

JOICFP NEWS

Humankind, Culture and the Earth

Tokyo symposium highlights impact of lifestyles and population pressure on environment



Rapid population growth and the environment: a favela in São Paulo, Brazil.

The theme of "Humankind, culture and the earth" drew comments about the impact of lifestyles in developed and developing countries and population pressure on the environment from speakers and panelists at the Population Forum 21 symposium, held in Tokyo on December 22. Opened with speeches by



Soshitsu Sen

Saburo Okita, chairman of Population Forum 21 and former foreign minister of Japan, and Dr. Nafis Sadik, executive director, UNFPA, the

symposium included addresses by Dr. Soshitsu Sen IX, grand tea master and Prince Takamadonomiya, followed by a panel discussion.

The Japanese tea ceremony, or *chanoyu*, is a traditionally ritualized way of making tea. Originally from China, the ceremony is greatly influenced by Zen Buddhism and was raised to an art form

by Sen-no-Rikyu in the 16th century. The ceremony, which emphasizes spiritual tranquility and simplicity of taste, has in turn influenced many aspects of Japanese culture and lifestyles.

"The tea ceremony teaches us of our most valuable possessions — naturalness, simplicity and self-knowledge," said Sadik in her opening address. "Yet today, outside the tea house, we are living in a world that lacks those most precious of all qualities. It is a world profoundly out of balance."

"In the industrialized countries, where population growth has dramatically slowed or stopped, we are using the globe's resources in a reckless and heedless manner," she said. "The prevalent ethic causes great environmental damage through its wasteful production techniques and gratuitous consumption." Sadik added, however, that most people suffer from a lack of resources. "In the developing world where four-fifths of the people live, widespread poverty is exacerbated by high population growth rates which erode or destroy economic development and create environmental havoc," she said. "Together, both the developed and developing worlds

are threatening our life support systems on this planet."

The symposium was organized by Population Forum 21 and the Interdependent World Institute. Supported by UNFPA and the Mainichi Shimbun (Newspaper) in cooperation with JOICFP, it was attended by 300 people.

Sustainable Development

For his keynote address, Sen touched on the issues of consumption, sustainable development and quality of life under the theme of "Suggestions for a better way of life." Referring to the four elements of the tea ceremony — peace, mutual respect, purity and silence — Sen stressed that lifestyle change is the key to a brighter future for humankind and the earth. "The themes of peace and mutual respect go beyond national borders and skin color," he said. "We are all part of the same human race. We must learn how to coexist peacefully with one another and nature if we are to survive."

"Environmental issues should be jointly discussed by the people sharing the same planet to ensure that the future is brighter for the

next generations," said Prince Takamadonomiya. In his address, the prince stressed shared global responsibility for environmental issues.

The panel discussion was coordinated by Takeshi Hara, chief, Science Department, Mainichi Shimbun (Newspaper). The panelists comprised Kazuo Ogura, director general, Economics Bureau, Ministry of Foreign Affairs; Gregory Clark, professor, Japanese Literature, Sophia University; Chieko Mulhern, professor, Literature, Fukuoka Women's University; and Eiko Ohya, freelance journalist.



Nafis Sadik

Women, Population & Development

During her stay in Japan, Dr. Nafis Sadik, executive director, UNFPA, gave a lecture at the Office of the Prime Minister on December 16. Below are highlights of her talk.

When we talk of increasing the use of family planning (FP), we are talking about a great deal more than providing contraceptives. Family planning is part of an environment in which everyone has opportunities and choices. Building on these opportunities begins at birth and depends among other things on the position of girls and women. Higher status for women brings more ability to choose: where the choice is available, women will take advantage of it.

The International Conference on Population and Development is part of the wider vision. Beyond it lie the Women's Conference and the proposed Social Development Summit in 1995. Women's interests will be central to all these discussions and decisions.

Education for Women

Sadik also spoke at the Meeting with Japanese Women's Groups in Fukuoka, held on December 17 and 18. Below are highlights of her lecture.

Education of girls is perhaps the key intervention in releasing them from the oppressive hold of tradition. It is also a key to reducing fertility levels and infant mortality rates and in improving the overall well-being of the family. With education comes increased confidence and self-esteem. Educated women are more likely to stand up for themselves, join the labor force and seek healthcare for themselves and their families.

Family planning program development and service delivery should be appropriate to the needs of individuals and communities. Non-governmental organizations have an important role as they are usually in touch with the aspirations and needs of the local community. To be effective, programs must provide client counseling, full information regarding contraception and a choice among safe and effective methods. The availability of quality FP makes it possible for women and men to practice responsible parenthood. 

Population Target for Africa

Dakar conference calls for dramatic cuts in population growth rate

An ambitious regional population growth rate of 2.5% by the year 2000 was set as a target for Africa by participants of the Third African Population Conference, held in Dakar, Senegal, from December 7 - 12, 1992. Incorporated in the recommendations put forward in the Dakar Declaration, the call to dramatically slow population growth underscored the desire of African governments to solve population problems, promote sustained economic growth and achieve sustainable development. To lower growth rates, participants called for the integration of population policies and programs in development strategies, focusing on strengthening social sectors with a view to influencing human development and urged the setting of quantified national objectives for reduction of population growth.

The conference was organized under the joint auspices of the Organization for African Unity (OAU), United Nations Economic Commission for Africa (UNECA), African Development Bank, UNFPA and Union for African Population Studies. Attended by officials of 48 countries and representatives of international agencies and non-governmental organizations (NGOs), the conference took the theme of "Population, Family and Sustainable Development."

One of the main issues on the agenda of the meeting was a review of the Kilimanjaro Program of Action (KPA) adopted at the Second African Population Conference, held in Kilimanjaro, Tanzania, in 1984. An epoch-making set of recommendations, the KPA marked the first show of unanimous African support for action on population. During the Dakar meeting, participants endorsed the KPA, but noted that the worsening socioeconomic situations of most African countries made

implementation of population and development programs difficult.

The role of the NGO in promoting population and development programs at the community level was also fully recognized in the resolutions which called for NGOs to promote community participation and involve communities in program planning, implementation and financing; enhance collaboration and coordination with multilateral and bilateral organizations and other organi-

zations and government agencies. Participants agreed that NGOs should be strengthened and considered full partners by governments in the implementation of population programs and in contributing to the formulation of related policies. "They should also be empowered to act as a liaison between the community and the public sector programs to facilitate large-scale replication of successful innovative



Participants of the Dakar conference.

pilot programs," state the resolutions.

Another feature of the recommendations put forward at the conference was the recognition of the effectiveness of integrating population factors with other aspects of the development planning process. In outlining the international community's role, participants called for strengthening South-South cooperation with regard to training, exchange of information, sharing of experiences, know-how and technical expertise.

Participants agreed that priority should be put on Africa in population activities. As a result, the resolutions appeal to donors to respond to requests for population assistance and activities and improve their coordination of population assistance with other bilateral and multilateral donors to ensure that the population needs and requirements of African countries are properly addressed. 

Meaningful FP Messages for Women

IWTC director urges greater access to information and education for women

"There was a period of time when enormous amounts of money were being poured into international organizations working in the population field. Because of the amount of money available, these organizations were entirely run by men. The salaries were very high with \$500,000 salaries being paid to the heads of some of these population agencies. But there was not a single woman in a decision-making position. It is easy enough to say that it is natural for women to be involved in family planning (FP), but at that time the fact was that they were not being involved in any of the decisions being made — and some terrible decisions were made," said Anne Walker, director, International Women's Tribune Center (IWTC). Walker made her comments to JOICFP during a visit to exchange information on November 30.

Walker provided an outline of her organization and spoke about issues related to FP communications and women during the discussions. Established in 1976, IWTC is a non-profit, non-governmental international women's organization. Its main aims are to serve as a communications link for women in over 170 countries and source of information and technical assistance

in women and development areas, and to provide support for women's organizations, particularly with their efforts to promote more women-oriented development plans, policies and projects. The areas in which IWTC is involved include publications, workshops, internships, training, women organizing, science and technology and community economic development.

According to Walker some of the past "terrible mistakes" were made in FP communications, a field in which women were not actively involved. To illustrate her point, Walker referred to communications that were aimed at "forcing women to stop having babies." She said that such activities showed no respect for women and no understanding that childbearing was the main purpose in many women's lives and that without children "they were nothing." "Millions and millions of dollars were being spent on communications across Latin America with posters telling women to stop having babies

and that it was their fault that the country was going down the drain," she said. "So, there had to be a revolution in FP agencies — which is when women started getting involved in the 1980s. But this also meant that women started saying things about abortion rights and women in development — messages that some agencies did not like. Now that a lot of the funds have been withdrawn and salaries have come down, suddenly there are more women."

However, Walker said that women are still divided on the issue of FP and that well-funded networks already established for FP around the world must be pulled together. Commenting that education, economic development and training opportunities for women have gone backwards, Walker stressed that women must be considered as women — many of whom have desperate needs — and not just as mothers and daughters. She said that women without children are not counted by agencies such as UNICEF which



Anne Walker

considers women and children as a single unit. "A lot of women are dying in Somalia while the men and their guns are well-fed," she said. "Women are not dying because of a lack of food, but because they lack status." She said that many international agencies are close to losing the support of the women's movement because of their failure to consider issues such as women's status. "This would be tragic," she added.

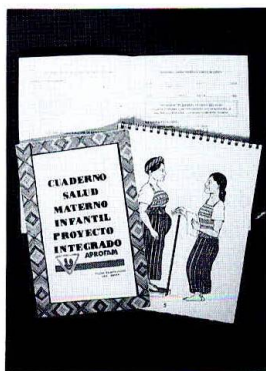
"I am not an FP specialist, but if we regard women as human beings, the rest takes care of itself," she said. I have seen many cases where one woman who got access to information and education caused a revolution in her community."



IWTC postcards

Support for Safe Motherhood

A maternal and child health (MCH) handbook and manual produced with funds from the Voluntary Deposit for International Aid (VDIA) scheme of the Japanese Ministry of Posts and Telecommunications is being used to promote safe motherhood in areas in Guatemala where the Integrated Project (IP) is being implemented. Modeled after the Japanese MCH Handbook, the Guatemalan handbook and manual are presently being distributed to pregnant women and mothers by traditional birth attendants (TBAs) and health workers and will be given to all women in IP areas including adolescents in the future. The contents of the book and manual reflect the input of health personnel from various levels including the Guatemalan representative of



WHO, a professor of public health from the Medical Department of San Carlos University, the director of the health center in the IP area of San Lucas Tolimán and selected TBAs. To meet the needs of the Mayan population in the area, it was agreed that two booklets were needed: a Spanish-language handbook to serve as a health record for the mother and child and designed to be filled in initially by TBAs and health personnel and at a later stage by mothers; and an illustrated manual without text to be used by mothers as a visual guide to safe motherhood practices. Ahead of the distribution of the booklets,

TBAs were given training in how to use and fill in the health records in October and November last year. A total of 8,000 sets of the two booklets have been printed and are being distributed in IP areas in Guatemala.

Low Status, Illiteracy and Early Marriage

Bangladeshi women face lives of little choice and many children, JOICFP mission finds

A JOICFP mission learned much about the situation of women living in rural areas of Bangladesh while in the country from November 22 - December 5 to prepare for the implementation of the new four-year regional project. Entitled "Sustainable Community-based Family Planning (FP) and Maternal and Child Health (MCH) Project with Special Focus on Women," the project is being implemented in Bangladesh by the Family Planning Association of Bangladesh (FPAB) in cooperation with JOICFP and IPPF and is supported by UNFPA.

To gain an understanding of the situation of women in Bangladesh, the mission held discussions with government officials and representatives of non-governmental organizations and international agencies and observed the

conditions of rural women. Based on its findings, the mission outlined three interrelated issues that affect the conditions of women in Bangladesh: lack of access to education; the practice of early marriage; and the traditional low status of women.

While the overall literacy rate is low for Bangladesh's entire population, the rate for women is extremely low with about 85% of rural women illiterate. Despite the government's provision of eight years of free elementary school education for girls and five years for boys, only 3% of girls receive a full elementary education. Most drop out of school in their first year.

The traditional low status of women contributes to restricting their access to education. Women are expected to play an active role in agriculture and take care of the home and family without taking part in decision-making on matters such as household economy. Under such circumstances, education is not considered important for women.

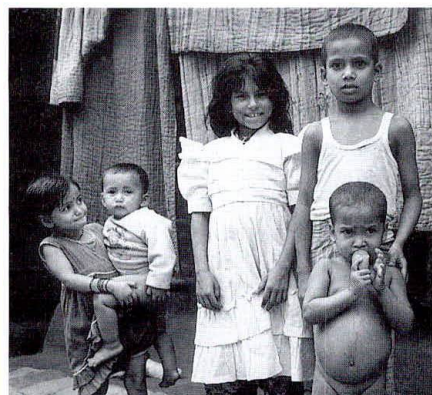
Meanwhile, the tradition of early marriage is widespread in much of rural Bangladesh, where a girl is considered ready for marriage at first menstruation, and too old for marriage and a burden on her family if single at the age of 20. Early marriage in turn severely affects MCH. By beginning childbearing at an earlier age, a woman is more likely to have a larger number of less healthy children and experience more health problems herself.

With a population of 116 million and population density of 800 persons per square kilometer, Bangladesh is already a densely populated nation. Despite successes in reducing its total fertility rate from a high level of 7 in the 1960s, the rate still remains high at 4.6 (1991). Meanwhile, the infant mortality rate is also high at 118 per 1,000 live births (1991).

Providing women with access to safe FP/MCH services and information is one



Childbearing begins early for most women in Bangladesh.



Malnourished children in a rural area.

Draper Fellowships

Four graduate students at the Johns Hopkins School of Public Health were recently named as the first recipients of the newly-established William H. Draper Jr. Fellowships. The awards provide financial assistance to students primarily from developing countries who have the potential to become leaders in family planning and related health communication. The fellowships are aimed at supporting advanced training and field internships in the use of modern communication techniques including mass media and entertainment to advance health education and public health advocacy. Of the four recipients, two are from India, one from Egypt and one from the Philippines. The fellowship is supported by a number of contributors including JOICFP.

Population to Surge Around Tokyo

The population in the greater Tokyo metropolitan area is expected to dramatically increase by the year 2010 absorbing over 90% of Japan's total population growth, according to a recent report by the Institute of Population Problems of the Japanese Ministry of Health and Welfare (MOHW).

The largest increases are predicted for the Tokyo metropolitan area including Saitama, Chiba and Kanagawa prefectures. Saitama Prefecture is expected to have the highest population growth rate at 38.7%, followed by Chiba with 31.2% and Kanagawa with 26.1%.

The report estimates that the total population of these prefectures will increase by 6.29 million people in 2010. If added to the population of Tokyo, which is expected to drop by 5.3%, the total number of people living in the greater Tokyo metropolitan area will represent 29% of the national total in 2010, the report said.

The institute also predicted Japan's population will total 130.4 million in 2010, up 6.79 million from 1990.

A Call to Philippine People

Dr. Antonio Lopez, provincial health officer, Tarlac Province, the Philippines, spoke with JOICFP NEWS on December 11 about family planning (FP) promotion and the impact of the government's decentralization policy on healthcare. Below is an outline of the interview.

Health has been made a priority in the Philippines under President Fidel Ramos and our new secretary of health, Juan Flavio, emphasizes that FP, responsible parenthood, and the protection of children and mothers should be given top priority as is stated in our constitution. It is true that the Catholic church in my country opposes any method of FP outside of the so-called "natural" methods, but the stand of the Department of Health is to give people complete and correct information about different methods of contraception and responsible parenthood to enable them to make their own decisions.

The success of FP promotion in the Philippines depends on the motivation and commitment of the health workers. It is crucial that these workers are committed to getting the message across to the people that we will go down the drain if we do not slow population growth. Our resources are dwindling, available land is shrinking and our per-capita income is not increasing as fast as the population. Hence, we should at least slow population growth, improve

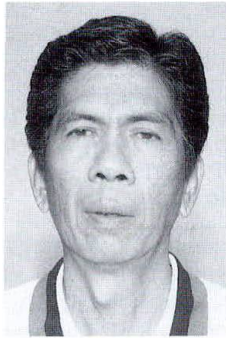
the quality of life of each and every Filipino and make everyone a productive person.

Health workers should make people aware that problems such as malnutrition, deprivation and communicable diseases are the effects of big family size. If these messages were brought to the grassroots, then people would be more understanding of the ill-effects of big family size.

Apart from FP, another major priority for the government is the promotion of primary health care through people's empowerment. Dr. Flavio has stressed that prevention of diseases, especially communicable diseases, should be emphasized more than medical care because of our economic situation. It

would save considerable costs if people were to participate in identifying health problems and the decision-making on how to address the problems, and if they were mobilized to work together to resolve them.

This approach jibes well with the process of decentralization under which local government units are being challenged to charter the course for their own community, municipality or province and are obliged to look for resources. As a provincial health officer, I think decentralization will initially be extremely difficult for us economically. It will be a test of our resourcefulness and management capabilities to see how well we can deliver services given the scarce resources available to us.



Antonio Lopez

Mexico Takes FP Further

Dr. Fernando Amado, director, Supervision & Training, Family Planning Bureau, Ministry of Health (SSA), Mexico, spoke with JOICFP NEWS on December 16 about the bilateral population and FP project being conducted in Mexico with the Japan International Cooperation Agency (JICA) and activities of the Mexican Family Planning Foundation (MEXFAM). Below is an outline of his interview.

The bilateral project supported by JICA is being conducted in two pilot areas and focuses on improving the quality of FP/MCH (maternal and child health) services to reduce the infant mortality and maternal mortality rates. The aims of this project include expanding the coverage of FP usage, providing prenatal care and the training of traditional birth attendants (TBAs). A public health nurse from Japan arrived in Mexico in July last year and is living in Tecpan, a small village in one of the pilot areas. The project was started in April 1992 and will be conducted for a period of five years.



Fernando Amado

The FP Bureau works closely with non-governmental organizations (NGOs) involved in FP and adolescent health such as MEXFAM. Through MEXFAM, our office receives films in JOICFP's animated health series (*Blue Pigeon*, *Music for Two* and *Best Wishes*) which we use to train personnel in orientation and counseling on FP and sex education. These IEC materials are high quality, well produced and have good messages. I am also familiar with the Integrated Project (IP) in Mexico and feel that its concept is very suitable to the Mexican situation.

An innovative new clinic was established last November in Mexico City with the support of MEXFAM's community doctor system to provide services mainly to adolescents and female industrial workers. Initially, it is hoped that industries will pay for monthly health and FP services provided by the clinic for their female employees. MEXFAM will stop supporting the clinic in the second phase when it is expected to provide IEC services in schools and to industries. By the third phase, the clinic is expected to be able to provide laboratory tests, which will earn income to support other clinic activities and recover costs. By doing this, it is hoped that the clinic will be able to provide services for adolescents free of charge.

Health Education for Egyptian Women

Dr. Mostafa Mohamed Ali Kabier, specialist, Obstetrics and Gynecology, Naga Hammadi General Hospital, Egypt, spoke to JOICFP NEWS about the bilateral FP/MCH project being conducted with the Japan International Cooperation Agency (JICA) in Naga Hammadi. Below is an outline of his interview conducted on December 11.

Health education is an important aim of the project. In rural villages of Egypt, most women do not even have basic knowledge of hygiene and

have little understanding of pregnancy and issues related to safe motherhood such as nutrition. By providing advice to pregnant women, we can also prepare them to accept FP because a large number of rural women become pregnant soon after giving birth—often while they are breast-feeding.

I think the application of Japanese experiences has worked in this project because we have seen improvements in health conditions of the people in many villages and have seen the number of acceptors of FP grow.



Mostafa Kabier

Lao Women Make Do with Less

Women in Laos motivated but lack FP/MCH services and accurate information on reproductive health

A JOICFP mission laid much of the groundwork for the implementation of the new four-year regional UNFPA-supported project in Laos while in the country from December 14 - 23. The project, entitled "Sustainable Community-based Family Planning (FP) and Maternal and Child Health (MCH) Project with Special Focus on Women," is to be implemented through the Ministry of Health (MOH) in cooperation with JOICFP and the support of UNFPA.

During its stay in Laos, the team held discussions with government officials and

representatives of non-governmental organizations and international agencies and visited six districts and three provinces to gain an understanding of the country's population situation, particularly the conditions of women, and the availability and quality of FP/MCH services.

The JOICFP team worked closely with Sabiha Syed, country director, UNFPA; Dr. Kotsaythoune Phimmason, chief, Planning, National MCH Institute (IMCH) of the MOH; and Pheyphanome Nhouyvanisvong, national program officer, UNDP, while in the field. The mission also held a planning meeting with officials of the Lao Women's Union (LWU), UNICEF and IMCH on the location of possible project sites.



Representatives of UNFPA, UNDP, IMCH and JOICFP gather information from the deputy provincial health director during a field visit to Luang Prabang Province.

Health System

Based on its findings, the mission constructed a profile of the country's health system which is organized into four basic levels: central (MOH), provincial, district and village. It was noted, however, that the four-tier system is not functioning smoothly, that it lacks a criteria for referrals and that the roles of each level are not clearly defined. The team found much of the cause to be a severe shortage of equipment and supplies and well-trained personnel, particularly at the district level and below, which drove patients to seek services at higher levels. Moreover, due to the system's weaknesses and difficulties of travel within Laos, people tend to rely on traditional healers and private pharmacies for services and supplies.

With a total population of 4.2 million (UNFPA/1991) and an annual growth rate of about 2.6%, Laos has placed priority on FP as a means of birth spacing to improve MCH, rather than to reduce fertility. However, the total fertility rate is estimated to be high at around 6 with a crude birthrate of 41 per 1,000 live births. Meanwhile, MCH is being emphasized by the government which is allocating 70% of the public health budget to MCH activities. According to UNICEF figures, the infant mortality rate was 148 in 1991.

The mission noted that the most

pressing problems in FP at present are a lack of supplies and shortage of trained staff. However, it also found a high level of awareness of FP due to information coming across the borders from Thailand and China, and a strong demand for services in the areas it visited. The team was told that it is common for women to buy injectable contraceptives themselves at pharmacies and take them to health facilities to be administered. Despite this motivation, the mission found that women in Laos lack correct information about reproductive health.

Based on the mission findings, one of the major strategies of the new JOICFP project will be to strengthen district-level healthcare to improve trust in the health system at the local level. The project, which is anticipated to be implemented in two or three districts, will incorporate a fee-charging system to ensure project sustainability. Since the concept of paying for contraceptives and drugs is already established in Laos, it is expected that people will not hesitate to pay for project services if quality and constant supplies are assured. At present, contraceptives are provided free of charge by the government, but are in short supply and not readily available outside the main urban areas. J



LWU officials suggest project sites.

UNFPA Greeting Cards

A series of 14 greeting cards produced by UNFPA are to be put on sale to raise funds for activities of the organization. The cards feature colorful illustrations designed by children and young people around the world for UNFPA's first international poster competition, held in 1992. A total of 134 submissions from entrants of 36



countries were made in the competition, which was aimed at creating awareness and understanding of population issues ahead of the Inter-

national Conference on Population and Development in Cairo, Egypt, in 1994.

Meanwhile, the second international poster competition, open to children and youths from the ages of 6-18, has taken the theme of "Population and Our World" to highlight rapid population growth, urbanization, destruction of the environment and related issues. Announcement of winners will be made on World Population Day on July 11.

AIDS and Adolescents

JFPA AIDS hotline highlights misconceptions and fears of teens

The Japan Family Planning Association (JFPA) found deep concern and widespread misconceptions about HIV/AIDS among adolescents when it ran an AIDS hotline for adolescents and children during Child Welfare Week last year. Actively involved in the field of adolescent health and sexuality, JFPA took the initiative to operate an AIDS counseling service in the face of an increasing number of HIV/AIDS cases in Japan. The hotline, which was operated for six hours a day from May 11 - 16, received a total of 433 calls of which 301 specifically concerned AIDS. Of this number, 287 calls were made by teenagers.

The idea to target adolescents in an AIDS hotline was developed by JFPA following the poor response from young people to a 36-hour AIDS hotline run by the Information Center for HIV and Human Rights on World AIDS Day in 1991. Only 2.4% of the callers to the hotline were adolescents.

The most common calls received by counselors of the JFPA hotline were from adolescents engaged in high-risk behavior and concerned about HIV infection. Questions about the routes of infection and requests for information on where to receive a blood test for HIV were the

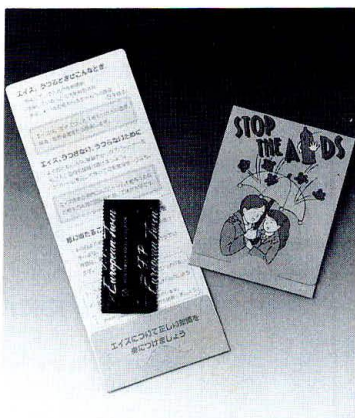
second and third most common calls. The highest number of calls were received from teenagers aged between 18 and 19 years. Counselors also found that many callers considered AIDS to be a "foreign" disease and that safe sex (use of condoms) was not well-practiced among the adolescents.

In its analysis of the results, JFPA noted widespread misconceptions about

AIDS among adolescents and mothers of children indicating that correct information was not being passed on to them through education channels and the mass media. Citing the example of one youth who was concerned that he would contract AIDS through his nocturnal emissions, Dr. Kunio Kitamura, director, FP Center, JFPA, called for an overhaul of Japan's sex education system to

adequately inform youth about AIDS. "Fortunately, Japan still has a relatively low number of HIV/AIDS cases which means we can learn much from the experiences of other countries," Kitamura said. "If we fail to prevent an epidemic, Japan will be the laughing stock of the world."

To head off a rapid increase in HIV/AIDS cases, Kitamura called for a dramatic increase in education activities including AIDS-awareness campaigns to enable young people to fully understand the issue and take preventive action.



JFPA's condom with a message.

Taking AIDS Prevention in Hand

Renowned for its innovative IEC materials, JFPA recently produced a unique educational material to create awareness of AIDS in Japan. Featuring a flat, match-box folder containing one condom, the material includes information on the transmission of HIV, ways to prevent the disease and encouragements for blood tests. The material, which went on sale on November 1, 1992, is being sold in bulk to local governments for use in prefectural and health center AIDS-awareness campaigns, coming-of-age ceremonies and health festivals as well as in educational activities for youth organizations and companies.

The production of the material was well-timed to coincide with an AIDS-awareness initiative of the Ministry of Education involving distribution of pamphlets to high schools students and a large-scale TV and poster campaign. Rather than using a simple audio-visual format, JFPA decided to design a more appealing material that could be handled, blown up, filled with water, tested for strength and fully understood by recipients.

In developing the material, JFPA called on its experiences in the postwar years when FP promoters working to prevent abortions counteracted the embarrassment and ignorance of women concerning condom use by launching a system to deliver condoms to the doorstep so as to enable women to learn about the contraceptive firsthand. In the future, JFPA hopes to extend distribution of its new AIDS-awareness material to high schools.

Insights into Self-reliance

The six members of a study team from China were impressed with the self-reliance of private Japanese organizations promoting health services in cooperation with governmental agencies and community organizations. The team noted that by providing better services than the government, the private organizations had gained the support of the government as well as the community people.

Headed by Li Baozhong, deputy secretary-general, China Family Planning Association (CFPA), the team was in Japan from December 6 - 13 to study IEC activities related to the field of family planning (FP) and maternal and child health (MCH). The tour was organized by the Family Planning Federation of Japan (FPFJ) in cooperation with Japan Family Planning Association (JFPA) and JOICFP at the request of IPPF-ESEAOR as part of its China program. Team members comprised personnel from CFPA and representatives of the FPAs of Yunnan and Gansu provinces.

NGO Activities

In presentations, the Chinese team was given an overview of FP/MCH activities in Japan and the work of non-governmental organizations (NGOs) such as the Tokyo Health Service Association and JFPA. During the presentations, the team was introduced to JFPA activities such as IEC and training, development of commodities, sales of contraceptives and the operation and management system of the association.

The team also visited Oyama City, Tochigi Prefecture, where it observed classes for mothers and spoke with health administrators, public health nurses, midwives and volunteers about community-based FP/MCH activities.

The team members said that the tour had taught them that community people will work to develop the activities of a private organization if they feel that the organization is answering their needs. It also noted the close relationship that public health nurses have with communities and that the IEC materials provided by these nurses were appropriate and welcomed by the people.



The team examines JFPA IEC materials.

Voice of Voices

By Chojiro Kunii

It All Started from Worms

In 1990, I gave a step-by-step account of my life work on the *Jinsei Dokuhon* (Reader of Life) radio program of the Japan Broadcasting Corporation (NHK). During the program I recalled the various movements I started after the war including the production cooperative movement, which expanded domestically into the parasite control movement, and the family planning (FP) movement. In a simple documentary format I also described the process with which these movements spread to Asia and Africa. Later, the contents of the program were published as a book, and recently, with the cooperation of the Hoken Kaikan, an English version was also produced.

The production cooperative movement, which I began after the war, turned into a parasite control initiative and then expanded into the FP movement. Accepted by ordinary Japanese citizens who shared a desire to rebuild Japan into a healthy nation, these initiatives later developed into the preventive health movement. Korea and Taiwan soon followed Japan's example in preventive health as did other Asian countries.

Ordinary People

Looking back, I can see that the postwar efforts made to support the demands of the ordinary people and the perseverance and innovation displayed by the citizens as they worked towards development resulted in a miraculous recovery. However, there is a darker side to Japan's rapid development which has also caused environmental degradation and various social problems. Today, I am deeply concerned about how Japan will overcome the crises and difficulties that are now threatening the nation and how it will determine a stable direction for the future in harmony with the rest of the world.

I also ask myself how much people of other countries understand the concerns of the Japanese about their country's history and its future. Can people from other parts of the world with different languages and religions understand the sentiments of the Japanese?

Most of my movements were launched in response to the wishes of the ordinary people, in particular, the wishes of mothers and children to be healthy and the desire of people to improve their lives. I believe that these exact same

wishes exist in Asia, Africa and Latin America. My book, "It All Started from Worms — the 45-Year Record of Japan's Post-World War II National Health and Family Planning Movement," embodies my hopes for the human race. I wholeheartedly welcome whatever criticisms there may be about this publication. [7]

DIARY

Margaret Dodd Britton, deputy director, Technology Management, Program for Appropriate Technology in Health (PATH), visited JOICFP on Nov. 17 to exchange information.

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JOICFP Program Officer Aiko Iijima was in Nepal from Oct. 25 - Nov. 17 to monitor the VDMA project and join an IP technical assistance team consisting of **Takaaki Hara**, director, Research and Study Department, JAPC, and **Fumiko Mukaigawara**, public health nurse.

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Dr. **Fred Sai**, president, and **Mark Laskin**,



Dr. **Nafis Sadik**, executive director, UNFPA (right) is handed a donation by Reverend Yasusaburo Tazawa from the Japanese Committee, World Conference on Religion and Peace (WCRP/Japan), in Tokyo on December 22. The ¥10 million (US\$82,000 at an exchange rate of ¥122 to US\$1) donation was the second such contribution to UNFPA from the organization of religious groups which has members in 60 countries and works to promote peace around the world. The first donation, made in 1986, was used by UNFPA to establish the Rafael M. Salas Memorial Trust Fund which awards scholarships to students from developing countries to study population and development at international training institutes and organizes special lectures at the UN. At the hand-over ceremony in Tokyo, Sadik praised the commitment of the group's followers who raised funds for the donation by fasting and organizing bazaars. "Your contributions will be used most effectively in accordance with the spirit in which they were made; namely to promote global peace through the assistance for students from developing countries," she said.

assistant secretary general, IPPF, were in Japan from Nov. 11 - 18 to join lecture meetings in Tokyo and Nagano Prefecture, exchange information with Japanese parliamentarians, officials of the ministries of Foreign Affairs and Health and Welfare and officers of PPFJ and JOICFP.

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A 10-member mission from IP areas of China headed by Dr. **Zhang Youming**, deputy director, FP Commission of Hunan Province, was in Japan from Nov. 5 - 18 to study FP/MCH.

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Dr. **Phyllis Piotrow**, director, Center for Communication Programs, the Johns Hopkins School of Hygiene and Public Health, and secretary, Population Action International, was in Japan from Nov. 14 - 19 to take part in a series of lecture meetings and a symposium organized by the Japan Family Planning Association (JFPA), Council on Population Education and JOICFP. She also paid courtesy calls to officials of the Japanese government and exchanged information with officials of concerned agencies.

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Ten participants from five countries of the JICA Training on Population and FP for Counterpart Countries attended a one-day seminar at JOICFP on the IP on Nov. 25.

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Hari Prasad Khanal, director, Program Development and Operation, Family Planning Association of Nepal, visited JOICFP on Nov. 24 and 30 to exchange information.

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Anne S. Walker, director, International Women's Tribune Center, visited JOICFP on Nov. 30 to exchange information.

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JOICFP Program Officer Ryoichi Suzuki was in Bangladesh from Nov. 22 - Dec. 5 to prepare for the initiation of the new UNFPA-supported regional project.

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JOICFP Deputy Executive Director Yasuo Kon and program officers Hideyuki Takahashi and Kiyoko Ikegami were in Ethiopia to attend the First African Regional Workshop on the IP from Nov. 23 - 27. Takahashi also traveled to Tanzania and Zambia to monitor IP and VDMA activities and attended the Third African Population Conference, held in Senegal from Dec. 7 - 12.

JOICFP NEWS is a monthly newsletter published by the Japanese Organization for International Cooperation in Family Planning, Inc. (JOICFP). JOICFP NEWS welcomes your comments, suggestions and contributions. Please mail to:

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