

Terminal Evaluation

Africa

1. Outline of the Project

Country:

Kenya

Project title:

Kenya Medical Training College Project

Issue/Sector:

Health/ Medicare

Cooperation scheme:

Project-type Technical Cooperation

Division in charge:

Second Medical Cooperation Division, Medical Cooperation Department

Total cost:

220 million yen

Period of Cooperation

1 March 1998 - 28 February 2003

Partner Country's Implementing Organization:

Kenya Medical Training College (KMTC)

Supporting Organization in Japan:

National Institute of Public Health, International University of Health and Welfare

Related Cooperation:

Grant Aid; "The Project for the Rehabilitation and Improvement of the Kenya Medical Training College"

1-1 Background of the Project

The Kenya Medical Training College (KMTC) was established as a training center for co-medical personnels (including medical assistant, nurse, clinical technician, radiological technician etc.) other than doctors in 1927. Recently, about 80% of co-medical personnel engaged in regional medical health care in Kenya are graduates of the College. To reply to the needs to foster co-medical personnel with high capacity, KMTC endeavored to develop textbooks and the capacities of teaching staff; however, as KMTC had not accumulated know-how, KMTC faced difficulties in improving the situation by itself. Under these circumstances, the government of Kenya requested the government of Japan the technical cooperation to improve the teaching staff's capability, so that KMTC could provide higher quality education as a training school for co-medical personnel.

1-2 Project Overview

To improve the educational capacity of KMTC as an educational institution, the project implemented the training of teaching staff on teaching methods and organizing textbooks as well as a survey for the improvement of educational curriculum and development, and upgrading of textbooks.

(1) Overall Goal

Competent co-medical personnel are produced in the Republic of Kenya.

(2) Project Purpose

The educational capacity of KMTC is improved.

(3) Outputs

- 1) Teaching staff have competency in teaching methodology.
- 2) Curriculum of the college are reviewed.
- 3) Development and utilization of teaching materials are improved.
- 4) Teaching staff participate in seminars to acquire core knowledge and skills in various health-related techniques.
- 5) More teaching staff have competency in teaching and conducting research.

- 6) IT infrastructure is established and maintained.
- 7) Lecturers attain IT literacy.
- 8) Educational environment is improved and maintained.
- 9) Middle Level Manpower Training (MLMT) program for teaching staff is given annually.

(4) Inputs

Japanese side:

Long-term Experts	12	Equipment	133 million yen
Short-term Experts	25	Local Cost	42 million yen
Trainees received	18		

Kenya's Side:

Counterpart	18		
Land and Facilities			
Local Cost	14 million yen		

2. Evaluation Team

Members of Evaluation Team	<p>Team Leader/General : Kiyomichi FUJISAKI, Managing Director, Medical Cooperation Department, JICA</p> <p>Public Health: Nobuyoshi WATABIKI, Senior Researcher, Department of Human Resources Development, National Institute of Public Health</p> <p>Health Care Information: Ryoza HOSOI, Professor, International University of Health and Welfare</p> <p>Cooperation Planning: Keiichi TAKEMOTO, Staff, Second Medical Cooperation Division, Medical Cooperation Department, JICA</p> <p>Evaluation Analysis: Ryosuke SASAKI, Senior Staff, Deloitte Touche Tohmatsu</p>
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Period of Evaluation	10 September 2002 - 2 October 2002	Type of Evaluation:	Terminal Evaluation
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3. Results of Evaluation

3-1 Summary of Evaluation Results

(1) Relevance

Health resources were being shifted from curative services to preventive/promotional/rural health services in Kenya, and KMTC produced co-medical personnel who were engaged in health services, especially in rural areas. Regarding this point, the project purpose and overall goal are consistent with the needs of beneficiaries as well as the national policy of Kenya.

(2) Effectiveness

The project purpose will be achieved by the completion of the project. There was little difference among the achievement degree of each output. The utilization of IT infrastructure and teaching aids were remarkably enhanced owing to the sufficient amount of inputs by the project. The counterparts have acquired the skills to review and develop the curriculum. As for the core knowledge and skills of medical techniques, improvement was observed only in limited fields such as Nursing, Community Nutrition, and Environmental Health Science, because the long-term experts were not dispatched as planned in the original schedule, to all fields lectured at the College. However, the effects of the project at the Environmental Health Science department were limited.

(3) Efficiency

Quantity, quality and the timing of inputs were appropriate, and they were efficiently utilized in most aspects. However, a part of the equipment provided by the Japanese side was not sufficiently maintained because of the time lag between the dispatch of the experts and the delayed procurement of expendable supplies by the Kenyan side. However, the counterparts and experts effectively communicated with each other, and their commitment to the project has considerably facilitated the implementation of the project. In addition, what had been achieved through the coordination with the VVOB was a minimization of the overlap of interventions from both sides. However, as KMTC was supported by not only VVOB (Belgian NGO), but also by the Department for International Development of United Kingdom (DFID), both counterparts and Japanese experts needed more efforts to coordinate with other donors, such as the VVOB and DFID, along with a constant exchange of information.

(4) Impact

Availability of IT infrastructure including access to the Internet enhanced the sources of educational information at KMTC. The teaching staff was now able to gather advanced information on health that could be utilized in their classes. It has also expanded the opportunity for the teaching staff to engage in distance learning for higher degrees. The overall goal, however, needs several years to be achieved. Because the contents of the project are for human resources development, it requires a long-term perspective to realize its impact.

(5) Sustainability

The present management system of counterparts is effective in sustaining project activities since KMTC has long-term experience as an educational institution. In the meantime, the counterparts have obtained new knowledge and skills to a substantial level to provide better educational services through the technical transfer of the project. In terms of financial aspects, the counterparts need to assure that an adequate fund is allocated to each department to maintain equipment provided by the Japanese side. In particular, IT infrastructure requires careful attention to secure the availability of financial resources as the cost of maintaining the IT infrastructure is also high.

3-2 Factors that promoted realization of effects

(1) Factors Concerning the Planning

As the project adopted the establishment of an IT department and Support Service Room (SSR), the project could provide KMTC with cross-cutting support services, making the most of the expertise of long-term experts, which enhanced the efficiency of the project.

(2) Factors concerning the Implementation Process

- 1) The flexible response of KMTC made it possible to establish the IT department with huge reorganization.
- 2) Both the counterparts and the experts could communicate with one another smoothly as they were both aggressively involved in the project by allocating full-time staff such as business coordinators and MLMT program coordinators.

3-3 Factors that impeded realization of effects

(1) Factors Concerning the Planning

In some occasions, the Japanese experts were dispatched with delay, and also experts specializing in other fields were dispatched. However, no immediate adjustment was made to the activity plan of the project. Therefore, progress was limited in the fields where the dispatch was not conducted as planned, which had adverse effect to the project as a whole.

(2) Factors concerning the Implementation Process

The delivery of some equipment was made in advance, in spite of the delay of the dispatch of some Japanese experts owing to the recruitment problem. This resulted in mismatch, i.e., equipment that had little to do with the technical transfer through the project. There was another case where there was a gap between the dispatch of the experts and the arrival of equipment, and that the experts could not adequately instruct the counterparts how to use the equipment prior to the installation of the equipment, which hampered its maintenance and management.

3-4 Recommendations

- (1) In order to facilitate the procurement of equipment provided by the Japanese side, both the Japanese experts and the counterparts should make the list of necessary equipment together, and agree upon the items.
- (2) In order to reinforce the function of the IT department and SSR, a self-reliant system should be established within KMTC so

as to cope with equipment maintenance, trouble shooting and provision of technical support, so that the Kenyan side can autonomously cope with those activities.

(3) The Kenyan side should conduct MLMT courses more than twice a year and make the most of the group training method to minimize the gap between other teaching institutions. In addition, for a future plan, it is preferable that MLMT courses should be implemented as a part of continuous education not only to teachers, but also to other health workers.

(4) The Kenyan side should assure adequate allocation of necessary budget to each department of KMTC in order to maintain equipment provided through the project. Concerning IT infrastructure, the Kenyan side should foresee, not only the cost for maintenance and renewal of the hardware, but also the expansion of the system.

(5) The Kenyan side should seek as much as possible the consistency of counterparts for the long term experts, because the changes of counterparts may interfere with the smooth technical transfer of the experts.

3-5 Lessons Learned

(1) In order to dispatch the long-term experts timely, targeted departments should be carefully selected in accordance with the availability of the experts.

(2) The related personnel of a project should be aware of the changing needs as the project progresses, and should reflect the needs flexibly to the activities.

3-6 Follow-up Situation

N/A.