced power outages have delayed activities. While AHSS has taken steps to mitigate these issues, ongoing resource constraints within government institutions continue to hinder progress.** External factors, beyond the control of the project, including poorly maintained buildings and unreliable electricity supply, have undermined the ability to deliver effective capacity building activities. The drought in Zambia has exacerbated these issues, causing power outages that affect laboratory access to electricity and internet, thereby delaying communications and activities. To address these challenges, the AHSS team has supported the Central Veterinary Research Institute laboratory in Zambia by exploring solar power options. Additionally, AHSS has improved internet connectivity for the Accra Veterinary Laboratory, enabling the main laboratory to link with regional laboratories across the country.

"Until drought came in and power and issues started striking. As you know, there is a line for most of their – in fact, for almost everything they do, they rely on electricity. And we were hit hard, so some of the activities could not be carried out and so on."

Finding 13 (Medium Strength of Evidence). **There are challenges with coordination of ALB activities which have impacted delivery.** Coordination issues between different ALBs (such as, APHA, VMD, Cefas) have led to inefficiencies and overlaps in scheduling of activities. Country based teams in both Zambia and Ghana face increased workloads due to activities and assignments being delivered across ALBs without proper coordination. This lack of coordination can result in individuals having to manage multiple competing priorities. To address this, the project now directs communications through the country-based teams, however this has introduced new challenges, including delays in delivery and added complexity as stakeholders are required to manage multiple initiatives across different projects. In addition, ALBs are delivering animal health system strengthening initiatives not only through the AHSS project but also when working in their roles on other programmes, for example via Fleming fund grants, which could add further complexity for delivery partners (i.e. understanding what is within the remit of the AHSS programme, or not).

"But the challenge I've seen in this module, coordination becomes a problem. You have a number of ALBs, three of them...they don't coordinate themselves as ALBs. I think that's the major challenge that I've seen in this."

Finding 14 (Medium Strength of Evidence). **Similarly, poor coordination within national government ministries and departments can impact the efficiency and effectiveness of delivery.** Stakeholders shared instances of Government stakeholders working in silos, for example even between terrestrial and aquatic staff. As an effort to coordinate AHSS activities across government departments in Zambia, the project has set up a National Focal Persons Group, which includes a government focal person for each of the AHSS technical delivery areas.

"We inherited a system of working which was more in silos. Institutions tend to, you know, hold on to what they have instead of collaborating."

Finding 15 (Medium Strength of Evidence). **There are a limited number of in-country technical counterparts within delivery agencies and competing partner priorities which can lead to delays in delivery.** Limited partner absorptive capacity means that staff often struggle to balance their regular responsibilities with the additional activities required by the project. The issue worsens

⁸ Daily Subsistence Allowance

with multiple donors working with the same team. Some AHSS activities need multisectoral attendance but competing sector-specific priorities mean stakeholders cannot always participate on time, causing delays.

"You want to engage the people in the department, they are busy. They have other activities that they are cutting out. It's either they are engaged with other partners or mainstream activities in the department, they are involved in that, so you have got to wait until they are available"

Finding 16 (Medium Strength of Evidence). Slow procurement processes have led to inefficiencies in delivery. Stakeholders expressed their concerns that the DEFRA procurement systems are time consuming and cumbersome which can lead to bottlenecks in procurement. Klls acknowledged that there have been improvements in both the relationship with DEFRA procurement and the procurement process themselves which have led to them seeing improvements more recently.

3.1.8. Sub-RQ 3.2 and 3.3: What are the strengths and challenges of the delivery model (in Zambia and Ghana)? And how does the resourcing model impact delivery?

Approach

This sub-RQ focusses on the strengths and challenges in relation to the way the project is run organisationally between PMO, ALBs and country-based teams. Similar to sub-RQ3.1, our analysis did not find a significant difference between the different delivery contexts, but we have identified the country where a theme has emerged. Through analysis of sub-RQ 3.2, we found that themes largely centred around resourcing. Consequently, sub-RQ 3.3 was inherently answered by these findings and, therefore, we have combined our response to both sub-RQs in the section below.

Findings

Challenges of the delivery model

Finding 17 (High Strength of Evidence). Limited staff availability across the ALBs, the PMO, and country-based teams presents a significant challenge to effective project delivery and poses a risk to future scale-up. Internally, there is limited staff availability across ALBs due to the need to balance competing priorities between domestic and international work, leading to potential delays in delivery. Agencies face challenges in being adequately resourced with staff, often having to reassign personnel already engaged in domestic tasks to handle international projects. This becomes problematic, especially during domestic issues such as disease outbreaks, further straining resources. Additionally, the workload can become overwhelming when a single staff member is responsible for delivery in multiple countries.

There is also limited PMO capacity, with only two staff members handling all central project management duties. The current staffing levels, restricted to Grade 7 and Higher Executive Officer positions, appear insufficient to manage the workload effectively. Stakeholders believe that the project would benefit from a full-time, experienced technical position at the project level.

Furthermore, country-based teams in both Zambia and Ghana experience high workloads due to the competing demands of ALB delivery, PMO, and FCDO requirements. Therefore, some stakeholders have suggested introducing a G6 role within the country-based teams to provide strategic oversight and help manage the workload more efficiently. As a result of the limited country-based AHSS human resources, staff have to balance attendance and / or co-delivery with other partner/donor activities (see finding 13). Country-based teams acknowledge the

benefits of being on the FCDO platform⁹. However, FCDO requirements further add to their workload and there is still a need to comply with DEFRA requirements.

Additionally, the lengthy and timely HMG recruitment processes can further exacerbate these challenges, making it difficult to quickly fill critical positions and respond to urgent staffing needs.

As outlined above, the resourcing model presents human resource availability and capacity challenges, resulting in delays, inefficiencies, and difficulties in engaging the necessary expertise in a timely manner, impacting project delivery and collaboration. This also places pressures on the team, which has led to some project staff feeling overworked and overwhelmed.

"I think some of the limitations are that delivering that amount of work on the small team means that there is quite a heavy burden on the staff...Not being properly resourced to deliver this project. It really takes its toll..."

"OK, so, human resource first. I think we're overwhelmed, absolutely overwhelmed. Everything is planned though, but you find yourself operating in different systems, right? So, you're working here, FCDO...and then there is also DEFRA requirements."

Finding 18 (High Strength of Evidence). There is a lack of clarity on roles, responsibilities, and remits across the project. There is particular ambiguity around decision-making authority, with multiple individuals holding the title of programme manager, leading to confusion and conflict over who has ultimate decision-making power. In some cases, unclear remits have resulted in staff being pulled in multiple directions and feeling overworked. Additionally, stakeholders believe that country-based staff are heavily relied upon for operational and logistical tasks, while others report country-based staff's roles are intended for policy, influencing, communications, and strategy.

"And it's well, at least to me, it's unclear where the kind of responsibility ultimately lies. So, I think that's a challenge you know. We don't have kind of an overall lead, but a programme manager in the PMO, programme manager in each ALB and then...I think that's maybe conflict over who has ultimate kind of decision-making power"

Strengths of the delivery model

Finding 19 (High Strength of Evidence). The technical expertise of AHSS ALB staff is a key strength of the AHSS project delivery model. The AHSS project delivery model leverages established capabilities from DEFRA agencies. Staff in ALBs possess substantial technical knowledge and expertise, which is highly valued by partner countries. This expertise is a crucial enabler, enhancing the project's credibility and ensuring high-quality delivery, offering specialised knowledge that in-country teams may lack.

Finding 20 (Medium Strength of Evidence). Country teams' networks and deep understanding of the local context and systems provides a solid foundation for implementation. This, along with their existing relationships and networks, were considered critical to effective delivery. For example, these teams are well-versed in navigating the local system and leveraging personal connections to address issues efficiently. Country-based teams in both Ghana and Zambia benefit from established social capital, particularly as both national leads have been the Chief Veterinary Officer in their respective countries and fostered strong relationships with government counterparts. The presence of in-country teams has been particularly beneficial in facilitating access to key government contacts.

⁹ AHSS Country-based staff in both Zambia and Ghana are FCDO employees, based in the British High Commission but working exclusively on the DEFRA AHSS programme.

"The other thing that's really positive about it – although it does also cause risks and problems – is around the fact that it's delivered, not through a bilateral aid programme, but through UK expertise and our own partner agencies. Overall, that's fantastic, because we want to move away from the donor/beneficiary relationships and unequal partnerships and colonial aid and all the rest of it. So having UK experts work with Ghana experts on global public goods that benefits the UK is great."

3.1.9. Core RQ 4: To what extent does the AHSS project have systems and processes to ensure value for money?

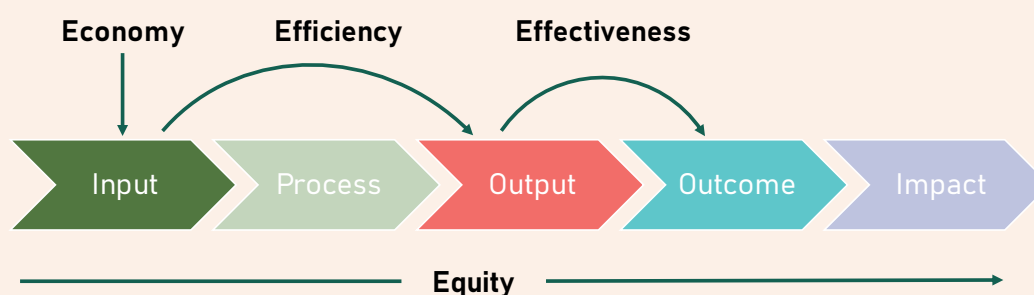
Approach

We have explored this Core RQ using an assessment framework. This framework draws upon 'Assessing value for money: the Oxford Policy Management [OPM] approach'¹⁰. Given the scope and timeframe of this rapid review, a detailed VfM analysis was not feasible. Instead, we have utilised the 4Es framework (see Box 1) to identify elements or activities essential for effectively managing VfM in a project like AHSS.

Key informants for this section were selected based on their role and potential interaction with VfM issues. Hence, not all KIs were included and the criteria for strength of evidence has been adjusted to account for the smaller sample size.

Box 1: The 4Es Value for Money framework

The 4Es framework assesses an organisation using the following criteria:



1. **Economy:** Are projects buying inputs of the appropriate quality at the right price?
2. **Efficiency:** How well are projects converting inputs into outputs? ('Spending well')
3. **Effectiveness:** How well are the outputs from an intervention achieving the intended effect? ('Spending wisely')
4. **Equity:** How fairly are the benefits distributed? To what extent do projects reach marginalised groups? ('Spending fairly')

Findings

Finding 21 (Medium Strength of Evidence). There is no project-wide strategy or approach to ensure value for money. Whilst there is reference to VfM in the project business case, there is no clear project strategy outlined in the key project documentation reviewed. Evidence gathered during KIs strongly suggests that there is a mixed understanding and lack of clarity amongst stakeholders regarding the meaning of VfM and a lack of awareness in relation to an existing VfM

¹⁰ <https://www.opml.co.uk/sites/default/files/2024-06/opm-value-money-vfm-approach-v2-1.pdf>

strategy or agreed approach for across the project. Furthermore, there were no data sources to evidence leadership, management or governance arrangements to promote delivery of VfM.

Finding 22 (Medium Strength of Evidence) There are insufficient processes in place to monitor project VfM. Whilst project documents indicate VfM discussions should occur routinely in management meetings, including during Oversight Board meetings, there was limited evidence in meeting minutes, with KIs presenting a mixed picture on the frequency and extent to which this occurs. Where discussions on VfM occur, these are often limited in breadth and do not include all elements of VfM with a focus on cost. Additionally, there is limited knowledge, resource and capacity to support assessments, partly linked to the capacity constraints of the PMO.

A VfM assessment was conducted by DEFRA Commercial on the delivery model however, this focussed on whether using ALBs provided VfM from a procurement perspective rather than assessing the project-wide VfM.

The lack of project VfM assessments means there are limited opportunities to reflect, learn and improve the AHSS project VfM. Were VfM assessments to be instituted, formalised mechanisms would need to be established to ensure adoption of learnings. Without these in place opportunities to adopt financial efficiencies and track improvement are limited.

"We do have milestones, but whether or not you know within that, if you're talking about whether or not they've been delivered on time, whether they've been delivered for value, for money, etcetera, those haven't been measured robustly."

Finding 23 (Medium Strength of Evidence). The project lacks sufficient processes to ensure the appropriate quantity and quality of project inputs are obtained at the right price. Whilst a robust procurement process is in place there is no evidence that the average costs of significant items are monitored and reviewed on a regular basis or that cost drivers are identified and reviewed. Additionally, financial risk management processes were not specifically identified by KIs when discussing risk management.

Finding 24 (Medium Strength of Evidence). Processes to ensure optimal conversion of inputs to outputs (efficiency) could be strengthened. A contributing factor to issues affecting efficiency is a lack of consistency in process across the different ALBs. Mechanisms are in place to monitor spend per activity, with budget forecasting and reviews happening regularly at a project level. However, due to processes varying across the ALBs, methods of costing may not always be consistent.

There was a lack of agreement regarding the processes in place to review timeliness, cost and quality of outputs, potentially due to differing opinions on the three different factors being examined in the question. Timeliness and progress of activities is regularly discussed at a project level during the AHSS Technical Working Groups, however monitoring whether delivery is "on-track" varies by ALB, with those with a larger ODA suite of projects having a more formalised approach. There is no project-wide approach to monitoring quality and where quality assessments are conducted these are activity level rather than output level focussed, such as gathering post-training feedback. Quality assessments are not done consistently across all activities by all ALBs.

Procurement processes have hindered efficiency (Finding 16) however this has been recognised and measures put in place to improve.

Finding 25 (Medium Strength of Evidence). Project outcomes are not currently being measured, limiting the ability to assess the effectiveness of the project. Currently there are no monitoring systems in place to capture outcome level change, with no outcome level indicators specified. Whilst there is some limited feedback gathered from project beneficiaries and partners on the value of the outputs and outcomes, this is not routinely gathered and is not done routinely in a systematic way.

Finding 26 (High Strength of Evidence). Although equity has not always been sufficiently considered, stronger efforts are now being made to target minority groups, specifically women. There is recognition amongst stakeholders that although equity was not considered during the initial design of the project, it has become an increasing priority. Significant efforts have been made to address it, including adding a gender equity and social inclusion (GESI) position within the DEFRA PMO team, plus commissioning a GESI review, the recommendations from which will be integrated moving forward. Additionally, in Ghana, the African Women in Animal Resources Farming and Agribusiness Network has been engaged to strengthen the voice and representation of women farmers within the project.

Disaggregated data is captured to help monitor efforts to integrate equity into the project, however in some instances there is a systemic barrier related to professional gender imbalances and the number of women in the veterinary field that can therefore be actively targeted for technical assistance.

"I was surprised to see at one of the trainings a lady who had been posted to a very remote area, and I've never seen her in any of the training but AHSS, was able to fish her out to, you know, get her to be part of that."

3.1.10. Sub-RQ 4.1: What is a best fit approach to ongoing monitoring of value for money?

Approach

This sub-RQ has been answered by using the findings from the evaluation of the project's current approach to VfM against best-practice and identifying areas that would benefit from strengthening.


Findings

Finding 27 (High Strength of Evidence). Efforts are needed to improve the understanding, monitoring and reporting of VfM across the project. Currently the project is not able to assess whether it is making best use of its resources to achieve its intended outcomes or impact. There are limited opportunities to improve the project's VfM due to a lack of a project VfM strategy and no routine VfM monitoring taking place. The OPM approach offers a best-practice framework, which would enable the project to identify ways to strengthen systems and processes to enhance VfM and identify opportunities for improvement across the 4Es: Economy, Efficiency, Effectiveness and Equity.

A pragmatic approach should be adopted, which is appropriate for the size of the project and proportionate and realistic for the resources available and VfM capacity that exists. This should include, at a minimum, identification, monitoring and assessment of key cost drivers, plus ongoing assessment of the quality of interventions. A review of the existing understanding of VfM and capacity gap analysis would enable targeted upskilling where needed. This would need to be done alongside development of a project-wide approach, with defined roles and responsibilities and clear reporting mechanisms.

3.2. Right Results

Table 4: Headline Findings for Right Results module 3 with corresponding strength of evidence

	Right Results Module 3: Key Findings	Strength of evidence
Progress towards results	Finding 28. Monitoring undertaken by the project demonstrates that the project has achieved or partially achieved, expected results (see Table 5). However, a lack of a clear logframe, evidence-based targets and perceived limitations of the project's MEL system makes it hard to contextualise these results.	Medium
	Finding 29. In contrast to results recorded via the project monitoring, the achievement of annual review milestones, and the results highlighted above, many stakeholders felt it was too soon to see project results, especially in Zambia where implementation has only been underway for a year.	High
Enablers and barriers to achieving results	Finding 30. The needs-based nature of project design and the relationships with country teams and ALBs function as enablers to effective project delivery.	Medium
	Finding 31. The size, availability and characteristics of the workforce in country limits absorptive capacity and presents a challenge to the achievement of intended project results	High
	Finding 32. Widespread deficiencies in animal health system infrastructure have impaired participation in AHSS activities and the ability to apply learning from capacity building activities.	High
	Finding 33. The impact of national crises, such as the drought in Zambia, was recognised as a significant barrier to the project and links with both workforce and infrastructure barriers previously mentioned.	High
	Finding 34. Varying levels of government commitment (politically and financially) and an uncertain long-term funding picture from the project were also considered significant barriers by stakeholders	Medium
Learning and adaptation	Finding 35. Results of influencing and advocacy activities have been mixed across both Ghana and Zambia, with marked differences in the types of activities conducted.	High
	Finding 36. The AHSS project relies on informal mechanisms to share feedback and facilitate real-time learning both internally across the project and externally with stakeholders.	Medium
	Finding 37. The existing MEL system is not well set up to enable learning and therefore data to inform project improvements is not regularly fed in as part of routine project management.	High
	Finding 38. Although the AHSS project has identified learnings, actioning and implementation has been limited, with examples in financial management processes rather than project delivery.	High
	Finding 39. Recommendations and learnings outlined in the year 2 annual review are closely aligned with the findings of this review.	High

3.2.1. Core RQ 5: To what extent has AHSS achieved its intended outputs?

Approach

This Core RQ focusses on a high-level assessment of the projects results against the outputs of the ToC. We have explored this RQ primarily through document review and asking stakeholders for their perceptions of results in their respective areas of project delivery (corresponding to output monitoring).

Findings

Finding 28. (Medium Strength of Evidence) Monitoring undertaken by the project¹¹ demonstrates that the project has achieved or partially achieved, expected results (see table 5)¹². However, a lack of a clear logframe, evidence-based targets and perceived limitations of the project's MEL system makes it hard to contextualise these results. The year 1 annual review judged progress in the set-up of the project through a list of key deliverables, the majority of which were achieved during the year. The annual report from Year two includes targets but lacks details on how these targets have been determined (for example, through needs assessment processes). The year three global output matrix documents the annual targets versus actions (as shown below), demonstrating that the project has achieved its targets for three out of nine indicators reported; partially achieved for a further three out of nine and not achieved against three indicators.

Table 5: Output targets and reporting for year 2 and 3 of the project¹³

Year 2				Year 3		
Indicator	Target	Actual		Indicator	Target	Actual
1.a Number of laboratory staff trained disaggregated by country, gender, age, disability & designation	148	122		1.a Number of laboratory staff trained disaggregated by region, country, gender, age, disability & designation	69	101
1.b Value of laboratory equipment donated/supplied (GBP)	£20,000	£22,219.21		1.b Value of investment in Assets and consumables supplied/provided in £1000s	£56500	£8552
1.c Number of proficiency tests (PT) successfully completed		5		1.c Number of agreed requirements/actions (i.e. QMS, PT Schemes) met	45	13
				1.d Number of laboratory staff engaged	58	30
2.a Number of people trained disaggregated by region/province, gender, age, disability & designation	2,400	2,438		2.a. Number of staff trained in disease control methods and or surveillance	810	824
2.b Number of animals vaccinated, disaggregated by animal/pathogen/country	25,000	26,332		2.b Number of animals vaccinated: disaggregated by disease type & gender of household head	40000	67002
2.c Number of simulation exercises participated in	1	2		2.c. Number of knowledge products completed by type (such as SOPs, training manuals, and curriculum guidelines)	42	32

¹¹ Itad did not undertake verification of AHSS logframe results.

¹² At the time of this review Q4 had not yet taken place.

¹³ Year 2 target and actual data taken from the Y2 annual review; year 3 data taken from global output matrix 30.11.24

Year 2				Year 3		
Indicator	Target	Actual		Indicator	Target	Actual
2.d Number of knowledge products commenced and produced by type	8 commenced, 4 completed	8 commenced, 2 completed		2.d Number of stakeholders engaged in disease control methods and or surveillance	1988	1658
				2.e Improvements in disease control and surveillance	Not reported	
3.a Number of One Health meetings actively supported /participated in	4	4		3.a. Number of knowledge/influencing products produced by number and type (for example, economic case for investment, action to progress priorities identified in PVS assessments)	6	5
3.b Number of events/products produced	3	3		3.b Improved alignment of partnership efforts (eg, shared priorities, shared goals, common accountability system).	Not reported	
3.c Training and engaging public officials and other key stakeholders	135	713				

Target Achieved Partially achieved Not achieved

Several technical issues with the project monitoring framework mean that is not effectively communicating the results of the project. The template used does not align well with a logframe format and currently fails to capture year-on-year progress towards annual milestones and end-of-project targets making it difficult to judge whether the project is on track and performing as expected. Changes were made to the indicators between year 2 and 3 which also complicates tracking slightly. The current output monitoring approach also only includes quantitative indicators¹⁴, whereas a mix of quantitative and qualitative indicators would add more nuance beyond, for example, counting of activities delivered. Stakeholders highlighted that the current project MEL system was unable to capture results nor the wider impact of the project in a robust way.

Some participants reported that the AHSS project has made good progress in its intended outputs in Ghana and Zambia. Key achievements include the delivery of extensive training of laboratory staff and veterinary specialists, significant investment in laboratory equipment, successful vaccination campaigns, and improved coordination and standardisation of veterinary services.

"Because we don't have a great MEL framework set up so, it's hard to say if we've really achieved what we've set out to achieve."

Finding 29. (High Strength of Evidence) However, in contrast to results recorded via the project monitoring, the achievement of Annual Review milestones, and the results highlighted above, many stakeholders felt it was too soon to see results of the project. This was particularly felt to be the case in Zambia where implementation has only been underway for a year. Stakeholders reflected on the length of time it takes to see improvement in health systems strengthening projects and noted several barriers (discussed below) to what the project is seeking to achieve.

¹⁴ The logframe includes one mixed-method indicator but this contained no details or results.

3.2.2. Sub-RQ 5.1: What were the major enablers/barriers to achieving results?

Approach

This sub-RQ focusses on the positive and negative factors which affect the project outputs detailed within the previous RQ, and which have the potential to influence results at the outcome and impact level of the ToC. This RQ differs to 3.1 in that it is focussed less on operational level enablers and barriers (things impacting on day-to-day work) and addressing issues that are more contextual and more likely to have a widespread impact on programming. Our analysis did not find a significant difference between the different delivery contexts, but where relevant we have identified the country that a theme relates to. As often occurs in a review, we gathered more insights related to barriers than enablers¹⁵. It can be understood that barriers described below would therefore be enablers when mitigated against.

Findings

Enablers

Finding 30. (Medium Strength of Evidence) The needs-based nature of project design and the relationships with country teams and ALBs function as enablers to effective project delivery.

Stakeholders perceive the relationships between project staff and government representatives as key to enabling progress and influence political interest. Additionally, the focus on flexibility to meet country needs (for example, to support response to a Marburg outbreak in Ghana) was viewed positively.

"In Ghana, for example, we've hired someone who used to be the chief veterinarian officer, and he's very well connected within the government. So, it's much easier...we are able to kind of access people that we wouldn't be able to before and kind of get meetings with them and things like that."

Barriers

Finding 31. (High Strength of Evidence) The size, availability and characteristics of the workforce in country limits absorptive capacity and presents a challenge to the achievement of intended project results Stakeholders shared how many of the critical animal health system workforce are managing competing priorities and often unavailable at short notice due to, for example, emerging outbreaks. Other stakeholders remarked on the workforce relying on both trainees (who are less likely to be retained in the long run) and senior staff members approaching retirement or even returning to service to plug workforce gaps. Delivering the project amidst significant and long-term workforce issues is likely to impact the ability to achieve intended results. (The potential impact this has on the ability of the project to scale is discussed in Finding 8).

Finding 32. (High Strength of Evidence) Widespread deficiencies in animal health system infrastructure have impaired participation in AHSS activities and the ability to apply learning from capacity building activities. At both a micro (consistent access to laboratory reagents) and macro (suitable laboratory buildings– see finding 12) level infrastructure deficiencies pose a clear barrier to the project achieving its results. Animal health services are often chronically under-resourced, and a lack of funding within government institutions has led to insufficient reagents and basic laboratory equipment, further hindering routine work. On some occasions, the project has mitigated these issues by providing necessary equipment for trainings to go ahead but this raises issues around the sustainability of the project. There is a risk that without the ongoing support of the project for essential items (such as reagents and equipment) any gains made during the project's lifespan will not be sustained in the long term. No evidence of a sustainability or exit strategy to address this issue was found during the review.

¹⁵ Negative response bias is often commonplace in reviews which ask participants to reflect on their workplace experiences.

Finding 33. (High Strength of Evidence) The impact of national crises, such as the drought in Zambia, was recognised as a significant barrier to the project and links with both workforce and infrastructure barriers previously mentioned. The drought in Zambia impacted infrastructure (consistent electricity to run laboratories and to communicate with stakeholders) and workforce availability (civil servants banned from travelling). Whilst outside of the project's influence, a lack of resilience or processes to manage future crises will similarly impact project results.

Finding 34. (Medium Strength of Evidence) Varying levels of government commitment (politically and financially) and an uncertain long-term funding picture from the project were also considered significant barriers by stakeholders. Stakeholders referenced a lack of political commitment and funding vis-à-vis animal health and changing government priorities as key barriers to success and sustainability of any results of the project. This differed slightly between Ghana and Zambia, where many stakeholders pointed out that livestock represented a large proportion of Zambia's GDP, and that the Zambian president was in the agriculture industry and had a vested interest in animal health. Regardless, stakeholders were consistent in their views that it was unlikely government funding would be able to take over from donor-led work.

"Most of the time, it's challenging...especially every five years, it depends on whether the government is changing or not. If it's the same government, it also depends on whether they will stick to the policies they had the previous five years or not."

3.2.3. Sub-RQ 5.2: To what extent has the project's animal health influencing and advocacy activities contributed to the achievement of project goals, and what key lessons have been learned from this approach?

Approach

This sub-RQ focusses on identifying progress and results of the project's influencing and advocacy activities, as detailed within AHSS documentation and KIs and exploring how this has contributed to overall project results.

Findings

Finding 35. (High Strength of Evidence) Results of influencing and advocacy activities have been mixed across both Ghana and Zambia, with marked differences in the types of activities conducted. Influencing activities in Zambia have mainly focussed on leveraging political input and support for delivery of AHSS activities, whereas in Ghana there have been a broader range of advocacy activities (e.g. Senior ministerial bi-lateral meetings, high-profile vaccination donations) that have been pitched at more senior political stakeholders.

While strong in-country foundations and relationships with government counterparts (see Findings 20 and 30) have supported project delivery and helped enable responsive engagement with national priorities, this review did not find evidence that the project's broader influencing and advocacy activities have (as defined in the ToC), at this stage, contributed clearly to the achievement of project results. In both countries, stakeholders had mixed views on the degree to which the project was conducting these types of activities and how the project intended to create a 'supportive environment' to enable results of the project. It is therefore unclear the extent to which this work has contributed to achievement of results.

3.2.4. Sub-RQ 6.1 and 6.2: What mechanisms were in place for real time learning and what are the effective mechanisms for facilitating learning, both internally and externally within the AHSS project and externally with partners?

Approach

These sub-RQs focus on mechanisms the project has in place to facilitate real time learning and whether these mechanisms are effective. As sub-RQ 6.1 and 6.2 are closely related and draw on the same evidence and examples provided by stakeholders and within documentation we have combined our response to both questions in this section.

Findings

Finding 36. (Medium Strength of Evidence) The AHSS project relies predominantly on informal mechanisms to share feedback and facilitate real-time learning both internally across the project and externally with stakeholders. Internally, formal mechanisms are limited to the quarterly Joint Planning Meetings (JPMs) which provide an opportunity for countries to share their work, discuss achievements and obstacles, and exchange ideas. A specific Lessons Learned session was facilitated in May 2023, but this does not appear to be a regular planned meeting or part of a routine learning cycle. Post-trip de-briefs and Back to Office Reports (BTORs) are both outlined in the project Ways of Working document and intended to capture lessons learnt and recommendations following an overseas visit, however these were not mentioned in KIs in the context of capturing and sharing learnings across the project and it is unclear to what extent these approaches are driving project learning and adaptation. Informally, information sharing internally occurs through project meetings, discussions, and team reviews but there was a perception that some feedback was not taken seriously, and that structures for sharing lessons with wider stakeholders were lacking. Regular conversations and side meetings during events with external stakeholders provide avenues for sharing information, but concerns exist about the lack of opportunities to provide feedback, with some KIs reporting they had never had the chance.

Finding 37. (Medium Strength of Evidence) The existing MEL system is not well set up to enable learning and therefore data to inform project improvements is not regularly fed in as part of routine project management. A lack of resources to implement learnings also contributes to this issue.

"We don't really have that real time structure of getting those lessons and sharing with the wider stakeholders."

3.2.5. Sub-RQ 6.3: Have learnings identified by the AHSS project been actioned thus far?

Finding 38. (High Strength of Evidence) Although the AHSS project has identified learnings, actioning and implementation could be strengthened, with examples mainly in financial management processes rather than project delivery. While financial and project management learnings have sometimes been implemented, such as the streamlining of travel processes, there is limited evidence of project learning and adaptation more broadly. Evidence suggest that feedback is not always considered, and lessons are not always acted upon to improve the project. Siloed working methods, particularly among ALBs, hinder the sharing of solutions to similar delivery challenges limiting cross-project learning (see Sub-RQ3.1). For example, in Zambia, information regarding scheduled power outages (load shedding) due to the effects of the drought, was not shared between ALBs despite implications for the delivery of planned activities around antimicrobial residue testing. In some instances, the project has made efforts to gather feedback, but it is unclear whether actions have been planned or implemented. For example, a psychological safety survey was conducted which identified improvements, especially regarding confidence to take risks but there was no evidence found in this review that there have been steps taken to address this.

Finding 39. (High Strength of Evidence) Recommendations and learnings outlined in the year 2 annual review are closely aligned with the findings of this review. Whilst the annual review identified barriers to delivery similar to those identified here, including governance, communications and coordination (see Sub-RQ 3.1 and 3.2), we were unable to find evidence of a

clear management response or action plan to address these issues over the past year.¹⁶ This may be because of reliance on informal mechanisms for sharing feedback and as such, the mechanisms for learning and actioning change appear to be limited.

"There's a lessons learned document somewhere, that we just keep adding to, but we never actually learn from."

4. Conclusions

This section presents key conclusions which have been synthesised from the key findings from each review module. It provides a high-level overview of the review's findings and their potential implications, organised according to the three modules of the review structure, with each conclusion addressing a Core RQ.

Right Things

Core RQ1: To what extent does the AHSS project demonstrate internal and external coherence?

- The project is well aligned with both HMG and DEFRA objectives, as well as partner country national priorities and key activities, with evidence of steps taken to mitigate against duplication of effort. The Oversight Board, with representatives from different UK government departments, helps maintain strategic alignment with HMG objectives, although a lack of a systematic process to review and incorporate new HMG policies leaves the project susceptible to becoming misaligned. Some stakeholders felt that the AHSS project is currently not well aligned with DEFRA's international priorities, which focus more on climate change, nature, and biodiversity. However, this will likely be addressed as the project pivots to 100% ICF funding.
- Whilst the project was found to be aligned with the country national priorities for animal health, country ownership could be strengthened in terms of political commitment and funding, as without this the sustainability of the project is compromised. However, in contexts where resources are constrained, commitment to and prioritisation of animal health will vary, oftentimes being chronically under-resourced.

Core RQ2: To what extent is the AHSS project designed in an appropriate way to deliver its objectives?

- Whilst PVS Pathway reports have been used as a technical evidence base for project design, there has been limited use of wider evidence regarding what works and best practice in terms of health system strengthening, health security (including a focus on One Health) and overseas technical assistance programming.
- Limitations associated with the current project design impede the ability to scale-up. These are linked to the resourcing constraints, partner absorptive capacity and existing capacity within the animal health sectors. Any scale-up efforts are likely to be undermined unless these key barriers and risks are fully explored, incorporated into decision making (regarding scale and breadth), and mitigation measures planned and put in place.

Right Ways

Core RQ3: To what extent have AHSS activities been delivered effectively and efficiently?

- The technical expertise of the ALB staff, plus the networks and extensive understanding of the local context and systems of the country teams provides a strong foundation for delivery of the AHSS Project objectives.

¹⁶ 'Beyond progress updates to recommendations in the AR.

- Beneficiaries are satisfied with the project delivery, in particular delivery of training. However, internal stakeholders recognise that improvements to project efficiency could be made.
- Where joint planning and coordination with other donors has occurred, this has aided effective and efficient delivery. In some cases, this has been strengthened further through co-delivery and resource sharing.
- Despite the strong foundation for delivery, key barriers to effective and efficient delivery include issues of communication and coordination within the AHSS Project, human resource availability and financial processes. This has led to incidences of delays, inefficiencies, and difficulties in engaging the necessary expertise in a timely manner. It has also resulted in staff feeling overwhelmed due to the impact this has on workloads.

Core RQ4: To what extent does the AHSS Project have systems and processes to ensure value for money?

- VfM is currently not well considered or understood across the project. Consequently, it is not possible to effectively monitor and assess how well the project is doing in terms of the 4Es (economy, efficiency, effectiveness and equity). The lack of project -wide strategy or approach to ensure value for money hinders the ability of the project to make improvements in these four domains.

Right Results

Core RQ5: To what extent has AHSS achieved its intended outputs?

- There are gaps in the MEL system which make tracking progress challenging. As per project monitoring indicators, results at the output level have generally been achieved, however technical issues with the monitoring approach and lack of a Project logframe make this difficult to interpret. Stakeholder views were mixed on whether results had been achieved at this stage of project implementation.
- Stakeholders described several important barriers to the project achieving intended results, some of which have already caused significant issues. These include the absorptive capacity of partner organisations, infrastructure and capacity deficits within the animal health system, the drought in Zambia and varying level of government commitment. These factors impede the ability to achieve results but also have implications for project sustainability. There is no evidence of a sustainability or exit strategy outlining how these factors will be addressed or how country-ownership, with political buy-in and financial commitment, will be achieved. As a result, there is a risk that results achieved by the project will not result in long-term change.

Core RQ6: What are the key lessons learned from phase 1 to ensure future progress towards results?

- Systems and processes for learning and adaptation are not well embedded in the project with few formal and consistent mechanisms and limited evidence of actioning and implementation of lessons learnt occurring. Without regular formalised processes for gathering feedback and mechanisms for taking action the project is limited in its ability to adapt and learn.

5. Recommendations

This section presents prioritised recommendations based on the findings and conclusions of this review. These recommendations are considered draft and will require further discussion among AHSS Project stakeholders. Due to the rapid nature of this review, the recommendations were not co-created or discussed with the project during the review process. Therefore, they should be viewed as preliminary and will need further refinement and stakeholder input to develop clear, actionable steps.

Evidence-Based Project Design

1. The project should look to expand its evidence base for project design, drawing on health systems strengthening best practice and the intersection of animal health with public health and health security within each country, in line with positioning of the AHSS project as a One Health project. Alongside this, processes for regular evidence review should be established.
2. Review key enablers and barriers to delivery and achievement of results to enable identification and implementation of mitigation measures and ongoing monitoring (through design and planning processes). Any underlying risks and assumptions should be built into the project ToC. Consider specific strategies to address issues such as absorptive capacity and understand how these barriers and enablers will influence options for scale-up.

Roles and Responsibilities

3. Clarify roles, responsibilities and remits across the project and consider how to resource the project to enable effective and efficient delivery, given the current human resource limitations faced by the project.

Communication and Coordination

4. Review mechanisms for communication, collaboration and coordination. Where issues have been identified, develop processes that strengthen the ability to communicate and coordinate effectively and efficiently, without overburdening already stretched staff. Strengthened communication between delivery partners could help mitigate risks by supporting the early identification of potential barriers to implementation.
5. Continue to build upon coordination mechanisms in-country and internationally to ensure alignment with strategic priorities, country priorities and ensure the project collaborates or contributes to, rather than duplicates other programmes. Continue to explore opportunities for joint planning with in-country stakeholders and coordinating with other donors for delivery, capitalising on the strong local knowledge and networks of the country-based teams. Opportunities for co-delivery and resource sharing should be explored when considering options for scale-up.

Monitoring, Evaluation and Learning

6. Establish an effective and transparent MEL system that enables the project to robustly document results. In particular:
 - The project should use a standard, HMG logframe template to document and communicate results.
 - The logframe should be reviewed to ensure that output statements are SMART and reflect output-level changes.
 - Indicators should be identified to measure these statements effectively. Different types (mixed methods) indicators can help better capture the dimensions of change.
 - Including an outcome statement and relevant indicators in the logframe is essential for fostering a shared understanding and maintaining focus on the project's intended results while ensuring that change is captured and evidenced.
 - In cases where outcome-level change takes longer to materialise, intermediate outcomes can help track progress toward the desired results.
 - Evidence-based annual milestones and end of project targets should be clearly documented alongside actual achievements within the logframe template.
 - A QA process for MEL data should be in place.

- A regular review process should be established which enables the use of MEL data to support project adaptation. The project should also explore the potential for additional external evaluative activities.
- Establish formal mechanisms for project learning to ensure insights are captured from monitoring and evaluation, staff feedback and project reviews.
- Implement structured processes for reviewing and reflecting on lessons learned.
- Document necessary actions and adaptations systematically.

Value for Money

7. Strengthen the understanding, monitoring and reporting of VfM across the project to address the gap that currently exists around VfM strategy, reporting and review of VfM indicators. The 4E framework (economy, efficiency, effectiveness and equity) enables the project to identify opportunities for improvement across the different contributing domains.

This would include consideration of the following:

- **Economy:** monitoring of costs and quality of inputs, identifying significant cost items, regular reviews and robust financial risk management processes.
- **Efficiency:** establishing a consistent approach across the ALBs to review timeliness, cost and quality of outputs.
- **Effectiveness:** outcome level change captured in monitoring systems.
- **Equity:** equity considerations built into the ToC with indicators in place to monitor the project approach to equity.

To achieve this an appropriate strategy needs to be developed, formal mechanisms and processes should be established and embedded across the ALBs and revisions made to monitoring approach to ensure that VfM indicators are adequately incorporated and able to be reported against.

Sustainability

8. The project should consider developing a sustainability strategy, which should address how barriers such as infrastructure deficiencies will be managed and how country ownership can be strengthened to enable a gradual transfer of support (financial and political) for project activities. It should be contextualised to each country, recognising that animal health is prioritised differently in different country context



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