JICA’s Cooperation in the field of Reproductive Health and Family Care in China

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1. Introduction

2. JICA’s Activities on Reproductive Health

3. JICA’s Projects in China
Japan’s ODA in Health Sector

(1) JICA
   - Technical Cooperation, Equipment Supply, Development Study, Volunteer Program, Survey for Capital Grant Aid, etc.

(2) Ministry of Foreign Affairs
   - Capital Grant Aid, Funding to IPPF, UNICEF, UNFPA, GFATM, etc.

(3) Ministry of Health, Labor and Welfare
   - Technical Cooperation through related organizations, Funding to WHO, UNAIDS, etc.

(4) JBIC
    Japanese Yen Loan
JICA’s four main pillars as Independent Administrative Institution

• Aiming at a more result-oriented approach and enhanced efficiency
• Enhancing transparency for the administration and activities
• Promoting public participation
• Intensifying assistance for peace-building and post-conflict reconstruction
JICA Health Sector Cooperation

Varied mechanisms

(1) Technical Cooperation Project
(2) Equipment Supply
(3) Development Study
(4) Volunteer Program
(5) Partnership with NGOs and Civil Society
(6) Japan Disaster Relief
(7) Survey for Capital Grant Aid Project
JICA Health Sector Cooperation

Priority Areas

• Infectious Diseases Control
  – HIV/AIDS, TB, Malaria, Parasite, Polio, etc.

• Reproductive Health (RH)
  – Safe Motherhood
  – Family Planning (FP)
  – Adolescent RH
Approaches

• Human Resources Development / Capacity Development
• PHC and Community Health System
• Partnership with International Organizations and NGOs
Trends of JICA’s Cooperation in RH

• 1970s -- Family Planning (FP)
• 1980s -- FP & Maternal and Child Health
• 1990s -- Various kind of Reproductive Health Projects (After 1994)

(Combination of FP, MCH, Youth RH, HIV/AIDS, Women’s Empowerment, etc)
JICA Activities on RH (On-Going)
(Total Budget for RH: About 2 Billion Yen / Year)

(1) Technical Cooperation Project

Asia (250 million Yen/year)
- China: Capacity Building of Reproductive Health and Family Care Service in Central and Western Region
- Vietnam: Reproductive Health in Nghe An Province
- Myanmar: Reproductive Health
- Cambodia: Maternal and Child Health (Follow-up)
- Bangladesh: Safe Motherhood
- India: State of Madhya Pradesh Reproductive Health
- Laos: Strengthening Health Service for Children
(1) Technical Cooperation Project (Cont.)

Central Asia and Caucasus (60 million Yen/year)
- Armenia: Reproductive Health

Middle East (280 million Yen/year)
- Afghanistan: Reproductive Health
- Morocco: Safe Motherhood in Rural Areas
- Palestine: Reproductive Health
- Syria: Improvement of Reproductive Health in rural area
JICA Activities on RH (On-Going)
(Total Budget for RH: About 2 Billion Yen / Year)

(1) Technical Cooperation Project (Cont.)

Central and South America (300 million Yen/year)
- Bolivia: Strengthening of Health Networks – Improvement of Maternal and Child Health
- Mexico: Prevention of Uterine Cervical Cancer
- Paraguay: Nursing Education
- Honduras: Reproductive Health in the Health Region 7 (Follow-up)
- Nicaragua: Strengthening of Adolescent Reproductive Health
- Guatemala: Child Health
(1) Technical Cooperation Project (Cont.)

Africa (120 million Yen/year)

- Kenya: Improvement of Health Service with a focus on Safe Motherhood in the Kisii and Kericho Districts
- Madagascar: The Study for the Improvement of Maternal and Child Health
- Niger: IEC Program Management (Dispatch of the Third Country Expert from Tunisia)
JICA Activities on RH (On-Going)
(Total Budget for RH : About 2 Billion Yen / Year)

(2) Japan Overseas Cooperation Volunteers (JOCV)
More than 100 volunteers are working in the field of RH (midwifery, public health, youth activities, community development, etc.)

(3) Equipment Supply
(Collaboration with UNICEF & UNFPA)
Contraceptives, Medical equipment for safe delivery and child care, Essential drug, for more than 20 countries.

(4) Others
Survey for Grant Aid, Small-size Projects, Training Program in Japan and the third countries
JICA Projects on RH
(Major examples)

(1) Vietnam
Reproductive Health Project

(2) Tunisia
Strengthening Reproductive Health Education Project

(3) Jordan
Family Planning and Gender in Development Project

(4) China
Project for Capacity Building of Reproductive Health and Family Care Service in Central and Western Region
VIETNAM, Reproductive Health Project (1997-2005)

To strengthen RH services such as safe and clean deliveries

Feature
• Commitment and ownership
• Participation of various stakeholders

Outcome
• Increased ANC rate
• Increased number of deliveries at medical facility
• Reduced number of induced abortion
• Contribution to national policy making

To strengthen education activities targeting adolescent concerning RH

Feature
• Focusing adolescent (15-19 years old)
• Enter-Educate program
• Collaboration between ONFP (National Family and Population Board) regional centers and NGOs

Outcome
• Institutional capacity in IEC of ARH
• IEC materials suitable for Tunisian ARH situation
• Youth friendly centers and youth friendly areas
JORDAN, Family Planning and Gender in Development Project (2000-03)

To improve Family Planning practice

Features
- Integrated approach of RH and Gender in Arab
- Capacity building of local human resources,
- IEC program, income generation activities, and support to MCH centers

Outcome
- Behavioral change of women and family; FP practice improved
- Women’s self-esteem and self-confidence increased
- Women’s empowerment and participation in community activities
CHINA, Project for Capacity Building of Reproductive Health and Family Care Service in Central and Western Region (2006-2009)
1) Background of the Project
   ① Taiceng County, Jiangsu Province (project site); The first model county of IP (1984~86)
   ② Establishment of “China Training Center of Reproductive Health and Family Care (CTC)” (2005)
   ③ Japan’s Grant Aid Program for CTC (medical and training equipment) (2005)

2) Project Purpose:
   to develop the capacity of institutions for reproductive health and family care service in central and western region (19 provinces) through the capacity building for training of CTC
3) Output:

- to conduct the training courses in CTC based on the needs of project area
- to develop the functions of the institutions of 8 selected model counties
- to improve the quality of service in the institutions of model counties
- to establish mutual communication and support system between CTC and model counties

4) Input from JICA

- Japanese experts for RH, public health, maternal and child health, IEC, counseling, adolescence, etc.
- equipment supply for service improvement in 8 model counties
- capacity development of staffs of related institutions

1) Background
   • Guizhou; poorest province (GDP per capita)
   • project site; minority’s autonomous county
   • entry point of project activity; self-awareness for health and sanitation

2) Output
   • to improve family care service in township and village level
   • to improve the capability of livelihood
   • to establish institution for comprehensive life environment of village people
Situation on Health and Sanitation of Project Site Township

- Positive rate of parasite; high
- Sanitation of drinking water; poor
- Sanitary toilet; not popular
- Health level of pregnant women; low
- Level of maternal and child health; low
- Technical level of family care service staff; low
- Education level of village people; low
- People’s awareness for sanitation and health; low