

タイ国
HIV/AIDS 地域協力センタープロジェクト
中間評価調査報告書

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独立行政法人国際協力機構
タイ事務所

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略 語 表

AIDS	Acquired Immune Deficiency Syndrome
AIHD	ASEAN Institute for Health Development
ASEAN	Association of Southeast Asian Nations
HIV	Human Immunodeficiency Virus
ICC	International Consultative Committee
JARCOM	JICA-ASEAN Regional Cooperation Meeting
JCC	Joint Coordinating Committee
JICA	Japan International Cooperation Agency
JTPP2	Japan-Thailand Partnership Program Phase 2
M/M	Minutes of Meeting
MOH	Ministry of Health, Vietnam
MOPH	Ministry of Public Health, Thailand
MPI	Ministry of Planning and Investment, Vietnam
OJT	On-the-Job Training
PCM	Project Cycle Management
PDM	Project Design Matrix
PO	Plan of Operation
RCC	HIV/AIDS Regional Coordination Center
R/D	Record of Discussions
TICA	Thailand International Development Cooperation Agency
TOT	Training of Trainers
WHO	World Health Organization

評価調査結果要約表

1. 案件の概要	
国名：タイ	案件名：タイHIV/AIDS地域協力センタープロジェクト
分野：エイズ	援助形態：技術協力プロジェクト
所轄部署：JICAタイ事務所	協力金額：280百万円
協力期間 2005年4月～2008年3月 (3年間)	先方関係機関：タイ・マヒドン大学アセアン保健開発研究所 (AIHD)
	日本側協力機関：エイズ予防財団
他の関連協力： 結核対策プロジェクトフェーズ2 (カンボジア) 母子保健向上のための調査 (カンボジア) 主要感染症対策プロジェクト (ミャンマー)	
1-1 協力の背景と概要 <p>タイはHIV感染拡大の減少に成功した数少ない国として広く認知されている。一方、タイの周辺国では、エイズ対策プログラムを効果的に行う制度・人材が十分であるとは言えず、地域での活動を担う人材育成が急務になっている。</p> <p>こうした状況のもと、JICA-ASEAN地域協力推進会議 (JARCOM) で合意された地域協力のメカニズムにより、タイ周辺各国はタイに対してエイズ対策での技術協力を要請した。要請に基づき、日本・タイ政府により、カンボジア、ラオス、ミャンマー、ベトナムでのエイズ対策を支援する地域協力プロジェクト形成のための合同調査が実施された。調査結果に基づき、タイ政府は日本政府に対し、マヒドン大学アセアン保健開発研究所 (AIHD) を実施機関として、周辺4カ国におけるエイズ対策分野での人材育成を支援する技術協力プロジェクト「HIV/AIDS地域協力センター (RCC) プロジェクト」の実施を要請した。要請を受けて2005年4月に3年間のプロジェクトが開始された。</p>	
1-2 協力内容 <p>本プロジェクトは、日本・タイ政府の協力により、RCCがカンボジア、ラオス、ミャンマー、ベトナムでエイズ対策プログラムを行う人材の育成に必要な研修、情報、財源を提供する地域協力センターとして機能することを目的としている。</p> <p>(1) 上位目標 カンボジア、ラオス、ミャンマー、ベトナムにおいて、RCCから提供されるリソースが活用され、エイズ対策に従事する人材が各国のニーズと状況に基づいて育成され、エイズ対策が改善される。</p> <p>(2) プロジェクト目標 RCCがカンボジア、ラオス、ミャンマー、ベトナムにおけるエイズ対策のための人材養成を支援する地域協力センターとして機能し、関係機関から認められる。</p>	

(3) 成果

- 成果1 : RCCがAIHD内に設立され、運営体制が強化される。
- 成果2 : 研修事業の運営体制が構築され、カリキュラム・教材が、周辺4カ国のニーズを反映して開発され、改善される。
- 成果3 : タイと周辺4カ国におけるエイズ対策分野の人材、研究、活動事例に関する情報が収集され、適切にアップデートされ、周辺4カ国のカウンターパート機関、援助機関、AIHD卒業生、その他の関係者に向けて発信される。
- 成果4 : 関係者間のネットワーク強化により、タイと周辺4カ国のエイズ対策分野の人材、情報、財源が動員され、より有効に活用される。

(4) 投入 (評価時点)

日本側 :

- ・長期専門家派遣 3人
- ・機材供与 (バス、コンピューターサーバー、コンピューター・周辺機器、写真・映像機材、視聴覚機材など)
- ・現地業務費 (スタッフ人件費、研修費用などのプロジェクト活動費)

タイ側 :

- ・カウンターパート配置 5人 (AIHD)
- ・施設 (研修施設、プロジェクト事務所) (AIHD)
- ・現地業務費
RCC運営費、プロジェクト事務所管理費 (AIHD)
複数の国からの参加者を対象とした研修講師の研修 (TOT) 費用をタイ国際開発協力機構 (TICA) が分担

2. 評価調査団の概要

小川 正純 (団長)	国際協力機構タイ事務所 次長
竹内 清佳	国際協力機構タイ事務所
岩城 岳央	アイ・シー・ネット・アジア株式会社
チャリンティップ・ヨタサーン	タイ国際開発協力機構 プログラム・オフィサー
ウィティダー・シワクア	タイ国際開発協力機構 プログラム・オフィサー
ブーンヨング・ギアウガンガー	アセアン保健開発研究所 シニア・アドバイザー
ネート・ホンググライルート	アセアン保健開発研究所 所長補佐
ジャムルーン・ミカノーン	アセアン保健開発研究所 HIV/AIDS地域協力センター長
ソムチャイ・ビリピロムグーン	アセアン保健開発研究所 HIV/AIDS地域協力センター・マネージャー

調査期間 : 2006年9月14日 ~ 2006年9月27日

評価種類 : 中間評価

3. 評価結果の概要

3-1 実績の確認

計画された投入が日本側、タイ側双方から適切に行われており、大きな問題は見られない。活動実施の遅れにより、進捗が遅れている成果があるが、プロジェクトは概ね計画に沿って進められている。

3-2 PDMの改訂

JICA、TICA、AIHDの代表者を含む主要関係者間で、以下のようにPDMを変更することを合意した。

		変更前	変更後	変更理由
1	プロジェクト目標の指標1	プロジェクト協力期間中に、周辺対象4カ国からの参加者を対象にした研修が他の機関の委託により4回以上実施される。	1. RCCが援助機関を含めてカンボジア、ラオス、ミャンマー、ベトナム、タイにあるxxx以上の関係機関と定期的に連絡をとる。 ^{*1} 2. 上記関係機関のうち、xx%がRCCをエイズに関する有効な協力センターとして認識する。 ^{*2}	<ul style="list-style-type: none"> プロジェクト開始後に、AIHDは他機関からの委託によりエイズ関連研修を2回実施している。しかし、関係者間で指標が十分に共有されておらず、RCCが関与していない。 外部からの委託による研修実施は外部要因の影響が大きい。 改訂後の指標が、ドナー機関を含む関係機関のRCCに関する認識を測るのに、より適当であると考えられる。
2	成果4の指標4-3	AIHD職員を含めて、RCCのデータベースに登録されているリソースパーソンのうち、年間3人がRCCの仲介により他のエイズ関連プログラムに派遣される。	AIHD職員を含めて、RCCのデータベースに登録されているリソースパーソンのうち、年間3人がRCCの仲介により他のエイズ関連プログラムに派遣され、 <u>派遣先がリソースパーソンに満する(追加)</u> 。	RCCが仲介するリソースパーソンの業務内容も評価する必要がある。
3	活動4-8	タイでの研修受講経験者やAIHD卒業生を研修講師として活用する。	削除	変更前のプロジェクト目標の指標1に関する活動であったため削除。
4	活動4-9	コンサルテーションや短期専門家の派遣を通じてタイと周辺4カ国でのエイズ対策プログラムを支援する。	<u>研修受講者へのモニタリングを通じて(変更)</u> 周辺4カ国でのエイズ対策プログラムを支援する。	JICAの地域協力プロジェクトの枠組みでは、第三国専門家(タイ人)を周辺国に派遣できないため。
5	成果3、指標4-1、活動4-2、4-3、4-7	AIHD卒業生	RCCのTOT受講者	AIHD卒業生をプロジェクト業務を支援する公式なフォーカルポイントとすることが難しく、フォーカルポイントの主対象をRCCのTOT受講者に変えたため。

*1、*2：主要プロジェクト関係者間で、RCC運営タスクフォースと日本人専門家が指標を具体化することを合意した。プロジェクトは指標の入手手段も明確にし、プロジェクトの進捗を指標に基づいてモニタリングする必要がある。

3-3 評価結果の要約

(1) 妥当性

本プロジェクトの実施は、特にタイ周辺対象国のニーズとの合致、日本とタイの協力政策との合致、周辺対象国でのエイズによる影響の緩和、事業効果の非プロジェクト対象者への波及、の点で妥当である。

本プロジェクトはJARCOMを通じてタイ周辺対象国のニーズを基に形成され、プロジェクトの開始前後に日本人専門家とAIHD関係者が対象国でのエイズの状況、研修ニーズ、他ドナーの支援動向、などについて調査している。中間評価時に実施された質問票調査では、94%のTOT受講者が研修内容は各国のエイズ対策に妥当であると回答している。

タイ政府は他国との協力による開発を推進しており、特に周辺国との協力を強化している。タイ政府は、援助機関と協力しながら、自国の成功経験と資源を活用してエイズ対策でも周辺国を支援している。本プロジェクトは開発の進んだ途上国との連携による地域協力を推進する日本政府の戦略にも合致する。

本プロジェクトは人材育成を通じてエイズによる影響を緩和するというRCCの長期戦略の一部である。この戦略は、引き続き人材育成ニーズの高いタイ周辺国でのエイズ対策に有効であるといえる。また、本プロジェクトでは周辺対象国でのエイズ対策プログラムの従事者を対象としたTOTを実施している。TOT受講者が研修後に自国で研修を行うことにより、プロジェクト効果が他のエイズ対策従事者に波及することが期待できる。

(2) 有効性

プロジェクト目標は4つのプロジェクト成果の産出により達成される。中間評価時点では、RCCが行うTOT受講者の研修に対する満足度は高く、成果2の「研修事業の運営体制構築とカリキュラム・教材開発」が順調に進められているといえる。しかし、成果3の「エイズ対策分野の人材、研究、活動事例に関する情報の収集、アップデート、発信」、成果4の「関係者間のネットワーク強化による人材、情報、財源の動員と有効活用」は、活動実施の遅れにより進捗が遅れている。プロジェクト後半はプロジェクトの有効性の観点から、成果3、4の達成状況に十分な注意を払う必要がある。

(3) 効率性

コンピューターサーバーの調達・取り付けの遅れ、ウェブサイト開発上の技術的な問題、関係者間の連携の弱さなどにより、成果3の進捗が遅れている。成果4に関しては、周辺対象国でのフォーカルポイント設置の難しさや関係者間での活動に関する理解が十分でなかったことなどが進捗を阻害していると考えられる。

プロジェクトの進捗は、毎月開催されるRCC運営タスクフォース会議を通じてAIHDの他のセクションと共有され、AIHD内での連携と協力が行われている。しかし、RCCとAIHD内の研修セクションとの役割分担が明確になっておらず、今後の研修実施において、両セクション間の連携と協力が懸念される。

複数の国からの参加者を対象としたTOTの費用は、計画通りJICAとTICAで分担されている。この費用分担のメカニズムは、日本・タイ・パートナーシップ・プログラム・フェー

ズ2 (JTPP 2) のもとで両機構によって支援される他の地域協力プロジェクトの実施モデルになると考えられる。

(4) インパクト

中間評価の段階で上位目標達成見込みを分析することは難しいが、質問票調査の結果から、上位目標の指標1を達成する見込みは高いといえる。TOT受講者の69%が研修後に自国で研修を実施しており、目標値の70%をほぼ達成している。また、TOT受講者の所属先機関への質問票調査では、プロジェクトが実施するTOTは国や地域でのエイズ政策、エイズ対策プログラム・プロジェクトに好影響を及ぼすと76%が回答しており、政策レベルでのインパクトが期待できる。

(5) 自立発展性

RCCはAIHD内に設立されており、プロジェクト終了後もAIHDの一部として維持されることが見込まれる。AIHDは既に20年以上運営されており、RCCを維持する十分な組織能力を備えているといえる。RCCの機能と規模を維持し、プロジェクト効果を持続していくために、今後は援助機関を含む関係機関との連携を強化するための活動が活発に行われるべきである。

日本人専門家からRCC職員への技術移転は、主にプロジェクト活動実施を通じた実地訓練により進められている。RCC職員に移転された技術は、他のセクションとの連携によりAIHD内に波及することが見込まれる。TOT実施などで日本人専門家を支援しているプロジェクトスタッフ(テクニカル・コーディネーター)が、プロジェクト終了前にAIHDに採用されることになっており、移転された技術がAIHD内に留保される。

3-4 結論

各成果で進捗状況に差がみられるものの、現在のプロジェクト実施状況から、プロジェクト終了時までにはプロジェクト目標が達成される見込みが高い。

3-5 提言

■PDMとPOの改訂

中間評価の中で、主要関係者により、日本人専門家の支援を受けながらRCC運営タスクフォースメンバーが早急にプロジェクト目標の指標1を具体化することが合意された。プロジェクトは具体化された指標を反映してPDMとPOを改訂し、できるだけ早く合同調整委員会(JCC)で承認を受ける必要がある。また、プロジェクトは指標の入手手段を明確にし、指標に基づいてプロジェクト目標の達成を注意深くモニタリングしていく必要がある。

■PDMに基づくプロジェクトのモニタリング

プロジェクトの進捗は、毎月開催されるRCC運営タスクフォース会議と年2回開催されるJCCによってモニタリングされている。評価チームは、プロジェクトの進捗を包括的に、かつ一貫性をもって把握するために、PDMに基づいてプロジェクトの進捗をモニタリングすることを提案する。

■RCCと研修セクションの連携・協力体制の明確化

中間評価中の協議で合意されたように、RCC運営タスクフォース会議の中で、業務プロセスや各セクションのスタッフの役割などを含めて、RCCとAIHD研修セクションの連携・協力体制を協議し、早急に明確化すべきである。

■ 関係者間のコミュニケーション

中間評価時に、プロジェクト目標と指標に対する理解、RCCのAIHD内での位置づけ、RCCと研修セクションの連携・協力体制など、プロジェクト運営にかかわる重要事項が、主要プロジェクト関係者間で十分に協議されていないことが明らかになった。限られたプロジェクト期間内で迅速に行動を起こしていくために、日本人専門家を含む主要プロジェクト関係者が、プロジェクト運営について、これまで以上に頻繁に、かつ集中的に協議を行っていくべきである。

■ JICA周辺国事務所とのプロジェクト情報の共有

主要プロジェクト関係者はプロジェクト活動を効果的かつ効率的に行うために、JICA周辺国事務所との連携と情報共有が重要であることを認識している。今後も、引き続きJICA周辺国事務所との連携と情報共有に十分配慮していく必要があると考えられる。

■ AIHD職員の人材育成強化

プロジェクト活動の円滑な実施とRCCの組織強化の観点から、AIHD職員、特にRCCに配属されている職員の能力強化が推進されるべきである。なかでも、ウェブサイトの管理運営技術向上の優先順位が高い。評価チームはプロジェクト・ダイレクター、RCCセンター長、RCCマネージャー、日本人専門家に、人材育成計画を見直し、必要に応じて修正しながら実施していくことを提案する。

■ ネットワークの強化

プロジェクト後半は、援助機関を含めて、周辺対象国とタイでの関係機関とのネットワーク強化に焦点が当てられるべきである。限られたプロジェクト期間内に成果をあげ、プロジェクト目標の達成につなげるため、ネットワーク強化のための活動は高い優先順位で活発に行われるべきである。プロジェクトに関係するAIHD職員をネットワーク強化活動に積極的に活用していくことが推奨される。

■ フォーカルポイントの選定、アプローチ、期待する役割の明確化

当初計画していたようにAIHD卒業生をプロジェクト業務を支援する公式なフォーカルポイントにすることが難しく、フォーカルポイントの主対象を各国のカウンターパート機関内のTOT受講者に変更することになっている。周辺対象国のカウンターパート機関と協議しながら、フォーカルポイントの選定、アプローチの仕方、期待する役割などを早急に明確にすることが求められる。

■ TOT受講者のモニタリング

TOT受講者のモニタリングはプロジェクト効果を持続させるうえでとても重要である。周辺対象国の関係者への質問票調査でも、TOT受講者、TOT受講者の所属先機関、JICA事務所からプロジェクトによるモニタリング訪問の充実が求められている。プロジェクトは、各周辺対象国のJICA事務所の理解と協力を得ながら、TOT受講者の研修後の活動のモニタリングを強化することができると思われる。

■ ウェブサイトとニュースレターの改善

TOT受講者を含む関係者への質問票調査とインタビュー結果から、RCCのウェブサイトとニュースレターに期待する内容や改善のための提言が収集されており、今後のウェブサイトとニュースレターの改善に有用だと考えられる。

Executive Summary

1. Outline of the Project	
Country : Thailand	Project title : HIV/AIDS Regional Coordination Center (RCC) Project in Thailand
Issue / Sector : HIV/AIDS	Cooperation scheme : Technical Cooperation Project
Division in charge : JICA Thailand Office	Total cost : 280 million Japanese yen
Period of Cooperation : April, 2005 - March, 2008 (3 years)	Partner Country's Implementing Organization : ASEAN Institute for Health Development (AIHD), Mahidol University
	Supporting Organization in Japan : Japanese Foundation for AIDS Prevention
<p>Related Cooperation :</p> <p>National Tuberculosis Control Project Phase 2 (Cambodia)</p> <p>Project to Strengthen Health Service Performance in Cambodia (Cambodia)</p> <p>Major Infectious Disease Control Project (Myanmar)</p>	
<p>1-1. Background of the Project</p> <p>Thailand is generally recognized as one of the few countries in the world that has been able to reverse the spread of HIV/AIDS transmission. On the other hand, in the neighboring countries of Thailand, the efforts to tackle the problems related to HIV/AIDS have been constrained by the insufficient institutional and human capacity to effectively implement HIV/AIDS programs.</p> <p>With this situation in mind and based on the regional cooperation mechanism agreed upon at the JICA-ASEAN Regional Cooperation Meeting (JARCOM), several of Thailand's neighbors requested Thailand to provide technical assistance in the fields of HIV/AIDS. Accordingly, the Governments of Japan and Thailand have jointly studied the possibility of establishing a regional coordination project to support HIV/AIDS programs in Cambodia, the Lao PDR, Myanmar, and Vietnam. Based on the finding of this study, the Government of Thailand requested a technical cooperation project to the Government of Japan to support human capacity building for HIV/AIDS programs in neighboring countries based in the AIHD, Mahidol University. The Project was launched in April 2005 for the project period of three years.</p>	
<p>1-2. Project Overview</p> <p>The Project aims evolve the RCC to function as a regional coordination center to provide necessary training, information, and financial resources to support human capacity building for HIV/AIDS programs in Cambodia, Lao PDR, Myanmar, and Vietnam by the collaboration of the Government of Japan and Thailand.</p>	
<p>(1) Overall Goal</p> <p>Human capacity for HIV/AIDS programs in Cambodia, the Lao PDR, Myanmar, and Vietnam is developed based upon each country's specific needs and situation with the proper utilization of resources from the RCC and the result is applied for HIV/AIDS programs.</p>	

(2) Project Purpose

The RCC functions and is recognized by concerned organizations as a coordination center to provide training, information, and the human resources needed to support human capacity building for HIV/AIDS programs in Cambodia, the Lao PDR, Myanmar, and Vietnam (and other targeted countries).

(3) Outputs

Output 1: Organization and management systems of the RCC are established and strengthened.

Output 2: Management system, curricula, and materials used in training programs are developed and improved in response to the specific country needs of Cambodia, the Lao PDR, Myanmar, and Vietnam.

Output 3: Information concerning human resources, research, and relevant experiences on HIV/AIDS in Cambodia, the Lao PDR, Myanmar, Vietnam, and Thailand is collected, properly maintained, and disseminated to counterpart organizations, donor agencies, AIHD alumni, and other stakeholders.

Output 4: Human resources, information, and financial resources in Cambodia, the Lao PDR, Myanmar, Vietnam, and Thailand for HIV/AIDS programs are mobilized for more effective utilization through networking.

(4) Inputs (as of this mid-term evaluation)

Japanese side :

- Personnel: Long-term Japanese experts (3 persons)
- Equipment: Bus , Computer Server , Computer, Video Camera, Digital Camera, LCD, Visualizer, Scanner Machine, Color Printer, and other equipments
- Local Expenditures: Expenses for Project employees, Training expenses for multi-national TOT (partially), Training expenses for country-specific TOT, Other expenses for project activities

Thai side :

- Personnel (AIHD): Five Thai staff
- Facilities: Training facilities (AIHD), Project office space and facilities (AIHD)
- Local Expenditures: Administrative and operational expenses for the RCC (AIHD), Training expenses for multi-national TOT (partially funded by Thailand International Development Cooperation Agency: TICA)

2. Evaluation Team

Members of Evaluation Team	Mr. Masazumi Ogawa (Leader)	Deputy Resident Representative, JICA Thailand Office
	Ms. Kiyoka Takeuchi	Assistant Resident Representative, JICA Thailand Office
	Mr. Takehiro Iwaki	Consultant, IC Net Asia
	Ms. Charintip Yosthasan	Program Officer, TICA
	Ms. Vitida Sivakua	Program Officer, TICA
	Dr. Boonyong Keiwkarnka	Senior Advisor, AIHD
	Dr. Nate Hongkraitert	Assistant Director, AIHD
	Dr. Jumroon Mikhanorn	Head of the RCC, AIHD
Mr. Somchai Viripiromgool	Manager of the RCC, AIHD	

Period of Evaluation : 14 – 27 September, 2006

Type of Evaluation : Mid-term Evaluation

3. Results of Evaluation

3-1. Confirmation of the Progress

In general, the Project received planned inputs from both the Japanese and Thai sides appropriately. Although some project activities have been delayed and progress of the Project Outputs is uneven, it can be said that the Project is on the right track.

3-2. Revision of the PDM

Relevant project stakeholders, including representatives from JICA, TICA, and AIHD agreed to make following revision to the PDM.

		BEFORE THE REVISION	AFTER THE REVISION	REASONS OF REVISION
1	Indicator 1 of Project Purpose	At least 4 training programs using other sources of funds, targeting participants mainly from Cambodia, Lao PDR, Myanmar, and Vietnam, are conducted during the project period.	1. RCC has <u>regular contact</u> with <u>xxx</u> concerned organizations, including donor agencies, in Cambodia, Lao PDR, Myanmar, Vietnam, and Thailand ^{*1} . 2. % of organizations mentioned above recognize the RCC as an <u>effective coordination center</u> for HIV/AIDS ^{*2} .	<ul style="list-style-type: none"> • 2 training programs on HIV/AIDS using other funds were conducted by the AIHD without the coordination by the RCC due to the insufficient sharing of the Indicator among the AIHD and Project. • Acquisition of external funds largely depends on external factors. • The revised indicators represent the recognition of the concerned organizations, including donor agencies, on the RCC more appropriately.
2	Indicator 4-3 Output 4	3 Resource Persons, including AIHD staff, registered in the RCC's database are sent to other HIV/AIDS related programs annually coordinated by the RCC.	3 Resource Persons, including AIHD staff, registered in the RCC's database are sent to <u>and satisfied by (added)</u> other HIV/AIDS related programs annually coordinated by the RCC.	The performance of the Resource Person coordinated by the RCC should be assessed.
3	Activity 4-8	To utilize ex-trainees trained in Thailand, including AIHD alumni, as future trainers for HIV/AIDS training courses.	Deleted	The activity was designed to support the previous Indicator 1 of the Project Purpose, which was revised in the evaluation study.
4	Activity 4-9	To support HIV/AIDS programs in Cambodia, the Lao PDR, Myanmar, Vietnam, and Thailand	To support HIV/AIDS programs in Cambodia, the Lao PDR, Myanmar, Vietnam, <u>through the</u>	Dispatch of the third country experts (Thai) to target countries is not possible in the framework of JICA's regional

		through consultation and the use of short-term local experts.	<u>monitoring visit to ex-TOT participants (changed).</u>	cooperation project.
5	Output 3, Indicator4-1 Activity 4-2, 4-3, 4-7	AIHD alumni	RCC ex-TOT participants	Priority of the focal points is changed from AIHD alumni to ex-TOT participants due to the difficulty to develop formal communication line with the AIHD alumni.

*1, *2: It was agreed by the relevant stakeholders that the Indicator is clarified by the RCC Management Taskforce members and Japanese experts urgently. The Project will also specify the means of verifications for the Indicator to monitor the progress of the Project according to the Indicator.

3-3. Evaluation by five criteria

(1) Relevance

The Project is relevant particularly in terms of needs of target countries, cooperation policies of Thailand and Japan, strategy to effectively mitigate the impact of HIV/AIDS in the target countries, and dissemination of the project effect to the non-target group.

The project was formulated based on the needs from Cambodia, Lao PDR, Myanmar, and Vietnam identified in the JARCOM. Before and after the commencement of the Project, Japanese experts and concerned AIHD staff members surveyed the situation, training needs, trend of donor supports on HIV/AIDS in the target countries. The questionnaire survey conducted during the evaluation study indicates that the 94% of ex-TOT participants regard the contents of the TOT course as relevant to the HIV/AIDS situation in their countries.

The Government of Thailand has been encouraging cooperative development with other countries, particularly with its neighboring countries. It has been also assisting HIV/AIDS programs in neighboring countries by utilizing its successful experience and resources in Thailand with the cooperation of donor agencies. The project is also consistent with Japan's strategy to promote regional cooperation in partnership with advanced developing countries.

The Project is regarded as part of the strategy of the RCC to mitigate the impact of HIV/AIDS through human capacity building. The strategy is effective in tackling the HIV/AIDS issue in the target countries where the needs for human capacity building to support the HIV/AIDS program is still high. The Project is designed to conduct TOT courses for persons working in HIV/AIDS programs in the target countries. The result of the TOT course is expected to be spread to the people working in the HIV/AIDS program in each target country.

(2) Effectiveness

The Project Purpose can be achieved by the successful production of 4 Project Outputs. At the time of the Mid-Term Evaluation, the quality of the TOT course conducted by the RCC is high as can be seen from the satisfaction of the participants (Output 2). The progress of the Output 3 and 4 are weak due to the problems, which is mentioned below. The progress of the Output 3 and 4 should be prioritized and carefully monitored in the second half of the Project.

(3) Efficiency

Progress of the Output 3 has been delayed mainly due to the delay in the installation of server, technical difficulties, and weak coordination. There are also factors that have inhibited the achievement of the Output 4, such as the difficulty to develop the focal points in the target countries and insufficient understanding and sharing of the activities under Output 4 among concerned persons.

The progress of the project activities has been shared with other AIHD sections in the RCC Management Taskforce meeting for cooperation and coordination. However, there is a concern about the coordination and collaboration between the RCC and Training Section of the AIHD for the implementation of the training.

Training expense for a multinational training course was jointly funded by TICA and JICA as planned. The mechanism for the cost sharing can be a model for other regional cooperation projects jointly supported by TICA and JICA under Japan-Thailand Partnership Program Phase 2 (JTTP2).

(4) Impact

Judging from the result of the questionnaire survey, prospects of achieving the Indicator 1 of the Overall Goal are high. 69% of ex-TOT participants answered that they have conducted training programs after returning to their home countries. Another result from the questionnaire survey indicates that 76% of respondents from the organizations which ex-TOT belong to believe that the effect of the TOT course can give a positive impact on national or local policy, programs, and projects on HIV/AIDS in their countries.

(5) Sustainability

As the RCC has been established as a part of the AIHD, the RCC will be sustained in the AIHD after the completion of the Project. The AIHD, with more than 20 years of operational experience, has the necessary institutional capacity to maintain the RCC as a section in the organization. The activities to strengthen the relationship with relevant organizations, including donor agencies, should be conducted dynamically in order to ensure the maintenance of the function and scale of the RCC, and eventually to sustain the project effects.

Techniques have been transferred from Japanese experts to the RCC staff mainly by the OJT. The transferred techniques will be gradually spread in the AIHD through the collaboration between the RCC and other sections. The techniques transferred to the Technical Coordinator of the RCC Project, who has been working closely with the Japanese experts, will be transferred to the AIHD as the person is expected to be transferred to the AIHD before the end of the Project.

3-4. Conclusion

Although the progress of outputs is uneven, given the present status of implementation, the project purpose is expected to be achieved by the end of the Project.

3-5. Recommendations

- Revision of the PDM and PO

The detail of the revised indicator of the Project Purpose should be clarified by the RCC

Management Taskforce members supported by Japanese experts urgently as agreed during the Mid-Term Evaluation. The revised PDM and PO should be approved by the JCC members as soon as possible. The Project also should specify the means of verifications for the Indicator and the progress of the Project Purpose should be monitored according to the Indicator.

- Monitoring for the progress of the Project based on the PDM

The RCC Management Taskforce and JCC have been functioning to monitor the progress of the Project on a monthly basis and a bi-annual basis, respectively. It is recommended to monitor the progress of the Project based on the PDM to understand the progress of the Project more comprehensively and consistently.

- Further clarification of the coordination and collaboration mechanism for the RCC and the Training Section

The evaluation team recommends further clarification of the coordination and collaboration mechanism between the RCC and Training Section for conducting training programs on HIV/AIDS. As agreed in the Mid-Term Evaluation, coordination and collaboration mechanism, including the work process and responsibility of the Training Section staff, RCC staff, and RCC Project staff, should be discussed in the RCC Management Taskforce meeting.

- Communication between concerned persons

Some relevant issues, such as the understanding for the Project Purpose and indicators, role of the RCC in the AIHD, and collaboration between the RCC and the Training Section, had not been discussed sufficiently and remained unclear at the time of the Mid-Term Evaluation. The evaluation team recommends concerned persons, including Japanese experts, to have more frequent and intensive discussion on relevant project issues among key stakeholders for prompt actions in the limited time of the project period.

- Sharing of project information with the JICA Country Offices in the target countries.

The Project is well aware of the importance of the communication and information sharing with the JICA Country Offices to implement project activities effectively and efficiently. The effort to share the project information with the JICA Country Offices should be maintained.

- Strengthening of human capacity building of the concerned AIHD staff

Human capacity building for concerned AIHD staff, particularly for RCC staff, should be promoted for the implementation of the project activities and organizational strengthening of the RCC. The enhancement of the technical capacity for the design and maintenance of the website is considered as one of the prioritized field for the capacity building. The evaluation team recommends the Project Director, Head of the RCC, Manager of the RCC, and Japanese experts to review and implement the human capacity building plan with necessary revisions.

- Strengthening of networking

Strengthening of the networking with concerned organizations, including donor agencies, in the target countries and Thailand should be prioritized in the second half of the project period. The activities to strengthen the relationship with concerned organizations should be conducted dynamically within the limited time of the project period. It is recommended by the evaluation team to utilize concerned AIHD staff for the networking activities.

- Clarification of selection, approach, and expected role of the focal points

The priority of the focal points has been changed from AIHD alumni to ex-TOT participants of the RCC in the counterpart organizations. The selection, approach, and expected role of the focal points should be clarified as soon as possible based on the discussion with the counterpart organizations in

the target countries.

- **Monitoring for the performance of ex-TOT participants**

Monitoring of ex-TOT participants is very important to sustain the project effect. More monitoring visits are also expected from the ex-TOT participants and concerned organizations in the target countries, including the JICA Country Offices. The RCC can intensify the monitoring for the performance of ex-TOT participants with the understanding and cooperation with the JICA Country Offices.

- **Improvement of the quality of the Website and Newsletter**

Through the questionnaire survey and interview with ex-TOT participants and concerned organizations, expectations on the RCC's website and newsletter, and suggestions to improve the newsletter were collected. These expectations and suggestions should be utilized to improve the quality of the website and newsletter.

第1章 調査概要

1-1 調査の背景

タイ王国（以下、「タイ」と記す）では、世界的な感染拡大に先駆けて1990年代にHIV感染が急速に拡大した。感染拡大に伴い、タイ政府は日本を含む他国政府や国際援助機関からの支援を受けながら、エイズ対策を強化してきた。その結果、タイは現在では感染拡大の減少に成功した数少ない国として広く認知されている。

一方、周辺のカンボジア、ラオス、ミャンマー、ベトナム（CLMV）ではタイに比べてHIVの感染拡大は遅く、エイズ対策も遅れている。各国政府はエイズを国家の社会経済開発上の脅威として受け止め、国際支援を活用しながらエイズ対策を強化している。しかし、これらの国々では、急速に増加しているエイズ対策事業を効果的に行う人材が十分であるとはいえず、地域での活動を担う人材の能力向上が必要になっている。そこで地域協力推進会議（JICA-ASEAN Regional Cooperation Meeting : JARCOM）を通じてCLMV各国の要請を受けて、2005年4月から3年間の協力期間でプロジェクトが開始された。

本プロジェクトの実施機関となるマヒドン大学アセアン保健開発研究所（ASEAN Institute for Health Development : AIHD）は、1982年にアセアン人造りプロジェクトの一環として日本政府の支援で設立されて以後、プライマリヘルスケア、保健分野のマネジメントなどの研修コースを整備し、第三国研修を実施するなど国内外で高い評価を受けている。最近ではエイズ対策分野での調査・研究や研修事業を積極的に実施しており、これまでの保健分野での研修経験やネットワークを活用して、エイズ対策分野での人材養成にも貢献することが期待されている。

本プロジェクトは、JARCOMを通じてCLMV各国の要請を受けて、2005年4月1日から3年間の協力期間でプロジェクトが開始された。今般、開始後1年半が経過し、プロジェクトの進捗を確認するとともに、実績や成果を評価し、プロジェクト後半の方針について関係者協議するために中間評価調査を実施する。

1-2 調査の目的

- (1) プロジェクトの進捗状況、活動実績及び成果達成状況について確認を行い、5項目評価（特に妥当性、効率性、自立発展性）の観点から評価を行う。
- (2) プロジェクトの進捗や成果の促進／阻害の要因を分析し明確にする。
- (3) 後半のプロジェクトの方向性について関係者でワークショップを通じて協議し、必要に応じてProject Design Matrix (PDM) / Plan of Operation (PO) の修正を行う。
- (4) 上記を合同評価レポートに取りまとめ、タイ側代表とともに署名を行う。

1-3 調査団員

担当	氏名	所属
団長／総括	小川 正純	JICAタイ事務所 次長
協力計画	竹内 清佳	JICAタイ事務所 所員
評価分析	岩城 岳央	アイ・シー・ネット・アジア (株)

1-4 調査日程

	月日		調査内容
1	8/2	水	タイ側(TICA、AIHD)と準備会議実施
2	9/14	木	本調査のためのキックオフミーティング実施
3	9/15-20		<ul style="list-style-type: none"> ・既存資料の収集・分析 ・関係者へのインタビュー実施 ・CLMV各国からのアンケート回収・分析 ・評価グリッドの作成
4	9/21-22	木・金	ワークショップ実施
5	9/23-25		ミニッツドラフト作成
6	9/26	火	ミニッツドラフト協議
7	9/27	水	JCC開催、ミニッツ署名
8	9/28-29	木・金	報告書取りまとめ

1-5 対象プロジェクトの概要

プロジェクト名	HIV/AIDS地域協力センタープロジェクト
タイ側実施機関	マヒドン大学アセアン保健開発研究所 (AIHD)
協力期間	2005年4月～2008年3月 (3年間)
上位目標	カンボジア、ラオス、ミャンマー、ベトナムにおいて、RCCから提供されるリソースが活用され、エイズ対策に従事する人材が各国のニーズと状況に基づいて育成され、エイズ対策が改善される。
プロジェクト目標	RCCがカンボジア、ラオス、ミャンマー、ベトナムにおけるエイズ対策のための人材養成を支援する地域協力センターとして機能し、関係機関から認められる。
成果	<p>成果1：RCCがAIHD内に設立され、運営体制が強化される。</p> <p>成果2：研修事業の運営体制が構築され、カリキュラム・教材が、周辺4カ国のニーズを反映して開発され、改善される。</p> <p>成果3：タイと周辺4カ国におけるエイズ対策分野の人材、研究、活動事例に関する情報が収集され、適切にアップデートされ、周辺4カ国のカウンターパート機関、援助機関、AIHD卒業生、その他の関係者に向けて発信される。</p>

	成果4：関係者間のネットワーク強化により、タイと周辺4カ国のエイズ対策分野の人材、情報、財源が動員され、より有効に活用される。
活動	<p>成果1：合同調整委員会・RCC運営タスクフォース・協議委員会の設置・開催、年間活動計画・予算の作成、実施機関職員の能力向上計画作成・実施</p> <p>成果2：研修ニーズの調査、研修ガイドライン・カリキュラム・教材の開発・改善、タイでの第三国研修実施</p> <p>成果3：情報の収集、データベースの構築と定期的なアップデート、ウェブサイト開設と管理、ニュースレターと年次報告の発信、その他のメディアを通じたRCCの情報と活動経験の発信</p> <p>成果4：タイ国内外のエイズ対策分野の関係機関・人材や援助機関とのネットワーク強化、対象4カ国でのフォーカルポイント設置、関係者との情報共有のための会合の開催、など</p>
日本側の投入	<ul style="list-style-type: none"> ・長期専門家派遣 3人 ・機材供与（バス、コンピューターサーバー、コンピューター・周辺機器、写真・映像機材、視聴覚機材など） ・現地業務費（スタッフ人件費、研修費用などのプロジェクト活動費）
タイ側の投入	<ul style="list-style-type: none"> ・カウンターパート配置 6人（AIHD） ・施設（研修施設、プロジェクト事務所）（AIHD） ・現地業務費 HIV/AIDS地域協力センター（RCC）運営費、プロジェクト事務所管理費（AIHD） 複数の国からの参加者を対象とした研修講師の研修（TOT）費用をタイ国際開発協力機構（TICA）が分担

1-6 主要面談者リスト

(1) マヒドン大学アセアン保健開発研究所（ASEAN Institute for Health Development : AIHD）

Dr. Sirikul Isaranurug

AIHD所長、RCCプロジェクト・ダイレクター

(2) HIV/AIDS地域協力センター（HIV/AIDS Regional Coordination Center : RCC）

Dr. Jumroon Mikhanorn

センター長

Mr. Somchai Viripiomgool

マネージャー

Dr. Boonyong Keiwkarnka

タスクフォースメンバー

Ms. Chaweewan Sriburapapirom

タスクフォースメンバー

Dr. Nate Hongkrailert

タスクフォースメンバー

Ms. Cha-ohn Viripiomgool

スタッフ

Ms. Duangsamorn Chinchotikasem

スタッフ

Ms. Sriwan Klumpoonsawad

スタッフ

(3) タイ国際開発協力機構（Thailand International Development Cooperation Agency : TICA）

Ms. Rumpuey Pattamavichaiporn

Director of Countries Partnership Branch (Bilateral and

Ms. Vitida Sivakua

Ms. Malaiwan Lertkumsup

Trilateral)

プログラム・オフィサー

プログラム・オフィサー

(4) その他の関係機関

1) タイ保健省疫病管理局

Dr. Petchsri Sirinurand

2) タイ赤十字

Ms. Somsri Tantipaibulvut

3) 胸部疾患研究所結核センター

Dr. Charoen Chuchottaworn

(5) 日本人専門家

渡部 義太郎

沢崎 康

牧野 千秋

チーフ・アドバイザー／地域協力

HIV/AIDS人材育成アドバイザー

プロジェクト調整員／研修管理アドバイザー

第2章 調査結果

前述の日程にてタイ側とともに調査を行い、調査結果について以下のように合意した。

2-1 プロジェクトの実績

(1) 投入

1) タイ側の投入

a) カウンターパートの配置

プロジェクト開始当初は計画通り6人のAIHD職員がRCCに配置されていたが、1人(調整補助)が研修セクションに異動したため、中間評価時点で5人の職員が配置されている。AIHD内での執務室の配置換えが行われ、RCC職員が一室で業務できるようになり、業務効率が大幅に改善されたため、人員の減少はRCCの運営に大きな影響を与えていない。その他のカウンターパートの異動は生じていない。

b) 施設・設備の提供

プロジェクト事務所や研修施設など、プロジェクト運営に必要な施設・設備はAIHDから適切に提供されている。

c) 現地業務費

プロジェクト管理運営費用はJICAとAIHDが負担している。複数の国からの参加者を対象としたTraining of Trainers (TOT) の費用は計画通りJICAとTICAが分担している。

2) 日本側の投入

a) 専門家の派遣

計画通り3人の専門家が派遣されている。チーフアドバイザーの派遣が遅れたが、他の専門家がチーフアドバイザーの業務を分担し、業務を進めた。

b) 機材の提供

プロジェクトの運営に必要な機材は、計画通り提供されている。マヒドン大学からの認可の遅れと技術的な問題によりコンピューターサーバーの調達と設置が遅れ、活動の実施に悪影響を及ぼした。ノートブックコンピューター1台が故障により廃棄されたことを除き、プロジェクトにより供与された機材は適切に使用され、管理されている。

(2) プロジェクト成果

1) 成果1

RCCがAIHD内に設立され、運営体制が強化される。

指標

1. RCCの運営体制強化のために設けられた項目が満たされる。

RCCの運営体制が構築され、実施訓練(On-the-Job Training: OJT)を通じて強化されている。RCCの運営体制強化のために設けられた16項目のうち、10項目が計画通りに行われている。しかし、RCCスタッフ及び関係するAIHDスタッフの人材育成と情報管理体制の強化については進捗が遅れている。プロジェクト開始後にAIHDとの協働により人材育成計画が作成されているが、計画通りには実施されていない。

合同調整委員会 (Joint Coordinating Committee : JCC)、国際協議委員会 (International Consultative Committee : ICC)、RCC運営タスクフォース会議は計画通り開催され、議事録が適切に作成・管理されている。RCC運営タスクフォース会議は、プロジェクト進捗のモニタリングとプロジェクト活動に関する意思決定に重要な役割を果たしている。

2) 成果 2

研修事業の運営体制が構築され、カリキュラム・教材が、周辺4カ国のニーズを反映して開発され、改善される。

指標

1. 研修受講生が研修運営・カリキュラム・教材に満足する。

対象各国との協議議事録 (Minutes of Meeting : M/M) の締結が遅れたが、第1回目の (Training of Trainers : TOT) コースが計画通りに初年次中に実施された。研修受講者のコース運営に対する満足度は4点中3.4点と高く、研修受講者の満足度が上昇傾向にあることも特筆される (3.08→3.25→3.67→3.4→3.65)。

研修コースの運営ガイドライン、カリキュラム、教材は計画通り作成されている。各国を対象にした第1回目の研修コース実施後に、研修講師を対象にした研修コース改善のためのワークショップが開催されており、ワークショップの結果がガイドライン、カリキュラム、教材の改善に反映されることが期待できる。

日本人専門家とRCCスタッフにより、プロジェクト開始直後に各国での研修ニーズを把握するための調査が行われている。また、その後も、プロジェクトはICC会議や対象国へのモニタリング訪問など、様々な機会を利用して、継続的に研修コースのニーズの把握に努めている。研修コースを対象国のニーズに基づいてデザインするというプロジェクトアプローチは、外部の関係者から高い評価を得ている。

3) 成果 3

タイと周辺4カ国におけるエイズ対策分野の人材、研究、活動事例に関する情報が収集され、適切にアップデートされ、周辺4カ国のカウンターパート機関、援助機関、AIHD卒業生、その他の関係者に向けて発信される。

指標

1. ネットワークや各国のフォーカルポイントを通じて収集される情報に基づいたデータベースが構築され、四半期毎にアップデートされる。
2. ウェブサイトが開設され定期的にアップデートされる。
3. 四半期毎のニュースレターと年次報告書が毎回500部発行される (電子配信を含む)。

RCCのデータベース構築はウェブサイトの構築と並行して進められており、一部がウェブサイト上で公開されている。計画に比べてデータベースの構築が遅れており、今後早急に充実させていく必要がある。

RCCのウェブサイト構築は、コンピューターサーバーの調達遅れ、技術的な問題、関係者間の不十分な調整により大幅に遅れた。RCCのウェブサイト担当者がサイトの改善や維

持管理を担当することになっているが、技術面で十分な能力が備わっているとはいえない。

ニュースレターは計画通り四半期ごとに発行され、100部強が外部の関係者に郵送されている。今後、ウェブサイトの管理体制とE-Mailによる送付体制の充実（中間評価時点では約150人のE-mailアドレスがメーリングリストに記載済み）により、プロジェクト終了時までに目標値（500人）を達成することが見込まれる。また、RCCに関する情報がマヒドン大学や世界保健機構（World Health Organization : WHO）などの関係機関の定期刊行物に掲載されている。

4) 成果4

関係者間のネットワーク強化により、タイと周辺4カ国のエイズ対策分野の人材、情報、財源が動員され、より有効に活用される。

指標

1. フォーカルポイントを通じて、対象国で期待されるサービスが提供される。
2. RCCのデータベースに登録されているAIHD職員を含むリソースパーソン数が各関連分野で目標人数を超える。
3. AHID職員を含めて、RCCのデータベースに登録されているリソースパーソンのうち、年間3人がRCCの仲介により他のエイズ関連プログラムに派遣される。

対象国へのモニタリング訪問やICC会議などのプロジェクト活動を通じて関係機関とのネットワーキングが強化されているが、成果が十分に達成されているとはいえない。対象国でのフォーカルポイント設置の難しさや、関係者間での活動に対する理解と共有が十分ではなかったことが、成果進捗の阻害要因として考えられる。

プロジェクトは、AIHD卒業生をプロジェクト業務を支援する公式なフォーカルポイントにすることが難しいと判断し、フォーカルポイントの主対象をRCCの研修受講者に変更している。今後、フォーカルポイント活用のコンセプトと対象者へのアプローチを明確にしていく必要がある。

プロジェクトは各関連分野で、目標人数を超えるリソースパーソンをリストアップしている。現在、リストアップされたリソースパーソンからデータベースへの登録許可を取り付けているところである。RCCから他のエイズ関連プロジェクトへのリソースパーソンの派遣はまだ行われていない。

プロジェクトは必要に応じて、タイでのカウンターパート機関であるTICAと保健省との会合をもっており、両機関とのコミュニケーション上の問題は見られない。

日本人専門家やRCCスタッフが、国際エイズ会議などの会議やセミナーに参加しネットワークの強化に努めている。

(3) プロジェクト目標

RCCがカンボジア、ラオス、ミャンマー、ベトナムにおけるエイズ対策のための人材養成を支援する地域協力センターとして機能し、関係機関から認められる。

指標

1. プロジェクト協力期間中に、周辺4カ国からの参加者を対象にした研修が、他機関

の委託により4回以上実施される。

2. RCCのウェブ上のホームページに年間1,500回のアクセスがあり、150人が利用者登録している（初年度100人、2年次120人、3年次150人）。
3. ニュースレター（電子配信を含む）の読者が提供される情報に満足する。

RCCは上記プロジェクト成果の進捗に伴い、地域協力センターとしての機能を強化している。指標1に関しては、プロジェクト開始後に、AIHDにより以下の2つのエイズに関する研修が実施されている。

- 1) ベトナムのエイズ対策関係者を対象にしたスタディツアー（世界エイズ・結核・マラリア対策基金からの委託）
- 2) タイ人の保健関係者に対するエイズ研修（AIHD内に設置されているWHOコラボレーションセンターによる実施）

しかし、AIHD・プロジェクト関係者間での指標に対する共有が十分ではなく、RCCは上記研修の調整・実施にかかわっていない。

指標2のウェブサイトへのアクセスについては、ホームページが2006年8月に公開されたばかりなので評価することが困難である。指標3のRCCニュースレターの満足度については、質問票調査と関係者へのインタビューを通じて47人から回答があり、「とても良い」9人、「良い」37人、「普通」1人となっている。

(4) プロジェクト上位目標

カンボジア、ラオス、ミャンマー、ベトナムにおいて、RCCから提供されるリソースが活用され、エイズ対策に従事する人材が各国のニーズと状況に基づいて育成され、エイズ対策が改善される。

指標

1. 研修受講者の70%が本国で最低1回の研修を実施する。
2. 研修受講者が講師を務める研修の参加者の満足度、理解度、研修成果の利用度が高い。

対象国関係者への質問票調査の結果から、RCCの研修効果が既にプロジェクト対象者外に波及していることがみてとれる。対象各国へのモニタリング訪問時に検証する必要があるが、質問票調査の結果からは、上位目標の指標1がプロジェクト期間中に達成される可能性が高いといえる。プロジェクト上位目標に関する質問票調査の主な結果を以下に記す。

- ・研修受講者の69%がRCCでの研修後に本国で研修を実施している
- ・研修受講者の94%が研修を行う役職にある
- ・研修受講者の84%がセミナー・ワークショップ参加や同僚との共有により研修結果を関係者と共有している
- ・研修受講者の81%と研修受講者の所属機関関係者の97%が研修を通じて獲得した知識と技術が業務上有効だと認識している
- ・研修受講者の所属機関関係者の76%が研修の効果が国家・地域レベルでの政策、プログラム、プロジェクトにプラスの影響を及ぼすと考えている

2-2 PDMの改訂

JICA、TICA、AIHDの代表者を含む主要関係者間で以下のようにPDMを変更することを合意した。

		変更前	変更後	変更理由
1	プロジェクト目標の指標1	プロジェクト協力期間中に、周辺対象4カ国からの参加者を対象にした研修が他の機関の委託により4回以上実施される。	1. RCCが援助機関を含めてカンボジア、ラオス、ミャンマー、ベトナム、タイにあるxxx以上の関係機関と定期的に連絡をとる。 ^{*1} 2. 上記関係機関のうち、xx%がRCCをエイズに関する有効な協力センターとして認識する。 ^{*2}	・プロジェクト開始後に、AIHDは他機関からの委託によりエイズ関連研修を2回実施している。しかし、関係者間で指標が十分に共有されておらず、RCCが関与していない。 ・外部からの委託による研修実施は外部要因の影響が大きい。 ・改訂後の指標が、ドナー機関を含む関係機関のRCCに関する認識を測るのに、より適当であると考えられる。
2	成果4の指標4-3	AIHD職員を含めて、RCCのデータベースに登録されているリソースパーソンのうち、年間3人がRCCの仲介により他のエイズ関連プログラムに派遣される。	AIHD職員を含めて、RCCのデータベースに登録されているリソースパーソンのうち、年間3人がRCCの仲介により他のエイズ関連プログラムに派遣され、 <u>派遣先がリソースパーソンに満足する(追加)</u> 。	RCCが仲介するリソースパーソンの業務内容も評価する必要がある。
3	活動4-8	タイでの研修受講経験者やAIHD卒業生を研修講師として活用する。	削除	変更前のプロジェクト目標の指標1に関する活動であったため削除。
4	活動4-9	コンサルテーションや短期専門家の派遣を通じてタイと周辺4カ国でのエイズ対策プログラムを支援する。	<u>研修受講者へのモニタリングを通じて(変更)</u> 周辺4カ国でのエイズ対策プログラムを支援する。	JICAの地域協力プロジェクトの枠組みでは、第三国専門家(タイ人)を周辺国に派遣できないため。
5	成果3、指標4-1、活動4-2、4-3、4-7	AIHD卒業生	RCCのTOT受講者	AIHD卒業生をプロジェクト業務を支援する公式なフォーカルポイントとすることが難しく、フォーカルポイントの主対象をRCCのTOT受講者に変えたため。

*1、*2：主要プロジェクト関係者間で、RCC運営タスクフォースと日本人専門家が指標を具体化することを合意した。プロジェクトは指標の入手手段も明確にし、プロジェクトの進捗を指標に基づいてモニタリングする必要がある。

2-3 5項目評価

各成果で進捗状況に差がみられるものの、現在のプロジェクト実施状況から、プロジェクト終了時までにはプロジェクト目標が達成される見込みが高い。以下に5項目評価の要旨を記す。

(1) 妥当性

本プロジェクトの実施は、特にタイ周辺対象国のニーズとの合致、日本とタイの協力政策との合致、周辺対象国でのエイズによる影響の緩和、事業効果の非プロジェクト対象者への波及の点で妥当である。

本プロジェクトはJARCOMを通じてタイ周辺対象国のニーズをもとに形成され、プロジェクトの開始前後に日本人専門家とAIHD関係者が対象国でのエイズの状況、研修ニーズ、他ドナーの支援動向などについて調査している。中間評価時に実施された質問票調査では、94%のTOT受講者が研修内容は各国のエイズ対策に妥当であると回答している。

タイ政府は他国との協力による開発を推進しており、特に周辺国との協力を強化している。タイ政府は、援助機関と協力しながら、自国の成功経験と資源を活用してエイズ対策でも周辺国を支援している。本プロジェクトは開発の進んだ途上国との連携による地域協力を推進する日本政府の戦略にも合致する。

本プロジェクトは人材育成を通じてエイズによる影響を緩和するというRCCの長期戦略の一部である。この戦略は、引き続き人材育成ニーズの高いタイ周辺国でのエイズ対策に有効であるといえる。また、本プロジェクトでは周辺対象国でのエイズ対策プログラムの従事者を対象にしたTOTを実施している。TOT受講者が研修後に自国で研修を行うことにより、プロジェクト効果が他のエイズ対策従事者に波及することが期待できる。

(2) 有効性

プロジェクト目標は4つのプロジェクト成果の産出により達成される。中間評価時点では、RCCが行うTOT受講者の研修に対する満足度は高く、成果2の「研修事業の運営体制構築とカリキュラム・教材開発」が順調に進められているといえる。しかし、成果3の「エイズ対策分野の人材、研究、活動事例に関する情報の収集、アップデート、発信」、成果4の「関係者間のネットワーク強化による人材、情報、財源の動員と有効活用」は、活動実施の遅れにより進捗が遅れている。プロジェクト後半はプロジェクトの有効性の観点から、成果3、4の達成状況に十分な注意を払う必要がある。

(3) 効率性

コンピューターサーバーの調達・取り付けの遅れ、ウェブサイト開発上の技術的な問題、関係者間の連携の弱さなどにより、成果3の進捗が遅れている。成果4に関しては、周辺対象国でのフォーカスポイント設置の難しさや関係者間での活動に関する理解が十分でなかったことなどが進捗を阻害していると考えられる。

プロジェクトの進捗は、毎月開催されるRCC運営タスクフォース会議を通じてAIHDの他のセクションと共有され、AIHD内での連携と協力が行われている。しかし、RCCとAIHD内の研修セクションとの役割分担が明確になっておらず、今後の研修実施において、両セクション間の連携と協力が懸念される。

複数の国からの参加者を対象としたTOTの費用は、計画通りJICAとTICAで分担されている。この費用分担のメカニズムは、日本・タイ・パートナーシップ・プログラム・フェーズ2 (Japan-Thailand Partnership Program Phase 2 : JTTP 2) のもとで両機構によって支援される他の地域協力プロジェクトの実施モデルになると考えられる。

(4) インパクト

中間評価の段階で上位目標達成見込みを分析することは難しいが、質問票調査の結果から、上位目標の指標1を達成する見込みは高いといえる。TOT受講者の69%が研修後に自国で研修を実施しており、目標値の70%をほぼ達成している。また、TOT受講者の所属先機関への質問票調査では、プロジェクトが実施するTOTは国や地域でのエイズ政策、エイズ対策プログラム・プロジェクトに好影響を及ぼすと76%が回答しており、政策レベルでのインパクトが期待できる。

(5) 自立発展性

RCCはAIHD内に設立されており、プロジェクト終了後もAIHDの一部として維持されることが見込まれる。AIHDは既に20年以上運営されており、RCCを維持する十分な組織能力を備えているといえる。RCCの機能と規模を維持し、プロジェクト効果を持続していくために、今後は援助機関を含む関係機関との連携を強化するための活動が活発に行われるべきである。

日本人専門家からRCC職員への技術移転は、主にプロジェクト活動実施を通じた実地訓練により進められている。RCC職員に移転された技術は、他のセクションとの連携によりAIHD内に波及することが見込まれる。TOT実施などで日本人専門家を支援しているプロジェクトスタッフ（テクニカル・コーディネーター）が、プロジェクト終了前にAIHDに採用されることになっており、移転された技術がAIHD内に留保される。

2-4 提言

(1) PDMとPOの改訂

中間評価の中で、主要関係者により、日本人専門家の支援を受けながらRCC運営タスクフォースメンバーが早急にプロジェクト目標の指標1を具体化することが合意された。プロジェクトは具体化された指標を反映してPDMとPOを改訂し、できるだけ早くJCCで承認を受ける必要がある。また、プロジェクトは指標の入手手段を明確にし、指標に基づいてプロジェクト目標の達成を注意深くモニタリングしていく必要がある。

(2) PDMに基づくプロジェクトのモニタリング

プロジェクトの進捗は、毎月開催されるRCC運営タスクフォース会議と年2回開催されるJCCによってモニタリングされている。評価チームは、プロジェクトの進捗を包括的に、かつ一貫性をもって把握するために、PDMに基づいてプロジェクトの進捗をモニタリングすることを提案する。

(3) RCCと研修セクションの連携・協力体制の明確化

中間評価中の協議で合意されたように、RCC運営タスクフォース会議の中で、業務プロセ

スや各セクションのスタッフの役割などを含めて、RCCとAIHD研修セクションの連携・協力体制を協議し、早急に明確化すべきである。

(4) 関係者間のコミュニケーション

中間評価時に、プロジェクト目標と指標に対する理解、RCCのAIHD内での位置づけ、RCCと研修セクションの連携・協力体制など、プロジェクト運営にかかわる重要事項が、主要プロジェクト関係者間で十分に協議されていないことが明らかになった。限られたプロジェクト期間内で迅速に行動を起こしていくために、日本人専門家を含む主要プロジェクト関係者が、プロジェクト運営について、これまで以上に頻繁に、かつ集中的に協議を行っていくべきである。

(5) JICA周辺国事務所とのプロジェクト情報の共有

主要プロジェクト関係者はプロジェクト活動を効果的かつ効率的に行うために、JICA周辺国事務所との連携と情報共有が重要であることを認識している。今後も、引き続きJICA周辺国事務所との連携と情報共有に十分配慮していく必要があると考えられる。

(6) AIHD職員の人材育成強化

プロジェクト活動の円滑な実施とRCCの組織強化の観点から、AIHD職員、特にRCCに配属されている職員の能力強化が推進されるべきである。なかでも、ウェブサイトの管理運営技術向上の優先順位が高い。評価チームはプロジェクト・ダイレクター、RCCセンター長、RCCマネージャー、日本人専門家に、人材育成計画を見直し、必要に応じて修正しながら実施していくことを提案する。

(7) ネットワークの強化

プロジェクト後半は、援助機関を含めて、周辺対象国とタイでの関係機関とのネットワーク強化に焦点が当てられるべきである。限られたプロジェクト期間内に成果をあげ、プロジェクト目標の達成につなげるため、ネットワーク強化のための活動は高い優先順位で活発に行われるべきである。プロジェクトに関係するAIHD職員をネットワーク強化活動に積極的に活用していくことが推奨される。

(8) フォーカルポイントの選定、アプローチ、期待する役割の明確化

当初計画していたようにAIHD卒業生をプロジェクト業務を支援する公式なフォーカルポイントにすることが難しく、フォーカルポイントの主対象を各国のカウンターパート機関内のTOT受講者に変更することにしている。周辺対象国のカウンターパート機関と協議しながら、フォーカルポイントの選定、アプローチの仕方、期待する役割などを早急に明確にすることが求められる。

(9) TOT受講者のモニタリング

TOT受講者のモニタリングはプロジェクト効果を持続させるうえでとても重要である。周辺対象国の関係者への質問票調査でも、TOT受講者、TOT受講者の所属先機関、JICA事務所

からプロジェクトによるモニタリング訪問の充実が求められている。プロジェクトは、各周辺対象国のJICA事務所の理解と協力を得ながら、TOT受講者の研修後の活動のモニタリングを強化することができると考えられる。

(10) ウェブサイトとニュースレターの改善

TOT受講者を含む関係者への質問票調査とインタビュー結果から、RCCのウェブサイトとニュースレターに期待する内容や改善のための提言が収集されており、今後のウェブサイトとニュースレターの改善に有用だと考えられる。

第3章 団長所感

本プロジェクトは、タイのRCCにおける研修を通じ、CLMV諸国のエイズ対策分野における人材能力向上に必要な研修、情報、人材を提供することを目的としている。

このプロジェクトは、JARCOMを通じて、エイズが国家の社会経済開発上の脅威となっているCLMV諸国のニーズをもとに形成されたものであり、まさにCLMV諸国に裨益するものであることは論を俟たない。なお、今回中間評価調査の結果、本プロジェクトの研修受講者のほとんどが、RCCのTOTコースがCLMV諸国のHIV/AIDS対策に資するものと考えていることから、本プロジェクトの妥当性はきわめて高いと思われる。

ただし、プロジェクトをより効果的、効率的に実施するためには、実施機関であるAIHD及びRCCのキャパシティーの強化とともに、CLMV諸国のJICA事務所を含む関係者とのより密接な情報共有が必要である。AIHD及びRCCのキャパシティーの強化については、プロジェクトのモニタリングの強化、AIHDのトレーニング・セクションとRCCがより連携してプロジェクトを実施する体制づくりが必要とされるが、これらの点については、今回中間評価調査時にAIHD所長から強いコミットメントがあり、今後、より効率的なプロジェクト運営がなされることが期待される。

今回調査において、AIHD所長からRCCは単なるトレーニング・センターではなく、HIV/AIDSのコーディネーション・センターであることが再度確認された。この意味において、RCCは単にTOTコースを実施するにとどまらず、他の機関から研修やワークショップ等の業務を請け負い、実施していくことが求められる。この点を再確認したうえで、AIHD及びRCCからは、今後残りのプロジェクト期間内でタイ及びCLMV諸国におけるエイズ関連機関、ドナー機関とのネットワーク強化のため、HIV/AIDS関連の会議、ワークショップ等により積極的に参加していくことが表明された。AIHD、RCCは決して自分自身でHIV/AIDS関連の豊富な講師を有しているわけではない。しかしながら、保健分野の国際研修コース運営実施の長年の経験・実績があり、保健分野の関係者から信頼を得ているため、外部から豊富な人材を集めることが可能であり、それがAIHD、RCCの強みである。実際、今回聞き取り調査をした本プロジェクトTOTの外部講師全員がRCCのTOTコースを高く評価しており、今後も外部講師として参加していきたい意向を示している。

CLMV諸国のフォーカルポイントに関しては、当初AIHD卒業生を核に考えていたが、公式ルートでアプローチが必要なこともあり、RCCの研修受講者をフォーカルポイントにすることに変更した。AIHD卒業生のネットワークは別途AIHD主体で構築し、将来的にはRCC研修受講者と統合することが考えられる。

また、今回調査でRCC研修受講者のモニタリング強化の必要性が確認されたため、今後のプロジェクトの活動として、各国を巡回して受講者及びその所属機関、関係機関でTOTのモニタリング、フォローアップを行うとともに、JICA各国事務所と緊密な情報交換を強化していくことが確認された。

ウェブサイト、ニュースレター、データベース構築等情報関係及びネットワーク構築の分野で進捗が遅れているものの、研修受講者の本プロジェクトTOTへの満足度が高いことに見られるように、研修コースの実施・運営は非常によくなされている。また、研修受講者の約70%が自国において研修を既に実施し、約80%が研修の成果を普及していることに鑑み、本プロジェクトを通じ、今後CLMV諸国におけるHIV/AIDS対策に従事する人材が育成されていくことが期待される。

付 属 資 料

- 1 . Minutes of Discussions
- 2 . Record of Discussions (R/D)
- 3 . Progress of Strengthening RCC's Management System
(Indicator for the Output 1)
- 4 . List of Field and Number of Resource Persons for the Database
of the RCC Project (Indicator for the Output 4)
- 5 . Inputs form the Japanese and Thai sides
- 6 . List of Interviewees
- 7 . Summary of Interview Results
- 8 . Summary of Questionnaire Results

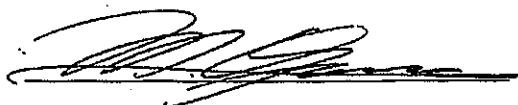
MINUTES OF DISCUSSIONS
BETWEEN
THE JAPAN INTERNATIONAL COOPERATION AGENCY (JICA)
AND
ASEAN INSTITUTE FOR HEALTH DEVELOPMENT (AIHD), MAHIDOL UNIVERSITY
ON
THE HIV/AIDS REGIONAL COORDINATION CENTER (RCC) PROJECT
MID-TERM EVALUATION

The Mid-Term Evaluation Study of the HIV/AIDS Regional Coordination Center Project (hereinafter referred to as "the Project") was conducted jointly by Japan International Cooperation Agency (JICA), Thailand International Development Cooperation Agency (TICA), and ASEAN Institute for Health Development (AIHD) from 14th to 27th of September 2006.

During the study, the Evaluation Team assessed the achievements of the Project since its commencement in April 2005 by reviewing documents, interviewing relevant individuals, and distributing questionnaires to relevant individuals and organizations in Cambodia, Lao PDR, Myanmar, and Vietnam. The Evaluation Team also conducted a workshop to share the study result and review the project design on 21st and 22nd of September 2006.

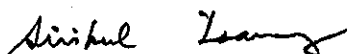
Through these exercises, both the Japanese and Thai parties came to an agreement regarding the evaluation results including recommendations as described in the Mid-Term Evaluation Report attached hereto.

27 September 2006



Mr. Masazumi Ogawa
Deputy Resident Representative
Japan International Cooperation Agency
Thailand Office

Leader of Mid-Term Evaluation Team



Dr. Sirikul Isaranurug
Director
ASEAN Institute for Health Development
Mahidol University

Project Director of the RCC Project

Attachments:

1. Mid-Term Evaluation Report
2. Evaluation Grids

HIV/AIDS REGIONAL COORDINATION CENTER (RCC) PROJECT
MID-TERM EVALUATION REPORT
(ATTACHMENT TO THE MINUTES OF DISCUSSIONS)

1. Background and Purpose of the Evaluation Study

The HIV/AIDS Regional Coordination Center (RCC) Project was launched in April 2005 for the project period of three years based on the needs from Cambodia, Lao PDR, Myanmar, and Vietnam identified in the JICA-ASEAN Regional Cooperation Meeting (JARCOM). The scope of the RCC Project was jointly designed by Japan International Cooperation Agency (JICA), Thailand International Development Cooperation Agency (TICA), and ASEAN Institute for Health Development (AIHD) with the Project Purpose to develop the RCC as a well-recognized coordination center to provide training, information, and human resources needed to support capacity building for HIV/AIDS programs in the region. As the Project reached the middle of the project period, a mid-term evaluation study was planned in order to examine the achievement of the Project.

The Mid-Term Evaluation Study had the following five objectives.

- 1) To review the progress of the Project and evaluate the achievement in accordance with the five evaluation criteria, namely relevance, effectiveness, efficiency, impact, and sustainability.
- 2) To draw the factors that promoted / impeded project effects.
- 3) To consider necessary actions to take and make recommendations for the Project.
- 4) To revise the Project Design Matrix (PDM) and the Plan of Operation (PO), if necessary.
- 5) To summarize the result of the study in a report.

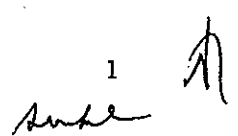
2. Mid-Term Evaluation Team members

	Member's Name	Position
1	Mr. Masazumi Ogawa (Team Leader)	Deputy Resident Representative, JICA Thailand Office
2	Ms. Kiyoka Takeuchi	Assistant Resident Representative, JICA Thailand Office
3	Mr. Takehiro Iwaki	Consultant of JICA Thailand Office, IC Net Asia Co., Ltd.
4	Ms. Charintip Yosthasan	Program Officer, TICA
5	Ms. Vitida Sivakua	Program Officer, TICA
6	Dr. Boonyong Keiwkarnka	Senior Advisor, AIHD
7	Dr. Nate Hongkrailert	Assistant Director, AIHD
8	Dr. Jumroon Milkhanorm	Head of the RCC, AIHD
9	Mr. Somchai Viripirongool	Manager of the RCC, AIHD

3. Methodology of Evaluation Study

3-1. Method of Evaluation

The Project Cycle Management (PCM) method was applied to the evaluation. The evaluation was

1


conducted by comparing the design and outcomes of the project using the five evaluation criteria: relevance, effectiveness, efficiency, impact, and sustainability as briefly explained below. Evaluation Grids were produced to compare the outcomes of the Project with its design.

1) Relevance

An overall assessment of whether the Project Purpose and the Overall Goal are in line with the policies of the counterpart country and donors and with the counterpart's needs and priorities.

2) Effectiveness

A measure of whether the Project Purpose will be achieved. This is then a question of the degree to which the Project Outputs contributes to the achievement of the intended Project Purpose.

3) Efficiency

A measure of the extent to which the Project has generated Project Outputs in relation to the total resource inputs.

4) Impact

The positive and negative changes, produced directly and indirectly as the result of the Project.

5) Sustainability

An overall assessment of the extent to which the positive changes achieved by the Project can be expected to last after the completion of the Project.

3-2. Study Area

Necessary information for this Mid-Term Evaluation study was mostly collected in Thailand. As the training course for participants from the target countries, namely Cambodia, Lao PDR, Myanmar, and Vietnam, was conducted only once for each country, the evaluation study did not include field survey in these countries. However, information from relevant stakeholders, including ex-participants, was collected through questionnaires.

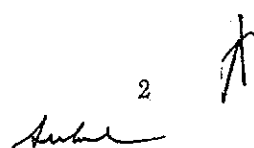
3-3. Method of Survey

1) Document review

Relevant project documents, such as Record of Discussions (RD), Project Document, Reports of Training Courses, Minutes of Meetings, Reports of Japanese Experts were reviewed to examine the achievement and implementation process of the Project.

2) Questionnaires

Questionnaires were distributed to and collected from the ex-Training of Trainers (TOT) participants, organizations which ex-TOT participants belong to, and JICA Country Offices in Cambodia, Lao PDR, Myanmar, and Vietnam, and Lecturers of TOT course conducted by the RCC. Answers were compiled and analyzed to identify any trends in the answers to the survey items.



3) Interviews

A series of interviews were conducted with relevant stakeholders, such as Director of the AIHD, RCC Management Taskforce members, RCC staff, Japanese Experts, TICA, and other relevant organizations to evaluate the achievement of the Project and identify contributing and impeding factors to the achievement.

4) Workshop

A two-day workshop was conducted on 21-22 September 2006 with the participation of the Evaluation Team, Director of the AIHD, RCC Management Taskforce members, RCC staff, RCC Project staff, and Japanese Experts to share the evaluation result, collect further information, and discuss the necessary actions.

4. Achievement of the Plan

4-1. Achievement of Inputs

1) Inputs from the Thai side

a. Assignment of counterparts

5 AIHD staff members were assigned to the RCC. The allocation was reduced from 6 to 5 (one person was moved to the Training Section of the AIHD). As the work efficiency of the RCC improved by the re-allocation of the room in the AIHD to make RCC staff members work in one room, the reduction of the staff did not affect the operation of the RCC. There were no major changes in the counterpart personnel.

b. Provision of facilities

The facilities essential for the Project, such as office space and training venue, have been provided by the AIHD.

c. Local Expenditure

Administrative and operational expenses for the Project were shared by JICA and AIHD. Training expense for multinational training was jointly funded by JICA and TICA as planned.

2) Inputs from the Japanese side

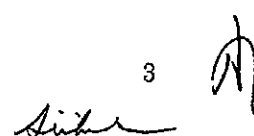
a. Dispatch of Experts

3 long-term experts were dispatched to the Project as planned.

Dispatch of the Chief Advisor was delayed from August to December 2005. Two Japanese experts jointly took the role of the Chief Advisor during his absence.

b. Provision of equipment, machinery and materials

Project equipment pieces were provided to carry out the activities effectively as planned. Delivery and installation of the computer server was delayed due to the delay in approval process and technical



problems. All the project equipments are maintained properly except one notebook computer which was discarded after serious mechanical trouble.

4-2. Achievement of Project Outputs

<OUTPUT 1>

Organization and management systems of the RCC are established and strengthened.

Indicator

1) All the criteria for strengthening RCC's management system are achieved.

Organization and management systems of the RCC have been established and strengthened mainly by the on-the-job training (OJT). 10 of 16 criteria set to strengthen the RCC's management system have been achieved or running as planned. The weak parts in the criteria are the human capacity building of the RCC and concerned AIHD staff and information management. The Project developed the human capacity building plan at the early stage of the Project by the cooperation with the AIHD, but the implementation has been weak.

Meetings for the Joint Coordinating Committee (JCC) and International Consultative Committee (ICC) have been conducted as planned. RCC Management Taskforce meetings have been convened monthly as planned. Minutes of the Meetings have been recorded and properly maintained. The Taskforce meeting has been functioning well to monitor the progress of the Project and decide relevant issues concerning the project activities.

<OUTPUT 2>

Management system, curricula, and materials used in training programs are developed and improved in response to the specific country needs of Cambodia, the Lao PDR, Myanmar, and Vietnam

Indicator

1) Trainees are satisfied with the training program, in terms of management, curricula, and materials.

The first-round country-specific TOT courses for each target country have been conducted to meet the annual plan despite the delay in signing the Minutes of Meeting (MM) with each target country. Satisfaction level of the ex-TOT participants on the course management is as high as 3.4 (full mark is 4). It is noted that the average score for each course has been increasing (3.08→3.25→3.67→3.4→3.65).

Operational guidelines, curricula, and materials for TOT course have been developed by the Project as planned. The Project conducted two workshops with lecturers of the TOT courses. The result of the Workshops will be reflected in the revision of the guidelines, curricula, and materials.

The Project conducted a needs assessment survey at the early stage of the Project and has continuously examined the needs of the TOT courses on various occasions, such as ICC and monitoring visits to the target countries. The approach of the Project to design the training module based on the needs of the target countries was highly appreciated by the concerned organizations during the interview conducted

Slide

by the evaluation team.

<OUTPUT 3>

Information concerning human resources, research, and relevant experiences on HIV/AIDS in Cambodia, the Lao PDR, Myanmar, Vietnam, and Thailand is collected, properly maintained, and disseminated to counterpart organizations, donor agencies, AIHD alumni, and other stakeholders.

Indicators

- 1) Database is developed and updated quarterly based on the information collected through networks and focal points in Cambodia, the Lao PDR, Myanmar, and Vietnam.
- 2) Website is developed and regularly maintained.
- 3) 500 copies of newsletters (by e-journal and printouts) are distributed quarterly.

The RCC's database has been developed gradually along with the development of the website. The database has been published partly in the website and needs further improvement.

The development of the RCC's website was delayed mainly due to delay in the procurement of the computer server, technical difficulties, and weak coordination. The person in charge at the RCC is expected to upgrade and maintain the website. However, the technical capacity of the staff is not sufficient to deal with relatively complicated technical issues.

Newsletters were produced quarterly as planned. At this moment, over 100 copies are sent to the concerned persons by the post. With the development of the web management system and e-mailing list (so far, about 150 persons are listed), it is expected to reach the target indicator by the end of the Project. Information of the RCC has been published in journals of some organizations, such as Mahidol University and WHO.

<OUTPUT 4>

Human resources, information, and financial resources in Cambodia, the Lao PDR, Myanmar, Vietnam, and Thailand for HIV/AIDS programs are mobilized for more effective utilization through networking.

Indicators

- 1) Expected services are provided in Cambodia, Lao PDR, Myanmar, and Vietnam through Focal Points such as AIHD alumni members.
- 2) Target numbers of Resource Persons, including AIHD staff, are listed in the database of the RCC for each relevant field.
- 3) Resource Persons, including AIHD staff, registered in the RCC's database are sent to other HIV/AIDS related programs annually coordinated by the RCC.

Although networking with relevant persons and organizations has been strengthened through the project activities, such as monitoring visits to the target countries and ICC, achievement of this Output is still weak. Factors that have inhibited the progress of the Project Outputs include difficulties in developing the focal points in target countries and insufficient understanding and sharing of the activities among RCC staff, project staff, and Japanese experts.



Priority of the focal points has been changed from AIHD alumni to ex-TOT participants of the RCC in the counterpart organization due to difficulties in developing formal communication lines with the AIHD alumni. The concept and approach for the focal points need further clarification.

The Project has already listed the resource persons to meet the target for each relevant field. The registration of resource persons to the RCC's database is under way. The RCC has not yet sent any of the resource persons to other HIV/AIDS related programs.

Driven by necessity, the Project has conducted meetings with project partners in Thailand, namely TICA and MOPH. There are no difficulties in communication between the Project and these organizations. Japanese experts and RCC staff have attended meetings, conferences, and seminars such as an International Conference on HIV/AIDS.

4-3. Achievement of Project Purpose

<PROJECT PURPOSE>

The RCC functions and is recognized by concerned organizations as a coordination center to provide training, information, and the human resources needed to support human capacity building for HIV/AIDS programs in Cambodia, the Lao PDR, Myanmar, and Vietnam (and other targeted countries).

Indicators

- 1) At least 4 training programs using other sources of fund, targeting participants mainly from Cambodia, Lao PDR, Myanmar, and Vietnam, are conducted during the project period.
- 2) The RCC website attains 1500 hits per year and 150 subscribers (100, 120 and 150 subscribers at the end of FY1, FY2, and FY3, respectively).
- 3) Readers of newsletters (by e-journal and printouts) are satisfied with the provided information.

The RCC is developing as a coordination center given the progress of the Project Outputs. The following training programs on HIV/AIDS were conducted by the AIHD after the start of the Project.

1. Study tour for Vietnamese participants funded by the Global Fund
2. Training Program for Thai resource persons on HIV/AIDS

However, these two training programs were neither conducted nor coordinated by the RCC due to the insufficient sharing of the Indicators among the AIHD and the Project.

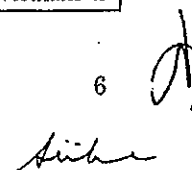
The progress of the Indicator 2 cannot be measured as the RCC website was just launched in August 2006. Regarding the Indicator 3, the RCC newsletter was assessed by the 47 respondents through the questionnaire survey and interviews as follows: [Very Good] 9; [Good] 37; [Fair] 1.

4-4. Achievement of Overall Goal

<OVERALL GOAL>

Human capacity for HIV/AIDS programs in Cambodia, the Lao PDR, Myanmar, and Vietnam is

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developed based upon each country's specific needs and situation with the proper utilization of resources from the RCC and the result is applied for HIV/AIDS programs.

Indicator

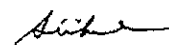
- 1) 70% of RCC ex-trainees in Cambodia, the Lao PDR, Myanmar, and Vietnam conduct at least one training course upon returning to their home countries.
- 2) Satisfaction, understanding, and application level of trainees of the training conducted by RCC ex-trainees

From the result of the questionnaire survey in the target countries, it seems that the effect of the RCC's training has been already spreading to the non-target group of the Project. Though the result should be verified through monitoring visits to the target countries, the first Indicator of the Overall Goal stands a good chance of being achieved even within the project period. Major findings from the questionnaire survey are as follows.

- 69% of ex-TOT participants answered that they have conducted training programs after returning to their home countries.
- 94% of ex-TOT participants answered that they are in the relevant position to conduct training
- 84% of ex-TOT participants answered that they have shared the training result with relevant persons through the seminar, workshop and sharing with their boss and colleagues.
- 81 % of ex-TOT participants and 97 % of respondents from the organizations which ex-TOT belong to answered that the knowledge and skills acquired through the TOT course are useful in their work.
- 76% of respondents from the organizations which ex-TOT belong to answered that the effect of the TOT course can have a positive impact on national or local policy, programs, and projects on HIV/AIDS.

5. Revision of the PDM

During the workshop conducted on 21-22 September 2006, participants, including Director of the AIHD, Head of the RCC, representatives from the JICA Thailand Office, representatives from TICA, and Japanese experts agreed to make the following revisions to the PDM.



		BEFORE THE REVISION	AFTER THE REVISION	REASONS OF REVISION
1	Indicator 1 of Project Purpose	At least 4 training programs using other sources of funds, targeting participants mainly from Cambodia, Lao PDR, Myanmar, and Vietnam, are conducted during the project period.	1. RCC has <u>regular contact</u> with <u>xxx</u> concerned organizations, including donor agencies, in Cambodia, Lao PDR, Myanmar, Vietnam, and Thailand *1. 2. <u>%</u> of organizations mentioned above recognize the RCC as an <u>effective coordination center</u> for HIV/AIDS*2.	<ul style="list-style-type: none"> • 2 training programs on HIV/AIDS using other funds were conducted by the AIHD without the coordination by the RCC due to the insufficient sharing of the Indicator among the AIHD and Project. • Acquisition of external funds largely depends on external factors. • The revised indicators represent the recognition of the concerned organizations, including donor agencies, on the RCC more appropriately.
2	Indicator 4-3 Output 4	3 Resource Persons, including AIHD staff, registered in the RCC's database are sent to other HIV/AIDS related programs annually coordinated by the RCC.	3 Resource Persons, including AIHD staff, registered in the RCC's database are sent to <u>and satisfied by (added)</u> other HIV/AIDS related programs annually coordinated by the RCC.	The performance of the Resource Person coordinated by the RCC should be assessed.
3	Activity 4-8	To utilize ex-trainees trained in Thailand, including AIHD alumni, as future trainers for HIV/AIDS training courses.	Deleted	The activity was designed to support the previous Indicator 1 of the Project Purpose, which was revised in the evaluation study.
4	Activity 4-9	To support HIV/AIDS programs in Cambodia, the Lao PDR, Myanmar, Vietnam, and Thailand through consultation and the use of short-term local experts.	To support HIV/AIDS programs in Cambodia, the Lao PDR, Myanmar, Vietnam, <u>through the monitoring visit to ex-TOT participants (changed)</u> .	Dispatch of the third country experts (Thai) to target countries is not possible in the framework of JICA's regional cooperation project.
5	Output 3, Indicator 4-1 Activity 4-2 Activity 4-3 Activity 4-7	AIHD alumni	RCC ex-TOT participants	Priority of the focal points is changed from AIHD alumni to ex-TOT participants due to the difficulty to develop formal communication line with the AIHD alumni.

*1, *2: It was agreed in the workshop that the Indicator must be clarified by the RCC Management Taskforce members and Japanese experts urgently. The revised PDM must be approved by JCC as soon as possible along with the revised PO. The Project should specify the means of verifications for the Indicator and the progress of the Project Purpose should be monitored according to the Indicator.

6. Evaluation Based on Five Evaluation Criteria

Result of the evaluation based on five evaluation criteria are described below.

6-1 Relevance

The Project is relevant particularly in terms of needs of target countries, cooperation policies of Thailand and Japan, strategy to effectively mitigate the impact of HIV/AIDS in the target countries, and dissemination of the project effect to the non-target group.

1) Relevance to the needs for HIV/AIDS program in the Cambodia, Lao PDR, Myanmar, and Vietnam

The project was formulated based on the needs from Cambodia, Lao PDR, Myanmar, and Vietnam identified in the JICA-ASEAN Regional Cooperation Meeting (JARCOM). Before and after the commencement of the Project, Japanese experts and concerned AIHD staff members surveyed the situation, training needs, trend of donor supports on HIV/AIDS in the target countries.

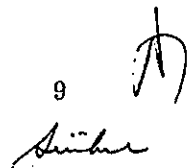
The questionnaire survey conducted during the evaluation study indicates that the 94% of ex-TOT participants regard the contents of the TOT course as relevant to the HIV/AIDS situation in their countries (on which 28% answered "highly relevant"). The survey result also shows that 76% of respondents from the organizations which ex-TOT participants belong to believe that the effect of the TOT course can give a positive impact on national or local policy, programs, and projects on HIV/AIDS.

2) Relevance to the priority of the cooperation policies of the Governments of Thailand and Japan

The Government of Thailand has been encouraging cooperative development with other countries, particularly with its neighboring countries. It has been also assisting HIV/AIDS programs in neighboring countries by utilizing its successful experience and resources in Thailand with the cooperation of donor agencies. In the interview with TICA during the evaluation study, consistency of the Project with the cooperation policy of TICA is supported by the following three reasons:

1. Consistency with TICA's policy to support neighboring countries
2. Consistency with TICA's priority on the health sector in the bilateral cooperation between Thailand and Japan
3. Consistency with TICA's policy to formulate the Project based on the needs of the recipient countries

Japan's Official Development Assistance Charter refers to the prevention and care of infectious diseases as a global issue to be tackled in a coordinated manner by the international community. The Charter also spells out an initiative to promote the South-South cooperation and regional cooperation in partnership with more advanced developing countries. Moreover, the Project is also consistent with JICA's strategy to support the development of the region in partnership with the Government of Thailand.



3) Effectiveness of the project strategy to mitigate the impact of HIV/AIDS in the target countries

The Project is regarded as part of the strategy of the RCC to mitigate the impact of HIV/AIDS through human capacity building. The strategy is effective in tackling the HIV/AIDS issue in the target countries where the needs for human capacity building to support the HIV/AIDS program is still high. The Project has been assisting RCC's networking activities with concerned organizations, including donor agencies, to better mobilize and effectively utilize resources allocated to HIV/AIDS programs.

4) Dissemination of the project effect to the non-target group

The Project is designed to conduct TOT courses for persons working in HIV/AIDS programs in the target countries. The result of the TOT course is expected to be spread to the people working in the HIV/AIDS program in each target country. In the questionnaire survey conducted during the evaluation study, 69% of ex-TOT participants answered that they have conducted training programs after returning to their home countries. The result of the questionnaire survey also shows that 84% of ex-TOT participants have shared the training contents with concerned persons through seminars, workshops and interaction with their boss and colleagues.

6-2. Effectiveness

1) Prospects of achieving the Project Purpose

The RCC is developing as a coordination center given the progress of the Project Outputs. Though there are delays in some activities, particularly activities under Project Outputs 3 and 4, the delays can be recovered with efforts of the concerned persons in the second half of the Project. As explained in the Section 5 of this report, one of the three indicators for the Project Purpose is being revised after the evaluation study and the achievement of the indicator is not measured during this evaluation study. Another indicator regarding the number of hits to RCC's website cannot be measured as the website was launched only one month prior to the evaluation study.

2) Contributing and constraining factors for the achievement of the Project Purpose

The Project Purpose can be achieved by the successful production of 4 Project Outputs. At the time of the Mid-Term Evaluation, the quality of the TOT course conducted by the RCC is high as can be seen from the satisfaction of the participants (Output 2). However, the achievement of this Output would not lead to the achievement of the Project Purpose without the production of other Outputs. So far, the progress of the Output 3 and 4 are weak due to the problems mentioned in the Section 4-2 of this report. The progress of the Output 3 and 4 should be prioritized and carefully monitored in the second half of the Project.

3) Changes in important assumptions

There are following three important assumptions to achieve the Project Purpose. All assumptions

remain relevant to the project.

- Trainees from Cambodia, the Lao PDR, Myanmar and Vietnam are appropriately selected by counterpart organizations.
- The majority of ex-trainees in Cambodia, the Lao PDR, Myanmar, and Vietnam remain in a position to provide training on HIV/AIDS.
- National policies of Cambodia, the Lao PDR, Myanmar, and Vietnam for human capacity building for HIV/AIDS are not significantly changed in the near future.

At the first TOT for Vietnamese participants, some of the expected participants, who were supposed to be selected by MOH, were not selected, as the Ministry of Planning and Investment (MPI) was in charge of the selection of participants. The Project and the JICA Vietnam Office may need more coordination with Vietnamese authorities for the selection of participants.

Judging from the result of the questionnaire survey, the second important assumption has been satisfied as 94% of ex-TOT participants answered that they were in the relevant position to conduct training.

Regarding the third important assumption, national policies of the target countries for human capacity building for HIV/AIDS have not significantly changed since the time of the project formation.

4) Revision of Indicators

As mentioned in the Section 5 of this report, concerned persons of the Project agreed in the workshop conducted during the evaluation study to revise the Indicator 1 of the Project Purpose. Indicator should be clarified by the RCC Management Taskforce members and Japanese experts urgently. The revised PDM must be approved by JCC members as soon as possible along with the revised PO.

6-3. Efficiency

1) Achievement of the Project Outputs

Achievements of each Output are examined in the Section 4-2 of this report. Outputs 3 and 4 are weak due to the delay in the activities under each Project Output.

2) Contributing and constraining factors for the achievement of the Project Outputs

Progress of the Output 3 has been delayed mainly due to the delay in the installation of server, technical difficulties, and weak coordination. There are also factors that have inhibited the achievement of the Output 4, such as the difficulty to develop the focal points in the target countries and insufficient understanding and sharing of the activities under Output 4 among concerned persons.

In the interview with concerned AIHD personnel, RCC staff, and Japanese experts, the appropriate project management by the Head of the RCC was widely recognized as a major contributing factor for the progress of the Project Outputs. There is a good system to make decision, conduct meeting, and

develop minutes of the meetings. All the relevant issues are discussed and decided at the RCC Management Taskforce Meeting.

The employment and high commitment of the project staff could be another contributing factor for the progress of the Project Outputs, particularly for the Output 2. However, the employment of the project staff may have weakened the cooperation between the RCC and concerned AIHD sections. The progress of the project activities has been shared with other AIHD sections in the RCC Management Taskforce meeting for cooperation and coordination. However, there is a concern about the coordination and collaboration between the RCC and Training Section of the AIHD for the implementation of the training.

3) Quality, quantity, and timing of inputs

Quality, quantity, and timing of inputs both from the Thai and Japanese sides have been generally appropriate as examined in the Section 4-1. The delay in the installation of the computer server was the major constraint for the development of the website and database, and eventually for the progress of the Outputs 3.

Training expense for a multinational training course was jointly funded by TICA and JICA as planned. The mechanism for the cost sharing can be a model for other regional cooperation projects jointly supported by TICA and JICA under Japan-Thailand Partnership Program Phase 2 (JTPP2).

4) Changes in important assumptions

There are following two important assumptions to achieve the Project Outputs. Both are still relevant to the Project and have been met.

- Policy and structure of the cooperation to the RCC by project partners, such as TICA, the Ministry of Public Health (MOPH), counterpart organizations and the JICA country offices in Cambodia, the Lao PDR, Myanmar, and Vietnam, do not change significantly
- Project partners, such as TICA and MOPH and, counterpart organizations, and the JICA country offices in Cambodia, the Lao PDR, Myanmar, and Vietnam, continue to cooperate with the project during the project period.

6-4. Impact

1) Prospects of achieving the Overall Goal

Judging from the result of the questionnaire survey conducted during the evaluation study, prospects of achieving the Overall Goal are high as explained in the Section 4-4 of this report.

2) Other impacts

The Project can contribute to the reduction of the HIV infection rate and to the improvement of the

quality of life of persons living with HIV/AIDS and their families in the long run. As mentioned before, according to the questionnaire survey conducted during the evaluation study, 76% of respondents from the organizations which ex-TOT belong to believe that the effect of the TOT course can give a positive impact on national or local policy, programs, and projects on HIV/AIDS in their countries.

3) Changes in important assumptions

There is a following important assumption to achieve the Overall Goal. It is still relevant to the project and has been met.

- Health technology, such as the development of a vaccine, on HIV/AIDS, does not significantly change in the near future.

6-5. Sustainability

1) Institutional aspect

As the RCC has been established as part of the AIHD, the RCC will be sustained in the AIHD after the completion of the Project. The AIHD, with more than 20 years of operational experience, has the necessary institutional capacity to maintain the RCC as a section in the organization. The vision of the AIHD to maintain the RCC as a coordination center, or a window of the AIHD, on the HIV/AIDS issue was confirmed in the evaluation study. As the RCC has been managed by the RCC staff led by the Head of the RCC, the RCC can be institutionally maintained without the technical support of the Japanese experts after the completion of the Project.

There is a concern about the position of the RCC in the AIHD, particularly about the demarcation of the roles between the RCC and the Training Section. During the workshop in the evaluation study, the role of the RCC was defined as a coordination center on HIV/AIDS in the AIHD, rather than a training center. However, the demarcation of the roles and coordination between the RCC and the Training Section to conduct the training programs need further clarification.

The activities to strengthen the relationship with relevant organizations, including donor agencies, should be conducted dynamically in order to ensure the maintenance of the function and scale of the RCC, and eventually to sustain the project effects.

2) Financial aspect

As mentioned above, the RCC has been established and will be maintained as a section of the AIHD. The management cost of the RCC, including the salary of the RCC staff, has been borne by the AIHD. In order to enhance the relevance for the AIHD to maintain the functions and scale of the RCC, the RCC should start to conduct activities by using other source of fund during the project period.

One of the Indicators of the Project Purpose was set to measure the achievement of the Project by the number of training courses using other funding sources. The indicator is being revised according to

discussions during the evaluation study to measure the achievement of the Project by the recognition of concerned organizations, including donor agencies, of the RCC as an effective coordination center on HIV/AIDS. The revised indicator will indicate the sustainability of the RCC more comprehensively.

3) Technical aspect

Techniques have been transferred from Japanese experts to the RCC staff mainly by the OJT. The Head of the RCC identifies the capacity of the RCC staff has been improving by the coaching of Japanese experts in the field of the project management, development of guidelines, development of channels of communication, networking, and others. RCC staff also feels the enhancement of their capacity in the fields, such as skills for problem analysis and project design, web design and management, development of public relations material (newsletter), English document production, coordination among many stakeholders, and knowledge on HIV/AIDS.

The transferred techniques will be gradually spread in the AIHD through the collaboration between the RCC and other sections. The techniques transferred to the Technical Coordinator of the RCC Project, who has been working closely with the Japanese experts, will be transferred to the AIHD as the person is expected to be transferred to the AIHD before the end of the Project.

Activities under the Output 3 and 4 have been delayed and need to be more focused in the second half of the project period. Expectation of the AIHD to the Japanese experts to support the achievement of these Outputs is high.

7. Conclusion

Although some project activities have been delayed and progress of the Project Outputs is uneven as examined above, it can be said that the Project is on the right track. The evaluation team concludes that the Project Purpose can be achieved by the end of the Project.

8. Recommendations

As the result of the study, the evaluation team made the following recommendations to concerned AIHD staff members, including RCC staff members, and Japanese experts dispatched to the Project.

8-1. Revision of the PDM and PO

As noted in the Section 5 of this report, the revision of the PDM was agreed during the workshop by the participants including the evaluation team and relevant project stakeholders, such as the Director of the AIHD, Head of the RCC, and Japanese experts. It was also agreed in the workshop that the Indicator 1 of the Project Purpose must be clarified by the RCC Management Taskforce members supported by Japanese experts urgently. The revised PDM and PO should be approved by the JCC as soon as possible. The Project also should specify the means of verifications for the Indicator and the progress of the Project Purpose should be monitored according to the Indicator.




8-2. Monitoring for the progress of the Project based on the PDM

The RCC Management Taskforce and JCC have been functioning to monitor the progress of the Project on a monthly basis and a bi-annual basis, respectively. It is recommended to monitor the progress of the Project based on the PDM to understand the progress of the Project more comprehensively and consistently.

8-3. Further clarification of the coordination and collaboration mechanism for the RCC and the Training Section

The evaluation team recommends further clarification of the coordination and collaboration mechanism between the RCC and Training Section for conducting training programs on HIV/AIDS. As agreed in the workshop, coordination and collaboration mechanism, including the work process and responsibility of the Training Section staff, RCC staff, and RCC Project staff, should be discussed in the RCC Management Taskforce meeting. It is considered that this process is necessary to avoid the confusion for the training management and to promote the technical transfer to the concerned AIHD staff.

8-4. Communication between concerned persons

From the interview and observation, the evaluation team did not find difficulties in communication and cooperation among the concerned persons, including Japanese experts. However, some relevant issues, such as the understanding for the Project Purpose and indicators, role of the RCC in the AIHD, and collaboration between the RCC and the Training Section, had not been discussed sufficiently and remained unclear at the time of the Mid-Term Evaluation. The evaluation team recommends concerned persons, including Japanese experts, to have more frequent and intensive discussion on relevant project issues among key stakeholders for prompt actions in the limited time of the project period.

8-5. Sharing of project information with the JICA Country Offices in the target countries.

In the questionnaire survey with the JICA Country Offices in the target countries, there was a request to the Project to provide more project information, including progress reports and report of relevant internal meetings. The Project is well aware of the importance of the communication and information sharing with the JICA Country Offices to implement project activities effectively and efficiently. The effort to share the project information should be maintained.

8-6. Strengthening of human capacity building of the concerned AIHD staff

Human capacity building for concerned AIHD staff, particularly for RCC staff, should be promoted for the implementation of the project activities and organizational strengthening of the RCC. The enhancement of the technical capacity for the design and maintenance of the website is considered as one of the prioritized fields for the capacity building. The evaluation team recommends the Project



Director, Head of the RCC, Manager of the RCC, and Japanese experts to review and implement the human capacity building plan with necessary revisions.

8-7. Strengthening of networking

Strengthening of the networking with concerned organizations, including donor agencies, in the target countries and Thailand should be prioritized in the second half of the project period to make the RCC recognized as an effective coordination center on HIV/AIDS. The activities to strengthen the relationship with concerned organizations should be conducted dynamically within the limited time of the project period. It is recommended by the evaluation team to utilize concerned AIHD staff, particularly RCC staff and RCC Management Taskforce members, for the networking activities, such as more participation to the related meeting and workshop.

8-8. Clarification of selection, approach, and expected role of the focal points

As explained in the Section 4-2 of this report, the priority of the focal points has been changed from AIHD alumni to ex-TOT participants of the RCC in the counterpart organizations. The selection, approach, and expected role of the focal points should be clarified as soon as possible based on the discussion with the counterpart organizations in the target countries.

8-9. Monitoring for the performance of ex-TOT participants

Monitoring of ex-TOT participants is very important to sustain the project effect. More monitoring visits are also expected from the ex-TOT participants and concerned organizations in the target countries, including the JICA Country Offices. Many organizations conduct the training and leave the trainees without the follow-up. The RCC can intensify the monitoring for the performance of ex-TOT participants with the understanding and cooperation with the JICA Country Offices.

8-10. Improvement of the quality of the Website and Newsletter

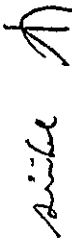
Through the questionnaire survey and interview with ex-TOT participants and concerned organizations, expectations on the RCC's website and newsletter, and suggestions to improve the newsletter were collected. These expectations and suggestions should be utilized to improve the quality of the website and newsletter.

Achievement Grid

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Category	Contents	Verifiable Indicators	Accomplishment
<p>Overall Goal</p>	<p>Human capacity for HIV/AIDS programs in Cambodia, the Lao PDR, Myanmar, and Vietnam is developed based upon each country's specific needs and situation with the proper utilization of resources from the RCC and the result is applied for HIV/AIDS programs</p>	<p>1. 70% of RCC ex-trainees in Cambodia, the Lao PDR, Myanmar, and Vietnam conduct at least one training course upon returning to their home countries</p> <p>2. Satisfaction, understanding, and application level of trainees of the training conducted by RCC ex-trainees</p>	<p><Result of Questionnaires> -69% of ex-TOT participants answered that they have conducted training programs after returning to their home countries. -94% of ex-TOT participants answered that they are in the relevant position to conduct training. (the rate is decreased in the questionnaire result from the organizations which ex-TOT belong to) -84% of ex-TOT participants answered that they have shared the training result with concerned persons through the seminar, workshop and interaction with their boss and colleagues. <Result of Questionnaires> -81 % of ex-TOT participants and 97 % of respondents from the organizations which ex-TOT belong to answered that the knowledge and skill acquired through the TOT course are useful for the daily work. -76% of respondents from the organizations which ex-TOT belong to believe the effect of the TOT course can give positive impact on national or local policy, programs, and projects on HIV/AIDS.</p>
<p>Project Purpose</p>	<p>The RCC functions and is recognized by concerned organizations as a coordination center to provide training, information, and the human resources needed to support human capacity building for HIV/AIDS programs in Cambodia, The Lao PDR, Myanmar, and Vietnam (and other targeted countries)</p>	<p>1. At least 4 training programs using other sources of fund, targeting participants mainly from Cambodia, Lao PDR, Myanmar, and Vietnam, are conducted during the project period</p> <p>2. The RCC web-site attains 1500 hits per year and 150 subscribers (100, 120 and 150 subscriber at the end of FY1, FY2, and FY3, respectively)</p> <p>3. Readers of newsletters (by e-journal and print-outs) are satisfied with the provided information</p>	<p>-Following training program on HIV/AIDS was conducted by the AIHD after the start of Project 1. Study tour for Vietnamese participants funded by the GFATM (coordinated by the Training Section) 2. Training Program for Thai resource persons on HIV/AIDS (coordinated by WHO Collaboration Center) However, these two training programs were neither conducted nor coordinated by the RCC due to the insufficient sharing of the Indicators among the AIHD and the Project. -The progress of indicator cannot be measured as the website of the RCC was just launched in the August 2006. -Expectation for the RCC website are collected from the Questionnaire result from ex-TOT participants, organizations which ex-TOT belong to, and lecturers of TOT courses. The information should be utilized for the future improvement of the website. The RCC newsletter was evaluated through the questionnaires as follows; <Very Good>: 9, <Good>: 37, <Fair>: 1 (total 47 respondents). There are suggestions from the respondents of the questionnaires on the improvement of the newsletter, such as more use of visual material to draw the interest of readers. The information collected from the Questionnaires result should be utilized for the future improvement of the newsletter.</p>

Output	1. Organization and management systems of the RCC are established and strengthened	1. All the criteria for Strengthening RCC's Management System are achieved	10 of 16 criteria set to strengthen the RCC's management system have been achieved or running as planned. The weak parts are the human capacity development of RCC and concerned AIHD staff and information management. The Project developed the human capacity development plan at the early stage of the Project by the cooperation with AIHD, but the implementation has been weak.
	2. Management system, curricula, and materials used in training programs are developed and improved in response to the specific country needs of Cambodia, the Lao PDR, Myanmar, and Vietnam	2. Trainees are satisfied with the training program, in terms of management, curricula, and materials	- Satisfaction of the ex-TOT participants on the course management is high. The average score on the course management for the first round of the country specific TOT course was 3.4 (full mark is 4). The score is in the increasing (3.08→3.25→3.67→3.4→3.65). 100% of respondents of the questionnaire from the organizations which ex-TOT participants belong to showed the satisfaction on the management of the TOT course. - RCC has been making effort to improve the quality of the TOT course. RCC conducted two workshops with lectures of TOT to review the program. - The approach of the RCC to design the training module based on the needs of the target countries is highly appreciated by the concerned organizations.
	3. Information concerning human resources, research, and relevant experiences on HIV/AIDS in Cambodia, the Lao PDR, Myanmar, Vietnam, and Thailand is collected, properly maintained, and disseminated to counterpart organizations, donor agencies, AIHD alumni, and other stakeholders	3-1 Database is developed and updated quarterly based on the information collected through networks and focal points in Cambodia, the Lao PDR, Myanmar, and Vietnam	Database has been developed gradually along with the development of website. It was just launched in the website in August 2006 and needs further improvement.
		3-2 Web-site is developed and regularly maintained	The launching of the Website was delayed from April 2005 to August 2006 due to reasons, such as delay in the installation of server and development of contents, and procurement of software. The person in charge at RCC is expected to upgrade and maintain the website. However, though the person can add and delete information, the technical capacity of the staff is not sufficient to deal with technical issues.
		3-3 500 copies of newsletters (by e journal and prints-outs) are distributed quarterly	Newsletters were produced quarterly. At this moment, over 100 copies are sent to the concerned persons by post. With the development of the web management system and e-mailing list (so far, about 150 persons are listed), it can be possible to reach the target indicator.

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<p>4. Human resources, information, and financial resources in Cambodia, the Lao PDR, Myanmar, Vietnam, and Thailand for HIV/AIDS programs are mobilized for more effective utilization through networking</p>	<p>4-1 Expected services are provided in Cambodia, Lao PDR, Myanmar, and Vietnam through Focal Points, such as AIHD alumni members</p>	<p>-Priority of the focal points has been changed from AIHD alumni to ex-TOT participants of RCC in the counterpart organization due to the difficulty to develop formal communication line with the AIHD alumni. The concept and approach for the focal points need to be further clarified. -According to the questionnaire result from the ex-TOT participants, only 39% of them keep in touch with RCC/AIHD. Less than half of ex-TOT participants have read the RCC newsletter.</p>
	<p>4-2 Targeted numbers of Resource Persons, including AIHD staff, are listed in the database of the RCC for each related field</p>	<p>The Project has listed the resource persons to meet the target for each related field. The registration of resource person to the RCC's database is under process.</p>
	<p>4-3 Resource Persons, including AIHD staff, registered in the RCC's database are sent to other HIV/AIDS related programs annually coordinated by the RCC</p>	<p>RCC has not sent Resource Persons to other HIV/AIDS related programs annually coordinated by the RCC.</p>

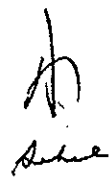
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Activity	Mark	Accomplishment
1-1. To develop an appropriate organization and management system for the RCC	◎	Organizational set-up of the RCC in AIHD was completed and management system of the RCC was developed at the early stage of the project
1-2. To convene RCC Management Taskforce meetings at least once a month to share the progress of the project	○	RCC Management Taskforce Meetings have been convened monthly as planned and minutes of the meeting has been maintained properly.
1-3. To convene Joint Coordination Committee meetings twice a year to share the progress of the project	○	JCC meetings have been convened twice a year basis as planned and minutes of the meeting has been maintained properly.
1-4. To convene International Consultative Committee meeting once a year to share the progress of the project	○	International Consultative Committee meetings were convened on June 2005 and May 2006
1-5. To develop an annual project work plan and budget	○	Annual project work plan for Japanese FY 2006 was developed. Plan for human capacity building of concerned AIHD staff, and networking are not in the plan.
1-6. To develop a human capacity building plan for staff involved in RCC activities in cooperation with other divisions of AIHD	◎	Human capacity building plan was developed in June 2005.
1-7. To enhance the technical and administrative capacity of staff involved in RCC activities based upon the human capacity building plan	△	PDM & PCM training for the RCC and AIHD staff was conducted. Other planned trainings have not been conducted. Human capacity building through OJT is going on.
2-1. To conduct a needs assessment survey in Cambodia, the Lao PDR, Myanmar, and Vietnam to establish training courses	○	Training needs in target countries were identified and the training courses were planned
2-2. To develop operational guidelines, including needs identification, preparation, and monitoring and evaluation components for each training course	◎	Operation guideline for training course was developed in June 2005.
2-3. To develop training curricula and materials	◎	Although the development of curricula and material were delayed due to the delay in the signing of M/M with target countries, curricula and material of each TOT course were developed in time.
2-4. To conduct at least 2 multi-national Training of Trainers (TOT) for participants from Cambodia, the Lao PDR, Myanmar, and Vietnam	○	First Multinational TOT course was conducted in July 2006.
2-5. To conduct at least 12 country-specific TOT (i.e. 3 programs each for Cambodia, Lao PDR, Myanmar, and Vietnam)	○	1st round for country specific courses for each target country were conducted during the first year of the Project as planned.
2-6. To annually review and revise existing training operational guidelines	○	Workshops with lecturers of TOT courses were conducted to improve the lesson plan of TOT. The result will be reflected in the revision of the guideline.
2-7. To annually review and revise existing training curricula and materials	○	Workshops with lecturers of TOT courses were conducted to improve the lesson plan of TOT. The result will be reflected in the revision of the curricula and material.
3-1. To develop strategies for establishing an appropriate management information system	◎	Management information system was developed at the early stage of the Project with the support of web designer.

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3-2. To collect information regarding human resources, research, and experiences on HIV/AIDS in Cambodia, the Lao PDR, Myanmar, Vietnam, and Thailand	○	Information has been collected from concerned persons/ organizations at various occasions, such as implementation of TOT course and ICC and visit to the target countries.
3-3. To develop a database for the promotion of the RCC, and for the dissemination of relevant information on HIV/AIDS in Cambodia, the Lao PDR, Myanmar, Vietnam, and Thailand	△	Database was developed and some parts of information have been published in the website. Database has been developed along with the website. Database development has been delayed due to the delay in the website development
3-4. To update the database on a quarterly basis	△	Database was just developed
3-5. To develop a home-page web-site for the promotion of the RCC, and for the dissemination of relevant information concerning HIV/AIDS in Cambodia, the Lao PDR, Myanmar, Vietnam, and Thailand	△	The website was published in August 2006. However, it is still not completed. The reasons of the delay are delay in installation of the server, installation of the software, and others
3-6. To establish an e-mail listing for the distribution of an HIV/AIDS e-journal	△	Development of e-mail listing is under process. So far, more than 150 e-mail addresses are listed.
3-7. To publish and distribute quarterly newsletters and annual reports of the RCC, by an e-journal and/or print-outs, for the promotion of the RCC and for the dissemination of relevant information concerning HIV/AIDS in Cambodia, the Lao PDR, Myanmar, Vietnam, and Thailand	○	Newsletters have been issued quarterly as planned. CD-Rom for the training reports for Japanese FY 2005 was developed and distributed to the concerned persons/ organizations. E-journals have not been issued due to the delay in the development of web-sites.
3-8. To disseminate useful experiences and information about the RCC in journals and other media	○	Information of RCC have been published in journals, such as publication of Mahidol University and WHO.
4-1. To collect and analyze information, strategies, and plans of donor agencies and the governments of Cambodia, the Lao PDR, Myanmar, and Vietnam with respect to human capacity building on HIV/AIDS	○	Information has been collected from concerned persons/ organizations at various occasions, such as implementation of TOT courses ICC and visit to the target countries.
4-2. To develop focal points, including the use of AIHD alumni, in Cambodia, the Lao PDR, Myanmar, and Vietnam	△	Priority of the focal points has been changed from AIHD alumni to ex-TOT participants of RCC in the counterpart organization due to the difficulty to develop formal communication line with the AIHD alumni. The concept and approach for the focal points need to be further clarified.
4-3. To conduct an annual review workshop to strengthen the regional network on HIV/AIDS, and to share project outcomes and progress with representatives from Cambodia, the Lao PDR, Myanmar, Vietnam, Thailand, donor agencies, AIHD alumni, JICA projects, and other concerned individuals	△	During the monitoring visit to the Lao PDR, a workshop was conducted with ex-TOT participants to share the progress
4-4. To study and utilize existing networks, including ex-trainees in Cambodia, Lao PDR, Myanmar, and Vietnam trained in Thailand working in HIV/AIDS programs	○	Existing network has been studied by utilizing various occasions, such as implementation of TOT courses and ICC and visit to the target countries.
4-5. To convene an official meeting with Department of Disease Control / MOPH and TICA at least twice a year before the scheduled JCC meeting	○	Meetings with TICA and MOPH have been conducted according to the necessity. There are no difficulty in communication between RCC and concerned organizations.
4-6. To attend meetings, conferences, and seminars organized by donor agencies	○	RCC staff has attended some meetings, conference, and seminar, such as International conference on HIV/AIDS



4-7. To promote AIHD alumni networking, by RCC staff, during on-site visits to Cambodia, the Lao PDR, Myanmar, and Vietnam	△	There are contacts with some of AIHD alumni during the monitoring visit. But, it is not established as a network yet.
4-8. To utilize ex-trainees trained in Thailand, including AIHD alumni, as future trainers for HIV/AIDS training courses	△	There are contacts with ex-trainees trained in Thailand, including AIHD alumni. However, RCC has not utilize them as trainers for HIV/AIDS training courses
4-9. To support HIV/AIDS programs in Cambodia, the Lao PDR, Myanmar, Vietnam, and Thailand through consultation and the use of short-term local experts (i.e. for externally coordinated and funded programs)	△	The Project has provided consultation during the monitoring visit and ICC. However, there has been no cases to support the program by the use of short-term local experts.

*1: ◎Completed, ○ on schedule, △ delayed, X seriously delayed/ not conducted

Input from Japanese and Thai sides

Inputs		Accomplishment
J-1: Long-term expert	J-1-1: Amount of experts (3 long-term experts)	3 experts as planned - Chief Advisor/ Regional Cooperation - HIV/AIDS Human Resource Development Advisor - Cooperation Management Advisor
J-2: Equipment	J-1-2: Quality and Timing	Dispatch of the Chief Advisor was delayed from August to December 2005. Two Japanese Experts jointly took the role of the Chief Advisor during the absence
	J-2-1: Installation of equipment	All the equipment was delivered and installed as planned
	J-2-2: Quality and Timing	Delivery and installation of the computer server was delayed. There has been a minor technical problem in the bus.
J-3: Local Expenditure	J-3-1: Local expenditure	Following local expense has been borne by the Japanese side JFY 2005: 6,458,736 Thai Bahts JFY 2006(until August): 1,783,988 Thai Bahts 2 long-term consultants and 1 secretary are employed as planned
T-1: Personnel	T-1-1: Amount of personnel	5 personnel is assigned for the Project. The allocation of AIHD personnel for RCC has been reduced from 6 to 5 (one person has been moved to the training section). As the work efficiency of the RCC has been improved by the re-allocation of the room in AIHD to make RCC staff work in one room, the reduction of the staff has not been affecting the operation of RCC.
	T-1-2: Quality and Timing	Appropriate
T-2: Facilities	T-2-1: Training facilities	Appropriate
	T-2-2: Project office space and facilities	Appropriate
T-3: Total expense	T-3-1: Administrative and operational expenses	Administrative and operational expense for RCC was supported by AIHD
	T-3-2: Training expense for multinational TOT	Training expense for multinational training was jointly funded by TICA and JICA as planned.

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Implementation Process Grid

version: 060927

Category	Questions	Accomplishment
Progress of Activities	Have the activities been conducted as planned?	Some activities have been delayed, particularly activities under Output 3 and 4 (see the detail in the Achievement Grid)
	What have been the major constraints to the achievement of activity targets?	There are some constraints for the delay of activities, such as poor coordination and lack of appropriate skill for web design, database and procurement of computer server, and difficulty to establish focal points (see the detail in the Achievement Grid).
	What have been the major factors contributing to the achievement of the activity targets?	From the interview with concerned persons in AIHD and Japanese experts, some factors were raised, such as function of the RCC Management Taskforce and good project management by the Head of the RCC.
Method for Technology Transfer	Is the method of technology transfer appropriate?	Technologies have been transferred to the RCC staff mainly by OJT. The Head of the RCC identifies the capacity of the RCC staff has been improving by the coaching of Japanese experts in the field of the project management, development of guideline, development of the channel of communication, networking, and others. RCC staff also feel the enhancement of their capacity.
	Are there any constraints to transferring technology to concerned AIHD?	The transferred technologies are expected to spread gradually among AIHD with the collaboration between RCC and other sections in AIHD.
	Is the monitoring system appropriate?	Appropriate. The RCC Management Taskforce is responsible for monitoring of project activities and progress, as well as identifying constraints and problems that need to be resolved. The JCC is responsible for monitoring of overall project performance on a bi-annual basis. Both of Taskforce and JCC has been functioning as expected.
	How have the project framework and activities been changed?	The project framework and activities have not been changed.
	How have the important assumptions mentioned in the PDM affected the project implementation? How has the project adjusted to them?	The project implementation has not been affected significantly by the assumptions mentioned in the PDM.
	Is the follow-up of the ex-TOT participant appropriate?	The monitoring of the ex-TOT participants is still in the early stage. From the questionnaire result from the ex-TOT participants, 45% of the respondents, have received the follow-up visit by the RCC staff and 97% of them showed their satisfaction with the follow-up visit. There are strong demands for the follow-up by ex-TOT participants, counterpart organization and JICA offices in the target countries.

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Project Management	Is the decision making process of project management appropriate?	There is a clear decision making process for the project management in the RCC. There is a good system to conduct meeting and develop minutes of the meeting. All the relevant issues are discussed and decided at the RCC Management Taskforce Meeting.
	Do Japanese experts and counterparts have difficulties in communicating and cooperating?	From the interview and observation, the evaluation team did not find difficulties in communication and cooperation among the concerned persons, including Japanese experts. However, some relevant issues, such as the understanding for the Project Purpose and indicators, role of the RCC in the AIHD, and collaboration between the RCC and the Training Section, had not been discussed sufficiently and remained unclear at the time of the Mid-Term evaluation study.
	Do the project and concerned JICA country offices have difficulties in communicating and cooperating?	There are no difficulties between the Project and JICA country offices in communicating and cooperating. The Project is well aware the importance of the communication. There are request from the JICA Country Office in the questionnaire survey to provide more information of the RCC project, including progress and report of internal meetings.
	Do the project and counterpart organizations in target countries have difficulties in communicating and cooperating?	The study did not identify difficulties in communicating and cooperation between the Project and counterpart organizations in target countries.
	Do the project and concerned organizations in Thailand, such as MoPH, have difficulties in communicating and cooperating?	The study did not identify difficulties in communicating and cooperating between the project and concerned organization.
	What have been the major constraints in managing the project?	There are no major constraints in managing the Project.
	What have been the major factors contributing to the good management of the project?	From the interview with concerned persons in AIHD and Japanese experts, some factors were identified, such as function of RCC Management Taskforce and good project management by the Head of the RCC.
Maintenance of equipments	Are the project equipments used and maintained properly?	Installation of the computer server was delayed. Project equipments are utilized and maintained properly.
Ownership of AIHD	Is the cooperation and coordination between RCC and other sections in the AIHD appropriate?	The progress of the project activities has been shared with other sections in the RCC Management Taskforce meeting for cooperation and coordination. There is a concern about the cooperation between RCC and the Training Section of the AIHD for the implementation of the training.
	Does the RCC Management Taskforce meeting function as planned?	RCC Management Taskforce has been functioning as planned.

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Evaluation Grid

version: 060927

Five Criteria	Evaluation Questions		Evaluation
	Question	Sub-question	
Relevance	Does the project meet the needs of target countries and societies?		<p>- The Project was designed to meet the needs of Cambodia, Laos, Myanmar, and Vietnam identified in the JICA-ASEAN Regional Cooperation Meeting (JARCOM).</p> <p>-The Project surveyed the situation, training needs, trend of donor supports on HIV/AIDS in the target countries before and during the project period.</p> <p>- The Project is designed to provide country specific training programs and relevant information to meet the needs of people working for HIV/AIDS program in target countries.</p> <p>- 94% of ex-TOT participants answered in the questionnaire survey that they the contents of the TOT course were relevant with HIV/AIDS situation in the country (on which 28% answered highly relevant).</p> <p>-Needs for capacity building of concerned AHD staff, another target group of the Project, are reflected in the project activities under the output 1.</p>
	Does the project meet the needs of target groups?		<p>-The governments of target countries have been putting higher priority on the human capacity building in the HIV/AIDS programs. The Project strategy to strengthen the RCC to support the human capacity building at target countries is consistent with the HIV/AIDS policies of these countries.</p> <p>-76% of respondents from the organizations which ex-TOT participants belong to answered that the effect of the TOT course can give positive impact on national or local policy, programs, and projects on HIV/AIDS.</p>
	Is the project consistent with the development policy of target countries?	Is the project consistent with the policies on HIV/AIDS of Cambodia, Laos, Myanmar, and Vietnam?	<p>- The Government of Thailand has been encouraging cooperative development with other countries, particularly with its neighboring countries. It has been also assisting HIV/AIDS programs in neighboring countries by utilizing successful experience and resource in Thailand with the cooperation of donor agencies.</p> <p>- In the interview with TICA during the evaluation study, consistency of the Project with the cooperation policy of TICA was supported by the following 3 reasons;</p> <ol style="list-style-type: none"> 1. Consistency with TICA's policy to support neighboring countries 2. Consistency with TICA's priority on health sector in the bilateral cooperation between Thailand and Japan 3. Consistency with TICA's policy to formulate the Project based on the needs of the recipient countries
		Does the project address the key aid issues of Japan?	<p>Japan's Official Development Assistance Charter refers to the prevention and care of infectious diseases as a global issue to be tackled in a coordinated manner by the international community. The Charter also spells out an initiative to promote the South-South cooperation and regional cooperation in partnership with more advanced developing countries.</p>
		Is the project consistent with Japan's foreign aid policy and JICA's plan for country-specific program ?	<p>The project is consistent with JICA's strategy to support the development of the region by the partnership with the Government of Thailand.</p>

<p>Is the project appropriate as a strategy that will be effective for issues in the HIV/AIDS sector in the region?</p>	<p>Is the selection of project approach appropriate?</p>	<p>The Project is regarded as a part of the strategy of the RCC to mitigate the impact of HIV/AIDS through the human capacity building. The strategy is effective to tackle with HIV/AIDS issue in the target countries where the needs for human capacity building to support the HIV/AIDS program is still high.</p>
<p>What synergy effects can be generated from the cooperation with other donors?</p>	<p>Is there possibility that the effect of the project spreads to non-target group?</p>	<p>The Project has been assisting the RCC to develop networking activities with concerned organizations, including donors, to better mobilize and effectively utilize resources allocated to HIV/AIDS programs. More than half of the counterpart organizations and JICA offices in the target countries answered in the questionnaire that the TOT of the RCC generates the synergic effects with programs supported by other donors.</p>
<p>Is the selection of target group appropriate?</p>	<p>Does Japan have a technological advantage?</p>	<p>The target groups of the Project are AIHD staff working for RCC and people working with HIV/AIDS programs in Cambodia, the Lao PDR, Myanmar, and Vietnam. As the Project aims to organizational set-up of the RCC, the AIHD staff working for the RCC is an appropriate target of the project as well as the people working with HIV/AIDS programs in target countries.</p>
<p>Are there any significant changes in the environment in terms of socio-economic, policy, and others in relation to the project?</p>	<p>Are the project purpose and indicators shared clearly among AIHD, RCC, JICA, and TICA?</p>	<p>- The Project is designed to conduct TOT courses for persons working for HIV/AIDS programs in the target countries. It is expected the result of the TOT effectively spreads to the people working for HIV/AIDS program. - In the questionnaire survey conducted during the evaluation study, 69% of ex-TOT participants answered that they have conducted training programs after returning to their home countries. - Questionnaire result also shows that 84% of ex-TOT participants answered that they have shared the training result with concerned persons through the seminar, workshop and sharing with their boss and colleagues.</p>
<p>Effectiveness (expectancy)</p>	<p>Will RCC be able to conduct at least 4 training programs using other sources of fund, targeting participants mainly from target countries?</p>	<p>Japan has the accumulation of experience of providing technical assistance for the health care and HIV/AIDS program in Thailand and region</p> <p>The study did not identify significant changes in the environment in terms of socio-economic, policy, and others in relation to the project.</p> <p>Through the interview and workshop conducted during the evaluation study, it was identified that the project purpose and indicators had not been clearly shared among the concerned AIHD staffs and JICA experts.</p> <p>Following two training programs on HIV/AIDS was conducted by the AIHD after the start of Project. 1. Study tour for Vietnamese participants funded by the Global Fund (coordinated by the Training Section) 2. Training Program for Thai resource persons on HIV/AIDS (coordinated by WHO Collaboration Center) These two trainings were not conducted nor coordinated by the RCC due to the insufficient sharing of the indicators among AIHD and Project.</p>

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<p>Is there a good chance to achieve the project purpose?</p>	<p>Will RCC's web-site attain 1500 hits per year and 150 subscribers?</p>	<p>The launching of RCC's website was delayed due to the delay in procurement, technical difficulties, and weak coordination. The target can be achieved by considering the experience of JICA's similar regional cooperation project with the effort of the Project to publicize the site.</p>
<p>Are there any factors that inhibit the achievement of the project purpose?</p>	<p>Will readers of RCC newsletters be satisfied with the provided information</p>	<p>The RCC newsletter was evaluated through the questionnaire result from ex-TOT participants, organizations which ex-TOT belong to, and lecturers of TOT courses who read the newsletter, as follows; <Very Good>: 9, <Good>: 37, <Fair>: 1 (total 47 respondents). There are suggestions from the respondents of the questionnaires on the improvement of the newsletter, such as more use of visual material to draw the interest of readers. The information collected from the questionnaires study should be utilized for the future improvement of the newsletter.</p>
<p>Are the current project outputs sufficient to achieve the project purpose?</p>	<p>Can the current project outputs contribute to the achievement of the project purpose?</p>	<p>Although some project activities have been delayed and progress of the Project Outputs is uneven as examined above, it can be said that the Project is on the right track. The Project Purpose can be achieved by the end of the Project with the appropriate progress of the output 3 and 4.</p>
<p>Are the important assumptions to achieve the project purpose appropriate?</p>	<p>Are there any other outputs necessary to achieve the project purpose?</p>	<p>There is an appropriate logic to achieve the project purpose by the contribution of four project outputs; 1) Organization and management systems of the RCC, 2) Management system, curricula, and materials of TOT, 3) Collection, maintenance, dissemination of information, and 4) Mobilized and utilization of resources through networking. The issue was discussed and shared among relevant stakeholders in the workshop conducted during the evaluation study.</p>
<p>Are the important assumptions to achieve the project purpose appropriate?</p>	<p>Are the important assumptions relevant for the project?</p>	<p>The study did not identify any other outputs necessary to achieve the project purpose.</p>
<p>Are the important assumptions to achieve the project purpose appropriate?</p>	<p>Are the important assumptions satisfied?</p>	<p>There are following three important assumptions to achieve the project purpose. All are relevant. - Trainees from Cambodia, the Lao PDR, Myanmar and Vietnam are appropriately selected by counterpart organizations. - The majority of ex-trainees in Cambodia, the Lao PDR, Myanmar, and Vietnam remain in a position to provide training on HIV/AIDS. - National policies of Cambodia, the Lao PDR, Myanmar, and Vietnam for human capacity building for HIV/AIDS are not significantly changed in the near future.</p>
<p>Are the important assumptions to achieve the project purpose appropriate?</p>	<p>Are the important assumptions satisfied?</p>	<p>-At the first TOT for Vietnamese participants, some of the expected participants, who were supposed to be selected by MOH, were not selected, as Ministry of Planning and Investment (MPI) was in charge of the selection of participants. The project and JICA Vietnam Office may need more coordination with Vietnamese authorities for the selection of participants. - In the questionnaire study, 94% of ex-TOT participants answered that they are in the relevant position to conduct training. - National policies of Cambodia, the Lao PDR, Myanmar, and Vietnam for human capacity building for HIV/AIDS were not significantly changed.</p>

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Efficiency	Are the project outputs and indicators shared clearly among AIHD, RCC, JICA, and TICA?	<p>Are there any other important assumptions?</p> <p>The study did not identify any other important assumptions to achieve the project purpose.</p> <p>The project outputs and indicators are shared among the relevant stakeholders. The project outputs and indicators were reviewed by the relevant persons during the workshop conducted during the evaluation study.</p> <p><Output 1> Organization and management systems of the RCC have been established and strengthened mainly by OJT. Progress for some parts of organizational development, such as the development of management information system, has been delayed and need to be prioritized in the second half of the project.</p> <p><Output 2> Appropriate. Trainings have been conducted to meet with the annual plan despite the delay in signing of the MOM. Satisfaction of trainees is high.</p> <p><Output 3> Achievement has been weak due to the delay in activities. Website was finally launched in August 2006, and progress of the Output 3 is expected in the second half of the project period.</p> <p><Output 4> Though networking with relevant persons/ organizations has been strengthened through the project activities, such as the monitoring visit to the target countries, ICC, and others, achievement of the output 4 is still weak.</p>	<p>Are the project outputs and indicators shared clearly among AIHD, RCC, JICA, and TICA?</p> <p>Is the achievement of project outputs appropriate?</p>	<p>Are there any other important assumptions?</p> <p>The study did not identify any other important assumptions to achieve the project purpose.</p> <p>The project outputs and indicators are shared among the relevant stakeholders. The project outputs and indicators were reviewed by the relevant persons during the workshop conducted during the evaluation study.</p> <p><Output 1> Organization and management systems of the RCC have been established and strengthened mainly by OJT. Progress for some parts of organizational development, such as the development of management information system, has been delayed and need to be prioritized in the second half of the project.</p> <p><Output 2> Appropriate. Trainings have been conducted to meet with the annual plan despite the delay in signing of the MOM. Satisfaction of trainees is high.</p> <p><Output 3> Achievement has been weak due to the delay in activities. Website was finally launched in August 2006, and progress of the Output 3 is expected in the second half of the project period.</p> <p><Output 4> Though networking with relevant persons/ organizations has been strengthened through the project activities, such as the monitoring visit to the target countries, ICC, and others, achievement of the output 4 is still weak.</p>
	Are there any factors that inhibit the achievement of the project outputs?	<p>Are the important assumptions relevant for the project?</p> <p>There are following two important assumptions to achieve the project outputs. Both are relevant.</p> <ul style="list-style-type: none"> • Policy and structure of the cooperation to the RCC by project partners, such as TICA, Ministry of Public Health (MOPH), counterpart organizations and JICA country offices in Cambodia, the Lao PDR, Myanmar, and Vietnam do not change significantly • Project partners, such as TICA and MOPH and, counterpart organizations, and the JICA Country Offices in Cambodia, the Lao PDR, Myanmar, and Vietnam continue to cooperate with the project during the project period. 	<p>Are there any factors that inhibit the achievement of the project outputs?</p> <p>Progress of Output 3 has been delayed mainly due to the delay in the installation of server, technical difficulties, and weak coordination, are considered as main causes of the delay.</p> <p><Output 4> There are factors that inhibit the achievement of the output, such as difficulty to develop focal points in target countries and insufficient understanding and sharing of the activities under Output 4 among RCC staff, project staff and Japanese experts.</p>	<p>Are the important assumptions relevant for the project?</p> <p>There are following two important assumptions to achieve the project outputs. Both are relevant.</p> <ul style="list-style-type: none"> • Policy and structure of the cooperation to the RCC by project partners, such as TICA, Ministry of Public Health (MOPH), counterpart organizations and JICA country offices in Cambodia, the Lao PDR, Myanmar, and Vietnam do not change significantly • Project partners, such as TICA and MOPH and, counterpart organizations, and the JICA Country Offices in Cambodia, the Lao PDR, Myanmar, and Vietnam continue to cooperate with the project during the project period.
	Are the important assumptions to achieve the project outputs appropriate?	<p>Are the important assumptions satisfied?</p> <p>Both important assumptions have been met</p> <p><i>Anika</i></p>	<p>Are the important assumptions satisfied?</p> <p>Both important assumptions have been met</p> <p><i>Anika</i></p>	<p>Are the important assumptions satisfied?</p> <p>Both important assumptions have been met</p> <p><i>Anika</i></p>

	Are there any other important assumptions?	The study did not identify any other important assumptions to achieve the project outputs.
	Are the number of experts dispatched, their fields of expertise and timing of the dispatch appropriate?	Japanese experts have been dispatched according to the RD. Dispatch of the Chief Advisor was delayed from August to December 2005. Two Japanese Experts jointly took the role of the Chief Advisor during the absence.
	Are the employment of project staff appropriate?	Appropriate. However, the employment of the project staff may have weakened the cooperation between RCC and concerned section of AIHD, particularly training section.
	Are the allocation of counterpart personnel appropriate?	Counterpart personnel has been allocated appropriately according to the RD. The allocation of AIHD personnel for RCC has been reduced from 6 to 5 (one person has been moved to the training section). As the work efficiency of the RCC has been improved by the re-allocation of the room in AIHD to make RCC staff work in one room, the reduction of the staff has not been affecting the operation of the RCC.
	Are there changes in counterpart personnel?	No change in counterpart personnel. Though the deputy director of AIHD, who was one of the key person during the project formation and a RCC Management Taskforce member, was replaced at the beginning of the project, it has not been affecting the implementation of the project seriously.
	Are the type, quantity and timing of the installation of the equipment provided appropriate?	Project equipments have been provided as planned. Installation of the computer server was delayed. Project equipments are utilized and maintained properly.
	Are there any problems in terms of the quality, size and convenience of facilities?	There are no significant problems.
	Are the overall invested project costs appropriate?	The size of the project cost has been appropriate.
	Are the project costs shared by Japanese and Thai sides as planned?	Administrative and operational expenses for the project was shared by JICA and AIHD. Training expense for multinational training was jointly funded by JICA and TICA as planned.
	Are there prospects that overall goal will be achieved?	It can be said from the result of the questionnaire survey targeting ex-TOT participants and organizations which ex-TOT participants belong to that the prospects to achieve the overall goal is high (see the detail in the Accomplishment of Overall Goal in the Achievement Grid).
Impact (expectancy)	Are there any impeding factors to achieve the overall goals?	The study did not identify any significant impeding factors to achieve the overall goal.

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<p>Will the achievement of the project purpose be a direct factor to achieve the overall goal?</p>	<p>It is considered that the strengthening of the RCC as a coordination center for human capacity building for HIV/AIDS in target countries directly contributes to the development of human capacity building for HIV/AIDS programs in target countries.</p>
<p>Are the important assumptions to achieve the overall goal appropriate?</p>	<p>There is a following assumption to achieve the overall goal. It is relevant for the project.</p> <ul style="list-style-type: none"> • Health technology, such as the development of a vaccine, on HIV/AIDS does not significantly change in the near future <p>The important assumption has been met.</p>
<p>Are there other positive and negative impacts of the project, such as impact on gender issue? How the project can deal with the negative impacts?</p>	<p>The study did not identify any other important assumptions to achieve the overall goal.</p> <ul style="list-style-type: none"> - The project can particularly contribute to the reduction of HIV infection rate and to the improvement of the quality of life of PLWHAs and their families. - According to the questionnaire study conducted during the evaluation study, 76% of respondents from the organizations which ex-TOT belong to answered that the effect of the TOT course can give positive impact on national or local policy, programs, and projects on HIV/AIDS. - Though the ratio is widely different according to the contents of the program, 43% (39) of total participants (90) for TOT courses conducted during the first year of the project were female. It can be said that the project has gender consideration for the project impacts.
<p>Will the relevant laws, rules, regulations and other external factors become obstacles to the project?</p>	<p>The study did not identify relevant laws, rules, regulations and other external factors become obstacles to the project.</p>
<p>Does the AIHD have sufficient ownership for the RCC?</p>	<p>AIHD allocates the staff to the RCC appropriately. The RCC Management Taskforce, which is consist of relevant personnel of the AIHD including chiefs of concerned sections, has been functioning to monitor the progress and discuss relevant issues of the RCC with the strong commitment of members.</p>
<p>Does AIHD have sufficient organizational capacity to maintain the project effect?</p>	<p>The position of the RCC in the AIHD is not very clear. Particularly, demarcation between RCC and the training section is concerned. During the workshop conducted in the evaluation study, the role of the RCC was defined as a coordination center on HIV/AIDS, or window of the AIHD on HIV/AIDS issues, rather than a training center. Demarcation of responsibility and coordination between the RCC and the training section to conduct the training programs need further clarification.</p>
<p>Sustainability (expectancy)</p>	<p>The management plan for the RCC has not been developed.</p> <p style="text-align: right;"><i>Aike</i></p> <p style="text-align: right;"><i>E</i></p>

Does the AIHD have the enough financial source to maintain RCC	RCC will be maintained as a section of the AIHD. The management cost of the RCC, including salary of the RCC staff, has been borne by AIHD.
Can AIHD allocate personnel for RCC sufficiently?	It is expected the current level of workforce be allocated by the AIHD to maintain the RCC. Technical Coordinator of RCC Project is expected to be transferred to the AIHD 6 month prior to the completion of the project.
Does TICA continue to support the multinational training course?	It was understood by the interview with TICA that TICA may continue to support the multinational training course of the RCC.
Has the technical capacity of the counterpart personnel been improved?	Techniques have been transferred to the RCC staff mainly by OJT. The Head of the RCC identifies the capacity of the RCC staff has been improving by the coaching of Japanese experts in the field of the project management, development of guideline, development of the channel of communication, networking, and others. RCC staff also feel the enhancement of their capacity in the fields, such as, skill of problem analysis and project design, web design and management, development of public relation material (newsletter), English document production, coordination among many stakeholders, and knowledge on HIV/AIDS.
Will the transferred techniques spread in AIHD?	The transferred techniques will gradually shared in AIHD through the collaboration between RCC and other sections. The techniques transferred to the Technical Coordinator of the RCC Project, who has been working closely with the Japanese Experts, will be transferred to AIHD as the person is expected to be transferred to the AIHD before the end of the Project.
Are there any factors to impede the sustainability of the project?	The study did not identify factors to impede the sustainability of the Project. As mentioned above, the RCC has been established and will be maintained as a section of the AIHD. The management cost of the RCC, including the salary of the RCC staff, has been borne by the AIHD. In order to enhance the relevance for the AIHD to maintain the functions and scale of the RCC, the RCC should start to conduct activities by using other source of fund during the project period.

Can the project purpose be achieved with current conditions?	Although some project activities have been delayed and progress of the Project Outputs is uneven as examined above, it can be said that the Project is on the right track. The Project Purpose can be achieved by the end of the Project with the appropriate progress of the output 3 and 4.
Do the planned inputs (quantity and quality) need to be adjusted?	The evaluation study did not find significant necessity to adjust the inputs.

Need for adjustments (to be considered based on the evaluation result)



<p>Is it necessary to adjust the project input, activities, outputs, and indicators?</p>	<p>Do the planned activities need to be adjusted?</p> <p>Do the planned outputs need to be adjusted?</p> <p>Do the indicators of the project purpose and outputs need to be adjusted?</p>	<p>The adjustment of the project activities was discussed in the workshop conducted during the evaluation study.</p> <p>The study did not find necessity to adjust the outputs.</p> <p>It was decided by participants of the workshop, including evaluation team members, held during the evaluation study to revise the Indicator 1 of the Project Purpose. The detail of the Indicator 1 will be developed by the RCC Management Taskforce members and Japanese experts immediately after the evaluation study.</p>
<p>Are there any new important assumptions that influence the project?</p>		<p>The study did not find any new important assumptions that influence the project.</p>
<p>How problems and risks identified at the time of ex-ante evaluation study have been changed?</p>		<p>At the time of ex-ante evaluation study, there was a concern regarding the coordination and cooperation with concerned organizations and projects, particularly those who provide similar services with the RCC. The project has been trying to maintain the sound relationship with concerned organizations by frequent and regular interactions.</p>
<p>What issues remain to be addressed in the future?</p>		<ul style="list-style-type: none"> - Revision of The PDM and PO - Monitoring for The progress of The Project based on The PDM - Further clarification of The coordination and collaboration mechanism for The RCC and The Training Section - Communication between concerned persons - Sharing of Project information with The JICA Country Offices in The target countries - Strengthening of human capacity building of The concerned AIHD staff - Strengthening of networking - Clarification of selection, approach, and expected role of The focal points - Monitoring for The performance of ex-TOT participants - Improvement of The quality of The Website and Newsletter

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