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1. 協議議事録 (Minutes of Meeting)

MINUTES OF MEETING
BETWEEN THE JAPANESE PROJECT EVALUATION TEAM
AND
THE AUTHORITIES CONCERNED OF THE GOVERNMENT OF
THE HASHEMITE KINGDOM OF JORDAN
ON THE JAPANESE TECHNICAL COOPERATION
ON FAMILY PLANNING AND GENDER IN DEVELOPMENT PROJECT (PHASE II)

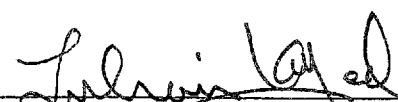
The Japanese Evaluation Team (hereinafter referred to as "the Team") organized by the Japan International Cooperation Agency (hereinafter referred to as "JICA") and headed by Mr. Narihiro YAEGASHI visited the Hashemite Kingdom of Jordan from January 18 to January 27, 2003 in order to evaluate the implementation and achievements of the Family Planning and the Gender in Development Project (Phase II) (hereinafter referred to as "the Project") , based on the Record of Discussions signed on May 18, 2000.

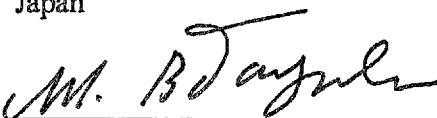
During its stay in the Hashemite Kingdom of Jordan, the Team held a series of discussions and observations, and exchanged views with the authorities concerned of the Government of The Hashemite Kingdom of Jordan.

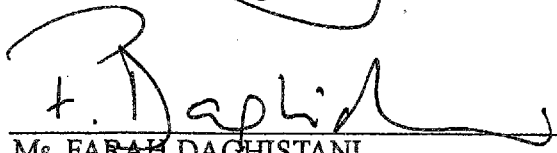
As a result of the discussions, both parties agreed upon the matters referred to in the document attached hereto.

Amman, 26 January 2003


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JOINT EVALUATION REPORT
ON
THE JAPANESE TECHNICAL COOPERATION
FOR
FAMILY PLANNING AND GENDER IN DEVELOPMENT PROJECT
(PHASE II)

JAPAN INTERNATIONAL COOPERATION AGENCY ,
JAPAN

HIGHER POPULATION COUNCIL,
THE JORDANIAN HASHEMITE FUND FOR HUMAN DEVELOPMENT,
MINISTRY OF HEALTH,
THE HASHEMITE KINGDOM OF JORDAN

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JANUARY 26, 2003

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ANNEX-1~7

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1. Introduction

1-1. The Evaluation Team

The Japanese Evaluation Team (hereinafter referred to as "the Japanese Team") organized by Japan International Cooperation Agency (hereinafter referred to as "JICA"), headed by Mr. Narihiro YAEGASHI visited the Hashemite Kingdom of Jordan from January 18 to January 27, 2003 for the purpose of the joint final evaluation on the Japanese technical cooperation for the Family Planning and the Gender in Development Project (Phase II) (hereinafter referred to as "the Project"), which is scheduled to terminate on June 30, 2003, according to the Record of Discussions (hereinafter referred to as "R/D") signed on May 18, 2000.

The Japanese Team and the Jordanian Team jointly understood the achievement of the Project, the process of implementation and discussed evaluation based on five criteria according to the JICA Evaluation Guideline.

1-2. Methodology of Evaluation

According to the JICA Evaluation Guideline, the methodology and procedure of evaluation is as follows. The further information is available in ANNEX-6.

- 1) Set up the 'Evaluation Question' (Scope of Evaluation, see ANNEX-4)
- 2) Share the current PDM (Project Design Matrix) (see ANNEX-3) .
- 3) Make the Evaluation Grid (see ANNEX-5) .
- 4) Gather the monitoring data (Achievement of Indicators) and relevant information.
- 5) Understand the process of implementation.
- 6) Evaluate by five evaluation criteria (Relevance, Effectiveness, Efficiency, Impact, Sustainability) described below.
- 7) Make agreement into the result of the evaluation, and elaborate Minutes of Meeting.
- 8) Signing the Minutes of Meeting.

1-3. Five Criteria of Evaluation

The five evaluation criteria are as follows.

- 1) Relevance: The relevance is the measure for determining whether the outputs, the project purpose and the overall goal are still in keeping with the priority needs and concerns at the time of evaluation.
- 2) Effectiveness: The effectiveness is concerned with the extent to which the project purpose has been achieved, or is expected to be achieved, in relation to the outputs produced by a project.
- 3) Efficiency: The efficiency is the measure for the productivity of the implementation process: how efficiently the various inputs are converted into outputs.
- 4) Impact: The impact is intended or unintended, direct or indirect, positive or negative changes that occur as a result of a project.
- 5) Sustainability: The sustainability is the measure for determining whether or not the project

benefits and activity are likely to continue after the external aid comes to an end.

1-4. Sources of Information Used for Evaluation

The following sources of information were used for this evaluation study.

- 1) The R/D signed by Jordanian Authorities and Ms M. Hashiguchi of JICA Implementation Study Team on May 18, 2000
- 2) The PDM-1, PDM-2 and PDM-3 (The Current PDM)
- 3) The record of inputs and outputs from both teams and activities of the Project
- 4) The Minutes of Meeting signed by Jordanian Authorities and Dr. M. Atoh of Management Consultation Team on February 14, 2002
- 5) Other documents

2. Background and Summary of the Project

2-1 Brief Background of the Project

The Project commenced on July 1, 2000 with a cooperation period of three years, as the second phase of the previous Project that lasted also for three years from July 1, 1997 until June 30, 2000. The Project is implemented jointly by the Higher Population Council (hereinafter referred to as "HPC"), former National Population Commission, the Ministry of Health (hereinafter referred to as "MOH"), and the Jordanian Hashemite Fund for Human Development (hereinafter referred to as "JOHUD") in cooperation with JICA, for the purpose of promoting family planning practice in the target areas through: (I) enhancing communities awareness especially among women in relation to RH and family planning; (ii) encouraging women to get involved in income generating activities; and (iii) strengthening the services of MCH (Maternal and Child Health) Centers.

In accordance with the R/D and the Tentative Schedule of Implementation (hereinafter referred to as "TSI"), JICA has dispatched 12 Japanese Experts (including 4 short-term Experts) to Jordan and has hosted 5 Jordanian counterparts in Japan for training, and has also taken necessary measures to provide equipment to facilitate the implementation of the Project.

Since the beginning of the Project, various activities (e.g. conducting surveys, implementing workshops and trainings concerning RH, family planning, awareness-raising, providing small business opportunities as a credit scheme and technical assistance to women, as well as follow-up) have been implemented in the six main target areas and three follow-up areas of Phase I in Karak Governorate.

2-2. Duration of Technical Cooperation

Three years from July 1, 2000 to June 30, 2003

2-3. Objectives and Outputs of the Project

<Overall Goal>

Handwritten signatures and initials:
A large signature at the top right.
A signature below it, possibly "B. J."
A large letter "B" at the bottom right.

Fertility in Karak Governorate is decreased.

<Project Purpose>

Family planning practice is increased in 6 "main" target areas and 3 follow-up areas in Karak Governorate.

<Outputs>

1. Capacity of CST (Community Support Team) , Facilitators, and LCC (Local Credit Committee) and LAC (Local Advisory Committee) is strengthened.
2. Positive social attitudes towards women and FP (Family Planning) are increased.
3. MOH's services in maternal and child health, RH (Reproductive Health) , and FP are strengthened.
4. Women's self-empowerment and their status within families are enhanced through their economic participation.
5. Monitoring activities are conducted.
6. Capacity of counterparts is strengthened.

2-4. Implementing Agencies

Higher Population Council (HPC, Former National Population Commission)

The Jordanian Hashemite Fund for Human Development (JOHUD)

Ministry of Health (MOH)

Japan International Cooperation Agency (JICA)

3. Project Achievements

Through the evaluation workshop, the evaluation team jointly assessed the achievement of the Project as follows.

3-1. Inputs

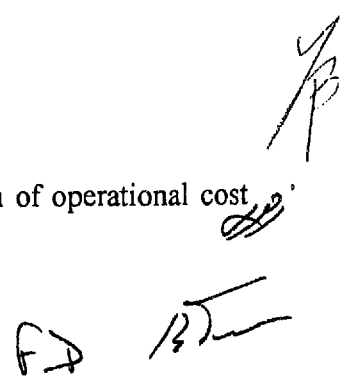
Refer to the detailed table of the inputs (see ANNEX-7)

<Japanese side>

- 1) Dispatch of Japanese Experts to Jordan
8 long-term experts and 4 short-term experts were dispatched
- 2) Training of counterparts (hereinafter referred to as "C/P") in Japan
5 counterparts in total were dispatched to Japan for training.
- 3) Provision of Equipment
Equipment and materials in the amount of about JD 400,443 (JPY 70 million approximately) was provided for the Project activities. (1 JD=JPY 175 approximately)

<Jordanian side>

- 1) Appointment of C/P
The total of 19 C/P positions in total has been assigned to the Project.
- 2) Allocation of operation fund
The Jordanian side provided the necessary allocation and contribution of operational cost for Project implementation.



3) Provision of facilities

The necessary space for office of the Project has been provided.

3-2. Activities

According to the current PDM which was revised in May 2002 (ANNEX-3) , the actual Project's activities were reviewed and summarized as follows.

(1) Reproductive Health

- The training on RH was conducted for 43 CST candidates. Finally, 28 were selected as CST members--6 members from Karak, 3 from Rabbeh, 2 from Faquo, 2 from Qatraneh, 3 from Ayy, 5 from Mutah/Mazar, and 7 from Southern Ghor. (After the selection, 2 resigned for personal reasons.)
- The CST started to conduct home visits at each area in June 2001 in order to provide FP counseling and information on RH and to refer women to MCH Centers.
- Among 3,719 women who were referred to MCH Centers by CST, 1,423 women actually visited the Centers from June 2001 to December 2002.
- The following training was conducted for CST members:
 - (i) Reproductive Health and family planning (February and March, 2001)
 - (ii) Refresh seminar on communication skills and Reproductive Health (August, 2001) and
 - (iii) Interview skills (January, 2002)
 - (iv) Family planning and Reproductive Health (April, 2002)
 - (v) Gender training (March, 2002)
 - (vi) Gender follow-up training (September, 2002)
- For monitoring and supporting the CST activities, the Project has conducted monthly meetings and supervisory visits. Also conducted is the spot check made by the Project management.
- MOH produced one textbook for CST on FP/RH.
- MOH and CDC (Community Development Center) staff provide continuous supports to CST activities.
- The Project is preparing a gender flipchart and a guidebook to be used by CST for home visits for raising people's awareness on self-empowerment within a context of RH. The activity will start in February 2003.
- The Project provided equipment and furniture to 37 MCH centers and contributed to improving and upgrading the quality of services.
- MOH conducted training of contraceptives logistics, FP and RH, and on-site-training to 89 midwives and nurses in total in order to strengthen their knowledge and skills needed to provide better MCH services. Follow-ups were also made to the trainees whether they were utilizing their skills gained in the training.
- MOH conducted trainings on IUD and ultrasound reading to the total of 30 general

practitioners (G.P.) working for Primary Health Centers and MCH Centers to expand FP /RH services in MCH Centers. Follow-ups were also conducted to make sure that the trainees started IUD and ultrasound services at MCH Centers.

(2) IEC

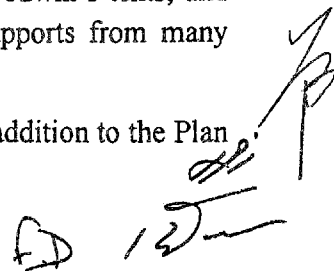
- The Project selected 29 Facilitators on the basis of established criteria from the six main target areas in Karak. It implemented training and trial workshops that involved them as well as JOHUD's CDC managers (Rural Leaders) :
 - (i) Introductory training and Trial Workshop for FP/RH (October, 2001) ;
 - (ii) Facilitators' meetings to discuss how to plan the workshops and select the participants (November and December, 2001)
 - (iii) Intensive Facilitation Skill Training and Trial Workshop II for FP/RH (January to February, 2002)
 - (iv) Facilitator's meeting to cope with difficulties which arose during the workshops (April, 2002)
 - (v) Trial Workshops for FP/RH (April, 2002)
 - (vi) Facilitation Skill Training on Gender (August, September ,2002)
 - (vii) Trial Workshops for Gender Workshops (September, 2002)
 - (viii) Trial Workshops for Wrap-up Workshops (December, 2002)
 - (ix) Practical Training for male Facilitator (May to August, 2002)
 - (x) "On the job training" at the end of each workshops (March 2002 to January 2003)
- For the workshops, 8 topics were selected. Five topics for FP/RH include antenatal care, postnatal care, breastfeeding, premarital medical examination, and birth spacing and three topics for gender include spousal communication, decision-making, and enhancing women's role in society.
- Awareness workshops were conducted in the following series:
 - (i) FP/RH Workshops conducted with females and males separately.
 - (ii) Gender Workshops was conducted with only females.
 - (iii) Wrap-up Workshops was conducted with married couples
- The Project have produced the following IEC materials:
 - (i) 5 Video materials on FP/RH;
 - (ii) 4 volumes of IEC guidebooks in Arabic and English;
 - (iii) Monthly Photo Newsletters in Arabic and English;
 - (iv) Project brochures in Arabic and English;
 - (v) Project-logo pens for the awareness workshop participants;
 - (vi) Video materials on 3 topics for gender;
 - (vii) 3 gender video materials distributed to MCH Centers to show them with video monitors

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provided by the Project during Phase I;

(viii) KAP (Knowledge, Attitude and Practice) surveys originally produced by the Project: (KAP-FP/RH Survey, KAP-Gender Survey, KAP-Impact Survey) to measure workshop impacts among participants.

- The Project held "Community Mobilization" sessions from May to July 2001 in the target areas, to explain key community members such as mayors, local councils, NGOs, school principals, and police officers on the subjects of family planning, family welfare, spousal communication, gender equity, and contraceptive methods. The total number of the participants was 275.
- Newsletters and brochures were distributed to the project stakeholders. Video materials and guidebooks were used during the Facilitators' trainings and were used in the workshops. The Project's video materials attracted the media's interest and some of the materials were broadcasted nationwide at the local TV during the prime time.
- Facilitator's guidebooks for participatory enter-educate workshops were composed by the four volumes as listed below:
 - (i) Communication for Change in Family Planning and Reproductive Health Behavior (Ziad, Batayneh, Hagiwara & Sato, 2002)
 - (ii) Awareness Workshop Guidebook for Facilitators (Hagiwara & Malkawi, 2002)
 - (iii) Using the Interactive Theatre in Reproductive Health Education – A Facilitator's Guidebook (Jada', 2001)
 - (iv) Facilitator's Guidebook for Participatory Enter-Educate Workshops on Empowerment of Women, Family Planning and Reproductive Health (Malkawi, Hagiwara, Sato, & Jada', 2002)
- Facilitator's guidebooks contained Facilitator's tasks, strategies of participatory enter-educate workshops, as well as main messages to be delivered to participants.
- KAP (Knowledge, Attitude, and Practice) surveys were constructed to measure the impact of awareness workshop (pre/posttest at each workshop, and after a few months from the workshops) among the workshop participants. They were constructed as follows:
 - (i) KAP-FP/RH survey (Pre/Posttest at the workshop)
 - (ii) KAP-Gender survey (Pre/Posttest at the workshop)
 - (iii) KAP-Impact survey (After a few month from the workshops)
- (iii) is particularly used to measure the behavioral changes in FP/RH or in Gender among participants after awareness workshop (s)
- Self-evaluation meeting was conducted at the end of each workshop by Facilitators, midwives, and project staff. Facilitators gained skills to evaluate their performance not only positively but also critically. Project staff encouraged this critical self-evaluation to further strengthen their facilitation skills and the quality of workshops.
- The awareness workshops for married male were conducted at various places such as CDCs, MCH Centers, Municipalities, schools and universities, Islamic Centers, Bedwin's tents, and houses of community people. To implement, the Project asked entire supports from many kinds of local leaders and officials and succeeded.
- Family Health Festival as a mass dissemination approach was proposed in addition to the Plan.



of Operation and 14 festivals are scheduled to be implemented by March 2003. Four festivals were held by Jan. 17, 2003. The Family Health Festival consists of four parts; health checking, exhibition by CST and beneficiaries of income-generating program, speech, lecture and Q & A sessions answered by a doctor, and a religious leader from the area, and entertainment (songs, dances by children and small gifts) . Two hundreds and eight (208) families participated in 4 festivals until January 17, 2003.

(3) Income Generation

- The Project formulated LCCs in the target areas, and conducted training on loan procedures and operations so that they would work in their areas as loan officers and in understanding the needs of the loan beneficiaries. On-the-Job training for the LCC has been carried out under the operation of bee-keeping and goat loan programs.
- The Loan Program Operational Guideline was prepared for the revolving fund system and approved by both JOHUD and JICA. It is to be revised continuously, thus reflecting the actual implementation in the field.
- The project conducted the following income generation related activities. The number of loan beneficiaries is shown in the table below. Goat project of JFY 2002 is under development and its estimated number of beneficiaries is from 70 to 100.

(i) Bee-keeping

The Project conducted orientation-training and selected 10 loan beneficiaries for JFY 2001, and 20 beneficiaries for JFY 2002. Each recipient was provided with three beehives. The follow up training and supervision were organized at their home by a bee-keeping technician for 9 months. Honey was cultivated roughly three times per year, which proves success in the production, allowing all the recipients to make their regular repayment.

(ii) Goat-raising

Based on the follow up on goat-raising activities of Phase I conducted by the short-term Japanese Expert, the strategies for the goat loan program were made. The beneficiaries received loans in kind (as goats) according to their necessity, ranging from 300 JD to 480 JD.

Table 1 Number of Beneficiaries of Income Generation

Area	Bee-keeping		Goat	Total
	Started from JFY 2001	Started from JFY 2002	Started from JFY 2001	
Karak	10	18	20	48
Mutah	0	0	10	10
Faquo	0	0	10	10
Qatraneh	0	0	10	10
Rabbeh	0	0	10	10
Ayy	0	2	10	12
Total	10	20	70	100

- Sixty five (65) out of 100 beneficiaries attended the FGD in order to identify their achievements and improvements, as well as their improvements. At the grass route level, income generation approach successfully contributed women's empowerment and awareness raising on RH.
- The Project organized a follow up on beneficiary performances and repayments in order to assess possibilities for revolving the fund
- The repayment rate maintains about 80% for Phase II.

(4) Integration

- The Project established LACs in the 6 main target areas of Phase II—Karak, Rabbeh, Faquo, Qatraneh, Ayy, and Mutah / Mazar. The Project conducted 20 orientation meetings in total to inform LAC members of the Project objectives and progress of activities. The LACs agreed, upon request, to support the Project on a voluntary basis.
- The advocacy training for LAC members was held in January 2003 for responding to their requests. Eighteen (18) are selected based on education background and attended the training.
- LAC continuously supports the Project activities in their communities.

(5) Monitoring

- The Project Complied 6 Progress Reports based upon activity reports which are obliged to be submitted after each activity. These Reports were authorized by the Management Committee until the end of September 2002.

3-3. Outputs

Achievement of outputs is monitored according to the indicators of the PDM. The results are as follows.

(1) Output 1

- 1-1 Twenty (20) out of 26 CSTs (76.9 %) met the project standard on FP/RH. The indicator to measure their performances on self-empowerment will be collected by the end of the Project.
- 1-2-1 Twenty nine (29) out of 29 (100%) Facilitators gained knowledge and skills to conduct FP/RH awareness workshops. (Facilitators felt they were empowered by attending trainings and conducting awareness workshops. The results of Focus Group Discussion (FGD) among Facilitators also indicate that they have improved their communication skills, workshop management skills as well as their self-confidence and they were respected more in their family and community. Some Facilitators said their roles in their family and in their community changed. They also felt that they created better communications with MCH centers in their community as a result of awareness workshops.)
- 1-2-2 Facilitation Skill Training on Gender (2 days skill training, 2 days conceptual training) was conducted and 95% of male and female Facilitators gained knowledge and skills necessary.

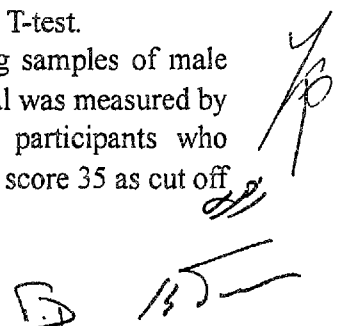
to conduct gender workshops. (95% of Facilitators self-rated that they understood and were confident to conduct gender workshops at the end of the training.)

- 1-3-1 (Female Facilitators) 100% of female Facilitators (13 out of 13, Facilitators and 5 out of 5 attending midwives) performed successfully (above 4 out of 5 in evaluation scale) during the awareness workshops on FP/RH in the 6 target areas by July 2002, while 62% was above 4 average before April 2002, by the results of Supervisory Sheet.
- 1-3-2 Twelve (12) out of 15 female Facilitators (80% of female Facilitators) performed successfully during the awareness workshops on Gender in the 6 main target areas. (80% scored higher than 4.0 average in supervisory sheet.)
- 1-4 Four (4) out of 6 LCCs achieved the Project standard (standard score is over 70 %) regarding knowledge and performance necessary to manage loan programs.
- 1-5 Institutional standard related to the revolving fund was established according to "The Loan Program Operational Guideline - March 2003". The guideline will be continuously revised to reflect lessons and experiences learned from the actual implementation of the Project.
- 1-6 Twenty eight (28) LAC out of 39 continued their support to the Project on a voluntary basis by attending meetings and expressing their community needs and opinions.
- 1-7 LAC members acted as Project's advocates by confirming the Project objectives and the benefits of FP and empowerment of women to the other people in the community.

(2) Output 2

- 2-1
 - (Female participants in FP/RH workshops) Among 1,233 female participants (including not married, age beyond 50) , the total number of target female participants (married, age 15-49) was 1,099 in 5 topics of 60 awareness workshops on FP/RH.
 - (Female Participants in Gender Workshops) 36 Workshops on Gender were conducted for female in 6 main target areas. Among 844 female participants (including not married, age beyond 50) , the total number of target female participants (married, age 15-49) was 688 in 3 topics of 36 awareness workshops on Gender.
 - (Married couples in Wrap-up workshops) 3 wrap-up workshops for married couples are conducted in 3 main target areas in January, 2003. 16 couples and 5 male and 10 female married participants who came alone (total 47 participants) in Rabbeh , 5 couples and 20 married female participants in Mutah, and 6 couples and 4 married male and 18 married female participants in Qatraneh (total 34 participants)
 - Fifty-nine (59) Awareness workshops on FP/RH for married male (age 18-49) were held in 27 places of 6 target areas in January–October 2002. The total number of male participants was 800.
- 2-2 CSTs completed 6,434 home visits in 19 months (average of visits per month is 338)
- 2-3 FP/RH approval increased by 10.55% in 6 main target areas among female participants during FP/RH awareness workshops (60 workshops all together) . FP/RH approval was measured by Pre/Post survey among all female participants and the number of participants who accepted FP/RH increased from 512 to 566 (10.55% increase) as FP approval score 35 as cut off point (full score was 39) . Approval rate was also significantly improved (T value= 3.491, significance level $p < .001$ two tailed, $N=797$) by the paired sample T-test.

FP/RH approval increased by 28% in 6 main target areas among samples of male participants ($n=153$) during FP/RH awareness workshops. FP/RH approval was measured by pretest/posttest survey among male participants and the number of participants who accepted FP/RH increased from 65 to 83 (28% increase) as FP approval score 35 as cut off



point. Approval rate did however not significantly improve by the paired sample T-test.

- 2-4 Spousal Communication Practice among female participants will be measured again by KAP-Impact Survey in January and February 2003 to observe behavioral change after the workshops.
- 2-5 The summaries of FGDs indicated that female participants felt their self-confidence and their spousal-communication skills improved after attending the workshops. They also found that it became more acceptable to talk about FP in their community after the workshops. They said that FP/RH became an issue to be freely discussed in their community.

The summaries of FGDs among Facilitators indicated that FP/RH and Gender became more common issues in their community. More people talk about FP/RH and Gender. They have commented that awareness workshops provided community with concrete ideas on how to start practicing gender and RH without creating much friction in the community.

(3) Output 3

- 3-1 Total number of client visits in MCH at MCH centers except CPP (Comprehensive Postpartum Project formally supported by USAid) Center and FP visits at MCH centers and CPP Center in the target areas in 2002 decreased by 7.1% over 2000. One of the possible reasons for decrease is the changes of the standards and protocols for RH in MCH Centers by decreasing the number of visits.
- 3-2 Eleven (11) out of 18 midwives (61%) provide FP counseling in accordance with MOH's standards.
- 3-3 Three (3) out of 20 doctors provide IUD service meeting MOH's standard.
- 3-4 Seven (7) out of 10 trainees provide ultrasound services. The trainees' skills on ultrasound reading will be assessed by the end of the Project to identify if they meet the MOH's standard.
- 3-5 The indicator will be collected by the end of the Project.
- 3-6 The indicator will be collected by the end of the Project.


(4) Output 4

- 4-1 90 % of the women loan beneficiaries (selected beneficiaries during the Project phase II) own and manage the project as main implementers in the 6 areas.
- 4-2 According to the monitoring activities (FGD, questionnaire survey, and case studies) , over 90 % of the loan beneficiaries have attained an increased self-esteem, self-confidence, and self-satisfaction.
- 4-3 According to the monitoring activities (FGD, questionnaire survey, and case studies) , 90 % of the loan beneficiaries have attained an increased role in decision making, and sharing of responsibility within families.
- 4-4 According to the monitoring activities (FGD, questionnaire survey and case study) , 90 % of the beneficiaries have attained an increased appreciation and respect from the other family members, as well as an improved attitude toward women at household level.

(The result (output 4.2, 4.3, and 4.4) was summarized in the report "Income-generating projects and the empowerment of women: Experience of Family Planning and Gender in Development Project in Jordan" January 2003)

(5) Output 5:

- 5-1 Progress report are compiled, authorized by the Management Committee and distributed


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to the Project members in 3 months.

5-2 Decision is made based on activity reports and field visits by the Management Committee and informed to the Project members monthly.

3-4. Project Purpose

The Project Purpose is 'Family planning practice is increased in 6 "main" target areas and 3 follow-up areas in Karak Governorate. Based on the record at the MCH Center in Karak, the total number of new users of modern contraceptives in 2002 increased by 1.32% in comparison with 2000. The detailed data is shown in the table below.

Table 2 Number of New Users of Modern Contraceptives
at MCH Centers and CPP (Comprehensive Postpartum Project) Center in the Target Areas

	1999	2000	2001	2002
Condom	668	686	749	732
Injectable	184	228	255	258
Pill	1,188	1,291	1,194	1,210
IUD	884	747	799	792
Norplant	2	1	2	0
Total	2,926	2,953	2,999	2,992
% increase and decrease on the year preceding		+0.92%	+1.55%	-0.24%

Source: MCHC Logistics Report

3-5. Overall Goal

The overall goal of the Project is 'Fertility in Karak Governorate is decreased.' The Project has not found a suitable data to measure the overall goal. At the Evaluation Workshop, Dr. Batayneh, Director of MCH Department of MOH, suggested that the number of birth at hospitals can be an acceptable indicator for that purpose because the majority of delivery in Karak are made at hospitals.

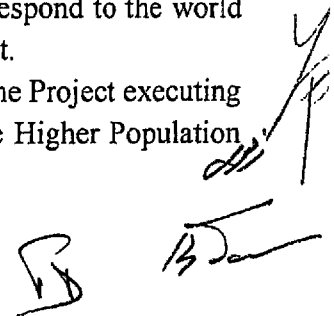
4. Evaluation by Five Criteria

Observing the results of the Project, it is important to thoroughly evaluate the Project from the viewpoint of present and future implications. For that purpose, the efficiency, the effectiveness, the impact, the relevance and the sustainability of the Project, were assessed jointly by both sides through an evaluation workshop. The findings of the workshop are as follows.

4-1. Relevance

This is an experimental and innovative Project that is to realize the "ICPD Action Program" (International Conference on Population and Development) . It is perhaps the first project that JICA has integrated Gender in Development (GID) and Family Planning to respond to the world trend after ICPD in 1994. The Project has particular significance from this aspect.

The RH is one of high priority areas of Government of Jordan. One of the Project executing organization, the National Population Commission has been promoted into the Higher Population



Council directly under the Prime Minister in December 2002. This fact shows that this Project is in line with Jordanian policies.

Women in target communities have shown increasing interest in the Project as it progressed. Women's needs for the Project are very high. Karak Governorate was selected due to its high fertility rate as well as poverty, and regarded as high priority area by Jordanian Government. Although the Project was implemented in specific areas in Karak, the needs for the Project are still high in other areas.

Since Japanese Government is promoting international cooperation in the field of population, this Project is also in line with its strategy.

4-2. Effectiveness

Regarding the ultimate goal of behavioral change for women, the attitude for family planning has been gradually changing favorably based on the Pre/Post survey at the workshop.

Comparing between the awareness workshop survey and the National survey (2002 Jordan Population and Family Health Survey), workshop participants use more modern contraceptive methods than the national average. Although the participants generally have quite high awareness of family planning before attending the workshop, it can be analyzed that the Project activities affected the increase in family planning practice. It is expected that family planning practice will further increase due to the significant increase of family planning approval observed among female participants (T value= 3.491, significance level $p < .001$ two tailed, $N=797$, by the paired sample T-test)

Table 3 Currently married women (age 15-49) using contraception, by type of method in 2002 JPFHS and Survey at the Female Awareness Workshops 2002 in Karak (N=802)

	2002JPFHS	2002 Participant Survey in Karak
All Methods:	55.8%	62.2%
Modern Methods	38.6%	55.2%
Pill	7.5%	12.9%
IUD	23.6%	25.7%
Injections	0.9%	3.2%
Norplant	0.0%	1.2%
Vaginal methods	0.3%	0.0%
Condom	3.4%	5.8%
Female Sterilization	2.9%	3.3%

Source: FP/GID Project Hagiwara & Malkawi 2002

Note: If more than one method is used, only the most effective method is considered in this tabulation.

Women's self-esteem and self-confidence, increased respect for them among family members, and their participation in community activities had been confirmed through the series of FGDs and observations.

As to the measurement of achieving the ultimate goal, it is worth mentioning that the Project can show some possibilities to measure increase in family planning practice. However, it must be

understood that three years, duration of the Project period, is too short to judge the outcomes in the field of a behavioral change.

The Project was implemented while taking into account the religious and cultural attitudes and backgrounds of Jordanians. This helped the smooth implementation of the Project.

4-3. Efficiency

In general, efficiency is fairly appropriate in terms of timing, quantity and quality of provision of Jordanian and Japanese inputs.

Since it was the first case that the livestock was supplied to JOHUD as JICA scheme of 'provision of equipment' that was combined with loan scheme, there were some difficulties in its procurement procedure. It caused less efficiency in the income generation activity.

Jordan paid its part of administrative and activity expenses. Therefore, investment was properly made.

4-4. Impact

Formulating and functioning of local human resources, establishing mutual cooperation channels in the local community had a significant impact not only to individuals but also to the entire local society.

Although long term impact is not ready to measure yet, short term impacts are clearly observed by the Evaluation Team.

For JICA, this Project opened possibility for a credit scheme of small business as part of a technical cooperation.

4-5. Sustainability

Jordanian counterpart organizations have a strong will of ownership of this Project, which is essential to secure the sustainability.

There is no doubt that MOH, HPC, and JOHUD have a will to continue supporting the Project achievements after the termination of the Project.

Capacity of the medical staff of the Maternal and Child Health Centers run by the MOH is improving as expected, and they are using their enhanced capacity to their daily services. The other committees, will sustain themselves without any major problems.

The community showed strong interest in CSTs and Facilitators who were trained through this Project. JOHUD has a full capability to maintain and develop the Program of CST and Facilitators but requires the certain financial support from other organization. Whether CSTs and Facilitators remain active or not, will depend on how JOHUD Head Office and its CDCs in Karak Governorate would support them.

The greatest concern for income-generating activities for which JOHUD is responsible is the management of the revolving funds. The revolving fund system must be strengthened, and responsibilities between CDCs in Karak and JOHUD head office must be demarcated. To develop this program, steady continuation of current women beneficiaries and the increasing of beneficiaries in this field would remain as tasks.

5. Conclusion

At the time of this final evaluation, it was not confirmed whether the Project Purpose would be achieved or not, however, it can be predicted that the Purpose will be achieved by the end of the Project period. Since executing bodies/counterpart organizations will continue and develop the activity with their own effort, it is concluded that this Project would be terminated as planned.

The integrated approach, strategies of implementation including and functioning of the CSTs, LACs and Facilitators, is considered as a capable model.

<Promoting Factors>

One major promoting factor can be attributed to the leadership of the Chief Advisor who has built relations of trust for the almost six years from the previous phase of the Project. Communication among Japanese experts and Jordanian counterparts was also favorable, which was another promoting factor for the Project 's smooth implementation.

As for the activities at local level, the existence of LAC made the entering to the field easier and more effectively. The human network of LAC was a valuable resource for the Project.

<Constraints>

The turning over of the personnel of both sides and unavailability of full-time Jordanian counterparts sometimes retarded the advancement of the Project activities. This was one impeding factor for such a short duration Project.

The regulations of the executing bodies, especially JICA procurement rules, were also the burden for the Project occasionally.

6. Recommendation

It is recommended to evaluate project's impact some years later after the completion of the project, because the impacts of project intervention that aims at RH behavioral change requires certain period of time.


Readiness of the supporting structure of JOHUD (CDCs and Head Office) for sustaining CSTs and Facilitators, the valuable fruits of the Project, should be clarified so that CSTs and Facilitators can actively continue their activities.

It is desirable that HPC, MOH and JOHUD convey and spread experience attained through this Project to other parts of Jordan. In particular, the Jordanian Project experience should be applied to a new Project, Community Empowerment Program, which is proposed by JOHUD to JICA.

Experience should also be disseminated as training programs to Arab countries. For its smooth implementation, it is desired that the first training session should be implemented by the end of the Project.

7. Lessons Learnt

The Project developed one model of monitoring and evaluation methods to measure outcomes of such projects. It should be well compiled, accumulated and shared through the JICA knowledge management system.

Although social and cultural elements are crucial elements for the projects in the field of population, correct understanding, close communication and careful management can cope with those issues. 



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- ANNEX-2 List of Personnel Consulted (including List of Evaluation Attendee)
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- 1) List of Japanese Experts Dispatched by JICA
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ANNEX-1

1) Composition of Joint Evaluation Team

	Name	Organization
1	Dr. Zuhair Alkayed	Secretary General, HPC
2	Mr. Awad Shdul	Deputy of Secretary General, HPC
3	Mr. Abdul Rahim Al Ma'aytah	Project Manager, HPC
4	Mr. Abdul Munem Malkawi	Population Specialist, HPC
5	Mr. Abdullah R. Qudsi	Coordinator, National Center for Population Communication, HPC
6	Dr. Samir Al Awarieh	Secretary General, MOH
7	Dr. Mohammed Batayneh	Director, MCH Department, MOH
8	Dr. Akef Al Azab	Deputy Director, MCH Department, MOH
9	Dr. Ruwaida Rashid	Head Maternal Section, MOH
10	Dr. Sireen Mosmar	Deputy Director, Reproductive Health Project, MOH
11	Dr. Ghazi Al Marayat	Director General, Karak General Health Directorate, MOH
12	Dr. Nassar Amareen	Deputy Director, Karak General Health Directorate, MCH Supervisor MOH
13	Ms. Namat Madanat	Midwife Supervisor, Karak Health Directorate, MOH
14	Ms. Farah Daghistani	Executive Director, JOHUD
15	Dr. Mahmoud Kfawin	Director, National Coordination Office, JOHUD
16	Ms. Fatima Abu Kaff	National Coordination Office, JOHUD
17	Ms. Nuha Muhriez	Program Supervisor, JOHUD
18	Ms. Rihab Al Majali	Director, CDC Karak, JOHUD
19	Mr. Thaeer Eibeisat	CDC Karak, JOHUD
20	Mr. Narihiro Yaegashi	Director, Second Medical Cooperation Div., Medical Cooperation Dept., JICA
21	Ms. Naoko Fuwa	Staff, Second Medical Cooperation Div., Medical Cooperation Dept., JICA
22	Ms. Makiko Komasaawa	Researcher, Earth & Human Corporation
23	Mr. Tsutomu Kobayashi	Assistant Resident Representative, JICA Jordan Office
24	Dr. Tokiko Sato	Chief Technical Advisor, JICA FP/GID Project Phase II
25	Ms. Reiko Otoguro	Coordinator, JICA FP/GID Project Phase II
26	Ms. Atsuko Imoto	Expert, JICA FP/GID Project Phase II
27	Ms. Yoko Matsuya	Expert, JICA FP/GID Project Phase II
28	Dr. Akiko Hagiwara	Expert, JICA FP/GID Project Phase II
29	Mr. Akihiro Fujiwara	Expert, JICA FP/GID Project Phase II
30	Mr. Kei Matsuda	Expert, JICA FP/GID Project Phase II

ANNEX-2

List of Personnel Consulted

1) January 19, 2003 Joint Meeting (at JOHUD, Amman)

	Name	Organization
1	Dr. Zuhair Alkayed	Secretary General, HPC
2	Mr. Abdul Rahim Al Ma'aytah	Project Manager, HPC
3	Mr. Abdul Munem Malkawi	Population Specialist, HPC
4	Mr. Abdullah R. Qudsi	Coordinator, National Center for Population Communication, HPC
5	Dr. Mohammed Batayneh	Director, MCH Department, MOH
6	Dr. Akef Al Azab	Deputy Director, MCH Department, MOH
7	Dr. Ruwaida Rashid	Head Maternal Section, MOH
8	Dr. Sireen Mosmar	Deputy Director, Reproductive Health Project, MOH
9	Dr. Nassar Amareen	Deputy Director, Karak General Health Directorate, MCH Supervisor MOH
10	Ms. Namat Madanat	Midwife Supervisor, Karak Health Directorate, MOH
11	Dr. Mahmoud Kfawin	Director, National Coordination Office, JOHUD
12	Ms. Fatima Abu Kaff	National Coordination Office, JOHUD
13	Ms. Nuha Muhriez	Program Supervisor, JOHUD
14	Ms. Rihab Al Majali	Director, CDC Karak, JOHUD
15	Mr. Thaer Eibeisat	CDC Karak, JOHUD
16	Mr. Narihiro Yaegashi	Director, Second Medical Cooperation Div. Medical Cooperation Dept., JICA
17	Ms. Naoko Fuwa	Staff, Second Medical Cooperation Div., Medical Cooperation Dept., JICA
18	Ms. Makiko Komasa	Researcher, Earth & Human Corporation
19	Mr. Tsutomu Kobayashi	Assistant Resident Representative, JICA Jordan Office
20	Dr. Tokiko Sato	Chief Technical Advisor, JICA FP/GID Project Phase II
21	Ms. Reiko Otaguro	Coordinator, JICA FP/GID Project Phase II
22	Ms. Atsuko Imoto	Expert, JICA FP/GID Project Phase II
23	Ms. Yoko Matsuya	Expert, JICA FP/GID Project Phase II
24	Dr. Akiko Hagiwara	Expert, JICA FP/GID Project Phase II
25	Mr. Akihiro Fujiwara	Expert, JICA FP/GID Project Phase II
26	Mr. Kei Matsuda	Expert, JICA FP/GID Project Phase II

ANNEX-2

2) January 21, 2003 Focus Group Discussion (at Karak CDC)

(1) Facilitators

	Name	Area	Other Activities
1	Ms. Khawla Al Gatawneh	Karak	
2	Ms. Arij Majali	Karak	CDC Rural Leader, LAC, LCC
3	Ms. Dima Medanat	Karak	
4	Mr. Akram Al Habashneh	Karak	
5	Ms. Kholood Mohamad Matarneh	Ayy	
6	Ms. Khawlah Rawashdeh	Ayy	LAC, LCC
7	Ms. Dalal Zreiqat	Rabbeh	LAC
8	Ms. Noor Salem Al Thenibat	Rabbeh	
9	Mr. Ottal Alah Majali	Rabbeh	
10	Mr. Yasser Al Majali	Rabbeh	
11	Ms. Iman Daa's	Faquo	
12	Mr. Mkhled Allemoun	Faquo	LAC
13	Ms. Iman Al Rahifeh	Qatraneh	CDC Rural Leader, LAC, LCC
14	Ms. Lina Al Byeydah	Mutah	
15	Ms. Hiam Badi Al Sarayreh	Mutah	
16	Ms. Amal Al Sarayreh	Mutah	CDC Rural Leader LAC, LCC
17	Dr. Naeif All Heresh	Mutah	LAC

(2) LAC

	Name	Area	Other Activities
1	Mr. Mekhlid Al Laymoun	Faquo	Facilitator
2	Dr. Sho'la Amareen	Karak	
3	Ms. Areej Al Majali	Karak	Rural Leader Facilitator, LCC
4	Mr. Faris Al Sarayreh	Mutah	
5	Ms. Amal Al Sarayreh	Mutah	Rural Leader Facilitator, LCC
6	Ms. Imar Al Rahayfeh	Qatraneh	Rural Leader, Facilitator, LCC
7	Ms. Dalal Zreiqat	Rabbeh	Facilitator, LCC
8	Ms. Nadira Rawashdeh	Ayy	CST, LCC
9	Ms. Khawla Rawashdeh	Ayy	Facilitator, LCC
10	Dr. Sultan Tarawneh	Qatraneh	
11	Mr. Naeif Al Heresh	Mutah	Facilitator

(3) LCC

	Name	Area	Other Activities
1	Ms. Areeji Majali	Karak	CDC Rural Leader, Facilitator, LAC
2	Ms. Amal Sarayreh	Mutah	CDC Rural Leader, Facilitator, LAC
3	Ms. Iman Rhayfeh	Qatraneh	CDC Rural Leader, Facilitator, LAC
4	Mr. Ayyid Assasfeh	Rabbeh	
5	Ms. Nadira Rwashdeh	Ayy	LAC, CST, Head of Ayy Society
6	Ms. Manal Al Kasasbeh	Ayy	LAC, CST
7	Ms. Hiba Sarayreh	Mutah	LAC

(4) CST

	Name	Area	Other Activities
1	Ms. Fatenah Matarneh	Ayy	
2	Ms. Nadira Rwashdeh	Ayy	LCC, LAC
3	Ms. Manal Kasasbeh	Ayy	LCC
4	Ms. Fayza Adel	Qatraneh	
5	Ms. Bayan Nawayseh	Mutah	
6	Ms. Gharam Nawayseh	Mutah	
7	Ms. Asreyeh Nawasra	Hadithe	
8	Ms. Khawla Bustanji	Karak	
9	Ms. Ghada Bawat	Fifa	
10	Ms. Souad Khlefat	Ghor Safi	

Ms. Munira Shaba'an, Consultant, CST and Midwife Supervisor

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ANNEX-2

3) January 22, 2003 PCM Workshop I (at JOHUD, Amman)

	Name	Organization
1	Mr. Abdul Rahim Al Ma'aytah	Project Manager, HPC
2	Mr. Abdul Munem Malkawi	Population Specialist, HPC
3	Mr. Abdullah R. Qudsi	Coordinator, National Center for Population Communication, HPC
4	Dr. Mohammed Batayneh	Director, MCH Department, MOH
5	Dr. Akef Al Azab	Deputy Director, MCH Department, MOH
6	Dr. Ruwaida Rashid	Head Maternal Section, MOH
7	Dr. Nassar Amareen	Deputy Director, Karak General Health Directorate, MCH Supervisor MOH
8	Ms. Namat Madanat	Midwife Supervisor, Karak Health Directorate, MOH
9	Dr. Mahmoud Kfawin	Director, National Coordination Office, JOHUD
10	Ms. Fatima Abu Kaff	National Coordination Office, JOHUD
11	Ms. Nuha Muhriez	Program Supervisor, JOHUD
12	Mr. Thaer Eibeisat	CDC Karak, JOHUD
13	Mr. Narihiro Yaegashi	Director, Second Medical Cooperation Div. Medical Cooperation Dept., JICA
14	Ms. Naoko Fuwa	Staff, Second Medical Cooperation Div., Medical Cooperation Dept., JICA
15	Ms. Makiko Komasaawa	Researcher, Earth & Human Corporation
16	Mr. Tsutomu Kobayashi	Assistant Resident Representative, JICA Jordan Office
17	Dr. Tokiko Sato	Chief Technical Advisor, JICA FP/GID Project Phase II
18	Ms. Reiko Otaguro	Coordinator, JICA FP/GID Project Phase II
19	Ms. Atsuko Imoto	Expert, JICA FP/GID Project Phase II
20	Ms. Yoko Matsuya	Expert, JICA FP/GID Project Phase II
21	Dr. Akiko Hagiwara	Expert, JICA FP/GID Project Phase II
22	Mr. Akihiro Fujiwara	Expert, JICA FP/GID Project Phase II
23	Mr. Kei Matsuda	Expert, JICA FP/GID Project Phase II

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ANNEX-2

4) January 23, 2003 PCM Workshop II (at JOHUD, Amman)

	Name	Organization
1	Mr. Abdul Rahim Al Ma'aytah	Project Manager, HPC
2	Mr. Abdul Munem Malkawi	Population Specialist, HPC
3	Mr. Abdullah R. Qudsi	Coordinator, National Center for Population Communication, HPC
4	Dr. Akef Al Azab	Deputy Director, MCH Department, MOH
5	Dr. Ruwaida Rashid	Head Maternal Section, MOH
6	Dr. Nassar Amareen	Deputy Director, Karak General Health Directorate, MCH Supervisor MOH
7	Ms. Namat Madanat	Midwife Supervisor, Karak Health Directorate, MOH
8	Dr. Mahmoud Kfawin	Director, National Coordination Office, JOHUD
9	Ms. Fatima Abu Kaff	National Coordination Office, JOHUD
10	Ms. Nuha Muhriez	Program Supervisor, JOHUD
11	Mr. Thaer Eibeisat	CDC Karak, JOHUD
12	Mr. Narihiro Yaegashi	Director, Second Medical Cooperation Div. Medical Cooperation Dept., JICA
13	Ms. Naoko Fuwa	Staff, Second Medical Cooperation Div., Medical Cooperation Dept., JICA
14	Ms. Makiko Komasa	Researcher, Earth & Human Corporation
15	Mr. Tsutomu Kobayashi	Assistant Resident Representative, JICA Jordan Office
16	Dr. Tokiko Sato	Chief Technical Advisor, JICA FP/GID Project Phase II
17	Ms. Reiko Otaguro	Coordinator, JICA FP/GID Project Phase II
18	Ms. Atsuko Imoto	Expert, JICA FP/GID Project Phase II
19	Ms. Yoko Matsuya	Expert, JICA FP/GID Project Phase II
20	Dr. Akiko Hagiwara	Expert, JICA FP/GID Project Phase II
21	Mr. Akihiro Fujiwara	Expert, JICA FP/GID Project Phase II
22	Mr. Kei Matsuda	Expert, JICA FP/GID Project Phase II

The Current PDM approved by the Japanese Expert Meeting (May 19th, 2002)

Project title: Family Planning and Gender in Development (Phase II)

Project duration: July 1, 2000 to June 30, 2003

Target areas: Karak (City), Rabbeh, Faquo, Ayy, Mutah & Mazar, Qatraneh (6 main target areas), Safi, Mazra'a and Haditheh (3 "follow-up" areas of the Phase I)

Target group: Married women of the reproductive age and their husbands.

Date of Elaboration: May 19th, 2002

ANNEX-3

Narrative Summary	Objectively Verifiable Indicators	Means of Verification	Important Assumptions
Overall Goal: Fertility in Karak Governorate is decreased.	Number of births decreases by X% in contrast to population increase	Civil Department reports obtained by the Karak General Health Directorate	- Population policy of Jordan doesn't change
Project Purpose: Family planning practice is increased in 6 "main" target areas and 3 follow-up areas in Karak Governorate.	Number of new users of modern contraceptives increases by 10% at MCH Centers in the 9 areas by June 2003.	Clients' charts	- Effects of project activities are extended to other areas in Karak Governorate - Number of the dropouts of 4 modern contraceptives decreases by x% at MCH Centers in the 9 areas by June 2003.
Outputs: 1. Capacity of CST, Facilitators, LCC and LAC is strengthened.	1.1 20 out of 26 CSTs meet the project standard on RH/FP and gender in the 9 areas by June 2003. 1.2.1 26 out of 29 Facilitators (or 90% of male and female Facilitators) gain knowledge and skills necessary to conduct awareness w/s on RH/FP at the end of facilitation skills training on RH/FP. 1.2.2 26 out of 29 Facilitators (or 90% of male and female Facilitators) gain knowledge and skills necessary to conduct awareness w/s on Gender at the end of facilitation skills training on Gender. 1.3.1 23 out of 29 Facilitators (or 90% of male and female Facilitators) performance successfully during the awareness w/ss on RH/FP in the 6 target areas by July 2002 1.3.2 23 out of 29 Facilitators (or 80% of male and female Facilitators) performance successfully during the awareness w/ss on Gender in the 6 target areas by March 2003 1.4 Level of performance and knowledge in each of 9 LCCs is improved by June 2003 1.5 Institutional standard related to the revolving fund is established, revised according to the necessity by June 2003. 1.6 LACs create more positive social atmosphere for project activities in the 6 areas by June 2003 1.7 LACs act as project's advocates.	1.1 Supervisory sheet 1.2.1 Training evaluation 1.2.2 Training evaluation 1.3.1 Supervisory sheet (Male Facilitators and Female Facilitators were monitored and measured separately) 1.3.2 Supervisory sheet (Male Facilitators and Female Facilitators were monitored and measured separately) 1.4 Scored based on the Project's observation 1.5 Record of revision of the Guideline 1.6 Model case study 1.7 Model case study	- Allocation of part-time MCH doctors to MCH centers on a regular basis. - Number of staff with gender consideration increased.
2. Positive social attitudes towards women and FP are increased	2.1 Number of the target participants in awareness w/ss on RH and Gender achieves to 3500 in the 9 areas by March 2003 2.2 Number of CST's home visit completed achieved to 5000 per year in the 9 areas by June 2003. 2.3 Number of the target participants in awareness w/ss who accept FP scored by KAP increases by 10% in the 6 main target areas by October 2002 2.4 Level of spousal communication scored by KAP increases by 10% among w/s participants in the 6 main target areas by April 2003.	2.1 Participant registration book 2.2 Home visit's record (project record) 2.3 Comparison of pre-, post- and later KAP survey (Male participants and female participants were monitored separately) 2.4 Comparison of pre-, post- and later KAP survey (Male participants and female participants were monitored separately.)	

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<p>2.1 (2.1 to 2.6 in the follow-up areas) Identify awareness program strategies, prepare training materials and conduct evaluation</p> <p>2.2 Conduct awareness training to CST (Gender).</p>	<p>FP & RH Community development/Gender/IG</p> <p>Administrative: Secretaries, drivers</p>	<p>Short-term expert Income generation IEC</p> <p>(Machinery and equipment)</p>	<ul style="list-style-type: none"> - Women accept male medical staff. - Trained CST, Facilitators, LCC and LAC don't move from the project.
<p>2.3 Mobilize community leaders as advocacy.</p> <p>2.4.1 Produce IEC materials, enter-educate, media, etc.</p> <p>2.4.2 Distribute existing and newly produced video and other IFC materials and monitoring their usage</p> <p>2.5.1 Select and conduct training to awareness seminar facilitators (males and females)</p> <p>2.5.2 Conduct awareness seminars (Males and females)</p> <p>2.6 Conduct home visits. (2.7 to 2.9 at Southern Ghor)</p> <p>2.7 Conduct refreshing training to CST,</p> <p>2.8 Conduct awareness seminars (Male and females).</p> <p>2.9 Conduct home visits.</p>	<p>(Land and facilities)</p> <p>JOHUD: Land, CDC office and utilities, office space and utilities for chief advisor, coordinator, CD/Gender/Income generation expert</p> <p>Office space for IEC expert, RH/FP expert</p> <p>MOH: Space and utilities at Karak MCH, training hall, office space for RH/FP expert in Amman</p>	<p>(Training of Jordanian counterparts)</p>	<ul style="list-style-type: none"> - There's no frequent electrical power failure during the awareness w/s.
<p>3.1 Identify inventory of MCH centers.</p> <p>3.2 Conduct training related to the project objectives.</p> <p>3.3 Conduct PRA.</p> <p>3.4 CST conduct home visit.</p> <p>3.5 Provide monthly statistical report.</p> <p>4.1.1 Formulate LCC at 6 areas in Karak and recognize at three in Southern Ghor</p> <p>4.1.2 Conduct training related to small business and loan scheme for LCC.</p> <p>4.1.3 Train LCC members on OJT basis.</p> <p>4.2 Establish revolving fund system.</p> <p>4.3.1 Conduct needs survey of the local people through PRA</p> <p>4.3.2 Identify and select the new income generation projects</p> <p>4.3.3 Conduct basic small business training for candidate beneficiaries and beneficiaries</p> <p>4.3.4 Select beneficiaries.</p> <p>4.3.5 Conduct technical training for beneficiaries.</p> <p>4.3.6 Provide materials related to income generation projects</p> <p>4.3.7 Follow-up and monitoring on materials and beneficiaries</p> <p>5.1 Establish a monitoring system.</p> <p>5.2 Monitor project activities on a regular basis.</p> <p>5.3 Conduct outcome evaluation at the end of the project.</p> <p>5.4 Share projects outputs on the national level.</p> <p>6.1 Conduct on-the-job training by Japanese experts.</p> <p>6.2 Conduct seminars to the counterparts.</p> <p>6.3 Dispatch counterparts to Japan.</p> <p>6.4 Conduct technical exchange outside Jordan (not in Japan)</p>			<p>Pre-conditions:</p> <ul style="list-style-type: none"> - Full-commitment of all stakeholders is secured. - Religious and social leaders do not oppose to FP and enhancement of women's economic activities.

Notes:

- 3.3, 3.4 and 3.5 were deleted due to the duplication with PHCI Project (USAID).
- 3.8 was deleted due to the duplication with MOH's activities.
- "New user" was suggested to define during the w/s that women who start a new contraceptive method and switch from one method to another.
- "IG beneficiaries" here are defined as all IG beneficiaries selected during the Project Phase II. (Phase I beneficiaries are excluded here!)

Abbreviations:

- HPC : Higher Population Council
- JOHUD : Jordanian Hashemite Fund for Human Development
- MOH : Ministry of Health
- CST : Community Support Team
- LCC : Local Credit Committee
- IEC : Information, Education and Communication
- LAC : Local Advisory Committee and Communication
- IG : Income generation
- FP : Family planning
- W/S : Workshop
- RH : Reproductive health

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Jordan Family Planning and Gender in Development (Phase II) Final Evaluation

EVALUATION GRID

*Important Items

Evaluation Item	*	Contents of Study	Source of Information																
			PT									B							
			HPC	MOH	JOH	JD	JP	LCC	LAC	F	CST								
Overview of Achievement		1. Understanding Inputs																	
		2. Understanding achievement of activities																	
		3. Understanding achievement of outputs, project purpose and overall goal based on their indicators																	
		4. Examining constraint or promotion factors regarding above 1-3																	
Understanding Process of Implementation		1. Transition of PDMs																	
	●	2. Coordination of three implementation organizations																	
		3. Assigning C/P																	
		4. Relationship between C/Ps and Japanese experts																	
		5. Monitoring system																	
	●	6. Changes of important assumptions																	
Five Criteria	Relevance	● 1. Does the overall goal correspond to the national policy of Jordan?	H	H	H														
		2. Is selection of target area appropriate from the view point of Jordan's priority?	H	H	H	H	H												
		3. Is the size of target areas appropriate?		H	H	H	H												
		● 4. Does the project aim correspond to the Japanese Government Cooperation Policy?		H			H												
		5. Does the project aim correspond to the JICA strategy under the Jordan Country Implementation Plan?	H	H	H	H	H, D												
		6. Are there any advantage of Japanese technology ?	H	H	H	H													
		● 7. Does the project aim accord with the world trends in the field of		H	H	H	H												
	Effectiveness	● 1. Does family planning practice increase at the target areas?				D	D						F	H					
		● 2. Are there any changes in women's consciousness?				H,D	H,D				F	F	F	O, H					
		● 3. Are there any changes in consciousness of people surrounding women?				H,D	H,D	F	F	F	F	F	F	O					
		● 4. Are there any (+/-)social impacts surrounding women?				H,D	H,D	F	F	F	F	F	F	O					
		● 5. Is the measurement of outputs appropriate?			H	H,D	H,D												
		● 6. Does multi-sect oral -integrated approach produce any synergies?	H	H	H	H	H												
		7. Examining constraint or promotion factors regarding above 1- 6.			H	H	H	F	F	F	F	F	F	H					
		8. Is the monitoring system appropriate?				H	H												
	Efficiency	9. Are the indicators of the outputs and the project purpose valid?	H	H	H	H	H												
		1. Are timings of inputs valid ?		H	H	H	H												
		2. Are the selection of machinery and activity expences appropriate?		H	H	H	H												
		3. Are inputs of Jordanian side appropriate?	H,D	H,D	H,D	H,D													

ANNEX-5

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Evaluation Item	*	Contents of Study	Source of Information								B			
			PT					LCC	LAC	F		CST		
			HPC	MOH	JOH	JD	JP							
Five Criteria		4. Has the experiences of Phase I utilized to Phase II well?		H	H	H	H							O,H
		5. Are there any cooperation with other JICA cooperations?					H							
		6. Are there any relationship with other donors?	H	H	H	H	H							
		7. Let's compare with JICA's similar project.		H	H									
		8. Examining constraints or promotion factors regarding above 1- 7		H	H	H	H	F	F					
	Impact	1. Is the overall goal and its indicator valid?	H	H	H	H	H							
		2. Are any influences on other organizations in Jordan, such as USAID, or (UNFPA)?	H	H	H		H							
		3. Are any influences on other organizations in Jordan, such as other JOHUD CDCs?	H	H	H									
		4. Are there any influences on the population in the target areas? Are interested in the Project?						F	F	F	F			O,H
		5. Are there other activities initiated by CST or LAC other than the Project activities?							F	F	F			
		6. What are lesson learned for the similar integrated-approach project in JICA?			H	H	H		F	F	F			O
	Sustainability	1. Will the three organizations sustain their level of abilities in terms of planning, management, financing?	H	H	H	H	H							
		2. Can the C/P sustain same level of activities?			H,D	H,D	H							
		3. Will each CDC sustain their level of abilities of planning, management, and financing?			H,O	H,O	H							
		4. Will the CSTs sustain their activities as same level as the present?	H	H	H	H	H					F,O		
		5. Will the facilitators sustain their activities as same level as the present?	H	H	H	H	H				F,O			
		6. Will the technical abilities of doctors, nurses, and midwives improve after the project termination?		H,O			H							
		7. Will LCC support micro-credit activity after the Project termination?			H	H	H	F						
8. Will LAC sustain their activities after the Project termination?						H		F						
9. Will the monitoring system sustain after the Project termination?			H	H	H	H								

Legend :
HPC : Higher Population Council, MOH : Ministry of Health, PT : Project Team, JD : Jordan Project Team, JP : Japanese Project Team, LCC : Local Credit Committee, LAC : Community Advisory Committee, F : Facilitators, CST : Community support Team, B : End Beneficiaries
<Source of Information>D : Project Document, Statistics etc., H : Hearings (including Workshops), F : Focus Group Interviews, O : Observations

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Final Evaluation Workshop

FPGID Project (Phase II)
January 22-23, 2003
Amman, Jordan

AGENDA for Day 1

Agenda	Duration	Time Table	Facilitator
1. Opening	5 min.	9:00	Komasawa
2. Briefing on the Method of JICA Evaluation	20 min.	9:05-9:25	Komasawa
3. Sharing transition of POMs and the current POM	10 min.	9:25-9:35	(Hagwara)
4. Understanding Inputs	15 min.	9:35-9:50	Komasawa
5. Discussion on Monitoring (by the Projed.)			Malkawi
*Process of Activities			
*Achievement of Outputs			
*Achievement of Outputs (by Group)	10x5 min.	9:50-10:05	
1) Integration	30+10 min.	10:05-10:45	
2) IEC	15 min.	10:45-11:00	
<Coffee Break>			
3) RH	30+10 min.	11:00-11:40	
4) Income Generation	30+10 min.	11:40-12:20	
*Achievement of Project Purpose	10x5 min.	12:20-12:35	
*Achievement of Overall Goal	10x5 min.	12:35-12:50	
*Discussion	60 min.	12:50-13:50	
8. Closing	10 min.	13:50-14:00	Komasawa

AGENDA for Day 2

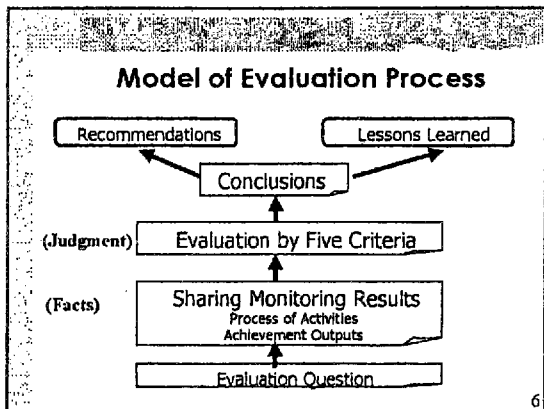
Agenda	Duration	Time Table	Facilitator
1. Brief Explanation of Five Evaluation criteria (based on the Evaluation Grid)	20 min.	8:00-8:20	Komasawa
2. Discussion on Evaluation by 5 Criteria (focused on the Evaluation Question)	20 min. x 5		Komasawa
*Relevance		9:20-9:40	
*Effectiveness		9:40-10:00	
*Efficiency			
<Coffee Break>	10 min.	10:00-10:10	
*Impact		10:10-10:30	
*Sustainability		10:30-10:50	
3. Conclusion	20 min.	10:50-11:10	Komasawa
4. Recommendation	20 min.	11:10-11:30	Komasawa
5. Lesson Learned	20 min.	11:30-11:50	Komasawa
6. Closing	15 min.	11:50-12:00	(HPC) (JICA)

EVALUATION based on JICA Guideline

FPGID Project (Phase II)
Amman, Jordan

The purposes are to...

- Provide recommendations for the project's regarding the next 6 months, future direction, and
- Draw lessons learned for both Jordanian and Japanese sides.



Evaluation of JICA projects

- **Facts**---Achievement and Process
- **Judgment** --- based on Five Evaluation Criteria

7

Five Criteria for Evaluation

- **Relevance**
- **Effectiveness**
- **Efficiency**
- **Impact**
- **Sustainability**

8

PDM and Evaluation Criteria

Narrative Summary	Relevance	of tion	Important Assumptions
Overall Goal			
Project Purpose			
Outputs			
Activities			

Whether the Project is suited to the priorities and policies of the target group, recipient and donor.

9

PDM and Evaluation Criteria

Narrative Summary	Effectiveness	Important Assumptions
Overall Goal		
Project Purpose		
Output		
Activities		

The extent to which the Project Purpose has been achieved via the Outputs of the Project itself.

10

PDM and Evaluation Criteria

Narrative Summary	Efficiency	Important Assumptions
Overall Goal		
Project Purpose		
Outputs		
Activities	Inputs	Pre-conditions

Productivity of the implementation process. Outputs – qualitative and quantitative – in relation to the inputs.

11

PDM and Evaluation Criteria

Narrative Summary	Impact	Means of Verification	Important Assumptions
Overall Goal			
Project Purpose			
Outputs			
Activities			

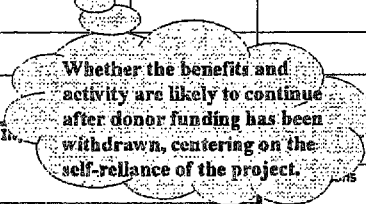
The positive and negative changes produced by a development intervention, directly or indirectly, intended or unintended.

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PDM and Evaluation Criteria

Narrative Summary	Sustainability	Important assumptions
Overall Goal	 <p>Whether the benefits and activity are likely to continue after donor funding has been withdrawn, centering on the self-reliance of the project.</p>	
Project Purpose		
Outputs		
Activities		

- ### Procedure of Evaluation
1. Decide the Joint Evaluation Team *done
 2. Set up the " Evaluation Question " (Scope of Evaluation) *done
 3. Share the transition of PDMs and the current PDM *prepare for ws by PT
 4. Make the Evaluation Grid *draft by ET
 5. Monitor and understand the facts; " achievement of the Plan " and " Process of implementation " *prepare for ws by PT
 6. Make an evaluation by five criteria *draft by ET
 7. Draw a " conclusion " of evaluation *draft by ET
 8. Draw "recommendations" and "lessons learned"
 9. Confirm the contents of evaluation by formal agreement

Thank you!

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ANNEX-7

Record of Implementation of Inputs

1) List of Japanese Experts Dispatched by JICA

<Long – term Experts>

(Name)	(Field)	(Duration)
1. Dr. Tokiko Sato	Chief Technical Advisor	2000.07.03-2003.02.14
2. Mr. Shuji Noda	Project Coordinator	2000.06.24 –2002.06.30
3. Ms. Atsuko Imoto	Family Planning / Reproductive Health	2000.12.20-2003.06.30
4. Mr. Kei Matsuda	Information, Education and Communication	2000.12.20-2001.12.19
5. Ms. Yoko Matsuya	Income Generation / Community Development / Gender	2001.01.05-2003.06.30
6. Dr. Akiko Hagiwara	Information, Education and Communication	2001.05.27-2003.06.30
7. Mr. Akihiro Fujiwara	Information, Education and Communication	2002.02.17-2003.06.30
8. Ms. Reiko Otaguro	Project Coordinator	2002.06.30-2003.06.30

< Short – term Experts >

(Name)	(Field)	(Duration)
1. Mr. Maki Tsumagari	Income Generation	2000.10.12-2000.12.07 2001.01.20-2001.03.11
2. Mr. Yusuke Kubo	Income Generation	2001.04.29-2001.09.23
3. Mr. Akihiro Fujiwara	Information, Education and Communication	2001.04.29-2001.10.27
4. Mr. Kei Matsuda	Information , Education and Communication	2002.12.11-2003.03.01

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ANNEX-7

2) List of Jordanian Counterpart Personnel

#	Name	Organization
1	Mr. Abdul Rahim Al Ma'aytah	Project Manager, HPC
2	Mr. Abdul Munem Malkawi	Population Specialist, HPC
3	Mr. Abdullah Qudsi	Coordinator, National Center for Population Communication, HPC
4	Dr. Mohammed Batayneh	Director, MCH Department, MOH
5	Dr. Akef Al Azab	Deputy Director, MCH Department, MOH
6	Dr. Ghazi Al Marayat	Director General, Karak General Health Directorate , MOH
7	Dr. Nassar Amareen	Deputy Director, Karak General Health Directorate, MCH Supervisor MOH
8	Ms. Namat Madanat	Midwife, Supervisor, Karak Health Directorate, MOH
9	Dr. Mahmoud Kfawin	Director, National Coordination Office, JOHUD
10	Ms. Fatima Abu Kaff	National Coordination Office, JOHUD
11	Ms. Nuha Muhriez	Program Supervisor, JOHUD
12	Mr. Thaer Eibeisat	CDC Karak , JOHUD

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ANNEX-7

3) List of Jordanian Counterpart Personnel Sent to Japan

(Name)	(Field)	(Duration)
1. Ms. Hind Yousef Mohamad Al- Loub	Promotion of Gender Equity	2000.11.14-2000.12.13
2. Dr. Mohammad Anwar S. Batayneh	Reproductive Health and Family Planning	2000.11.16-2000.12.08
3. Dr. Maha Mousa Jiries Amarin	Reproductive Health for Adolescent	2001.11.19-2001.12.26
4. Ms. Nuha H. S. Muhriez	Participatory Local Social Development	2002.02.04-2002.03.25
5. Mr. Abdullah Qudsi <i>HH</i>	Educational Material Production/ Population Communication	2002.03.18-2002.04.06

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ANNEX-7

4) List of Equipment Donated by JICA

<Provision for HPC>

NO	Item	Price(JD)	Qty	Installation Place	JFY
1	Copy Machine KONICA	2,965	1	HPC Head quarter	2000
2	Air conditioner	1,680	2	HPC Head quarter(Seminar Room)	2000
3	Desk	800	10	HPC Head quarter(Seminar Room)	2000
4	Chair	600	20	HPC Head quarter(Seminar Room)	2000
5	Cabinet	1,000	10	HPC Head quarter	2000
6	White board	240	2	HPC Head quarter(Seminar Room)	2000
7	Philip Chart board	85	1	HPC Head quarter(Seminar Room)	2000
8	Notice board	100	2	HPC Head quarter(Seminar Room)	2000
9	Over head projector	440	1	HPC Head quarter(Seminar Room)	2000
10	Slide projector	180	1	HPC Head quarter(Seminar Room)	2000
11	Screen	500	1	HPC Head quarter(Seminar Room)	2000
12	Computer/PIII860	1,556	2	HPC Head quarter(Editing Room)	2000
13	Printer/HP1100	598	2	HPC Head quarter(Editing Room)	2000
14	Computer Note type	2,541	1	HPC Head quarter(Editing Room)	2000
15	Software/Matrix2500	1,082	1	HPC Head quarter(Editing Room)	2000
16	Multimedia LCD Projector	2,625	1	HPC Head quarter(Seminar Room)	2000
17	Microsoft Office 2000	337	1	HPC Head quarter(Editing Room)	2000
18	UPS Smart APR	400	1	HPC Head quarter(Editing Room)	2000
19	Stabilizer APR-500EB	30	1	HPC Head quarter(Editing Room)	2000
20	TV/VIDEO set	257	1 set	HPC Head quarter(Editing Room)	2000
21	Radio cassette recorder	26	1	HPC Head quarter(Editing Room)	2000
22	Microphone & speaker set	2,583	1 set	HPC Head quarter(Editing Room)	2000
23	Digital Video Cassette Recorder	1,701	1	HPC Head quarter(Editing Room)	2002
24	Adobe After Effect 5	650	1	HPC Head quarter(Editing Room)	2002
	Total	22,976			

*JFY:Japanese Fiscal Year

<Provision for MOH>

No	Item	Price (JD)	Qty	Installation Place	JFY
1	TOYOTA(PRADO)	16,732	1	Health Directorate, Karak	2000
2	Air conditioner	8,400	10	MCH Center, Karak	2000
3	Ultra sound machine	17,880	3	MCH Center, Karak	2000
4	IUD Kit	1,125	25	MCH Center, Karak	2000
5	Gynecological bed	1,725	15	MCH Center, Karak	2000
6	Weight/Height measure	2,400	20	MCH Center, Karak	2000
7	Examination bed	1,520	40	MCH Center, Karak	2000
8	Basin and Basin stand	1,036	37	MCH Center, Karak	2000
9	Trolley	585	15	MCH Center, Karak	2000
10	Sterilizer	3,586	22	MCH Center, Karak	2000
11	Round chair	629	37	MCH Center, Karak	2000
12	Screen(Partission)	1,258	37	MCH Center, Karak	2000
13	Examination light	1,036	37	MCH Center, Karak	2000
14	Sonicaid(Doppler)	2,350	10	MCH Center, Karak	2000
15	Blood pressure meter with cuff for adult	280	20	MCH Center, Karak	2000
16	Cuff for infant	74	37	MCH Center, Karak	2000
17	Infant examination table	5,550	37	MCH Center, Karak	2000
18	Desk for consultation	2,775	37	MCH Center, Karak	2000
19	Chair	2,072	74	MCH Center, Karak	2000
20	Cabinet	1,500	15	MCH Center, Karak	2000
21	Cup-board	3,700	37	MCH Center, Karak	2000
22	Computer	3,890	5	MCH Center, Karak	2000
23	printer HP1100	1,495	5	MCH Center, Karak	2000
24	Stabilizer/APC-500VA	2,000	5	MCH Center, Karak	2000
25	UPS/APR-500E	150	5	MCH Center, Karak	2000
26	Refrigerator	2,025	15	MCH Center, Karak	2000
27	Car/TOYOTA "PRADO" 4WD	3,083	1	MCH Center, Karak	2001
28	Spare parts for car	3,083		MCH Center, Karak	2001
29	Ultra sound machine	7,000	1	MCH Center, Karak	2002
30	TV	470	2	MCH Center, Karak	2002
31	Video Cassette Recorder	170	2	MCH Center, Karak	2002
31	Shelf for TV & VCR	250	2	MCH Center, Karak	2002
	Total	99,829			

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<Provision for JOHUD>

No	Item	Price(JD)	Qty	Installation Place	JFY
1	TOYOTA(PRADO)	16,732	1	Karak CDC	2000
2	HYUNDAI (mini-bus)	58,800	3	Karak CDC(Qatrana/Faquu/Mutha)	2000
3	Copy Machine (KONICA)	7,800	5	4Karak CDC/ Rabbeh Center	2000
4	Fax Machine	1,450	5	4Karak CDC/ Rabbeh Center	2000
5	Air conditioner	3,360	4	Karak CDC(GhorSafi/Mazraa/Haditha/Qatrana)	2000
6	White board	600	5	4Karak CDC and Rabbeh Society	2000
7	Philip chart board	425	5	4Karak CDC and Rabbeh Society	2000
8	Over Head projector	2,200	5	4Karak CDC and Rabbeh Society	2000
9	Slid Projector	900	5	4Karak CDC and Rabbeh Society	2000
10	Screen	300	5	4Karak CDC and Rabbeh Society	2000
11	Radio Cassette recorder	130	5	4Karak CDC and Rabbeh Society	2000
12	Apiculture kit(Loan program)	6,610	10	Karak CDC, Beneficiaries	2000
13	PC/PIII860	1,556	2	Karak CDC/project office	2000
14	Printer/HP1100	598	2	Karak CDC/project office	2000
15	Sterbilizer/APC 500VA	400	1	Karak CDC	2000
16	UPS/ Smart-APR	30	1	Karak CDC	2000
17	Spare Parts for Cars	7,698		JOHUD Storage	2000
18	Goat (Loan Program)	50,200	457	Beneficiaries	2001
19	Fence/2mx6(Loan program)	4,200	70	One for each 70 beneficiaries	2001
20	Feeder (Loan Program)	700	70	One for each 70 beneficiaries	2001
21	TV	235	1	Ayy Society	2002
22	Video Cassette Recorder	85	1	Ayy Society	2002
23	Shelf for TV & VTR	125	1	Ayy Society	2002
24	Apiculture kit(Loan program)	12,870		Ayy Society, Beneficiaries	2002
25	Goats, fence, and feeder (Loan program)	72,700		Beneficiaries	2002
	Total	250,704			
Grand Total		373,509		HPC, MOH, JOHUD	

dh *JFY:Japanese Fiscal Year

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ANNEX-7

5) List of Technical Equipment for Japanese Experts

Date	No	Item	Price(JD)	QTY	Installation Place
11/2000	K1	Copying Machine/CANON (NP-6330)	2,250	1	KARAK Office
11/2000	K2	Fax Machine/Panasonic KX-F1010	390	1	KARAK Office
11/2000	K3	PC Desk	105	1	KARAK Office
11/2000	K4	Cabinet	90	1	KARAK Office
11/2000	K5	Cabinet	95	1	KARAK Office
11/2000	K6	Drawer	115	3	KARAK Office
11/2000	K7	Drawer	130	1	KARAK Office
12/2000	K8	Desk	300	3	KARAK Office
12/2000	K9	Chair	135	3	KARAK Office
12/2000	K10	PC/SONY PCG-Z505CR/K"	1,656	1	Amman Office(O.N.)
12/2000	K11	FD Drive/SONY "PCGA-UFD5"	63	1	Amman Office(O.N.)
12/2000	K12	CD-ROM Drive "PCGA-CD51/A"	126	1	Amman Office(O.N.)
12/2000	K13	Color Scanner/EPSON "GT-8700F"	223	1	Amman Office(F.H.)
12/2000	K14	Film Scanner/NIKON "Cool ScanIII LS-30"	440	1	Amman Office(F.H.)
12/2000	K15	Color Printer/Canon "BJ-F870-PD"	300	1	Amman Office(F.H.)
12/2000	K16	Computer for VTR Editing "Dvw-RT-2000i"	4,050	1	Amman Office(E.)
12/2000	K17	PC/NEC"Lavie-C(PC-LC6001/54DR)	1,716	1	Amman Office(I.M.)
12/2000	K18	Scanner/Canon "CanoScan FB1210 U"	191	1	Amman Office(I.M.)
12/2000	K19	Printer/Canon "BJS600"	239	1	Amman Office(I.M.)
12/2000	K20	Transformer"220/100V 100VA"	72	1	Amman Office(I.M.)
12/2000	K21	Technical Books (10vols./SET)	206	1	Amman Office(I.M.)
1/2001	K22	PC/TOSHIBA"Dynabook DB65P/4MC"	1,788	1	Amman Office(I.M.)
1/2001	K23	BJ Printer/CANON"BJ Printer"BJ-F660"	222	1	Amman Office(I.M.)
1/2001	K24	Scanner/Canon "CanoScan FB1210 U"	119	1	Amman Office(I.M.)
1/2001	K25	Modem Card "DF5660"	162	1	Amman Office(I.M.)
5/2001	K26	File Shelf	180	2	Amman Office(H.F.)
7/2001	K27	Digital Camera/Olympus "C-3040 Zoom Manual"	521	1	Amman Office(E)
7/2001	K28	Olympus Smartmedia 64MB M-64 PI	216	3	Amman Office(F.H.)
7/2001	K29	Olympus Smartmedia 32MB M-32PI	171	3	Amman Office(F.H.)
7/2001	K30	Olympus Software CAMEDIA Master English	72	1	Amman Office(F.H.)
9/2001	K31	PC/"PAA2470CMC"	1,488	1	Amman Office(F.H.)

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Date	No	Item	Price(JD)	QTY	Installation Place
9/2001	K32	Automatic Voltage Regulators SVC-600nd II	168	1	Amman Office(F.H.)
9/2001	K33	Soft Ware PowerPoint 2002	153	1	Amman Office(F.H.)
9/2001	K34	Soft Ware Acrobat5.0	234	1	Amman Office(F.H.)
10/2001	K35	Refrigerator	120	1	Amman Office(K.)
10/2001	K36	Stand for Video Monitor	65	1	Amman Office(E.)
10/2001	K37	Meeting Table	100	1	Amman Office(L.)
10/2001	K38	Meeting Chair	110	2	Amman Office(L.)
10/2001	K39	White Board/Bulletin Board	113	1	Amman Office(C.)
10/2001	K40	Telephone Machine	70	2	Amman Office
8/2002	K41	PC/Toshiba "Dynabook V5/410PME"	1,335	1	Amman Office(O.N.)
8/2002	K42	AVR/Matsunaga SVC-600ND2	143	1	Amman Office(O.N.)
8/2002	K43	Software MS-Office XP Professional	371	1	Amman Office
9/2002	K44	CPU Upgrade Card /Grecendo/PCI G4450/ 1M for The Computer	704	2	Amman Office
9/2002	K45	CPU Upgrade Card /Grecendo 7200 G4400/ 1M for The Computer	247	1	Amman Office
9/2002	K46	ATA Extension Card/TEMPO ULTRAATA 133 for The Computer	210	2	Amman Office
10/2002	K47	Video Card Radeon7000 Mac edition PCI for the Personal Computer	316	2	Amman Office
10/2002	K48	Memory Card PA1 68FH-64 for the Personal Computer	897	8	Amman Office
12/2002	K49	Apple Computer/iBook G3 700 MHz 512	1,720	1	Amman Office(H.F.)
12/2002	K50	Internal IDE HD 40G (IBM)	240	3	Amman Office(H.F.)
12/2002	K51	Software/Adobe Design Collection	1,000	1	Amman Office(H.F.)
12/2002	K52	Tripod VT-551	127	1	Amman Office(E.)
1/2003	K53	SONY Digital Camera DSC-S85	576	1	Expected
1/2003	K54	SONY Memory Stick 128 MB	84	1	Expected
Total			26,934		

Grand Total	400,443	HPC, MOH, JOHUD, Japaneses Experts
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Note:

*As for items purchase in Japan, prices are calculated from JY to JD at JICA's official exchange rate for each quarter

*Excluding the equipment less than 10,000yen and consumables.

*Installation Place:

L=Leader Room

H.F.=Hagiwara & Fujiwara Room

I.M.=Imoto & Mastuya Room

O.N.=Otoguro & Nuha Room

K=Kitchen

C=Corridor



ANNEX-7

6) List of Local Cost Supported by JICA

Unit:JD

Japanese Fiscal Year	Running Expense	Cost for Particular Events (WS, etc.)	Audio Visual Teaching Material	Total
2000	35,519.80	29,364.05	9,788.01	76,671.86
2001	47,222.79	60,013.54	19,656.14	128,893.47
2002	49,948.60	71,891.42		121,840.02
Total	132,691.19	161,269.01	29,444.15	323,404.35

HPL



ANNEX-7

7) List of Jordanian Input

-Personnel

[HPC]

- Project Manager
- Population Counterpart
- IEC Counterpart

[JOHUD]

- Program Supervisor
- Income Generation Counterparts- full time/part time
- IEC Counterpart in Karak
- 4 Rural Leaders (Karak, Mutah, Faquo and Qatraneh)

[MOH]

- Project Administrative Manager
- Project Technical Manager
- FP/RH Counterpart
- Supervisor : midwife
- MCH Directorate supportive team: 3 physicians
- Secretaries
- FP/RH trainers
- IUD insertion trainers
- Ultrasound trainers
- Health workers of MCH Centers
- Lab personnel

-Office in JOHUD Head office and of Karak , including Electricity, water and Fuel

-Multipurpose Halls at 4 CDCs

-Space and utilities at 9 MCH Centers in Karak and 3 at Ghor al Safi, training hall, counseling rooms, labs, delivery rooms at hospitals

-Equipment (Computers, fax machine, telephones, photocopies, audio visual materials, medical equipment and drugs, training materials etc.)

