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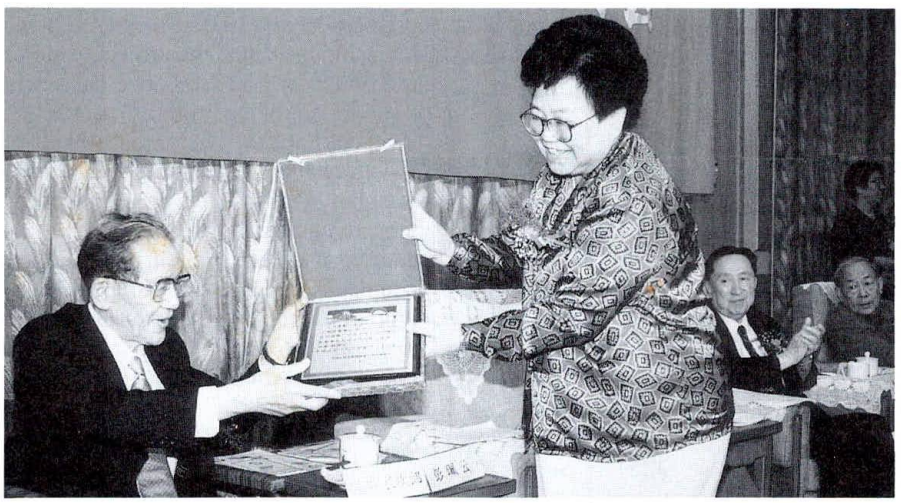
JOICFP NEWS

A Decade of Dramatic Change

China celebrates 10 years of Integrated Project activities



SFPC Minister Peng Peiyun (right) awards JOICFP Chairman Chojiro Kunii.

"Activities of the Integrated Project (IP) advocated by JOICFP Chairman Chojiro Kunii were first implemented in China in 1984. In project areas, the infant mortality rate (IMR) has greatly decreased, the level of women's health has been raised, the awareness of voluntary family planning (FP) among the people has increased and environmental sanitation has improved. By creating such visible effects, the project has won the support of the people," said Peng Peiyun, minister, State Family Planning Commission of China (SFPC).

The minister made her remarks at a ceremony held on June 12 in Beijing to commemorate the 10th anniversary of the Integrated Family Planning, Maternal and Child Health and Parasite Control Project, which was initiated in China with an agreement signed in June 1983. Hosted by the SFPC, China Family Planning Association (CFPA) and the National Steering Committee of the IP, the event was attended by a JOICFP mission including Chairman Kunii who joined the ceremony at the invitation of the minister. To express her gratitude to the JOICFP chairman for his significant contribution to the promotion of the IP in China, the minister presented Kunii with a prestigious Minister's Award. Kunii was the first person to receive the Minister's Award, according to an article in the People's Daily, China's largest newspaper.

The ceremony was attended by some 150 people including officials of the SFPC, CFPA, Ministry of Public Health, All China Women's Federation and the 16 IP-implementing provinces. Representatives of IPPF and the Japanese Embassy in China also joined the event.

Practical Healthcare Approach

Launched on a pilot basis in China in 1984, the IP quickly won the acceptance of the community people and approval of authorities as a practical approach to raising the level of health and promoting the acceptance family planning (FP) on a voluntary basis. The project, which uses parasite control (PC) as a means to stimulate community interest in health issues and integrates it with other health- and welfare-related activities, has been adapted to suit local needs of community people who have contributed from their own pockets in many areas to assist its expansion. In project areas, community people have combined forces with local authorities to establish health clinics and construct sanitary latrines and safe water supplies.

Started in two project areas of two provinces in 1984 with a target population of 270,000, the project entered its fourth phase at the beginning of this year and has been expanded to cover a target population of 1.2 million in 16 provinces out of the 30 provinces of mainland China. However, as the project has won the interest of people living in areas neighboring IP sites, it has been expanded without external assistance to meet the demands of these people for a better way of life. As a result, the actual number of people covered by the IP is estimated to be as high as 2.1 million. Meanwhile, the effectiveness of the IP has also won supporters among the authorities in charge of FP programs which have incorporated the integrated approach of the project into their programs. The most prominent supporters of the IP approach have been the FPCs and FPAs which have adopted many of the aspects of the project into their FP programs.

In a speech to the guests, Peng Yu, chair, National Steering Committee, and vice minister, SFPC, provided background on the development of the IP in China. "In 10 years, the coverage of the IP has expanded from the initial two pilot areas in two provinces to cover 18 project areas in 16 provinces," she said. "The project's initial orientation of integrating health activities with FP activities has also developed over the years to include components such as economic and social development

(From left) Kunii is congratulated by Wu Jieping and Wang Wei.

activities, illiteracy campaigns and activities to improve women's status and maternal and child health." Peng said that as a result of this approach, FP has been more readily acceptable to people.

Project Self-reliance

Other benefits noted by the vice minister were the high level of community participation in project activities, the warm relations between community people and FP volunteers trained under the IP and the positive effects that the implementation of a fee-charging system has had on the community. "By having to pay for health and other services, people have become aware of the benefits and more concerned about improving service quality," she said. "The more benefits the project brings them, the more willing they are to participate in activities and pay for services, thereby promoting the self-reliance of the project."

In a speech to the guests, Dr. Wu Jieping, vice chairman, Standing Committee of the National People's Congress, and acting chairman, ESEAOR-IPPF, offered his congratulations to Kunii for the Minister's Award on behalf of IPPF. Chang Chongxuan, standing vice president, CFPA, and Wang Wei, advisor, CFPA and former minister, SFPC, also offered their congratulations. Other key speakers included Dr. Huang Baoshan, director, Department of International Relations, SFPC, who gave a presentation on the 10-year implementation of the IP in China. Representatives from each project area including government officials, village leaders, village doctors and village people also spoke at the event.

Sharing Experiences

Addressing the minister, Kunii conveyed his appreciation for the award, but commented that the success of the IP in China was really due to the efforts of the people promoting the project at the grassroots. Noting the vast experiences accumulated in China, Kunii expressed his desire that the IP in China could serve as a model for other countries in the Asia, Africa and Latin America to follow.

After leaving Beijing, Kunii visited Taicang City and Shanghai Municipality. While in Shanghai, Kunii met with Xie Lijuan, vice mayor of Shanghai, who praised the positive impact that the IP has had at the grassroots. The vice mayor also expressed a desire to implement the IP in Shanghai in the future.

A Grassroots Revolution

A JOICFP mission lead by Chairman Chojiro Kunii gained firsthand insights into the positive changes that the Integrated Project (IP) has helped bring to the lives of community people during a field visit to Taicang City, Suzhou Municipality, Jiangsu Province, from June 14 - 16. The city was the site of the first project in China 10 years ago and the IP is now in its fourth phase in Taicang.

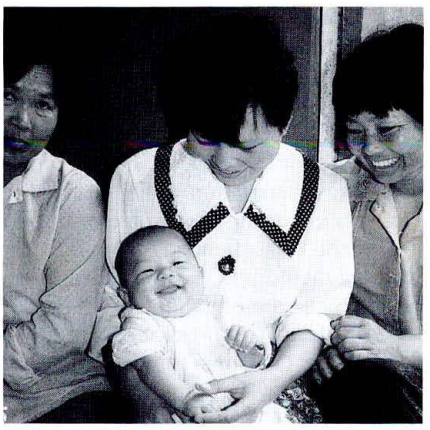
To mark 10 years of IP promotion in Taicang, a ceremony was held in the city on June 15. Kunii, who joined the event with the JOICFP mission, was presented with a special award by the city's mayor for his contribution to the promotion of the IP. Awards for contributions to the IP were given to a total of 33 groups and 46 individuals during the ceremony, which was attended by some 100 people.

Implemented in 1984, the IP in Taicang County initially covered a target population of 120,000 people in seven townships. Today, the project, which is promoted on a self-reliance basis with the support of community people and local authorities, has spread to all 24 townships in the county to cover a population of 450,000. As the scope of the project has expanded, so have the benefits that it has brought to community people. The IMR has dropped from a high of 32 per 1,000 live births in 1983 to 13 in 1992. Meanwhile, roundworm infection has dropped from 62% in 1984 to 16% in 1992.

JOICFP Chairman Chojiro Kunii (left) opens the new training center with Peng Yu, chair, National Steering Committee, and vice minister, SFPC. One of the highlights of the JOICFP mission's field visit to Taicang City was the launch of a new Integrated Project Training Center on June 12. Officially opened by JOICFP Chairman Chojiro Kunii, the center is being used as a base for training IP personnel from all over China. The center is located on the premises of the Taicang FP Commission's FP Service Center. According to plans, the center's functions will be expanded in the future to include the production of IEC materials. It will also serve as a base for the promotion of preventive health services on a mass examination basis. The planned outreach services will include maternal and child health services, nutrition guidance, parasite control, services for the aged and family health services. To promote the self-reliance of the center, the commission is planning to charge fees for these services. The possibility of further expanding the functions of the center on a national level was raised during Kunii's discussions with central-level representatives of the SFPC and CFPA. The officials, including SFPC Minister Peng Peiyun, expressed agreement with the concept of expanding the center's role.

Improvements in Health

Kunii had an opportunity to see some of the positive changes that have occurred in the city with development over the past decade and gain insights into the project's contribution to these changes during a visit to the house of a farming family in Jinxing village. In talks with the family and community people from the village, the chairman learned first-hand about the improvements that have been made in terms of health and environmental sanitation in the village. The JOICFP mission also spoke with the leader of the village who explained how the project had helped her to gain the trust of the community people when she was working as a barefoot doctor.



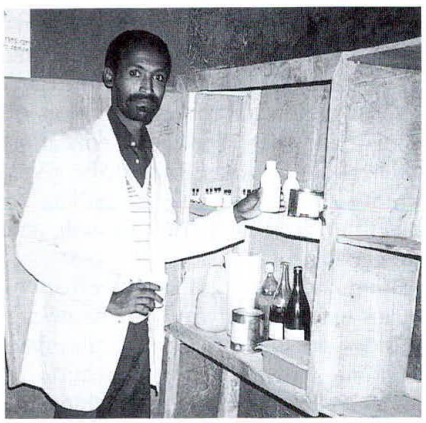
A Taicang mother and child.

Uniting for Better Health

Sustained healthcare services become a reality in Integrated Project areas

It takes a very unique healthcare approach to reach people living in villages in Woliso District, 116km from Ethiopia's capital of Addis Ababa. Located in Region 4, where 30 million of the country's 50 million people live, Woliso is like most other districts in Ethiopia and offers inhabitants very little in the way of healthcare services at the village level. Faced with the challenge of rebuilding a nation recently disrupted by civil unrest, the government is only able to extend its healthcare system to the district level, leaving the 30,000 or so villages nationwide with little in the way of services to offer inhabitants. Overall, only 47% of the population of Ethiopia has access to health services including family planning (FP).

Under the Integrated Project (IP), however, an innovative system for establishing local health posts, paying health personnel and stimulating community people to join self-help health and development activities has begun to take root in the villages of Ejersa Koji, Denbeli Keta and Obi Oseli. In each of these villages, community people have joined hands to set up healthcare facilities, while a revolving fund system has been established for the purchase of essential drugs. By selling these drugs to villagers at a nominal cost, the community health agents (CHAs) have not only been able to provide villagers with much-needed medical supplies, but are also earning a small profit to cover the costs of their services.



Denbeli Keta's CHA displays the village's essential drug supply.

The IP field supervisor (front) joins members of the local IP steering committee in front of Denbeli Keta's health post.

In each of the three villages, the health posts are run by three staff members: a CHA, who counsels clients and sells drugs; traditional birth attendant (TBA), who delivers babies and supplies contraceptives; and health animator, who provides health education. Since each of these personnel are drawn from their own village, they are better placed than outsiders to win the confidence of villagers and smoothly promote the project.

Limited Resources

With limited resources at the village level, community mobilization is essential to the success of a local healthcare system in Ethiopia. The IP has been able to win the participation of the people by answering grassroots needs for better health and living conditions. To enhance project promotion, local volunteers work to mobilize residents through the village network of neighborhood groups comprising 10 - 15 households. By bringing villagers together under a shared cause, the IP has been able to build community spirit which has been utilized to encourage villagers to join IP activities.

Another key to the success of the IP has been the establishment of a unique tier system of local steering committees that reaches right down to the village level where it comprises village administrators and remains attuned to the needs of villagers. With the support of these leaders, PHC, FP, maternal and child health (MCH) care and environmental sanitation promotion has been enhanced.

Prior to the initiation of the IP in the three villages in Woliso District, the community people had virtually no access to primary health care (PHC) services as there were only one health center and one health station to serve the needs of the 150,000 people in the district's 86 villages. However, under the IP, health posts have been set up in the three villages to bring about an improvement in the levels of health and environmental sanitation. As the project has brought benefits, the people have been more willing to listen to health messages including FP. As a result, the contraceptive prevalence rate has increased from zero to 3% in 20 months.

Recognizing the strengths of the IP, the Ministry of Health organized a workshop for MCH coordinators focusing on community-based MCH/FP promotion from May 18-23. The meeting was attended by 30 participants from six regions who made a field visit to IP villages where they were introduced to the village health service system set up under the project. Among the major IP features highlighted for the participants were the use of parasite control as an effective entry point to stimulate community participation and the establishment of mechanisms such as the revolving fund system to sustain healthcare services at the grassroots.

The revolving fund system got a boost from a recent JOICFP mission to Ethiopia, which brought US$500 donated by the Kasukawa village in Japan's Gunma Prefecture. The money will be used to set up revolving funds in three more villages in Woliso.

Project on Track

Officials of Ethiopia's Ministry of External Economic Cooperation and Ministry of Health, UNFPA and JOICFP agreed to extend the first phase of the IP in Ethiopia to the end of 1993 at a Tripartite Review Meeting, held in Addis Ababa on June 8. The meeting was attended by MCH/FP advisors of UNFPA's country support team based in Ethiopia who joined discussions on the progress and future activities of the project. One of the main items discussed at the meeting was the possibility of expanding the project.

A World on the Move

UNFPA report estimates international migrants at 100 million worldwide

On a scale unknown in history, people around the world are migrating in search of a better life, according to the "The State of World Population 1993," published by UNFPA. The report, which estimates 100 million international migrants worldwide, states that the proportion of people living outside their country of birth approaches 2% of the world's population. To ease the pressures that drive migrants into big cities and across international boundaries, UNFPA calls for new development strategies aimed at sustainable job growth and fulfilling human aspirations by providing such services as education, healthcare and family planning (FP). The report states that the provision of health and FP services, especially for women and the rural poor, promote economic development and therefore help reduce the need for migration.

Released on July 6 ahead of World Population Day on July 11, this year's report is subtitled, "The Individual and the World: Population, Migration and Development in the 1990s," and takes migration as its theme. Below are some of the highlights of the report.

While the majority of migrants leave their homes in search of a better way of life, many are forced to move. Up to 17 million of the world's migrants are refugees and another 20 million have fled violence, drought and environmental destruction.

Up to 17 million of the world's migrants are refugees.

Of those international migrants in 1991 who were not refugees, 35 million were in sub-Saharan Africa, with 13 - 15 million each in western Europe and North America. A further 15 million were in Asia and the Middle East, where a few countries have particularly heavy migrant concentrations.

Countries from which migrants move may gain financial returns from those who leave, but they also face drawbacks. Annual remittances from international migrants to their families at home amount to US$66 billion, second in value to the global economy only to oil and larger than all official development assistance from governments. However, countries that lose migrants also lose members of their work force.

The face of migration has also changed over the years. Unlike the circular and temporary migration of the 1960s that was dominated by skilled workers, the majority of migrants today are unskilled. There is also a growing tendency for people on the move to enter other countries illegally and for migrants to stay permanently once they move.

Although women comprise almost half of all those who migrate, they often make little improvements in their relative status by moving. Indeed, women's downward mobility as migrants generally far exceeds that of men. Yet, while women who migrate earn less than men, they tend to send money back to their home country more frequently than their male counterparts.

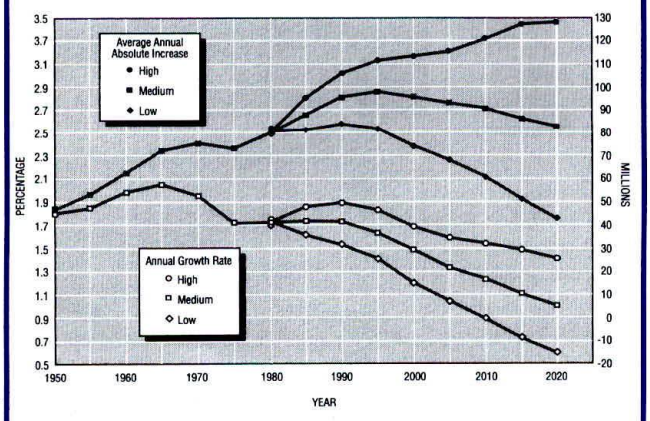
Overwhelmingly, the biggest movement of people is from the countryside to the city, usually without crossing any national borders. Much of this movement is due to the widening wage differences in the two areas and to the fact that social services are more likely to be found in large cities. In addition, lack of land tenure in agricultural zones means that once the soil is exhausted, there is no reason for farmers to stay. Yet as people move to the city in increasing numbers, urban social services are put under increasing strain. Consequently, quality of life for migrants in cities is going down.

Strategy for a Better Life

Since migration is a strategy to better meet individual and household needs, safeguard security and meet aspirations for a better life, development must provide attractive alternatives to moving. Investments in improving the status of women and such services as education and health including FP should be given priority since they help contribute to lower fertility, economic growth and social balance.

In the long-term, the only effective means to reduce migration pressure are to slow population growth; stimulate economic growth and job creation at home; and to promote the development of the individual and the family as the basic economic and social unit.

World Population Growth:
Annual Growth Rates and Increments



Source: United Nations Population Division, World Population Prospects 1990 (United Nations, New York 1991).

New Start for Women

Workshop assesses achievements and problems of IP

Pham Thi Thu has raised her standard of living considerably thanks to hard work and some help in the form of a loan which she is ready to pay back with interest. A 40-year-old mother of three from the Phong Binh Commune of Phong Dien District in Vietnam's Thua-thien Hue Province, Pham was lent US$100 through a revolving fund scheme set up under the Integrated Project (IP) and given training which she applied to pig raising. By the end of July, she had already covered the costs of buying the original breeding pigs, building her pig sty and supplying pig feed and had tripled the original funds and built a new sanitary latrine for her family.

An IUD user, Thu was selected along with four other women in the village as a loan recipient. To be chosen for the loans, the women's family had to meet the criteria of being among the poorest in the commune, being receptive to new technology and being a trustworthy family. Since the loan provision a year ago, a lot has changed for Thu and her family and as a result of her business success she is willing to share her experiences to assist her neighbors.

Thu's experiences represent one of the success stories of the IP in Vietnam. Launched on a pilot basis in 1988, the project was expanded in 1991 to cover 70 communes in seven districts of four provinces. To assess the progress of the project, the Final Evaluation Workshop of the first phase of the IP was held in Hue City from June 8 - 11. Attended by IP personnel, government officials, members of the National Steering Committee (NSC) and representatives of UNFPA, UNICEF and JOICFP, the workshop highlighted achievements and problems relating to the project.

Among the achievements noted was the positive impact that steering committees and volunteer networks have had in IP communes. However, participants pointed out the difficulty of providing the women volunteers with support to sustain the network. It was agreed that further efforts, such as the use of donated sewing machines, need to be made to generate income to support the volunteers.

Pham Thi Thu with her daughter.

While reviewing the satisfactory results of FP, MCH and environmental sanitation activities, the participants also commented that problems still remained, particularly with regard to the supply of a wider range of contraceptive methods and the training for contraceptive suppliers. Recommending efforts to ensure the provision of an improved contraceptive mix, especially the so-called female methods to enable women to control their fertility, the participants also urged that a simpler monitoring system be established.

UNICEF Support

During discussions, the UNICEF representative expressed strong support of the project. Comparing environmental sanitation in IP areas with other areas covered by UNICEF projects, the official noted that people in IP areas were more motivated and construction of latrines and wells had been more rapid under the IP. He added that UNICEF was willing to continue the project in any new areas in collaboration with JOICFP. The UNFPA representative also had positive comments about the project and noted the strong commitment of the community people in IP areas. After the workshop, the representatives of UNFPA, UNICEF, the government and JOICFP agreed to organize a mission to formulate the second phase of the project.

Meeting New Challenges

Linda Demers, UNFPA country director, Vietnam, recently provided JOICFP NEWS with insights into the population situation in Vietnam. Below is an outline of her comments.

Vietnam has a long commitment to population issues. This year is a particularly decisive one in the population field: the party adopted a resolution on population; a strategy for population until the year 2000 was approved recently by the prime minister; the government budget for population was significantly increased; the National Committee for Population and Family Planning (NCPFP) is reviewing its mandate and responsibilities and a new decree on this will be issued shortly.

Linda Demers

Since 1977, UNFPA has been working in Vietnam to assist the country in achieving its goals in the population field. For about 15 years, UNFPA has been the sole donor in population in Vietnam. Now, more donors are coming in. This is an encouraging trend, but more donors and support are needed.

With regard to many social indicators, Vietnam compares well to some other countries with the same level of GNP. Education and health are given high priority by the government and this translates into high literacy rates and relatively low infant and child mortality. Fertility has been declining over the last 30 years, but the 1988 Demographic and Health Survey (DHS) indicates that wanted fertility is lower than current fertility rates. This indicates an important unmet demand that needs to be addressed.

The population program faces many challenges. The government cannot subsidize the health and education system as it used to in the past. Decreasing use of health facilities is one of the consequences of this situation. In addition, the government is committed to improving the quality of the maternal and child health (MCH)/FP services, and to the cafeteria approach. Currently, the Vietnamese have to rely on IUDs and menstrual regulation to control their fertility. The implementation of improved MCH/FP services for women, with a wider range of contraceptives, should be decisive in increasing the contraceptive prevalence rate and in improving women's health.

Targeting Urgent Unmet FP Needs

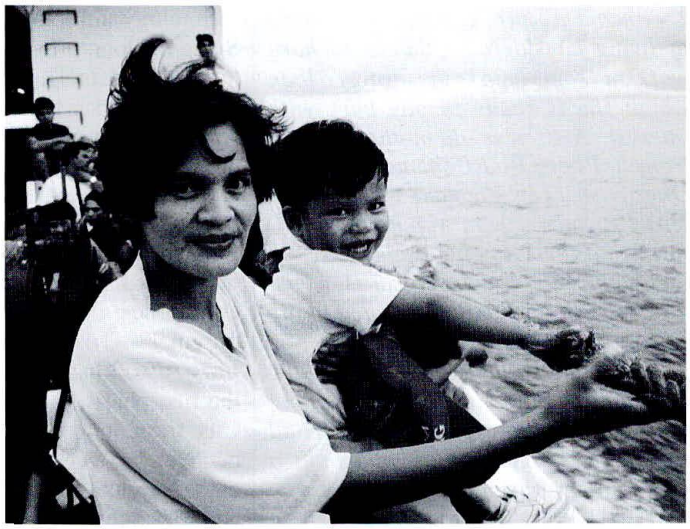
New regional project focuses on raising status of women and meeting FP demands

A UNFPA program review and strategy development (PRSD) mission that visited the Philippines from April 25 - May 21 highlighted the urgency of expanding the availability of quality family planning (FP) to meet considerable unmet needs. Outlining health program outlets, FP training, monitoring and supervision, operational integration and contraceptive diversity as areas requiring action, the mission also noted the need for continuous upgrading of Department of Health (DOH) institutional capabilities at the central level and a building of capacities at the regional and lower levels.

Constraints and Achievements

The purpose of the mission was to develop a coherent framework for the national population program within the context of the government's development objectives. With the cooperation of the government, the UNFPA mission reviewed constraints and achievements of the current population activities and prospects for future action.

Drawing attention to the urgent need to raise the status of women and their participation in mainstream development, the mission urged that gender and population concerns be considered in the entire development framework. The mission also made recommendations on ways to improve the effectiveness of IECM activities and support wider participation of non-governmental organizations (NGOs).



A young Philippine mother and her child.

Many of the points raised by the mission were especially relevant to the Sustainable Community-based FP/MCH Project with Special Focus on Women. Still in its initial stages, the project highlights women's reproductive health issues and unmet needs in FP services and education as major concerns. The municipalities of Balayan and Malvar in Batangas Province were recently selected as pilot project sites and cover populations of 56,376 and 25,387, respectively.

Baseline surveys are currently being undertaken by the University of Philippines Population Institute. Supported by UNFPA in collaboration with JOICFP, the project is being implemented by the Local Government Unit of Batangas with the guidance of the DOH.

Window of Opportunity

Philippine UNFPA Country Director George Walmsley recently provided JOICFP NEWS with insights into the population situation in the Philippines. His comments appear below.

Current prospects for expanding and strengthening the Philippine population program, particularly the family planning (FP) program are very good. The new administration of President Fidel V. Ramos, which took over on June 30, 1992, has indicated strong support for the program. The Medium-term Philippine Development Plan, presently being debated in Congress, clearly establishes the need to integrate population concerns in all aspects of development planning, at the policy, resource allocation and program implementation levels. On the FP side, President Ramos appointed as the new secretary of health, Dr. Juan Flavier, who is known as a strong and effective supporter of the FP program.

During the past 12 months, the FP program has been more active, accompanied by much discussion in the media. Although there is still some resistance to the program, most of the discussion is favorable, probably because the Department of Health (DOH) has made considerable effort to include natural FP information and services as part of its program. At the same time, studies have shown that most members of the new Congress and of the general population are in favor of a stronger FP program. It is now up to the DOH, assisted by the non-governmental organizations (NGOs), to meet the expectations.

George Walmsley

The Commission on Population (POPCOM) which is responsible for population policy, monitoring and coordination, has been revitalized, with a new executive director to take over in early July. POPCOM will have the responsibility for guiding and strengthening population activities in areas such as legislation, development planning, education and agriculture. Without POPCOM exercising the coordinating role, there is a tendency for the different sectors to take inconsistent approaches to the problem.

Overall, the next two to three years will provide an excellent window of opportunity for the population program. There will be a chance to recover some of the ground that was lost by the FP program during the 1980s, while at the same time making progress in dealing with other issues which are critical to the long-term success of the program, such as the status of women, the relationship of population growth to environmental deterioration and the identification of population-related factors which must be considered in the government's poverty alleviation program.

A Tale of Two Women

New JOICFP film documents a women's movement in an indigenous community in Guatemala

During Guatemala's civil war between the 1960s and 1980s, it is estimated that almost 150,000 people were killed, 60,000 women were widowed and 120,000 children were made orphans. It was a long, painful war that did much to reinforce the distrust and fear that the indigenous people have always felt toward people from outside their communities. This suspicion has not helped with efforts by outsiders to raise the standard of living in these communities and today, indigenous people live in severe conditions with poor environmental sanitation and water supplies and without the benefit of modern healthcare services. The infant mortality rate for this group is estimated at around 140 per 1,000 live births – the worst level in Latin America and about 30 times the figure for Japan.

Maria (Las Dos Marias), a new JOICFP film, documents the efforts of two women who contributed to positive changes in an indigenous community living near Guatemala's Lake Atitlán. Brought together by a desire to improve the quality of life, the women worked to break down the barriers that divided the indigenous and non-indigenous peoples and began a movement among the women of the community.

Nana Maria is a traditional birth attendant, faith healer and herbalist who practices her skills within her indigenous community. Maria Teresa, a younger laboratory technician working to promote integrated healthcare at the grassroots, is a non-indigenous staff member of JOICFP's Integrated Project (IP). The two were brought together after the younger Maria successfully treated Nana Maria's daughter for parasites. As a friendship developed, so did trust and a mutual respect for each other's culture. Maria Teresa made efforts to communicate and listen to the indigenous people, while Nana Maria began to learn safer methods of child delivery.

Nana Maria (left) shares a moment with Maria Teresa .

Women's Movement

Maria provides insights into how the relationship between these two special women contributed to improving the status of women and raising the level of health in the community. Utilizing local mothers' clubs to bring women together, the two healthcare workers fostered income-generating and skill improvement activities which developed into a movement among the community women.

Created in the International Year of the World's Indigenous People, the film is primarily aimed for use in Japan to create awareness of indigenous people and women's issues, and to gain support for international cooperation activities. *Maria* is the first Guatemalan film produced with the sponsorship of the Hoken Kaikan Foundation and introduces the activities of JOICFP's IP. *Maria* premiered to an audience of 250 in Tokyo on July 15 at a special symposium to mark World Population Day and will be shown in Guatemala City on September 7 and in San Lucas Tolimán on September 8 after the Spanish version is completed. An English version of the film is also available.

Featuring scenery from Lake Atitlán, noted as one of the most beautiful lakes in the world, and the ancient Mayan city of Tikal, the film brings the bold designs worn by the indigenous people to life in vivid colors. A soundtrack inspired by Mayan folk songs was also developed by a Japanese composer to complement to this touching documentary.

Maria is the result of a joint effort by a Japanese-Guatemalan team and was made in cooperation with the Guatemalan government, the Family Planning Association of Guatemala (APROFAM), other related international organizations and the Japanese Embassy in Guatemala. Available as a 16mm film and as a video, *Maria* is being distributed by Sakura Motion Picture Co., Ltd.

In a message to JOICFP, UNFPA Executive Director Nafis Sadik praised *Maria* as an excellent and timely documentary. "It documents the successful efforts made in one village to mobilize community women to seek self-reliance in healthcare," she said. J

Nana Maria with members of her family.

Voice of Voices
By Chojiro Kunii

Survival vs. Human Rights

Every country can be characterized by its unique schools of thought, philosophies and history. The problem of population, for example, is approached as a human rights issue in North America and in some European countries. To many people from these countries the "one-child family policy" of China is regarded as a violation of human rights. However, China has obviously gone to great lengths to implement this policy and surely there is no other country that has tried as hard to solve its population problem and ensure the survival of its people. Having seen the harsh reality of the population problem in China, I cannot help but feel that the present talk about human rights sometimes falls into the realm of an academic exercise.

In Japan, the population problem has seldom been discussed from the viewpoint of human rights. That is because throughout history we have seen population as a problem linked to hunger, poverty and human survival, not as a mere philosophical concept.

Threat of Overpopulation

Japan is among the countries that have been threatened by the nightmare of a major population problem. The country's struggle to tackle this problem was an effort to survive. Anyone familiar with Japan's history will know that due to events related to the threat of overpopulation the country experienced several tragic periods in its history including defeat in war. These tragedies were very real for the Japanese people. They were not something that could be remedied by discussions about philosophy.

Immediately after World War II, Japanese people had to devise ways to survive and to fight hunger and poverty. Japan recorded a high incidence of induced abortion in this period as a result of the legalization of abortion – a move that reflected the government's strong motivation to stem the rapidly growing population. The government also launched a nationwide family planning program at the grassroots involving public health nurses and midwives. Due to these and other efforts, the birthrate was halved in the10 years from 1947 to 1957.

Another factor that helped save Japan from further tragedy was the strong cooperation shown by many people who joined hands to work towards a better life. As a result of these efforts, people came to have confidence that they were going to survive. After having lived through this period, I find it difficult to fully agree with some of the human rights arguments that are presently being advocated.

In China, many feel that population control is the only direction which will assure the survival of the country. There are quite a few who believe that it is not only the right direction for the Chinese people but also for the world population at large.

ANNOUNCEMENTS

African Regional Workshop for the Integrated Project (PANFRICO IV)

Date: September 27 - October 1, 1993
Venue: Banjul, The Gambia
Organizers: The Gambia IP National Steering Committee, government of The Gambia, The Gambia Family Planning Association, UNFPA, IPPF and JOICFP
Participants: Project director/project coordinator and officer in charge or technical expert of the nutrition aspect of the IP from the IP-implementing countries of Ethiopia, The Gambia, Ghana, Tanzania and Zambia
Representatives from selected countries of Cameroon, Guinea (Conakry), Kenya, Namibia, Nigeria, Sierra Leone and Uganda.
Theme: "Integrating FP with MCH services – nutrition as an integral part"
Objectives: (1) To review existing conditions and past experiences in improving nutritional aspects of the IP in participating countries;
(2) To identify issues of nutrition programs that relate to the promotion of FP, and to develop strategies and action plans to improve the nutritional conditions of women and children;
(3) To produce a reference material for project planners and managers introducing strategies and action plans developed through the discussions on (1) and (2) above.

Note: Self-funded participants are welcome to attend the workshop. For more information, please contact JOICFP.

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Workshop on Effective Strategies for Sustainable Community-based FP/MCH Project with Special Focus on Women

In cooperation with the Coordinating Forum of the Integrated Program in Indonesia and BKKBN (National Family Planning Coordinating Board), JOICFP will conduct a regional workshop focusing on the effective promotion of the UNFPA-supported Sustainable Community-based FP/MCH Project with Special Focus on Women in the Asian Region.

Date: October 14 - 23, 1993
Venue: Jakarta, Indonesia
Sponsors: UNFPA, JOICFP
Participants: 13 project directors/managers/key resource persons of the above project and the IP from the countries of Bangladesh, China, India, Laos, Nepal, the Philippines and Vietnam

Note: For further information, contact either JOICFP, or Yayasan Kusuma Buana (YKB), the Indonesian secretariat.

DIARY

JOICFP Program Officer Ryoko Nishida was in the Philippines from May 23 - June 9 to make preparations for the UNFPA-supported "Sustainable Community-based FP/MCH Project with Special Focus on Women."

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Professor **Gary Andrews**, director, Center for Aging Studies, Flinders University of South Australia, and Dr. **John McCallum**, senior research fellow, National Center for Epidemiology and Population Health, Australian National University, visited JOICFP to exchange information on aging issues while in Japan from June 9 - 14.

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Virginia Ofosu-Amaah, chief, West & Central Africa Branch, Africa Division, UNFPA, visited JOICFP on June 17 to exchange information.

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Professor **Noriji Suzuki**, professor emeritus, Kochi Medical College, and JOICFP program officers Yukio Honma and Yoshitatsu Kanno conducted technical training while in China from May 22 - June 19. The team also took part in a 12-member JOICFP mission led by Chairman Chojiro Kunii, which was in China from June 10 - 19 to attend a series of events celebrating the 10th anniversary of the IP in China. JOICFP Deputy Executive Director Yasuo Kon joined both missions between June 2 and 19.

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JOICFP Program Officer Sumie Ishii was in Vietnam to attend the Final Evaluation Workshop for the IP and to hold discussions with officials of UNFPA, UNICEF and the government of Vietnam while in the country from June 3 - 19.

JOICFP NEWS is a monthly newsletter published by the Japanese Organization for International Cooperation in Family Planning, Inc. (JOICFP).
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