

Dear Susanne,

Thank you for the completion report from the project in Benin.

Although skeptic in the first year of Collaboration with MICADO, I must admit that I have come to respect and admire the work that Jacqueline and her co workers have been doing.

The Project in Cambodia resulted in a fully functional fairly decent diabetes center at the Kossamak Hospital which has been an important development in building diabetes care services in Cambodia. One can hope that the same transformation will happen in Benin through these two clinics and further expansion through the new project.

Although not easy to read the report because of language difficulties it none the less provides a good overall picture of the achievements and the challenges faced.

The fact that they have meticulously documented cases diagnosed, being treated and followed up at the clinic as well as changes in HbA1c level is something we should strive to replicate in all our projects that support setting up basic clinics. The fact that 70% patients still continue to follow up is indeed an indicator that the service delivery is of reasonable quality and valued by the Clients. Again an indicator which we must insist tracking in our projects.

The crude calculation of cost effectiveness of the WDF funding is an important element. It shows that WDF funding as low as 45 Euro per person can be leveraged to build a basic care system to improve diabetes care delivery. If only the Governments in the developing world could see this point and use grants to help them kick start basic diabetes and hypertension services.

There are many important lessons from this very simple project.

Please convey my compliments to Jacqueline and her team.

Regards

Anil