

JOICFP NEWS

Review of Latin American Regional Program

From 7 to 10 October, a regional workshop “Adolescent Sexuality and Reproductive Health Education through Strengthening Government-NGO Networking,” under the UNFPA program RLA/00/P08, was held in Morelia, Michoacán State, Mexico. This was the second and last regional workshop under the program and it aimed to review the program at the regional level and its impact at the national level, further strengthen networking between GOs and NGOs, and to make recommendations for the next cycle (2004 – 2007).

Over 40 GO and NGO participants from 12 Latin American countries, and Japan, attended and shared replicable sexual health education strategies for youth that had been validated through demonstrable experiences. JOICFP delivered a presentation on its Community-operated Reproductive Health (CoRH) program approach to community health.

The participants recommended that future

project activities in the following cycle concentrate on youth participation, especially at the rural level, and that GO-NGO networking be reinforced to help ensure greater coordination with UNFPA country and regional activities.

On the last day of the workshop, the participants divided into groups and took part in a field trip to observe Mexfam’s *Gente Joven* activities in a technical high school. Each group then delivered a sex education class to adolescents. Through this it was found that the basic level of RH knowledge among the adolescents was sufficient, but that a more personal, discussion-based approach was needed in order to be able to successfully deliver the ASRH information that the students needed.

In addition to the seminar, an IEC material

exhibition was held in which JOICFP showed the part of the *Asian Way* video related to adolescent reproductive health. Mexfam also demonstrated a new CD ROM produced under the regional project that highlights success stories of adolescent projects in four Latin American countries.



At the IEC material exhibition

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This December issue is the last JOICFP News to be published as printed material, and from January 2004, JOICFP News will only be available in electronic format through e-mail as JOICFP e-News.

The latest information in the fields of reproductive health and family planning (RH/FP), as well as related demographic and political news, including global population and RH activities and ODA information from Japan will be sent to your registered e-mail address. In order to register an e-mail address, please visit the JOICFP web site <http://www.joicfp.or.jp>

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Project Monitoring

From 12 to 14 October, JOICFP observed a Mexfam rural health project in Catemaco. Here, Mexfam organizes *Gente Joven* sports activities, such as football, in local communities to attract both young men and women so that health education messages can be delivered to them. In addition, the *Gente Joven* Center established in Catemaco has an Internet café that teaches language and computer classes as a way to attract young people, and volunteer health promoters visit bars and clubs to distribute condoms.

The JOICFP mission also visited Tepeji del Rio and Tlanelpantla, both suburbs of Mexico City, to observe Mexfam *Gente Joven* activities. In Tepeji del Rio, youth promoters visit junior high schools and high schools to hold theater and video shows as well as informal talks with the students.

The Mexfam clinic in Tlanelpantla is located in a shopping center, providing good access for clients. The clinic offers a ‘one-stop’ approach with services such as simple gynecological treatments and examination, as well other health services. In some high schools in the area, the “Sexo Seguro, Sexo Protegido” (safe sex, protected sex) approach has been introduced as part of *Gente Joven* activities. In this approach, youth promoters provide students with practical knowledge on how to enjoy their sex lives, after they have received basic reproductive health knowledge.



A female football team from a community in Catemaco

Strengthening Record Keeping and Reporting Skills

The second quarter (July to September) of the Bangladesh Community-operated Reproductive Health Project (CORHP), under the JICA Partnership Program, saw the Project Director, Abdus Salam, attend the JICA Reproductive Health Seminar for Senior Officers – Capacity Building of NGOs toward Community-based Reproductive Health (RH), conducted by JOICFP in August and September, in Tokyo and Okinawa Prefecture.

Salam learned about the Japanese experience of community-based activities, especially with regard to maternal health and promoting volunteer activities. The Family Development Volunteers (FDV) of the CORHP are in many ways similar to maternal health volunteers in Japan in that they are locally based volunteers and have good relationships with community members. Through his observations in Okinawa, Salam learned lessons that could be applied to the FDV's situation in Bangladesh, such as how to increase collaboration among GOs and NGOs.

During the second quarter, further training was carried out for project staff at the two project sites of Panchdona and Dhalia Unions. Responding to their requests, staff was further trained on record keeping and reporting skills. Through group work and role-plays, the participants practiced collecting and inputting data into a system acceptable by the Bangladesh government. Pre- and post-training testing revealed that the trainees had been able to substantially increase their record keeping and reporting skills.

In October, a GO-NGO Coordination Workshop was held in the two project sites of the Bangladesh Community-operated Reproductive Health Project (CORHP) to strengthen collaboration in the RH sector at the union level of administration. Government health and family planning workers were invited to attend along with project staff, Family Development Volunteers and other NGO representatives in the health sector.

Discussions were held on how best to



Trainees in Dhalia Union learn about record keeping

coordinate GO and NGO activities, and how to mobilize local resources to promote health activities, regardless of whether they originated from GOs or NGOs. Within a union, either party may carry out health activities, but at present there is insufficient coordination, especially horizontally. Through this workshop, it is expected that horizontal coordination will increase among concerned parties to improve the delivery of effective services.

Learning from Observation – Philippines' Study Tour

From 29 September to 1 October, 22 representatives from the Community-operated Reproductive Health and Nutrition (CoRH/N) Project in Batangas Province, implemented by JOICFP and assisted by the Ajinomoto Corporation, visited the Capiz Community-based Reproductive Health Project, imple-



The festive atmosphere of the RH Corner makes receiving RH education more enjoyable

mented by JOICFP and the Capiz local government unit with UNFPA assistance. The visitors were Provincial Health Office technical staff, municipal health officials and public health nurses.

The Batangas project was formed prior to the one in Capiz, and the visitors went to Capiz to observe best practices and share experience. On the first day, they spoke with Governor Vicente Bermejo, and then visited the Sapien RH unit to observe the RH IEC corner. This corner aims presents RH information in a festive, attractive and interesting way, and the Batangas visitors expressed interest in replicating this approach.

On the second day, in Pontevedra, the Batangas visitors observed a parenting class and a drama presentation of the "Esperanza Story" for school children by trained youth communicators. This drama-based

approach to delivering adolescent RH messages, rather than using videos, for example, is especially effective as the students are able to understand information more vividly. This was also an approach that Batangas wished to replicate. The visitors also observed a men's RH/FP class in Intongcan by trained male motivators, and were impressed by their active involvement in delivering information.

On the evening of the second day, a feedback session was conducted with the provincial and municipal health officials who presented insights from their visit and recommendations. They were especially impressed by the strong and active commitment of local government units, and the effectiveness of barangay officials and health workers in mobilizing the community in RH activities. In addition, they shared information on activities being carried out in Batangas, such as project monitoring mechanisms, and a scheme for promoting the prevention of reproductive tract cancers.

Further Progress in Vietnam Project

From 21 August to 2 September, a Japanese Midterm Evaluation Team visited Vietnam to review and evaluate the progress and achievements, as well as constraints, of the Japan International Cooperation Agency (JICA) Reproductive Health Project in Nghe An Province Phase II. The team also discussed the future direction of the project for the next two years, and made recommendations for management to achieve project objectives and provided guidance for future sustainability.

The five-member team was headed by Prof. Hirofumi Ando, Nihon University, and included Ryoichi Suzuki, Deputy Executive Director, JOICFP. The team met with concerned personnel, both Vietnamese and Japanese, interviewed Vietnamese counterparts at all levels and observed activities of district and commune health centers.

The team saw that the provision of medical equipment and facility improvement, had led to an increase in trust and credibility in services by women and community people and in confidence among service providers. Training activities for health center personnel have been successfully carried out, including those in Japan.

One of the project’s major objectives is to reduce the number of induced abortions. Although there has not yet been a significant reduction in induced abortions across the province as a whole, there has been some decline in a number of districts and there is an increase in the contraceptive prevalence rate. Greater integration of health and family planning services would further this project goal.

The Women’s Union has been especially active in IEC, encouraging women to improve their health and RH status, but there is an urgent need to motivate men to be involved in this. Furthermore, IEC activities have to take a more behavioral change approach, including that for RH/FP service providers for client friendly services.

The evaluation team appreciated the difficulties in providing services to those in mountainous regions, and recommended refresher training be provided for hamlet health workers. The team also appreciated that a health management information system (HMIS) was being developed effectively, and recommended reporting systems be modified for better monitoring

at the community level.

As a considerable amount of technical and administrative capacity has been developed through the project, increasing implementation by the Vietnamese counterparts is recommended, especially in the areas of training and monitoring. Furthermore, to strengthen sustainability, it is hoped that the Vietnamese side will continue to provide administrative and financial support for the project as it is also seen as being able to provide skilled personnel and experience to develop health systems in neighboring provinces.



Hoang Ky, Vice Chairman, People’s Committee, Nghe An Province (left) and Prof. H. Ando at the midterm evaluation signing ceremony

Vietnamese RTI Survey Results

Reproductive tract infections (RTIs) have long-term adverse effects on women and their children, including premature delivery and neonatal infections. Although Vietnamese health-care workers are concerned about the spread of RTIs, epidemiological data are scarce in the country. JOICFP, therefore, planned a RTI survey among pregnant women in Nghe An Province, under the JICA Vietnam Reproductive Health Project, Phase II. A team of JICA experts; Aya Goto from Fukushima Medical University, and Nguyen Quang Vinh and Pham Nghiem Minh from Tu Du Obstetrical and Gynecological Hospital, collaborated with the local survey team in designing and carrying out the survey.

Following the pilot survey in April, the main survey was conducted in July and August. They interviewed and examined pregnant women in ten communes from four districts. Target infections were bacteria vaginosis,

candida, trichomonas, group B streptococcus, gonorrhea, syphilis and hepatitis B. Among 435 pregnant women who were registered at commune health centers (CHCs), 377 (87%) participated in the survey. In addition, 189 nonregistered women, whose pregnancy was confirmed on the survey day, joined the survey. The total number of participants was 566, of which 504 with complete information were input for analysis.

The overall RTI prevalence was 36%, and the rate varied from 19% in one commune to 54% in another. The most prevalent infection was candida (17%) followed by hepatitis B (10%). Sexually transmitted diseases were rare; 7 cases of trichomonas and no gonorrhea and syphilis were found. As for bacterial vaginosis and group B streptococcus, the prevalence was 7% and 4%, respectively. Preventive factors of RTI were usage of tap water for genital washing, condom use and higher financial

status. Most women who reported having “abnormal” discharge and self-reported symptoms were not considered as good indicators for diagnosis, while physicians’ finding of vaginitis was with a sensitivity of 54% and a specificity of 55%.

The findings suggest that first, RTI prevention strategies should be developed according to RTI prevalence in each commune and target less-wealthy people. Second, health education is needed on sanitation and condom usage. Provision of basic RTI knowledge would help women recognize abnormal symptoms. Third, diagnosis at health care institutes with laboratory facilities and speculum examination at CHC level are recommended rather than a symptomatic approach. The JICA experts and local survey team will continue to analyze the data further, disseminate the findings, and plan and implement RTI prevention activities in the latter half of the project phase II.

New Activity in Chinese Ethnic Minority Villages

In 2002, the Japan International Cooperation Agency (JICA) launched a “Village-based Participatory Poverty Alleviation Model Project in Sandu County, Guizhou Province – the Integration of Improving People’s Lives, Providing Family Health Care and Promoting Eco-farming.” The China Family Planning Association (CFPA) has been implementing the project, entrusted by JICA.

Conducting the project effectively is a big challenge in a conservative ethnic minority area. It is necessary to repeat behavior change communication activities to improve old customs and the long held low health consciousness of the villagers.

Since the project started, JICA has dispatched experts several times and has disseminated practical methods for effective communication in raising the motivation of individuals in the village toward the project.

From 10 to 28 September, JICA experts Takaaki Hara, Senior Advisor, and Junko Kajima, Head of Division, Research and Study Dept., Japan Parasite Control Association, and Yoshitatsu Kanno, Senior Program Officer, China Program, JOICFP, were dispatched to Sandu County. Doctor Zhao Gengli, Gynecologist, Associate Professor of Women and Children’s Health Center, Beijing University and two assistants cooperated as Chinese specialists, and medical checkup activities were performed in the two villages of the Sandu County project.

About 300 minority adults, people who has not undergone common medical examinations such as measurement of height, weight, eyesight, blood pressure, or parasitic and anemia inspection, participated in the health checkup activity in spite of the agricultural in-season.

In the Miao ethnic village of Jialan, health checkup results revealed that over 90% of the people were infected with parasites, and over one quarter of the female population was positive for infections such as vaginitis. In the Shui ethnic village of Banliang, the results revealed that over 85% of the people were infected with parasites, 35% of the women examined were positive for vaginitis and over 50% were positive for anemia. There were also many cases of high-blood-pressure in each village.

For the first time, the villagers who had

received their first health checkup realized their health condition, and there were many questions about medical treatment and methods of prevention from the villagers.

By these health checkup activities performed as part of a publicity campaign, the people’s health situation is fully analyzed, and exact information and exact knowledge is offered to effectively strengthen activities that encourage people to support the project.

Through on-the-job training of health checkup activities, project personnel have recognized that offering high quality services and cooperation between governments at each level is very important.



At a health check-up in Guizhou Province

Capacity Building for ARH in Laos

Awareness is rising in both developing and developed countries of the reproductive health needs of adolescents, and increasingly advocacy is being focused on to further this awareness. In Laos, there is a need to sensitize policy makers and administrators to adolescent reproductive health needs (ARH) such as dealing with unwanted pregnancy and unsafe induced abortion.

From 18 August to 5 September, a JOICFP mission conducted on-the-job training in Laos, under the UNFPA Country Program, for partner agencies to develop advocacy materials, and to raise their capacity for behavior change communication material production. The training was within JOICFP’s Approduction scheme and was delivered to program managers and technical personnel.

The training focused on the production of a video entitled *Two Ways to Love*, which is a collaborative effort among the Lao Youth Union, the Lao Women’s Union, and the Center for Information and Education on Health, under the Lao Ministry of Health. The video shows how adolescents provided with sexual education and services make appropriate health choices, while those who are not can suffer serious health consequences, and even death. The video includes an introduction from the Deputy Prime Minister on the national importance of addressing ARH, and a message

from the health minister on ARH issues, including HIV/AIDS, unwanted pregnancy and the importance of information and services.

The trainees learned all stages of video production, including writing a concept paper, creating an original story, plotting the shoot, drawing storyboards, and topics such as locations, casting and drama techniques. JOICFP accompanied the trainees on the shoot, and provided further training on equipment maintenance, record keeping, viewing rushes at the end of the day and editing. It is expected that JOICFP will provide further technical assistance in finalizing the video.

All the trainees stated that they were very satisfied with training, that they had learned a lot and that they looked forward to receiving more technical assistance in future.



Yoshino (left) explains camera techniques to the trainees by the Mekong river

Investing in Women

A High-level Policy Maker’s Symposium on South-to-South Collaboration: Poverty and HIV/AIDS was held at UN House, Tokyo, from 3 to 5 September. It was organized by NPO 2050, UNDP, Partners in Population and Development, and supported by the Bill and Melinda Gates Foundation, JOICFP, UNFPA, UNAIDS, and the Ministry of Foreign Affairs (MOFA). Some 120 participants from around the world in the fields of population, reproductive health, development, economics, politics, etc. attended.

The opening ceremony for the symposium, chaired by Ryoichi Suzuki, Deputy Executive Director, JOICFP, included a remembrance for Balla Mussa Silla, who passed away in June at



Sadik: poverty is more than about economics, HIV/AIDS is more than about health

the age of 48 and who had been one of the initiators of South-to-South cooperation. In an opening statement, Chieko Nohno, Member, House of Councilors, spoke about the threats of HIV/AIDS and poverty to humankind, saying that it would take all the efforts and wisdom of international agencies, governments and civil societies to set effective strategies in place and mobilize resources to successfully fight these threats. She said that the Japanese government, and particularly parliamentarians, was committed to the fight.

In a keynote speech, Dr. Nafis Sadik, UN Under-Secretary General and Special envoy of the Secretary-General for HIV/AIDS in Asia and the Pacific, told the participants that the world faced many issues, including economic ones, political instability, terrorism, war, and peace reconstruction. The MDGs, she said, highlighted important issues, and poverty and HIV/AIDS in particular. Sadik stressed that poverty was not simply an economic issue and

HIV/AIDS a health one; there were social and cultural components that needed to be dealt with as well.

Sadik continued that in 1994, ICPD in Cairo, and then the 4th World Conference on Women in 1995 in Beijing, emphasized reproductive health, gender equity and the empowerment of women, and that investing in women would help to successfully tackle the many issues the world faced. HIV/AIDS in particular is a global threat that knows no boundaries, and that more collaboration on strategies and finance was needed among international societies, she said.

In a second keynote speech, Kazuo Kodama, Deputy Director-General, Economic Cooperation Bureau, MOFA, reconfirmed the Japanese government’s commitment to fighting HIV/AIDS and poverty, calling it one of the most important human challenges to

protect survival, livelihood and dignity in the 21st century. Kodama called for joint efforts in promoting South-to-South collaboration as a means of meeting the challenge.

Over the three days, the symposium contained six sessions “Women’s Empowerment and MDGs,” “The Impact of HIV/AIDS on Poverty Alleviation,” “HIV/AIDS: Enhancing Political Leadership for Accelerated Responses in Asia,” “HIV/AIDS as it Affects Human Security,” “Youths Most Vulnerable Group requiring Urgent Attention,” and “Sustainable Cooperation: Inter-regional and Intra-regional Cooperation through South-to-South Modality.” This was the sixth South-to-South symposium to be held in Tokyo and on the last day the participants issued recommendations for the international community and the Japanese government to strengthen their efforts in supporting South-to-South collaboration.

Raising Awareness on MDGs

The Millennium Development Goals (MDGs) are receiving more attention throughout the world, yet in Japan awareness remains low. To achieve the goals, people at all levels must be involved, and the Ministry of Foreign Affairs (MOFA) is aiming to increase the knowledge of the public on how overseas development assistance (ODA) is being increasingly focused toward MDGs.

On 9 September, the Japan NGO Center for International Cooperation (JANIC) and the Civil Society Network (CSO) Japan organized a conference in Tokyo bringing together over 130 representatives from various international organizations and regions, including MOFA, the Japan International Cooperation Agency, the World Bank, USAID, EU, the UK, UNDP, NGOs, including JOICFP, private companies, researchers and volunteers. The meeting focused on ways to increase involvement of sectors such as business and labor unions in achieving MDGs, methods of developing partnerships, and how cross-sectoral approaches can benefit all concerned.

Typically, awareness of international cooperation, and MDGs in particular, has been higher in the major urban areas, such as Tokyo and Osaka. To help increase awareness in more rural areas, on 15 to 16 September a meeting was held in Niigata City to discuss how international cooperation activities in local areas can help with global issues, and what NGOs can do.

The wife of the US ambassador, Nancy Kassebaum Baker, spoke to the audience about the importance of NGOs in community development, using examples from developing countries and the US. This was followed by a panel discussion on international exchange and understanding of cultures and community development in Asia. Topics covered included collaboration among CSO international agencies and bilateral agencies.

Forums are being organized in other areas of Japan to help raise public awareness and improve the international cooperation activities of GOs and NGOs.

Sharing Experience in Asia and the Pacific

Under the theme of “Moving into Action: Realizing Reproductive and Sexual Health and Rights in the Asia Pacific Region” the 2nd Asia Pacific Conference on Reproductive and Sexual Health (APCRSH) was held in Bangkok from 6 to 10 October. Over 1,400 GO, NGO, international organizations and foundation representatives, and researchers working in the field of RH in Asia and the Pacific region attended.

The conference aimed to strengthen links between advocacy and research with implementation in order to improve the reproductive and



Senator Mechai Viravaidya and Sumie Ishii after the satellite session

sexual welfare of people in Asia and the Pacific, as well as to expand the networks of stakeholders in the region and move them from awareness about gender equity to taking action. Furthermore, the conference aimed to provide impetus for actions leading to results involving policymakers, civil society, governments and private enterprises.

With two plenary, over 20 parallel and more than 20 satellite sessions, as well as panel presentations and field trips, the participants covered a wide range of topics. Some of these included: RH in conflict situations; gender-based violence; women's empowerment; sexuality education, and male involvement.

In a satellite session, Sumie Ishii, Executive Director, JOICFP, spoke about enhancing the sustainability of RH NGOs, and introduced JOICFP's Community-operated RH (CoRH) approach and Community People's Initiative (CPI) Engine. She was followed by Rosalinda Mendoza, Regional Field Operation Advisor, JOICFP Philippines, who explained how the concepts of CoRH are being implemented as projects in the Philippines.

In another satellite session, Makoto Yaguchi, Assistant Program Officer, outlined JOICFP's advocacy actions taken before the 5th APPC in December 2002 in response to the US government's announcement that it would not sign the APPC Program of Action (POA). Yaguchi explained how JOICFP had gathered support from sympathetic parliamentarians and petitioned key ministers in Japan to back APPC POA and uphold the goals of ICPD.

The call for action issued by the 2nd APCRSH included emphasis on the following areas: changing economic policies and health sector reforms are reducing access to and quality of health services; gender inequity is rising; reproductive and sexual rights are being restricted; maternal mortality, unwanted pregnancy and unsafe abortions remain high; HIV/AIDS is spreading rapidly, and reproductive and sexual health services remain inaccessible for many youths. Accordingly, the conference calls on UN agencies, governments, NGOs and donors to commit to taking action to improve the reproductive and sexual health and rights of women and men in the region.

Family Planning in an HIV World

There can be no underestimating the threat that HIV/AIDS presents to the future of humanity. However, as donors increasingly, and rightly, focus more efforts on tackling both the spread and the impact of the infection others areas of health are receiving less attention than before. Family planning is one such area.

In a move to raise awareness about the neglect FP programs and activities are receiving, the Council on Population Education (CPE), presided over by Yasushi Akashi, former UN Under-Secretary General, held a meeting in Tokyo on 25 September. Around 50 NGO and media representatives, as well as specialists attended lectures by Professor Jane Bertrand, Director, and Jose Rimón, Senior Deputy Director, Center for Communication Programs (CCP), Johns Hopkins University.

Bertrand titled her talk “Family Planning in an HIV World” and spoke about how HIV/AIDS has relegated FP to a lesser priority in the minds of political leaders. Although the issues of HIV/AIDS have increased the visibility of the health sector, managerial and staff attention

has been drawn away from FP. Bertrand explained that health systems are being swamped by the demands of tackling HIV/AIDS and that health staff morale was falling. She said that although the promotion of the use of condoms to prevent HIV infection also contributed to FP needs, there needed to be much more integration of FP and HIV/AIDS activities, and that HIV/AIDS activities do not eliminate the need for FP.

Rimón spoke to the audience about advances in effective HIV/AIDS communication programs, explaining that the communication concepts of the ‘medical era’ i.e. building facilities and the health provider dictating to the client, had given way to the ‘field era’ (reaching out from clinics), the ‘social marketing era’ (a dialog with paying customers) and now the present situation, the ‘strategic era’. In this situation, participants in the communication process create and share together, there are many stakeholders and participants are increasingly more sophisticated.

Rimón showed how the use of technology

is increasing in developing countries, and that strategic communication today relied on many approaches, including community mobilization, social marketing, entertainment-education, provider promotion, behavior change communication, media advocacy and personal and community empowerment.

Rimón explained that there are 12 key elements of strategic communication. These elements include; communication must be results and benefit oriented, client centered, participatory, service linked, accurate, cost effective and sustainable. This complexity, however, makes evaluation of effective communication more difficult.

He went on to talk about how new ideas are spread throughout a community, and what knowledge must be disseminated in order for people to be able to arrest the spread of HIV/AIDS. These ideas include abstinence, being faithful, consistent condom use (the so-called ABC approach), delaying sexual activity onset, seeking treatment for STIs, and voluntary counseling and testing.

Building Partnerships Through GII/IDI

The Regular Open Dialog on GII/IDI meetings between the Ministry of Foreign Affairs (MOFA) and NGOs has proven to be invaluable to both sides in furthering international development goals. On 18 September, 28 NGO, and MOFA representatives met for the 53rd meeting.

The director of MOFA's Research and Planning Division has changed, and NGO representatives updated the new director on planned and approved activities under Japanese Grant Aid for Japanese NGOs. Collaboration between the two parties has been promoted, and NGOs indicated that a quick survey shows that an average of three months is required for the process of project proposal review, and in some cases more. The current status of JICA's Partnership Program for NGOs was also presented, and there has been good liaison between the two parties. For its part, MOFA

indicated that proposals from NGOs often need to be reworked, and that this might lead to delays in project approval.

On 29 August, the Cabinet approved the new ODA Charter, focusing on areas including transparency and effectiveness, human security, peace building, and Asia as a priority area. Importantly, the charter includes promotion of participation by civil society in Japan, including that by NGOs. MOFA explained its expectations from NGOs, and that it is aiming for an increase in NGO funding within ODA. Both sides were optimistic about future prospects in this area.

A representative of OISCA International spoke to the meeting about the 6th APA/ICPD meeting in Canada. She emphasized the collaboration of NGOs, including JOICFP, in implementing small grant activities regarding APA/ICPD, and the good relationships NGOs

have enjoyed with the ODA agency of Japan, MOFA and JICA regarding this.

The GII/IDI participants were informed about the then forthcoming TICAD III conference. Although the conference is intergovernmental, representatives of African, international and Japanese NGOs were also invited as observers. Topics that were scheduled for discussion included human-centered development, such as health and infectious diseases, and water. A dialog with civil society was also expected to be a component of the conference.

The final topic presented at the GII/IDI meeting was by MOFA on the following year's ODA budget. The ministry has requested over ¥594 billion, an increase of 15%, and the request for assistance for NGOs has increased by 10%. The new ODA charter is seen as being an important factor in budget allocation.

JOICFP Shares Experience at Sex Education Conference

For the first time, JOICFP was invited to participate as a panelist in one of the sub-meetings of the National Sex Education Conference. The 33rd conference was held in Tochigi Prefecture, and was organized by the National, and the Kanto Region Sex Education Research Coordinating Councils, in cooperation with Toshiken (Tochigi Society on Adolescent Health), and supported by, among others, the Ministry of Education, Culture, Science and Sports, and the Ministry of Health, Labor and Welfare. Over 500 participants attended, including public and school health nurses, and administrators from all levels.

The first day saw discussions on sexual health, and sex education for youth, presented by young people with young people. On the second day, there was a panel discussion on "Future Perspectives on Sex Education" among a school nurse, a public health nurse, an OBGYN doctor, a youth representative, and a person on a board of educators in Tochigi Prefecture. Representatives from the ministries of Education, and Health, Labor and Welfare acted as advisers, and Dr. Kunio Kitamura,

Director, Japan Family Planning Association Clinic, chaired the discussion.

Sessions on the third day were divided into ten sub-meetings, and covered topics such as sex education at schools, parent-teenage relationships, human rights and sexual diversity, how to live life despite various health obstacles, counseling and sex education in other countries.

On this last topic of sex education in other countries, Kiyoko Ikegami, Director, UNFPA Tokyo Office, informed the participants about the Netherlands' efforts to tackle induced abortion, and Yoshimi Kaji, Representative, Identity House, spoke on the issue of abstinence education in the US. JOICFP made a presentation on sex education and reproductive health in developing countries.

Using examples from activities in China, Mexico and Kenya, Lisa Asamura, Senior Program Officer, Human Resource Development, JOICFP, told the participants that many developing countries are proceeding toward adopting a more comprehensive 'life skills' approach to sex education. Knowledge is

shared among countries, and adapted to meet diverse social and cultural needs. Asamura stressed that the common ground in various countries was to create a supportive environment in developing adolescent sexual and reproductive health programs. She went on to say that Toshiken and initiatives taken in Tochigi Prefecture have been providing a good model on the creation of supportive adolescent sexual reproductive health environments for overseas trainees visiting on JOICFP programs.



At a workshop during the conference

VOICE OF VOICES
By Toshio Kuroda

Divergence and Integration of
Demographic Transition
Theories

The farsightedness of Prof. F.W.
Notestein, a pioneer of demographic
transition theory

Following on from the previous issue, I would like to discuss demographic transition. The most notable and farsighted vision of demographic transition among many demographers is that of Dr. F. W. Notestein, Princeton University. He defined the last stage of transition as an “incipient decline” of population after vital rates of births and deaths reached equilibrium upon completing the third stage of demographic transition. He had already conceived this idea half a century ago, and his assertion is coming into evidence in all developed countries at present. It is illustrated by TFRs that are far below replacement levels.

One point to be noted is that his concept does not include the many developing countries that emerged after World War II. Even so, Notestein should be commended in that he

foresaw the coming of a population decline, a new stage in human history, when many other experts only distinguished the third stage of population transition as having low rates of births and deaths.

Divergence in Demographic Transition
Theories

The demographic transition observed among developing countries that share 80% of the world population has provoked a new problem in the traditional western oriented demographic transition theory, for example, “The second demographic transition in Europe” asserted by Dirk J. van de Kaa (Population Bulletin vol. 42. No.1, Sept. 1993 reprint).

While societies that follow the western demographic transition theory are now just in the stage of declining population, developing countries manifest various phases of demographic stages: some being still on the way to a remarkable increase, some being at a turning point to lower population increase, and a few having begun to lower fertility following the pattern of western countries.

Changes in Demographic Transition
Factors – from Economy to Population

While the economy is the major factor promoting the western-style demographic

transition, it should be understood that population itself is a driving force of demographic transition in developing countries. Behind this is a perception that human population is now an agent of change, inducing many of the environmental, economic and other external factors.

Integration of Theories and the Role of
Japan

The demographic transition of Japan is not a simple repetition of western experience. It is, therefore, expected that Japan can play a bridging role between the two divided theories as a nation that has maintained its traditional culture while having absorbed western culture. Thus, Japan may be able to make some contribution to integrating demographic transition theories into a system to build a stable society for the benefit of all human beings.

A New View from JOICFP

First printed in 1982, the fourth revision of Bird’s-eye View on Population, Reproductive Health and Family Planning – World and Japan, has just been published. The new version now contains Japanese as well as English text and features 50 pages of information on nine areas, including population trends, gender issues, safe motherhood, family planning, STIs (including HIV/AIDS), aging and adolescents.

With over 60 illustrations and graphs, the full-color magazine-style publication is a valuable information resource reflecting transitions in population, health and society in Japan and the world.

DIARY

- From 16 to 20 September, Sumie Ishii, Executive Director, JOICFP, was in England to exchange information with IPPF.
- During 1 to 22 September, Sumie Ishii, Executive Director, Nobuhiro Kadoi, Senior Program Officer, and Amane Funabashi, Assistant Program Officer, JOICFP, were in Tanzania to organize and attend an African regional workshop, and for project monitoring. Kadoi also visited Kenya to attend an AIDS conference.
- From 10 to 28 September, Yoshitatsu Kanno, Senior Program Officer, JOICFP,

- took part in a JICA mission to China to Guizhou Province for health promotion activities.
- On 1 October, **Fama Ba**, Director, UNFPA Africa Division, and **Etta Tadesse**, UNFPA Representative to the African Union and Regional Institutions, were in JOICFP to learn about JOICFP’s activities and exchange information.
- From 24 September to 2 October, Kei Yoshidome, Assistant Program Officer, JOICFP, was in the Philippines for project monitoring and observation in Capiz Province.

JOICFP Visual Files

Improving Women’s Health

Signals for Help

- from women in Asia

20 minutes: English • Japanese

There are common problems that women face, though the place and time may be different

Three women who live in Laos, Nepal, and the Philippines, share common problems. Problems related to their sexual and reproductive health. However, those surrounding them and even they themselves are hardly aware of the danger that awaits.

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