

# Terminal Evaluation

## Asia

### 1. Outline of the Project

**Country:**

Thailand

**Project title:**

Population and Reproductive Health Research

**Issue/Sector:**

Health

**Cooperation scheme:**

Third-Country Training Program

**Division in charge:**

Indo-China Division, Regional Department I(Southeast Asia and Indo-China)

**Total cost:****Period of Cooperation**

FY 1999 - 2003

**Partner Country's Implementing Organization:**

Institute for Population and Social Research (IPSR) of Mahidol University

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

#### 1-1 Background of the Project

Reproductive health came to the forefront of the population development scheme in Thailand due to the need for planned population growth and the HIV/AIDS pandemic. Reproductive health gained global attention after the 1994 International Conference on Population and Development (ICPD) where representatives of member countries approved a "Program of Action" to improve reproductive health. Hence, it was necessary that each member country learned and improved the necessary skills in order to implement the Action Program. It was important for the developing countries to formulate policies, to plan programs on reproductive health, and to build the capacity for evaluation. The preliminary survey was implemented in Thailand in May 1999, to discuss the framework of the training course, utilizing JICA's Third-country Training Program on population and reproductive health research. Both the Japanese government and the Thai government agreed that favorable policy/methods should be adopted for the success of the training course.

Upon the agreement, the Institute for Population and Social Research (IPSR) of Mahidol University, with the technical cooperation from the government of Japan and the support from the Department of Technical and Economic Cooperation (DTEC) of the government of Thailand, implemented a training course once a year in FY 1999 to 2003.

#### 1-2 Project Overview

A training course was implemented at IPSR for Thailand to disseminate the knowledge and skills on population and reproductive health to Asia and African countries to cope with the worsening population problems.

##### (1) Overall Goal

Ex-participants contribute to improve the population and reproductive health situation of the respective participating countries.

##### (2) Project Purpose

To provide academic excellence and higher quality human resource development in the area of population and reproductive health research.

##### (3) Outputs

- 1) The participants gain knowledge on substantive issues related to population and reproductive health.
- 2) The participants understand quantitative and qualitative research methods essential for personnel working in the field of population and reproductive health.
- 3) The participants are able to apply the knowledge and research skills to improve the population and reproductive health plans and policies in their countries.

#### (4) Inputs

Japanese side:

Local Cost 23 million yen

Thailand's Side:

Lecturers 24/year

Facilities and Equipment

Local Cost 4.1 million yen

#### (5) Participant Countries

Indonesia, The Philippines, Cambodia, Laos, Vietnam, Myanmar, China, Bhutan, Bangladesh, Nepal, Sri Lanka, Ethiopia, Uganda, Tanzania, Zambia and Zimbabwe

## 2. Evaluation Team

### Members of Evaluation Team

JICA Thailand Office: Commissioned to the following three person;  
Team Leader/General: Marc Van der PUTTEN, Professor, Chulalongkorn University  
Reproductive Health Area: Usanee KRITSANAVARIN, IC Net Thailand Co. Ltd.  
Population Planning Area: Noriko KIMBARA, IC Net Thailand Co. Ltd.

### Period of Evaluation

4 February 2003 - 21 March 2003

### Type of Evaluation:

Terminal Evaluation

## 3. Results of Evaluation

### 3-1 Summary of Evaluation Results

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#### (1) Relevance

According to the report generated by the preliminary survey team, the participating countries (African and Pacific/Southeast Asian countries) had needs for technical transfer of expertise knowledge, research techniques, and the planning techniques of program/policy in the concerned fields as well as network building among specialists of respective countries. This training could meet their needs. However, some lecturers pointed out that there was some discrepancy between the academic contents of the training in the concerned fields and the participants' needs for training. There was no reference such as documentation containing detailed descriptions on the expertise needs on reproductive health by participating countries. The objectives and purposes of the training course should have been resettled after the needs of the participating countries had been clarified more strictly.

#### (2) Effectiveness

According to the questionnaire survey and group interviews with the ex-participants and their supervisors, expected effects were mostly accomplished. Based on the ex-participants' questionnaire survey, 65.0% of the respondents "mostly understood" the contents of the training, and 27.5% of the respondents "understood in some degree". However, some pointed out the discrepancy of the purpose of training and the actual contents of the training and the insufficiency of the training period on research/analysis methods. Hence the ex-participants did not necessarily evaluate their satisfaction and adequacy of the curriculum highly.

#### (3) Efficiency

The works and knowledge levels varied among participating countries, and the participants were not necessarily selected with the objectives and purposes put into consideration. For the short-term group training course, it was necessary to narrow down target participants, techniques and subjects for training in order to transfer techniques more effectively. Meanwhile, lecturers of IPSR had enough expertise knowledge and skills in the field of population planning and reproductive health.

#### (4) Impact

Seventy-five participants from nineteen countries received training for four years. Out of those participants, 74.0% engaged in the works in the fields of population and reproductive health. The training course dealt with the advocacy in the field of reproductive health, and the participants enhanced their consciousness on the subject. However, it would be difficult for the participating countries to improve the current status of their own countries independently. For instance, according to the questionnaire survey to the ex-participants, 91.3% of the respondents indicated that they disseminated the acquired knowledge in their home countries, but only 33.3% among them did this at an official place such as seminars and workshops. The follow-up system for the ex-participants of the training has not been established, so there was no chance to develop a network among participants (between countries or within the respective countries).

#### (5) Sustainability

IPSR was an independent institute of Mahidol University, having the authority equivalent to the university faculty. The members of the staff at IPSR were experts of various fields, and over 90% of the academic staff holds a Doctoral Degree. IPSR is financially autonomous, therefore not directly subsidized by the Thai government. The training received funding from JICA and DTEC. Although there was a plan that DTEC gradually increase its level of cost to offer support in the beginning, it was not realized because of the economic crisis in Thailand.

The majority of ex-participant respondents to the questionnaire pointed out that they intended to utilize the transferred techniques to their work in the future. However, the shortage of budget and personnel and the insufficient understanding of the corresponding fields by the policy makers made it difficult to utilize the techniques in their daily works.

### **3-2 Factors that promoted realization of effects**

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#### (1) Factors Concerning the Planning

The training supports the Plan of Action of ICPD by advocating a paradigm shift from family planning to a more holistic reproductive health perspective. The program provides opportunities for the participants not only by broadening their perspectives but also by offering capacity building in basic research skills and project development.

#### (2) Factors concerning the Implementation Process

The expertise and techniques of the IPSR in the field of Population and Reproductive Health as well as the network among national and international experts played a major role to assure the quality of the training.

### **3-3 Factors that impeded realization of effects**

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#### (1) Factors Concerning the Planning

- 1) The Joint Coordination Committee only functioned on the ad hoc base at the director's level especially when discussion was necessary. Therefore, no regular meetings prior to or following the training were held to support monitoring and address problems.
- 2) It was not feasible to address the program goal and purpose as a short-term training program. In addition, no follow-up mechanism was in place to support the application of achieved skills and networking.
- 3) The subject on population planning and reproductive health is broad as the academic fields deal with a wide range of issues. The program made an attempt to transfer knowledge and techniques in many fields in a short period of time, therefore, the content areas could not be covered in detail, and the process of skill building was limited as well.

#### (2) Factors concerning the Implementation Process

- 1) The selection criteria failed to describe a well-defined target of the training. Therefore, the participants selected had a wide range of educational backgrounds, professional functions and English proficiency as well as a wide range of research experience/skills, which lowered the efficiency of the training.
- 2) The policy adopted for participant selection resulted in a single participant per country in most situations, which limited the scale of impact to each participating country.

### **3-4 Recommendations**

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- (1) It is necessary to implement thorough preliminary survey to understand the needs of respective countries more accurately.
- (2) It is necessary to clarify the purpose of the training course and to organize the curriculum coping with its purpose.
- (3) It is necessary to develop a clear selection criterion so that the needs/attribution of participants are focused and the training could be implemented efficiently.

(4) It is necessary to distribute the guidelines for applicants of the training 180 days prior to the commencement of the training (60 days in the past), considering the time required by the diplomatic channel.

(5) It is necessary for JICA to reconfirm the function of the Joint Coordination Committee in order to be able to appropriately cope with the various problems occurring during the monitoring or training period.

(6) It is necessary to establish the follow-up mechanism to support the participants after the termination of the training.

(7) It is necessary to advice/support the beneficiary countries in project management. It may be effective to introduce the method of "project cycle management".

### **3-5 Lessons Learned**

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(1) Population planning and reproductive health is a large sector dealing with a wide variety of issues. Therefore, it is not feasible to deal with all the related issues in the short course of the training programs. It may be appropriate to aim at the capacity building in specific sectors in the field of reproductive health such as the health of young people, infectious diseases of reproductive organs, gender and sexuality, planned childbirth, healthy pregnancy etc.

(2) An ideal strategy for short courses is to organize the program in a city hotel, with an academic and administrative team that stays full time at the hotel for the duration of the program. The lecturers and management staff staying together would make the effective implementation of training possible.

(3) The training in educational facilities is usually focused on teaching the importance of knowledge and conceptual skills. For training directly connected to the actual work, the acquisition of techniques should be emphasized.

### **3-6 Follow-up Situation**

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N/A