



# **Experience Sharing on South-South Cooperation in Population and Development: Asian Experience**

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# **South-South Cooperation and the Global Commitment**



# Official Mandate at the UN ICPD+5 para 88.

External funding and support, from donor countries as well as the private sector, should be provided to promote and sustain the full potential of South-South cooperation, including the South-South initiative "Partners in Population and Development",<sup>[1]</sup> in order to **bolster the sharing of relevant experiences, and the mobilization of technical expertise and other resources among developing countries. Updated information on institutions and expertise available within developing countries in the area of population and development, including reproductive health, should be compiled and disseminated.**

<sup>[1]</sup> *Official Records of the Economic and Social Council, 1996, Supplement No. 13 (E/1996/33), part one, chap. XV, para. 198, decision 96/09.*



# Why Capacity Building?



- **Demonstrated expertise in an area of reproductive health does not always translate to a successful transfer of these skills to others.**
- **It is crucial that we seek to build the capacity of Southern individuals and organisations to transfer their unique reproductive health knowledge and skills across PPD countries members.**

# Reccomended Approach in The ICPD+5



- **bolster the sharing of relevant experiences, and**
- **the mobilization of technical expertise**



- **Updated information on institutions and expertise available within developing countries**
- **should be compiled and disseminated.**



# **Our Asian Challenges:**

- 1. What are, apart from lack of financial support, presently the major obstacles hampering increased South-South Cooperation in the area of population and RH/FP and how can these be overcome?**
- 2. How can the donor community be convinced that South-South Cooperation needs the same type of financial support as the traditional 'single country' development activities?**
- 3. Given the limited resources available, what strategies could be adopted to make South-South Cooperation most effective from the cost-benefit point of view?**



# **Modalities for Collaboration in Asian Countries**

**Lesson Learned**



# 1. Observation-Study Tours (OSTs)

- These OSTs - usually of two or three weeks duration - are designed to enable family planning program professionals and other national leaders to learn about the program directly from the villagers who implement it and benefit from it.
- Participants are given opportunities to discuss the program with sub-village, village, and sub-district community leaders and program personnel, as well as with higher-level FP staff.
- Each day, they are helped to consolidate their ideas, to analyze what they observed and relate it to the situation in their own countries.



- **The result of this process differs significantly from a traditional training program or a traditional study tour: the objective is for participants to think creatively about new ways to improve their own family planning program.**
- **These Observation-Study Tours have proven to be an extremely successful approach to sharing the experiences of the Indonesian family planning program with our colleagues from other Asian countries and will, undoubtedly, continue to be a central component of Indonesia's continuing strategy to promote South-South collaboration.**



## 2. Technical Assistance

- The technical assistance among Asian countries began prior to the Cairo conference.
- Our approach has always been to emphasize that this technical assistance differs from the 'standard' or 'traditional' types of TA in that it is provided by people who have substantial practical field experience in the day-to-day planning and implementing a national family planning program.
- Topics of their assistance have ranged from helping to conduct provincial and lower-level training programs to the development of information systems to broad national policy development.



## 3. Internships

- Asian countries introduced a completely new modality of collaboration with other countries, with the internship program.
- This internship in the form of few family planning fieldworkers and their supervisors, who spent three months in the country.
- Most of their time was spent at village and sub-district level, learning from and sharing their own experiences with their peers in the country.
- The evaluation of this program was very positive, and future internships are being planned



## 4. Training Programs

- Although not as extensive as the OSTs, more traditional training programs for people from other countries have been conducted by a number of Asian and other institutions, on topics ranging from urban family planning problems to implant insertion as well as leadership training.
- Training are not necessary limited to countries member of PPD
- Some trainings funded through PPD



## 5. Meetings, Seminars, and Workshops

- Asian countries had sent delegates to conferences and meetings in other countries, such as this workshop
- However, the countries have not routinely represented in the UN system for Asia Pacific Regional meetings (such as Escap)
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## 6. High-level Visits

- **Following Cairo, as part of the process of promoting and clarifying the functions of Partners (see next section), high-level Asian countries personnel visited each of the ten initial member countries.**
- **We need to have similar activities among Asian Countries in order to energize the work of partners**
- **Other types of high-level visits were made to many donor countries.**



# 7. Contraceptive Supplies

- Contraceptive supplies have been donated between Asian and Other countries
- Many countries are especially interested in providing such collaboration with developing countries where payment could be undertaken on a counter-trade or barter basis.
- Over the years, Asian countries had not had significant success in selling its contraceptive products to donor agencies intending to provide them to other countries.
- It would be desirable to establish completely neutral quality assessment arrangements, then - wherever quality is judged to be adequate - accord priority to developing countries in selling these products.

# 8. Cross-national Surveys and Other Multi-Countries Research



- Asian countries has been involved in several multi-country, coordinated research activities, such as the Demographic and Health Surveys, clinical trials of selected contraceptives, and comparative studies of migration.
- We might need to have routinely assessment to monitor MDGs Progress in the Asian Country



## 9. Marketing and Trading Cooperation

- This is a category of collaboration where family planning program commodities which are produced in one country might be sold in another region of the world where the producer country's contacts are minimal.
- In this, another country with closer ties to the other region might assist in marketing and/or trading.
- In exchange, the producer might provide the commodity to the partner at much reduced rates, thus benefitting both countries.
- Many countries have undertaken discussions on this issue with other countries but, thus far, they have not yielded concrete results.



# 10. Joint Production of Contraceptive and Other Medical Supplies

- For large countries with sufficient contraceptive users, the economics of scale are sufficient to warrant the manufacture of contraceptives domestically.
- For smaller countries, however, this may not be the case. Agreements could be made to encourage neighboring countries to collaborate in various ways on the production of contraceptives, for example by joint development of individual factories, or by joint planning of production capability for several different types of contraceptives.



# 11. Information Exchange

- The least costly and yet important approach to intercountry collaboration is the sharing of materials via email or electronic transfer. However, to be effective and relevant, there is a need for assessment of quality and careful selection of these materials, and perhaps translation, to precede the sending of anything from one country to another.
- Indonesia has been involved in several information exchanges, such as the ESCAP and ASEAN POPIN projects.
- Most recently, a Newsletter and a video (Indonesia Shares an Invitation to Challenges) have begun the process of sharing information about South-South collaboration in population and family planning.



# 12. Long-term Degree Training

- The 'normal' procedure is still to send training fellows for degree training in developed countries' universities.
- However, many universities in South countries today provide undergraduate and graduate programs in population-related areas for their own nationals, and could provide such training as well to people from other countries.
- Often, the problem to be overcome in this regard is the language of training.
- On a small scale, Indonesia has begun to address this issue by providing Indonesian language training to prepare people for long-term study.
- The first such efforts in the field of population, on a TCDC basis, began in 1994 and continue today.



# 13. Cooperation in Collaborating with Other Developing Countries

- In this approach two or more 'provider' countries agree to share their specific procedures for some aspect of their population program with a 'recipient' country.
- For example, personnel from country A might study an aspect of the management of the family planning program, first in country B, then in country C; countries B and C would coordinate their efforts so that the program for country A is optimally beneficial.
- Although such an approach may have certain logistics constraints, it is potentially very advantageous to all. Thus far, Indonesia has not attempted such an ambitious arrangement.



# 14. Peer Review

- A program, or an element of a program, could be critically reviewed by a small team of 'peers' - people in equivalent leadership positions in another country's program.
- This might be structured to enable each of the team members not only to observe and review but also to host the same team in the review of his or her own program.
- We have a few activities on this format.



# **Asia's Experiences: Case study from Indonesia**



# **Participants of International Training Program ITP – BKKBN**

October 1987 – September 2006

**National Family Planning Coordinating Board  
International Training Program  
(ITP-BKKBN)**

# List of Countries and Number of Participants

Oct. 1987 – Sept. 2006 (4,375 participants)



No.	Country	Total
1	Bangladesh	586
2	India	433
3	Philippines	335
4	Vietnam	324
5	Nepal	196
6	Papua New Guinea	167
7	People's Rep.of China	155
8	Pakistan	130
9	Egypt	123
10	Tanzania	118
11	Thailand	103
12	Ethiopia	99
13	Iran	69
14	Ghana	64
15	Kenya	57
16	Myanmar	57
17	Cambodia	53
18	Nigeria	52
19	Malawi	51
20	Laos	49

No.	Country	Total
21	Indonesia	46
22	Bhutan	44
23	Uganda	41
24	Sri Lanka	38
25	Senegal	35
26	U.S.A.	30
27	Zimbabwe	28
28	Malaysia	26
29	Fiji	25
30	Korea (DPR of)	25
31	Namibia	25
32	Solomon Islands	23
33	Madagascar	22
34	Turkey	19
35	Maldives	18
36	Mongolia	18
37	Yemen	18
38	Morocco	14
39	Sudan	14
40	Zambia	14

# List of Countries and Number of Participants

## Oct. 1987 – Sept. 2006 (4,375 participants)



No.	Country	Total
41	Mali	12
42	South Africa	12
43	Uzbekistan	12
44	Kazakhstan	11
45	Vanuatu	10
46	Kyrgyzstan	9
47	Mozambique	9
48	Jordan	8
49	Korea (Rep of)	8
50	Azerbaijan	7
51	Botswana	7
52	Burkina Faso	7
53	Germany	7
54	Swaziland	7
55	Japan	6
56	Palau	6
57	Taiwan	6
58	West Samoa	6
59	Afghanistan	5
60	Marshall Isl	5

No	Country	Total
61	Russia	5
62	Rwanda	5
63	Tonga	5
64	Tunisia	5
65	Algeria	4
66	England	4
67	Micronesia	4
68	Brunei Darussal	3
69	Comoros	3
70	Eritrea	3
71	France	3
72	Gambia	3
73	Syria	3
74	Cameroon	2
75	Congo	2
76	Denmark	2
77	Jamaica	2
78	Lesotho	2
79	Palestine	2
80	Seychelles	2

No.	Country	Total
81	Togo	2
82	Angola	1
83	Benin	1
84	Canada	1
85	Chile	1
86	Cook Islands	1
87	Hongkong	1
88	Ivory Coast	1
89	Mauritius	1
90	Mexico	1
91	Netherlands	1
92	Oman	1
93	Trinidad	1
94	Tuvalu	1
	<b>Total</b>	<b>15</b>
	<b>Bangladesh (First Project)</b>	
	<b>80-82</b>	<b>392</b>
	<b>Grand Total</b>	<b>407</b>

## Participants of International Training Program (ITP) By Program Year (Oct. 1987 - Sep. 2006)



Year	Total	Remarks
1987	22	
1988	74	
1989	203	
1990	300	
1991	266	
1992	209	
1993	272	
1994	400	
1995	335	
1996	398	
1997	370	
1998	220	
1999	202	
2000	128	
2001	129	
2002	122	
2003	63	
2004	124	
2005	120	
2006	26	
<b>Bangladesh (First Project 1980-1982)</b>	<b>392</b>	
Grand Total	4,375	

# Participants of International Training Program (ITP) By Types Program (Oct. 1987 - Sep. 2006)



No.	Type of Program	Total	Remarks
1	Scheduled: Multilateral	1,753	85 courses, 83 countries
2	Scheduled: Bilateral Bangladesh	392	16 courses, 1 country
	Bangladesh (First Project 1980-1982)	392	
3	Non-scheduled	1,782	199 courses, 64 countries
4	Internship	56	5 batches & 8 countries
	Grand Total	4,375	

# Participants of International Training Program (ITP) Observational – Study Tours By Types of Program (Oct. 1987 – Sep. 2006)



No.	Type of Program	Total	Remarks
	Scheduled Multi-lateral:	1,753	
1	Community Participation	302	(62 TCDC)
2	Policy Makers	205	
3	IEC	497	
4	Women in FP/RH & Development	205	(15 TCDC)
5	Management Overview & Comm-Based	452	
6	Management Info. System (MIS)	12	
7	Integrated Services	29	(TCDC)
8	Quality Improvement	23	
9	Role of Religious/Institutions & Leaders	17	
10	Adolescent Reproductive Health (ARH)	11	
	Scheduled Bilateral:	784	
11	Bangladesh	392	
	Bangladesh (First Project) 1980-1982	392	



	Non-Scheduled	1,782	
12	Community Participation	183	
13	IEC	117	
14	Women in FP/RH & Development	69	
15	General Management Overview in FP	160	
16	Contraceptive Services	22	
17	FP Counselling	6	(DPR Korea)
18	Management Information System (MIS)	34	
19	Social Marketing	24	
20	Muslim Leadership in FP	143	
21	Population and FP Management	438	
22	Community-Based Family Planning	467	
23	Quality Improvement	18	
24	Population Education	19	
25	20th Seminar on Population	42	East West Center
26	Poverty Alleviation	26	
27	Adolescent Reproductive Health (ARH)	8	
28	Safe Motherhood	6	
29	Internship	56	
	Grand Total	4,375	



**ITP,BKKBN(NFPCB),INDONESIA**  
**LIST OF COUNTRIES AND NUMBER OF PARTICIPANTS**  
**Oct.1987 – Sep. 2006 (4,375 participants)**

No.	Country	Total
	South Asia	1846
1	Afghanistan	5
2	Bangladesh	978
3	Bhutan	44
4	Comoros	3
5	India	434
6	Maldives	18
7	Nepal	196
8	Pakistan	130
9	Sri Lanka	38

No.	Country	Total
	South East Asia	995
10	Brunei Darussalam	3
11	Cambodia	53
12	Indonesia	46
13	Laos	49
14	Malaysia	25
15	Myanmar	57
16	Philippines	335
17	Thailand	103
18	Vietnam	324

No.	Country	Total
	East Asia	219
19	Hongkong	1
20	Japan	6
21	Korea (DPR of)	25
22	Korea (Rep. of)	8
23	Mongolia	18
24	People's Rep.of China	155
25	Taiwan	6
	Central Asia	39
26	Azerbaijan	7
27	Kazakhstan	11
28	Kyrgyztan	9
29	Uzbekistan	12
	Middle East	120
30	Iran	69
31	Jordan	8
32	Oman	1
33	Palestine	2
34	Syria	3
35	Turkey	19
36	Yemen	18

No.	Country	Total
	Pacific	253
37	Cook Islands	1
38	Fiji	25
39	Marshall Islands	5
40	Micronesia	4
41	Palau	6
42	Papua New Guinea	167
43	Solomon Islands	23
44	Tonga	5
45	Tuvalu	1
46	Vanuatu	10
47	West Samoa	6
	North Africa	160
48	Algeria	4
49	Egypt	123
50	Morocco	14
51	Sudan	14
52	Tunisia	5





No.	Country	Total
	Sub Saharan Africa	685
53	Angola	1
54	Botswana	7
55	Benin	1
56	Burkina Faso	7
57	Cameroon	2
58	Congo	2
59	Eritrea	3
60	Ethiopia	99
61	Gambia	3
62	Ghana	64
63	Ivory Coast	1
64	Kenya	57
65	Lesotho	2
66	Madagascar	22
67	Malawi	51
68	Mali	12
69	Mauritius	1
70	Mozambique	9

No.	Country	Total
71	Namibia	25
72	Nigeria	52
73	Rwanda	5
74	Senegal	35
75	Seychelles	2
76	South Africa	12
77	Swaziland	7
78	Tanzania	118
79	Togo	2
80	Uganda	41
81	Zambia	14
82	Zimbabwe	28



No.	Country	Total
	Europe	22
<b>83</b>	<b>Denmark</b>	<b>2</b>
<b>84</b>	<b>England</b>	<b>4</b>
<b>85</b>	<b>France</b>	<b>3</b>
<b>86</b>	<b>Germany</b>	<b>7</b>
<b>87</b>	<b>Netherlands</b>	<b>1</b>
<b>88</b>	<b>Russia</b>	<b>5</b>
	America	36
<b>89</b>	<b>Canada</b>	<b>1</b>
<b>90</b>	<b>Chile</b>	<b>1</b>
<b>91</b>	<b>Jamaica</b>	<b>2</b>
<b>92</b>	<b>Mexico</b>	<b>1</b>
<b>93</b>	<b>Trinidad</b>	<b>1</b>
<b>94</b>	<b>U.S.A.</b>	<b>30</b>
	Grand Total	4,375

# Participants of International Training Program (ITP) (Oct. 1987 – Sep. 2006)



No.	Region	Total
1	South Asia	1,846
2	South-East Asia	995
3	East Asia	219
4	Central Asia	39
5	Middle East	120
6	Pacific	253
7	North Africa	160
8	Sub-Saharan Africa	685
9	Europe	22
10	America	36
	Total	4,375



**Terima Kasih**

**Thank you**