# *JICA's Assistance in Health*


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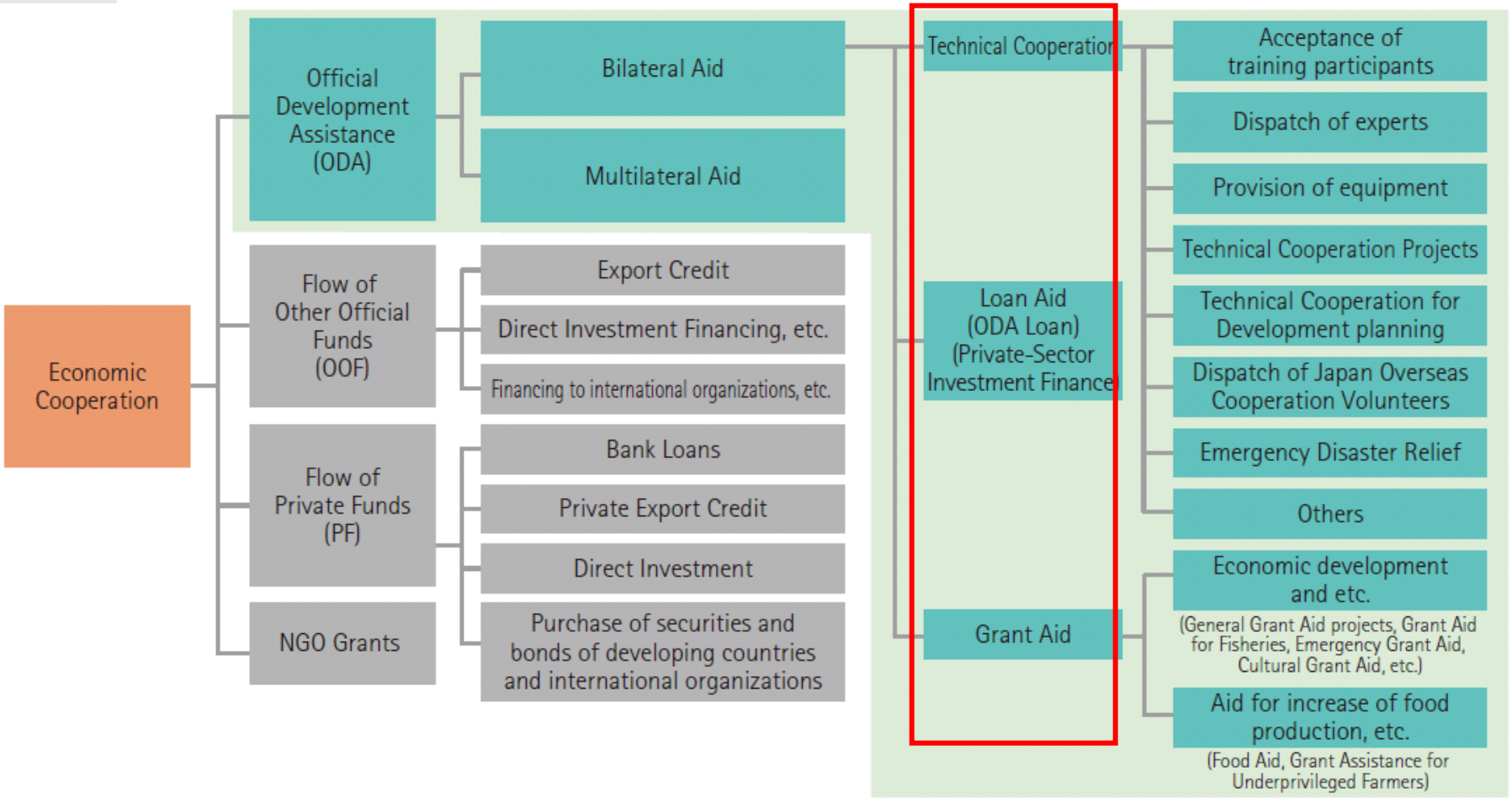
# An Overview of Japan's ODA

# Japan's ODA and JICA




- Japan International Cooperation Agency
  - Established in 1954
  - Responsible for implementing Japanese Official Development Assistance (ODA)

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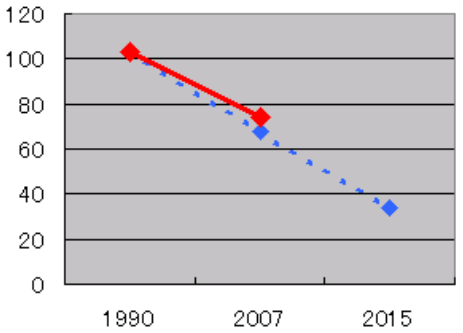
# Shifting Focuses in the Global Health Responses

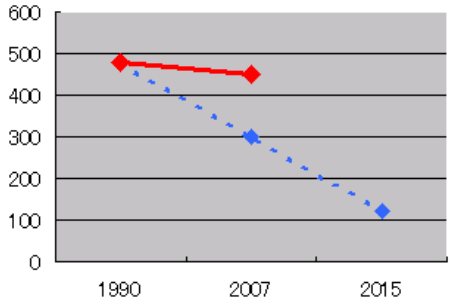
| Global Trends | Japanese Responses |
|---|---|
| ***1990s*** | *1994*: US-Japan Global Issues Initiative (GII), addressing population and HIV/AIDS |
| **Emerging and reemerging infectious diseases control** | |
| **Reproductive health** | |
| ***Early 2000s*** | *2000*: Okinawa Infectious Diseases Initiatives, Facilitating the establishment of the GFATM |
| **MDGs: Maternal and child health** | |
| **Infectious diseases control** | *2004*: Health and Development Initiatives (HDI), Human Security / MDGs / HSS |
| ***Late 2000s*** | |
| **Horizontal health system strengthening vs. vertical health programs** | *2008*: TICAD IV: "Yokohama Action Plan" G8: "Toyako Framework for Action on Global Health" |
| ***2010*** | |
| **Back to MDGs: Improving maternal and child health** | *2010*: Launch of the "Japan's Global Health Policy, 2011-2015" |

Progress of MDGs

MDG4: Reduce child mortality




MDG5: Reduce maternal mortality




Target ◆国際協力機構◆

Actual ◆

# 10. Millennium Development Goals

- Internationally agreed targets for the socio-economic development
- Agreed in 2000, goals to be achieved by 2015

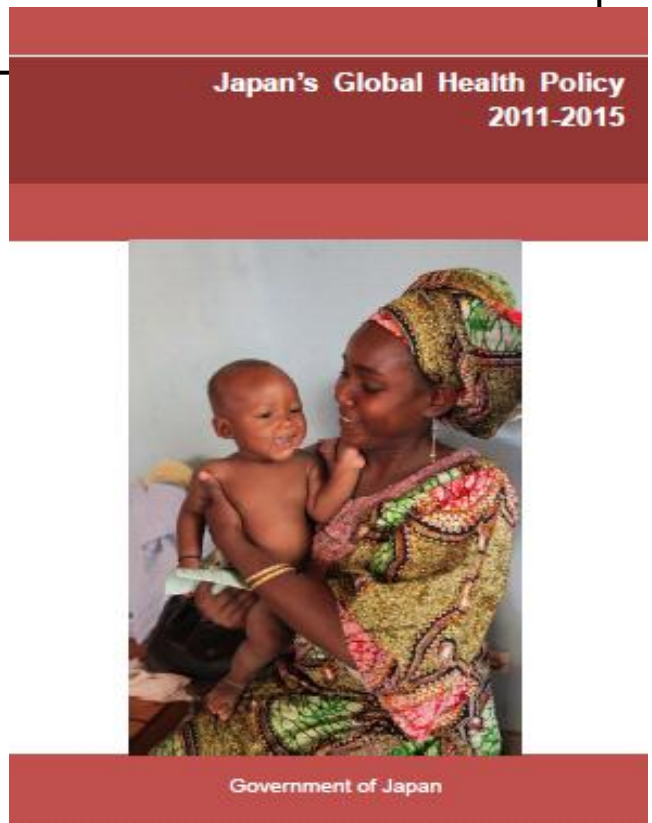

**8 MDGs**

1. Eradicate extreme poverty and hunger
2. Achieve universal primary education
3. Promote gender equality and empower women
4. **Reduce child mortality**
5. **Improve maternal health**
6. **Combat HIV/AIDS, malaria and other diseases**
7. Ensure environmental sustainability
8. Global partnership for development

# Japan's Global Health Policy 2011-2015

- **Vision:To help achieve MDGs**
- **Acceleration of progress towards MDG4,5 through effective package of proven interventions for MNCH**
- **Further progress in MDG6 through support for GFATM**

- Approach:
- Building strategic partnerships
- Encouraging country ownership
- Fulfill accountability by relevant mechanism for M & E



# Japan's Global Health Policy 2011-2015
## EMBRACE（Ensure Mothers and Babies Regular Access to Care）

**Create linkages between communities and facilities**

**Support community-based preventive and clinical care,**

including family planning

**Mobilize resources and adopt innovative strategies in collaboration with other partners**

**Support facility-based preventive and clinical care** eg, strengthen health systems including the development of human resources, facilities and equipment

**Make effective use of Japan's expertise - ie, "Quality Continuum of Care"**

**Support healthy childhood,**
Including immunizations

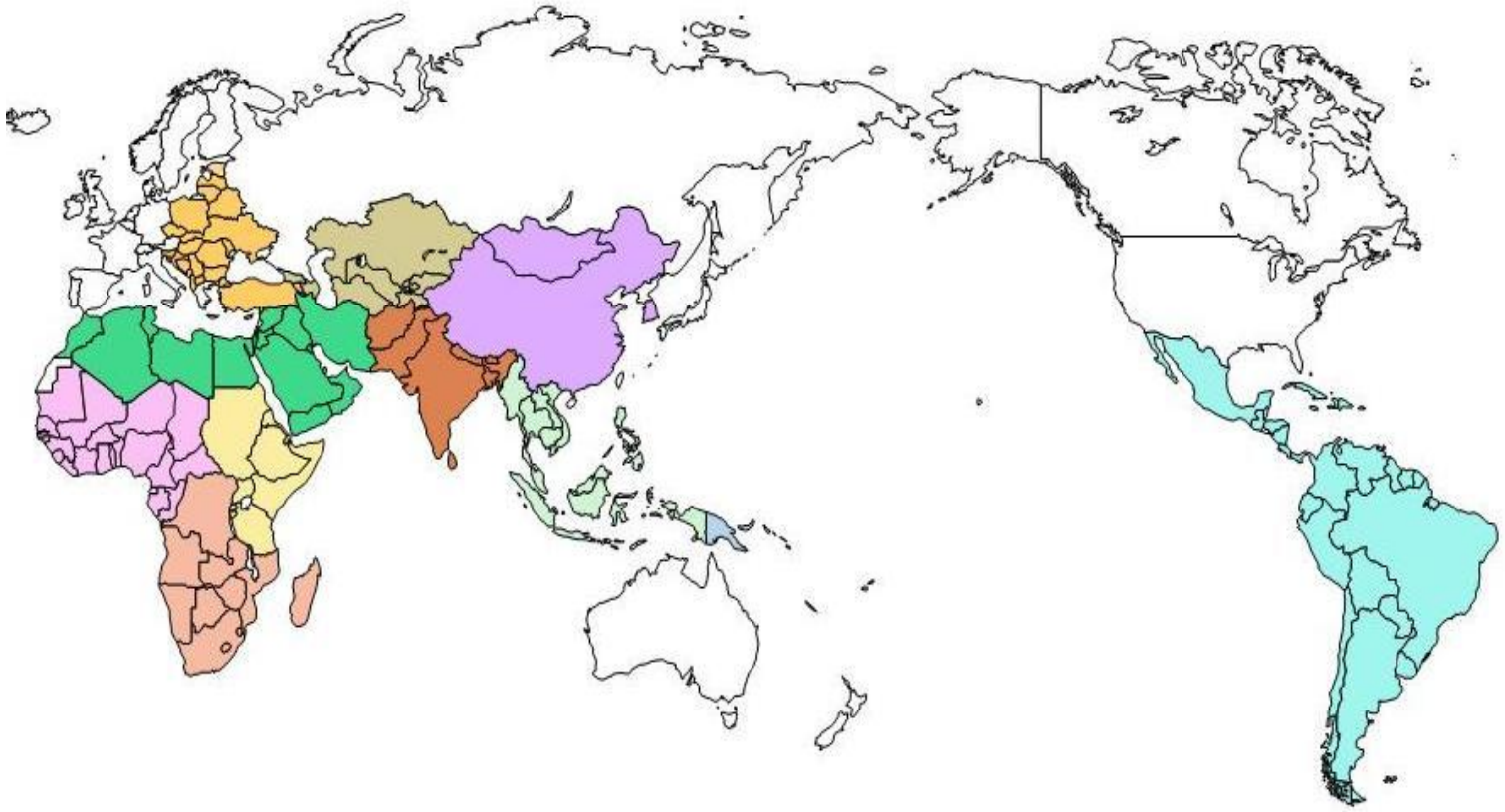
**Create linkages between pre-pregnancy and childhood care**

***Box*：Ensure Mothers and Babies Regular Access to Care （EMBRACE）**

EMBRACE is a package of effective interventions to save lives of mothers and babies in partnership with all stakeholders, with broad approach, including better infrastructure, safe water and sanitation, and other social developments.

# *JICA's Assistance in Health*

# Countries/Regions Receiving JICA's Support



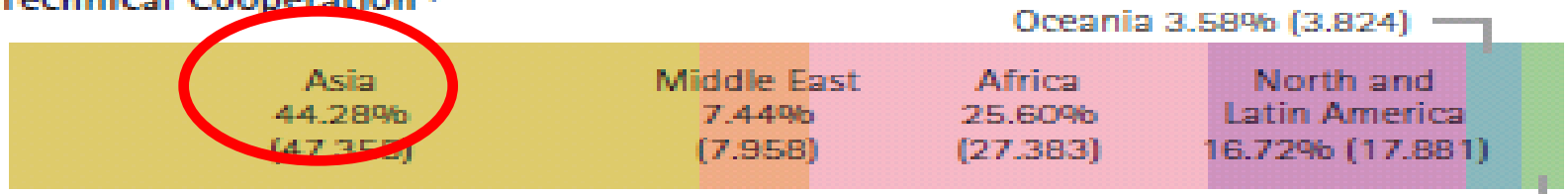
Supporting 151 countries with the operation budget exceeding JPY 1 trillion (in FY2008)

# Regional distribution of JICA activities: JFY 2008 (JICA Annual Report 2009)

**Table 12 Expenditure by Region*1**

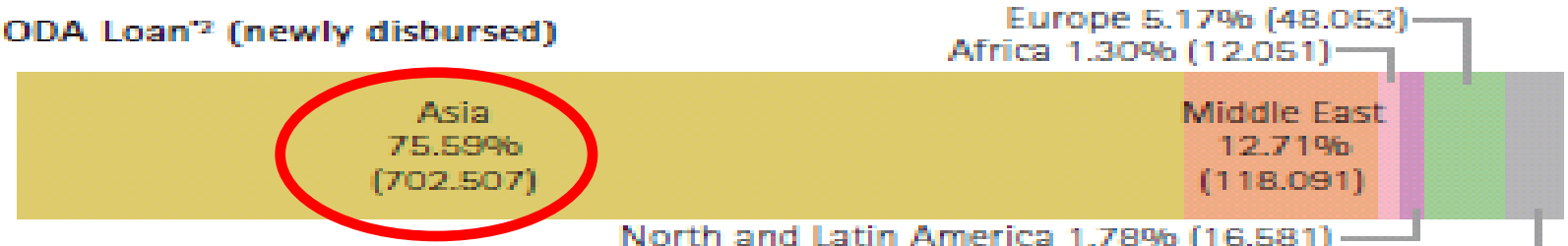
(%, ¥1 billion)

**A Technical Cooperation*1**



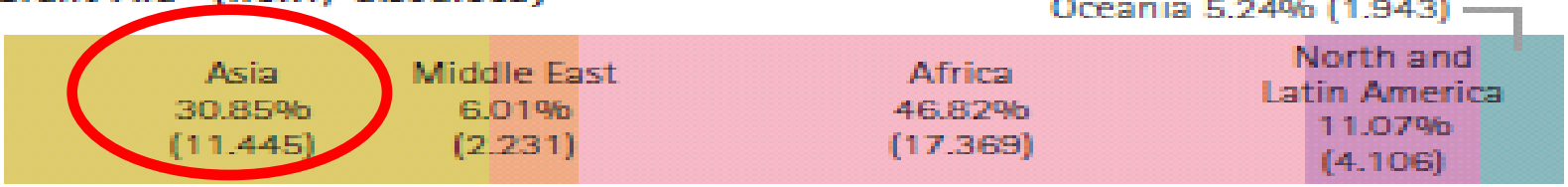

*1 Including expenses required for dispatching volunteers and emergency aid groups

**B ODA Loan*2 (newly disbursed)**




*2 Amounts are based on loan agreements.

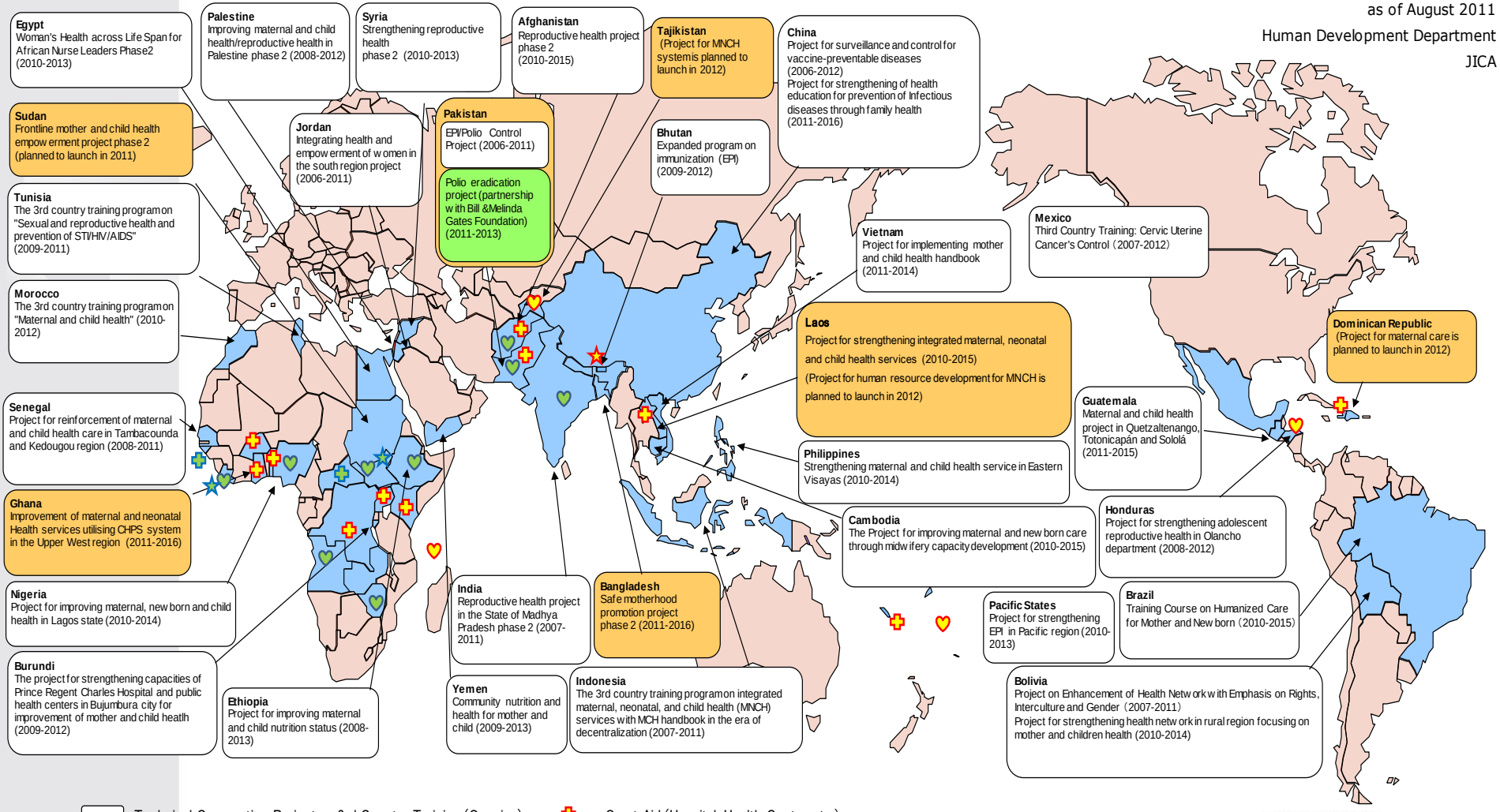
**C Grant Aid*3 (newly disbursed)**




*3 Amounts are based on grant agreements.

# Map of JICA projects for maternal, newborn and child health/reproductive health

as of August 2011
Human Development Department
JICA




- Technical Cooperation Project or 3rd Country Training (Ongoing)
- Technical Cooperation Project (New)
- Official Development Assistance (ODA) Loans

- Grant Aid (Hospital, Health Center etc.)
- Grant Aid in Collaboration with UNICEF (Hospital, Health Center etc.)
- Grant Aid (Equipment etc.)
- Grant Aid in Collaboration with UNICEF (Equipment etc.)
- Grant Aid (Medical Equipment incl. vaccine, commodities etc.)
- Grant Aid in Collaboration with UNICEF (Medical Equipment incl. vaccine, commodities etc.)

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As of 1 September, 2012

# JICA's Response to Infectious Diseases

**Afghanistan**

Tuberculosis Control Project, Phase II
2009 – October 2014

**Indonesia**

**Nicaragua**

Strengthening of Activities of Survey and Control for Chagas Disease
Sept. 2009 – August 2012

Project for Enhancing the Early Warning and Response System of Infectious Disease
August 2012 – August 2017

China
Myanmar

Afghanistan
Egypt
Tunisia

Ethiopia
Kenya
Tanzania
Mozambique
Madagascar

Cambodia
Viet Nam
Indonesia

Western Pacific
Solomon Islands

Honduras
Nicaragua

Brazil

Ghana
Zambia
Botswana
Lesotho
Swaziland
South Africa

**Zambia**

Project for Scaling up of Quality HIV and AIDS Care Service Management
November 2009 – November 2014

**Solomon Islands**

Malaria Control Project
February 2011 – January 2014

**Various Infectious Diseases JICA is responding to:**

- HIV/AIDS
- Tuberculosis
- Malaria control
- Neglected Tropical Diseases
- Emerging Infectious Diseases (i.e., Avian Flu)

Colored dots in the map indicate diseases JICA is addressing in countries around the world.

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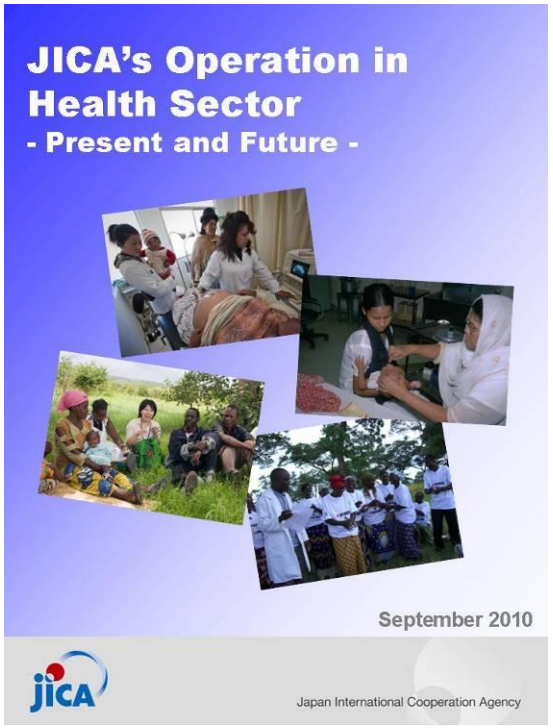
# 11. JICA's Support for Achieving MDGs: Health Sector Position Paper

- Launched in September 2010
  Available online at:
  http://www.jica.go.jp/english/operations/thematic_issues/health/pdf/position_paper.pdf

- Outlining JICA's health sector cooperation for 2011-2015, to assist countries to achieve health-related MDGs
  - Why [objectives]
  - What [priorities]
  - How [guiding principles]

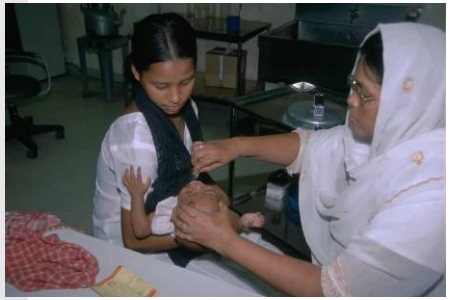
- In line with JICA's four principles
  - Addressing the global agenda
  - Reducing poverty through equitable growth
  - Improving governance
  - Achieving human security



# 11-2. JICA's Health Sector Cooperation: Why, What, How?

- Why [objectives]: ***Saving lives, protecting health***
  - Building human resources for economic/social development
  - Responding to infectious diseases that have impacts beyond borders

- What [priorities]: ***Achieving MDGs 4, 5 and 6***



*Maternal and Child Health*

*Infectious Diseases Control*

→To be achieved via health system strengthening:

- Strengthening capacity of public administration for health
- Improving health facilities, strengthening referral system and coordination to improve the quality of health care services
- Addressing the shortage of human resources for health

# 11-3. JICA's Health Sector Cooperation: Why, What, How? (Cont'd)

- How [guiding principles]
  - Focus on capacity development
    - Ensuring sustainability, informed by experiences from the field
  - Evidence-based operation for assuring quality of assistance
  - Coordination and alignment to national health plans
    - Partnering with key stakeholders, participating in harmonization mechanisms

NB: JICA's position paper is also in line with the *Japan's Global Health Policy 2011-2015 (MoFA, September 2010)*, which aims to deliver results effectively and efficiently by addressing bottlenecks impeding progress on the health MDGs.

# Strategic Priorities in Health

## 1. Maternal , Newborn and Child Health

- Comprehensive and continual maternal, newborn and child care and midwifery training
- Nutrition support and immunization for child health

## 2. Infectious Diseases Control

- Prevention of HIV new infections and quality of life of people infected and AIDS patients
- DOTS support and countermeasures against co-infection of tuberculosis and HIV

## 3. Health System Strengthening

- Capacity building of human resources for health (HRH)
- Improved quality of health services through quality management
- Participatory primary healthcare supported by the local health administration and local community by enhancing community-based activities

# JICA's Operation in Health Sector

**Why?**

- Saving Lives, Protecting Health
- Building Human Resources For Economic and Social Development
- Responding to Infectious Diseases that Have Impacts Beyond Borders

**What**

Priorities in Health Cooperation: Two Sub-Sectors in Health

- Maternal and Child Health
- Infectious Diseases Control

Cross-cutting issues in health cooperation/ Challenges to the Strengthening of Health Systems

- Strengthening Capacity of Public Administration for Health
- Strengthening the Capacity of Referral Health Facilities and Coordination to Improve the Quality of Health Care Services
- Addressing the Shortage of Human Resources for Health

**How**

- Focus on Capacity Development
- Evidence-based Operation For Quality Assistance
- Coordination and Alignment To National Health Plan

# *Example of JICA Programme/Projects*

Meeting of local people
for health improvement

An activity of
a Community Health Officer

Polio Immunization
by a Community Health Officer

**Goal**

**Multi-faceted approaches for the improvement of MCH in Ghana, focused in the Upper West Region (UWR) (Draft, June 2011)**

Reduce under five mortality rate/maternal mortality ratio from 76/1,000 (2008) and 560/100,000 live birth (2005) to 40/1,000, 185/100,000 live births (2015) respectively in Ghana and consequently achieve MDGs 4 and 5 (Source: Countdown to 2015 Decade Report)

**Objectives of the Gov of Ghana (excerpt)**

| | 2006 | 2011 (target) | 2015(target) |
|---|---|---|---|
| **Strategy 1. Improve coverage of focused antenatal care interventions** | | | |
| (Indicator) % of pregnant women receiving at least 4 focused antenatal care visits | 69% | 85% | 90% |
| **Strategy 2 Improve coverage of skilled delivery interventions** | | | |
| (Indicator) % of the deliveries undertaken by skilled birth attendants | 50% | 65% | (Not set) |
| **Strategy 3: Improve coverage of neonatal interventions** | | | |
| (Indicator) % of new-borns who had a care contact in the 1st 48hrs of birth | 54% | 70% | 75% |

(Source: Under 5 Child Health Strategy 2007-2015, MOH, 2009)

**Programme Objectives & Indicators**

## Improve MCH in Ghana, focused in the Upper West Region*1

**Increase in % of Antenatal Care Coverage in the UWR *2: from 88% (current) to 98% (target)**
**Increase in % of deliveries undertaken by skilled birth attendants in the UWR : from 46% (current) to 80% (target)**
**Increase in % of mother & newborn who attended PNC in the UWR : from 69% (current) to 80% (target)**

**Outcome**

**1. Improvement of access to basic health services**
- increasing the No. of health posts
- improving access road

**2. Capacity development of community health workers**
- enhancing quality/function of facility-based deliveries
- improving quality/function of pre/postnatal care

**3. Enhancement of health systems**
- strengthening referral systems
- strengthening outreach services
- coordination of organizations

**Components (projects)**

Technical Cooperation
Grant Aid
Multi-sector approach

(Legends)
----- planning stage
—— work plan made
▬ in practice

- Construction of CHPS compounds
- Human Resource Development Support (Master course training for PH administrators)
- Health Sector Budget support (March, 2011, 200 Million JPY)
- Improvement of Maternal & Neonatal HS utilizing CHPS system in the UWR (Five years starting June 2011, 870 Million JPY)
- Community Health Policy Adviser (Nov 2011-September 2013)
- Japanese Overseas Cooperation Volunteers (Promotion of health workers' visit and education of community people in the UWR)
- Collaboration with UNICEF

# Construction of CHPS compounds

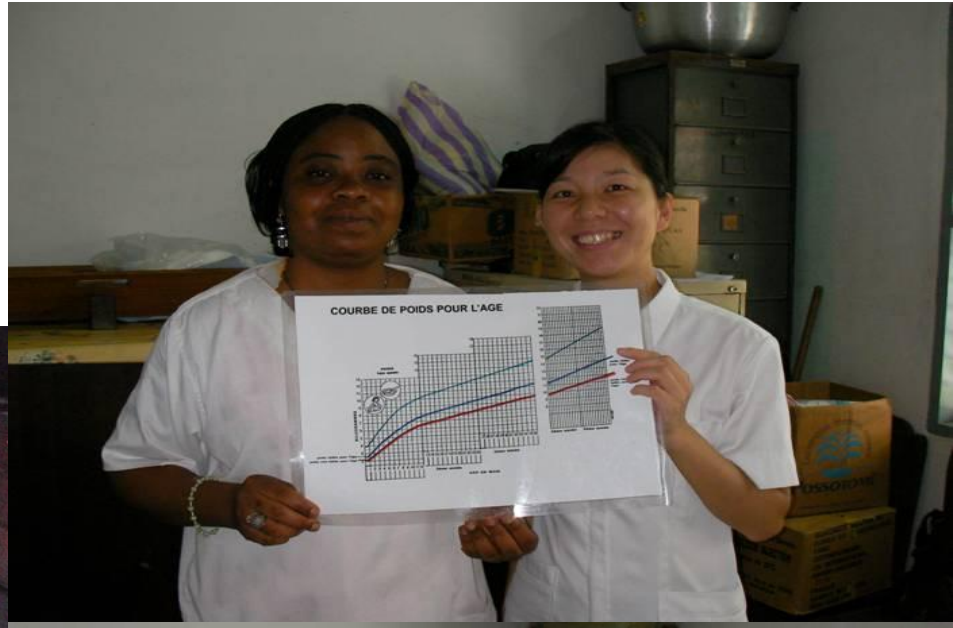
# Maternal and Child Health(MCH) Programme in Bennin (2006-2011)

**Programme Objective**

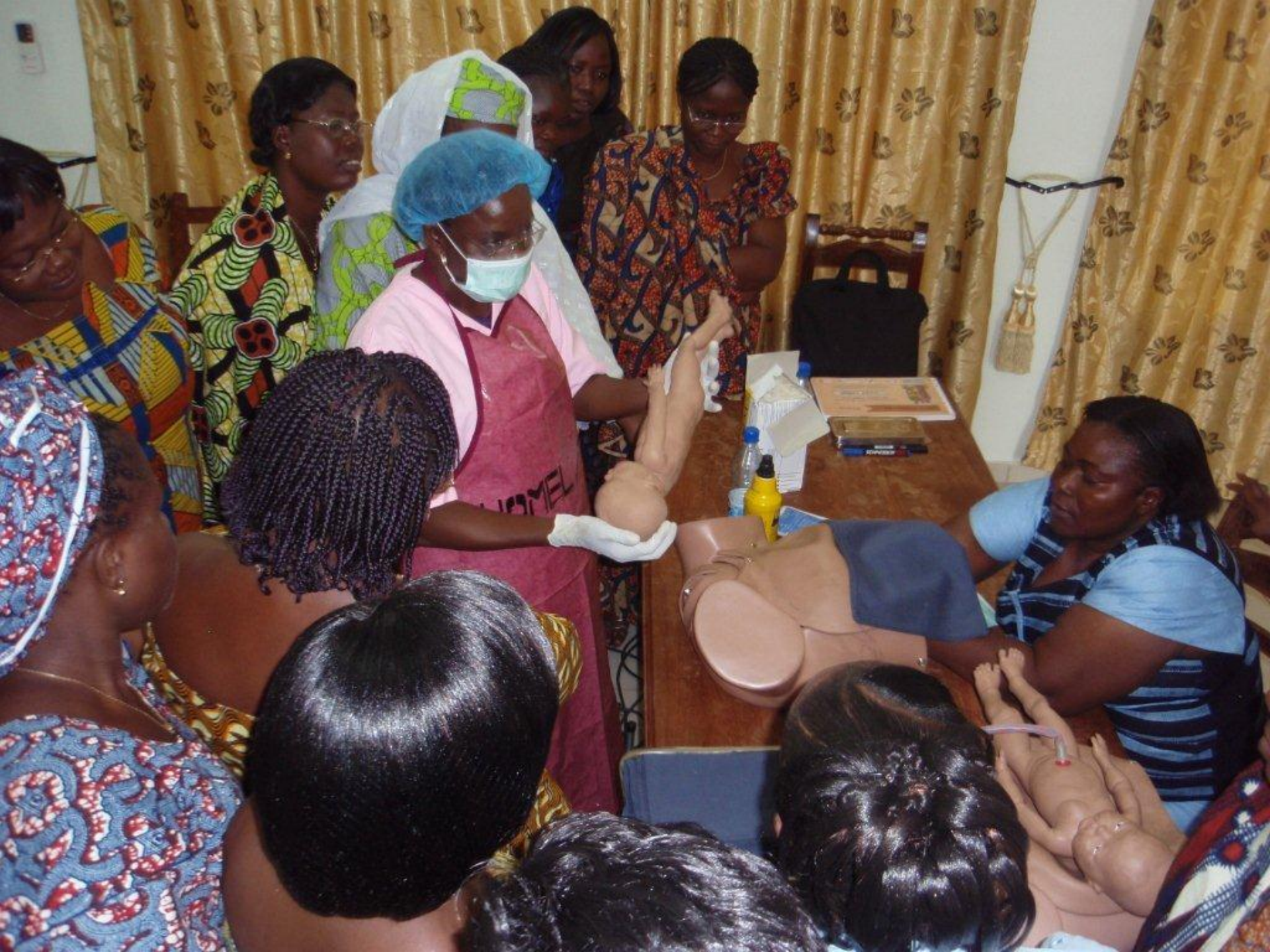
**Reduce maternal mortality ratio/neonatal mortality rate in Atlantique-Littoral regions.**

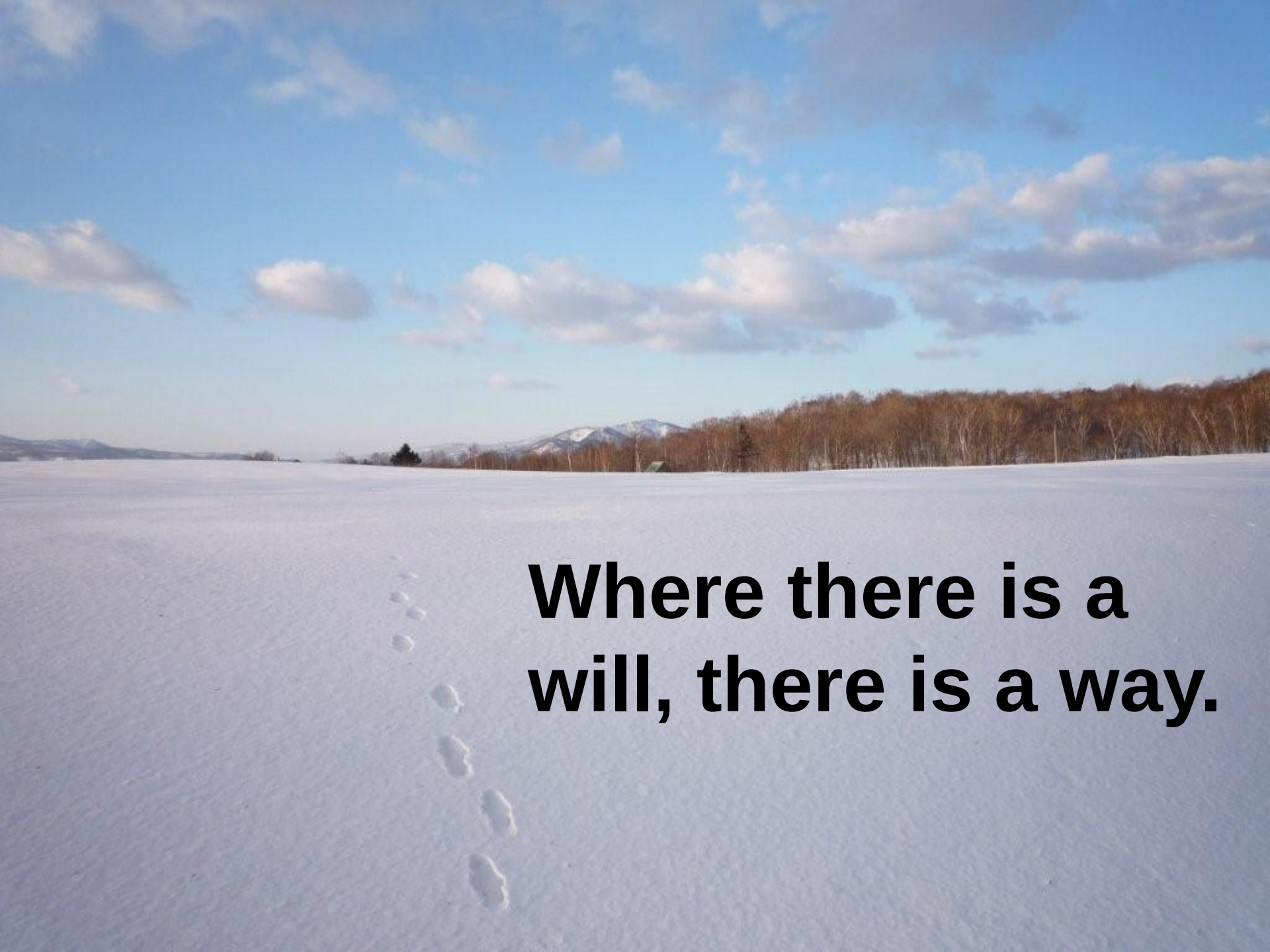
**Outcome**

1. **MCH service in the HOMEL will be improved.**
2. **Continuous Educational system for MCH staffs will be enhanced in the HOMEL.**
3. **MCH services of 1st/2nd level health centers in Altantique-Littoral regions will be improved.**


COURBE DE POIDS POUR L'AGE


Aliments protecteurs
Aliments énergétiques




Where there is a
will, there is a way.

# Thank you
# ありがとう！