

## 終了時評価調査結果要約表＜英文＞

I. Outline of the Project	
Country : Pacific region (Fiji, Cook, Kiribati, Marshall, Micronesia, Nauru, Niue, Palau, Samoa, Solomon, Tonga, Tuvalu and Vanuatu)	Project title : The Project for Strengthening Expanded Programme on Immunization in the Pacific Region
Issue/Sector : Health	Cooperation scheme : Technical Cooperation
Division in charge : Human Development Department, JICA Headquarters	Total cost : 0.65 billion Japanese Yen (Plan)
Period of Cooperation: 15 February 2005 – 14 February 2010 (R/D 15 February 2005)	Partner Country's Implementation Organization: Ministry of Health of 13 Pacific Island countries
<p>Related Cooperation Schemes: Grant Aid “the Project for Construction of the New Pharmaceutical Services Center” (1982-1984) Grant Aid for Infectious Diseases Prevention (2000-2012) Japan Overseas Cooperation Volunteers (JOCV)</p>	
<p>1 Background of the Project Japanese support to the Pacific Immunization Programme Strengthening (J-PIPS) commenced in 2005 and will be concluded in 2010. J-PIPS provides support to the regional framework of the Pacific Immunization Programme Strengthening (PIPS), thus, enabling PIPS member countries and partners to work together under common objectives, strategies and activities for the improvement of the regional immunization programme in the Pacific Island Countries (PICs). Under the PIPS framework, J-PIPS endeavours to enhance the capacities of the target countries in the following areas: planning and monitoring of immunization policy and programme; vaccine and cold chain management; injection safety and EPI disposal management; and outreach activities. In addition, J-PIPS plays a significant role in providing regional trainings in the target countries for trainers of in-country training at national and district levels. J-PIPS succeeds in increasing the capacities of EPI programme of its target countries resulting in the upgrade of the quality of each country's immunization programme.</p> <p>2 Project Overview (1) Overall Goal All children in the target areas are reached with potent vaccines according to the schedule.</p> <p>(2) Project Purpose All countries and areas have the capacity to independently manage the EPI programme, including vaccine, cold chain and injection safety and safe disposal of EPI wastes systems in line with the Pacific Immunization Programme Strengthening concept.</p> <p>(3) Outputs 1) Capacity of the Ministry of Health in the planning and monitoring of the EPI programme performance is improved. 2) The regional training system on vaccine, cold chain and injection safety management is established and is functional within the Pacific. 3) Vaccine forecasting, management and cold chain systems are improved in each country/area. 4) Injection safety and waste disposal management capabilities are improved in each country. 5) EPI Outreach activities are improved in each country/area.</p> <p>(4) Inputs <u>Japanese side</u> Expert : Total 158.6 Man/Month Equipments: Total 96 million Japanese Yen (Vaccine refrigerators, vaccine, incinerator, vehicles,</p>	

etc)  
Operational cost: Total 88 million Japanese Yen

PICs side

(Fiji)

Counterpart for Japanese experts: Six (6) staff

Project office

Cost of in-country training

(Other 12 countries)

Counterpart for Japanese experts: 4.7 staff per a country (ranging 2-13 staffs per country)

All or a part of cost for in-country training

II. Evaluation Team

Members of Evaluation Team	Name (Responsibility)	Affiliation
	Tomohiko SUGISHITA (Team Leader)	Senior Advisor (Health sector) JICA Headquarters
	Yoshikuni SATO (EPI)	Medical Officer Expanded Programme on Immunization World Health Organization Western Pacific Regional Office
	Shizu WATANABE (Evaluation Plan)	Associate Expert Human Development Department JICA Headquarters
	Hirofumi TSURUTA (Evaluation and Analysis I)	Chief Consultant Binko International Ltd.
	Junko SATO (Evaluation and Analysis II)	Senior Researcher TAC International
Period of Evaluation	29 June 2009 ~ 21 July 2009	Type of Evaluation : Terminal evaluation

III. Results of Evaluation

1. Summary of Results of Evaluation

1) Relevance

For the following reasons, J-PIPS is judged to be of high relevance.

- J-PIPS was initiated and conducted in accordance with the Pacific Immunization Programme Strengthening (PIPS) framework. PIPS is a coordination mechanism established in 2004 that helps strengthen maternal and child health services through the EPI programme. From the initial phase of J-PIPS, all PIPS member countries and partners made the firm commitment to provide J-PIPS with the necessary support required to achieve their common vision.
- J-PIPS is in line with global and Japan's foreign aid policies proposed by the Okinawa Infectious Disease Initiative in 2000 and the Health and Development Initiative launched by Japan in 2005. Also, as endorsed by the G8 Hokkaido Toyako Summit, Japan has demonstrated its continuing commitment and support to strengthening health systems and promoting maternal, infant and child health care. With regard to the Pacific Island Countries, Japan and the Pacific Islands Forum addressed the importance of promoting human security, specifically focusing on capacity development to ensure greater access to the health in 2009.
- J-PIPS was implemented by Nagasaki University, an academic institution highly and internationally acclaimed with a long history of international cooperation in the field of tropical medicine and public health as well as a wide range of experiences in human resource development.

2) Effectiveness

The effectiveness of this project is judged to be high to a certain degree. Only two countries could achieve all the indicators of the Project Purpose, however, when looking at the results comprehensively, the five outputs are almost achieved as planned. Therefore, it can be said that the capacity of EPI management, which contributes to achieve the Project Purpose, has been improved.

An important contributing factor to its effectiveness is the maximum use of the PIPS mechanism, complemented with available resources provided by JICA volunteers and other schemes.

### 3) Efficiency

Seen from the achieved output, the input was conducted efficiently.

- Activities of J-PIPS have been implemented as planned in general. Adequate input such as provision of equipments, regional trainings and direct guidance of the experts strengthened the capacity of EPI staff in vaccine management and cold chain maintenance which is necessary to achieve the outputs. In addition, painstaking guidance through the trainings could develop not only the capacity of individuals but also that of organization.
- J-PIPS efficiently applied approaches to maximize input by quality utilization of existing resources provided by the Government of Japan and NGOs, such as, Rotary International, Japan.

### 4) Impact

The possibility that the overall goal will be achieved is high.

Achievement of overall goal is to be judged by the indicator, “coverage of EPI immunization is maintained at stable level > 80%”. At the time of terminal evaluation, 10 countries out of 13 have achieved the target “fully immunized children is maintained at >80% in all the provinces/districts”. In addition, WHO/UNICEF Joint Report indicates the improvement of EPI programme in the target countries by DTP coverage and DTP1-DTP3 dropout rate. From the facts above, it is assumed that the overall goal will presumably be achieved by 2015.

Also, the following impact is recognizable from the implementation of the project:

- Improvement of cold chain coverage has led to increase immunization coverage.
- The role of staff for EPI and/or cold chain has been clarified and the importance of their role has been recognized. As a result, staffs for EPI and cold chain are assigned in 11 countries respectively and its number is increasing.
- The regional training has been highly appreciated and recognized within the PIPS mechanism, hence, countries beyond the project scope showed keen interest in dispatching their trainees to participate in the training.

### 5) Sustainability

Sustainability has been encouraged and gradually achieved, in spite of facing some challenges.

- J-PIPS has promoted to raise the awareness of the need to develop policies for sustainability. In fact, development of EPI policies regarding vaccine management, cold chain maintenance, safety injection and waste management have been promoted.
- The persistent shortage of human resources in the Pacific region is a major challenge recognized by all the stakeholders, however, J-PIPS has developed and mobilized human resource through accelerated regional activities such as the Regional Strategy on Human Resources for Health 2006-2015.
- Identification and mobilization of financial resources are major challenges being encountered, as well by member countries and partners. Hence, a collective action in this regard by both should be undertaken to address said challenges.
- Since the technical skills of EPI management is being improved day by day, the technical updates, which the experts have provided, will be a new challenge after the termination of the project.

## 2. Factors that promoted realization of effects

The Project Design of J-PIPS and its aggressive utilization enabled it to raise the effectiveness and efficiency of J-PIPS activities. First, under the PIPS mechanism, J-PIPS worked collaboratively to strengthen the immunization programme in the Pacific Island Countries.

Second, with the support of PIPS member countries and partners, J-PIPS was able to fully utilize the regional mechanism in its activities during the Project period. J-PIPS, in combination with regional and in-country approaches, was able to gradually develop, enhance and improve human resource capacities on EPI management. Additionally, training of health personnel coupled with the provision of cold chain equipments were also unique to the J-PIPS Project Design. Third, partner coordination through the PIPS mechanism is also an integral part of the Design in order to increase synergy with other organizations. Lastly, J-PIPS has provided the Pacific Island countries the opportunity to share their knowledge and experiences on their EPI programme and developed solidarity among thirteen target countries such as regional training mentioned below. These four undertakings have remained the core of activities of J-PIPS in the last

### 3. Factors that impeded realization of effects

The countries, comprised of small islands, are distantly distributed in the region that J-PIPS experts experience difficulties in undertaking specific activities. In view of this situation, there are gaps in-between needs of the countries, and specific response to each country is required. During the field survey conducted by the evaluation team, it has been entirely discussed how to address a more collective intervention required by each country.

### 4. Conclusion

J-PIPS is expected to be successfully completed in February 2010. In the last five years, J-PIPS contributed to the immunization programme in the target countries under the PIPS framework. All countries now have enhanced capacities to manage their own immunization programme. While progress has been achieved in various degrees among the 13 countries, the continuing commitment by member countries and partners under the PIPS mechanism remains. The valuable impact made by J-PIPS should be maintained in order to continue improvement of maternal and child health, and overall health systems strengthening in the Pacific region.

### 5. Recommendations

[To J-PIPS]

1. J-PIPS should further develop a concrete road map towards a sustainable immunization programme in a self-reliant manner. Countries requiring health systems strengthening should be the main focus of project interventions during the J-PIPS remaining period in order to help minimize the gap among the J-PIPS target countries. Vanuatu and Solomon Islands are possible two countries that require more opportunities for capacity development in order to address problems in their health systems.
2. J-PIPS should focus more on the Government of Fiji's capacity development on EPI management to enable the country to take a leadership role under the PIPS framework. The organizational structure of the Government of Fiji is expected to be able to independently manage regional trainings and technical updates in the area of cold chain maintenance and vaccine management. It is also hoped that the training management and secretariat function under the PIPS mechanism will be standardized, institutionalized and utilized to address demands from member countries and partners.
3. This is the opportunity to inform policy-makers of the significance of the immunization programme and encourage them to mobilize optimal resources in order to sustain project outcomes. The valuable results derived from the project operational activities will convince policy-makers of the necessity to support future programme activities that will strengthen overall health systems.

[To JICA HQs and Country Offices]

1. JICA Country Offices should pay more attention on how to further enhance project achievements in consultation with J-PIPS and target countries. All concerned offices are encouraged to seek opportunities to help maximize the achievements of J-PIPS.
2. JICA HQs and Country Offices are advised to advocate and promote lessons-learned by J-PIPS, which entailed a unique regional approach in close collaboration with UN and other international agencies.
3. JICA HQs and Country Offices should seriously consider the follow-up technical assistance to

be incorporated into the regional training programme, training programme held in Japan or the dispatch of Japan Overseas Cooperation Volunteers to promote project achievement, particularly, in the area of cold chain maintenance and vaccine management.

[Other]

It is essential for the PICs to establish within the region a mechanism for human resource development and resource mobilization in EPI management. In this connection, PIPS is a unique but essential coordination mechanism with strong commitments from member countries and partners. It should be strategically empowered with a secretariat function and supportive staff that will help to strengthen the immunization programme at the regional level. Additionally, it could be advantageous to have a business plan under the joint framework, funding mechanism and operational guidance built into the mechanism. At this stage, it is advisable to undertake discussions on several regional issues to optimize sustainable immunization programme activities including bulk purchase mechanism and outbreak preparedness.

#### 6. Lessons Learned

1. The PIPS mechanism clearly demonstrates how member countries and partners can work together under a joint framework. Also, working with PIPS gave various opportunities to J-PIPS to maximize project outcomes, while effectively minimizing operating/transaction costs.
2. The PIPS mechanism enabled J-PIPS to foster a synergetic effect between a regional-centered approach and country-centered approach that impacted considerably on the overall capacity development in EPI management complemented by collaboration with UN agencies under a common vision.
3. J-PIPS demonstrated an excellent example where an academic institution was able to provide maximum project outcome in the field of technology, research, teaching skills and human and interpersonal relationships.
4. An immunization programme can never be effective without a functioning health system. However, J-PIPS exhibited that EPI management, as an initial entry point, was a remarkable intervention in strengthening the health systems. J-PIPS has successfully given light to essential system bottlenecks that have been often neglected, such as cold chain maintenance and vaccine management, waste management and micro-planning. The professional and technical expertise of J-PIPS and as a catalyst has been highly recognized and cherished by most of the member countries.

#### 7. Follow-up Situation

Any follow-up of technical cooperation has not been planned yet so far, as of August 2009, but the possibility of third-country programme and the dispatch of the short-term experts to demanded countries will be considered.