

Annex I. Composition of the Japanese Evaluation Team

Leader: Dr. Makoto ATOH	Deputy Director General, National Institute of Population and Social Security Research
Member: Dr. Shigeki MINOURA	Director, Department of Obstetrics and Gynecology, International Medical Center of Japan
Member: Dr. Azumi TSUGE	Associate Professor, Department of Sociology Faculty of Sociology and Social Work Meiji Gakuin University
Member: Ms. Aiko IJIMA	Director, Human Resource Development Division Japanese Organization for International Cooperation in Family Planning
Member: Mr. Tsutomu NAKANO	Deputy Director, Second Medical Co- operation Division, Medical Cooperation Department, Japan International Cooperation Agency
Member: Ms. Kimiko ABE	Social Sector Specialist International Development Center of Japan

Annex II. Member List of Joint Coordinating Committee

Japanese -side

Dr. Tokiko SATO,	Chief Technical Advisor
Mr. Shuji SUEYOSHI,	Population Expert
Dr. Takeshi YAMAGUCHI	Gynecology Expert
Ms. Yoko HARADA	WID Expert
Ms. Naoto WATANABE,	Short-term Expert(Income Generation)
Mr. Kei MATSUDA,	Short-term Expert(I.E.C.)
Mr. Isao NOZAKI,	Cordinator
Ms. N. Muhreiz,	Executive Secretary

Jordanian-side

Dr. Mohammed SARAYRAH,	Secretary General, NPC
Dr. Amir BAKIR,	Deputy Secretary General, NPC
	Project Manager
Dr. Osama BADRAN,	Director of MCH, MOH
Dr. Akef AZAB,	Deputy Director of MCH, MOH
Mr. Abed A. MALKAWI,	Population C/P, NPC
Ms. Huda KARAKI,	WID C/P, JOHUD
Ms. Salwa HINNI,	Income Generation C/P, JOHUD

Annex III. Project Design Matrix for Terminal Evaluation

Narrative Summary		Objectively Verifiable Indicators	Means of Verification	Important Assumption
The Project on Family Planning and Women in Development in the Hashemit Kingdom of Jordan				
Project Design Matrix(PDM) for Terminal Evaluation (PDM-E)				
<b>Overall Goal</b>				
Population growth in the Southern Ghor District, Karak Govenorate reduced	Total fertility rate will be reduced to the national level by the year 2000.	- Demographic and Health Survey	-A national population policy is stable in Jordan.	
<b>Project Purpose</b>				
Family planning practice is promoted at the Southern Ghor District, Karak Governorate	Contraceptive Prevalence Rate (CPR) increases to the national average by the year 2000.	-Project Survey Report	-Forced immigration to the project area does not take place. -Foreign labors are not introduced to the project area.	
<b>Output</b>				
1 Information on demographic, health and socio-economic situation is enhanced to be used for activities of the project.	1a. A baseline survey is completed by March 1998. 1b. The information is utilized for activities for the other outputs of the project by the end of the project.	-Project Survey Report -Project Activity Records	-Contraceptives required by the resident in the project area are available. -No. of female OBGY doctors, female (aid) nurses, midwives is not reduced.	
2 People's awareness on health and socioeconomic issues at the project area is enhanced.	2a. The number of people who have attended awareness programs increases by 50% by the end of the project. 2b. The number of awareness programs at the JOHUD/CDC increases. 2c. People's positive change in the attitude toward health and socio-economic issues is recognized	-Project Activity Records - Project Survey Report		

Narrative Summary	Objectively Verifiable Indicators	Means of Verification	Important Assumption
3 Family planning and reproductive health services at the project area are strengthened.	3a. Aid nurses' attendance at training courses cover over 80% by the end of the project	-Project Course Records	
	3b. At least 6 courses are conducted on FP/Reproductive Health per annum.	-Project Course Records	
	3c. The number of clients who utilize MCH services increases by 30%.	-Registration records of the health centers/clinics.	
4 Women at the project area participate in economic activities.	4a. The number of women participating in the income generating activities increases by 30% by the end of the project.	-Project Activity Records	
	4b. The products from the activities are on the market and sold.	-Project Activity Records	
	4c. The participated women in the activities to obtain income.	-Project Activity Records (Follow-up records)	
5 Cooperation among health/social service sectors is strengthened.	5a. The number of activities jointly implemented by different concerned parties increases from 0 to 5 per annum by the end of the project.		
	5b. Patient referral is practiced in every health facilities by the end of the project.		

Narrative Summary	Input		Important Assumption
Activities	Japanese side	Jordanian side	
1-1 A baseline survey is conducted			-Custom clearance and trans-
1-2 Database is established	Japanese side	1 Assignment of counterparts	portation are not delayed.
	1 Dispatch of experts		-Market prices of the products
2-1 Work plan for awareness raising is	(a) Long-term	2 Arrangement of buildings and facilities	produced by the income generating
prepared.	Chief Advisor, Coordinator,		activities are not dropped.
2-2 Target group for the seminar is	Population, FP/RH, WID	3 Sharing of expenses for project	-Medical personnel in the fields of
identified	(b)Short-term	implementation	Reproductive Health and Family
2-3 Awareness seminars are prepared.	Family Planning, IEC,		Planning are not reduced in the
- contents of the seminars are decided.	EQP Maintenance		project area.
- lecturers are decided.	Nursing Training, Others		
- IEC materials for the seminars are			
prepared	2 Counterpart training		
- target groups is informed of the	(a) Training in Japan		
seminar	C/P training in Japan		
2-4 CDPs are selected and trained			
2-5 Awareness seminars are implemented.	3 Provision of material and equipment		
2-5 Follow-ups for the seminars are			
conducted			
3-1 Equipment of the MC Training Center at			
Karaku is upgraded			
3-2 Work plans for the training are			
prepared.			
3-3 Training programs on Reproductive			
Health are designed for medical			
personnel working at the primary health			

3-4 Training programs on F/P and			
Reproductive Health are designed for			
MCH staff.			
3-5 Training of medical personnel and			
health administrators are conducted in			
Jordan and also in Japan			
3-6 A vehicle for home visits			
is provided to the MCH centers.			
3-7 Equipment and tools of the health			
facilities are upgraded.			
4-1 Women's needs for income generation			
activities are identified.			
4-2 Work plans for income generation			
activities are prepared.			
4-3 Business plans for activities are			
prepared.			
4-4 Local social and economic centers			
useful to the project are identified.			
4-5 Lecturers are recruited, materials			
are prepared.			
4-6 Participants are selected.			
4-7 Training are implemented.			
4-8 A Porper management system			
Is established for these women to			
continue to the economic activities, such			
as provision of supervison			
			Precondition
			-Opposition from the resident in the
			project area are not very strong.

## Annex IV-1. List of Dispatched Japanese Experts

### 1. Long Term Experts

(1) Dr. Tokiko Sato	(Chief Technical Advisor)	97.07.29. ~ 20.07.02.
(2) Ms. Taeko Kawamura	(WID)	97.07.08. ~ 99.07.07.
(3) Mr. Shuuji Sueyoshi	(Population)	97.07.08. ~ 99.12.31.
(4) Mr. Isao Nozaki	(Coordinator)	97.12.02. ~ 20.07.02.
(5) Dr. Takeshi Yamaguchi	(Obstetrics/Gynecology)	99.06.07. ~ 20.07.02.
(6) Ms. Yoko Harada	(WID)	99.06.08. ~ 20.07.02.

### 2. Short Term Experts

(1) Dr. Ryutaro Otsuka	(Population)	97.08.29. ~ 97.09.07.
(2) Dr. Yujiro Handa	(PCM)	97.09.21. ~ 97.10.10.
(3) Dr. Toshiyasu Shimizu	(Obstetrics/Gynecology)	98.02.22. ~ 98.04.21.
(4) Ms. Kiyoko Ikegami	(Reproductive Health)	98.04.09. ~ 98.04.29.
(5) Ms. Yumiko Tanaka	(WID)	98.04.25. ~ 98.05.16.
(6) Ms. Kahoru Tanno	(Midwifery)	98.07.15. ~ 98.11.06.
(7) Mr. Kei Matsuda	(I.E.C.)	98.08.05. ~ 99.02.04.
(8) Dr. Toshiyasu Shimizu	(Obstetrics/Gynecology)	99.02.02. ~ 99.03.03.
(9) Dr. Naoto Watanabe	(I.G.)	99.05.01. ~ 99.10.30.
(10) Mr. Kei Matsuda	(I.E.C.)	99.10.01. ~ 20.03.31.

**Annex IV-2. List of Counterpart Personnel**

(Name)	(Field)	(Organization)	(Duration)
(1) Dr. Amir Bakir	(Project Manager	NPC	97.07.01. ~
(2) Dr. Akef Azab	(Mother & Child Health)	MOH/MCH	98.03.03. ~
(3) Dr. Nasar Amarin	(Mother & Child Health)	MOH/Karak MCH	99.10.04. ~
(4) Mr. Abed Malkawi	(Population)	NPC	99.08.22. ~
(5) Ms. Huda Karaki	(WID)	JOHUD	98.04.01. ~
(6) Ms. Salwa Hinni	(I.G.)	JOHUD	99.06.01. ~



**Annex IV-3. List of Counterpart Personnel who attended counterpart training in Japan**

(Name)	(Field)	(Duration)
(1) Dr. Hyam Hameyah	(Reproductive Health)	97.08.19. ~ 97.09.14.
(2) Dr. Naim Al Ahmad	(Reproductive Health)	97.08.19. ~ 97.09.14.
(3) Dr. Akef Azab	(Mother & Child Health)	98.03.03. ~ 98.03.23.
(4) Ms. Sawsan Shawaureh	(FP)	98.05.08. ~ 98.06.20.
(5) Dr. Mohanna Khatab	(Obstetrics/Gynecology)	98.09.08. ~ 98.10.09.
(6) Dr. Osama Badran	(Mother & Child Health)	99.02.22. ~ 99.03.09.
(7) Mr. Abed Malkawi	(Population)	99.08.22. ~ 99.09.25.
(8) Dr. Abdullah Shawaureh	(Mother & Child Health)	99.10.04. ~ 99.11.06.
(9) Dr. Nasar Amarin	(Mother & Child Health)	99.10.04. ~ 99.11.06.

Annex IV-4. List of Main Equipment and Materials Provided by the Government of Japan

<FY.1997>

Ultrasound, Fetal Doppler, Stethoscope, Baby scale, Autoclave, Air Conditioner, Examination Couch(for Gynecology), Obstetric Delivery Table, Micro-bus, Mini-van, A.V. related Equipment, Sewing Machine, Copy machine, etc.

Total 28,000,000 Japanese Yen

<FY.1998>

Land Cruiser, Pick-up, Personal Computer, AV related Equipment, Copy machine, Air Conditioner, Magnel Kit, Breast Cancer Model, Anatomical Model, Vacuum Cup, Educational Video, AV related Equipment, Laboratory Equipment (Clinical Chemistry Analyser, Blood Gas Analyser, etc.), Infant Warmer, Operating Table, Operating Light, Anesthesia Apparatus, etc.

Total 39,000,000 Japanese Yen

<FY.1999>

Two Trucks(Pick-up), Sewing machine, Steam Iron, Cutting machine, Bakery Equipment, Goats, Honey-bee Hives, Green house, Drip Irrigation System, Plastic Recycling Equipment, etc.

Total 35,370,000 Japanese Yen

FY	Code	Name of Equipment	Price	Qty	Place	Maintenance	Cf.
H09	H9-001	PC (Conpaq)	¥* 260	1	Project Office	fair	Ms.Kawamura, '97.7
('97)	H9-002	Monitor (CONPAQ, V70)		1	Project Office	fair	<do>
	H9-003	Printer (Canon, LBP-740)	124	1	Project Office	fair	<do>
	H9-004	Memory Card	33	1	Project Office	fair	<do>
	H9-005	PC-Soft (MS-ACCESS97)	30	1	Project Office	fair	<do>
	H9-006	PC (CONPAQ)	238	1	Project Office	fair	Dr.Sato, '97.7
	H9-007	Monitor(CONPAQ, V70)		1	Project Office	fair	<do>
	H9-008	Printer (Canon, LBP-740)	109	1	Project Office	fair	<do>
	H9-009	Memory Card	31	1	Project Office	fair	<do>
	H9-010	PC Soft (MS-ACCESS97)	27	1	Project Office	fair	<do>
	H9-011	PC Soft (EXCEL, Tokei 97)	26	1	Project Office	fair	<do>
	H9-012	PC (Power Mac, 7300/180)	248	1	Project Office	fair	Mr.Sueyoshi, '97.7
	H9-013	Monitor (Sonny, CDP-17 SF)	64	1	Project Office	fair	<do>
	H9-014	Printer (Canon, LBP-310)	51	1	Project Office	fair	<do>
	H9-015	Printer (Olimpus, Tellis 23)	50	1	Project Office	fair	<do>
	H9-016	Transformer (SVC-600ND)	24	1	Project Office	fair	<do>
	H9-017	PC Soft (MS OFFICE 4.2)	45	1	Project Office	fair	<do>
	H9-018	PC (Power Mac, 7300/180)	189	1	Project Office	fair	Mr.Nozaki, '97.12
	H9-019	UPS (UPS 1010 NPC)	111	1	Project Office	fair	<do>
	H9-020	Monitor (Sonny, CPD 17 FS 9)	70	1	Project Office	fair	<do>
	H9-021	Printer (Canon, LBP-320)	52	1	Project Office	fair	<do>
	H9-022	Transformer (Matsunaga, SVC-1500ND)	32	1	Project Office	fair	<do>
	H9-023	Telephone (Panasonic, KX-T30810)	JD 475	1	Project Office	fair	Procured, '98.1.21.
	H9-024	Telephone (Panasonic, KX-'7030) -1	120	1	Project Office	fair	<do>
	H9-025	Telephone (Panasonic, KX-'7030) -2	120	1	Project Office	fair	<do>
	H9-026	Fax (Panasonic, KX-F1050)	620	1	GS/CDC	fair	<do>
			¥* : 1000yen				

## 8-3 (List of Equipment above JD100.) (2)

FY	Code	Name of Equipment	Price	Qty	Place	Maintenance	cf.
H09	H9-027	Fax (Panasonic, KX-F1050)	JD 620	1	Project office	fair	procured : '98.1.21.
(FY97)	H9-028	Shredder (Pelican, Compact CC)	550	1	<do>	fair	procured : '98.1.6.
	H9-029	Punch (Open, PU-3000)	110	1	<do>	fair	<do>
	H9-030	PC Table -1	130	1	<do>	fair	procured : '987.12.14.
	H9-031	PC Table -2	130	1	<do>	fair	<do>
	H9-032	PC Table -3	130	1	<do>	fair	<do>
	H9-033	PC Table -4	130	1	GS Office	fair	<do>
	H9-034	Safty Box for Cash	145	1	Project Office	fair	procured : '97.12.6.
	H9-035	製本器	325	1	<do>	fair	<do>
	H9-036	Magic Board	110	1	Karak Training Hall	fair	procured : '98.3.22.
	H9-037	Video Corder (Sonny,	280	1	Project Office	fair	procured : '98.3.25.
	H9-038	OHP(Brown, EV-2000)	250	1	Karak Training Hall	fair	procured : '98.3.28.
	H9-039	Slide Projector(515AFM)	180	1	<do>	fair	<do>
	H9-040	Typewriter (Canon, AP7010)	300	1	<do>	fair	<do>
	H9-041	Radio Cassette (Samsung, SV-30G)	300	1	<do>	fair	<do>
	H9-042	TV (Samsung,5066 Z)	180	1	<do>	fair	<do>
	H9-043	Video Corder (Samsung, MAX445)	175	1	<do>	fair	<do>
	H9-044	cpy machine (canon, NP6112)	1,290	1	<do>	fair	<do>
	H9-045	ファクシミリ (シャープ, FO-455)	325	1	<do>	fair	<do>
	H9-046	Telephone (Acotel)	175	1	GS Office	fair	<do>
	H9-047	Office Desk	130	1	Karak Training Hall	fair	<do>
	H9-048	Copy machine (Canon,	6,550	1	Project Office	fair	FY97/procured'98.1.6
	H9-049	Copy machine (Canon,	6,550	1	GS/Office	fair	<do>
	H9-050	Micro Bus (Toyota, Coaster)	28,400	1	<do>	fair	FY97/procured'98.1.6.
	H9-051	Mini Van (Mitsubishi,Space Gear)	15,850	1	<do>	fair	<do>
	H9-052	Ultrasound Scanner	18,500		MOH/GS Hospital	fair	<do>

FY	Code	Name of Ewuiptment	Price	Qty	Place	Maintenance	cf.
H09	H9-053	Doppler -1	JD 520	1	MOH/GS Hospital	fair	FY97/procured'98.1.6.
(FY97)	H9-054	Doppler -2	520	1	<do>	fair	<do>
	H9-055	Doppler -3	520	1	MCH/GS	fair	<do>
	H9-056	Doppler -4	520	1	MCH/Mazraa	fair	<do>
	H9-057	Doppler -5	520	1	PHC/Mamoura	fair	<do>
	H9-058	Body Scale (for infant) -1	130	1	MOH/GS Hospital	fair	<do>
	H9-059	Body Scale (for infant) -2	130	1	MCH/GS	fair	<do>
	H9-060	Body Scale (for infant) -3	130	1	PHC/GS	fair	<do>
	H9-061	Body Scale (for infant) -4	130	1	PHC/Mamoura	fair	<do>
	H9-062	Body Scale (for infant) -5	130	1	MCH/Mazraa	fair	<do>
	H9-063	Body Scale (for infant) -6	130	1	PHC/Mazraa	fair	<do>
	H9-064	Body Scale (for infant) -7	130	1	PHC/Hadithe	fair	<do>
	H9-065	Body Scale (for infant) -8	130	1	PHC/Fifa	fair	<do>
	H9-066	Body Scale (for child) -1	150	1	MOH/GS Hospital	fair	<do>
	H9-067	Body Scale (for child) -2	150	1	MCH/GS	fair	<do>
	H9-068	Body Scale (for child) -3	150	1	PHC/GS	fair	<do>
	H9-069	Body Scale (for child) -4	150	1	PHC/Mamoura	fair	<do>
	H9-070	Body Scale (for child) -5	150	1	MCH/Mazraa	fair	<do>
	H9-071	Body Scale (for child) -6	150	1	PHC/Mazraa	fair	<do>
	H9-072	Body Scale (for child) -7	150	1	PHC/Hadithe	fair	<do>
	H9-073	Body Scale (for child) -8	150	1	PHC/Fifa	fair	<do>
	H9-074	Sterilizer -1	250	1	MOH/GS Hospital	fair	<do>
	H9-075	Sterilizer -2	250	1	MCH/GS	fair	<do>
	H9-076	Sterilizer -3	250	1	PHC/GS	fair	<do>
	H9-077	Sterilizer -4	250	1	PHC/Mamoura	fair	<do>
	H9-078	Sterilizer -5	250	1	MCH/Mazraa	fair	<do>

## 8 - 3 (List of Equipment above JD100.)

(4)

1999.9.30.

FY	Code	Name of Ewuiqment	Price	Qty	Place	Maintenance	cf.
H09	H9-079	Sterilizer -6	JD 250	1	PHC/Mazraa	fair	FY97/procured'98.1.6.
(FY97)	H9-080	Sterilizer -7	250	1	PHC/Hadithe	fair	<do>
	H9-081	Sterilizer -8	250	1	PHC/Fifa	fair	<do>
	H9-082	Delivery Bed -1	5,000	1	MOH/GS Hospital	fair	<do>
	H9-083	Delivery Bed -2	5,000	1	<do>	fair	<do>
	H9-084	Air-conditioner(Mitsubishi, 3T) -1	1,750	1	MCH/GS	fair	<do>
	H9-085	Air-conditioner(Mitsubishi, 3T) -2	1,750	1	PHC/Mamoura	fair	<do>
	H9-086	Air-conditioner(Mitsubishi, 3T) -3	1,750	1	MCH/Mazraa	fair	<do>
	H9-087	Air-conditioner(Mitsubishi, 3T) -4	1,750	1	PHC/Hadithe	fair	<do>
	H9-088	Air-conditioner(Mitsubishi, 3T) -5	1,750	1	GS/CDC	fair	<do>
	H9-089	Sewing Machine(Singer) -1	150	1	Hadithe/CDC	fair	<do>
	H9-090	Sewing Machine(Singer) -2	150	1	<do>	fair	<do>
	H9-091	Sewing Machine(Singer) -3	150	1	<do>	fair	<do>
	H9-092	Sewing Machine(Singer) -4	150	1	<do>	fair	<do>
	H9-093	Lock Machine(Singer)	330	1	<do>	fair	<do>
	H9-094	Magnel -1	千円 30	1	MOH/GS Hospital	fair	Ms.Ikegami/'98.3.
	H9-095	Magnel -2	30	1	<do>	fair	<do>
	H9-096	Video Camera (DCR-VX1000E)	297	1	Project office/NPC	fair	FY97/arrived '98.7.
	H9-097	Carrying case	24	1	<do>	fair	<do>
	H9-098	Camera Stand	27	1	<do>	fair	<do>
	H9-099	Video Cassette Player	323	1	<do>	fair	<do>
	H9-100	Video Cassette Recorder	420	1	<do>	fair	<do>
	H9-101	Editing Controller	91	1	<do>	fair	<do>
	H9-102	Microphone	29	1	<do>	fair	<do>
	H9-103	Microphone	29	1	<do>	fair	<do>
	H9-104	TV(KV-T29MF1)	86	1	<do>	fair	<do>



## 8-3 (List of Equipment above JD100.) (1)

1999.9.30.

FY	Code	Name of Equipment	Price	Qty	Place	Maintenance	cf.
H10	H10-001	Mobile Telephone(Nokia 5110) -1	JD 299	1	Project office	fair	procured/'98.7.29.
FY98	H10-002	Mobile Telephone(Nokia 5110) -2	299	1	<do>	fair	<do>
	H10-003	Mobile Telephone(Nokia 5110) -3	299	1	<do>	fair	<do>
	H10-004	Mobile Telephone(Nokia 5110) -4	299	1	GS Office	fair	<do>
	H10-005	Mobile Telephone(Nokia 5110) -5	299	1	<do>	fair	<do>
	H10-006	Human Model (Male)	¥* 98	1	MOH/GS Hospital	fair	Ms.Tanno/'98.9.
	H10-007	Human Model (Female)	98	1	<do>	fair	<do>
	H10-008	Womb Model	32	1	<do>	fair	<do>
	H10-009	Breast Cancer Model	34	1	Karak Training Hall	fair	<do>
	H10-010	Baby Model (Boy)	75	1	MOH/GS Hospital	fair	<do>
	H10-011	Baby model(Girl)	75	1	Karak Training Hall	fair	<do>
	H10-012	Pregnant Model	125	1	MOH/GS Hospital	fair	<do>
	H10-013	Embryo Model	35	1	<do>	fair	<do>
	H10-014	Sewing machine (Singer Model 974) -1	JD 130	1	GS/CDC	fair	FY98/
	H10-015	Sewing machine (Singer Model 974) -2	130	1	<do>	fair	<do>
	H10-016	Sewing machine (Singer Model 974) -3	130	1	<do>	fair	<do>
	H10-017	Sewing machine (Singer Model 974) -4	130	1	<do>	fair	<do>
	H10-018	Sewing machine (Singer Model 974) -5	130	1	<do>	fair	<do>
	H10-019	Sewing machine (Singer Model 974) -6	130	1	<do>	fair	<do>
	H10-020	Sewing machine (Singer Model 974) -7	130	1	<do>	fair	<do>
	H10-021	Sewing machine (Singer Model 974) -8	130	1	<do>	fair	<do>
	H10-022	Lock Machine (Singer Model 14U34B) -1	290	1	<do>	fair	<do>
	H10-023	Lock Machine (Singer Model 14U34B) -2	290	1	<do>	fair	<do>
	H10-024	Screen ( Sopar)	53	1	GS Office	fair	<do>
	H10-025	Slide Projectro (Brown/Novamat)	750	1	<do>	fair	<do>
	H10-026	Video Recorder (Sharp VC-SA55) -1	180	1	MOH/GS Hospital	fair	<do>
			¥* · 1000yen				



FY	Code	Name of Ewuipment	Price	Qty	Place	Maintenance	cf.
H10	H10-027	Video Recorder (Sharp VC-SA55) -2	JD 180	1	MCH/GS	fair	FY98/
FY98	H10-028	Video Recorder (Sharp VC-SA55) -3	180	1	MCH/Mazraa	fair	<do>
	H10-029	Video Recorder (Sharp VC-SA55) -4	180	1	MCH/Mamoura	fair	<do>
	H10-030	Video Recorder (Sharp VC-SA55) -5	180	1	CDC/GS	fair	<do>
	H10-031	Video Recorder (Sharp VC-SA55) -6	180	1	CDC/Mazraa	fair	<do>
	H10-032	Video Recorder (Sharp VC-SA55) -7	180	1	CDC/Hadithe	fair	<do>
	H10-033	Radio Cassette(Sharp CD-K477W	379	1	Project Office	fair	<do>
	H10-034	Flipchart Board -1	65	1	CDC/GS	fair	<do>
	H10-035	Flipchart Board -2	65	1	CDC/Mazraa	fair	<do>
	H10-036	Flipchart Board -3	65	1	CDC/Hadithe	fair	<do>
	H10-037	Flipchart Board -4	65	1	MCH/Mamoura	fair	<do>
	H10-038	Flipchart Board -5	65	1	MCH/Fifa	fair	<do>
	H10-039	White Board -1	48	1	CDC/GS	fair	<do>
	H10-040	White Board -2	48	1	CDC/Mazraa	fair	<do>
	H10-041	White Board -3	48	1	CDC/Hadithe	fair	<do>
	H10-042	White Board -4	48	1	MCH/Mamoura	fair	<do>
	H10-043	White Board -5	48	1	MCH/Fifa	fair	<do>
	H10-044	Poraroido Camera -1	150	1	Project Office	fair	<do>
	H10-045	Poraroido Camera -2	150	1	<do>	fair	<do>
	H10-046	Copy machine (Canon NP-6112) -1	950	1	CDC/Mazraa	fair	<do>
	H10-047	Copy machine (Canon NP-6112) -2	950	1	CDC/Hadithe	fair	<do>
	H10-048	Over Head Projector (Brown 2000)	472	1	Project office	fair	<do>
	H10-049	TV (Sharp 29RN1)	590	1	MOH/GS Hospital	fair	<do>
	H10-050	TV (Sharp 25RN1) -1	399	1	MCH/GS	fair	<do>
	H10-051	TV (Sharp 25RN1) -2	399	1	MCH/Mazraa	fair	<do>
	H10-052	TV (Sharp 25RN1) -3	399	1	MCH/Mamoura	fair	<do>

## 8 - 3 (List of Equipment above JD100.) (3)

1999.9.30.

FY	Code	Name of Ewuipment	Price	Qty	Place	Maintenance	cf.
H10	H10-053	TV (Sharp 25RN1) -4	JD 399	1	CDC/GS	fair	FY98/
FY98	h10-054	TV (Sharp 25RN1) -5	399	1	CDC/Mazraa	fair	<do>
	H10-055	TV (Sharp 25RN1) -6	399	1	CDC/Hadithe	fair	<do>
	H10-056	Video projector (Sony VPL-5600E)	3,850	1	Project Office	fair	<do>
	H10-057	Air Conditioner (Petra HPU25) -1	850	1	Karak Training Hall	fair	<do>
	H10-058	Air Conditioner (Petra HPU25) -2	850	1	<do>	fair	<do>
	H10-059	Air Conditioner (Petra HPU25) -3	850	1	<do>	fair	<do>
	H10-060	Air Conditioner (Mitsubishi/FDKN306)	1,290	1	MOH/GS Hospital	fair	<do>
	H10-061	Personal Computer (HP Vectra) -1	1,540	1	Project office	fair	<do>
	H10-062	Personal Computer (HP Vectra) -2	1,540	1	<do>	fair	<do>
	H10-063	Personal Computer (HP Vectra) -3	1,540	1	NPC	fair	<do>
	H10-064	Personal Computer (HP Vectra) -4	1,540	1	GS Office	fair	<do>
	H10-065	Vehicle (Toyota/Land Cruiser)	15,800	1	Project Office	fair	<do>
	H10-066	Vehicle (Toyota/Pick-up)	11,300	1	GS Office	fair	<do>
	H10-067	Camera (Nikon F 90X)	752	1	Project office	fair	<do>
	H10-068	Camer (Nikon F 50)	415	1	<do>	fair	<do>
	H10-069	Camera (Nikon Zoom M500) -1	187	1	<do>	fair	<do>
	H10-070	Camera (Nikon Zoom M500) -2	187	1	<do>	fair	<do>
	H10-071	Camera (Nikon Zoom M500) -3	187	1	<do>	fair	<do>
	H10-072	Operating Table (Castle 511)	10,450	1	MOH/GS Hospital	fair	<do>
	H10-073	Operating Light (Castle 2412W) -1	1,200	1	<do>	fair	<do>
	H10-074	Operating Light (Castle 2412W) -1	1,200	1	<do>	fair	<do>
	H10-075	Electrical Surgical Unit (Bovie 550035)	6,500	1	<do>	fair	<do>
	H10-076	Anesthesia Apparatus (AMS 18620)	10,500	1	<do>	fair	<do>
	H10-077	Patient Monitor (HP M3046A)	5,233	1	<do>	fair	<do>
	H10-078	Neonatal Resuscitation Unit (Ameda NIC03121)	3,105	1	<do>	fair	<do>

## 8 - 3 (List of Equipment above JD100.)

(4)

1999.9.30.

FY	Code	Name of Ewuipment	Price	Qty	Place	Maintenance	cf.
H10	H10-079	Vacuum Extractor (GIMA 28232)	JD 1,150	1	MOH/GS Hospital	fair	FY98/'99.8.
FY98	H10-080	Minor Operating Light (Castle 2412M) -1	1,200	1	<do>	fair	<do>
	H10-081	Minor Operating Light (Castle 2412M) -2	1,200	1	<do>	fair	<do>
	H10-082	Infant Warmer (Ameda MNC03421) -1	1,060	1	<do>	fair	<do>
	H10-083	Infant Warmer (Ameda MNC03421) -2	1,060	1	<do>	fair	<do>
	H10-084	Neonatal Incubator (Ameda CAR45521) -1	5,112	1	<do>	fair	<do>
	H10-085	Neonatal Incubator (Ameda CAR45521) -2	5,112	1	<do>	fair	<do>
	H10-086	Mobile Incubator (Ameda TRA7002)	6,875	1	<do>	fair	<do>
	H10-087	Phototherapy Lamp (Gineuri IP)	1,775	1	<do>	fair	<do>
	H10-088	Electrolyte Analyser (Coutler ILO5002015)	3,840	1	<do>	fair	<do>
	H10-089	Clinical Chemistry Analyser (Coutler I Lab300)	22,000	1	<do>	fair	<do>
	H10-090	Blood Gas Analyser (Coutler IL01620)	17,679	1	<do>	fair	<do>
	H10-091	Haematology Analyser (Coutler ACT8)	9,012	1	<do>	fair	<do>
	H10-092	Dry Chemistry Analyser (KDK SP-4420)	8,395	1	<do>	fair	<do>
	H10-093	Spygnomanometer (Mobile Aneroid 767) -1	100	1	<do>	fair	<do>
	H10-094	Spygnomanometer (Mobile Aneroid 767) -2	100	1	<do>	fair	<do>
	H10-005	Spygnomanometer (Mobile Aneroid 767) -3	100	1	<do>	fair	<do>
	H10-096	Spygnomanometer (Mobile Aneroid 767) -4	100	1	<do>	fair	<do>
	H10-097	Spygnomanometer (Mobile Aneroid 767) -5	100	1	<do>	fair	<do>
	H10-098	Patient Bed (Sunrise Easy Care300) -1	577.8	1	<do>	fair	<do>
	H10-099	Patient Bed (Sunrise Easy Care300) -2	577.8	1	<do>	fair	<do>
	H10-100	Patient Bed (Sunrise Easy Care300) -3	577.8	1	<do>	fair	<do>
	H10-101	Patient Bed (Sunrise Easy Care300) -4	577.8	1	<do>	fair	<do>
	H10-102	Patient Bed (Sunrise Easy Care300) -5	577.8	1	<do>	fair	<do>
	H10-103	Ultrasound Scanner (Carolina) -1	12,000	1	MCH/GS	fair	<do>
	H10-104	Ultrasound Scanner (Carolina) -1	12,000	1	MCH/Mazraa	fair	<do>

## 8 - 3 (List of Equipment above JD100.) (5)

1999.9.30.

FY	Code	Name of Ewuipment	Price	Qty	Place	Maintenance	cf.
H10	H10-105	Camera Lenz (AF 24-129 mm)	JD 420	1	Project Office	fair	FY98/'99.8.
FY98	H10-106	Camera Lenz ( AF 70-210 mm)	317	1	<do>	fair	<do>
	H10-107	Flash (SB-28)	250	1	<do>	fair	<do>
	H10-108	PC Link System	106	1	<do>	fair	<do>
	H10-109	UPS ( & stabilizer)	360	1	GS Office	fair	procured/'99.7.
	H10-110	PC Printer (HP 1100 LJP) -1	320	1	Project office	fair	FY98/'99.8.
	H10-111	PC Printer (HP 1100 LJP) -2	320	1	<do>	fair	<do>
	H10-112	PC Printer (HP 1100 LJP) -3	320	1	NPC	fair	<do>
	H10-113	PC Printer (HP 1100 LJP) -4	320	1	GS Office	fair	<do>
	H10-114	Honey-bee Hive - 1	190	1	Beneficiaries	fair	procured/'99.5.
	H10-115	Honey-bee Hive - 2	190	1	<do>	fair	<do>
	H10-116	Honey-bee Hive - 3	190	1	<do>	fair	<do>
	H10-117	Honey-bee Hive - 4	190	1	<do>	fair	<do>
	H10-118	Honey-bee Hive - 5	190	1	<do>	fair	<do>
	H10-119	Honey-bee Hive - 6	190	1	<do>	fair	<do>
	H10-120						
	H10-121						
	H10-122						
	H10-123						
	H10-124						
	H10-125						
	H10-126						
	H10-127						
	H10-128						
	H10-129						
	H10-130						

## 8-3 (List of Equipment above JD100.) (1)

1999.9.30.

FY	Code	Name of Equipment	Price	Qty	Place	Maintenance	cf.
H11	H11-001	Honey-bee Hive - 1	190	1	Beneficiary	fair	FY'99/
FY99	H11-002	Honey-bee Hive - 2	190	1	<do>	fair	<do>
	H11-003	Honey-bee Hive - 3	190	1	<do>	fair	<do>
	H11-004	Honey-bee Hive - 4	190	1	<do>	fair	<do>
	H11-005	Honey-bee Hive - 5	190	1	<do>	fair	<do>
	H11-006	Honey-bee Hive - 6	190	1	<do>	fair	<do>
	H11-007	Honey-bee Hive - 7	190	1	<do>	fair	<do>
	H11-008	Honey-bee Hive - 8	190	1	<do>	fair	<do>
	H11-009	Honey-bee Hive - 9	190	1	<do>	fair	<do>
	H11-010	Honey-bee Hive -10	190	1	<do>	fair	<do>
	H11-011	Honey-bee Hive -11	190	1	<do>	fair	<do>
	H11-012	Honey-bee Hive -12	190	1	<do>	fair	<do>
	H11-013	Honey-bee Hive -13	190	1	<do>	fair	<do>
	H11-014	Honey-bee Hive -14	190	1	<do>	fair	<do>
	H11-015	Honey-bee Hive -15	190	1	<do>	fair	<do>
	H11-016	Honey-bee Hive -16	190	1	<do>	fair	<do>
	H11-017	Honey-bee Hive -17	190	1	<do>	fair	<do>
	H11-018	Honey-bee Hive -18	190	1	<do>	fair	<do>
	H11-019	Honey-bee Hive -19	190	1	<do>	fair	<do>
	H11-020	Honey-bee Hive -20	190	1	<do>	fair	<do>
	H11-021	Laser Printer	¥* 108	1	GS Office	fair	Ms.Harada/'99.6.
	H11-022	Trasnformer	20	1	<do>	fair	<do>
	H11-023	Personal Computer	330	1	<do>	fair	Dr.Watanabe/'99.5.
	H11-024	PC Printer	38	1	<do>	fair	<do>
	H11-025	PC Printer	30	1	<do>	fair	Dr.Yamaguchi/'99.6
	H11-026	CD-ROM -1	34	1	<do>	fair	<do>
			¥* : 1000yen				

Evaluation Grid

The Project on Family Planning and Women in Development in the Hashemite Kingdom of Jordan

1. Efficiency

Evaluation Point	Point to be checked	Check Results from interviews, questionnaires, observation and workshop
<p>1.1 Appropriateness of Inputs (Have the timing, quality, and quantity of Inputs been necessary and sufficient to achieve Outputs?)</p>	<p>&lt;Japanese Side&gt;</p> <p>1.1.1 Was the dispatch of Experts timely and appropriate in terms of number of persons and level of fields of specialization?</p> <p>1.1.2 Was the provision of material/equipment timely and appropriate in terms of volume, cost and degree of utilization?</p> <p>1.1.3 Was the training of C/P in Japan timely and appropriate in terms of number of persons and fields of specialization?</p> <p>1.1.4 Was the local cost support of Japan appropriate?</p> <p>&lt;Jordanian Side&gt;</p> <p>1.1.5 Was the assignment of counterpart personnel timely and appropriate in terms of number of persons and fields of specialization?</p> <p>1.1.6 Was the utilization of provided equipment appropriate?</p>	<p>1.1.1 *Output 3 should have been advanced to its achievement further, if a long-term expert should have been dispatched during the first half of the project duration. *The timing of the dispatch is partly appropriate, because if the expert for income generating activities should have been dispatched earlier and been involved in the process of feasibility studies of the activities, the entire procedures of the income generating activities would be advanced more efficiently. *The quality of the specialization of the Japanese experts were appropriate, but some fields of the specialization of the Japanese experts were not perfectly suitable to the project design.</p> <p>1.1.2 *The provision of material and equipment was timely. *The volume and cost of the material and equipment provided was appropriate. *The degree of utilization of the provided material and equipment was appropriate as a whole, but the quality of some of medical equipment was not sufficient for clinical use. *The emphasis of provision of medical equipment was put on more Gohr Al Safi Hospital than the MCH centers.</p> <p>1.1.3 *The training of C/P in Japan timely and appropriate in terms of number of persons and field of specialization. *Objectives of the training from the viewpoint of the project were not understood sufficiently by the training participants.</p> <p>1.1.4 *The local cost support of Japan was appropriate.</p> <p>1.1.5*The counterpart in the field of WIID had not been assigned for relatively long term after the beginning of the project. *Some of the counterparts did not have necessary and sufficient background of the field assigned to them, partly due to the component of Project was relatively new to Jordan. *The commitment from one of C/P had not been adequately sustained during the project implementation. *The level of specialization of the C/P for income generating activities largely contributed to advancing activities for Output 4 smoothly for short term.</p> <p>1.1.6*Part of the medical equipment provided were not utilized sufficiently.</p>

Evaluation Point	Point to be checked	Check Results from interviews, questionnaires, observation and workshop
1.2 Has the project supporting system functioned well?	<p>1.1.7 Was the project operational cost funded adequately by the Jordanian side?</p> <p>1.2.1 Did the committee which was set for supporting the project function?</p> <p>1.2.2 Was there good support from other concerned organizations?</p>	<p>1.1.7 *The Jordanian side funded adequately as a whole, although individual financial allocation of the counterpart organizations have not been indicated officially. The reason for this was explained by the Jordanian side that the individual allocation was mixed together and difficult to be calculated on individual basis.</p> <p>1.3.1 *Joint Coordinating Committee comprising of all the C/P and experts was held once a year. The In-House Meeting has been held once a month. *Since the works for income generating activities have been proceeded rapidly, the In-House Meetings have been held weekly basis for it. *Joint Coordinating Committee and In-House Meetings have helped the coordination among Activities of the project. *The In-House Meetings have been used for reporting the advancement of activities for each Output by the person who is in charge of the Output, but used rarely for discussion for integrating Activities to attain Project Purpose.</p> <p>1.3.2 -</p>
1.3 Was the linkage with other cooperation project developed?	1.3 How was the linkage with other project?	1.3 Linkage with other projects by Jordanian Government and NGOs in the same field of Activities were developed, and useful information were exchanged.

2. Effectiveness

Evaluation Point	Point to be checked	Check Results from interviews, questionnaires, observation and workshop
2.1 Degree of achievement of Project Purpose	2.1 To what degree has the Project Purpose has been achieved?	<p>2.1 Refer to the Achievement of the Project(Project Purpose).</p> <p>2.1. It is too early to evaluate the degree of the achievement, due to the nature of the project. But some sort of survey will be conducted by Project to evaluate the achievement</p>
2.2 Contribution of outputs to project purpose achievement	<p>2.2.1 To What extent has Output 1 contributed to the Project Purpose?</p> <p>2.2.2 To What extent has Output 2 contributed to the Project Purpose?</p> <p>2.2.3 To What extent has Output 3 contributed to the Project Purpose?</p> <p>2.2.4 To What extent has Output 4 contributed to the Project Purpose?</p>	<p>2.2.1 Refer to the Achievement of the Project(Output 1).</p> <p>2.2.2 Refer to the Achievement of the Project(Output 2).</p> <p>2.2.3 Refer to the Achievement of the Project(Output 3).</p> <p>2.2.4 Refer to the Achievement of the Project(Output 3).</p>
2.3 Contributing factors	2.3 What are the factors contributed to the achievement of Project Purpose?	<p>2.3 Education, means of communications such as TV and Radio.</p> <p>*Good planning, enough resources allocated to the project activities, successful cooperation between partner agencies, high responses by the local community, project staff work as a team.</p>
2.4 Inhabiting factors	<p>2.4.1 What are the factors inhabiting the achievement of Project Purpose?</p> <p>2.4.2 In case of low achievement of Project Purpose, when is it likely to be achieved?</p>	<p>2.4.1*Traditional idea and some rumours opposing family planing.</p> <p>2.4.2 Refer to the Achievement of the Project(Project Purpose)</p>



### 3. Impact

Evaluation Point	Point to be checked	Check Results from interviews, questionnaires, observation and workshop
<p>3.1 Impact at Project Purpose level? (from technical, institutional, environmental or</p>	<p>3.1.1. What positive impact did the project planners intend to produce as a consequence of achievement of Project Purpose? (direct/indirect)</p> <p>3.1.2 Is there any unintended positive situation produced by the project? (direct/indirect)</p> <p>3.1.3 Is there any unintended negative situation produced by the project? (direct/indirect)</p>	<p>3.1.1*Due to the nature of the project purpose, it has not been achieved. Therefore, it is impossible to point out the intended positive impact as a consequent of achievement of Project Purpose.</p> <p>3.1.2* Awareness raising seminars for men, and couples have been started by the project, as a result of the analysisof the data collected for Output1 and that collected from the respective seminars for women and men.</p> <p>*The young women working as CDPs have had opportunities to work in health and social sphere and came to be more interested in these issues. Some of them also became interested in the income generating activities of the project.</p> <p>*The female CDPs, who previously had not participated fully in the society in the project area, partly due the high unemployment rate and the conservative idea about women's labour based on Islam in the project area, came to be able to participated in the society through their role as CDPs.</p> <p>*The women who have attended the seminar by the project became conscious of their bodies, although they did not have such consciousness previously.</p> <p>3.1.3 --</p>
<p>3.1 Impact at Overall Goal level (from technical, institutenal, environmental or other viewpoints)</p>	<p>3.2.1 To what degree has Overall Goal been achieved?</p> <p>3.2.2 Is there any unintended positive situation produced by project? (direct/indirect)</p> <p>3.2.3 Is there any unintended negative situation produced by the project? (direct/indirect)</p>	<p>3.2.1* Overall Goal intends to reduce population growth rate. However, to measure the impact on population growth generally requires years, so that it is still early to evaluate the level.</p> <p>3.2.2 *the same as 3.2.1</p> <p>3.3.3*the same as 3.2.1</p>

#### 4. Relevance

Evaluation Point	Point to be checked	Check Results from interviews, questionnaires, observation and workshop
4.1 Relevance of Overall Goal	<p>4.1.1 Is Overall goal still consistent with the population policy of the Hashemit Kingdom of Jordan?</p> <p>4.1.2 Does Overall Goal still match the needs of the people in the project area?</p> <p>4.1.3. Is Overall Goal still consistent with Japan's aid policy?</p> <p>4.1.4 In case of low relevance, what are the reason?</p>	<p>4.1.1*The Overall Goal is still consistent with the national policy.</p> <p>4.1.2*The Overall Goal is still consistent with the needs of the people in the project area.</p> <p>4.1.3 *The Overall Goal is still consistent with Japan's aid policy.</p> <p>4.1.4 -</p>
4.2 Relevance of Project Purpose	<p>4.2.1 Is Project Purpose still consistent with the population policy of the Hashemit Kingdom of Jordan?</p> <p>4.2.2 Does Project Purpose still mach the needs of the people in the project area?</p> <p>4.2.3. Is Project Purpose still consistent with Overall Goal?</p> <p>4.2.4 In case of low relevance, what are the reason?</p>	<p>4.2.1*The Project Purpose is still consistent with the national policy.</p> <p>4.2.2*The Project Purpose matches the need of the project area since it is relatively poor area and quality of life of the area is below the national average.</p> <p>4.2.3*The Project Purpose is still consistent with Overall Goal.</p> <p>4.2.4 -</p>
4.3 Relevance of project Design	4.3.1 Was the process and content of project planning appropriate?	<p>4.3.1* As a whole, the project design was appropriate.</p> <p>*The role of MOH as a witness for this project was not satisfactory enough for MOH to extend strong commitment to Activities for Output 3.</p> <p>*The planning of the project was done in a scientific manner using the PDM(PCM) approach and the process was comprehensive. The good points relevant to planning include three main points; first, the full participation of stakeholders; second, an expert in PCM supervised the formulation of the PDM; third, the project managers understand the project.</p>

Evaluation Point	Point to be checked	Check Results from interviews, questionnaires, observation and workshop
	4.3.2 In case of low relevance, what are the reasons?	<p>*The project design intended to promote family planning partly through women's empowerment expected from their participation in economic activities by the income generation activities. The project would be more effective if the income generation activities and the promotion of family planning practices should have been more integrated.</p> <p>*Due to the characteristics of the society in Arab region, it is difficult to introduce group activities for the women's income generating activities in the project.</p> <p>4.3.2 -</p>

5. Sustainability

Evaluation Point	Point to be checked	Check Results from interviews, questionnaires, observation and workshop
5.1 Organizational Sustainability	<p>5.1.1 Is the Jordanian Government likely to continue policy support to MOH, NPC, and JOHUD respectively?</p> <p>5.1.2 Is the administrative and operational system of MOH, NPC, and JOHUD? area?</p> <p>5.1.3. Does each of MOH, NPC, and JOHUD have enough support from other concerned organizations?</p> <p>5.1.4 In case of low relevance, what are the reason?</p>	<p>5.1.1.1 (NPC)*The official support to NPC has not changed since the beginning of this project.</p> <p>5.1.1.2 (MOH)*The government will continue to support MOH.</p> <p>5.1.1.3 (JOHUD)*The policy support to JOHUD is high, it is not being expected that this policy will change.</p> <p>5.1.2.*All the stakeholders will be able to sustain activities introduced by Project.</p> <p>5.1.3*MOH has been supported by international donors for its capacity building. *The component for OUTPUT 1 has been working with Jordanian NGOs in the field of IEC, through individual conduct. *Output 2 have cooperated with Jordanian national women's committee.</p> <p>5.1.4 -</p>
5.2 Financial Sustainability	<p>5.2.1 Is operating expenses securely acquired?</p> <p>5.2.2 Is the official financial support guaranteed?</p>	<p>5.2.1*The financial situation of JOHUD has not been highly transparent, so that it has been difficult to know the financial sustainability. *JOHUD is one of the largest development organization in Jordan and has been working throughout the country.</p> <p>5.2.2 *NPC and MOH will be supported by the government, since their objectives are in accord with national policy of Jordan.</p>
5.3 Material and Technical Sustainability	<p>5.3.1 Is the transferred technology properly utilized?</p> <p>5.3.2 Are the trained C/P appropriately posted and play expected role?</p> <p>5.3.3 Does the trained C/P remain at their original organization?</p> <p>5.3.4 Is the equipment well maintained?</p>	<p>5.3.1*Most of the transferred technology has been utilized properly.</p> <p>5.3.2*Except one C/P, who decreased one's commitment after another donor's project had begun, all C/P trained have been working vigorously for the project.</p> <p>5.3.3*All the trained C/P in Japan have remained working for the same organization.</p> <p>5.3.4*Most of equipment has been well maintained. *The choice of audio-visual equipment for the provision, in which relatively simple but the most necessary ones were selectively provided, has been successful in securing the material and technical sustainability.</p>

## 2 プロジェクト作成による評価参考資料

### I The present situation of the project site (South Ghor District) and the project goal

The fertility in Jordan has significantly decreased with a Total Fertility Rate (TFR) of 4.4 in 1997. However, Jordan still has one of the fastest growing populations among the countries of the Middle East.

Jordan is particularly characterized by regional differences in nature and economic development between the northern region including the capital of Amman, and the southern region.

The South Ghor District, a part of the southern region and the target area of our project, is socioculturally conservative, has low productivity and a high fertility rate of 7.1. This region is considered a developing area in a developing country.

This situation calls for serious consideration of the importance of family planning in order to improve the population's standard of living. The project was created in order to contribute to the national population issues through such integrated objectives as follows:

1. To enhance awareness of local communities about health issues including family planning and reproductive health and socio-economic issues.
2. To strengthen health services in maternal and child health and reproductive health, including family planning at health facilities of the Ministry of Health.
3. To increase the participation of women and whole households in economic activities.

### II The determination of indicators

Indicators for the evaluation were determined by the Project

Design Matrix (PDM) made in the Project Cycle Management (PCM) Workshop held on August, 1997. The indicators are shown by outputs of activities as follows.

1. People's awareness of health and socio-economic issues has been enhanced.
  - 1-1. An increase in the number of people who have attended awareness programs.
  - 1-2. An increase in the number of awareness programs at QAF center.
  - 1-3. A positive change in people's attitudes toward health and socio-economic issues.
2. Family Planning and reproductive health services at the project area have been strengthened.
  - 2-1. The attendance of aid nurses at training courses.
  - 2-2. An increase in the number of courses conducted by FP/Reproductive Health per annum.
  - 2-3. An increase in the number of clients who utilize MCH services.
3. Women at the project area are participating in economic activities.
  - 3-1. An increase in the number of women are participating in income generating programs.
  - 3-2. An increase in the number of women participating in training courses.
4. Cooperation between health/social service sectors has been strengthened.
  - 4-1. An increase in the number of activities jointly implemented by different concerned parties.
  - 4-2. Records of the health centers/clinics on patient referral.

Table 1 shows activities related to the indicators mentioned above.

### III Results

1. People's awareness of health and socio-economic issues has been enhanced.

1-1. An increase in the number of people who have attended awareness programs.

1-2. An increase in the number of awareness programs at the QAF center.

Table 2 (for women) and Table 3 (for men) show a summary of awareness seminars which were completed by August 1999. Ten seminars for women were held 40 times in total in the five villages of Al Safi, Mazra'a, Hadieth, Fifa and Mamoura. The themes of the seminars were focused on family planning/reproductive health and gender issues. Four seminars for men were held 16 times in total with the themes of family planning and Islamic legacy.

The total numbers of participants of women and men were 2,083 (1,248 for unmarried women) and 751, respectively. The high number of women who participated in seminars suggests that women might be more interested in seminars. The number of female and male participants varied by villages, 34-137 people (average; 90.6) and 16-83 people (45.6) in Al Safi, 19-51 (45.6) and 31-52 (42.4) in Mazra'a, 13-61 (35.0) and 64-72 (68.0) in Hadieth, respectively. The numbers of female participants were 10-32 (27.0) in Fifa and 18-26 (21.4) in Mamoura.

Table 4 shows the coverage rate of seminars by villages, accompanied by the number of target women and the number of participants among women and men. The average coverage rate was 21.9% among both women and men. However, the rates differed from village to village. The lowest rates were shown in Mazra'a with 13.6% for women and in Al Safi with 16.7% for men. The number of seminars should

be decided by taking into consideration the population size of the villages. The project has hired promoters who are in charge of home-visits to enhance the participation in seminars <sup>1</sup>. One of the causes of differences of the coverage rate might be explained by differences of activities by the promoters.

Table 5 (for women) and Table 6 (for men) show the percentage distribution of repeatability of accumulated participants. The women had a high repeatability in seminars with 69% at the 10th seminar. On the other hand, the men stagnated with a low repeatability of 14%. The frequencies of participation on average for women and men were 3.5 and 1.2, respectively <sup>2</sup>.

Figure 2 shows the simulation of the number of seminars by the coverage rate which attains to 100% <sup>3</sup>. The simulation indicates that about a hundred and twenty seminars should be held for women because of the high repeatability. Since men will be covered by fifty seminars, some consideration should be paid to improve the low repeatability and increase the rate.

1-3. People's positive change in their attitudes toward health and socio-economic issues.

A field survey was carried out to collect information on the attitude of inhabitants to the seminar in September, 1999 <sup>4</sup>. Four hundred and thirty married women aged under 49 and their spouses were interviewed. This section presents a part of findings obtained by the survey.

To understand the level of knowledge about the seminar and the characteristics of the participants in the seminar, the women were asked whether they were familiar with seminars, whether they had participated in seminars, and whether they intended to participate in seminars in the



future. Table 7 shows the result of these questions categorized by age groups. 70-77% of the women in the under 34 year old group knew about the seminar and there was a high participation of 30-38%. However, the participation ratio was only 50%. 83% of the women in the same group intended to participate in a seminar in the future.

98% of the women who participated in seminars positively evaluated the contents of the seminars (the other 2% of women pointed out the inconvenient time of the seminar and the lack of transportation between the venue of the seminar and their home - unshown). The women were asked whether they had discussed the seminar in which they had participated to grasp the effect of the seminar. The result is shown in Table 8. 94% of the women who participated in the seminars had discussed the seminar: 45% of them had talked to neighbors and friends; 30% of them to their husbands.

2. Family Planning and reproductive health services at the project area have been strengthened.

2-1. The attendance aid nurses at training courses.

2-2. An increase in the number of courses conducted by FP/Reproductive Health per annum.

Table 9 shows training courses held in the field of family planning/reproductive health. Long term or ongoing training courses have not been conducted.

2-3. An increase in the number of clients who utilize MCH services.

Table 10 shows the number of patients who have visited MCH centers for the first time for the purpose of family planning practices. The number of clients has dramatically increased in recent years. However,

the number of clients even in 1998 reached only 10% of the total number of target women.

3. Women at the project area are participating in economic activities.

3-1. An increase in the number of women participating in income generating programs.

3-2. An increase in the the number of women participating in training courses.

Six programs of bee-keeping, baking, goat breeding, plastic grinding, sewing, and seedling culture have been planned to implement in the field. Table 11 shows the training course of the bee-keeping program. The training was held to 12 beneficiaries for 6 days in total.

4. Cooperation among health/social service sectors has been strengthened.

4-1. A number of activities have been jointly implemented by different concerned parties.

This indicator was sifted to input in PDM.

4-2. Records of the health centers/clinics on the patient referral.

No activity concerned to this indicator has been conducted.

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1. Home-visits by promoters and the participation in the seminar were statistically related.

Sources of knowledge about seminars and participation in seminars

	Source		Total
	Promoters	Other *	
Participated	78	47	125
Not participated	62	97	159
Total	140	144	284

$\chi^2 = 14.41$

\* Other: Poster, community leader of CDC and informed by neighbors or female relatives.

2. The frequencies of participation on average =  $(\sum (\text{Frequency} \times \text{The number of participants by seminars}) / \text{The number of participants in total})$

3. The relationship among the number of seminars in total, Repeater rate and the number of participants in a seminar simply translates into the following equations:  $C=R+N$ .  $RR=R/(R+N)$ .  $T=S/N$  ( $C$ : The number of participants in a seminar,  $R$ : The number of repeaters,  $N$ : The number of participants in a seminar for the first time,  $RR$ : Repeater rate,  $T$ : The number of seminars in total,  $S$ : The number of target population = 2,100).

4. The survey area was divided into 43 blocks according to the census data. Ten subject were randomly selected from each block and were interviewed by midwives and nurses. The results are under analysis.

Table 1 Activities of the project which were implemented

Activities <sup>1</sup>	1997						1998												1999											
	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10	11	12
1. Awareness programs Awareness seminars										←			×																	
2. Medical services Training courses										○						○					↔					↔	←			
3. Income generating Training courses																								↔	←					
4. Cooperation among health/social sectors																														
5. Base line survey										←			×																	
6. Brochures/Video film for awareness																														
7. Monitoring of awareness activities																														
8. Medical services																														


1. The activities mentioned in this report are shaded with .
2. Selection and training for promoters, and preparation of seminar scheme.
3. The other programs will be implemented after the business plan is reported on 14th October.

Table 2 Awareness seminars for women

Theme	Lecturer	Date	Place	Number of Participants*	Contents
1. Pre and post natal care	Dr. Raja' Al Saleh (Medical doctor, JAFPP, Karak clinic)	'98/7	Al Safi	110 (64)	Notes in pregnancy (Nutrition/Daily life/Regular health check) Health check in post natal care/Exercises/Care of baby/Family planning
			Mazra'a	51 (60)	
			Hadieth	51 (34)	
			Fifa	31 (31)	
			Mamoura	26 ( 3)	
2. Importance of education	Ms. Nawal Al Dghimat (Teacher, Al Safi school)	'98/9	Al Safi	67 (40)	Importance of education for women
			Mazra'a	45 (55)	
			Hadieth	38 (18)	
			Fifa	32 (36)	
			Mamoura	24 ( 0)	
3. Breastfeeding	Ms. Nawal Abu-Al Samhadani (Nurse, Al Safi hospital)	'98/10	Al Safi	77 (42)	Importance of breast - feeding/Nutrition/Methods
			Mazra'a	30 (38)	
			Hadieth	32 (24)	
			Fifa	32 (29)	
			Mamoura	19 ( 1)	
4. Nutrition I (Lecture)	Ms. Iman Mwafi (Nutritionist, Karak hospital)	'98/11	Al Safi	88 (35)	Importance of daily meals/Ingestion Nutritious instruction
			Mazra'a	32 (22)	
			Hadieth	30 (20)	
			Fifa	32 (18)	
			Mamoura	21 ( 0)	
5. Nutrition II (Practice)	The same as the above	'98/12	Al Safi	105 (48)	Production of cheese and yogurt
			Mazra'a	32 (20)	
			Hadieth	61 (26)	
			Fifa	20 (16)	
			Mamoura	21 ( 0)	

Theme	Lecturer	Date	Place	Number of Participants*	Contents
6. Reproductive health	Ms. Munira Sha'ban (Medical consultant)	'99/3	Al Safi	55 (41)	Menstrual, mechanism of pregnancy and contraceptive methods
			Mazra'a	27 (16)	
			Hadieth	35 (22)	
			Fifa	30 (21)	
			Mamoura	22 ( 1)	
7. Woman and Legal issues	Ms. Hiam Kalamat (former chairperson, Jordanian women committee)	'99/4	Al Safi	117 (41)	Legal rights of Jordanian women, distinction of present law and way of contact to organizations concerned with women' s affairs
			Mazra'a	41 (41)	
			Hadieth	28 (17)	
			Fifa	30 (17)	
			Mamoura	18 ( 1)	
8. Nutrition I (Lecture)	Ms. Iman Mwafi (Nutritionist, Karak hospital)	'99/5	Al Safi	116 (44)	The same as the seminar in November, 1998
			Mazra'a	42 (68)	
			Hadieth	36 (34)	
			Fifa	34 (28)	
			Mamoura	21 ( 1)	
9. Nutrition II (Practice)	The same as above	'99/5	Al Safi	34 (15)	The same as the seminar in December, 1998
			Mazra'a	19 (14)	
			Hadieth	13 (14)	
			Fifa	10 (10)	
			Mamoura	21 ( 2)	
10. Gender	Ms. Huda Al Karaki (Project C/P)	'99/6	Al Safi	137 (57)	Distinction between gender and sex Mutual assistance between husband and wife
			Mazra'a	24 (30)	
			Hadieth	26 (14)	
			Fifa	19 (17)	
			Mamoura	21 ( 3)	

The number of participants on average  $\pm$  SD ;  $39 \pm 31$

\* The number of unmarried participants are shown in parentheses

Table 3. Awareness seminars for men

Theme	Lecturer	Date	Place	Number of Participants	Contents
1. Role of men in Islam and family planning	Mr. Khaled Alghzawi (Former minister of labor, Deputy of Jordanian Farmers Union)	'98/8/9 16:00~	Al Safi	33	To explain the importance of role/responsibility of the man in a family.
		'98/8/16 16:00~	Mazra'a	52	To explain that the Koran supports family planning.
2. Concept of family planning and contraceptive methods	Dr. Nassar Ammareen (Director of Karak MCH Center, Ministry of Health (MOH))	'98/8/23 16:00~	Al Safi	81	To explain the importance of maternal and child health through family planning.
		'98/8/30 16:00~	Mazra'a	31	To introduce contraceptive methods.
3. Public health	1. Dr. Adnan Al-Dumor (Director of Karak Health Directorate, MOH)  2. Dr. Shebli Medanat (Head of Karak Health Educational Section, MOH)	'99/3/20 16:00~	Al Safi	16	To explain the importance of keeping the health given to us by God.
		'99/3/21 16:00~	Mazra'a	43	
		'99/3/23 16:00~	Al Safi	23	To introduce the concept of primary health care and public health.
		'99/3/24 16:00~	Fifa	33	
		'99/4/3 16:00~	Mamoura	51	
		'99/4/4 16:00~	Mazra'a	42	
		'99/4/6 16:00~	Hadietheh	64	
		'99/4/11 16:00~	Al Safi	83	

Theme	Lecture	Date	Place	Number of Participants	Contents
4. Islamic legacy and family planning	Mr. Rafeeq Al Khateeb (Head of Religious Education, Ministry of Religious Affairs)	'99/5/22 16:00 ~	Al Safi	29	To explain the interpretation of family planning in the Koran. To explain the importance of family planning practices on a community and on individual level.
		'99/5/26 16:00 ~	Al Safi	54	
		'99/5/29 16:00 ~	Mazra'a	44	
		'99/6/2 16:00 ~	Hadietheh	72	

Note: The number of participants on average  $\pm$ SD=47  $\pm$  20



Table 4 Coverage rate of seminar by villages, accompanied by the number of target women and the number of participants among women and men

Village	(Number of married women aged 15-49)*	(Number of participants)		Coverage rate (%)	
		Women	Men	Women	Men
Al Safi	(1487)	(307)	(249)	20.6	16.7
Mazra'a	(676)	(92)	(166)	13.6	24.6
Hadieth	(309)	(94)	(106)	30.4	34.3
Fifa	(149)	(60)	(26)	40.3	17.4**
Mamoura	(56)	(33)	(40)	58.9	71.4
<b>Total</b>	<b>(2682)</b>	<b>(586)</b>	<b>(587)</b>	<b>21.9</b>	<b>21.9</b>

\* Sources: Housing and Population Census 1994 (excluding the Bedouin people).

\*\* Most men are absent due to economic reasons.

Table 5 Percentage distribution of repeatability of accumulated participants in seminars (women)

	Seminar									
	1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th
(N)	(269)	(302)	(350)	(399)	(450)	(464)	(500)	(552)	(560)	(586)
Frequency										
1	100.0	42.7	40.9	40.4	36.7	34.1	32.0	33.2	32.9	31.1
2		57.3	28.3	22.3	20.4	19.4	19.6	18.7	18.2	17.8
3			30.9	16.8	18.0	14.4	12.4	11.4	10.7	11.3
4				20.6	10.0	12.1	11.2	8.9	8.9	8.2
5					14.9	9.9	8.2	8.7	7.9	6.8
6						10.1	8.6	6.2	7.1	7.7
7							8.0	6.9	5.9	6.0
8								6.2	5.0	5.1
9									3.4	3.6
10										2.6
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

Table 6 Percentage distribution of repeatability of accumulated participants in seminars (men)

	Seminar			
	1st	2nd	3rd	4th
(N)	(82)	(167)	(462)	(587)
Frequency				
1	100.0	87.4	90.5	86.4
2		12.6	7.8	11.2
3			1.7	1.9
4				0.5
Total	100.0	100.0	100.0	100.0

Figure 2 Simulation of coverage by seminars

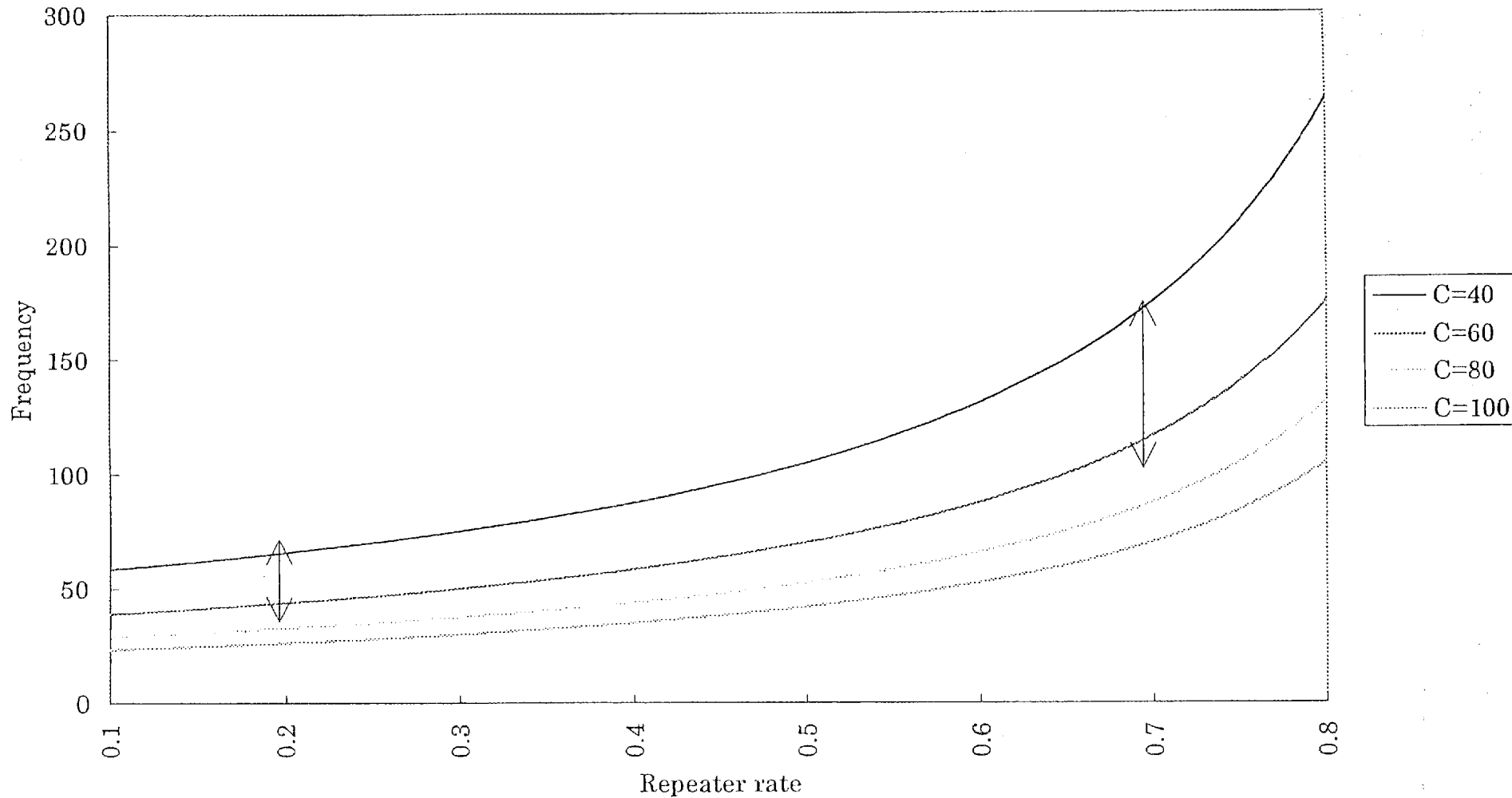


Table 7 Percentage distribution of those women who are familiar with seminars, have participated in seminars and intend to participate in seminars in future

Age group	(N)	Familiar with	Participated	Intend to participate
		Yes (%)	Yes (%)	Yes (%)
15-24	(68)	70.6	29.4	79.4
25-29	(87)	77.0	37.9	83.9
30-34	(105)	73.3	38.1	84.8
35-39	(89)	59.6	25.8	67.4
40-49	(81)	50.6	11.1	64.2

Table 8 Percentage distribution of those women who have discussed and have not discussed seminars (N=696)

	%
Yes	
Husband	29.9
Relatives	18.7
Neighbors or friends	44.7
Other	1.0
No	5.7
Total	100.0

Note: Multiple answer.

Table 9 Training courses for medical staff

Theme	Lecturer	Date /Time	Place	Participants	Contents
1. Family planning/ Reproductive health	Dr. Zeinab (M. D., JAFPP) Ms. K. Ikegami (JICA Expert)	'98/4/1 5-16	Ghor Safi Hospital	16 persons: Aid nurses: 11 Nurses: 1 Midwives: 2 Medical doctors: 2	Introduction of the concept of reproductive health and family planning (contraceptive methods). Discussion by group work. Training of counselling by role play.
2. Introduction of contraceptive methods	Dr. T. Shimizu (JICA Expert)	1.5 hours	Ghor Safi (MCHC)	10persons: Medical doctors: 1 Midwives: 2 Nurse: 7	Introduction of oral contraceptives, contraceptive devices, surgical methods, and other contraceptive methods. Explanation of advantages and disadvantages, adaptations, contraindications and side-effects of contraceptive use.
3. Training in usage of ultrasound devices	Dr. T. Shimizu (JICA Expert)	6days	Ghor Safi Hospital AQF Clinic	17 person in total (Medical doctors)	Gynaccological diagnosis by using ultrasound devices. Introduction of basic skill of ultrasound.
4. Training for aid nurses	Dr. Nassar Ammareen (Director of Karak MCHC) Dr. Adnan Al-Dumor (Director of Karak Health Directorate) Ms. K. Tanno (JICA Expert)	'98/10/ 17-19	Karak Training Center	20 persons in total (Midwives)	Explanation of skills of counselling for family planning and reproductive health.

Table 10 The number of patients who visited MCH centers for the first time  
for family planning practices

<u>Year</u>	<u>(N)</u>
1991	3
1992	14
1993	12
1994	24
1995	51
1996	107
1997	152
1998	224
<u>1999*</u>	<u>93</u>

Sources: Client charts of MCH center in Al Safi

\* As of July 1999

Table 11 Training course of the income generating program

Course	Lecturer	Place	Number of participants	Date	Contents
Beekeeping	Mr. Ahmad J. Malkawi	Ghor Safi CDC center	12	'99/8/4-5	A way of harvesting, refining and manufacturing honey
				'99/8/11-12	A way of harvesting honey and Techniques of beekeeping
				'99/8/18-19	Appropriate placement of wooden
				'99/8/25-26	Placement and care of wooden beehives Introduction of natural enemies and eradication in the field
				'99/9/2-3	Technical guidance on beekeeping by video film practices in the field
				'99/9/8-9	Eradication of natural enemies and care of wooden beehives in the field