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1. 現地調査日程

			JICA アフリカ部 神 団長	IMCJ 仲佐団員	JICA 協力隊事務局 都竹団員	コンサルタント 喜多団員	コンサルタント 山本団員	
			総括	HIV/エイズ 予防	評価管理	プログラム 評価分析 1	プログラム 評価分析 2	
1	8/24	日	羽田→関空→ ドバイ	羽田→関空→ ドバイ	羽田→関空→ ドバイ	成田→ソウル →ドバイ	羽田→関空→ ドバイ	
2	8/25	月	→ナイロビ	→ナイロビ	→ナイロビ	→ナイロビ	→ナイロビ	
3	8/26	火	JICA 協議、在ケニア日本大使館表敬、政府・ドナー協議					
4	8/27	水	政府・ドナー協議					
5	8/28	木	サイト調査					
6	8/29	金	サイト調査					
7	8/30	土	サイト調査					
8	8/31	日	資料整理					
9	9/1	月	ワークショップ準備					
10	9/2	火	政府・ドナーワークショップ					
11	9/3	水	ナイロビ→ アジスアベバ	資料整理				
12	9/4	木		ナイロビ→ ドバイ	ナイロビ→ ドバイ	ナイロビ→ ドバイ	ナイロビ→ ドバイ	
13	9/5	金		→関空→羽田	→関空→羽田	→ソウル→ 成田	→関空→羽田	

2. 主要面談者リスト

<JICA 本部>

江原 由樹	経済開発部第二グループ（資源・エネルギー）資源・省エネルギーチーム （前 JICA ケニア事務所保健担当）
伊藤 亜紀子	人間開発部第四グループ（保健2）感染症対策チーム
牧本 小枝	人間開発部第四グループ（保健2）感染症対策チーム
定本 ゆとり	無償資金協力部業務第二グループ（教育・保健）保健医療チーム
浅野 誠三郎	青年海外協力隊事務局海外第二グループアフリカチーム
狩森 由美子	青年海外協力隊事務局海外第二グループアフリカチーム（エイズ担当）

<JICA ケニア事務所>

高橋 嘉行	所長
河澄 恭輔	次長
瀧本 康平	保健担当所員
林 信秀	ボランティア調整員
千葉 暁子	フィールド調整員

<青年海外協力隊：エイズ対策関連ボランティア>

遠山 由香梨	ニャンザ州キスム県保健局エイズ対策
松岡 裕子	ニャンザ州ニャミラ県社会保健事務所エイズ対策
谷田 景子	イースタン州マクエニ県保健事務所
三木 博文	ケニアエイズ NGO 協会（KANCO）

<エイズ対策強化プロジェクト（SPEAK）>

竹中 優子	チーフアドバイザー／M&E を主軸とした保健行政強化
宮家 佐知子	業務調整／行動変容／教材作成

<在ケニア日本大使館>

岩谷 滋雄	特命全権大使
大村 昌弘	公使
西村 絵里子	外部嘱託員（ルワンダ・ブルンジ担当）、 人間の安全保障・草の根無償資金協力
横谷 薫	在外専門調査員

<ケニア政府関係者>

- Ministry of Public Health and Sanitation
James W. Nyikal, Permanent Secretary
S. K. Sharif, Acting Director of Public Health and Sanitation

- Ministry of Medical Services
Hezron Nyangito, Permanent Secretary

- National AIDS/STD, TB and Leprosy Control Programme (NASCO)
Ibrahim Mohamed, Head
Carol Ngare, VCT Coordinator
John O. Wanyungu, Program Officer, M&E/VCT
Dorcas M. Kameta, Program Manager, Social and Communications Program
Janet Ogega, Program Officer, Blood Safety/ VCT
Edward Musau, Program Officer, Blood Safety
James Mwalloh, Program Manager, Blood Safety

- National AID Control Council (NACC)
Alloys S.S. Orago, Director, Professor of Clinical Immunology and Epidemiology
of Infectious Diseases
Sobbie Mulindi, Deputy Director, Coordination and Support
Regina Ombam, Head Strategy
Alice Natecho, Program Officer – I.E.C./ GLIA Focal Point

- PASCO/ DASCO
Charles Okal, PASCO, Nyanza
Peter Okoth, Provincial Epidemiologist, Nyanza
Omondi Owino, DMOH, Nyamira
Aska Bosibori Basweti, DPHN, Nyamira
David O Gekara, DASCO, Nyamira
Gladys Onsomu, Nursing Officer-in-charge, Nyamira District Hospital
Aska M. Nyamnaro Ogenbo, KECHN/VCT Counsellor, Nyamira District Hospital
Evans O. Sagwe, Volunteer/ VCT Counsellor, Nyamira District Hospital
Yuanita Anyango Hongo, DASCO Nyando

<援助機関>

- Lynn Krueger Adrian, Director, Office of Population and Health, USAID
- Girmay Haile, Monitoring and Evaluation Advisor, UNAIDS
- Peter Nderitu, Programme Manager, German Foundation for World Population (DSW)
- Zebedee M. Mkala, Programme Officer, DSW

- Isaiah Tarui, Technical Advisor, HIV Counseling and Testing, Centers for Disease Control (CDC)
- James Odek, Technical Advisor, Care and Treatment, CDC
- Peter Mwarogo, Country Director, Family Health International (FHI)
- Anna-Carin Kandimaa, Health Sector Policy Advisor, German Technical Cooperation (GTZ)
- Rex G. Mpazanje, Country Officer (HIV), World Health Organization (WHO)

3. 参考文献リスト

<ケニア国保健政策文書>

- Kenya National HIV/AIDS Strategic Plan (2005-2009)
- The Second National Health Sector Strategic Plan of Kenya (NHSSPII : 2005-2010)
- Kenya National Strategy for VCT Scale-up
- Investment Programme for Economic Recovery Strategy (IP-ERS: 2003-2007)
- Economic Recovery Strategy for Wealth and Employment Creation (2003-2007)¹
- Kenya Demographic and Health Survey 2003 (次回は 2008 年の予定)
- Health Sector Performance Report (July 2005-June 2006)
- Vision 2030 final version (full version, popular version, mid-term plan)
- Kenya AIDS Indicator Survey (KAIS) 2007
- Strategy for the Delivery of Level One Service: Taking the Kenya Essential Package for Health to the Community, Ministry of Health (June 2006)
- Guidelines for Field Operations at the NACC Decentralized Structures, Second Edition (January 2007)
- Health Sector Performance Report (July 2005-June 2006)

<JICA プログラム関連文書>

- JICA 国別事業実施計画 (2005 年 7 月改訂版)
- 対ケニア JICA プログラム「エイズ予防プログラム」、
JICA ケニア事務所 (2006 年 3 月 20 日)
- 技プロ中間評価報告書 (英文)
- 技プロ事業進捗報告書 (第 1 期～第 4 期)
- 第 1 回 JCC 記録 (技プロ)
- 無償資金協力「HIV/AIDS 対策計画」事前調査報告書
- JOCV 派遣表
- Draft National Guideline of Mobile VCT
- 戦略性向上のための指針：ボランティア事業実施の手引き、
青年海外協力隊事務局 (2008 年)
- USAID-Japan Partnership for Global Health, JICA Kenya (December 2007)

<他援助機関・援助協調>

- Kenya Joint Assistance Strategy (2007-2012)
- Report on Joint Annual Programme Review 2006 (NACC)
- United Nations Development Assistance Framework (UNDAF) Kenya 2004-2008, March 2003
- Uniting the World Against AIDS, UNAIDS Kenya, 2007
- Executive Board of UNICEF (E/CEF/2003/P/L.2/Rev.1) : Revised Country Programme Document, Kenya, October 30, 2003

¹ ケニア政府が作成したが、PRSP 文書としての体裁が整っていないとの注文が WB および IMF からあったため、2004 年に IP-ERS を作成した経緯がある。ERSWE と IP-ERS の内容は、それほど変わらないものである。

- Executive Board of UNFPA (DP/FPA/CPO/KEN/6) : Country Programme Outline for Kenya, March 13, 2003
- Executive Board of WFP (WFP/EB.3/2003/7/2) : Country Programme-Kenya 10264.0 (2004-2008), July 22, 2003
- UNDP Country Programme Action Plan (2004-2008), Government of Kenya and United Nations Development Programme
- Strengthening district health sector responses to HIV/AIDS in Sub-Saharan Africa, WHO, July 2006
- Epidemiological Fact Sheet on HIV/AIDS and Sexually Transmitted Infections (Kenya), WHO/UNICEF/UNAIDS, December 2006
- Project Appraisal Document on a Proposed Credit to the Republic of Kenya for a Total War Against HIV/AIDS Project, World Bank, May 9, 2007
- Kenya Global Fund Round 2 Portfolio of Grant
- Kenya Global Fund Round 7 Proposal
- Brochure on Nuru ya jamii Project (October 2005-September 2006), Family Health International
- Engender Health E-News
- CIDA, Programs and projects (2007)
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- UNAIDS/WHO, 世界の HIV/AIDS 流行状況 (2003 年、2004 年、2006 年)
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- The ROAD Project: Safeguarding progress against HIV and AIDS, Family Health International (FHI)
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- 1st Interim Narrative Report (1 August 2006 –31 July 2007) , “Adolescent Sexual and Reproductive Health (ASRH) Initiative through Youth Friendly Voluntary Counseling and Testing Services (VCT’s) and Youth Clubs as a component of DSW’s Youth to Youth (Y2Y) Central Support Service” submitted to the European Commission, the German Foundation For world Population- Deutsche Stiftung Weltbevölkerung (DSW) (August 15, 2007)

<その他>

- 草の根・人間の安全保障無償資金協力 (HIV/AIDS 関連案件の請訓表、2000 年度以降)
- 沖縄感染症対策イニシアティブ (外務省、2001 年)
- 保健と開発に関するイニシアティブ (外務省、2005 年)
- 政府開発援助大綱 (外務省、2003 年)
- 政府開発援助に関する中期政策 (外務省、2005 年 2 月)
- アフリカ開発のための新パートナーシップ (外務省、2003 年 3 月)
- ケニア国別援助計画 (外務省、2000 年)
- 開発課題に対する効果的アプローチ : HIV/AIDS 対策 / 2002 年
- サブサハラアフリカにおける HIV/エイズ対策協力方針 (2006 年 6 月)

- ・エイズ政策の転換とアフリカ諸国の現状　－包括的アプローチに向けて－
（アジア経済研究所、2005年）
- ・ボランティア事業実施の手引き　－戦略性向上のための指針－、青年海外協力隊事務局
（2008年）

4. ケニアにおける主要国連機関／国際機関の HIV/ エイズ対策分野の Results Matorix

UNDAF

AREA OF COOPERATION 2: TO CONTRIBUTE TO THE REDUCTION OF THE INCIDENCE & MITIGATION OF THE PSYCHO-SOCIAL AND ECONOMIC IMPACT OF THE HIV/AIDS, MALARIA AND TB			
National Development Goals: To stop the spread of HIV/AIDS and reduce the impact on Kenyans through reduction of HIV prevalence by 20 to 30%.			
Expected outcomes	Brief description of co-operation strategies	Major lines of action	Contributing agencies
Outcome 3 Overall HIV/AIDS and TB prevalence reduced	Supporting HIV/AIDS and TB prevention programs. Supporting activities on advocacy, communication and resources mobilization. Supporting sub-regional initiatives. Contributing to the improvement of the nutrition and care of the people affected and infected by HIV/AIDS, TB.	<ul style="list-style-type: none"> - Support NACC to advocate gender mainstreaming in programming and implement the developed communication strategy on HIV/AIDS, including production and distribution of school learning materials. - Support the establishment and strengthening of integrated youth friendly sexual and RH services, and drug abuse counselling within existing health facilities and youth centres. - Develop mechanisms/structures for targeting HIV/AIDS/STD/drug abuse prevention activities to the refugees and other special populations (IDP, military, police, CSW, OVCs, truckers and other uniformed personnel). - Support the development and implementation of a comprehensive package on VCT services according to the developed guidelines, including PMTCT. - Support Ministry of Health to implement a comprehensive package for accelerated access to HIV/AIDS care including procurement of generic ARVs. - Disseminate generic information on RH and safe sexual behaviour and drug abuse prevention to youth in and out of school, including street children. - Support the expansion of the DOT to the community. - Support the procurement and distribution and use of both male and female condoms. - Provide food assistance to HIV/AIDS and TB patients and their families. 	<p>UNAIDS WHO UNRPA WFP UNDP UNESCO UNHCR IOM UNIFEM UNODC UNICEF ILO WB UNIC</p>
			Programme modality UN integrated work plan on HIV/AIDS prevention. DOT strategy.

UNDAF area of cooperation 2: To contribute to the reduction of the incidence of and mitigation of the psychosocial and economic impact of the HIV/AIDS epidemic, malaria and tuberculosis				
UNFPA Goal	Outcome	Indicators	Outputs and Key Indicators	Resources
[Reproductive health subprogramme]	Reduced prevalence of HIV/AIDS and tuberculosis	<ul style="list-style-type: none"> By 2008, HIV prevalence in young men and women aged 15-24 reduced by 20-30 per cent 	<p>Output 3 (reproductive health): Improved access to sexual and reproductive health information and youth friendly services</p> <p>Output indicators:</p> <ul style="list-style-type: none"> By 2008, percentage increase in facilities offering youth friendly services in the project sites By 2008, increase in proportion of young people by sex and age seeking reproductive health information and services, including voluntary counselling and testing, in project sites 	\$2 million from regular resources and \$1 million from other resources
UNDAF area of cooperation 3: To contribute to the strengthening of national and local systems for emergency preparedness, prevention, response and mitigation				
[Reproductive health subprogramme]	Strengthened response to and management of refugees' and internally displaced persons' needs and rights	<ul style="list-style-type: none"> By 2008, CPR increased in camps for internally displaced persons and refugees By 2008, reduced teenage birth rate among internally displaced persons and refugees 	<p>Output 4 (reproductive health): Improved access to integrated, high-quality reproductive health services and rights, including HIV/AIDS prevention for internally displaced persons, especially women and young people</p> <p>Output indicators:</p> <ul style="list-style-type: none"> Proportion of paralegal personnel and service providers trained in sexual and reproductive health issues and rights serving internally displaced persons Percentage increase in deliveries attended by skilled personnel in internally displaced persons' camps By 2008, up-to-date needs assessment data available to respond to reproductive health needs and rights in emerging situations of internally displaced persons Number of service delivery points offering at least three modern methods of contraception, including emergency contraception 	\$0.5 million from regular resources and \$0.5 million from other resources

Summary Results Matrix					
UNICEF MTSP Priority Area	Key results expected in this priority area	Key Progress Indicators	Means of Verification	Major Partners, Partnership Frameworks and Co-operation Programmes	The expected key results in this Priority Area will contribute to:
Fighting HIV and AIDS	<p>Increased access to recommended core interventions in PMTCT</p> <p>Reduction of MTCT of HIV/AIDS from 10%-5% by 2008</p> <p>Reduce HIV transmission amongst young people</p>	% of women receiving the recommended PMTCT services	MOH and Project Reports	<p>Major Partners, Partnership Frameworks and Co-operation Programmes</p> <p>Ministry of Health, NASCOP, NACC, UNAIDS</p>	<p>UNDAF: Reduce further the spread of HIV/AIDS and improve the quality of life of those affected by HIV/AIDS; Increased access to basic social services.</p> <p>EFA: ... ensuring that the learning needs of all young people and adults are met through equitable access to appropriate learning and life skills programmes....</p> <p>MTSP: By 2005 reduce the proportion of infants infected with HIV by 20% and by 50% by 2010....</p> <p>WFFC: Promoting healthy lives, Combating HIV/AIDS</p> <p>MDGs: Comb at HIV/AIDS, malaria and other diseases</p>

UNDP

UNDAF Area of cooperation 2: TO CONTRIBUTE TO THE REDUCTION OF THE INCIDENCE & MITIGATION OF THE PSYCHO-SOCIAL AND ECONOMIC IMPACT OF HIV/AIDS. MALAWI AND TB
 Expected UNDAF outcome #3: Reduce further spread of HIV/AIDS and improve quality of life of those affected by HIV/AIDS
 UNDP Programme Component III a: Security from HIV/AIDS

Programme Outcome	Expected Outputs	Output targets	Indicative seed resources to supplement					Total
			2004	2005	2006	2007	2008	
<p>institutions etc) implementing HIV/AIDS programmes;</p> <p>i. Percentage of selected officials in favour of HIV testing increased by one third viz baseline sample.</p> <p>2. Impact mitigation Indicator:</p> <p>i. Number of people living with HIV/AIDS receiving adequate care and support increased by 10 percent.</p>	<p>b. At least 40 percent of MPs raise matching funds for UNDP micro-interventions in support of WFP food for people living with AIDS programmes.</p> <p>c. People living with AIDS supported through effective programming in synergy with WFP and UNICEF.</p> <p>d. Mechanisms/structures for targeting IDPs, refugees and other special populations and uniformed personnel.</p>	<p>i. 50 percent of constituencies in selected districts with policy, financial and political commitment for HIV programs.</p> <p>i. Increase the number of strategies developed and implemented.</p> <p>i. Availability of VCT services for special populations/ camps/ institutions with VCT services; ii. Increase in number of vulnerable population accessibility to information on HIV/AIDS.</p>	100,000	100,000	100,000	100,000	100,000	500,000
			120,000	120,000	120,000	120,000	120,000	600,000
			30,000	30,000	30,000	30,000	30,000	150,000

COUNTRY PROGRAMME—KENYA 10264.0 (2004–2008)—LOGICAL FRAMEWORK SUMMARY			
Goal at the national level	Performance indicators	Assumptions and risks	
To contribute to the Government's aim to reduce the number of the poor in the total population of Kenya and to achieve education for all through its poverty-reduction strategy	<ul style="list-style-type: none"> ➤ Number of poor in the total population reduced by 30 percent by 2010 ➤ Universal Primary Education achieved by 2005 and Education for All by 2015 ➤ Enhanced prevention and management of HIV/AIDS and malaria 	No major natural emergency occurs to overtake the planned activities and to divert resources Government policies are supportive	
Goal of the country programme	Impact indicators	Assumptions and risks	
To help poor, food-insecure households and communities (particularly those headed by women and/or other vulnerable groups) in the ASALs and other food-insecure areas to cope with seasonal food insecurity and improve their future food and livelihood security and living conditions	<ul style="list-style-type: none"> ➤ Net enrolment in primary schools, disaggregated by gender ➤ Percentage reduction in drop-out rate, disaggregated by gender ➤ Percentage decrease in the number of poor households in ASALs that need relief food assistance 	<p>The Government puts in place supportive food security, education and HIV/AIDS policies</p> <p>The Government and donors secure matching resources and non-food inputs to complement WFP food support</p>	
Purpose of the country programme (aggregate purpose of the three basic activities)	Outcome indicators	Assumptions and risks	
1. To contribute to the realization of the right of all children, especially girls, to education and knowledge through improved learning at pre-primary and primary schools	<ul style="list-style-type: none"> ➤ Five percent increase in completion rates of all students, particularly girls and slum children ➤ Retention in class (attendance records) for girls and boys 	Government is committed to achieving Universal Primary Education and Education For All	
2. To improve the food security of HIV/AIDS-affected households	<ul style="list-style-type: none"> ➤ Five percent increase in number of foster families adopting and caring for HIV/AIDS orphans 	Community-based structures are in place to oversee the care of the orphans Funds are available to produce and disseminate materials	

Project Development Objectives	Project Outcome Indicators	Use of Project Outcome Information
<p>The Project development objective is to assist Kenya to expand the coverage of targeted HIV and AIDS prevention and mitigation interventions through: (i) sustaining the improved institutional performance of the NACC; and (ii) supporting the implementation of the KNASP.</p>	<p>NACC composite score on the annual independent performance evaluation (see OM for definitions).</p> <p>Proportion of overall targets met for NACC-funded programs in:</p> <ul style="list-style-type: none"> • civil society/private sector (beneficiaries); and • public sector (beneficiaries) <p>Key outcome indicators for prevention and mitigation:</p> <ul style="list-style-type: none"> • Proportion of youth aged 15-24 reporting condom use in the last sexual encounter with a non-regular partner (of those reporting sexual intercourse with a non-regular partner in the last 12 months) [M&E 6, SC 5]. • Proportion of sexually active youth 15-24 who report having had sex with a non-spousal, non-regular partner in the past 12 months [M&E 5, SC 4a]. • Number of persons who undergo testing and counseling in the last 12 months [M&E 31, SC 9]. • OVC receiving care/support in the past 12 months [M&E 93, SC 8]. • Number of male and female condoms distributed in the last 12 months (SC 10). 	<p>Assess overall NACC performance and needs for further institutional strengthening and technical assistance.</p> <p>Assess the effectiveness of the NACC in directly funding and implementing programs and identify areas for further strengthening and technical assistance.</p> <p>Assess impact of NACC's performance in implementation of the KNASP in the areas of prevention and mitigation. Most of the ACTAfrica Scorecard indicators are included in the TOWA Project Results Framework. Those Scorecard indicators that are not in the Results Framework were omitted because the Project will not directly support activities that depend on those indicators.</p>

5. 現地調査用インタビュー票

ケニア国「エイズ予防プログラム」プログラム評価 JICA ケニア事務所保健担当へのインタビュー事項

本プログラム評価は、「JICA プログラム」の日本政策およびケニア開発戦略における位置づけと、プログラムの戦略性（プログラムとしてのシナリオの一貫性、プログラムの結果および実施プロセス）を評価し、評価結果をもって、今後、より戦略的なプログラムとしていくための提言を、抽出することを目的に実施されるものです。以下の点につき確認させていただきたく、ご協力をお願い致します。

1. プログラムの実施に関する事項

1. ケニア国における HIV/エイズ対策分野の支援額全体における JICA プログラムの占める割合（投入規模）
2. プログラム目標達成に向けた（プログラムの）進捗状況
3. プログラム目標を達成するにあたっての（現在みられる、あるいは潜在的な）促進要因と阻害要因
 - （1）プログラム実施体制の現状と課題
 - （2）プログラム目標達成のために必要な追加的措置の可能性、特に州レベルへの投入
 - （3）現行のプログラム期間終了後のビジョン（あれば）
4. プログラムを構成する案件間での連携状況と成果（既にみられる場合には具体的な成果、または、現時点ではみられないが期待される成果）、連携にあたっての促進要因と阻害要因
5. （プログラムの対象地域を全国としているが）技プロの重点地域 2 州での成果をいかにして他州に普及させ、全国レベルでの成果に繋げるかについての戦略
6. プログラムを構成する案件実施における他援助機関との協力状況と成果（既にみられる場合には具体的な成果、または、現時点ではみられないが期待される成果）、協力にあたっての促進要因と阻害要因
7. プログラム目標達成を念頭に置いた、他援助機関との協力促進のために現在具体的に行っていること、あるいは今後計画していること（あれば）
7. Kenya Joint Assistance Strategy の当該プログラムへの反映状況

2. 個別案件〔医療特別機材（2005 年供与の車両・IEC 機材）〕に関する事項

以下は個別案件に関する質問となりますが、国内インタビューを行った担当者より JICA ケニア事務所に確認をお願いしたいということでしたので、お伺いさせていただきます。

- （1）医療特別機材供与を計画する段階において、過去に実施されてきた供与との関連性などを考慮したか、あるいはその他に考慮した点
- （2）供与機材の現状
- （3）進捗状況把握の方法（モニタリング・報告の方法）
- （4）プログラム目標達成への供与機材の寄与（具体的な成果）
- （5）医療特別機材供与をプログラムの構成案件とする場合の教訓（あれば）

**ケニア国「エイズ予防プログラム」プログラム評価
日本人技プロ関係者に対するインタビュー項目**

本プログラム評価は、「JICA プログラム」の日本政策およびケニア開発戦略における位置付けと、プログラムの戦略性（プログラムとしてのシナリオの一貫性、プログラムの結果および実施プロセス）を評価し、評価結果をもって、今後、より戦略的なプログラムとしていくための提言を、抽出することを目的に実施されるものです。本プログラムの構成案件であるボランティア派遣に関する評価に必要な情報を収集するため、以下の点につき質問させていただきたく、ご協力をお願い致します。

A. プロジェクトに関する事項

1. 「国家エイズ対策戦略」に示されたケニアによる当該分野の取り組みに照らし合わせての技プロデザインの適切性（重点地域の選定や指標設定の適切性を含む）に関するプロジェクト側の見解
2. プロジェクトの進捗状況、およびプロジェクト実施の促進要因と疎外要因
3. プロジェクト実施における他援助機関との協力の有無と具体的な方法、（協力がある場合には）協力によって発現された（または、発現が期待される）成果、今後の協力の予定
4. プロジェクト実施にあたって、他援助機関との協力を促進する上での促進要因と阻害要因（あれば）
5. PDM には示されていないものの、実際には州において実施している活動（あれば）

B. プログラムに関する事項

1. 現行プログラムに対する見解、プログラムの構成や目的をどのように認識しているか。
2. プログラムにおけるプロジェクトの役割に関するプロジェクト側の見解、プログラムの1案件として本プロジェクトを実施するにあたって、配慮している点・困難である点
3. プログラム内における技プロとその他の構成案件（ボランティア、無償資金協力、医療特別機材供与）との具体的な連携と連携推進の仕組み、連携によって発現されている（または、今後発現されることが期待される）プロジェクト目標や上位目標達成に向けての相乗効果
4. プログラム内で技プロとその他の案件との連携を促進する上での阻害要因（あれば）
5. プログラムの「縦のシナリオ」を完成するための課題、具体的には、（プログラムの対象地域を全国としているが）技プロの重点地域2州での成果をいかにして他州に普及させ、全国レベルでの成果に繋げるかについて技プロの枠内で実施している活動
6. プログラムの「横のシナリオ」（構成案件間の連携）をより適切なものとするための課題（→上記4に関連）
7. 技プロが支援している Counseling and Testing Guideline が国家レベルで活用される可能性
9. 実績の確認

ケニア国「エイズ予防プログラム」プログラム評価
フィールド調整員 (FC) へのインタビュー項目

本プログラム評価は、「JICA プログラム」の日本政策およびケニア開発戦略における位置づけと、プログラムの戦略性（プログラムとしてのシナリオの一貫性、プログラムの結果および実施プロセス）を評価し、評価結果をもって、今後、より戦略的なプログラムとしていくための提言を、抽出することを目的に実施されるものです。本プログラムの構成案件であるボランティア派遣に関する評価に必要な情報を収集するため、以下の点につき質問させていただきたく、ご協力をお願い致します。

1. JICA プログラムに関する認識
2. JICA プログラムにおける自身の位置づけや期待されている事柄に関する理解
3. FC としての具体的な活動内容とこれまでの活動の成果
4. FC としての本来業務（ボランティアの調整）のほかに州レベルで実施している活動（あれば）
5. ボランティアをプログラムの構成案件とすることに伴う調整業務上の課題
6. ボランティアをプログラムの中で有効活用するための提案
7. 任地変更後のプログラムボランティアがプログラム目標達成に果たしうる役割・貢献

以上

ケニア国「エイズ予防プログラム」プログラム評価 ボランティア調整員へのインタビュー項目

本プログラム評価は、「JICA プログラム」の日本政策およびケニア開発戦略における位置づけと、プログラムの戦略性（プログラムとしてのシナリオの一貫性、プログラムの結果および実施プロセス）を評価し、評価結果をもって、今後、より戦略的なプログラムとしていくための提言を、抽出することを目的に実施されるものです。本プログラムの構成案件であるボランティア派遣に関する評価に必要な情報を収集するため、以下の点につき質問させていただきたく、ご協力をお願い致します。

1. JICA プログラムに関する認識
3. プログラムボランティアのプログラム目標達成への貢献（これまでの実績－任地変更前）
4. 任地変更後のプログラムボランティアがプログラム目標達成に果たしうる役割・貢献
5. ボランティアをプログラムの構成案件とすることに伴う調整業務上の課題
6. ボランティアに対するケニア政府の見解・評価
7. ボランティア調整員と FC との連絡体制の現状と課題
8. ボランティアをプログラムの中で有効活用するための提案

以上

ケニア国「エイズ予防プログラム」プログラム評価
(南部リフトバレー州、ニャンザ州、ウェスタン州に配属されていた)
ボランティアへのインタビュー項目

本プログラム評価は、「JICA プログラム」の日本政策およびケニア開発戦略における位置づけと、プログラムの戦略性（プログラムとしてのシナリオの一貫性、プログラムの結果および実施プロセス）を評価し、評価結果をもって、今後、より戦略的なプログラムとしていくための提言を、抽出することを目的に実施されるものです。本プログラムの構成案件であるボランティア派遣に関する評価に必要な情報を収集するため、以下の点につき質問させていただきたく、ご協力をお願い致します。

1. JICA プログラムに関する認識
2. JICA プログラムにおける自分の位置づけや期待されている事柄に関する理解
3. 派遣先での活動内容とこれまでの活動（任地変更前）の成果
4. ボランティア派遣が単独の案件としてでなく、プログラムの1つの構成案件として実施されていることによる、メリットおよびデメリット
5. ボランティアをプログラムの中で有効活用するための提案

以上

**Main Questions to NASCOP/MOH
for
Review of JICA’s Assistance to Kenya in Areas of Prevention of HIV/AIDS Infections**

The JICA Team, headed by Mr. Kimiaki Jin, Director of East African Team, Regional Department IV (Africa) will visit Republic of Kenya from August 25 through September 4, 2008 in order to collect information necessary to assess appropriateness and impact of the JICA’s assistance in areas of prevention of HIV/AIDS infections and draw lessons for a future assistance framework. During this visit, we would like to meet with you for discussion

1. Progress and Challenges in Areas of Prevention of HIV/AIDS Infection in Kenya

- 1) Main progress and challenges in “Priority Area 1: Prevention of New Infections” set under KNASP (2005/6-2009/10), especially “Promotion of Counseling and Testing.”
- 2) Contributing factors and constraining factors/difficulties to make progress toward the targeted achievements set in KNASP in areas identified (1) above. (Please provide us with statistics/data showing changes in measurable indicators from the year of 2004/5 to the latest)
- 3) Changes in budget allocation in areas of HIV/AIDS prevention.
- 4) Government’s capacities to raise funds for the prevention of HIV/AIDS
- 5) Main development partners with whom MOH/NASCOP has worked to implement the Program, especially in areas of Priority Area 1: Prevention of New Infections” set under KNASP (2005/6-2009/10), especially “Promotion of Counseling and Testing.” Areas of intervention/ activities that require more external supports.

2. JICA’s Contribution to Support Kenya to Challenges in Prevention of HIV/AIDS Infection

Components of JICA’s Assistance in Kenya in Areas of Prevention of HIV/AIDS Infections

- Technical assistance project for strengthening of People Empowerment against HIV/AIDS in Kenya (SPEAK Project) (2006-2009)
- Grant aid project for HIV/AIDS control (2007-2009)
- Equipment supply program for AIDS control and blood test (2005)
- Posting of Japanese Overseas Cooperation Volunteers (JOCV) in the area of prevention of HIV/AIDS at the district level in Riftvalley, Nyanza and Western Provinces (2005-2009) and a field coordinator at the provincial level.

- 1) JICA’s specific contribution through the components above to support NASCOP/MOH to improve management in areas of prevention of HIV/AIDS infections.
- 2) Your assessment on appropriateness and effectiveness of JICA’s interventions through the components above in order to reach goals identified in KNAP. Suggestions for improvement if any.

- 3) Comparative advantages/disadvantages of JICA assistance over other development partners working in the same areas.
- 4) (Specific Questions to C/Ps of SPEAK Project)
 - a) Effectiveness of Project design (Project purpose, Outputs, activities) to respond to specific challenges identified in KNASP.
 - b) Progress in implementation of the Project. Contributing factors and constrains in the progress of SPEAK Project.
 - c) (Expected) synergetic effects brought by the linkage between the SPEAK Project and three other components identified above toward the achievement of Project Purpose “The number of Kenyans (especially the young aged 15-24 years in Southern Rift Valley and Nyanza Provinces)

It would be very much appreciated if you could make time for our discussion and provide with relevant data/information for the purpose of our review. Thank you for your cooperation in advance.

Main Questions to PASCO
for
Review of JICA's Assistance to Kenya in Areas of Prevention of HIV/AIDS Infections

The JICA Team, headed by Mr. Kimiaki Jin, Director of East African Team, Regional Department IV (Africa) will visit Republic of Kenya from 25 August through 4 September, 2008 in order to collect information necessary to assess appropriateness and impact of the JICA's assistance in areas of prevention of HIV/AIDS infections and draw lessons for a future assistance framework. During this visit, we would like to meet with you for discussion.

1. Progress and Challenges in Areas of Prevention of HIV/AIDS Infection in Kenya

- 1) Main progress and challenges in "Priority Area 1: Prevention of New Infections" set under KNASP (2005/6-2009/10) at the Province, especially "Promotion of Counseling and Testing."
- 2) Contributing factors and constraining factors/difficulties to make press toward the targeted achievements set in KNASP in areas identified (1) above. (Please provide us with statistics/data showing changes in measurable indicators from the year of 2004/5 to the latest)
- 3) Main development partners working at the Province for "Priority Area 1: Prevention of New Infections" set under KNASP (2005/6-2009/10), especially "Promotion of Counseling and Testing." Areas of intervention /Activities that require more external supports.

2. JICA's Contribution to Support Kenya to Challenges in Prevention of HIV/AIDS Infection

Components of JICA's Assistance in Kenya in Areas of Prevention of HIV/AIDS Infections

- Technical assistance project for strengthening of People Empowerment against HIV/AIDS in Kenya (SPEAK Project) (2006-2009)
- Grant aid project for HIV/AIDS control (2007-2009)
- Equipment supply program for AIDS control and blood test (2005)
- Posting of Japanese Overseas Cooperation Volunteers (JOCV) in the area of prevention of HIV/AIDS at the district level in Riftvalley, Nyanza and Western Provinces (2005-2009) and a field coordinator at the provincial level

- 1) In the lights of local needs in areas of prevention of HIV/AIDS infections, appropriateness of the selection of districts as a target of JICA's assistance.
- 2) Your assessment on appropriateness and effectiveness of a package of JICA's assistance shown above in the selected districts.
- 3) Specific contributions of each component for prevention of HIV/AIDS infections in the selected district (What have been observed and /or reported to the selected district so far).

- 4) JICA's contribution to the Province is limited (a posting of field coordinator).
 - (a) Your assessment on contribution of field coordinator to respond to challenges in areas of prevention of HIV/AIDS infections in the Province.
 - (b) What should be (and could be) additional assistance by JICA from the view point of strengthening of JICA's comprehensive intervention covering the whole level of the administration in the country (national, provincial and district level) to make more contribution for challenges in areas of prevention of HIV/AIDS infections.
- 5) Comparative advantages/disadvantages of JICA's assistance over other development partners working in the areas of prevention of HIV/AIDS infection in the Province.

It would be very much appreciated if you could make time for our discussion and provide with relevant data/information for the purpose of our evaluation.

Thank you for your cooperation in advance.

Main Questions to DASCO

for

Review of JICA's Assistance to Kenya in Areas of Prevention of HIV/AIDS Infections

The JICA Team, headed by Mr. Kimiaki Jin, Director of East African Team, Regional Department IV (Africa) will visit Republic of Kenya from 25 August through 4 September, 2008 in order to collect information necessary to assess appropriateness and impact of the JICA's assistance in areas of prevention of HIV/AIDS infections and draw lessons for a future assistance framework. External consultants assigned by JICA will visit their assignment from January 28 through February 15, 2008 with support from JICA Kenya Office.

1. Progress and Challenges in Areas of Prevention of HIV/AIDS Infection in Kenya

- 1) Main progress and challenges in "Priority Area 1: Prevention of New Infections" set under KNASP (2005/6-2009/10) at the district, especially "Promotion of Counseling and Testing."
- 2) Contributing factors and constraining factors/difficulties to make progress toward the targeted achievements set in KNASP in areas identified (1) above. (Please provide us with statistics/data showing changes in measurable indicators from the year of 2004/5 to the latest)
- 3) Main development partners working at the district for "Priority Area 1: Prevention of New Infections" set under KNASP (2005/6-2009/10), especially "Promotion of Counseling and Testing." Areas of intervention /Activities that require more external supports.

2. JICA's Contribution to Support Kenya to Challenges in Prevention of HIV/AIDS Infection

Components of JICA's Assistance in Kenya in Areas of Prevention of HIV/AIDS Infections

- Technical assistance project for strengthening of People Empowerment against HIV/AIDS in Kenya (SPEAK Project) (2006-2009)
- Grant aid project for HIV/AIDS control (2007-2009)
- Equipment supply program for AIDS control and blood test (2005)
- Posting of Japanese Overseas Cooperation Volunteers (JOCV) in the area of prevention of HIV/AIDS at the district level in Rift Valley, Nyanza and Western Provinces (2005-2009) and a field coordinator at the provincial level

- 1) Your assessment on appropriateness and effectiveness of a package of JICA's interventions as shown above in order to help the district to make progress in challenges in areas of prevention of HIV/AIDS infections. Suggestions for improvement if any.

- 2) Specific contributions of each component for prevention of HIV/AIDS infections in the district, especially JOCVs assigned to DASCO and to VCT centers in the district.
- 3) (Expected) synergetic effects brought by the linkage among the components to respond to needs in areas of prevention of HIV/AIDS infections in the district.
- 4) Comparative advantages/disadvantages of JICA assistance over other development partners working in the areas of prevention of HIV/AIDS infection in the district.

It would be very much appreciated if you could make time for our discussion and provide with relevant data/information for the purpose of our evaluation.

Thank you for your cooperation in advance.

**Main Questions to Development Partners
for
Review of JICA's Assistance to Kenya in Areas of Prevention of HIV/AIDS Infections**

The JICA Team, headed by Mr. Kimiaki Jin, Director of East African Team, Regional Department IV (Africa) will visit Republic of Kenya from 25 August through 4 September, 2008 in order to collect information necessary to assess appropriateness and impact of the JICA's assistance in areas of prevention of HIV/AIDS infections and draw lessons for a future assistance framework. During this visit, we would like to meet with you for discussion

Components of JICA's Assistance in Kenya in Areas of Prevention of HIV/AIDS Infections

- Technical assistance project for strengthening of People Empowerment against HIV/AIDS in Kenya (SPEAK Project) (2006-2009)
- Grant aid project for HIV/AIDS control (2007-2009)
- Equipment supply program for AIDS control and blood test (2005)
- Posting of Japanese Overseas Cooperation Volunteers (JOCV) in the area of prevention of HIV/AIDS at the district level in Riftvalley, Nyanza and Western Provinces (2005-2009) and a field coordinator at the provincial level

1. Your assessment on main progress and challenges in "Priority Area 1: Prevention of New Infections" set under KNASP (2005/6-2009/10), especially "Promotion of Counseling and Testing."
2. Government's capacities of raising funds for the prevention of HIV/AIDS.
3. Your organization's assistance strategy and prioritized intervention in Kenya in areas of prevention of HIV/AIDS infections. ((Please specify target provinces/districts of your current assistance.) Refraction of Kenya Joint Assistance Strategy on your assistance strategies in areas of prevention of HIV/AIDS.
4. Main achievements of your current assistance to Kenya in areas of prevention of HIV/AIDS infections.
5. Your recognition of JICA's assistance in areas of prevention of HIV/AIDS infections in the country.
6. Your assessment on JICA's contribution to challenges set under KNASP (2005/6-2009/10). Any suggestion for improvement.
7. Possibilities of cooperation between your organization and JICA in areas of HIV/AIDS infections. Any suggestions for specific activities.

It would be very much appreciated if you could make time for our discussion and provide with relevant data/information for the purpose of our evaluation. Thanks for your cooperation in advance.

