

# JOICFP NEWS

## Japanese UNFPA Goodwill Ambassador Visits Cambodia

### Adolescents to be targeted in UNFPA program

After having suffered nearly 20 years of civil war, the population of Cambodia is heavily weighted to young people and those of reproductive age. 46% of the population are from the ages of 15 to 49 years, and 30% from 5 to 14 years old. With the issues of HIV/AIDS needing urgent attention, especially for youth as they are the most vulnerable to infection, UNFPA is focusing on supporting and raising awareness of youth HIV prevention activities in Cambodia. To this end, Yuko Arimori, Japan's latest UNFPA Goodwill Ambassador, visited Cambodia from 12 to 17 February with JOICFP staff and a Japanese TV crew and journalist.

In the capital, Phnom Penh, Arimori first met with Yoshiko Zenda, UNFPA Country Representative, and learned about UNFPA

The Cambodian UNFPA Goodwill Ambassador is Dr. Chea Samnang, a medical doctor turned actor. Since 1996, Dr. Samnang has been the main star in many television educational drama series on HIV/AIDS, women, labor and RH. For UNFPA, he has been raising the awareness of the population, with focus on youth, on SRH and especially HIV/AIDS, which has been referred to as Cambodia's "second killing fields." He is a strong advocate of gender equality.



Two ambassadors: Dr. Samnang meets with Arimori

activities in Cambodia. She then went to a youth clinic of the Reproductive Health Association of Cambodia (RHAC), the family planning affiliate of IPPF in Cambodia, and was informed how young adolescents are vulnerable to HIV infection because of inaccurate information on sexual health. The center conducts peer education among youth on such issues as reproductive health (RH), HIV/AIDS, gender equality, and condom use negotiation skills. Speaking with youth peer group educators at the center, Arimori found they were conscientious and understanding of the importance of their health and the value of HIV prevention training.

Arimori met with five members of a volunteer group of people with AIDS (PWAs). The group members work to counter discrimination against PWAs by raising awareness of HIV/AIDS in their communities. They encourage people to take an AIDS test at a voluntary counseling and testing (VCT) center, and provide opportunities and a venue for PWAs to gather and offer support to each other. One member, a 24-year-old widow with a daughter, told Arimori about how she had been infected by her now deceased husband and the problems she faced in society.

On courtesy calls to Dr. Mam Bun Heng, Secretary of State, Ministry of Health (MOH) Cambodia, and the National AIDS Authority, National Center for HIV/AIDS, Dermatology and STIs (NCHADS), under MOH, Arimori was briefed on the national situation and Cambodian government policy on HIV/AIDS.

### Takeo Province

Arimori went to Takeo province, where from April RHAC is planning to implement a new adolescent sexual health (ASH) project under the UNFPA Country Program. She met with and observed the activities of the Health Development Team (HDT), and talked with local youths and teachers.



Arimori talks with youths in Takeo Province

She found that young people in this rural area had very little accurate information or knowledge on RH and STIs, including HIV/AIDS, and how these matters related to their own lives. Teachers also do not have much knowledge on HIV/AIDS and sexual RH, so the new RHAC project will target teachers as well as training peer educators.

Arimori considers the Japanese system of physical education, which combines physical exercise classes in school with health education lessons, to be a good model that could be exported to countries like Cambodia.

### Press conference

On 5 March, JOICFP, in cooperation with UNFPA, held a press conference in which Arimori spoke about her visit to Cambodia. Nearly 90 people attended, including 23 journalists. Through a slide show, Arimori and Kiyoko Ikegami, Director, Planning and Development Division, JOICFP, explained the HIV/AIDS situation and the new ASH project in Cambodia.

With Arimori, JOICFP will initiate a new fund-raising campaign for the ASH project implemented by RHAC under the UNFPA Country Program. The project is expected to be a model that strengthens linkage between an international project in Cambodia and an advocacy campaign in Japan.

# JOICFP Mission Studies Afghan Health Situation

From 7 to 17 February, Hideyuki Takahashi, Director, Resource Development and Domestic Campaign Division, and Yukio Honma, Director, China Program Division, JOICFP, were in Pakistan and Afghanistan to gather information on the health situation of Afghani refugees and those within the country.

The mission met with the Family Planning Association of Pakistan (FPAP), one of the leading FPAs in providing assistance to Afghani refugees in Pakistan, and visited refugee camps in Peshawar before going into Afghanistan.

Emergency assistance is reaching the camps, but there is still little in the way of sustainable medical and health services, including reproductive health and family planning (RH/FP). The refugees are in critical need of services, especially as there are very few in Afghanistan, and this contributes to very high rates of maternal and child morbidity and mortality.

Even though an interim authority has been established, hundreds of thousands of refugees

continue to come to Pakistan. The Pakistani government and FPAP realize the need to provide health services to these people at the grassroots through community-based activity, and FPAP is culturally very suited to do this. As more international assistance arrives for Afghani refugees, the importance of the role of FPAP will increase.

JOICFP's entry to and fact-finding in Afghanistan was facilitated by the United Medical Center for Afghanistan/Rehabilitation Program for Afghanistan (UMCA/RPA). JOICFP found that in rural areas of Afghanistan there is basically no health care, and very few female doctors anywhere. Women were not allowed education under the Taleban regime, so JOICFP proposes to train traditional birth attendants (TBAs) and community leaders how to train people in RH/FP. JOICFP also met with traditional male councils -*shura*- who recognized and supported the need for training of women in health care.

JOICFP and UMCA/RPA discussed project

design and prioritized safe motherhood. Afghanistan has one of the highest maternal and infant mortality rates in the world. As well as the almost total lack of post and antenatal care, marriage for women as early as 12 or 13 years contributes to these high rates in the country. The young women have no knowledge of RH/FP, nutrition or sanitation, so a strong educational component is needed in any project.



*UMCA/RPA TBA trainer delivers RH training to prospective TBAs*

## Reproductive Health Commodity Security

The ICPD Programme of Action (POA) defined the need for contraceptive security, and this has now developed to reproductive health (RH) commodity security. In May 2001, a ministerial level meeting on contraceptive security in Istanbul issued a declaration to secure RH supplies. A secure supply of essential RH commodities is crucial to achieving the goals of POA, and this form of security requires not only the commodities themselves, but the capacity to forecast, finance, procure, and deliver them to the places they are needed, at the times they are needed.

In a breakfast meeting on 20 February, jointly organized by the Women's Parliamentary Group and JOICFP, Jay Satia, Executive Director, International Council on Management of Population Programmes (ICOMP), spoke on commodity security to 27 female parliamentarians and their secretaries in the parliament building. He explained that RH commodities comprise several items, including contraceptives, condoms for HIV/AIDS prevention, STI drugs, iron supplements, IEC materials, and

medical equipment.

In his presentation, he said that 105 million married women have unmet contraceptive needs, that nearly 600,000 women a year die of pregnancy related causes and an estimated 80,000 deaths occur due to abortion complications. In addition, 40 million people are living with HIV/AIDS, half of them between the ages of 15 to 34. Out of over one billion young people on the planet, only a fraction have appropriate RH knowledge and services.

Donors have traditionally funded 41% of the total contraceptive needs; the remaining is met by developing country governments and users. There is now a critical shortfall in donor funding, which equals a gap of US\$178 million.

Satia finished by saying that partnership among government, donors, the private sector, NGO and other suppliers was needed, as well as strengthening of commodity management. As Japan is a leading donor in the field, it can exercise leadership in RH commodity security, including support for capacity building and logistics.

On 21 February, Satia spoke at the Japan International Cooperation Agency (JICA) on Reproductive Health Commodity Security at the "JICA Second Study on Development Assistance for Population and Development," chaired by Dr. Makoto Atoh, Director-General, National Institute for Population and Social Security Research (NIPSSR), MOHLW. Addressing experts and government officials, Satia emphasized the need to ensure availability of commodities at a micro, individual level rather than at a macro, national level alone.



*Satia explains to parliamentarians the importance of RH commodity security*

# China Community Empowerment Program Initiated

A signing ceremony for a new China Family Planning Association (CFPA) project, "Village-based Participatory Poverty Alleviation Model Project of Human-centered Family Healthcare and Eco-farming in Sandu County, Guizhou Province," was held in Sandu Shuizu Autonomous County on 28 January. CFPA, with the support of JOICFP, entrusted by the Japan International Cooperation Agency (JICA), will adopt a community-based approach to improve living conditions in Sandu County by income-generating, eco-farming and family healthcare activities. This is the first time that JICA has undertaken a community empowerment project in China together with NGOs in order to directly benefit people at the grassroots level for the improvement of their livelihood and welfare. JOICFP provided assistance in project formulation, and will further provide technical assistance for the

three-year project.

The project will cover a total population of 38,000 for family healthcare activities in two townships of Sandu, 98% of whom are ethnic minorities. There will be pilot projects in two villages for women's development activities, and in two other villages for poverty alleviation and eco-farming. In 2000, the per capita GDP in Guizhou was RMB2662 Yuan (US\$320), the lowest in China (the national average is RMB7078 Yuan). In the project site, the per capita income of farmers only amounted to RMB1,050 Yuan (US\$127). Adopting this multi-sectoral approach is expected to include improvement in people's knowledge of parasitic infec-

tions, reproductive health (RH), maternal health and family planning. Also, RH services for women will be provided, as well as better sanitation facilities and an increase in income for farmers.



*The signing ceremony for the new project*

## Youth Take IEC Into the Community

Under the UNFPA Asia Regional Project on community-operated IEC (RAS/00/P06), Tomoko Fukuda, Program Officer, JOICFP, made a one-day field trip to the Sarmaluk Rural Health Center (HC), Myanmar on 17 February. The regional project aims to develop a model project that identifies applicable and effective strategies that promote RH through community-operated IEC.

In Myanmar, following a series of advocacy meetings to sensitize the community to RH, focus has been placed on utilizing community youth to develop community-operated IEC. To this end, 40 single male and female members between the ages of 16 and 24 have been identified. The HC Health Assistant, U Than They, had explained to the youth the importance of health education and that they would become agents to spread information into the community. Those who showed interest in participating in the activities were recruited as members.

The youth received a five-day training on reproductive health (RH) and IEC, and learned the importance of community participation in solving issues in these areas. They will

participate in various community health activities, including IEC activities, identification of needs, coordination with basic health staff and local authorities, and equipment supply. Also, they have been supplied with IEC materials and a *Maggie the Apron*. The first activity scheduled was taking part in a polio eradication campaign in March in order to introduce the youth volunteers to the community as they will target all sectors of the community, not just their peers.

The youth members have decided to charge themselves a monthly fee of 150 Kyat (US 20 cents) for membership, and have shown strong management skills by already developing record keeping and log books.

The youth center, which is in the health center, contains a small library, television and video, and karaoke equipment. As well as taking part in

community health activities, the youth members are appreciative of these diversions. They mentioned that they would like to start producing health related songs and starting some small businesses with the assistance of village elders that would help sustainability of their center.



*Youth members practicing delivery of RH education through use of Maggie the Apron*



# National Workshop for Sustainable Development of CORHP

From 16 to 18 February, a "National Workshop on Community-operated Reproductive Health Project (CORHP)," implemented by JOICFP and FPAB under the JICA Partnership Program, was held in Cox's Bazar, Bangladesh. Thirty-six representatives from the two pilot project areas, as well as from local government, resource personnel, JICA, JOCV, FPAB headquarters, and JOICFP attended. With a theme of sustainable development, the workshop was planned and conducted by staff from the two project areas on their own assessment and based on project needs. The workshop objectives were: 1) review the

activities conducted under the JICA Partnership Program/CORHP from April 2001 to January 2002; 2) identify lessons learned from the project and compile actions to be taken for future sustainability that can be conducted at the grassroots; and 3) formulate an Annual Plan of Activities for FY2002.

Speaking in Bengali, the chief guest of the inaugural session of the workshop, Takashi Sakamoto, Resident Representative, JICA Bangladesh Office, congratulated the project on its achievements and said it was a model of community-operated RH and women's empowerment under GO/NGO collaboration in the Health and Population Sector Program (HPSP).

In presenting progress to date, Ryoichi Suzuki, Assistant Executive Director, JOICFP, and Project Manager, CORHP, said that baseline surveys had been conducted at the project sites, and that training of medical officers, laboratory technicians and FDVs had taken place. In addition, a multipurpose women's training center (MWTC) was under renovation, JOICFP short-term experts were providing skills and

knowledge, and that CORHP had been identified as a grassroots model of best practice of RH by a GII evaluation mission.

The significant approaches of CORHP are that it is participatory at all levels, integrating many components, such as health, education and economic activities. Partnership between GOs and NGOs is emphasized, though it is the community volunteers and supporters themselves who take responsibility for the project. Furthermore, sustainability is emphasized through fee-charging for quality services. Finally, behavior change communication (BCC) is actively promoted through personal and group sessions, providing a combination of message dissemination and services.

Suzuki finished by encouraging project personnel in their active adoption of the community people's initiative (CPI), the core strategy of CORHP.

After the inaugural session, the participants reviewed project activities, identified lessons learned from the project and constructed a concept of 'Community-operated Approach.' From this concept they analyzed the project activities and developed a Plan of Activities for 2002, based on outcomes of group discussions.



*Sakamoto delivers a speech at the inaugural session of the National Workshop*

## Japanese Public Health Nurse Team Extends Training

In cooperation with CORHP staff, Tamami Minamishima, Public Health Nurse and JOICFP short-term expert, has been delivering training on child and maternal health, and effective use of RH educational material, *Maggie the Apron*, to Family Development Volunteers (FDVs) in Panchdona and Dhalia Union, Bangladesh, under the JICA Partnership Program.

In a series of two, three-day capacity-building workshops, Minamishima gave information on pregnancy and delivery, identification of risks in pregnancy, and how to conduct health checks on pregnant women. She also informed the FDVs on growth monitoring and nutrition for children, and this included hands-on training. The focus of the *Maggie the Apron* training was on the most effective usage for adolescent reproductive health (ARH). The

training was based on her own needs assessment, and assisted by two JOCVs (public health nurses), one from each CORHP area.

FDVs are community health promoters at the grassroots, and in addition to increasing their practical knowledge and skills in health care, the training aimed to empower them to make the concept of health more attractive to community people. In Japan, public health nurses play a significant role at the front-line of health service provision, particularly in preventive health, and this training is an important step in sharing Japanese skills with

Bangladesh. Accordingly, the training will be conducted annually on the needs of FDVs working for mothers and children.



*Minamishima (right) provides practical skills to FDVs on use of Maggie the Apron*

# UNFPA Regional Reviews Value JOICFP

On 21 and 22 February, a midterm review of two UNFPA-supported Asia Regional projects was held at JOICFP. M. Nizamuddin, Director, Asia and the Pacific Division, UNFPA, Dr. Indira Kapoor, Regional Director, IPPF, South Asia Region (SAR), and Dr. Raj Karim, Regional Director, IPPF, East and South-East Asia and Oceania Region (ESEAOR) attended, along with JOICFP staff. Technical support was provided by UNFPA Country Support Team (CST) members from Bangkok and Kathmandu.

JOICFP presented its Community-operated Reproductive Health (CoRH) approach, showed the video *The Everlasting Challenge*, and this was followed by discussion on community participation, sustainability and strengthening



*JOICFP's role in the Asia regional projects was valued at the review meeting*

links with country programs. JOICFP also explained its DigiPlan and APPRODUCTION solutions that support RH and population and development programs. The outcomes of both regional projects were then reviewed and future directions presented.

Under "Strategies for Sexual and Reproductive Health (SRH) of Adolescents and Youth (RAS/00/P05)," needs assessment on adolescent sexual reproductive health (ASRH) has been carried out in Malaysia, Nepal and Sri Lanka. The results have been shared at regional workshops, and with the community and youth in the model project area. This formed the basis for developing model ASRH strategies in each country. It was recommended that model projects be innovative and provide services as well as information for adolescents. Also model projects should involve the UNFPA Country Office, and more information and experience sharing with other organizations needs to be carried out. Furthermore, it was recommended that collaboration with the governments be documented to facilitate the process.

In "Strengthening of National Capacities for RH/IEC and Advocacy through Community-based RH/FP Programs (RAS/00/P06)," compilation and documentation of best

practices in community-operated IEC in Bangladesh and the Philippines have been completed, forming the basis for regional level training. Based on needs assessment in Cambodia and Myanmar, model interventions have been developed. As the same communication strategy is not applicable to every country, a 'sharable' strategy that can be tailored to suit individual country needs must be identified.

It was suggested that as 'behavior change communication (BCC)' is a more appropriate term than IEC, and the project is not an advocacy one in the true sense of the word, the project title should be changed to 'Strengthening of National Capacity for RH BCC through Community-operated Programs.'

The special nature of regional projects was recognized; they support activities that country projects do not, they are innovative and tested before widespread implementation, and they gather and then share best practices.

The comparative advantage of JOICFP in CoRH, DigiPlan and APPRODUCTION can be exploited by preparing audiovisual documentation that will have great impact in showing successful strategies, project replication and advocacy. In addition, JOICFP can share its initiatives and experience with partners through its website.

## JOICFP and UNFPA Look to the Future Together

*While at JOICFP for a midterm review of regional projects, M. Nizamuddin, Director, Asia and the Pacific Division, UNFPA, was interviewed for JOICFP News. Highlights of the interview follow.*

I was impressed by JOICFP's well-planned and documented review. The Community-operated Reproductive Health (CoRH) approach is a good focus to achieve program goals and objectives. This approach is recommended as it strengthens sustainability. I also found DigiPlan to be a comparative advantage of JOICFP in achieving behavior change communication (BCC). I would like JOICFP to present DigiPlan to UNFPA, and in partnership use UNFPA archives to create a broad source of materials for both organizations. I think there should be a website for exchange of information and experiences to discuss good practices

by countries with BCC and CoRH.

UNFPA and JOICFP's partnership is bigger than the two regional projects. JOICFP presents population issues to the Japanese government and explains UNFPA operations. Importantly, the issue of aging is an area in which JOICFP can contribute to developing countries such as China and Sri Lanka since Japan has great experience in this field. In April, the Second World Conference on Aging will be held in Madrid, and UNFPA is preparing for this. UNFPA needs to help governments prepare for what happens after demographic transition as the absolute numbers are huge. Even today, the number of people over 65 in the developing world is greater than in developed countries. However, developed countries have economic and social infrastructures to assist aged people, develop-

ing countries do not. Furthermore, family size is decreasing, there is urban migration, poverty, and gender issues, all of which place added burdens on the aged.

For developing countries to address these challenges, a community-based approach must be taken, as this maximizes resources, and this is an area where JOICFP has great experience.



*M. Nizamuddin at JOICFP*

# Japanese NGOs Share Views With US PVOs

As a follow-up to a workshop held by International Development Center of Japan (IDCJ), a "Japan-US NGO Capacity Building Study Tour" to Washington DC took place from 27 January to 2 February. Organized by IDCJ, and supported by the Ministry of Foreign Affairs (MOFA), the tour aimed to strengthen Japanese NGO capacity through observations of US Private Voluntary Organizations (PVOs), focusing on networking, fund-raising, project planning and management, and ability to partner ODA agencies. Representatives from NGOs in the fields of health, education,

agriculture and emergency relief took part. JOICFP was represented by Hideyuki Takahashi, Director, Resource Development and Domestic Campaign Division.

The study tour members visited PVOs, the equivalent of NGOs in the US, in the fields of education, international aid, health and the environment. Despite the sectoral diversity, the Japanese NGO representatives found common areas with their US counterparts, such as the issues of fund-raising and advocacy. They were informed how PVOs have established good relationships with the ODA agency USAID regarding resource development, and project design, management, implementation and evaluation. Some PVOs have little dependence on USAID for financial resources, so the study team was able to learn self-sustainability strategies from them. The Japanese visitors also saw how PVOs are networked to each other and undertake joint project activities.

PVOs in the US pay attention to their own professional development, management and organizational competence in order to be recognized as experts by USAID. Japanese

NGOs can do this as well in order to gain recognition from the Ministry of Foreign Affairs (MOFA) and other funding agencies. Although USAID provides PVOs with a reasonable amount of administrative costs, PVOs still aim for public support to safeguard their activities. As the USAID funding is in fact 'tax dollars,' PVOs go to great lengths to explain their activities to the public, something in which USAID again assists.



*Japanese NGO representatives visiting US PVOs*

## NGO Activities Drawing More Interest

Volunteers from the Japan NGO Center for International Cooperation (JANIC) organized a series of study meetings to facilitate understanding of the activities, challenges and policies of Japanese development NGOs. On 22 February, Kiyoko Ikegami, Director, Planning and Development Division, JOICFP, addressed 60 international development students, NGO and local government staff, and people in the private sector interested in careers in NGOs. She explained the situation of collaboration between NGOs and government agencies implementing ODA, and gave examples from GII/IDI. She spoke on future challenges and perspectives, and illustrated JOICFP's work in development issues.

The mostly young participants took part in an exercise to highlight issues of gender through role-playing, something that they were all very willing to do.

Alison Hulbert, Resource Development and Domestic Campaign Division, JOICFP, informed the audience about JOICFP's domestic campaign activities, and her own experiences of working for the NGO.

The large attendance at the study meeting, including those from outside the field of development, is an encouraging sign that the activities of NGOs are becoming more mainstream with and accepted by the public.

## NGO Network of Networks

In the first meeting of its kind, a gathering of regional, nationwide, country specific, and sectoral Japanese NGO networks involved in development and emergency assistance was held on 24 and 25 February in Osaka. The 72 participants from 20 NGO networks discussed the possibility of forming a nationwide alliance to increase the effectiveness and accountability of NGOs involved in development assistance.

Three group sessions were held: the significance of a nationwide alliance, NGO/ODA agency collaboration, and NGO roles in development education, especially for students.

A representative of the GII/IDI network spoke in the second session on the activities, constraints and challenges they faced. At the final session, it was proposed that the tone of regular policy dialog meetings between the Ministry of Foreign Affairs (MOFA) and NGOs, which started two years after GII, be altered to meet the needs of both parties, with a more constructive approach being taken. The new foreign minister has put forward reforms of MOFA, including NGO policy, so another committee was suggested to prepare NGO proposals to contribute to this.

Within the next year, a second NGO network meeting will be held and a committee established, and information sharing mechanisms will be built among other NGO networks until then.



*Participants of the study meeting for Japanese development NGOs*



# Remembrance Service for Shidzue Kato

On 23rd February, around 750 people from all over Japan and overseas attended a remembrance service at the Imperial Hotel in Tokyo for Shidzue Kato, former President JOICFP and FPFJ. Family members, friends, representatives of organizations in the field of sexual and



Flowers and tributes to a pioneer of women's health and rights, Shidzue Kato

reproductive health/rights, including IPPF and UNFPA, were present. Parliamentarians and concerned individuals paid tribute to one of the great pioneers in women's health and rights. The service was organized by 55 people from various fields who had the privilege of being closely associated with Kato. JOICFP acted as the secretariat.

After the participants had laid flowers under a large portrait of Kato, a 15-minute video of her life was shown. Her daughter, Taki Kato, then introduced 16 speakers, including ex-Prime Minister Ryutaro Hashimoto, and Dr. Shigeaki Hinohara, President, St. Luke's International Hospital and Kato's attending physician. Dr. Hinohara told the audience that Kato had inspired him with her attitude of always moving forward.

Takako Doi, Head, Social Democratic Party (SDP), reminisced how Kato, as early as 1946 when she was a member of parliament involved in the drafting of a new postwar constitution, had stressed the importance of basic human rights and gender equality. Kato had emphasized that maternal protection needed to be stated in legislation as women were biologically different from men.

Helen Hopper, Adjunct Professor, Pittsburgh University, and author of a biography of Kato *A New Woman of Japan*, said that even at the age of 99, Kato had been very busy. She stated that "All of our lives are richer for our association with Shidzue Kato."

All the participants and speakers at the service shared among them deep feelings of respect and admiration for Shidzue Kato.

## IPPF on Kato's Legacy

During a visit to Japan from 20 to 24 February, Ingar Brueggemann, Director-General, IPPF, met with members of parliament and officials of the Ministry of Foreign Affairs (MOFA) to update them on IPPF's activities.

In discussions with MOFA, Brueggemann said that the "Global Fund to Fight AIDS, TB and Malaria" needed to focus on prevention activities as well as cure and treatment. She therefore encouraged the Japanese government to further commit to prevention activities. Through photographs and reports, Brueggemann gave feedback on the effectiveness of the Japan Trust on HIV/AIDS in IPPF, and showed how the beneficiaries of projects at the grassroots had received assistance.

On 22 February, Brueggemann attended the 21st Study Meeting on Issues of Midwifery,



Brueggemann with midwives: domestic violence is a health issue for women

organized by a parliamentarian, and spoke on the role that midwives can play in addressing domestic violence. She said that domestic violence was a global crime, and that women needed help to allow them to "break the silence." Health care providers are strategically placed to play a major role, she said, and the traditional boundaries of midwifery could be pushed back as domestic violence was a health issue for women. She concluded that while some FPAs were providing training to midwives to tackle this problem, governments needed to pass further legislation.

The main purpose of Brueggemann's visit to Japan was to deliver a speech of appreciation at a remembrance service for Shidzue Kato on 23 February. Brueggemann said at the service that everyone at IPPF held deep gratitude for Kato, and that her meeting with Kato in 1998 was a very special gift. At the age of 101, Kato told Brueggemann, "My life, I believe, is still on a growth path. I aim for progress everyday, no matter how little, just as long as I keep moving forward." Brueggemann said that "keep moving forward" is something that we should all listen to. She went on to say that we should all have courage, perseverance and stamina similar to Kato and to keep her enthusiasm for new challenges alive.

## World Aging, UN Report

In a UN press briefing on 28 February, Joseph Chamie, Director, Population Division, Department of Economic and Social Affairs, presented an update of the demographics of population. He said that the pace of aging today was much faster than had been anticipated in the past and this was for two reasons - declining fertility and increasing longevity. Aging is a trend which would accelerate in the 21st century, stated Chamie. In 1950, for example, 8% of the world was aged 60 and above. Today, that figure was 10% and by mid-century it would be 21%. People over 60 will number 2 billion in 2050, more than the number under 15.

Japan, he said, was the 'oldest' country, with a median age of 41, with Italy, Germany and Switzerland close behind. While France had taken 114 years to increase its elderly population from 7% to 14%, Japan had made that transformation in just 24 years, with its continued low fertility rate and migration policies being major factors.

In closing, Chamie introduced the new concept of a 'longevity millionaire', a person who would live a million hours, or 114 years. While it sounded strange today, it would become increasingly common in years to come, he said.

## VOICE OF VOICES

By Toshio Kuroda

### UN Conference on Ageing in 2002: the Greatest Population Crisis in the 21<sup>st</sup> Century

After the UN Conference on Aging held in Vienna in 1982, the problems of population aging have been discussed at international conferences on population, and included the designation of the Day of Elderly Persons on October 1, 1990. These discussions, however, have tended to consider means to tackle the immediate problems of elderly populations.

For the sustainable survival of the Earth, an ever-increasing population growth is not possible, so control of population increase is unavoidable. Fortunately, fertility control efforts are bearing fruit, particularly in many developed countries, and population decrease is beginning to occur in some countries. Also in some developing countries, total fertility rates

have fallen below the replacement level, and these countries are expected to have smaller child populations in years to come. Below-replacement level fertility is progressing on a worldwide scale leading to population aging on a global level.

The portion of population aged 65 and over in the world is larger than at any time in world history. It is only certain that the ongoing population aging process will accelerate in this century. In 1950, the population of people aged 65 and over was 130 million, or 4% of the world population. This increased to 419 million or 6.9% in 2000, with total population annual increases being around the 80 million level. By 2030, the annual increase of population of this age group is estimated to be 24 million.

Population aging in this century will significantly affect the survival system of a population. Take Japan for example. Japan's aged population (the portion of above 65-year-olds in the population) is over 17 %, and it is one of a group of countries with large, aged populations. The country's population aging

process until 2050 can be observed through many indices. The ratio of its population above 65 was 4.9% in 1950, 17.4% in 2000 and is predicted to grow to 35.7% by 2050. Dependent population indices for these years are 35.4%, 46.7% and 86.6% respectively. Potential supporting indices fall from 12 persons to 3.6 and then further to 1.5 persons in these years. The last mentioned figure suggests an extraordinarily heavy burden on future younger generations. These figures clearly imply the necessity for major changes in the survival system. The essence of population aging is that the Mt. Fuji-style population profile with the child population at the bottom is going to be reversed with the largest aged population on the top with a thin child population at the bottom. We are faced with the most challenging task of human survival in our history to cope with such a major change in population structure.

### DIARY

- Mayumi Katsube, Senior Program Officer, and Kei Yoshidome, Assistant Program Officer, JOICFP, were in Cambodia from 20 January to 3 February to monitor project progress.
- As a part of Bolivia counterpart training entrusted by JICA, **Juan Carlos Sakamoto Paz**, Study Coordinator of Health, Beni Prefectural Government, Bolivia, was in JOICFP on 16 January to learn about community-based primary health care.
- Makoto Yaguchi, Assistant Program Officer, JOICFP, was in Cambodia to accompany a study tour of medical students from 9 to 17 January.
- Atsushi Yoshino, Director, Media Production Division, and Chiho Sano, Program Officer, JOICFP, were in Mexico 19 to 27 January for APPRODUCTION training and discussions with related organizations.
- **Dr. Ratoarivelno nee Rafaralalao Lucienne** was in JOICFP for Madagascar "Maternal and Pediatrics and Neonatal Care" counterpart training on 14 February.
- From 28 January to 15 February, 11 participants from 9 countries took part in a JICA Seminar on Parasite Control Administration for Senior Officers implemented by the Japan Parasite

Control Association in cooperation with JOICFP.

- Tomoko Fukuda, Program Officer, JOICFP, was in Myanmar 10 to 16 February for project monitoring and discussions with related organizations.

- **Yuko Arimori**, UNFPA Goodwill Ambassador and five representatives of the media were in Cambodia from 12 to 17 February to observe the HIV/AIDS situation and UNFPA-assisted ARH project. They were accompanied by Kiyoko Ikegami, Director, and Mika Hatsuzawa, Assistant Program Officer, Planning and Development Division, JOICFP.

- Hideyuki Takahashi, Director, Resource Mobilization and Domestic Campaign Division, and Yukio Honma, Director, China Program Division, JOICFP, were in Pakistan and Afghanistan from 7 to 18 February on a fact-finding mission.

- On 25 February, ten participants from ten countries visited JOICFP to attend a one-day program on JOICFP's RH/R activities as part of a JICA Seminar for Promotion of Education for Girls and Women.

- **Jay Satia**, Executive Director, ICOMP, was invited by JOICFP to deliver a series of lectures on RH Commodity Security to female parliamentarians and JICA on 20 and 21 February, respectively.

### JOICFP Visual Files

Improving Women's Health

### Bai, a Woman From Laos

14 minutes: English • Japanese

#### Would I die if I eat egg after delivery?



Close to the Thai border along the Mekong River is a pregnant woman named Bai. She went to burn incense on the anniversary of her sister's death. She is afraid of the increasing risk of death with each delivery she faces. People say that her sister died because she ate egg after delivery.

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JOICFP NEWS welcomes your comments, suggestions and contributions. Please mail to:

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