

## Summary of Final Evaluation

I Summary of Project	
Country: The Republic of Philippines	Project Name: Tuberculosis Control Project
Issue/Sector: Health	Type of Assistance: Technical Cooperation Project
Division in charge: Infectious Disease Control Team. Group IV (Health II), Human Development Department	Total cost: 552,086,000Yen
Duration of Project (R/D) September 1 <sup>st</sup> 2002~ August 31 <sup>st</sup> 2007	Partner Country's Implementing Organization: Infectious Disease Office (IDO), Department of Health(DOH), National Center for Disease Prevention and Control (NCDPC), Research Institute of Tropical Medicine (RITM), National Tuberculosis Reference Laboratory(NTRL).
	Supporting Organization in Japan: Ministry of Health and Labor, Research Institute of Tuberculosis, JATA
<p>1. Background of the Project</p> <p>The Philippines has been listed as one of the 22 Tuberculosis (TB) high burden countries ranking 9th in terms of its incidence in the world and 3rd in the Western Pacific Region of World Health Organization (WHO). The TB statistics in the Philippines show TB as the 6th leading cause of morbidity and mortality. National Tuberculosis Control Program (NTP) is one of the topmost prioritized programs of the Department of Health (DOH) in the Philippines.</p> <p>JICA started its technical cooperation project to promote DOTS (Directly Observed Treatment, Short-course) with the objective to improve the public health in Cebu Province. A model was developed to test the feasibility and effectiveness of the new NTP policies and revised guidelines which followed the new "DOTS strategy" developed by WHO.</p> <p>The TB Control Project was formulated in 1997 as the second phase of the JICA project. The project was expected to expand Cebu's experience to the rest of the provinces and cities in Region 7, Laguna Province in Region 4a, Bulacan and Nueva Ecija in Region3, Rizal in Region4A and Eastern Samar in Region 8. In these project areas, the NTP target of 85% cure rate was accomplished within two years of the project implementation.</p> <p>The current Project started on September 1<sup>st</sup> 2002, with cooperation period of five years. The Project Purpose is set as "Quality National Tuberculosis Program (NTP) is sustainably managed". As the current Project is in the third phase of JICA's technical cooperation for TB control in the Philippines, the focus is on the sustainability of NTP compared to the previous projects.</p> <p>This time, a final evaluation was carried out from February 11<sup>th</sup> to February 27<sup>th</sup> 2007 by Japan International Cooperation Agency to acknowledge and analyze the accomplishments of the Project.</p>	
<p>2. Project Overview</p> <p>(1) Overall Goal</p> <p style="padding-left: 20px;">Tuberculosis in the Republic of the Philippines is controlled.</p> <p>(2) Project Purpose</p> <p style="padding-left: 20px;">Quality National Tuberculosis Control Program (NTP) is sustainably managed.</p>	

- (3) Outputs
- 1) Quality DOTS implementation is ensured, through capacity building activities and strengthening monitoring and supervision system.
  - 2) Quality laboratory services become available nationwide by the formation of the network.
  - 3) Capacity to plan and conduct operational researches, such as Nationwide drug Resistance Survey (DRS), to monitor the program is strengthened.

(4) Inputs (As of January 2006)

Japanese Side :

- Long term Expert※ 5
- Provision of Equipment 87,528,000 JPY
- Short term Expert※ 50
- Local cost support including the In-country Training 74,710,000 JPY
- Training for Counterparts in Japan 13

\*: The experts provided after November 2004 are categorized into “short-term experts” following the change of implementation system of JICA.

Filipino Side :

- Identification of counterparts personnel 18
- Allocation of budget 60,973,000 JPY
- Office space for experts
- Drugs and Other supplies and consumables

II Evaluation Mission

Members of Evaluation Team	Tuberculosis control	Dr. Mitsuo ISONO	Special Advisor, Group III (Health I), Human Development Department, JICA
	Evaluation Planning	Mr. Tsuyoshi YUSA	Staff, Infectious Disease Control Team, Group IV, Human Development Department, JICA
	Evaluation Analysis	Ms. Nami HIRAI	Consultant, Pacific Consultants International

Period of Evaluation	11 <sup>th</sup> of February 2007 ~ 27 <sup>th</sup> of February 2007.	Type of Evaluation	Final Evaluation
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Results of Evaluation

1. Summary of Evaluation Result

(1) Relevance

The Project is considered to have high relevance.

In the Japanese ODA policy described in the country-specific plan for the Philippines, the assistance for health sector is defined as a priority area. Within the health sector, TB control is one of the prioritized areas in the health sector.

In the Medium-Term Development Plan 2004-2010 of the Government of the Philippines, TB control has been given highest priority requiring nationwide intervention.

To achieve the target, the main focus of the past five years of NTP in the Philippines has been on the expansion of Quality DOTS nationwide. The design and focus of the Project has also been suitable for

this purpose.

## (2) Effectiveness

The effectiveness of the Project is considered to be high.

NTP has achieved the Case Detection Rate (CDR) of 70%. The cure rate has shown continuous improvement through the last 5 years of DOTS implementation, approaching the national target of 85%. The Treatment Success Rate (TSR) has already reached 89% which is higher than the global target of 85%. Thus, it can be concluded that NTP has successfully achieved the global target of TB control. The below outputs especially contributed to achieving the Project Purpose.

- Output 1: Development of the supervision manual “Handbook for Quality DOTS” distributed to all districts.
- Output 1: Selecting the National Capital Region (NCR) as one of the DSAs. This has made a significant contribution to the improvement of overall TB situation in the Philippines for close to one eighth of the entire population of the Philippines reside in the NCR.
- Output 2: Conducting training of laboratory technicians for sputum smear examinations leading to the improvement of case detection.
- Output 2: Introducing and establishing the EQA system including the development of EQA manual to enhance the quality of sputum smear examinations.

## (3) Efficiency

Judging from the achievements of the outputs, the input was provided efficiently.

Especially, the quality of the Japanese experts dispatched was adequate for the project implementation.

Reappointment of Chief Advisor and Team Leader of the Project in the fourth year of the Project can be mentioned as a factor that impeded further efficiency of the Project. Although briefing was conducted to each successor, the findings of the mid-term evaluation was not sufficiently transferred which caused a part time confusion amongst the Japanese experts.

## (4) Impact

The overall goal of the Project is expected to be achieved by the year 2010.

Improvement of TB situation shown by the TB program indicators (CDR, TSR, etc) in the NCR implies significant contribution to the overall improvement of TB situation in the Philippines. NCR consists of close to one eighth of the total population of the country, thus progress made in NCR directly influences the overall TB situation in the country.

As a ripple effect, the NTRL staffs trained in the Project contributed to JICA’s “third country training (a regional technical assistance in human resource development based on the success made through a bi-lateral cooperation by JICA)”. Medical and laboratory technologists from the ASEAN countries have participated in the training. So far, three (3) batches on the basic sputum smear examinations training and one (1) batch on the TB laboratory Quality Assurance training have been conducted.

## (5) Sustainability

Judging from the technical achievements made by each health service implementing institutions and its organizational strengthening, the sustainability will be possible to a certain level. For further sustainability, continuous funding as well as sustaining the technical level of NTP is necessary. It is

also important for NTP to expand the EQA system as well as to acquire technical expertise in the field of infant Tuberculosis, TB/HIV, MDR-TB and so on.

#### 1) Government Commitment

Based on the newly revised and published “Manual of Procedures 2005, 4th edition” in which the Project has contributed, the effort to control TB is expected to continue. NTP has made continuous effort to gather nationwide report on DOTS services. NTP has also shown effort in securing sufficient budgeting for related workshops and meetings. However, it should also be noted that the commitment of the local government, especially for securing budget, is not necessarily high.

#### 2) Technical capability will become sustainable

In the Philippines, DOTS has been implemented nationwide, and NTP has made significant progress so far. Recognizing the effectiveness of monitoring and supervision to achieve high cure rate, NTP is expected to further expand and sustain quality DOTS implementation by strengthening monitoring and supervision nationwide. NTP has acquired the ability to make concrete plans to implement EQA system nationwide. The achievement of low major error rate shows the technical sustainability of the Program.

Furthermore, NTP played a major role in the Drug Resistance Survey and has recognized the importance of Operational Researches. NTP has organized number of Operational Researches on their own showing high ownership of Program management.

#### 2. Factors that promoted realization of effects

The realization of effects was in large due to the high commitment of the Philippine side to pursue TB control activities and smooth communication amongst donors in tackling the agenda.

#### 3. Factors that impeded realization of effects

The one barrier for further efficiency was the decentralization movement in the Philippines. Although the commitment of the Central government was high, central government did not have authority over the local government units. Therefore, it was difficult for the Project to constantly secure commitment and sufficient budget from the local governments.

#### 4. Conclusion

NTP has achieved great success during the past 5 years. It has reached the CDR of 70% which is set as the national target as well as the global target which is shown in Global Plan to STOP TB 2006-2010 and Stop TB Initiative.

As for the current cure rate of 83%, this has continuously progressed in the last 5 years of DOTS implementation and is nearly approaching the national target of 85%. The TSR has already reached 89% which is higher than the global target of 85%. Thus, it can be concluded that NTP has successfully achieved the global target of TB control. Although there has been adequate assistance by related organizations, this success is for the most part dependent on the tremendous effort by the Philippine Government (DOH and Local Governments).

The Project has contributed to this success especially by;

- developing “Handbook for Quality DOTS”
- Conducting trainings of TB coordinator to strengthen their abilities for monitoring and supervision in the DSAs, where improvement is still needed
- Conducting training of laboratory technicians for sputum smear examinations which plays an important role in TB control program
- Introducing and establishing EQA system including the development of EQA manual to enhance the quality of sputum smear examinations

<Output 1>

The project activities clearly indicated high efficiency and effectiveness of strengthening supervision and monitoring system in enhancing the NTP. Following facts indicate that the method used by the project which included on job training for supervisors has been highly rated by DOH and partners.

- Although the handbook for quality DOTS made by the project will be distributed nationwide in near future, NTP included the contents of this handbook in the newly revised and published national guideline “Manual of Procedures 2005, 4th edition”.
- NTP conducted one training course outside of the DSAs to determine the operational feasibility of the handbook as well as the training method used, e.g. on-the-job training.
- NTP is planning for the trainings of NTP supervisors nationwide using this handbook.

<Output 2>

NTP has successfully achieved the target by establishing the EQA system in all provinces. Although their still remains a challenge in implementing the EQA system nation wide as there is limited funding and human resources in the local settings, NTP has acquired the ability to make concrete plans for EQA implementation. The achievement of low major error rate shows the technical sustainability of the Program. It should be also be highly evaluated that NTP attained the ability to plan and conduct in-country trainings for sputum smear examinations by themselves as a result of activities conducted by NTP with assistance of the Project.

<Output 3>

All operational researches are still in finalization of the report at this stage. Through the project activities NTP came to recognize the importance of operational research as a tool to improve the TB control program. NTP has improved its ability to identify research agenda, and carried out several operational researches.

In conclusion, relevance, effectiveness and efficiency of the Project can be highly rated. The achievement of the NTP indicates strong impact of the Project. Although several challenges still remain, with current performance of the NTP and partners supporting it, it is confirmed by both side that sustainability after the completion of the Project could be highly expected.

5. Recommendations

- NTP should continue to sustain quality DOTS implementation by strengthening monitoring and supervision nationwide. There should also be technical support by the Project to the NTP workers on orientation/trainings for the handbook.
- NTP should continue to maintain its coordination mechanisms among related organizations in order to maximize utilization of limited resources.
- DOH and Local Government Units (LGUs) should continue their advocacy activities to secure sufficient human and financial resources for TB control.
- NTP should try to strengthen its information system including those related to EQA activities to better analyze the implementation of the TB control programme.
- The Project should continue to provide technical assistance through training for the remaining untrained NTP staff in the DSAs.
- The Project should assist NTRL to strengthen EQA implementation within the cooperation period.
- The Project should finalize all three operational researches (“National Drug Resistance Surveillance on

Tuberculosis in the Philippines”, “Evaluation of Training on Sputum Smearing and Staining for Laboratory Aides in Quezon City” and “Evaluation of Monitoring and Supervisory Training for District Health Team in Quezon City”) and provide proper feedback to NTP.

#### 6. Lessons Learnt

- In order to build a model of EQA system and to expand it throughout the country, sufficient staffing, allocation of funding, and ensuring local government commitment are preconditions. Therefore, conducting awareness raising activities on a regular basis to local governments is essential. Also, it is important to enact laws and regulations to make the plan concrete.
- In order to reduce the risk of trouble in Project management, switching of principal experts should be limited as much as possible. When switching is necessary, it is important that the information and experience accumulated by the expert be briefed thoroughly to the successor.