

**Ex-post Evaluation Study on  
The Project for Strengthening of Reproductive  
Health Education  
(TUNISIA)**

**Conducted by: JICA Tunisia Office**

**Final Report**

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# Map of Tunisia



## TABLE OF CONTENTS

1.	Introduction.....	5
1.1.	Project Background .....	5
1.2.	Project overview .....	5
1.3.	Study Objectives.....	5
1.4.	Scope of work.....	6
1.5.	Evaluation team .....	6
1.6.	Study period.....	6
2.	Evaluation study approach.....	7
2.1.	Methodology.....	7
2.2.	Logical framework.....	7
2.3.	Implementation.....	7
3.	Results .....	8
3.1.	Impact of the Project.....	8
3.1.1.	Policy aspects .....	8
3.1.2.	Technological aspects.....	8
3.1.3.	Environmental aspects.....	9
3.1.4.	Socio-cultural aspects .....	9
3.1.5.	Institutional and management aspects .....	10
3.1.6.	Economic and financial aspects.....	11
3.2.	Sustainability of the project.....	12
3.2.1.	Policy aspects .....	12
3.2.2.	Technological aspects.....	12
3.2.3.	Environmental aspects.....	13
3.2.4.	Socio-cultural aspects .....	13
3.2.5.	Institutional and management aspects .....	13
3.2.6.	Economic and financial aspects.....	13
3.2.7.	Analysis of factors of impact and sustainability.....	14
3.3.	Factors promoting impact and sustainability .....	14
3.4.	Factors inhibiting impact and sustainability .....	15
4.	Recommendations and lessons learnt .....	16
4.1.	Recommendations .....	16
4.2.	Lessons Learnt.....	16
4.3.	Follow-up Situation .....	16
5.	Evaluation of Impact and sustainability of the Project in Niger .....	17
6.	Conclusions and Summary .....	18
7.	Annex	
7.1.	Survey Matrix	
7.2.	Photos of site visits	

- Summary
- Third Party Review by Third Experts

## **ABBREVIATIONS**

CEDAP	Documentation and Archive Department
CEFIR	International Training and Research Centre
DCT	Technical Cooperation Department
Dir Com	Communication Direction
DSM	Medical Service Department
IEC	Information, Education and Communication - Institutional Educational Capacity
JICA	Japan International Cooperation Agency
ONFP	Office National de la Famille et de la Population
PDM	Project Design Matrix
R/D	Record of Discussions
RH	Reproductive Health
SRH	Sexual and Reproductive Health
STI	Sexual Transmitted Infections
UNFPA	United Nations Population Fund
YRH	Youth's Reproductive Health

## **1. Introduction**

### **1.1. Project Background**

The Republic of Tunisia (herein after referred to as Tunisia) has carried out family planning since 1966, and initially its purpose was to control the population growth. Afterwards, the main stream of family planning shifted from the population policy to the maternal, child and family health care. Through the adoption of "Cairo International Conference on Population and Development (ICPD)" in 1994 , youth's reproductive health was advocated as an important issue in "the ninth socio-economic development plan for five years (1997-2001)".

On the other hand, Japan International Cooperation Agency (herein after referred to as JICA) implemented a technical cooperation named "The Project for the promotion of family planning education" during 1993-1999. The project outputs included production of teaching materials (videos and printing equipment) in the audiovisual centre at "Office National de la Famille et de la Population" (herein after referred to as ONFP) headquarters, the baseline survey and IEC promotion activities. After this first project which its purpose was to provide support to youth's reproductive health (here in after referred as YRH), as new project "the Project for strengthening reproductive health education " was requested to the government of Japan, which aimed at strengthening reproductive health education through improvement of comprehensive capacities in planning, producing and providing educational teaching materials.

### **1.2. Project overview**

The project started on September 1999 with five years cooperation period and is implemented by ONFP in cooperation with JICA. The project purpose is to strengthen the reproductive health education in the Republic of Tunisia through enhancing institutional capacity of ONFP in developing, producing and utilizing the educational materials with an emphasis on "Youth and Reproductive Health" and training in the field of communication skills.

The Record of Discussions (herein after referred to as the "R/D") was signed on 15 September 1999 by both sides. Then, Project Design Matrix (herein after referred to as the "PDM1") was made at a workshop on October-November 2000. After that, the Project has been operated based on PDM1. At the mid-term evaluation, PDM1 was revised and PDM2 was made. After the mid-term evaluation, the project has been implementing the activities based on PDM2.

### **1.3. Study Objectives**

The evaluation objective is to verify the important issues relating to the project impact and sustainability observed two years after the project completion. More specifically, this evaluation seeks to answer the following main evaluation questions:

### **(Impact)**

- ☛ To what extent has the project's overall goal been achieved since the time of terminal evaluation?
- ☛ What positive and negative impacts have the project achieved besides what were originally intended?
- ☛ Among positive changes made, how has the project implementation empowered the target group economically and socially? Has the project contributed to the improved institutional capacity of the implementing agency?
- ☛ What negative changes have been brought to the beneficiaries, including minority and vulnerable groups? Has the project negatively contributed to the promotion of environmental and social development?
- ☛ Are there any external factors that influenced the achievement of the project overall goal?

### **(Sustainability)**

- ☛ Is the project counterpart organization maintaining the benefits brought as a result of achieving project purpose and overall goals?
- ☛ How likely are the project outcomes to be maintained?
- ☛ What are the factors that contribute/inhibit the sustainability of the project outcomes: such as appropriateness of project planning and the technology transferred, and external factors?

## **1.4. Scope of work**

The work covers areas in Tunisia covered by the project including ONFP headquarters in Tunis and its regional branches in Kasserine, Bizerte and many others in Tunis suburb. It is extended also to Niger in the framework of South-South Cooperation where Tunisians which were involved in the project were sent in their turn as experts to this country to disseminate the experience and lessons learned.

## **1.5. Evaluation team**

Chokri Allani, Principal Consultant  
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## **1.6. Study period**

15 January 2007 – 30 March 2007

## 2. Evaluation study approach

### 2.1. Methodology

The post-evaluation is made through two criteria:

**Impact:** The impact of the project is assessed by measuring either positive or negative influences made by the project, which are not originally expected in the project plan

**Sustainability:** The sustainability of the project is assessed in organizational, technical and financial aspects by extent to which achievement of the project are sustained or expanded after the project is completed

### 2.2. Logical framework

As mentioned in the introduction, Tunisia filed an official request to the Government of Japan for reinforcing the politics related to reproductive health in 1998. The fact-finding missions were sent since then to ascertain the nature of the assistance requested and beneficiary group for the assistance. In this background, the five (5)-year project was commenced in 1999, aimed at achieving to strengthen the activities of the Office National de la Famille et de la Population (ONFP) through its programs on reproductive health, targeting youths in whole Tunisia.

JICA Tunisia Office called for an ex-post evaluation of its project so that the results can contribute to better-informed decision-making based on the lessons learned, and promote greater accountability. The final report is to be shared with ONFP.

### 2.3. Implementation

The evaluation was carried out in Tunis and some regional areas and includes a site visit to Bizerte, Kasserine, Mannouba and Ben Arous, to consult with youths, NGOs and ONFP regional delegations. The schedule of the visits and interviews is joined in this report.

In order to review past performance, the following materials were used:

- The record of discussions (R/D), PDM1, PDM2, minutes of meetings and other documents agreed to all accepted in the course of implementation of the project
- Input and output data from the project
- ONFP documents related to the projects
- Results of series of interviews and field observation

### **3. Results**

#### **3.1. Impact of the Project**

Positive impacts, regarding overall goal and super goal, appeared through the post-evaluation period. Still, the impact of the project is thought to be partial.

Regarding the overall goal, the status in sexual and reproductive health of youth and adolescents is improved.

Although verifiable assessment of overall goal as one positive impact is difficult at this moment, a few positive changes can be observed, such as lower prevalence rate of HIV/AIDS and STI than other African countries.

Regarding the super goal: Many meetings and conferences, held in Tunisia and elsewhere, offered an excellent opportunity to show Tunisia's performances and the successful Tunisian-Japanese experience in the field of YRH and contributed to improve Tunisia among developing countries.

To better approach these impacts, some aspects at policy, technological, environmental, socio-cultural, institutional, financial and economic levels, are discussed below.

##### **3.1.1. Policy aspects**

The strategy of the ONFP is a strategy which rests on a finer analysis of the current situation aiming to a better identifying of the Youth needs. Statistical data collecting and analyzing tools are spread out according to regions quarterly. Besides, available socio-behavioral studies are intensively used in the planning and in policy-making.

In the same optics, the strategy of production of the educational media for example goes from bottom to upwards. Moreover there is implication of the psychologists, animators, and educators in the development of the conveyed messages. Some delegations modify their messages according to their geographical, social or economic context (Ref: Dir COM & Delegations)

The Training Department also saw its strategy improved thanks to more targeted sessions, trainings and cycles and including more heterogeneous groups.

Common and periodically held activities and meetings are planned intra-ONFP and extra-ONFP, with primarily the Ministry for Social Affairs and the Ministry of Health; but several other organizations and associations are involved such as the Scoots, the ONFT, the Ministry of Education and Vocational Training, the Ministry of Higher Education and Scientific Research, the Ministry of Defense, the National Safety, the Child Welfare, the Ministry of Justice and Human Rights, etc. (Ref:Dir COM & DCT)

##### **3.1.2. Technological aspects**

The technical impact can be seen through the generalization of tools (the conceptual model of the tree, the magnet kit, video tapes, long-line bra "bustier" out of silicone for the tracking of mammal nodules, etc). The design and the conception of the leaflets, folders, layers, etc. were imported from Japan (following the visits of Tunisian staff in Japan). (Ref:Dir COM & Delegations)



The youth space of Douar Hicher is a model of architecture, furnishing, installation, organization and design, derivative from the youth space of Bizerte, itself inspired from the Japanese models.

- The provided documentary tools are in Japanese. A translation of these handbooks is recommended for a better use. (Ref: CEDAP)
- Computer and electronic equipment -having a lifespan of 4 to 5 years- , the majority of it is out of service or is completely renovated. (Ref: Printing and Audio-visual Department & CEDAP)
- The absence of spare parts of some apparatuses makes not exploitable the equipment provided by JICA in the print-shop and the recording studio. (Ref: Printing & Audio-visual)

### **3.1.3. Environmental aspects**

It is observed that this project hasn't produced any harmful effect to the environment and it is expected that it would not produce any in the future.

### **3.1.4. Socio-cultural aspects**

The results from this project allowed a favorable environment to carry out pleas for the settlement of the structures, of youth and training centers, to obtain additional funds. (Ref: Dir COM & Delegations)

Notable changes in the policy of the government have affected the objectives of the project positively. Indeed, there is a significant component in the 11th socio-economic development plan (2007-2011) as well as multiple recommendations by the Higher Council of the Population (an interdepartmental advisory organization) (Ref: Dir COM). Moreover, budgetary headings are allocated for the continuation of the actions of YRH project, (in particular for the creation of Youth spaces) at one moment when the budgetary restrictions relate to almost all the fields.

The similarities between the value systems and the ideologies of the two countries made it possible to record a socio-cultural impact (to take as a starting point a similar country). All the delegations estimate that the social standing increased and that they gained confidence of the target group.

The number of the boys attending the services of the Family Planning increased (with differences noted according to regions). The socio-cultural impact can be measured by several parameters such as voluntary consultation and the number of the young people informed on the existence of the provided services: 80-85% of the young coming people are directed by professionals of the sector (sociologists, psychologists, midwives) or by the partners. Thus, there are 15-20% of spontaneous and voluntary consultations (This percentage reached 75% in Ben Arous delegation). This percentage shows that there is a certain improvement of the social level and that the target group is rather informed of the provided services. However, the persons in charge think that this figure can be largely improved by multiplying the efforts in promotion, publicity and campaigns, which is not always obvious due to the lack of financial means (Ref: Delegations).

Another point relates to the consultations and the demand for information in SRH of the male kind had increased overall from 2 to 24% (in Bizerte this rate reached 50%). (Ref: Delegations)

In 2006, 40.5% of the young people have been reached by the IEC (YRH program), whereas at the beginning of the 10th socio-economic development plan (2001-2006), this rate was only 15%. The young population with specific needs are covered to a 50% level . (Ref: Dir COM).

Delegation of Bizerte (2004: 7,219 Youths -> 2006: 15,001 Youths)

Delegation of Ben Arous (2005: 7,732 Youths -> 2006: 19,781 Youths)

Delegation of Mannouba (2005: 112 Youths -> 2006: 3,400 Youths)

The effects of this project are spread even out of pilot zones. As an example, in Gabes, two frameworks profited from the trainings, and made the initiative to refit a villa as to make use of it as a youth space. (Ref: Dir COM & Delegations)

In the various delegations, it is observed that the consultations (in the various services) and the demand for information are so numerous that the usual schedules of 8h-13h are not sufficient anymore to provide for the expressed needs. In Bizerte, the Youth space of Ain Meriem extended (spontaneously) its working hours until 17h, Saturday and Sunday included (Ref: Delegation). The staff shortage (in particular doctors, animators and educators) being given the increase in the request of the services was underlined by the interviewed team. Some delegations formulated an objection on the appellation of "cell of listening" and prefer to use the word "space of listening".

Another parameter of appreciation of the socio-cultural impact is the change of the rate of contracting sexual diseases (STI): The rate of STI, the cases of voluntary interruption of pregnancy, etc. are in rise but it is estimated that it is because the cases are declared compared to before which can distort the statistics and a priori give a false idea on the reality of the things. The quality of services encourages the applicants of services to come to express the medical needs or request information on SRH, which was not available in the past. The free of charge clinical services contribute to the auto-declaration of these cases (Ref: Dir COM & DSM).

### **3.1.5. Institutional and management aspects**

The institutional capacity of the ONFP is largely improved. This is made clear through the study of several criteria such as the increase in the educational media distributed, increasingly attractive, of good quality and easily accessible. But this is valid only for the printed ones. The audio-visual equipment, not anymore up-to-date, does no longer allow the production of audio or visual media of good quality. The equipment provided by JICA became obsolete, mainly because of their analog specifications, whereas the media (in particular the radio and national television) requires digital media for the diffusion (Ref: Dir COM & Printing and audio-visual department).

At the regional level, the various delegations acknowledge that there is an increase in the media but the need being increasing, the number of these media remains insufficient (Ref: Delegations).

Generally, the media elaborated and distributed during the period of the project are still diffused and distributed in all regions. Since 2004, new educational media were also worked out to make the messages more attractive and refreshed (not out of date). The access is easy (within reach for the layers and leaflet) and free (Ref: Dir COM).

The second point relates to the training: at an international level, trainings are almost missing (the staff, mainly doctors, go abroad on their own budget to look for self training and for knowledge in congresses, forums or workshops). Regarding the national level, there was development of training on 3 levels or cycles of the local and regional people working on YRH (very mixed groups). The central administration seems to be satisfied but with at the level of the delegations, the staff considers insufficient these trainings. As an example in Hammam-Lif, it is the psychologist who makes cycles of training to the educators and the animators. In Kebili, there was spontaneous creation of an NGO "Youth of Kebili" which contributes to the training on one hand and to information on the other hand.

A redynamisation of the regional centers in this context (in particular in logistics) is necessary (Ref: Dir COM).

At the Printing and audio-visual department, one estimates that the trainings were good during the project but retraining and level upgrading are completely missing. (Ref: Printing & Audio-visual Department).

As per the organizational impact, in general, the basic conceptual models are inspired from the Japanese model but are appropriate to the Tunisian context and situations (Example: concept of cell listening, the system of evaluation, transverse investigations, etc.).

The transfer of knowledge is a part of the organizational impact. As an example, the organizational model of the JOICFP (Japanese Organization for International Cooperation in Family Planning) was copied. The concept of trainings of very mixed groups proved its effectiveness and is spread more and more. The effect is even beyond the pilot zones. (Ref: Dir COM & Delegations).

The expertise is not always effective: The profiles of the Japanese experts do not always coincide with the expressed need. The language also is a major problem of communication (neither English nor French). (Ref: Dir COM & Printing)

The recipients (Young people) come back and bring with them other young people which can constitute an index informing on their satisfaction of the provided services. (Ref: Delegations).

Lastly, and among the assets on the institutional level, is the development of cooperation with third countries and the bilateral assistance (i.e. Tunisian expertise in Niger within the framework of South-South co-operation). (Ref: Dir COM & DCT).

### **3.1.6. Economic and financial aspects**

The success of YRH Project led by JICA encouraged new backers to invest in this field (example: GENUITI for issues related to medical interruption of unwanted pregnancies) (Ref: Dir COM).

The impact is also assessed on the level of the recruitment of new staff. For instance, psychologists are available in more than 50% of the delegations, additional 17 psychologists are to reinforce other regions during 2007. (Ref: Dir COM).

One new employee was recruited in the Printing Division and another within the Audio-Visual Division since 2004 (Ref: Printing & Audio-visual Department).

In the Printing Division, they do not only manage to cover the needs of ONFP but also for the needs for other associations and NGOs in the form of gifts and subsidies (on average 50,000TD/year); in 2006: the share of printing works as gifts is 33,500TD and 27,000TD for the Audio, making a total of 60,500TD). Hence, they had carried out even sales turnovers since new customers request the services of printing works and audio-visual. In 2004, the profits were 421,000TD, in 2005: 390,850TD and in 2006: 467,300TD. The share of the audio in all these figures is less than 20% (Ref: Printing & Audio-visual Department). It is the Spanish cooperation which today ensures a supplementary budget of 65,000TD/year over 4 years duration (Ref: Printing & Audio-visual Department). *1 Tunisian Dinar (TD)= 92.934 yens, as of March 2007*

### **3.2. Sustainability of the project**

The sustainability of ONFP and the Project results are quite high.

Following the High Population Council's orientations, and under the tutorship of the Ministry of Health, ONFP is a key public organization for population policy whose mission is to formulate population policies, to coordinate related ministries and NGOs, and to implement medical and IEC services in the field of RH. Thus institutional sustainability is secured.

Functions of each division in ONFP work well and coordination among divisions has been strengthened. Human resources are steadily developing in ONFP. Therefore, capacities of ONFP have been strengthened.

Two years after the end of the project, ONFP is entirely capable of securing the continuity with an adequate performance level.

Policy, technological, financial, organizational, economic, environmental, socio-cultural and management aspects are detailed here after.

#### **3.2.1. Policy aspects**

The calendars of the planned actions in YRH go up to 2030 with more width and more specificity. Additional recruitments are designed to manage and achieve the laid down goals. However, some delegations insist on the peremptory necessity to be strict on the criteria of selection and a more rigorous choice in order to ensure quality of services. Experience and commitment are two measurement criteria for the recruitment of the new staff. Moreover, there is an extension to other sets of themes such as total health, marital violence, drug-addiction, the dialogue within the family, the communication, the certificate of pre-marriage, etc. (Ref: Dir COM & Delegations)

#### **3.2.2. Technological aspects**

The various services and regions (CEDAP, Printing Division, Training Centre, etc.) admit that acquired knowledge is still applicable but estimate that training sessions and other visits abroad are necessary to maintain the results of the Project and to remain in the same level of output and effectiveness.

In the library, the television, the audio equipment, the video tapes, the headphones, and other equipment are still in use. The documents are occasionally used on in the central administration. Computer equipment has been completely renovated at the end of the project. It is also the case for the printer where the equipment still allows a remarkable production. The studio is not anymore fully operational because of its obsolete audio-visual equipment. (Ref: Printing Division & CEDAP)

### **3.2.3. Environmental aspects**

There would be no harmful effect of this project on the environment. It is considered as safe.

### **3.2.4. Socio-cultural aspects**

All the delegations estimate that the social awareness increased and that they gained confidence of the target group which will help to maintain the Project results.

There is a political support for ONFP and its actions in YRH. As an example, the government granted a budgetary heading for the creation of Youth spaces (10 additional spaces in the 11th socio-economic development plan (2007-2011) for listening on the one hand and the diffusion of the messages on the other hand). (Ref: DCT)

It is estimated that Tunisia, although advanced compared to other countries in this field, did not yet reach the stage of maturity. The need for external assistance is expressed by all concerned parties.

Modernizing the media library and launching a dedicated website would help in maintaining and increasing the sustainability of the project.

### **3.2.5. Institutional and management aspects**

Regarding the trainings, there was adaptation of the sessions to the local context, (example: the family tree was before a cactus in the region of Kasserine and is moved to be an apple-tree) and transfer of the knowledge acquired particularly in adolescentology to central and regional persons in charge. (Ref: Dir COM & Delegations)

To the level of Printing and the audio-visual department, the trainings made are still valid and are transferred to other employees. Thanks to the gained experience, the level of operation is not only maintained but is improved. (Ref: Printing & Audio-visual Department)

### **3.2.6. Economic and financial aspects**

The provided services will not be free anymore starting from 2016, a strategic choice of ONFP. (Ref: Dir COM)

The services downstream from printing works are completely satisfied. The films produced by the audio-visual division do not achieve the unanimity. (Ref: Printing & Audio-visual Department)

Financially, other donors are involved in the project, in particular UNFPA (a permanent partner) and the Spanish cooperation (1,700,000TD over 4 years).

### **3.3. Analysis of factors of impact and sustainability**

#### **3.3.1. Factors promoting impact and sustainability**

- More financial means and in kind for field visits to reach difficult accessible regions, the rural zones and the communities with specific needs (more vehicles, practical educational media for the visits, data show, projectors, videos for the projection of films in the cafés for example, etc.)
- Need for credibility (partners and populations)
- Training of the partners' trainers
- According to statistics on the beginning of sexuality and the delayed age of the marriage, the target group of Project YRH should be widened from 12-24 to 10-34 years old. A law should be voted in this aim, which should accelerate the development of the sector
- Recruitment of psychologist and more qualified personnel. Recruitment of male staff (animators and educators) in the reception facilities, youth spaces and the listening cells in order to be able to attract the male kind, who need as much awareness and information in YRH as girls
- Adoption of participative methods
- More marketing and pleas to the mass-media and to 'Mister' everyone in the street (beaches for the coastal areas in summer for example)
- The proximity and location play a major role in the degree of effectiveness of youth spaces in the cities: to have an independent entry, independent staff for the youth spaces (in Ben Arous, the common waiting room is a factor slowing down the male medical and psychic consultation), to have a good site and a good design
- Social care: this need is often generated by the follow-up of some cases
- Meetings between African countries (similar economic and social context)
- (Ref: Dir COM & Delegations)
- Personal and spontaneous initiatives are recorded: theatre plays are shown for the promotion of the provided services (Bizerte), personal contacts of the service providers (midwives, doctors, animators, educators, etc.) are communicated (in almost all the delegations), villas are arranged to be used as listening cells (Gabes), NGO for youth is created (Kebili), etc. This kind of initiatives gives a graceful push to achieve the general goals of the project and to maintain its effectiveness.

### **3.3.2. Factors inhibiting impact and sustainability**

- Net rupture or break with the basic financial donor: the non revival constitutes a handicap in the sense that the results of the project generated new needs that it would be necessary to satisfy.
- Problem of qualifications: the staff in charge is not sufficient, and not always qualified (absence of specialists, lack of trainings, etc.)
- The follow-up of cases is most of the time non possible
- Lack of evaluation and the supervision is rather general and non-specific
- The medical consultation is irregular because of a lack in full-time doctors
- The means for field visits are available but non sufficient. For this reason, the management of the automobile park in the delegations is difficult
- Lack of a toll-free number (Green number)
- HIV tracking in hospitals (Need for a fast kit of tracking HIV)
- Lack of a dedicate website
- The cost in the professional institutions does not encourage the persons in charge to organize demonstrations, campaigns publicity and/or promotion of the provided services
- The disengagement of the regional authorities
- Lesser involvement of associations in this type of activities and non-lucrative actions.
- In case of a breakdown, the Printing shop would be unable to find the sufficient resources for maintenance, repair and acquisition of new equipment.
- External and overseas training are missing (in some delegations it is the psychiatrist who ensures pseudo trainings, in others, the staff takes part in external and overseas trainings with their own means).
- The false idea that the listening cells are only for the female kind. The presence of an entirely female staff in these structures does not encourage the boys to come, consult medically or ask for information. This situation is different in Bizerte (mentality) and Kasserine (independent entrance) (Ref: Dir COM & Delegations)
- The site of these structures in some regions does not help in the promotion of the provided services (Ref: Delegations)

## **4. Recommendations and lessons learnt**

### **4.1. Recommendations**

- Monitoring and evaluation system
- In order to improve the quality of IEC services, the monitoring system (established in 2004) has to be improved. The results issued from it should be utilized to apply them internationally.
- Information and advocacy conference
- JICA office together with ONFP are advised to organize an information and advocacy conference in order to present the experience as well as the impact and the sustainability of the results of the cooperation project between ONFP and JICA (Youth and SRH). Representatives from the government, NGOs donors agencies and African and Arab countries could be invited to participate.
- Production and diffusion of a document about the experience
- A detailed document on the successful experience (in terms of impact and sustainability) should be produced and disseminated (whenever a conference or a meeting is held) aiming at its extension for the benefit of other countries or regions.

### **4.2. Lessons Learnt**

- The Japanese model is a lessons-generator in a number of issues. Through the project, the following lessons were learnt:
- Ability of analysis is improved: Aiming at the identification of youth needs, collecting and analyzing data on SRH centers as well as using available socio-behavioral studies are focused on.
- Production of appropriate assistance: the setting up of a special committee and the technical training for the elaboration and the production of these educational tools are an achievement in the strategy of ONFP.
- Combination package of training materials and training strategy, oriented for Inter-Education Program, is an effective methodology to induce a behavior change.

### **4.3. Follow-up Situation**

No specific follow-up program is in place; however, JICA would be eventually interested in using this experience and the one for Niger to expand it to other similar regions mainly in French speaking Africa.



## 5. Evaluation of Impact and sustainability of the Project in Niger

A mission was sent at the end of March 2007 in order to evaluate the projects undertaken by Tunisian expatriate experts in Niger sent by ONFP using the Tunisian experience. The project has led to:

- Implement a pilot project for 6 villages, and then expanded to all Niger's 15 districts.
- Elaborate Niger's National Strategic Plan in SHR. This document has been successfully validated in a workshop that been held in Niamey from 19 to 22 March 2007.

On the other hand, various training activities of Nigerians were offered by Tunisians, among them;

- Training for decision-makers (1 week).
- Technical training in Information, Education and Communication (IEC) for mainly educators and medical staff (6 to 9 months).

Another positive impact, International Care used the Tunisian experts tools and approach and had successfully implemented it in various villages of Niger (e.g. Koygourou).

Nevertheless the impact of the cooperation is still punctual. Moreover, the continuation of the activities is not ensured after the departure of the Tunisian experts. The lack of trainings in creation and use of the educational supports (booklets, films, etc.) was expressed by the interviewees as well as the need to adopt the Tunisian model of the listening cells.



**Map of the position of Tunisia and Niger**

## **6. Conclusions and Summary**

In this study, the evaluation of the impact and the sustainability of a project in the field of sexual and reproductive health of youth was carried out, two years after the project completion in 2005. In overall, the impact of the project was judged to be partial but the sustainability is assured. Indeed, there is a will to continue the activities and to spread them not only over the republic of Tunisia but also to export them to similar context countries, such as Niger.



## Annex 7.1 : Survey Matrix

### Ex-post Evaluation Study on The Project for Strengthening of Reproductive Health Education

Article d'évaluation	Questions	Case de réponses	Case de commentaires
<b>1. Impact</b>			
1.1. Degré de contribution du Projet au développement du secteur	1.1.1. Le niveau social du secteur s'est il amélioré à travers l'exécution des activités du Projet?	<p>Oui/Non</p> <p>Si oui</p> <ul style="list-style-type: none"> <li>- Augmentation du nombre des supports éducatifs distribués</li> <li>- Qualité? Quantité? Impact? Facilité d'accès?</li> </ul>	<p>Oui, il y a augmentation des supports éducatifs, de plus en plus attrayants, de bonne qualité et faciles d'accès. Mais ceci n'est valable que pour les supports imprimés. Le matériel audiovisuel, n'étant plus à la pointe, il ne permet plus la production de supports audio ou visuels de bonne qualité. Les équipements fournis par la JICA sont devenus obsolètes, principalement à cause de leur caractère analogique, alors que les média (notamment la radio et télévision nationale) demandent des supports numériques pour la diffusion (<i>Réf: Dir Com &amp; Imprimerie et audiovisuel</i>)</p> <p>Au niveau régional, les différentes délégations admettent qu'il y a augmentation mais le besoin étant croissant, le nombre de ces supports reste insuffisant (<i>Réf: Régions</i>)</p>

D'une façon générale, les supports élaborés et distribués durant la période du projet sont encore diffusés et distribués hors zones pilotes. De nouveaux supports ont également été élaborés pour rendre les messages plus d'actualité depuis 2004. L'accès est facile (à portée de main pour les feuillets et prospectus) et gratuit. (*Réf: Dir Com*)

L'impact est meilleur: la stratégie de production va désormais

		<p>- Degré d'ancrage des cellules d'écoute</p> <p>*) Y a-t-il consultation volontaire? Le public ou groupe cible assez informé?</p> <p>*) Augmentation du nombre des jeunes informés sur l'existence des services fournis?</p>	<p>80-85% des jeunes sont orientés par les professionnels du secteur (sociologues, psychologues, sages-femmes) ou par les partenaires pairs. Il y a donc 15-20% de consultations spontanées et volontaires (Ce pourcentage a atteint les 75%). Ce pourcentage montre qu'il y a une certaine amélioration du niveau social et que le groupe cible est assez informé sur les services fournis. Cela dit, les responsables pensent que ce chiffre peut être grandement amélioré en multipliant les efforts en promotion, publicité et actions de sensibilisation, ce qui n'est pas toujours évident faute de moyens financiers (<i>Réf: Régions</i>).</p> <p>Un autre point concerne les consultations et la demande en informations en SSR du genre masculin qui ont globalement augmenté de 2 à 24% (à Bizerte ce taux a atteint 50%) (<i>Réf: Délégations</i>)</p>
		<p>- Augmentation du nombre des jeunes fréquentant ces services?</p> <p>- Augmentation du nombre des jeunes accédant aux messages?</p>	<p>Oui: en 2006, 40.5% des jeunes sont touchés par l'IEC (programme SSR), alors qu'au début du 10<sup>ème</sup> plan, ce pourcentage était de 15%. La population jeune à besoins spécifiques est couverte, quant à elle, à 50% (<i>Réf: Dir Com</i>)</p> <p>Délégation de Bizerte (2004: 7219J → 2006: 15001J)</p> <p>Délégation de Ben Arous (2005: 7732J → 2006: 19781J)</p> <p>Délégation de Mannouba (2005: 112J → 2006: 3400)</p> <p>Délégation de Kasserine (2004: → 2006:)</p> <p>Dans les différentes délégations, on a exprimé que les consultations (dans les différents services) et la demande en informations sont si nombreuses que les horaires habituels de</p>

			<p>8h-13h ne sont plus suffisants pour subvenir aux besoins exprimés. A Bizerte, l'espace Jeunes de Bizerte a prolongé (spontanément) ses horaires jusqu'à 17h, samedi et dimanche inclus. (<i>Réf: Régions</i>). Le manque de personnels (notamment en médecins, animateurs et éducateurs) -étant donné l'accroissement de la demande des services- a été souligné par les intervenants interrogés. Certaines délégations ont formulé une objection sur l'appellation de "cellule d'écoute" et préfère utiliser le mot "espace d'écoute".</p>
		<p>- Coordination: Y a-t-il des réunions et des activités communes?</p>	<p>Oui. Des activités et des réunions communes sont programmées périodiquement et ce, intra-ONFP et extra-ONFP, avec essentiellement le ministère des affaires sociales et le ministère de la santé) mais plusieurs autres organismes et associations sont impliqués tels que les Scoots, l'ONFT, le ministère de l'éducation et de la formation, de l'enseignement supérieur, le milieu carcéral, le ministère de la défense, la sûreté nationale, la protection de l'enfance, ministère de la justice des droits de l'homme, etc. (<i>Réf: Dir Com &amp; DCT</i>)</p>
		<p>- Changement du taux d'atteinte des maladies concernées (MST) et du taux de mortalité</p> <p>- Y a-t-il prise en charge des soins (cliniques) et informations en SSR pour les jeunes et les adolescents dans les structures de santé? (contraception, IST)</p>	<p>Le taux d'atteinte des IST, les cas d'IVG, etc. sont en hausse mais on estime que c'est parce que les cas se déclarent par rapport à avant ce qui peut fausser les statistiques et à priori donner une fausse idée sur la réalité des choses. La qualité de services encourage désormais les demandeurs de services à venir exprimer le besoin médical ou en information en SSR, ce qui n'était pas acquis dans le passé. La prise en charge clinique et la gratuite des différentes prestations contribuent à l'auto déclaration de ces cas (<i>Réf: Dir Com &amp; DSM</i>)</p>
	<p>1.1.2. Quels sont les facteurs d'obstacle et d'accélération pour le développement du secteur</p>	<p>- Facteurs d'accélération</p>	<p>- Plus de moyens financiers et en nature pour les visites sur terrains et pour atteindre les milieux inaccessibles, les zones rurales et les communautés à besoins spécifiques (véhicules, supports éducatifs plus pratiques pour les visites, datashow, projecteurs, vidéos pour la projection des films dans les cafés</p>

	<p>donné par le Projet?</p>	<p>par exemple, etc.)</p> <ul style="list-style-type: none"> <li>- Besoin de crédibilité par rapport aux partenaires pairs</li> <li>- Formation des formateurs des partenaires</li> <li>- Selon les statistiques sur le début de la sexualité et l'âge du mariage retardé, le groupe cible du Projet SSR devrait être élargi de 12-24 à 10-34ans. Une loi devrait être votée dans ce sens, ce qui accélérerait le développement du secteur</li> <li>- Recrutement de psy et de personnel plus qualifié. Recrutement de personnel du sexe masculin (animateurs et éducateurs hommes) dans les structures d'accueil, les espaces jeunes et les cellules d'écoute pour pouvoir attirer le genre masculin, qui a autant besoin de sensibilisation et d'information en SSR</li> <li>- Adoption de méthodes participatives</li> <li>- Plus de marketing et de plaidoyers auprès des journalistes et du monsieur tout le monde dans la rue (les plages pour les régions côtières en été par exemple)</li> <li>- La proximité et l'aménagement jouent un rôle majeur dans le degré d'efficacité des espaces jeunes dans les villes: avoir une entrée indépendante, des prestataires indépendants pour les espaces jeunes (à Ben Arous, la salle d'attente commune est un facteur freinant la consultation médicale et psychique masculine), avoir un bon emplacement et une bonne conception</li> <li>- Prise en charge sociale: ce besoin est souvent généré par le suivi de certains cas</li> <li>- Réunions entre pays africains (contexte économique et social semblable)</li> </ul> <p><i>(Réf: Dir Com &amp; Délégations)</i></p> <p>Des initiatives personnelles et spontanées sont enregistrées: des pièces de théâtre montées pour la promotion des services</p>
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			<p>fournis (Bizerte), les coordonnées personnelles des prestataires de services (sages-femmes, médecins, animatrices, éducateurs, etc.) sont communiquées (dans presque toutes les délégations), des villas sont aménagées pour servir de cellule d'écoute (Gabes), une ONG Jeunes est créée (Kebili), etc. Ce genre d'initiatives donne un coup de pouce pour atteindre les objectifs généraux du projet.</p>
		<p>- Facteurs d'obstacle</p>	<ul style="list-style-type: none"> <li>- La rupture nette avec le bailleur de fond: la non relance constitue un handicap dans le sens où les résultats du projet ont généré de nouveaux besoins qu'il faudrait satisfaire.</li> <li>- Problème de qualifications pas assez de personnel, qui n'est pas toujours qualifié (absence de spécialistes, pas assez de formations, etc.)</li> <li>- Le suivi des cas est pour la plupart du temps non possible</li> <li>- L'évaluation est absente et la supervision est plutôt générale et non spécifique</li> <li>- la consultation médicale est irrégulière par manque de médecins à plein temps</li> <li>- Les moyens pour les visites sur terrain sont disponibles mais non suffisants. A ce titre, la gestion du parc automobile dans les délégations est difficile</li> <li>- Absence d'un numéro vert</li> <li>- Passage par l'hôpital pour le dépistage HIV (Besoin d'un kit de dépistage rapide HIV)</li> <li>- Absence de site Web spécifique pour les régions</li> <li>- Le coût du temps dans les institutions professionnelles n'encourage pas les responsables à organiser des manifestations ou actions de sensibilisation et promotion des services fournis</li> <li>- La résistance des jeunes eux-mêmes et la méfiance des</li> </ul>



			<p>parents freinent l'avancée attendue du Projet et ses résultats</p> <ul style="list-style-type: none"> <li>- Le désengagement des autorités régionales</li> <li>- Les associations n'encouragent plus, ne s'impliquent plus dans les actions entreprises et le bénévolat devient rare</li> <li>- En cas de panne, l'Imprimerie ne trouve pas forcément les ressources suffisantes pour la réparation ou l'achat du nouveau matériel.</li> <li>- La formation externe et à l'étranger est quasi-absente (dans certaines délégations c'est le psy qui assure des pseudo formations, dans d'autres les prestataires participent à des formations externes avec leurs moyens propres)</li> <li>- La fausse idée que les cellules d'écoute sont uniquement pour le genre féminin. La présence d'un corps entièrement féminin dans ces structures n'encourage pas les garçons à venir. Cette situation est différente à Bizerte (mentalité), et à Kasserine (entrée indépendante)</li> </ul> <p>(Réf: Dir Com &amp; Délégations)</p>
<p>1.3. Degré de contribution à d'autres aspects et impact négatif</p>	<p>1.3.1. D'autres impacts (positifs ou négatifs) ont ils été donnés par l'exécution du Projet?</p> <p>Si positif: à quel point le groupe cible est il renforcé?</p> <p>Si négatif: lesquels?</p>	<p>Oui/Non</p> <p>Si oui</p> <p>- Impact technique</p>	<p>Techniquement, il y a eu généralisation des outils (le modèle conceptuel de l'arbre, magnel kit, cassettes, bustier en silicone pour le dépistage des nodules mammaires, etc.). Le design et la conception des prospectus, dépliants, feuillets, etc. ont été importés du Japon (suite aux séjours des tunisiens au Japon).</p> <p>(Réf: Dir Com &amp; Délégations)</p> <p>L'espace de Douar Hicher est un modèle d'architecture, d'ameublement, d'aménagement, d'organisation, et de conception, calqué sur l'espace de Bizerte, lui-même calqué sur des modèles japonais</p>
		<p>- Impact organisationnel</p>	<p>D'une façon plus générale, les modèles conceptuels de base sont en général inspirés du modèle japonais mais sont propres au contexte et situations tunisiens (Exemple: la notion de cellule d'écoute, le système d'évaluation, les enquêtes</p>

			<p>transversales, etc..).</p> <p>Le transfert du savoir faire figure parmi les impacts organisationnels. A titre d'exemple, le modèle organisationnel du JOICEPF (La Fédération des Organisations Japonaises pour la Population et la Famille) a été calqué.</p> <p>Les formations avec la notion de groupe hétérogène ont prouvé leur efficacité et se généralisent de plus en plus. L'effet se fait même sur les zones hors pilotes. (Réf: <i>Dir Com &amp; Délégations</i>)</p>
		- Impact environnemental	<p>Les résultats de ce projet ont permis un environnement favorable pour mener des plaidoyers pour la mise en place des structures, de centres de formations, pour l'obtention d'une ligne budgétaire gouvernementale pour la création des espaces Jeunes (à un moment où il y a des restrictions budgétaires dans beaucoup de domaines) (Réf: <i>Dir Com &amp; Délégations</i>)</p>
		- Impact économique	<p>La réussite du Projet SSR conduit par la JICA a encouragé de nouveaux bailleurs de fonds à investir dans ce domaine (exemple: GENUITI pour la question des IVG médicamenteuses) (Réf: <i>Dir Com</i>)</p>
		- Impact socioculturel	<p>La ressemblance entre les systèmes de valeurs et les idéologies des deux pays a permis d'enregistrer un impact socio-culturel (s'inspirer d'un pays semblable)</p> <p>Toutes les délégations estiment que le niveau social a augmenté et qu'elles ont gagné de la confiance.</p> <p>Parmi les retombées, on note aussi l'assistance aux pays tiers et l'assistance bilatérale (expertise tunisienne au Niger dans le cadre de coopération Sud-Sud) (Réf: <i>Dir Com &amp; DCT</i>)</p> <p>Le nombre des garçons fréquentant les services du PF a globalement augmenté (avec des différences sont notées selon les régions)</p>

	1.3.2. Facteurs externes influençant le Projet?	- Y a-t-il es changements dans la politique du gouvernement qui affectent les objectifs du Projet?	Oui, positivement. Il y a une composante importante dans le 11ème plan et des multiples recommandations par le Conseil Supérieur de la Population (un organisme consultatif interministériel) ( <i>Réf: Dir Com</i> )
		- Le backward national économique ralentit il le travail des services fournisseurs?	Non, tous les services fournis sont complètement gratuits pour le moment ( <i>Réf: Dir Com &amp; Délégations</i> )
		- Quels événements après la fin du Projet ont-ils influencé les objectifs du Projet? ?	Néant
1.4. Divers	1.4.1. A quel degré les objectifs généraux du Projet ont été atteints depuis la fin du Projet?		<p>Les effets de ce projet se font sur les zones hors pilotes. A titre d'exemple, à Gabes, deux cadres ont bénéficié des formations ont fait l'initiative de réaménager une villa et d'en faire un espace jeune (<i>Réf: Dir Com &amp; Délégations</i>)</p> <p>A l'Imprimerie, on arrive non seulement à subvenir aux besoins de l'ONFP mais aussi aux besoins d'autres associations et ONG sous forme de dons et subventions (en moyenne 50000DT/an; en 2006: la part de l'imprimerie dans ces dons est de 33500DT et de 27000DT pour l'Audio, soit un total de 60500DT). On réalise même des chiffres d'affaires puisque de nouveaux clients sollicitent les services de l'imprimerie et de l'audio visuel. En 2004, le CA est de 421000DT, en 2005: 390850DT et en 2006: 467300DT. La part de l'audio dans tous ces chiffres est moins de 20% (<i>Réf: Imprimerie &amp; Audiovisuel</i>)</p>
	1.4.2. Les bénéficiaires		L'expertise n'est pas toujours efficace: Les profils des experts japonais ne coïncident pas toujours avec le besoin exprimé. La

	sont ils satisfaits?		<p>langue pose également un problème de communication majeur (ni anglais ni français) (<i>Réf: Dir Com &amp; Imprimerie</i>)</p> <p>Les bénéficiaires (Jeunes) reviennent et ramènent avec eux d'autres jeunes ce qui peut constituer un indice informant sur leur satisfaction des services fournis (<i>Réf: Délégations</i>)</p>
	1.4.3. Equipements adéquats pour réaliser les tâches étaient ils disponibles?		<p>- Les outils documentaires fournis sont en japonais. Une traduction de ces manuels est recommandée pour une meilleure exploitation (<i>Réf: CEDAP</i>)</p> <p>- Le matériel informatique et électronique ayant une durée de vie et d'exploitation de 4-5 ans, la plupart de ces équipements ne sont plus en service ou complètement rénovés (<i>Réf: CEDAP, Imprimerie &amp; Audiovisuel</i>)</p> <p>- L'absence des pièces de rechange de certains appareils rend inexploitable le matériel fourni par la JICA dans l'imprimerie et le studio d'enregistrement (<i>Réf: Imprimerie &amp; Audiovisuel</i>)</p>
	1.4.4. La capacité institutionnelle de l'ONFP est elle améliorée?	- Le personnel formé est il suffisant? Bien réparti?	<p>La formation, à l'échelle internationale, est quasi absente (Certains prestataires à la recherche de l'autoformation, partent sur leurs propres caisses à l'étranger pour suivre des congrès, forums ou workshops). A l'échelle nationale, il y a eu développement des formations sur 3 niveaux ou cycles des prestataires locaux et régionaux (groupes hétérogènes). Le siège semble être satisfait mais au niveau des délégations, on estime insuffisantes ces formations. A titre d'exemple à Hammam-Lif, c'est la psychologue qui fait des cycles de formation aux éducateurs et animateurs. A Kebili, il y a eu création spontanée d'une ONG "Jeune de Kebili" qui contribue à la formation et l'information.</p>

Une redynamisation des centres régionaux dans ce sens (notamment en logistique) est nécessaire (*Réf: Dir Com*) 28

A l'Imprimerie et l'audiovisuel, on estime que les formations étaient bonnes durant le projet mais le recyclage est totalement

			absent ( <i>Réf: Imprimerie &amp; Audiovisuel</i> )
		- Y a-t-il eu recrutement additionnel?	<p>La couverture en psychologie est de 50% (17 conventions supplémentaires en 2007) (<i>Réf: Dir Com</i>)</p> <p>Un employé est recruté à l'imprimerie et un autre à l'audiovisuel depuis 2004 (<i>Réf: Imprimerie &amp; Audiovisuel</i>)</p>
		- Y a-t-il eu un budget additionnel pour renforcer l'action?	<p>Oui, le budget tunisien a pris la relève en ce qui concerne la capacité institutionnelle de l'ONFP. A titre d'exemple, le gouvernement a accordé une ligne budgétaire pour la création des espaces Jeunes (10 espaces supplémentaires dans le 11<sup>ème</sup> plan quinquennal pour l'écoute d'une part et pour la diffusion des messages d'autre part) ...(<i>Réf: DCT</i>)</p> <p>Au niveau de l'audiovisuel, c'est la coopération espagnole qui assure un budget additionnel de 65000DT/an sur une durée de 4 ans (<i>Réf: Imprimerie &amp; Audiovisuel</i>)</p>

Article d'évaluation	Questions	Case de réponses	Case de commentaires
<b><u>2. Durabilité</u></b>			
2.1. Développement autonome assuré par l'ONFP	2.1.1. Y a-t-il eu un soutien politique à l'ONFP?	<ul style="list-style-type: none"> <li>- Y a-t-il eu des aménagements législatifs?</li> <li>- Quelle est la position publique de l'ONFP?</li> </ul>	Oui, il y a une composante importante dans le 11ème plan et des multiples recommandations par le Conseil Supérieur de la Population (un organisme consultatif interministériel) ( <i>Réf: Dir Com</i> )
	<p>2.1.2. L'ONFP a-t-il continué (et l'intention de continuer) les activités du Projet, après la fin du Projet?</p> <p>2.1.3. L'ONFP assure t-il les ressources humaines suffisantes pour continuer les activités du Projet, après la fin du Projet?</p> <p>2.1.4. Un recrutement additionnel est-il possible?</p>	<p>Oui/Non</p> <p>Si oui: - Pour combien de temps?</p> <ul style="list-style-type: none"> <li>- Relations publiques et état d'assurance des ressources humaines</li> <li>- Assurance des frais du personnel?</li> <li>- Critères de sélection</li> </ul>	<p>Oui, les calendriers des actions en SSR prévues vont jusqu'à 2030 avec plus d'ampleur, de spécificité et de quantité. Des recrutements additionnels sont prévus pour parvenir à atteindre les objectifs fixés. Cela dit, certaines délégations insistent sur la nécessité absolue d'être strict sur les critères de sélection et sur un choix plus rigoureux afin d'assurer des services de qualité. L'expérience et l'engagement sont deux points de mesure dans les critères de recrutement des prestataires. De plus il y a extension à d'autres thématiques tels que la santé globale, la violence conjugale, la toxicomanie, le dialogue au sein de la famille, la communication, le certificat de pré nuptialité, etc. (<i>Réf: Dir Com &amp; Délégations</i>)</p> <p>Les services fournis ne seront plus gratuits à partir de 2016, un choix stratégique de l'ONFP (<i>Réf: Dir Com</i>)</p>
2.2. Facteurs contribuant ou inhibant la durabilité des résultats Projet?	Facteurs inhibant et obstacles?		<ul style="list-style-type: none"> <li>- La rupture nette avec le bailleur de fond: la non relance constitue un handicap dans le sens où les résultats du projet ont généré de nouveaux besoins qu'il faudrait satisfaire (<i>Réf: Dir Com</i>)</li> <li>- Problème de qualifications: pas assez de personnel, qui n'est pas toujours qualifié (absence de</li> </ul>

			<p>spécialistes, pas assez de formations, etc.)</p> <ul style="list-style-type: none"> <li>- Le suivi des cas est pour la plupart du temps non possible</li> <li>- L'évaluation est absente et la supervision est plutôt générale et non spécifique</li> <li>- la consultation médicale est irrégulière par manque de médecins à plein temps</li> <li>- les moyens pour les visites sur terrain sont disponibles mais non suffisants. A ce titre, la gestion du parc automobile dans les délégations est difficile</li> <li>- Absence d'un numéro vert</li> <li>- passage par l'hôpital pour le dépistage HIV (Besoin d'un kit de dépistage rapide HIV)</li> <li>- absence de site Web régional</li> <li>- Le coût du temps dans les institutions professionnelles n'encourage pas les responsables à organiser des manifestations ou actions de sensibilisation et promotion des services fournis</li> <li>- la résistance des jeunes eux-mêmes et la méfiance des parents freinent l'avancée attendue du Projet et ses résultats</li> <li>- Désengagement des autorités régionales</li> <li>- Les associations n'encouragent plus et ne s'impliquent plus dans les actions entreprises.</li> <li>- La formation externe et à l'étranger est quasi-absente (dans certaines délégations c'est le psy qui assure des pseudo formations)</li> <li>- La fausse idée que les cellules d'écoute sont uniquement pour le genre féminin. La présence d'un corps entièrement féminin dans ces structures</li> </ul>
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			<p>n'encourage pas les garçons à venir. Cette situation est différente à Bizerte (mentalité), et à Kasserine (entrée indépendante)</p> <ul style="list-style-type: none"> <li>- L'emplacement de ces structures dans certaines régions n'aide pas dans la promotion des services fournis</li> </ul> <p><i>(Réf: Délégations)</i></p> <ul style="list-style-type: none"> <li>- En cas de panne, l'Imprimerie et l'audiovisuel ne trouverait pas forcément les ressources suffisantes pour la réparation ou l'achat du nouveau matériel.</li> </ul> <p><i>(Réf: Imprimerie &amp; Audiovisuel)</i></p>
	Facteurs contribuant		<ul style="list-style-type: none"> <li>- Réunions entre pays africains</li> <li>- Plus de marketing et de plaidoyers auprès des journalistes, des autorités, des associations et du monsieur tout le monde dans la rue (les plages pour les régions côtières en été par exemple)</li> <li>- Recrutement de psychologues, psychiatres, de personnel plus qualifié et d'animateurs et éducateurs hommes. Le recrutement des personnels du sexe masculin dans les structures d'accueil, les espaces jeunes et les cellules d'écoute permettrait d'attirer le genre masculin, qui a autant besoin de sensibilisation et d'information en SSR</li> <li>- Formation des formateurs des partenaires</li> <li>- Adoption de méthodes participatives</li> </ul> <p><i>(Réf: Dir Com)</i></p> <ul style="list-style-type: none"> <li>- Plus de moyens pour les visites sur terrains et pour atteindre les milieux inaccessibles et les communautés à besoins spécifiques (véhicules, supports éducatifs plus pratiques pour les visites,</li> </ul>



			<p>datashow, projecteurs, vidéos pour la projection des films dans les cafés par exemple, etc.)</p> <p>- La proximité et l'aménagement jouent un rôle majeur dans le degré d'efficacité des espaces jeunes</p> <p>(Réf: Délégués)</p>
2.3. Le management du Projet capable de maintenir les "bénéfices" accrues des résultats du Projet?	2.3.1. Les connaissances gagnées ou acquises sont elles encore applicables?		<p>Les différents services et régions (CEDAP, Imprimerie, Formation, etc.) admettent que les connaissances acquises sont encore applicables mais estiment que des sessions de recyclage, d'autres formations et d'autres séjours à l'étranger sont nécessaires pour maintenir les résultats du Projet et rester dans le même niveau de rendement et d'efficacité. On estime que la Tunisie, bien qu'avancée par rapport à d'autres pays dans ce domaine, n'a pas encore atteint le stade de maturité. Le besoin d'assistance extérieure est exprimé par tous les partis concernés</p>
	2.3.2 Les équipements sont ils pleinement utilisés en ce moment?		<p>Dans la bibliothèque, la télévision, l'audio, les cassettes, les casques d'écoute, etc sont encore exploitables dans les expositions. Les documents sont utilisés sur place (au siège). Le matériel informatique est, quant à lui, complètement rénové depuis la fin du projet. C'est aussi le cas pour l'imprimerie où le matériel permet encore une production remarquable. Le studio ne bénéficie plus pleinement du matériel audiovisuel, devenu obsolète (Réf: Imprimerie &amp; CEDAP)</p>
	2.3.3. Le travail est il accepté par les partis concernés?		<p>Les services en aval de l'imprimerie sont complètement satisfaits. Les films produits par l'audiovisuel ne font pas l'unanimité (Réf: Imprimerie &amp; Audiovisuel)</p> <p>Le retour des jeunes vers les différents services est</p>

			présage qu'ils sont satisfaits ( <i>Réf: Délégations</i> )
	<p>2.3.4 le savoir faire est il encore valide? Formation acquise encore exploitée?</p> <p>Le niveau de fonctionnement est il maintenu?</p> <p>*) Sur place? *) Y a-t-il Echange avec d'autres cliniques ou services ?</p>		<p>Au niveau des formations, il y a eu adaptation des formations au contexte local (exemple: l'arbre généalogique) et transfert du savoir acquis notamment en adolescentologie aux responsables centraux et régionaux (<i>Réf: Dir Com &amp; Délégations</i>)</p> <p>Au niveau de l'Imprimerie et de l'audiovisuel, les formations suivies sont encore valides et transférées à d'autres employés. Grâce à l'expérience acquise, le niveau de fonctionnement n'est pas seulement maintenu mais amélioré (<i>Réf: Imprimerie &amp; Audiovisuel</i>)</p>
2.4. D'autres "donneurs" impliqués dans ce Projet après la fin du Projet?	<p>Si oui</p> <p>2.4.1. Lesquels?</p> <p>2.4.2. Budget?</p>		<p>FNUAP: partenaire permanent</p> <p>Coopération espagnole : 1700000DT</p> <p>(<i>Réf: Dir Com, DCT</i>)</p>
2.5. Budget adéquat du gouvernement tunisien pour maintenir les travaux de ce Projet?	<p>Si oui</p> <p>Quel est le montant du budget alloué annuellement?</p>		?
2.6. Divers		<p>- Médiathèque encore effective?</p> <p>- Le site Web actualisé? Y a-t-il des statistiques sur le nombre de ses visiteurs?</p>	<p>Oui, médiathèque et site Web sont fonctionnels et actualisés. (statistiques:?)</p> <p>(<i>Réf: CEDAP</i>)</p>

**Annex 7.2 : Photos of site visits**

Ex-post Evaluation Study on

The Project for Strengthening of Reproductive Health Education





Printing and Audiovisual Centre



Documentation and Archive Department CDAP



YRH Centre of Douar Hicher (Mannouba)



YRH Centre of Hammam-Lif (Ben Arous)



YRH Centre of Kasserine





YRH Centre of Bizerte

## **MISSIONS AND SITE VISITS REPORT**

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### **Technical Cooperation Department (DCT)**

9 February 2007

Mr Adnen BelHaj Issa, Director

Mr Jilani Kamel, Chief

Mrs Sefi, Chief

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### **Printing and Audiovisual Department**

12 February 2007

Mr Feti Hessine, Director

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### **Communication Direction (Dir Com)**

14 and 15 February 2007

Dr Laatiri Zied, Director of Dir Com

Mrs Jedidi Hayet, Vice-director of Dir Com and coordinator of YRH program

Dr Ben Taleb Asma, Psychologist

Dr Ouni Ali, délégué of Mahdia

Dr Hili, Doctor

Mrs Ben Mammi

Mrs Rebhi Cherif

Mr Abdel Hamid

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### **Documentation and Archive Department (CEDAP)**

15 February 2007

Mrs Fathia, documentalist

Mrs Samira, documentalist

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### **Mannouba Delegation (Douar Hicher)**

22 February 2007



Dr Omrani Monia, Doctor  
Mrs Guizani Karima, Animator  
Mlle Fki Raja, Psychologist

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**Ben Arous Delegation (Hammam-Lif)**  
1 March 2007

Dr Mrayhi Nouredine, Délégué  
Ben Amor aida, Psychologist  
Mrs Massoussi Souad, Animator  
Dr Labassi Hayet, Doctor  
Mrs Chaal, Educator  
Mrs Makni, Midwife

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**Kasserine Delegation**  
2 March 2007

Dr Khlifi Abdeddayem, Délégué

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**Bizerte Delegation**  
8 March 2007

Mr Ben Gaalia Ezzedine, Educator  
Mrs Boufeyed Seloua, Midwife  
Mrs Boujemaa Monia, Animator  
Mrs Araybia Radhia, Animator

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## Summary

Evaluation conducted by: JICA Tunisia Office

<b>1. Outline of the Project</b>	
<b>Country:</b> Tunisia	<b>Project title:</b> The Project for Strengthening of Reproductive Health Education
<b>Issue/Sector:</b> Population/Family Planning	<b>Cooperation scheme:</b> Project-type cooperation
<b>Division in charge:</b> Human Development Dept. <b>Division:</b>	<b>Total cost:</b> <u>No data</u> yen
<b>Period of Cooperation</b>	<b>From</b> 15 September 1999
	<b>To</b> 14 Septembre 2004
	<b>Partner Country's Implementing Organization:</b> Office National de la Famille et de la Population (ONFP)
	<b>Supporting Organization in Japan:</b> University of Osaka, Japanese Organization for International Cooperation in Family Planning (JOICEF) and Japan Family Planning Association (JFPA)
<b>Related Cooperation</b>	Dispatch of senior volunteers, Organization of Third Country Training Programs
<b>1-1. Background of the Project</b>	
<p>The Republic of Tunisia has carried out family planning since 1966 where its purpose was to control the population growth. From March 1993 to March 1998, JICA conducted a technical cooperation project titled "Project for the Promotion of Family Planning Education in Tunisia" with Office National de la Famille et de la Population (ONFP) as counterpart organization. The project insisted promotion of IEC (Information, Education and Communication) in programs of family planning in Tunisia. ONFP took an advantage of video and printed materials co-produced by Japanese and Tunisian experts for improving their service in the Prefectures of Tataouine and Kasserine, model areas in the South and West of Tunisia.</p> <p>Afterwards, the main stream of family planning shifted from the population policy to the maternal, child and family health care. Through "Cairo International Conference on Population and Development (ICPD)" in 1994, youth's reproductive health was advocated as an important issue. Since ONFP mastered production techniques of IEC which are transferred in the above mentioned Project, they then requested that JICA continues to support programs of ONFP, which newly put accent on promotion of Reproductive Health, especially for youths and for isolated area.</p>	
<b>1-2. Project Overview</b>	
The project started on September 1999 with five years cooperation period and is implemented by ONFP in cooperation with JICA.	
<b>(1) Overall Goal</b>	
Strengthening of reproductive health education through improvement of comprehensive capacities in planning, producing and providing educational teaching materials.	
<b>(2) Project Purpose</b>	
The project purpose is to strengthen the reproductive health education in the Republic of Tunisia through enhancing institutional capacity of ONFP in developing, producing and utilizing the educational materials with an emphasis on "Youth and Reproductive Health" and training in the field of communication skills.	
<b>(3) Outputs</b>	
- Regarding the overall goal, the status in sexual and reproductive health of youth and	

adolescents is improved.

- The expertise of ONFP, in the field of reproductive health, contributed to improve the capacity of francophone African and Arab countries through South-South cooperation.

**(4) Inputs** (as of the Project's termination)

**Japanese Side:**

**Long-term Expert:** 2 / **Equipment:** 123,836 Yens

**Short-term Expert:** 3 / **Local cost:** 39,415 Yens

**Trainees received:** 12 / **Others:** 0 Yen

**Tunisia's Side:**

**Counterpart:** 32 / **Equipment:** No data **Tunisian Dinars ( Yen)**

**Land and Facilities:** No data **Tunisian Dinars ( Yen)** / **Local Cost:** No data **Tunisian Dinars ( Yen)**

**Others:** No data **Tunisian Dinars ( Yen)**

**2. Evaluation Team**

<b>Members of Evaluation Team</b>	Pr. Chokri ALLANI Dr. Besma KHIARI	
<b>Period of Evaluation</b>	15 January 2006 – 15 March 2007	<b>Type of Evaluation : Ex-post</b>

**3. Results of Evaluation**

**3-1. Summary of Evaluation Results**

**(1) Impact**

- Better strategy formulation of ONFP which rests now on an improved collection and analysis of data, and better studies are available for the policy-makers.
- Net increase in spontaneous and voluntary health consultation by youths.
- Youths reached by IEC are tremendously increased 15% in 2001 -> 40% in 2006.
- The success of YRH Project led by JICA encouraged new backers to invest in this field (example: GENUITI for issues related to medical interruption of unwanted pregnancies)
- The impact is also assessed on the level of the increasing recruitment of new staff including psychologists, educators and midwives.
- Increasing financial revenues for the Printing Division of ONFP, profits were around 470,000 TD in 2006 (around 43 Million Japanese Yen, Rate: 1TND = 92.45 JPY).

**(2) Sustainability**

The sustainability of ONFP and the Project results are quite high.

- Two years after the end of the project, ONFP is entirely capable of securing the continuity with an adequate performance level.
- The calendars of the planned actions in YRH go up to 2030 with more width and more specificity.
- Additional recruitments are designed to manage and achieve the laid down goals.
- Acquired technical knowledge is still applicable.
- Increasing awareness and confidence of youths.
- Continuous transfer of the knowledge acquired particularly in adolescentology to central and regional persons in charge.
- The provided services will not be free anymore starting from 2016; a strategic choice of ONFP which will ensure a long-term sustainability of the program, while many other international donors are becoming more involved (e.g. Spanish cooperation).

### **3-2. Factors that have promoted project**

#### **(1) Impact**

- JICA assistance through the involvement of Japanese experts and volunteers.
- JICA Technical Training program
- Usage of the Japanese model such as the organizational model of the JOICFP (Japanese Organization for International Cooperation in Family Planning).

#### **(2) Sustainability**

- Sustainability is secured where under the tutorship of the Ministry of Health, ONFP is a key public organization for population policy whose mission is to formulate population policies, to coordinate related ministries and NGOs, and to implement medical and IEC services in the field of RH.
- ONFP has enough institutional capacity to reach most of youth population.
- ONFP is sound financially, and future government policies will allow it to keep this sustainable for the long-term.

#### **(3)Others**

Government overall policies on health and education are perceived by international organizations as one of the best in the developing countries which would have a positive impact on similar programs.

### **3-3. Factors that have inhibited project**

#### **(1) Impact**

- Communication skills of some Japanese experts and senior volunteers.
- Obsolescence of Audio Visual equipment.
- Insufficient staff training at an international level.

#### **(2) Sustainability**

- Same reasons as above had and still have a negative impact on the project.
- Project needs more follow up on the long term for adjustments and extension to other thirds parties through triangular cooperation.

#### **(3)Others**

(No remark)

### **3-4. Conclusions**

The project has largely reached this reached its goal of reaching more youths for health education, and long-term sustainability is ensured. Moreover, Tunisians are applying these positive experiences to the profit of third countries and NGOs in Africa as they even produced the strategic health plan for Niger.

**3-5. Recommendations**

- In order to improve the quality of IEC services, the monitoring system (established in 2004) has to be improved. The results issued from it should be utilized to apply them internationally.
- Production and diffusion of a document about the experience aiming at its extension for the benefit of other countries or regions.

**3-6. Lessons Learned**

- The Japanese model is a lessons-generator in a number of issues.
- Ability of analysis is improved for SRH centers.
- Production of appropriate assistance thorough for instance the setting up of a special committee for technical training.
- Combination package of training materials and training strategy, oriented for Inter-Education Program, is an effective methodology to induce a behavior change.

**3-7. Follow-up Situation**

Keep a watch on this experience, support to be enlarged to African third countries. Set up regular training and work shops for African by Tunisians.

事後評価調査結果要約表

評価実施部署：チュニジア事務所

1. 案件の概要	
国名：チュニジア	案件名：リプロダクティブ・ヘルス教育強化プロジェクト
分野：人口／家族計画	協力形態：プロジェクト方式技術協力（現：技術協力プロジェクト）
所轄部署：人間開発部第三グループ母子保健チーム	協力金額：（データなし）
協力期間	1999年9月15日～2004年9月14日
	先方関係機関：国家家族人口公団（ONFP） 日本側協力機関：R/D 締結時の名称（現名称）東京都、大阪大学、（財）家族計画国際協力財団（JOICEF）、（財）キリスト教視聴覚センター
他の関連協力：第三国研修、草の根無償、シニア海外ボランティア	

### 1-1 協力の背景と概要

チュニジア政府は、人口増加を抑制するために、1966年以来家族計画の事業を実施している。JICAは、1993年3月より1998年3月に亘り、チュニジア側実施機関ONFPと共に、IECに主眼を置いて、家族計画に関する啓蒙機材政策を主な内容として、人口教育促進プロジェクトを実施した。ONFPは、本プロジェクトにより作成された家族計画普及用のビデオ教材、印刷教材を用い、チュニジア南部のモデルエリアであるタタウイン、カスリーン県にて事業を実施し、啓蒙活動が行われた。

その後、家族計画の大きな流れは、人口政策から、母子・家族の保健に移った。そして、1994年に開催されたカイロ国際人口開発会議(ICPD)において、青少年のリプロダクティブ・ヘルスが、重要な論点として提唱された。チュニジアは、上述のプロジェクトにおいて培われた教材製作技術を基盤とし、次のステップとして、青少年や壁地を考慮したリプロダクティブ・ヘルス全般の協力を要望することとなった。

### 1-2 協力内容

1999年9月より、技術協力プロジェクトが、5年間の計画で、JICAの協力を得て、国家人口家族公団(ONFP)により実施された。

#### (1) 上位目標

青少年の性とリプロダクティブ・ヘルス(青少年RH)の状態が向上する。

#### (2) プロジェクト目標

青少年RHに関するIEC活動を通じてONFPの組織力が強化する。

#### (3) アウトプット(成果)

1) 青少年RHに関するようその分析能力が強化される。

2) 適切な教材が作成され、配布される。

3) ONFP地方支部とNGOの連携によって青少年RHに関する活動が展開される。

4) IEC活動のモニタリングとフォローアップのためのシステムが確立される。

#### (4) 投入(プロジェクト終了時)

日本側:

長期専門家派遣	8名	機材供与	1.25億円
短期専門家派遣	20名	ローカルコスト負担	0.40億円
研修員受入	12名	その他	0億円
			総額 1.65億円

相手国側:

カウンターパート配置 33名 機材購入 \_\_\_\_\_ 現地通貨 (データなし) \_\_\_\_\_ 億円

土地・施設提供 \_\_\_\_\_ ローカルコスト負担 \_\_\_\_\_ 現地通貨 (データなし) \_\_\_\_\_ 億円

その他

## 2. 評価調査団の概要

調査者	(評価:アラニ・ショクリ、ボルジュ・セドリア・テクノパーク、事業コンサルタント) (評価:ヒアリ・ベスマ、チュニス大学、助教授)
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調査期間 2007年1月15日～2007年3月15日 評価種類:事後評価

## 3. 評価結果の概要

### 3-1 評価結果の要約

#### (1) インパクト

- ・ ONFP において、情報の収集・分析能力が向上し、より良い戦略を策定できるようになり、また、政策決定者にとっても、必要な研究の成果が参照できるようになった。
- ・ 青少年が、自主的にリプロダクティブ・ヘルスに関する診断を受けるようになった。
- ・ IEC 事業の対象となる青少年の割合が飛躍的に増加した（2001年 15%→2006年 40%）。
- ・ JICA のリプロダクティブ・ヘルス分野における技術プロジェクトの成功により、この分野において新たに事業を支援する者が現れた（例：望まぬ妊娠の人工中絶治療に関する GENUITI など）。
- ・ 心理学者、教育者、そして、助産婦を含む新しい人員が雇用された。
- ・ ONFP の印刷部門において、収入が増加した（2006年実績として 470 千ディナール÷43 百万円。1ディナール=92.45 円）

#### (2) 自立発展性

ONFP および技術協力プロジェクトの継続性は極めて高い。

- ・ 技術協力プロジェクトの終了後 2 年を経て、ONFP は、適切な功績を示しながら、能力的に持続性を十分に保っている。
- ・ 青少年リプロダクティブ・ヘルスに関する事業計画期間は、2030 年までに至り、その内容は、より広く且つ特化したものとなっている。
- ・ 上述の計画を実現して目標に到達するため、新たな人員雇用が計画されている。
- ・ 習得した技術を活かすことが出来る。
- ・ 青少年においては、ONFP の事業が周知され、且つ、信頼が置かれている。
- ・ 青少年の性行動に関する知識が、中央および地方の担当者に絶え間無く伝達されている。
- ・ 現在行われている各種サービスは、2016 年以降有料となる。これは、ONFP が長期的な事業の継続性を保つ為に戦略的に選択したものである。一方、他の国際協力関係機関が支援を継続している（スペインの協力など）。



### 3-2 プロジェクトの促進要因

#### (1) インパクト発現を促進した要因

- ・ 日本人専門家およびボランティアの参加により JICA の支援を受けた。
- ・ JICA により研修事業が実施された。
- ・ 日本の「家族計画国際協力財団 (JOICEF)」の様な組織の事業モデルが採用された。

#### (2) 自立発展性強化を促進した要因

- ・ 保健省管轄の下、ONFP は、国民に対するリプロダクティブ・ヘルスの事業実施の主要団体として、政策を策定し、関連省庁や NGO と連携をし、また、IEC や医療サービスを行うことで、持続性が保障されている。
- ・ ONFP は、青少年に対する事業を推進するだけの十分な組織力がある。
- ・ ONFP は、経済的に健全な運営をしており、それゆえ、政府が、将来的にも長期的な事業の持続性を促す政策を保障することができる。

#### (3) その他の促進要因

- ・ チュニジア政府が国民に対して進める健康と教育に関する政策全般は、諸国際機関によって開発途上国の中で最も優れたものの一つとして認知されており、それゆえ、他国の同様の事業に対しても、良い影響を与えている。

### 3-3 プロジェクトの阻害要因

#### (1) インパクト発現を阻害した要因

- ・ 日本人専門家およびボランティアの言語伝達能力の弱さ。
- ・ 技術協力プロジェクトで供与された視聴覚機材が時代遅れのものになっていること。
- ・ ONFP スタッフに対する国外での研修が少なかったこと。

#### (2) 自立発展性強化を阻害した要因

- ・ 上述した要因の幾つかは、ONFP の事業実施において、引き続きマイナスの影響を及ぼしている。
- ・ 技術協力プロジェクトの成果が日本・チュニジア三角協力を通じて第三者に対して拡張・適応されるためには、フォローアップ事業が必要となっている。

#### (3) その他の阻害要因

(特になし)

### 3-4 結論

技術協力プロジェクトは、リプロダクティブ・ヘルス教育分野の事業が、より多くの青少年を対象とすることにより、また、長期的な持続性が保障されていることにより、その目的に十分到達したと言える。加えて、チュニジア側は、この成果を第三国やアフリカの NGO に適応するように努めており、その例として、ニジェール国においてリプロダクティブ・ヘルス戦略を作成するまでに至っている。

### 3-5 提言 (当該プロジェクトに関する具体的な措置、提案、助言)

- ・ IEC 関連のサービスを向上するためには、2004 年に設置された事業モニタリング制度を向上することが必要である。
- ・ 技術プロジェクトによる成果を他国や他地域に拡張するためには、この経験に関する資料の作成および普及が必要である。

### 3-6 教訓 (当該プロジェクトから導き出された他の類似プロジェクトの発掘・形成、実施、運営管理に参考となる事柄)

- ・ 日本型の事業モデルは、多くの課題において、教訓を生み出す役割を持っていること。
- ・ リプロダクティブ・ヘルス・センターにおいて、事業を通じ、分析能力が向上したこと。
- ・ 技術研修のための特別委員会を設立するなどの、必要且つ相応しい支援の方法を学んだこと。
- ・ 研修機材と研修戦略を組み合わせることで、行動変容を引き起こす効果的な方法を確立できること。

### 3-7 フォローアップ状況

技術協力の経験に照らし合わせ、アフリカ第三国への支援が拡大される予定である。チュニジア側により、アフリカを対象とした定期的な研修やワークショップが開催される。

## Third Party Review by External Experts

### Ex-Post Evaluation on the Project for Strengthening of Reproductive Health Education

\* Concerning to the significance of the project, it is clear that this project responded to the demand of the partner country, which needed strengthening of Reproductive Health Education through enhancing institutional capacity of ONFP in developing, producing and utilizing the educational materials with an emphasis on "Youth and Reproductive Health" and training in the field of communication skills. At the same time, this project was also in line of Japanese policy on ODA in bridging the gap between quality of life on coastal and inland regions.

\* Concerning to the success of the project, it is obvious that since the project started on September 1999, its purpose to strengthen the reproductive health education in the Republic of Tunisia through enhancing institutional capacity of ONFP in developing, producing and utilizing the educational materials with an emphasis on "Youth and Reproductive Health" and training in the field of communication skills was attained.

\* Concerning to the evaluation process, it is unquestionable that the evaluation process was conducted logically and objectively. The found result, conclusion, and recommendation were also reasonable.

#### 1 Evaluation Framework

Reference page No. of  
'JICA Project  
Evaluation Guideline'

	(1) Time Frame of Evaluation Study	97
A	Necessary field survey activities such as data collection and discussion with counterparts are appropriately set within the time frame of the evaluation study. Time frame also contains preparations such as distribution of questionnaires, and are appropriate in terms of timing, length and schedule of the evaluation study.	
	(2) Study Team	107
A	Team members are assigned on a impartial basis, and are with balanced specialty.	
Comment		

#### 2 Data Collection and Analysis

	(1) Evaluation Questions	51
A	Evaluation questions are in line with evaluation purposes and set properly in the evaluation grid. General questions as to the five evaluation criteria are narrowed down to more specific sub questions to identify necessary information/data to be collected.	
	(2) Data Collection	72
A	Data collection is conducted based on the evaluation grid, and is sufficient for obtaining answers for evaluation questions. Additional information are collected for unexpected and newly confronted questions during the process.	
	(3) Measurement of Results	61
A	Achievement level of overall goal is examined on the basis of appropriate indicators, being compared with targets.	
	(4) Examination of Causal Relationship	62
A	The causal relationships whether the effects for the beneficiaries resulted from the project is examined either in a qualitative or quantitative manner (i.e. Are the effects at the overall goal level caused by the project intervention?)	

Comment
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### 3 Evaluation Results

	(1) Impact	57, 85-86
A	Perspectives for evaluation of 'Impact' ( e.g. achievement level of the overall goal, causal relationships between the outcome of the project and overall goal, ripple effects) are substantially covered. Grounds for judgment are clearly stated in a convincing manner.	
	(2) Sustainability	58, 85-86
A	Perspective for evaluation of 'Sustainability' ( e.g. probability of activities to be continued and outcomes to be produced in terms of 1)policies and systems, 2) organizational and financial aspects, 3) technical aspects, 4) Society, Culture and environment and ) are substantially covered. Grounds for judgment are clearly stated in a convincing manner.	
	(3) Factors Promoting Sustainability and Impact	85-86
A	Promoting factors on 'Impact' and 'Sustainability' are analyzed properly based on the information obtained through evaluation process.	
	(4) Factors Inhibiting Sustainability and Impact	85-86
A	Inhibiting factors on 'Impact' and 'Sustainability' are analyzed properly based on the information obtained through evaluation process.	
	(5) Recommendations	87-88
A	Recommendations are made thoroughly based on the information obtained through the process of data analysis and interpretation. Recommendations are specific and useful for feedbacks and follow-ups, preferably being prioritized with a time frame.	
	(6) Lessons Learned	87-88
A	Lessons learned are derived thoroughly based on the information obtained through the process of data analysis and interpretation. Lessons learned are convincing and useful for feedbacks, being generalized for wider applicability.	
Comment		

### 4 Structure of Report

	(1) Writing Manner	89,103
A	Logical structure and major points are clearly described in an easily understandable manner.	
	(2) Presentation of Primary Data and Utilization of Figures	89,103
A	Sufficient primary data such as on the target, contents and results of interviews and questionnaires are presented properly in the report. Figures and tables are utilized effectively to present statistics and analysis results.	
Comment		

### 5 Overall Review based on 'Criteria for Good Evaluation'

	(1) Usefulness	13-14
A	In light of the effective feedback to the decision-making of the organization, clear and useful evaluation results are obtained.	
	(2) Impartiality and Independence	13-14
A	Evaluation is impartially conducted in a neutral setting	
	(3) Credibility	13-14
A	In light of the specialties of evaluators, transparency of the evaluation process and appropriateness of the criterion of judgment, evaluation information are credible.	
	(4) Participation of Partner Countries	13-14

A	Partner countries' stakeholders participate actively in the process of evaluation, not just provide information.
Comment	

### **5 Overall Comment**

The evaluation report synthesizes very well the project, its components and its overall objective. It deals very properly with the relevance, efficacy, and efficiency of The Project for Strengthening of Reproductive Health Education.

The evaluation was intended to be forward-looking and has remarkably touched upon the impact issue and the sustainability, two main and primordial features of the success of projects.

*Date*

Sep. 07

*Name of the Third Party*

Dr. Tarek Chehidi

*Designation*

Advisor to the Minister

*Name of the Institution*

Ministry of Education and  
Training