

Terminal Evaluation

Middle East

1. Outline of the Project

Country:

Republic of Turkey

Project title:

Audio-Visual Communication in Family Health

Issue/Sector:

Health/ Medical care

Cooperation scheme:

Third-country Group Training

Division in charge:

Middle East and Europe Division, Regional
Department IV (Africa, Middle East and Europe)

Total cost:

Period of Cooperation Fiscal Year 1998 -
2002

Partner Country's Implementing Organization:

Ministry of Health, General Directorate of Mother-Child Health and Family Planning (MoH, MCH/FP), Turkish International Cooperation Administration (TICA)

Supporting Organization in Japan:**Related Cooperation:**

Project-type Technical Cooperation;
"Project for Promotion of Population Education Phase 1 & Phase 2"

1-1 Background of the Project

The increasing rate of population growth had reached 2.5 percent in Turkey, where various family planning projects had been implemented since the 1960s. The Government of Japan had implemented the Project-type Technical Cooperation "Project for Promotion of Population Education Phase 1 & Phase 2" (1988-1998) and developed textbooks and campaign materials for education and promotion activities, which contributed to disseminating the knowledge of family planning and maternal and child health with an aim to slow down the increasing rate of population growth.

The Government of Japan has regarded South-south Cooperation, cooperation among developing countries, to be an important area for assistance in Turkey. Recognizing that it would be meaningful to transfer the skills and experience that Turkey has obtained in the field of education and publication activities through 10 years of cooperation to the surrounding countries, the Government of Japan together with the Government of Turkey decided to implement a Third-country Training Program in the field.

1-2 Project Overview

The Training, aiming at promotion of audio-visual communications and publications in the field of family health education, and was conducted for officials and staff working for governmental organizations or official agencies in the field of audio-visual communications technology at the Communication Center of the General Directorate of Mother-Child Health and Family Planning, Ministry of Health (MoH, MCH/FP) in Turkey.

(1) Overall Goal

Family Health Education by Audio-Visual Communications is activated in the participating countries.

(2) Project Purpose

Skills of participants in preparing Audio-Visual materials are developed.

(3) Outputs

- 1) Participants understand the Audio-Visual Communications methods and their applications.
- 2) Participants understand the design strategies of promoting family health education.

(4) Inputs

Japanese side:

| | |
|--------------------|---------------------------------------|
| Short-term Experts | 6 |
| Local Cost | 155,518.7 US Dollars (19 Million Yen) |

Turkish side:

| | |
|--------------|-------------------------------------|
| Counterparts | 46 |
| Local Cost | 37,665.8 US Dollars (4 Million Yen) |

Participating countries' side:

| | |
|--------------|----|
| Participants | 48 |
|--------------|----|

(5) Participant Countries

Republic of Azerbaijan, Bosnia and Herzegovina, Republic of Kazakhstan, Kyrgyz Republic, Republic of Tajikistan, Turkmenistan and Republic of Uzbekistan.

2. Evaluation Team

Members of Evaluation Team JICA Turkey office
(Consigned to the local consultant: Kentkur Co., Ltd.)

Period of Evaluation 17 September 2001 - 12 November 2001 **Type of Evaluation:** Terminal Evaluation by Overseas Offices

3. Results of Evaluation

3-1 Summary of Evaluation Results

(1) Relevance

The health sector of participating countries was in a transition and restructuring phase, and needs for strengthening of health-related activities and audio-visual communications to efficiently disseminate information on health are increasing. The Training was in line with the needs of the participating countries. The general policy of the General Directorate of MCH/FP under the Turkish Ministry of Health was aimed at fostering health professionals on mother-child health and family planning in other countries and the Official Development Assistance of the Government of Japan are aimed at actively supporting the socioeconomic development of developing countries. Therefore, the Training was relevant to these policies of the Turkish side and the Japanese side.

(2) Effectiveness

The participants were satisfied with the Training. According to the answers of ex-participants to the questionnaire survey, they utilized the attained knowledge and techniques in their daily work. Therefore, the Project Purpose, "Skills of participants in preparing Audio-Visual materials are developed" was fully accomplished.

(3) Efficiency

The Outputs settled before the commencement of the Training were efficiently accomplished because the quality of the input (capability of lecturers, training facility and textbook, curriculum and managing methods) was appropriate. However, some

problems were observed. The efficient management of the lectures was affected by translating Turkish into English and Russian. Some of the staff of the Communication Center left the center because of dissatisfaction with the treatment of staff. The distribution of expenditures among the implementing and cooperative agencies was not consistent with the initial budgetary plans, and the distribution rate of Turkey became lower than what was initially planned. However, these did not largely affect the efficiency of the Training as a whole.

(4) Impact

As for the achievement of the Overall Goal; "Family Health Education by Audio-Visual Communications is activated in the invited countries", there was an indicator of the status of the utilization of the technology and knowledge attained in the course. Half of the respondents (ex-participants) said that they extensively utilized the technology and knowledge, and the remainder of the respondents indicated that they utilized the technology and knowledge to some extent. On the other hand, there were some problems. The financial resources and equipment were insufficient. Some of the ex-participants changed jobs after the Training. Because monitoring after the participants returned home and the feedback of monitored results were not conducted well, it cannot be determined whether the important assumption for the Overall Goal, "Organizations that participants work for have the policy to activate the family health education activities" was fulfilled or not. Therefore, it was difficult to determine to what extent the Overall Goal was achieved.

Other positive impacts included: The leadership of Turkey among its surrounding countries was promoted in the field of health education. The Ministry of Health, MCH/FP accumulated experiences as the training implementing organization. Based on this experience and the acquired skills, with the cooperation with the U.N. Population Fund (UNFPA), the Ministry of Health, MCH/FP has commenced similar training programs.

(5) Sustainability

The current organizational system of MCH/FP was not established very well and, therefore, the burden is being carried by the institutors (staff of communications centers). The working condition for staff of the centers is not appropriate; this may cause some of the staff to leave the centers. Furthermore, the financial capacity of the Ministry of Health was limited, and financial support from other organizations was needed to continue the Training for a while. To solve these problems, MCH/FP has considered making the communication centers financially independent international training centers. If this is successful, the organizational and financial sustainability will be strengthened.

The technical equipment at the Communication Center will soon be too old to be usable. Unless periodical maintenance, repair and upgrading are made, the equipment might fail during future training, which most likely will hinder technical sustainability.

The participating countries wished to continuously participate in the Training in the future, and those needs would positively affect the sustainability of the training.

3-2 Factors that promoted realization of effects

(1) Factors concerning Planning

N/A

(2) Factors concerning the Implementation Process

- 1) Japanese Short-term Experts gave lectures at the Training as well as advice including on training plan, management and technical advice to the Communication Center.
- 2) The high-tech equipment provided in the Project Type Technical Cooperation was helpful for the implementation of the training program.
- 3) Experience and information gained from similar training programs at the Communication Center conducted with the support of other international agencies such as UNFPA and WHO.

3-3 Factors that impeded realization of effects

(1) Factors concerning Planning

Lack of adequate discussion and planning with the related organizations at the planning stage of the Training caused the problems described under (2).

(2) Factors concerning the Implementation Process

- 1) General Directorate of MCH/FP always made decisions at the General Directorate level, which caused delayed work, and there was a difference between the General Directorate and JICA in drawing up and allocating the budget, which impeded the smooth and efficient implementation of the Training.

- 2) The participating countries tended not to comply with the qualifications specified for participants. The unstable organizational and personnel structure in the participating countries also presented a problem. These made it difficult to achieve the complete process of informing institutions of the target group and the selection of appropriate trainees.
- 3) Administrative staff of the General Directorate of MCH/FP was unable to coordinate and manage the training program to an acceptable level.
- 4) Monitoring and feedback after the training participants returned home were not implemented systematically, which hindered improvement of the training program and development of strategies for sustainability.
- 5) Mainly the Turkish side did not make the budget available on schedule, which resulted in the expense allocation rate for Turkey being lower.
- 6) The role of the steering meeting (management committee) as the medium of adjustment for the related organizations was disregarded; therefore, at times, adjustment and communication were insufficient.

3-4 Conclusion

The training was implemented to the 48 participants for four years, and the Project Purpose, "Skills of participants for preparation of Audio-Visual materials are developed", was fully achieved and the Training was efficient. However, lack of an adequate planning process with the participation of the pertinent organizations (MCH/FP, TICA, JICA) caused a lack of adequate applicant communications and a systematic monitoring and feedback mechanism after training participants returned home. Because there was a problem of an undeveloped monitoring scheme, it was difficult to evaluate the degree of the impact. In other words, it was difficult to evaluate to what extent "upgraded participants' skills" were attained, and to what extent the Overall Goal, "Family Health Education by Audio-Visual Communications is activated in the invited countries", was achieved through the Training.

The participating countries wished to continuously participate in the Training in the future, which means the background for sustainability of the Training has been established; however, it is necessary to reexamine the current organizational and financial scheme to ensure the organizational and economical sustainability of the Training.

3-5 Recommendations

- (1) To continue the Training, it is necessary to keep the following points in mind at the planning stage.
 - 1) Participating countries should have a policy to utilize the results of the Training to increase the family health education activities in respective countries and take the related necessary measures (such as a long-term position for the ex-participants to disseminate the knowledge acquired within the training program in each country), which should be prerequisites for participating countries. Therefore, it is recommended that the JICA Overseas offices research the impacts of the Training and periodically report the results.
 - 2) It is necessary to secure core personnel to promote and utilize the acquired skills in each participating country.
 - 3) The object, output, activities, schedule and responsibility should be clearly defined at the planning stage.
 - 4) It is recommended that Training for English-speaking countries (Bosnia-Herzegovina) and Russian-speaking countries be implemented separately to avoid the trouble during lectures arising from the translations into English and Russian.
 - 5) It is recommended that a team to conduct studies to the participating countries be dispatched in order to inform the executives of each country of the Training in detail, and reach a consensus with the countries regarding the selection of appropriate participants from organizations that will be able to conduct family health training programs and campaigns as a means of disseminating the outputs of the training program.
 - 6) It is advisable from the viewpoint of greater efficiency to consider reducing the number of training days, cutting non-high priority expenses, reducing in external commitments and sharing of transportation costs by participatory countries.
 - 7) Conduct the campaign in the participating countries (Ministry of Health will cooperate by dispatching staff) in addition to the Training in Turkey should also be considered.

(2) It is recommended that the Steering Committee be held periodically and that it be given decision-making power.

(3) It is necessary for the Communication Center to become an independent organization, to have its own budget and be allocated an appropriate number of personnel to strengthen the institution. It is recommended that the staffs of the Center who are lecturers on the Turkish side be given the opportunity to learn up-to-date skills through the Training or through the dispatch of an expert. It is also necessary to allocate a sufficient budget for maintenance, management and renewing the equipment at the Center.

3-6 Lessons Learned

- (1) PDM (Project Design Matrix) should be prepared in cooperation with the related organizations at the planning stage to avoid confusion regarding each of the related organization's responsibility, the Project Purpose, Overall Goal and definition of the target group.

(2) Homecoming Monitoring and a feedback scheme should be established to confirm the degree of the impact after the participants return home.

3-7 Follow-up Situation

After having confirmed that the implementing structure on the Turkish side is enforced, the further cooperation in this field is to be considered.