Sushi, cars, animation and Mount Fuji: these frequently come to the minds of people abroad when they hear the word Japan. Today, a movement to present such culture and strengths of Japan to the world as the “Japan Brand” is getting into full swing. The government of Japan has already started projects to transmit Japanese values and attractive culture such as traditional crafts, sake and traffic safety. This kind of effort to present the strength of one country is performed not only in Japan but also other countries.

According to an analysis, the momentum to reevaluate each country’s international competitiveness anew has risen in the background of this movement. As globalization accelerates as well as the presence of emerging countries grow rapidly, countries are forced to face a question: what are their genuine strengths?
The strength of Japan has been utilized in the field of international cooperation. From the projects implemented during the 60-year history of Official Development Assistance (ODA), JICA summarized the knowledge and technology that Japan presents to the world as Japan Brand ODA. JICA offers them to the world and also promotes their further development. For example, the Mother and Child Health Handbook, a system to support birth and nursing that originated in Japan, has also spread in developing countries where maternity and infant mortality rates are high. *Kaizen*, practice undertaken by employees themselves to find problems in their workplace and seek improvement has also been incorporated in many developing countries by now, since it improves productivity without introducing large-scale facilities. Furthermore, significant possibilities concerning development are hidden in Japanese knowledge and technology including science-mathematics education, disaster prevention and safe water.

There are also many cases in which Japanese regional know-how has helped to solve problems in the world. For example, in Hokkaido, the island covered with snow during winter, people grow vegetables in greenhouses with geothermal energy to minimalize the environmental burden. This technology was also introduced to Mongolia, where it is also cold in winter, and has led to stable production of agricultural products.

In Negros Island, in the Philippines, where people are trying to escape from an economy dependent on sugar production, they adopted agro-ecotourism learnt from the Okinawa Islands, where they have a similar environment. The Japan Brand is expected to help reevaluate the international competitiveness of Japan and to change people’s lives in developing countries.
A pregnant woman receiving a Maternal and Child Health Handbook at a meeting for expectant and nursing mothers. Municipal staff explained how to use the handbook.

Bringing Knowledge of Japanese Maternal and Child Health to the World

In Japan, women are get used to receive a Maternal and Child Health Handbook when they become pregnant. It is also usual to be hospitalized in a clean and equipped hospital at the time of delivery. Such practice in Japan is now making pregnancy and delivery in developing countries safer and secure.
JAPANESE KNOWLEDGE PROTECTING THE LIVES OF MOTHERS AND CHILDREN

Many lives had been lost during pregnancy or childbirth even in Japan in the past. Today, Japan boasts one of the highest standards of Maternal and Child Health services (MCH services). Not only medical progress, but improvement in foundations for MCH services and rise in the awareness of the people led by local governments have contributed to the change. Through these efforts, the idea of MCH services which cover both prenatal and postnatal services had been well-established among the people, especially women in Japan.

Indonesia is one of the countries with a high maternal mortality rate. The idea of the MCH Handbook developed in Japan proved to be useful there. Since 1998, JICA implemented a project to raise health awareness of mothers in Indonesia, utilizing handbooks for them. As local governments introduced the MCH Handbook, people recognized its recording function and effectiveness as a source of useful information for mothers.

In the Philippines, the idea of MCH services, including promotion of subscription for national health insurance and prenatal and postnatal checkup is utilized in local communities in addition to dissemination of the MCH handbook.

EXPECTANT MOTHERS LIVING IN MOUNTAIN VILLAGES GET TOGETHER

On July 16, 2015, the “Expectant and Nursing Mothers Meeting” in Baguio took place in a torrential downpour and cold weather. Baguio is a mountainous region in Benguet Province which is located at an altitude of around 1,600 meters and about six hours away from Manila by highway. The area around Benguet Province is called Cordillera Administrative Region and it consists of six provinces including Benguet, Abra, Apayao, Kalinga, Mountain Province, Ifugao, and the city of Baguio. Up in the mountains, it was cold because of rainy season, despite the image of tropical islands.

The “Expectant and Nursing Mothers Meeting” was jointly held by the Department of Health (DOH) and municipalities in Cordillera Region with booths providing checkups for expectant and nursing mothers and to raise their awareness of national health insurance.

“Since the weather was so bad, I was not sure if we should hold the meeting”, said the District Health Officer Amelita Pangilinan. Despite such worries, about 2,000 people gathered, including some expectant mothers with big bellies. Not bothered by the cold weather, they visited the booths joyfully, holding the MCH Handbooks they had just received. In Cordillera Region, where husbands often attend delivery, the handbook is called the “Family Health Diary” and there were many husbands accompanying their wives.
The project had three points: The first was to improve existing health centers and health stations or build new ones and ensure safe births in medical facilities even in mountainous areas. The second was to increase insurance coverage with a target of “universal insurance for expectant mothers” so that they will be able to deliver in facilities without worrying about medical expenses. Final point was to spread the practices of having checkups not only at the time of delivery but also in the prenatal and postnatal periods.

All of these efforts are utilizing lessons learned in Japan. In the past, Japan had achieved “universal health insurance” by improving medical facilities in remote areas including remote islands as well as by the contribution of municipal employees who dedicated themselves to promoting residents’ subscription for health insurance. In addition, MCH Handbook contributed to awareness-raising of the mothers, leading to the increase in facility-based deliveries and medical checkup examinees.

The project also supports improved facilities to acquire DOH certificate and accreditation of Philippine Health Insurance Corporation (PhilHealth). “The facilities with necessary equipment and properly trained doctors, nurses, and midwives will be certified as a ‘facility which can provide MCH services and neonatal care’. Certified facilities will receive 8,000 pesos (about USD 170) per delivery as a medical fee from PhilHealth”, Takayoshi explained.

Such efforts have produced substantial results in the whole area of Cordillera Region. When the project was launched in 2012, no facility had DOH certificate in the area; by January 2015, 165 facilities including 28 hospitals, 48 town health centers, and 89 village health stations had been certified.
Furthermore, the rate of facility-based deliveries has risen especially in health centers in towns along with the expansion of insurance coverage. In particular, in Abra Province, the rate had grown from 73% to 95% in the two years since the launch of the project. It means that small-scale facilities are functioning as a place to give birth safely.

**GIVING BIRTH IN A FAMILIAR MEDICAL FACILITY**

In Abra Province, there is a health center in a town called Lagangilan which has one doctor, one nurse, and five midwives working there. Visitors are asked to take off their shoes inside a clean delivery room with a new delivery bed granted by the project in the center.

Mary-Jane, an expectant mother who was there for a checkup said, “My sister-in-law also gave birth here. That is why I decided to give birth here as well.” A woman beside Mary-Jane was a member of the “Community Health Team (CHT)”. In the Philippines, people registered for the CHT providing activities to raise awareness of expectant and nursing mothers. “As villagers are acquainted with each other, I visit them at home, promote checkups, and accompany them to medical facilities,” she said. While the CHT is not paid usually, some facilities are securing sustainability by allocating the medical fee to reward CHT.

40 minutes more drive on the flooded mountain path led to a health station in a village. While doctors were not stationed permanently, a nurse and a midwife were there and also emergency call was available 24 hours a day. This small health station played a significant role for the villages which could be isolated in case of a flood.

“While we have an environment to give birth safely, we also have an agreement with a nearby health center and general hospital to prepare for cases where more advanced treatment is required”, explained public health nurse Antonio Japson. Cooperation between local governments is necessary to enhance the health system efficiently within the limited budget.

Furthermore, expectant mothers are always asked if they have already subscribed to the insurance even in a small health station. Actually, there was no system to check insurance coverage prior to this project and no one knew the actual status. In such a situation, the project aims to achieve “universal insurance for expectant mothers” by helping the health centers to keep records of insurance coverage in the registration book and thoroughly encouraging subscription by midwives and CHT.

“We reviewed the way of data collection and calculation method and tried to derive the accurate rates of facility-based deliveries and examinee of prenatal and postnatal checkup to better understand the situation. As a result, priority areas and points for improvement were clarified and it has become easier for us to share a common goal with the people in local communities”. Takayoshi said and emphasized accuracy which is a strength of Japanese cooperation.

Through such projects, Japanese knowledge of MCH services has taken root overseas and shall bring significant progress in the future.
The concept of “Kaizen” contributed to the post-World War II economic growth of Japan. Today, the term is widely acknowledged all over the world. This Japanese wisdom is now spreading more and more in the developing countries.
the local people. In Singapore where the American style of rational, result-oriented production was the norm, the Japanese way which does not bring about tangible results straight away was not understood. The Japanese experts then decided to emphasize “practice” rather than “training”; they showed examples by taking such small initiatives as organizing work tools and taking stocks, and the concept gradually set it in place. It has now penetrated enough to be regarded as a Singaporean culture.

“The Kaizen was highly in need when Japan and other Asian countries were in their respective rapid economic growth periods. It is the African countries which are experiencing such a period today,” says Seiji Sugimoto (Japan Development Service Co., Ltd.), a JICA expert who has been involved in a number of Kaizen projects in different developing countries. After a success in Singapore, Kaizen has spread to countries in the Middle East, Central and South America and Africa. In one such country, Ethiopia, Sugimoto serves as the chief advisor of the project. “In Ethiopia, the composition ratio of the Secondary Industry against GDP is only a little more than 10%. The manufacturing industry is as low as around 5%. The main issues were the weak product planning ability and the low awareness of the importance of quality control. So, I thought Kaizen would be effective.”

KAIZEN METHODS ADAPTED TO EACH FIRM

The project was launched in 2009. Firstly, some 30 model companies were selected, and a survey conducted as to whether Kaizen made any differences in improvement of quality and productivity.
know how important Kaizen is and motivate them for it. We try refraining from giving guidance directly to the companies, and prioritize human resource development, namely training local trainers.”

Through this process, it was gradually made clear that the reasons for low quality or low productivity vary from company to company. For instance, at a concrete manufacturing company, workers needed to carry heavy concrete blocks from one end of the factory to the other, due to its layout. “Quite a few companies did not consider workplace layout, such as the locations of equipment or condition of pathways, which posed problems in terms of efficiency as well as safety. When the layout was improved and made more adequate, some companies saw a jump of productivity by 40 percent.”

What is considered normal in Japan is not necessarily so in Ethiopia. “I realized that work tools are often not neatly organized. On one occasion, the work halted for half an hour in order to look for a driver.” An efficient method to deal with such a case is so-called 5S: Sort, Set in Order, Shine, Standardize and Sustain. This method does not require any large-scale equipment or facilities, and can be easily practiced by anyone. It was introduced by a number of companies and brought about good effects in areas such as work efficiency.

After one year and a half of basic training of knowledge and technical guidance, Kaizen was proven to be effective for the enterprises. As a next step, the number of model companies was increased to about 200 and selected from various industries including woodwork, metal processing, garment and food manufacturing. The efforts were initiated to spread Kaizen throughout the country.

One of the goals was to train local consultants who would be capable to instruct Kaizen. Sugimoto thus visited along with them small and micro enterprises, aiming to give them on-the-job training opportunities. He soon faced, however, a first wall. When he asked company managers “what kind of problems do you have?” most of them replied “We have no problems.” While they are aware of the fact that their product quality and productivity were low, the managers often do not take them as issues of their workplaces. He then reformulated his question, taking advantage of his previous Kaizen-dissemination experience, and asked: “What would you like to improve?” The company managers replied by starting to talk about the problems they face, such as “I would like to get rid of uneven coatings”, or “I would like to reduce defective products.” Sugimoto says: “Needless to say, everybody wants to make good products, therefore it is crucial to let them know how important Kaizen is and motivate them for it. We try refraining from giving guidance directly to the companies, and prioritize human resource development, namely training local trainers.”

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"MR. KAIZEN", A POWERFUL PARTNER

Meanwhile, Kenji Fujita (Japan Productivity Center), vice chief adviser of the project, assisted in establishing an organization which allows a continuous practice of Kaizen, in collaboration with relevant local ministries. Fujita, who tries to have local people’s perspective, says, “I have an experience of having been involved in projects in Tunisia and Kenya, in which I explained the importance of Kaizen to the administrators by organizing seminars and developing training materials. I also gave advice for future organizational structures. I would like to apply the knowledge here in Ethiopia.”

The institution in which an organization is to be established is Ethiopia Kaizen Institute (EKI), under the umbrella of the Ministry of Industry. EKI consists of about 100 staff, including administrators and consultants. Among them, a man nicknamed “Mr. Kaizen” is a key person of the project. It is Getahun Tadesse, Director-General of EKI. Sugimoto reveals that Tadesse is extremely earnest to spread Kaizen and very eager to learn. “Last year, he brought me a paper on Kaizen he drafted and asked for my comments. He was very grateful when I gave some advice and comments. I was impressed by his eagerness.”

Currently, a long-term operational plan of EKI is being developed. There too, Director-General Getahun is an active leading member. “Director-General Getahun asked me to list up Kaizen techniques, in order for him to formulate a vision and strategies which are going to be the basis of the plan. We then sorted out the Kaizen methods into steps depending on the degree of difficulty in understanding and application, and discussed them many times. He is probably over 60 years old, but is full of energy. I think he is going to be a central figure of Kaizen dissemination.” Sugimoto has a high expectation of him.

These efforts have borne fruit; in Ethiopia, the term Kaizen is now widely known among the people. The productivity and quality of enterprises have surely improved. The project, now at its final stage, aims to further strengthen EKI in the next five years, as well as to introduce more advanced Kaizen methods to companies, under the powerful initiative of the enthusiastic Ethiopian government. Sugimoto says, “It is precisely in the developing countries in which the fund procurement is a big issue that Kaizen methods are effective. I would like to continue making efforts with the local staff.”

The Kaizen method was born on the manufacturing floor in Japan, and then went overseas and developed in Singapore. It is now applied not only in the factories in various parts of the world, but also on such scenes as medical practices. This “Japan Brand” reflecting the Japanese spirit will continue to be communicated to the world.
Discover Ideas from Japan!!

India

Introducing women-only cars into Delhi’s rapid public transportation system

As India has rapidly urbanized, there is an urgent need to develop a public transportation system. As a key public transit system, Delhi’s metro serves approximately 2.3 million people daily. However, not a few female passengers were harassed. In order to address this problem, women-only cars were introduced in 2010. Now the first car in each train is reserved for female passengers. Ensuring safe public transportation for women helps their social empowerment.

Indonesia

Capacity development projects for promoting the 3R and proper waste management

As its population grows, the volume of waste keeps increasing in Indonesia. In order to reduce waste, Japan helps the Indonesian government legislate pertinent laws and develop waste management system. In this project, the 3R of Reducing, Reusing and Recycling are the guiding principles that promote reduction and proper management of waste.
Building rural electrification with renewable energy

Approximately 70 percent of Kenyan households are without electric lighting today. Japan helps build and disseminate rural electrification models which use renewable energy such as solar and wind power. Solar panels and LED lighting are installed in schools and health care facilities, contributing to improving the quality of life.

and Technologies

Comfort, convenience and safety. This is Japanese life proudly earned by people’s long-term effort searching a spiritual richness. Here are some examples of the knowledge from Japan applied in everyday life all over the world.

Bangladesh

Introducing ICT-supported system into the Dhaka metropolitan public transportation

Contactless Integrated Circuit (IC) cards are widely used in Japan as train or bus passes and as electronic money. In Bangladesh, this technology was introduced in 2012 to two bus routes operated by a state-owned company. In the nation with a growing population in its metropolitan areas, the IC Technology-supported system helps ease traffic congestion and prevents fare cheating, which contributes to increased fare revenues.

Lighting improves quality of life

Made public transportation easier to use

Paying the bus fare with the IC card is easier. Many more people are using this card today.

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In 2012, Atong Demach won the Miss World Africa title as the first South Sudanese national to ever represent the country. After the competition, she was approached by international model agencies but she declined the offers saying she wanted to work for the people in her own country. Currently, she works as an ambassador for culture in South Sudan and fully committed as a public relations advisor for JICA South Sudan Office. In this way she realizes her carrier for the development of her country.

As a JICA’s Advisor, Demach was most impressed with the ground-breaking ceremony of the Freedom Bridge over the river Nile. She hopes that once the construction of the bridge is completed, it will make a great contribution to the economic development of South Sudan as a key transportation hub in this area. Demach explains that “South Sudan has been in a state of conflict for a long time. Conflicts destroy all kinds of things including education. In the situation like this, a society without education becomes even more vulnerable and easier to be destroyed.” JICA has been implementing projects on education in South Sudan, and such activities will definitely play an important role in the development of this country.

Currently, South Sudan faces challenges in all aspects of development such as education, infrastructure, employment, and so on. For example, infrastructure development creates employment and at the same time new business opportunities. In this sense, Demach expects JICA’s various activities on infrastructure development will contribute to the stabilization of the country.

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Demach comments that “As a part of JICA family, I want to learn how a country functions and where the resources come from through engaging with international relations and development issues. I believe that JICA’s activities are relatively well known in South Sudan, but I will do my best to further promote its recognition.” At the same time, she continues activities to promote the beauty and good qualities of South Sudan as the ambassador for culture.
n November 9, 2015, JICA signed a Grant Agreement with the Government of the Republic of Zimbabwe to provide grant aid up to 1,791 billion yen for the Project for Irrigation Development for the Nyakomba Irrigation Scheme.

The annual rainfall of Zimbabwe is concentrated in the rainy season from November through April with 100 to 200 millimeters of monthly precipitation. This decreases significantly during the dry season from May through October to less than 50 millimeters per month, making irrigation play a crucial role in ensuring a stable supply of agricultural water.

Of the 4.3 million hectares of farmland, however, the irrigated farmland is only about 200,000 hectares, of which 35,000 hectares are cultivated by small-scale farmers who produce staple crops for the country. Given this background, irrigation development for the small-scale farmers has been a pressing issue in order to respond to the ever-increasing demand for food.

The Project for Irrigation Development for the Nyakomba Irrigation Scheme aims to improve the agricultural productivity of the small-scale farmers by securing a stable supply of irrigation water through improving and repairing irrigation facilities in the Nyakomba Irrigation Scheme in Manicaland Province, where the annual precipitation is a maximum of 600 millimeters.

In addition to this Project, JICA has dispatched experts in irrigation development and management since 2012 in ongoing work to provide technical support for irrigation development, maintenance and management, and for the general rural development implemented under the Japan ODA aid up to 1,791 billion yen for the Project for Irrigation Development for the Nyakomba Irrigation Scheme.

n November 4, 2015, JICA signed a Grant Agreement with the Government of the Republic of Malawi for up to a maximum of 3.675 billion yen for the Project for Expanding the Terminal Building at Kamuzu International Airport.

This project expands and improves the passenger terminals and aviation safety equipment at Kamuzu International Airport in a capital city of Lilongwe, the largest international airport in Malawi. The project aims to increase transportation of domestic and international passengers from Malawi. The points are: increasing the capacity of the airport so it can manage more passengers, improving the passengers’ convenience while they are at the airport and on the plane, and assuring the security of the aircrafts’ operation.

Kamuzu International Airport was built with Japanese ODA loans in 1978 and 1980. From 2003 to 2013, airport passengers increased by approximately 100,000. During peak terminal hours, the additional aircraft landings and departures cause congestion at the airport’s check-in and immigration counters in the passenger terminals. In addition, introducing a new aircraft monitoring system to ensure safe aircraft operation is necessary.

It is estimated that this project will increase airport passenger capacity from the current 215,000 to 306,000, which will greatly shorten the average waiting time during peak hours. In addition, introducing the aircraft monitoring system will improve airport safety and reliability. Such improvements will promote industry, and improve tourism and the investment environment. JICA will provide comprehensive support to improve the aviation infrastructure by complementing the project with a Technical Cooperation to develop human resources involved with navigational control.

n October 13, 2015, designated as International Day for Disaster Reduction by the United Nations, the kick-off seminar for the Disaster Risk Reduction Training Program for Latin America and the Caribbean in Chile (KIZUNA Project) was held in Santiago. About 200 people from Japan, Chile and 10 other countries from the region attended.

The KIZUNA Project was officially announced at the 3rd U.N. World Conference on Disaster Risk Reduction in March 2015 in Sendai, Miyagi Prefecture, to establish Chile as a hub in the field of disaster risk reduction. The project aims to develop and create a network of researchers and administrative officers engaged in disaster risk reduction in the region. JICA will invite researchers and administrative officers from Latin America and the Caribbean to Chile.

2,000 personnel are expected to improve their competency in 5 years. JICA will also dispatch Japanese experts to introduce technology and experiences.

At the kick-off seminar, Masahiko Murata, research director of the Disaster Reduction and Human Renovation Institution, conveyed the lessons learned from the Great Hanshin-Awaji Earthquake and emphasized the importance of self and mutual help and community bonds in dealing with disasters, and more than ten Japanese and Chilean experts made a presentation.

Since 2012, JICA has been assisting Chile with development of accurate tsunami warning methods and programs to develop tsunami-resilient communities and residents, through the SATREPS project*. JICA will continue to provide disaster risk reduction assistance to create disaster-resilient communities in Latin America and the Caribbean.

* SATREPS: Science and Technology Research Partnership for Sustainable Development Project.
To Save Mothers and Children: Cameroon’s action to promote Maternal and Child Health (MCH) Handbook

Dr. Grace ALAKE MBAMBOLE
National Coordinator of the Maternal and Child Health (MCH) Handbook in Cameroon

TO COPE WITH HIGH MATERNAL AND CHILD MORTALITY

In Cameroon, maternal mortality rates increased from 699 per 100,000 live births (LBs) in 2004 to 782 per 100,000LBs, while under five mortality ameliorated from 144 to 122 per 1000LBs respectively during the same period. Recently, the 2014 Multiple Indicator Clusters Surveys (MICS) revealed marked improvements of some figures: under-five mortality rate at 103 per 1000LBs from 122 in 2011, vaccination coverage from 50.2% to 64.4%, early post-natal consultation from 37% to 65% for maternal, from 37% to 65% for child health, and so on.

Considering the urgent need to reduce child mortality and improve maternal health, a pilot project was developed to introduce the MCH Handbook. The MCH Handbook was introduced in Cameroon in May 2010, in two pilot Health Districts (HDs). Findings in these pilot sites revealed increased rate of MCH service use, marked improvement of MCH indicators such as vaccination uptake rate, contraceptive use, malaria morbidity and under-five mortality, all in correlation to the number of copies of MCH Handbook issued.

Cameroon hosted the 9th International conference on MCH Handbook from 15th to 17th September 2015. There were 77 international participants from 19 countries, of total 287 participants. Among the major outcomes of the conference, there was the adoption of the “Yaounde Declaration” by 19 countries which called on every country in the world to acknowledge and enable the use of the MCH Handbook as a tool to optimize maternal and child health. There was also an engagement by the Minister of Public Health of Cameroon, Hon André MAMA FOUDA, to promote nationwide use of the MCH Handbook; he called on Health officials to adhere to the new indispensable tool in the hope to reduce maternal and child mortality rates that remain high in Cameroon.

THE ROLE THAT JAPAN SHOULD PLAY IN THE FUTURE

The Japanese Government through JICA has been providing Official Development Assistance to countries in the domain of MCH and especially in promoting the use of the MCH Handbook of which Cameroon had also benefitted. As regards the scaling-up of nationwide use of the MCH Handbook in Cameroon, JICA intends to support the printing of MCH Handbook copies as well as provide technical support through Japan Overseas Cooperation Volunteers to promote community sensitization in two target Health Districts.

Following the recent launch of the Sustainable Development Goals (SDGs) and the new Global Strategy for Women’s, Children’s and Adolescents’ Health, motivated by the resolutions taken during the 9th International conference on MCH Handbook, I am quite optimistic that the collaboration between JICA and governments shall be sustained to improve the health of populations worldwide.