

# Terminal Evaluation

## Africa

### 1. Outline of the Project

**Country:**

Republic of Kenya

**Project title:**

Blood Screening for Viral Hepatitis and HIV/AIDS

**Issue/Sector:**

Health/ Medicare

**Cooperation scheme:**

Third-Country Training Program

**Division in charge:**

Second Medical Cooperation Division,  
Medical Cooperation Department

**Total cost:**

265 Million Yen

**Period of Cooperation**

Fiscal Year 1998 - 2002

**Partner Country's Implementing Organization:**

Kenya Medical Research Institute (KEMRI)

**Supporting Organization in Japan:**

None

**Related Cooperation:**

Project-type Technical Cooperation; "Research and Control of Infectious Diseases Project in Kenya", "Research and Control of Infectious Diseases Project in Kenya : Phase 2".

### 1-1 Background of the Project

Kenya Medical Research Institute (KEMRI) is the main medical research institute in Kenya. The Government of Japan, cooperating with the Government of Kenya, implemented research on diseases such as hepatitis and diarrhea through the project "Research and Control of Infectious Diseases Project" from May 1990 to April 1996. The Government of Japan through JICA conducted both the research and development of a kit for screening blood for Viral Hepatitis and then transferred the techniques of mass production of the kit in Kenya. The screening kit has been officially approved by the Ministry of Health, Kenya, and its production and sales are underway.

Based on this achievement, the Government of Kenya requested the Government of Japan to provide cooperation in the control of HIV/AIDS and Acute Respiratory Infection (ARI), the major causes of infants' mortality. Project-type Technical Cooperation "Research and Control of Infectious Diseases Project: Phase 2" was implemented from June 1996 for the development of basic research on HIV/AIDS, Virus Hepatitis and ARI with the objective of reflecting the results of the research in countermeasures for infectious diseases (early detection of infection and safe blood supply) in Kenya.

On the other hand, patients with Virus Hepatitis and HIV/AIDS have been increasing not only in Kenya but also in other African countries, and upgrading diagnostic techniques for the diseases and safe blood transfusions are urgent needs in these countries. A blood screening test in particular at the time of blood transfusion is an absolute requirement in any country; however, the rules and diagnostic capabilities vary in each country and in some cases even within each medical (inspection) organization. Therefore, the Government of Japan and the Government of Kenya recognize the necessity of eliminating the difference and enhancing blood safety.

Under these circumstances, with the results of the long-term cooperation to KEMRI, "Blood Screening for Viral Hepatitis and HIV/AIDS" was implemented to disseminate the skills for inspection and diagnosis of Virus Hepatitis and HIV/AIDS to Kenya's surrounding countries.

### 1-2 Project Overview

The Government of Japan through JICA implemented the Training in Kenya to the medical experts related to blood transfusions and blood screening to upgrade diagnostic techniques on infectious diseases and the knowledge of offering safe blood in each participating country.

## (1) Overall Goal

Safe blood is used for blood infusions in the participating countries.

## (2) Project Purpose

Participants upgrade their knowledge and skills in setting up blood screening and contribute to systemizing and upgrading capacity in the participants' respective countries in setting up blood screening programs.

## (3) Outputs

- 1) Participants understand the theory and standards of blood safety through a variety of blood screening skills.
- 2) Participants learn the skills of blood screening tests and their evaluation.

## (4) Inputs

Japanese side:

Short-term Experts	10
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Kenyan side:

Counterparts (participants)	46
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Local Cost	(about 13 Million Yen)
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## (5) Participant Countries

Botswana, Ethiopia, Eritrea, Ghana, Lesotho, Malawi, Namibia, Nigeria, Seychelles, South Africa, Swaziland, Uganda, Tanzania, Zambia, Zimbabwe, Mauritius and Kenya.

## 2. Evaluation Team

### Members of Evaluation Team

JICA Kenya office  
(Consigned to the local consultant: Reachout Consultancies Ltd.)

### Period of Evaluation

### Type of Evaluation:

Terminal Evaluation by Overseas Offices

## 3. Results of Evaluation

### 3-1 Summary of Evaluation Results

#### (1) Relevance

HIV/AIDS and Virus Hepatitis are the major epidemic infectious diseases in the participating countries (Sub-Saharan African countries including Kenya), transfusion of unscreened blood is the second main route of infection, and the need for countermeasures is a common issue in all of the countries. In the Project, the seminar for blood screening was implemented. According to the answers to the questionnaire from the ex-participants, they "strongly agree (46%)" or "agree (46%)" that the Project was highly relevant. The prime task of KEMRI was to ensure a decrease in infectious diseases such as HIV/AIDS and Virus Hepatitis, and KEMRI develops a kit for blood screening. The objective of KEMRI is consistent with the Project Purpose, "safe blood use".

#### (2) Effectiveness The effectiveness of the Project is recognized as follows:

- 1) Based on e interviews to the participants, 100 percent of respondents gained a knowledge of blood safety at more than "satisfactory" levels, and more than 90 percent of the respondents judged that they had acquired the knowledge necessary for the preparation of Virus Hepatitis tests (HapCell II tests) and the interpretation of the results of HIV/AIDS tests (HIV-PA tests) at more than "satisfactory" levels.
- 2) About 90 percent of 78 participants evaluated that they "strongly agree (53%)" or "agree (36%)" that the training course was good as a whole, which means that the training course was successfully implemented as a whole.

3) On the other hand, 15 respondents mentioned that the on-site training was "inadequate", and as the termination came nearer, the satisfactory level of the participants became lower.

### (3) Efficiency

There was no major problem with the lecturers or the contents of lectures, though some issues were pointed out about the implementation of the training, such as the selection of participants and financial assistance as follows:

- 1) Selection of participants: Many of the participants fulfilled the qualifications of the training course, but some were unqualified as blood tests implementers or could not participate in the lectures on the functions of blood banks because the adjuster of the training course could not communicate with the related persons of the participating countries.
- 2) Curriculum: The contents of lectures covered a wide range and were appropriate and easy to understand. However, as for the on-site training, some participants pointed out that there was not enough time for blood screening inspection.
- 3) Lecturers: As lecturers knowledgeable in blood safety were gathered from KEMRI, private sector organizations, University of Nairobi, related NGOs and the United Nations and the facilitators supported and allocated the lecturers appropriately for all the courses, the quality of the lectures was always high.
- 4) Financial assistance: As funding was not appropriately transmitted because of the differences in accounting between JICA and KEMRI, there were cases where necessary materials or services were not procured in a timely manner.

### (4) Impact

- 1) According to the answers to the questionnaire from the ex-participants, 54 percent of the respondents mentioned that the Project brought tremendous improvement to the assurance of blood safety. Although the 54 percent is only a little more than half of the respondents and is far from being enough, the Project as a whole did accomplish the Overall Goal of the Project.
- 2) According to the answers to the questionnaire from the higher-ups of ex-participants, seven out of nine respondents mentioned that the ex-participants "upgraded their knowledge and techniques" on "knowledge of blood safety", "preparation of blood screening tests" and "interpretation and reporting laboratory results". Five respondents evaluated the Project as improving the skills of blood screening in their organizations.

### (5) Sustainability

Having returned home, many ex-participants disseminated the acquired knowledge and techniques in the Project to coworkers.

## 3-2 Factors that promoted realization of effects

N/A.

## 3-3 Factors that impeded realization of effects

N/A.

## 3-4 Conclusion

The Project was a typical Third-country Training Program as it follows the practice of disseminating an inspection kit along with the knowledge and techniques attained through research and development in the field of health care by the implementing organization. The means of training was realistic. However, there has been insufficient assessment of the training content and access to the inspection kit manufactured at KEMRI in participants' countries, although many of the countries would show interest in this regard. On the other hand, the training itself was highly evaluated by the participants and the outcomes of the training on the blood screening can be recognized.

## 3-5 Recommendations

- (1) Policy makers and technical engineers should discuss the technical issues of blood safety and ways to deal with the issue in each country, and then the contents of the Training should be continuously improved.
- (2) KEMRI and JICA should play a leadership role in organizing networks among those who are related to fostering necessary personnel so that they will be able to solve the technical issues of blood testing.
- (3) On-site forums to policy makers, local JICA officers and those who are related to blood test services should be implemented as one of the follow-up activities to fully utilize the outcomes of long-time cooperation to KEMRI and to disseminate the inspection and diagnosis techniques of blood testing for Virus Hepatitis and HIV/AIDS to the surrounding countries.
- (4) It is recommended that more trainees be accepted from participating countries to gain continuous positive impacts from the Training. The Training should be implemented on test kits developed by KEMRI as well as other kits attainable by the participating countries.

**3-6 Lessons Learned**

N/A

**3-7 Follow-up Situation**

N/A