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JOICFP NEWS

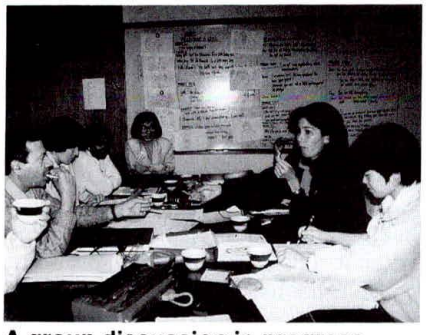
Putting Women's Health in the Picture

Tokyo workshop produces innovative ways to promote women's health through video

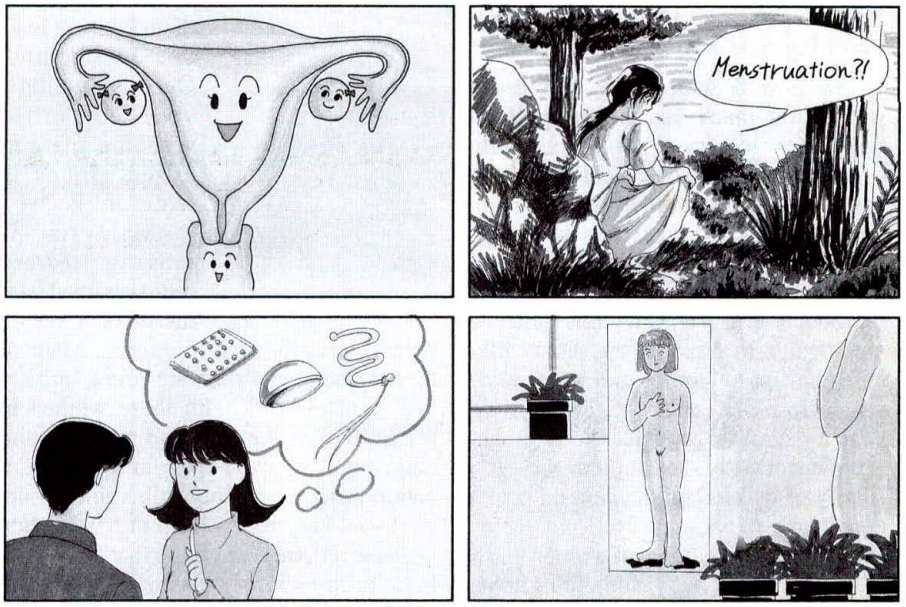
Participants of a workshop held in Japan came up with four very different approaches to the production of a prototype educational video on women's health for use in the Asian region. The variety of approaches not only reflected the range of women's health issues, but highlighted the diversity of cultures in the region and importance of tailoring IEC materials to meet country-specific needs. The workshop also enabled participants to share experiences in the field of women's health education and to consider ways to distribute and market educational materials to promote the self-reliance of non-governmental organization (NGO) and government programs and projects.

Educational Video Prototypes

Attended by 19 participants from 15 countries including one observer, the IEC Workshop for the Production of Video Script on Women's Health was held in Tokyo and Saitama Prefecture from November 29 - December 4. The event was part of the UNFPA-supported regional project for Asia titled, "The Development, Production and Distribution of IEC Materials Aiming at the Improvement of Women's Health and Status (RAS/92/P12)." It was organized under the joint auspices of UNFPA, IPPF and JOICFP. Participants included representatives of family planning (FP) associations and NGOs involved in women's health, IEC experts and health officials from government and NGOs.



A group discussion in progress.



(Clockwise, from top left) Selected illustrations from video prototypes: *Christie and Me; Proud to Be a Girl; One Day at the Beach;* and *Happy to Be Me.*

Before starting the creative work, participants were introduced to different aspects of women's health by two experts. An introduction to various legal issues of women's health in Japan was provided by Dr. Shizuko Sasaki, director, Matsushima Ob. & Gyn. and Pediatric Hospital, Tokyo. The second resource person was Colleen Cording, education resource consultant, Tampax Health Education Service, New Zealand, who used New Zealand as a case study to call attention to the impact of social and policy changes on women's lives and health.

Most of the creative work was carried out in Saitama Prefecture where participants were divided into four groups and brainstormed to determine concepts, the target group and aspects of women's health that most need to be addressed for the target group. The concepts were then further developed to create take-home messages in a way that was appealing and that reinforced a positive image for women. Working closely with participants, illustrators created four sets of illustrations based on revised concepts which were presented along with the 10 - 15 minute scripts in Tokyo. The prototypes created at the meeting were all designed for use by instructors to stimulate discussions.

The four videos each had distinct characteristics and messages. In *Christie and Me*, the uterus is personified and, as the narrator, introduces such issues as menstruation, sexually transmitted disease (STD) and contraception. *Proud to Be a Girl* focuses on raising the self-image of girls with such messages as boys and girls are equal; menstruation is normal; girls have potentials and abilities; girls have choices and can make decisions; and early marriage ought to be discouraged. *One Day at the Beach* introduces a range of topics related to sex through a young couple's interactions while strolling on a beach. *Happy to Be Me* urges women to love their bodies and themselves and follows a woman's life cycle from puberty to old age.

The participants took home the scripts and illustrations produced at the workshop and are expected to make proposals for the production of country-specific materials based on the protoypes.

Four Perspectives of Women's Health

Workshop participants talk about women's health issues in four countries

Four participants of the IEC Workshop for the Production of Video Script for Women's Health spoke to JOICFP NEWS about women's health issues. Below are highlights of the interviews conducted on December 4.

Jenny Chan, officer-in-charge, Information and Motivation, Family Planning Association of Hong Kong

We have been providing services to women for many years. Every client who receives services from our birth control clinics receives a checkup. We extend services to women who are about to marry, and two years ago we started introducing services for non-contraceptive-using women and women beyond reproductive age. We have also launched a campaign to promote the self health-care concept to women and we provide education programs together with primary screening services for women.

We recently conducted the first survey of its kind on the general health conditions of women in Hong Kong. We have found that a lot of women know something about gynecological problems and know something about the importance of taking care of themselves, but that they just don't do anything.

Chan

Another problem is that women have some knowledge of contraceptives and practice contraception, but a lot of people fail. We found that the majority of respondents never seek advice during their first half-year of sexual activity and that they use both safe and unsafe contraceptives. As a result, many end up seeking abortion services.

It has been very enlightening for me to learn the major concerns of other countries at this workshop. It has started me thinking about the various needs of women in all parts of the world.

* * *

Piaro Kaur, program officer, SIEC Project, Federation of Family Planning Associations, Malaysia

Starting from family planning (FP), we have expanded our services to become more comprehensive and now offer women's reproductive health services. We provide pap smear screening and breast examination, and emphasize annual medical checkups and premarital and marital counseling for women.

About 50% of married women in Malaysia are practicing FP, according to a survey done some time ago. Over 90% of them know at least one FP method. Our organization is very concerned with the marginalized groups in terms of FP.

Kaur

Malaysia is moving toward industrialized status. As a result, there is rural-to-urban migration. Many of the new factory workers are young women. We want to work with these women in reproductive health and rights, and education. We also have a family life education program for this vulnerable group.

I was very happy with this workshop because if there is anything that I will take back to my country it is the enthusiasm among the participants and among the men regarding women's issues.

* * *

Rowena Ong Alvarez, deputy director, Institute for Social Studies and Action (ISSA), the Philippines

I belong to an NGO established in 1983 at a time of political turmoil in the Philippines. We had a government and administration which had been so keen on promoting FP that it forgot that women should be consulted first, and that the quality of services should be guaranteed. So a backlash occurred against the coercive type of FP of the 1970s and early 1980s. Because of this, a lot of people are "allergic" to the term FP.

Alvarez

The first three of our five priority issues of ISSA are: maternal health; health of reproductive organs of both men and women with attention to adolescents, women of reproductive age and also, since last year, the issue of menopause; and fertility management. Included in fertility management is the issue of induced abortion. In the Philippines where abortion is illegal, it is estimated that from 155,000-750,000 illegally induced abortions are occurring each year — a situation that makes it very dangerous for women. We are also very strong on the issue of violence against women because ISSA supports and promotes reproductive rights, not only reproductive health, so that women are able to exercise reproductive choices. The fifth priority issue is sexuality, which we assert is the core of every individual.

Our activities include IEC and research, and we are also very strongly involved in legislative monitoring and advocacy. All the activities are aimed at contributing to women's empowerment because we want a social, political and cultural environment in our country which will respond to the needs of women.

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Peter Gourlay, director, Education and Training, Family Planning Association of Victoria, Australia

Before I came to the workshop, I wondered about what I would be able to contribute and what I would be able to take away. I was particularly aware of the Asian context. I really underestimated how much I would gain from other participants. I think this is very important because as professionals, we need the support of each other.

Gourlay

Even though this is a workshop on producing a resource on women's health, all four groups have raised the issue of encouraging men to accept responsibility within relationships and to look at the relationships, the power dynamics, and the ability of women to negotiate safe sex. This issue is about more than just awareness or skill. It is about economic and social justice. It is about the ability to be able to say this is what I want and expect. We can't just talk about women's health and women's sexual choices without considering that they occur in a context that usually involves men. We have to look at shared responsibility and therein lies one huge challenge.

Making a Stand on Population

Japanese parliamentarians took an active role in the Fourth General Assembly of the Asian Forum of Parliamentarians on Population and Development, held in Kuala Lumpur, Malaysia, from October 26 - 28. The eight-member Japan Parliamentarians Federation for Population (JPFP) mission was headed by its chairman, Dr. Taro Nakayama, former foreign minister of Japan, who gave a keynote speech at the meeting titled: "Asian challenge towards the 21st century — population and development." The speech sparked active discussions at the event.

The conference was attended by participants of 30 countries and representatives of UN agencies including UNFPA and observers.

Dr. Toshio Kuroda, director emeritus, Nihon University Population Research Institue (NUPRI), served as a resource person for one of the working group sessions at the conference and stimulated active discussions on the topic of "Population growth, aging and youth." At another working group session, the three women of the JPFP mission shared Japan's experiences in the field of FP and maternal and child health.

The JPFP mission members with community women.

The JPFP delegation gained insights into FP programs being conducted in Malaysia in field trips organized by IPPF-ESEAOR and JOICFP on October 25 and 29. After receiving a brief orientation by the National Population and Family Development Board, the mission made observations of an FP program conducted in a palm oil estate in Selangor State by the Selangor Family Planning Association and a women's development project promoted in Malacca State by the Malacca Family Planning Association.

In comments made after the field trips, the parliamentarians said that they were particularly impressed with the positive impact that the project in Balai Panjang village in Malacca had had on the women. The members emphasized the importance of education, particularly for women.

Reproductive Rights in Spotlight

The need to take urgent action on the issues of reproductive health, women and the environment was stressed at the 4th Kitakyushu Conference on Asian Women, held in Kitakyushu City, Japan, from November 19 - 21. The call for action came out of the three-day meeting, which featured an international symposium on the theme of "Population and Our Earth's Future" and working group sessions. One of the main discussion topics that emerged at the event was reproductive health and reproductive rights. The meeting's recommendations will be sent to the 1994 International Conference on Population and Development (ICPD) to be held in Cairo, Egypt.

The conference, which was sponsored by the Kitakyushu Forum on Asian Women, was the fourth of its kind held ahead of the World Conference on Women to be held in Beijing in September 1995. A total of 500 people attended the event.

JOICFP was actively involved in the event, particularly in the working session on "Women's reproductive rights and population problems in Asia." In discussions, JOICFP shared experiences gained through promotion of activities in Asia related to women under the Integrated Project (IP).

The conference served to highlight the dramatic differences between the North and South by drawing attention to the low fertility and aging issues in the industrialized world and high birthrate and high infant and maternal mortality rates in the developing world. The importance of paying attention to women's reproductive rights in policies developed to tackle these population problems was stressed at the conference.

The absence of a social system in Japan to support working women was highlighted in a keynote address by Keiko Higuchi, professor, Tokyo Kasei University. This situation, she said, was one cause of Japan's extremely low total fertility rate of 1.50 in 1992.

The four other panelists at the symposium were Devaki Jain, director, Institute of Social Studies Trust, India; Sombhong Pattawichaiporn, executive director, Planned Parenthood Association of Thailand; Makoto Atoh, director-general, Institute of Population Problems, Ministry of Health and Welfare, Japan; and Shunsuke Iwasaki, associate professor, Tsukuba University.

Toward Shared Population Action

A six-member mission from the U.S. State Department, National Institute of Health and U.S. Agency for International Development (USAID) held talks with members of the Japan Parliamentarians Federation for Population (JPFP) and exchanged information with JOICFP on the role of non-governmental organizations in population and family planning (FP) activities in Japan. The team was in Tokyo to discuss population and HIV/AIDS with the government of Japan. In connection with these issues, the USAID mission held talks with officials of the Ministry of Foreign Affairs and related ministries on ways to enhance action on the issues by strengthening collaboration between the two countries.

Discussions with JPFP

The mission, which was headed by Dr. Duff Gillespie, deputy assistant administrator, Bureau for Global Programs, Field Support and Research, met with Dr. Taro Nakayama, chairman, JPFP, and former foreign minister, and JPFP member Chieko Nohno on November 17. Providing an outline of JPFP activities and Japan's bilateral and multilateral assistance in the population and health field, Nakayama stressed that JPFP is focusing on activities ahead of the ICPD to be held in Cairo, Egypt, in 1994.

In his talks with the JPFP officials, Gillespie said USAID was interested in gaining a more in-depth understanding of Japan's approach to population and FP. The agency's second aim, he said, is to identify shared fields of interest to enable joint and coordinated actions in the future. Ahead of the expected increase in HIV infection in Asia, the USAID mission called for joint Japan-U.S. research into HIV/AIDS to determine infection routes and high-risk groups to formulate prevention strategies.

In discussions with JOICFP on November 18, Gillespie said that USAID had highlighted reproductive health as a priority issue. He also emphasized that the agency remains committed to population programs.

(From right) USAID mission members Duff Gillespie and Lori Ashford with JOICFP Deputy Executive Director Yasuo Kon.

Reproductive Rights & Health for Women

Women strive to maintain access to abortion in Japan and a voice in reproductive health issues

Yumiko Jansson-Yanagisawa, a prominent Japanese writer and outspoken advocate of women's issues, spoke to JOICFP NEWS on November 19 about reproductive health and rights for women and the issue of abortion in Japan. Below is an outline of the interview.

I have been involved in the women and health movement since 1983. This was the year after a concerted effort had been made around parliament by people affiliated to religious groups to delete the fourth condition under the Eugenic Protection Law which enables women to obtain induced abortions.

In Japan there are two laws governing access to abortion. The first is the Criminal Law on abortion established 100 years ago, which makes it a crime punishable by law to have an abortion. This law is still alive. The Eugenic Protection Law, however, was enacted in 1948 to give exception to the criminal code. According this second law, there are five conditions under which a woman can get an abortion. The first three are eugenic and medical and the last two are "social" reasons. The first social reason concerns women's health and economic situation. The second reason is rape. The economic conditions of the law are always challenged because anti-abortion people argue that Japan has become rich and that there can be no economic difficulties. Groups also call for respect for the life of the fetus.

The move to eliminate the fourth condition of the law first emerged in the 1970s and then resurfaced again in the early 1980s. It was at this time that we formed a nationwide coalition and fought to prevent the revised law being presented in parliament. We succeeded.

Jansson-Yanagisawa

After 1983, I felt very strongly that the Criminal Law and Eugenic Protection Law should be abolished. I felt that instead we need a new law that guarantees safe abortion on demand for women. We felt that we do not need the Eugenic Protection Law. The name itself is so biased. We also felt that we do not need any legal conditions such as those presently imposed under the Eugenic Protection Law that force women to go through the humiliating process of getting permission for an abortion.

I am part of a group called Women's Health and Rights, Japan. This group holds educational meetings and organizes discussion forums for those interested in reproductive issues. We have also made a Japanese version of a film on abortion called *Abortion Stories from North and South* by a Canadian director and created a book of the responses to the abortion issues raised in the film.

Between 1985 and 1988, the issue of reproductive technology and how we should deal with it arose. This prompted us to create another book called *Dangerous Reproductive Revolution.*

Not long after, a move was launched to shorten the period for obtaining an abortion from below the 24th to below the 22nd week of pregnancy. We had to act very quickly. But our women's voices were rejected and the revision was made in 1990.

Abortion as a Health Issue

Abortion should be treated as a health issue in Japan and not as an ethical issue. It should be regarded as a medical treatment to maintain the health of women. We have a Maternal and Child Health Law which guarantees a healthy delivery and post-delivery care. But abortion is totally neglected. We don't have pre-abortion health counseling. We don't know how abortion is carried out, or about the post-abortion status of women.

The problem is that we do not have any national survey conducted on abortion in Japan. What is needed is a resource of research and statistics that can be used as a reference. We also receive many requests from abroad about women's health issues and we cannot answer them all because the members of my organization also have other commitments. We need to have a bigger, more solid national organization of women for reproductive health. There is a need for such an organization to conduct research and handle the legal issues and paramedical elements of women's health.

Since abortion is not viewed as a medical or health issue, people have taken it for granted that it is something that should be hidden or something to feel guilty about. I want to shed light and show all the aspects of this issue. J

Abortions Rising Among Single Women

A very unique study carried out in a Tokyo hospital has provided insights into the growing number of unmarried women seeking abortion in Japan. Conducted at Sanraku General Hospital, the study drew attention to the failure of contraceptives, particularly the condom, and to a lack of awareness of contraceptive effectiveness, especially among unmarried women. The study involved 463 women who received induced abortions at the hospital between January 1985 - December 1992.

The results of the research were presented at the Japan Maternal Health Association meeting of ob. & gyn. doctors, held in Yamagata City from September 30 - October 1, by Dr. Yoshihide Kimura, director, Ob. & Gyn. Department, Sanraku Hospital. Kimura, who conducted the study, highlighted the lack of contraceptive choices for women and urged that the low-dose pill be legalized. Noting the absence of abortion research in Japan, Kimura called for further studies to provide a clearer understanding of the issue and to support preventive action.

The study found that the proportion of unmarried women receiving induced abortions increased from 10% of the total in 1985 to over 30% in 1989, to reach over 60% of the total in 1992. Of those who became pregnant due to contraceptive failure, 54% of married women and 45% of unmarried women had used condoms; 24% of married and 22% of unmarried used the Ogino method; while 34% of unmarried women used withdrawal. Over 60% of all women said they chose the condom because it was easy to use, while 26% of married and 53% of unmarried said they chose the condom because it was highly effective.

In explaining why they had an induced abortion, the most common reason provided by married women was unwanted pregnancy, followed by health concerns. For unmarried women, the most common reason was to avoid childbirth out of wedlock, followed by unwanted pregnancy, then economic reasons.

Empowering Women with Knowledge

Nimalka Fernando, regional coordinator, Asia Pacific Forum on Women, Law and Development (APWLD), spoke to JOICFP NEWS on November 19 about women's rights. Below are highlights of her interview.

The APWLD is a network of women's organizations involved in women in law activities in the Asia Pacific region. We have connections with about 65 women's groups in about 15 countries. Grassroots women's groups, both rural and urban women workers' groups and women's lawyers groups form the base of our work.

We have tried to network very broadly with groups involved in developing legal strategies and human rights strategies for women. In that context, we have gathered the experiences of women in these countries with regard to their rights and legal status.

Legal Literacy

In terms of legal strategies, we have evaluated the involvement of women's groups in legal literacy classes. By this, I mean classes to give women knowledge about basic things related to their rights. The provision of knowledge is the first step to empowering women. We believe that we have to equip women with the knowledge of what is available to them under the law, advise them if there is a law, and show them how to use the law. Law has always been in the hands of patriarchy, in the hands of the powerful, and has become something that people are really afraid of. Therefore, demystification of law is very important.

Legal literacy is not merely a question of giving information, but of helping women to use that knowledge. Therefore, legal literacy classes should go hand in hand with mobilization. Literacy should be an empowering process.

There are four major issues that we tackle in our work: the economic rights of women; violence against women; women and democracy; and women, religion and family law. During a single year, we like to have a thematic approach and try to get these issues discussed through various mechanisms.

In our research program, we have

Nimalka Fernando

recently done a study in seven countries on economic rights and violence against women. We called it the "Gender and Access to Justice Study" and examined the accessibility to justice for women. In most cases, legal systems are so patriarchal, that women hardly think they can get justice. We also found that women are not happy with the manner in which legal systems deal with issues of justice.

An important issue for us is violence against women. This issue has always been treated as a private affair between a man and a woman, which leaves women facing a very difficult plight. Fortunately, however, as a result of the campaigns of the women's movement, violence against women has become more of a public and social issue. It is also a very important issue when we consider the whole question of family.

Int'l Year of the Family

The theme for the 1994 International Year of the Family is "Building democracy at the heart of society." If we are going to be true to this, then violence against women must be considered with regard to the issue of democracy in the family.

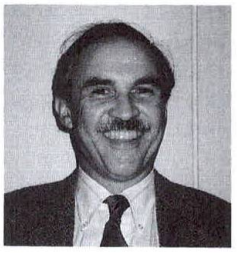
Today it is very clear that the question of women's rights once again is a question of democracy in our society. The space available for the women's movement or human rights groups to actively advocate the rights course is very slim. Especially in countries where there are internal security acts or prevention of terrorism acts, mobilization for rights is becoming increasingly difficult. In such a situation, mobilizing people to get laws enacted or removed in parliament becomes a political struggle. Women's rights are very much linked to the development of the policies of government, and the women's rights struggle has developed into a struggle towards democracy.

Abortion in the U.S. & Japan

Gary Chamberlain, professor, Theology and Religious Studies, Seattle University, spoke with JOICFP NEWS on November 22 about abortion in the U.S. and Japan. Below is an outline of his interview.

When I decided to look comparatively at issue, I decided to look at Japan because people in the U.S. who are opposed to abortion always refer to Japan's abortion rate. I think this attitude about Japan came out of the high abortion rate after the war. Without knowing the reasons why abortion might have been an important means of birth control at that time, people tend to think of Japan as a place where the attitude toward abortion is very casual.

When I tell people that the pill is not allowed in Japan, however, they are amazed because in the U.S., most women take the pill and condoms are not very often used as a form of birth control. People don't understand what resources are available to the Japanese women or men.



Chamberlain

Abortion is very much a political issue in the U.S. and many politicians are elected or not elected partly because of their position on abortion. So it is a very controversial and emotional issue. In Japan, it is not a political issue. It has kind of been settled politically, even though there may be opposition to it. Also, the arguments about abortion are tied in with religion in the U.S. They are not just political arguments, they become religious arguments. That is not so true in Japan.

In Japan there is only one set of laws for the whole country. In the U.S, there are 50 states and each state can have different regulations. Even though abortion is legal in the U.S., the conditions under which it is permitted differ from state to state.

Another difference is that there are a lot of powerful women's groups on both sides of the question in the U.S. Women are very active and there are many women legislators who support abortion and want to keep it open. The women's movement in the U.S. bases its argument on the woman's right to decide versus the right of the fetus to life. So it is very legalistic and it is argued in terms of individual rights. In Japan, people don't seem to talk about legal things first. They seem more to talk about relationships first.

One more difference is that in Japan, abortion is primarily a phenomenon of married women, whereas in the U.S. it is a phenomenon of unmarried women.

The Grassroots as a Driving Force

IP reaches out to people with effective IEC and distribution strategies to mobilize the community

The Integrated Project (IP) was first introduced to Tanzania in 1984 on a pilot basis to a population of 20,000. Since then, the population coverage of the project has expanded significantly to reach more than 200,000 people. In most of the project areas, however, populations are spread over comparatively large areas as the geographical coverage of the community-based project has expanded dramatically since its initiation. In Hai District, for instance, the project now covers nearly the entire 2,167km^2 of the district.

In this light, one of the major challenges that has faced the IP in Tanzania has been how to design and manage the project to reach people in large geographical areas. This challenge, a typical one for community health and development projects in Africa, has prompted the creation of innovative strategies to reach populations, sustain awareness and maintain project momentum. One of the major strategies that has emerged to promote the IP has been the creation of a bottom-up operation system that utilizes various community groups and leaders at different levels.

Income Generation

In Masama, one of the original IP areas, the Masama Rural Health Center has served as a center for service provision and training in such income-generating activities as sewing machine operation. Through this center, which is run by health center staff, a women's club has been established. With 42 members, the club is doing much to promote the family planning (FP)/maternal and child health (MCH) and nutrition education activities of the project. As a result of this arrangement, the health activities of the project have been smoothly integrated with the community development activities of the women's club.

The effectiveness of women's clubs for spreading awareness of the project has also been demonstrated in Sonu, where the women have formed an "FP Association" for FP talks and have taken part in collective activities such as gardening and animal raising. With a current membership of 74, the association has adjusted its agricultural activities to suit the seasonal changes and to most effectively utilize the rented land, and have been generating considerable funds which have been used to promote the project.

In other areas, the support of community leaders and local groups such as traditional birth attendants (TBAs), rural health center staff and village health committee members has been gained for the project. The IP-implementing agency, the FP Association of Tanzania (UMATI), has also begun creating teams of volunteers consisting of influential people under an "UMATI Branch" in each community. Made up of eight to 10 people, the branch is geared to motivating and educating villagers and encouraging fund-raising activities.

A lab technician motivates teachers of Mgeta Primary School in Morogo Region with a demonstration and health education talk.

To further enhance the effectiveness of project promotion, UMATI has gained the involvement of representatives of the political party system at the sub-village and village level and of local government representatives in project administration. Meanwhile, the local steering committee, which operates at the ward level includes representatives of several villages and serves as a pipeline to the division, district, regional and central level to realize an effective bottom-up system of management.

Members of the Sonu Women's Club display some of the Irish potatoes they cultivated under the IP.

To complement this management structure, a system of service delivery has been set up under the IP to reach populations through the community-based distributors (CBDs). Under the system, three CBDs are selected from about 10 candidates from each village and intensively trained for three weeks by UMATI to each serve 150-200 households. The CBDs, who receive only equipment and materials such as bicycles, carry bags, boots and an umbrella, conduct their duties in the afternoon. Since the system was introduced, demand for CBDs has increased both within and outside IP areas. In Hai District, 149 CBDs have been trained, while 30 have been trained in Mgeta. An additional 60 CBDs have recently comlpeted training under the project and an efficient system of CBD supervision is currently being planned.

The project, which has also utilized such institutions and activities as churches, mosques, outpost clinics, MCH clinics, film shows and home visits, has had a positive impact on the contraceptive prevalence rate (CPR) which is now about 35-49% in the original IP areas compared to the national average of 0-7%. In new project areas, where the work of the CBDs has had an impact on FP acceptance, the CPR is about 16-34%.

Opening Doors to Knowledge in Bhutan

A health worker records data prior to giving a health education talk to community people.

An unusual survey carried out in Bhutan by JOICFP has shed some light on the knowledge, attitudes and practice regarding menstruation and reproductive health among young women. A small-scale study, the research was conducted in light of the rise of teenage pregnancy and sexually transmitted disease (STD) rates among youths which have prompted the ministries of education and health to collaborate in changing the school curriculum to include aspects of sexuality and reproductive health. One of the objectives of the survey was to provide the government with insights into the level of knowledge of reproductive health among young women before the curriculum change. The results of the survey were released in October.

To conduct the survey, three questionnaires were developed for the three target groups of school girls, teachers and health school students. The survey was conducted in January 1993 and was followed up by a visit by the researcher, Catherine Payne, former research associate, Family Planning Council of Southeastern Pennsylvania, U.S., to facilitate understanding of the survey results. Payne, who was in Bhutan from August 18 - September 4, also spoke with teachers to learn their views on the planned introduction of population education to schools and gained comments from officials writing the new curriculum.

A total of 160 young women attending five schools filled out the questionnaire, while an additional 60 students were questioned by Payne in informal interviews. The young women surveyed were aged 10-20 years with three-quarters of those surveyed aged between 10 and 15 years. Despite the small target group size, the survey results clearly indicated that young women were not being informed about menstruation in a comprehensive manner.

Menstruation Awareness

Most of the young women interviewed did not have a complete understanding of menstruation. Of all 160 girls surveyed, only one-quarter made a clear connection between menstruation and reproduction. Among the group that had heard of menstruation, 60% had heard from their friends, 30% from siblings, 27% from mothers, and 10% from schools. Meanwhile, the teachers involved in the survey were extremely supportive of the study and generally recognized the importance of reproductive health education.

A two-day workshop was also held during the JOICFP visit and was attended by officials of the education and health ministries, experts of IEC and epidemiology and district health officers. One of the objectives of the workshop was to stimulate local data collection and analysis, with the aim of lessening dependence on outside surveys. The first day of the workshop was mainly taken up with discussions on issues raised by the survey, while on the second day the participants broke into groups and focused on devising their own surveys.

Despite the increase in teenage pregnancy and STDs among youths in Bhutan, family planning services are not reaching young people, particularly out-of-school youths and those without children. While hospitals mainly provide contraceptives to people over 21, outreach clinics are not catering to the FP needs of young people. The clinics, which focus on maternal and child health care, are open only once a month in the close-knit communities where the youths live. One of the recommendations of the survey and workshop was a call to open up the subject of reproductive health and permit the provision of correct information to youths through open discussion.

A baby is weighed during the monthly visit of the health worker.

NGOs to Receive Public Property

Under a new law enacted on November 10, the national and local governments of Japan are obliged to respond to requests from non-governmental organizations (NGOs) to utilize used public property for international assistance purposes. Prior to the enactment of the new law, JOICFP attended a hearing session of the House of Councilors in April where it introduced the positive experiences of the Municipal Coordinating Committee for Bicycle Assistance (MCCOBA). An association of local governments and JOICFP, MCCOBA has been actively donating reconditioned items such as bicycles to support health promotion and development in developing countries. JOICFP has also independently provided a range of reconditioned items to developing countries outside of MCCOBA.

The new law paves the way for NGOs to utilize any property used by the central government or any of the over 3,000 local governments to support activities abroad. Public property covered by the law includes expendable items as well as those currently in use. Public property is replaced according to a specific time-frame, regardless of whether or not it requires replacement.

Although the new law has huge possibilities for supporting NGO activities, it raises a number of issues related to international assistance. In particular, NGOs will be obliged to make a careful analysis of the needs of recipients to ensure the transfer of appropriate items. Two other issues that will affect the transfer of public property abroad have already been noted by MCCOBA, which recommends that items be reconditioned before transfer and that shipping costs be taken into account. Under the new law, NGOs receiving public property will also be obliged to report on the use of the items.

Voice of Voices
By Chojiro Kunii

New Law on Public Property

The Japanese government passed a law on November 10 governing the transfer of public property to non-governmental organizations (NGOs) for overseas assistance. This law obliges the national and local governments to respond to requests from NGOs such as JOICFP for the transfer of used government property, including both expendable and non-expendable items, for overseas cooperation programs.

The new law is expected to do much to boost the activities of NGOs and promote the welfare of people in recipient countries. Under the new law, only those NGOs that have government endorsement as public organizations are eligible to apply for public property. JOICFP, which is registered with the Ministry of Foreign Affairs and Ministry of Health and Welfare, is one of the eligible organizations.

Significant Breakthrough

The new law represents a significant breakthrough for JOICFP and offers considerable possibilities in terms of meeting the material needs of people living in areas of the Integrated Project (IP). It is expected to have a positive impact on raising the living standards of people in IP communities.

Although the property that will be transferred under the new law will actually be secondhand, the items will serve as effective tools to support NGO programs for the development of local communities in developing countries. In such countries, the shortage of equipment and materials poses obstacles to efforts to improve the way of life. In this context, the government's decision is both appropriate and helpful.

JOICFP will try to make full use of the new law to expand the IP by utilizing the experience we have gained through our involvement with 14 local governments in the donation of reconditioned bicycles overseas under the Municipal Coordinating Committee for Overseas Bicycle Assistance (MCCOBA).

Taking this opportunity, JOICFP is also calling on all members of the Japan Association of Parasite Control and Japan Health Service Association to continue supporting JOICFP activities through the transfer of technology and experience and by assisting with international exchange programs. J

DIARY

A four-member mission from Mexico headed by **Ramona Pando de Cosío**, president of the Board, Mexican Family Planning Foundation (MEXFAM), paid courtesy calls to the Mayor of Bunkyo City and the VDIA Office, Ministry of Posts and Telecommunications on Sept. 27.

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Farida Omran El-Nemr, director, Nursing Department, Sohag Health Directorate, Egypt, visited JOICFP on Sept. 28 to exchange information.

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Lamine N'diaye, director, Africa Division, UNFPA, visited JOICFP on Oct. 8 to exchange information.

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Princess Basma Bint Talal, chairperson, Queen Alia Fund, Jordan, exchanged information with JOICFP Deputy Executive Director Yasuo Kon during a meeting on Oct. 13.

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V. T. Palan, director, IPPF-ESEAOR, visited JOICFP on Oct. 20 to exchange information.

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Dr. **Richard Cash**, lecturer, International Health, Harvard School of Public Health, and fellow, Harvard Institute for International Development, visited JOICFP between Sept. 30 - Oct. 4 and Oct. 17 - 21 for briefing/debriefing on the China independent evaluation.

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Reiji Suzuki, executive director, Tokyo Health Service Association; **Wataru Kunii**, board member, Hoken Kaikan Foundation; and JOICFP Program Officer Yukio Honma were in China from Oct. 20 - 24 to discuss collaboration for the Taicang IP Center.

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Dr. **Shigemi Kono**, professor of demography, International School of Economics and Business Administration, Reitaku University; JOICFP Deputy Executive Director Yasuo Kon and program officers Hideyuki Takahashi and Ryoko Nishida were in The Gambia to attend PANFRICO IV, held from Sept. 27 - Oct. 1. Kono and Nishida later traveled to Ghana on an IP monitoring mission from Oct. 3 - 8. Takahashi later met up with Dr. **Akio Kobayashi**, professor emeritus, Jikei Medical College, and **Seiichi Tabata**, children's picture book artist, and was in Kenya, Tanzania and Zambia from Oct. 4 - 24.

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Jing Joong Ho, assistant director, Board of Audit and Inspection, Korea, visited JOICFP on Oct. 26 to hold discussions with JOICFP Deputy Executive Director Yasuo Kon on the government system of audit for NGOs in Japan.

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A 10-member mission from China led by **Xie Mingdao**, director, Family Planning Commission of Sichuan Province, was in Japan from Oct. 28 - Nov. 10 to study FP/MCH in Japan.

40% of Japanese Workers Are Women

A recent report released by the Labor Ministry found that four out of five workers in Japan are women. Despite the large proportion of female workers, women are not getting a fair deal in terms of many aspects of employment such as labor conditions and taxation systems, the report stated.

In fiscal 1992, women accounted for 19.74 million workers, up 560,000 from the previous year, the report said. Overall, they made up 38.6% of the entire Japanese work force.

Of the women workers, 5.92 million, or 30.7%, were part-time employees working less than 35 hours a week.

Calling for improvements in the situation, the report noted that women were still working under relatively poor labor conditions in terms of remuneration, promotion and retirement funds.

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