Since its re-launch as an independent administrative institution in October 2003, the Japan International Cooperation Agency (JICA) has pushed forward reforms from three perspectives: field based management, human security, and effectiveness, efficiency and speed. JICA enhanced overseas fields in fiscal 2004 and implemented reforms of domestic operation and organization in fiscal 2005. This feature reports on the progress in JICA reforms, which have entered into its third year, as to what has been achieved by enhancing overseas fields and how much domestic operation has been enhanced. In addition, JICA’s tasks in response to another Japan ODA reform scheduled in fiscal 2008 are introduced.

1 Reform from the Field
—What has been changed by the enhancement of field operations?
- Speed
- Strategic Feature
- Partnership
- ODA Task Forces

2 Reform of Domestic Operations
—Promotion of Citizen Participation
- Opening of JICA Global Plaza
- Partnership with Universities

3 JICA’s New Tasks in Japan’s ODA Reforms

Photo by Katsumi Yoshida
1 Reform from the Field
—What has been changed by the enhancement of field operations?

Speed —Prompt Response to Needs—

Disaster Relief and Reconstruction Assistance

The large earthquake that hit northwestern Pakistan on October 8, 2005 had devastating human and material consequences on the country. In response to a request for relief from the government of Pakistan, Japan dispatched Japan Disaster Relief (JDR) teams (rescue teams, medical teams, and Self-Defense Forces).

Emergency relief for unexpected disasters (earthquake, tsunami, flood, etc.) overseas corresponds to post-disaster immediate response in a relief cycle (from the aftermath of a disaster to the time of being prepared for another disaster). Specifically, such relief includes dispatch of manpower to search for and rescue victims, provision of first aid, and provision of technical advice and guidance in emergency measures. Relief supplies that are essential for immediate life support are provided at this stage as well.

Early Dispatch of JDR Teams

Emergency relief that JDR teams conduct in affected areas is urgent aid with the primary purpose of saving victims’ lives, and therefore, prompt response is the most important factor. From this perspective, upon request from an affected country, Japan aims to dispatch JDR rescue teams within 24 hours and medical teams within 48 hours. When a person is trapped in a collapsed building or rubble and loses his mobility, the survival rate drops drastically after 72 hours. Thus, they always keep in mind that they have to enter the affected areas to carry out relief activities as soon as possible.

In the wake of the Pakistan earthquake, a rescue team left Japan within 17 hours and a medical team within 42 hours after a request was made. Both teams conducted activities in Batagram District, a rugged mountainous area in the northwestern frontier of Pakistan. Access to Batagram District was extremely difficult and no relief aid other than that from Pakistan had arrived when the JDR teams were the first from overseas to conduct relief activities there.

Under severe conditions in the mountainous highland, marked by a drastic change in temperature and a shortage of water, the JDR teams faced tough challenges while camping in tents during the entire period of operation—the first time JDR teams had ever had such an experience. Consequently, the team members lived under the same conditions as the victims, understanding the situations of the victims at close hand. This helped the team members consider what kind of aid is needed in conducting relief activities. In this disaster-stricken area, where lifestyles and religious practices are greatly different, search and rescue activities were conducted on the basis of interviews with the families as a source of information, and in consideration of their religion a female doctor member concentrated on examining female patients, thus responding to local needs in a detailed manner. The medical teams examined 2,242 residents in the affected areas in total, successfully responding to medical needs at the emergency stage. These accomplishments were carried out because the activities of the JDR teams gained the trust of and were received well by the local residents in the affected areas.

A number of aid organizations arrived at the activity centers of the JDR rescue and medical teams as time went by. In collaboration with these organizations, the JDR teams contributed to the coordination of relief activities and played a leading role in the process of developing a regional support system centered on medical care.

Start Reconstruction in Parallel with Emergency Relief

JDR teams in Batagram District handed over their operations to NGOs after four weeks of activities. The relief activities of JDR teams became a first step on a long path to reconstruction, leading to long-running medical assistance that is continuously necessary.

In the middle of October, while emergency relief activities were still under way, JICA dispatched a project formulation study team to Pakistan with the purpose of formulating recovery and reconstruction assistance plans. This study team participated in the Joint Needs Assessment co-organized by the World Bank and the Asian Development Bank, and at the same time, promptly examined...
the direction of Japan’s assistance.

Concurrently, JICA set up the Coordination Committee on Pakistan Earthquake Reconstruction Assistance to establish a framework to exchange information on JICA’s efforts and opinions on its policies. In addition, JICA simplified and reduced procedures and strengthened the implementation system by applying the Fast Track System (see p.13), whose aim is to promptly implement urgent projects.

Based on these study results, JICA has planned and implemented the following projects.

Implementing Reconstruction Assistance Multilaterally

- **Rehabilitation/reconstruction of Muzaffarabad City**
  Muzaffarabad, the administrative and commercial center of Kashmir, suffered catastrophic damage because it was located near the earthquake epicenter. As an emergency development study*1, JICA is formulating rehabilitation/reconstruction plans for Muzaffarabad with an aim to reconstruct it as a disaster-resistant city. JICA first prepared a hazard map that shows the locations of faults and landslide-prone areas, and then developed a land use plan based on the map. According to the plan, JICA is planning a pilot project to construct public facilities that are urgently required and can be role models.

- **Rebuilding roads and bridges**
  The Jhelum Valley Road connecting Muzaffarabad and Srinagar in India is a bus route that serves to improve the relationship between India and Pakistan. As part of a development study, JICA is implementing a pilot project to transfer technology in the design and construction of landslide- and earthquake-resistant roads and bridges to those concerned through reconstruction of an actual bridge.

- **Improving earthquake resistance of medical facilities**
  It seems reasonable to conclude that the damage from the earthquake was magnified by a few buildings that are built tough enough to withstand earthquakes. In response, JICA has launched a technical cooperation project to assist with formulation of standard specifications in order to improve earthquake resistance of primary care facilities. This project also transfers construction management technique through the process of building a model facility. Since many people have become handicapped due to the earthquake, the facility will also incorporate barrier free features.

- **Reconstruction of facilities with grant aid**
  In January 2006, Japan decided to provide additional assistance in the form of non-project grant aid, and chose Batagram District as a target area. JICA immediately dispatched an outline design study team and confirmed the construction of schools and health facilities with the government of Pakistan. Currently, preparation is being made for the early commencement of the construction. As mentioned earlier, Batagram District is the location to which JDR teams (a relief team, two medical teams, and Self-Defense Force for the transportation of supplies) were dispatched immediately after the earthquake struck the region. It helped carry out seamless assistance from emergency relief to reconstruction.

- **Earthquake engineering seminar**
  An international seminar was held (hosted by the Geological Survey of Pakistan) in January 2006, on the themes of earthquake engineering and earthquake resistance design technology. JICA dispatched several experts as main speakers to this seminar in cooperation with the Japan Society of Civil Engineering and the Architectural Institute of Japan.

- **Dispatch of short-term volunteers**
  Besides the above, a group of former Japan Overseas Cooperation Volunteers (JOCVs) who had worked in Pakistan was formed and dispatched as short-term volunteers to conduct two activities.

  One of them is the activity based at the National Institute for Handicapped (which houses approximately 90 in-patients with spinal damage). In response to the fact that many people suffered spinal damage in the earthquake, volunteers who are occupational therapists and nurses offer therapies to patients and provide guidance to Pakistani medical professionals (see p.47).

  The other activity is the cooperation for Asiana Project*2, which was launched under the initiative of President Musharraf. Volunteers carry out youth support activities focusing on widows and orphans at a shelter facility for disaster victims (capacity of approximately 500).

  These two areas require attention including mental care. Since volunteers are fluent in Urdu, the official language of Pakistan, and are familiar with the local customs, they quickly adapted to the locality and their activities have been highly appreciated by the local people.

  These activities are supported by the enthusiasm of those who have experienced volunteer activities in Pakistan, a desire to help in the rehabilitation of Pakistan, in one way or another. These activities emerged from JICA’s efforts to find ways in which volunteers can contribute to post-disaster reconstruction assistance.

Continue Medium- and Long-term Assistance

As described above, JICA has implemented continued assistance from emergency relief immediately after the disaster to rehabilitation and reconstruction assistance.

In April 2006, JICA established the Thematic Subcommittee (earthquake disaster, secondary disaster) of Issue-specific Assistance Committee (rehabilitation and reconstruction assistance) in disaster management. The objectives of this committee are to support ongoing projects and to organize the possibilities and direc-
tions of future assistance, while receiving technical opinions from specialists in earthquake resistance and landslides with support from related academic societies, such as the Japan Society of Civil Engineering and the Japan Landslide Society.

Using these opinions of the committee as a reference, JICA will further undertake reconstruction assistance with a medium- and long-term vision.

In recent years, many similar natural disasters have occurred in a number of countries. By accumulating these experiences in Pakistan, JICA will make efforts to deal with disasters more effectively and rapidly.

*1. Emergency development study: A study in which emergency development plans are formulated and rehabilitation projects for emergency recovery are implemented in a country affected by a large-scale natural disaster or civil war.

*2. Asiana Project: A facility opened in November 2005 with the aim of protecting disaster victims, mainly orphans and widows.

**Fast Track**
Introduction with the Aim of Being “Speedier”

JICA has long promoted disaster reconstruction assistance and peace-building support. Based on its experiences and lessons learned from the past, JICA introduced the Fast Track System in July 2005 with the aim of implementing projects more rapidly and flexibly by improving systems and sharing experiences.

The Fast Track System allows JICA to make organizationally concerted efforts in implementing projects, by designating projects urgent as Fast Track projects to accelerate decision-making and contracting with consultants during ordinary times so that selection of experts involved in the project proceeds. After the launch of a project, information collection and flexible revisions take place as the project proceeds.

**Three Applicable Projects Implemented**

The following three projects have been implemented under the Fast Track System since its introduction on July 1, 2005:

**a. Support for Palestine (Applied on July 25, 2005)**

**b. Support for South Sudan (Applied on November 1, 2005)**

**c. Support for Pakistan Earthquake Reconstruction (Applied on December 12, 2005)**

**a. Expediting decision-making**

Organizational decisions on implementation of regular projects are made after thorough preliminary studies and information collection. However, for a project that the Fast Track has been applied to, processes leading to implementation are simplified to expedite decision-making from planning to commencement of a project. After the launch of a project, information collection and flexible revisions take place as the project proceeds.

**b. Expediting securing human resources**

The Fast Track System simplifies the selection process of experts involved in projects and shortens the process of contracting with consultants. Furthermore, a system has been introduced in which consultants are listed during ordinary times so that selection of and contracting with consultants can be made immediately when needed arise.

Here, support for Palestine and South Sudan is introduced.

**a. Palestine: Jericho Regional Development Study Project (Development Study)**

The Middle East peace talks had been stalled since the second Intifada erupted in September 2000. However, with the inauguration of a new moderate Abbas regime in January 2005 and withdrawal of Israeli settlers from the Gaza Strip in September 2005, the expectation for peace in the Middle East grew quickly and accordingly the international community launched full-fledged support. JICA also provides human resources development focusing on governance, economic reconstruction, and improvement of living infrastructures towards achieving peace and in preparation for the establishment of a Palestinian State in the future. JICA also aims to achieve self-reliance of local communities and will eventually support confidence-building with Israel.

Identifying support for Palestine as an urgent project from the perspective of human security, JICA has strengthened the support system, for example by opening field offices in the West Bank and applied the Fast Track System to support for the West Bank and the Gaza Strip.

**Jericho Regional Development Study Project** obtained an international agreement more promptly.
than usual with the help of the Ministry of Foreign Affairs. Also, consultants involved in the development study were quickly dispatched by reducing the selection period to one third that of the regular time. Currently, in the study, development plans are under examination in the area of major industries such as agriculture and tourism, and social service such as education and health. Several other projects are concurrently being implemented: for example, pilot projects that will bring immediate benefits to local residents, such as repair of wells, which become necessary during the process, demo-farming project (model farming) utilizing water-saving technology, bottling and labeling olive oil, etc. (see p.50).

b. South Sudan: Emergency Study on the Planning and Support for Basic Physical and Social Infrastructure in Juba Town and Surrounding Areas (Development Study)

Sudan is the largest country in Africa, with a population of 34.9 million (United Nations Development Programme, 2003). The government and the rebels represented by the Sudan People’s Liberation Movement/Army (SPLM/A) were in confrontation for many years, and the southern portion of the country suffered armed conflicts for two decades. However, a Comprehensive Peace Agreement (CPA) was signed in January 2005. This ended the civil war except for some parts like the Darfur region, and created two governments in one country: the government of national unity and the South Sudan government.

The city of Juba, the target area of this study, is located in South Sudan and was a fortified city under the government of Sudan during the civil war. Jurisdiction was transferred to the South Sudan government in July 2005 and the city has been serving capital functions of the South Sudan government since September 2005 in place of the interim capital of Rumbek. However, Juba hardly had any public facilities to start with and virtually no urban infrastructure (administrative buildings, facilities, roads, water supply lines, and electricity and communications networks) has been developed or maintained in the past 30 years due to civil war. Naturally, the remaining facilities are all superannuated and require refurbishment or construction. The city population is expected to increase in the future because of accumulation of capital functions and returning refugees, and development of basic essential infrastructure such as water supply facilities is urgently needed. At the same time, in order to promote the settlement of returning people in the communities in the surrounding areas, it is necessary to urgently develop and expand basic social services.

Under such circumstances, the government of Sudan sent a request for assistance to the Japanese embassy in Sudan at the end of September, and the provision of assistance was decided in October. In response, JICA immediately adopted the Fast Track System and dispatched a preliminary study team in November to verify the request and design the project contents. Owing to the adoption of the Fast Track System, the procedure was cut short and the assistance commenced on the field in January 2006.

Currently, the following activities are underway in Juba: (1) formulation of Juba Urban Planning by 2015; (2) cooperation for the development of water supply facilities to benefit the communities in the vicinity areas of Juba as emergency reconstruction of living infrastructure; and (3) training to impart basic skills necessary to develop basic infrastructure in the community. Furthermore, in order to promote transport of refugees and internally displaced persons and commodity distribution, JICA also supports the development of river ports using the Nile River that runs through the eastern side of Juba City.

JICA also has a plan to start cooperation for the Juba Multi-service Training Center (MTC), of which only the building is left, in September 2006.

In order to help the people of Sudan, who suffered from the civil war for over 20 years, regain a safe and peaceful life as soon as possible, JICA will implement projects from the standpoint of the local people while promptly responding to their needs (see p.55).

*3 Field office: A center of assistance established with a fixed term to conduct field operations with specific objectives such as peacebuilding, reconstruction assistance, etc.

*4 International Agreement: Technical cooperation projects and development studies carried out by JICA need international agreements between Japan and the countries, based on which projects are implemented.
Enhancement of Strategic Feature in Program

JICA has enhanced country- and issue-specific approaches in precisely addressing issues in developing countries according to the respective conditions of these countries. As members of ODA Task Forces (see p.18), which are established centering on the Embassy of Japan, JICA overseas offices work on developing strategic programs incorporating viewpoints in the operation field, while pursuing further dialogue with the partner countries. JICA aims to extend outcomes of cooperation from points to areas and sustain them by having ODA Task Forces examine the direction of medium-term cooperation and effectively inputting limited aid resources in line with the direction.

In specific terms, program goals are first set in line with the direction of cooperation and cooperation scenarios to achieve the goals are clarified. At the same time, JICA works to make a program operational by organically combining various projects in cooperation with other donors.

Efforts in Ghana

- Program for Improving Health Status in Upper West Region (2005-2009)

The Upper West Region of Ghana is one of the poorest regions in Ghana. Malaria, pneumonia, malnutrition, and diarrhea prevail, and the mortality rate for children under five years of age is nearly twice the national average, posing a serious threat to the health of local people. A primary task here is to improve basic health services, and therefore, the ODA Task Force in Ghana has designated this region as a priority area for assistance from the viewpoint of human security.

As part of efforts to improve basic social services in deprived areas, which has been identified as an important development issue in Ghana’s Poverty Reduction Strategy Papers (PRSP) and Japen’s Country Assistance Program for the Republic of Ghana, JICA has launched a program to improve the health of the people in the Upper West Region.

This program makes use of Japen’s experience in post-war health care services, represented by the Public Health Nursing System that addressed the improvement of the health of the residents in the remote islands of Okinawa, which suffered from a lack of doctors after World War II. The following projects are being implemented with the aim of strengthening regional health services in two areas by upgrading the functions and services of health care institutions and promoting people’s participation.

a. Project for Strengthening Regional Health in Upper West Region (Technical Cooperation Project)

This project aims to improve the access of people to basic health care services through the expansion of the number of health posts, a national-level policy, where public health nurses are stationed. Specifically, the project supports capacity development of administrators of the Ministry of Health, training for public health nurses, promotion of people’s participation and improvement of a patient referral/transport system and a monitoring system.

b. Promotion of community participation by JOCV

This project aims to strengthen local health services by not only supporting providers of health services, such as activities of public health nurses, but also assisting local residents, such as management of community health committees and improvement of life and hygiene of the residents.

c. Provision of equipment to medical facilities with Japen’s grant aid

This project contributes to the improvement of health services of the entire region focusing on primary and secondary health by providing equipment to regional/district hospitals and public health centers. Equipment is also provided to a public health nurse training school, contributing to the training of public health nurses who are to be dispatched to health posts.

This program features approaches based on the overall perspective of the program in response to individual requests for grant aid to improve hospital equipment and technical cooperation to enhance regional health care.

For example, at the planning stage, the field survey for grant aid was carried out collaboratively with the technical cooperation program and volunteer dispatch (JOCV), aiming to clarify and share overall cooperation program image. Also, at the stage of implementation, a program implementation committee was set up within JICA to conduct overall program management. It grasps all the information of each project included in the program that is otherwise likely to remain behind each cooperation scheme. It also conducts periodic monitoring to maintain a common direction between overall program goals and each cooperation project contribution. Furthermore, by sharing program-wise the knowledge of experts who support the Ministry of Health and the knowledge of JOCV members who support communities, it is possible to more precisely understand the local situations and to propose more detailed solutions. By utilizing the knowledge and wisdom of those in the field throughout the process from planning to implementation/monitoring in working on the project as one program, JICA aims to generate synergy effects for each project, thereby accomplishing more outcomes in cooperation.

Figure c Conceptual Diagram of the Program

Ministry of Health (Central)
Ghana Health Service (Central/Local)
Regional District Hospital
Public Health Center
Community Health Post
Community Health Committee
Improvement in medical services
Improvement in the referral system
Improvement in monitoring
Experts
Dissemination of outcomes
Grant Aid
Promotion of program
Technical Cooperation Project
Enhancement of organizational capacity
JOCV
Promotion of community participation

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Integration of individual projects into a program

The Upper West Region is a 13-hour drive northward from Accra, the Capital, on the Guinea Bay coast. Located in the northwesternmost part of Ghana, the region is bordered by Burkina Faso. This page reports on program activities conducted in the capital city, Wa, and Nadowli District in the region.

Program for Improving Health Status in Upper West Region

A public health nurse and his/her assistant from a health post making a circuit ride on a motorcycle in the area they supervise

A health post combines the functions of a small clinic and residence of a public health nurse. The board on the door shows where the public health nurse is to people who visit the health post while the nurse is out.

In the regional capital, Wa, a workshop was held for officers of the Regional Health Agency. The technical cooperation project is enhancing the management capacity of officers of the Health Agency to expand the health post system throughout the region.

Water must be filtrated or boiled before drinking to prevent parasite infections; however, the village has only one filter, which was provided by an NGO.

In a village that a JOCV in water issues was visiting, people were lading water from puddles formed by spring water. Since no other water source is available they have no choice but rely on the water, which often contains water fleas that carry parasite eggs.

A JOCV whose activities are based on a local NGO in support for women: Introduction of new cash crops is being attempted to increase income leading to improved nutrition.
Partnership —In Pursuit of More than “Addition” Effects—

Integration of Technical Cooperation and Financial Assistance

Along with the progress of a market economy and open door policy following the Doi-Moi Reforms, the freight volume handled at ports and harbors has doubled in the past five year in Viet Nam. In the southern area surrounding Ho Chi Minh City, demand for freight is expected to increase and the existing port facilities at the mouth of the Saigon River that runs through the city will not be adequate to meet the expected growth in freight demand. Accordingly, based on the results of the Port Development Study in the South of the Socialist Republic of Viet Nam compiled by JICA in 2002, construction of a large-scale port facility downstream of the Thi Vai River that runs east of the Saigon River using a yen loan was decided.

In March 2004 when the appraisal by the Japan Bank for International Cooperation (JBIC) was completed, JICA conducted a preparatory study for detailed design, which is required for the construction of the facility. Then, prior to the conclusion of the loan agreement (L/A) for a yen loan in March 2005, JICA launched the Detailed Design Study of Cai Mep-Thi Vai International Terminals in the Socialist Republic of Viet Nam in August 2004 in order to facilitate the construction work with the yen loan, and compiled a report in February 2006.

Recently, the majority of large-scale container terminals in the world has adopted a management system called “concession.” In this system, the owner (central government, etc.) of a port facility lends the entire facility to a private business (called terminal operator), achieving effective management by making use of know-how of the private business. However, there was no concession system in Viet Nam. In March 2005 JICA started the Technical Cooperation Project on the Improvement of Port Management System in the Socialist Republic of Viet Nam, technical cooperation that aims to introduce the concession system in the country for the first time by using the Cai Mep-Thi Vai port as a model site, for the purpose of establishing effective management for terminals that will be constructed with the yen loan.

In this way, a series of projects, which began with JICA’s study and brought another development study, technical cooperation project and yen loan, proceed in an integrated manner with a program approach that combines institutional assistance and facility improvement in achieving the policy goal of effective management of a gateway port in the southern part of Viet Nam using the know-how of the private sector.

Partnership with Other Donors

In order to implement projects effectively, JICA enhances partnerships with international organizations, other bilateral donors, and NGOs. Each donor owns its strengths, and combining these strengths can generate much larger effects than individually implemented. For large-scale, cross border, multisectoral, or multi-issued assistance, partnership with other donors is extremely effective, and results in "more than addition [(1 + 1) ÷ 2]" effect.

Comprehensive Efforts in a Wide Area

In Latin America, many people die of Chagas disease transmitted via kissing bugs (a family of shield bugs) that live in cracks in the mud walls and roofs of straw housing. There is no cure for the Chagas disease once chronic symptoms develop; it is therefore extremely important to exterminate kissing bugs to prevent the infection. To that end, a wide range of measures is necessary, including pesticide, an increase in public awareness, and building of housing resistant to kissing bugs (see p.60).

Based on the agreement with Pan American Health Organization (PAHO), a regional organization of WHO, seven countries in Central America launched the Initiative of Central American Countries to Interrupt Vectorial and Transfusional Transmission of Chagas Disease (IPCA) involving various donors, such as the Inter-American Development Bank (IDB), the Canadian International Development Agency (CIDA), and UNICEF. As part of this effort, JICA also started activities in Guatemala, and has extended its activities to Honduras and El Salvador, where dispatched experts and JOCVs are conducting infection control activities by supporting pesticide application, establishment of a monitoring system with com-
ODA Task Forces —Moving Towards All-Japan Cooperation—

The Bangladesh Model, the Pioneer

In Bangladesh, the Embassy of JICA, the representative office of the JICA office started concerted efforts to implement more consistent and integrated assistance starting in the middle of 2001. The underlying fact is that a large number of aid organizations were conducting activities in Bangladesh and donors’ meetings were often held by sector or issue, which boosted JICA’s awareness of the need to participate in those meetings. First, the three organizations began with allocating personnel in charge by sector.

As these efforts have gradually been activated, the three organizations jointly selected priority sectors of JICA and set up priority area groups by sector, comprising embassy officers, JICA representatives, JICA overseas office staff and experts. Then they worked out issues, basic aid policies, and specific project outlines by sector and summarized project implementation schedules in a given sector in a table to make it easy to understand. These were then translated into English to be presented to the government of Bangladesh and other donor agencies to explain JICA’s aid policies.

ODA Task Forces have been set up in 70 countries as of March 2006 with the following roles given (Source: JICA’s Medium-term Policy on Official Development Assistance).

a. Study analysis of development needs
   - Study and analysis of development needs of aid recipient countries and their own efforts for development

b. Formulation examination of aid policies
   - Participation in formulation of JICA’s Country Assistance Program in order to ensure consistency with the development plans of recipient countries
   - Active recommendations on the formulation of concrete policies by priority issue and sector

c. Identification selection of prospective projects
   - Prioritization of requests from aid agencies to explain JICA’s aid policies

Those efforts are called the Bangladesh Model and it became a pioneer of the ODA Task Forces that were subsequently set up throughout the world.

Further Promotion of Field Enhancement

A new Medium-term Policy on ODA, drawn up in February 2005, refers to the promotion of field enhancement as one of the policies for implementing efficient and effective cooperation. At the heart of this policy is an ODA Task Force. An ODA Task Force consists of the Embassy of JICA, JICA, JICA and JICA External Trade Organization (JETRO) with the primary objective of formulating JICA’s aid policies that precisely reflect development needs through dialogue with the aid recipient country. As part of field enhancement, JICA actively participates in the activities of ODA Task Forces.

As these efforts have gradually been activated, the three organizations jointly selected priority sectors of JICA and set up priority area groups by sector, comprising embassy officers, JICA representatives, JICA overseas office staff and experts. Then they worked out issues, basic aid policies, and specific project outlines by sector and summarized project implementation schedules in a given sector in a table to make it easy to understand. These were then translated into English to be presented to the government of Bangladesh and other donor agencies to explain JICA’s aid policies.

The JICA-UNHCR Partnership

One of the most difficult and intractable problems in assisting countries affected by violent conflicts is to bridge the ‘gap’ between initial ‘emergency’ assistance and longer term development aid.

JICA is in collaboration with the UN Refugee Agency (UNHCR) in tackling this problem. In the Africa state of Chad, for example, JICA promotes rural development projects in impoverished Chadian villages while UNHCR provides humanitarian assistance to refugees from neighboring Sudan.

Because the staff of both organizations often work in unstable and dangerous situations, they have also cooperated, since 2004, on security training and peacebuilding activities in post-conflict situations. Apart from personnel from the two agencies, NGOs and government officials were also invited for the courses organized by JICA and UNHCR’s eCentre in Tokyo.

*1 Chagas disease: An insect-transmitted parasitic infection peculiar to Latin America. There is no cure for the disease once chronic symptoms develop, causing death from heart disease 10-20 years after infection. Kissing bugs, a vector of the protozoon Trypanosoma cruzi which causes Chagas disease, live in straw-thatched roofs and in mud walls.

Women discussing issues in their village: Women in Bangladesh have little or no access to cash-earning employment due to social customs, etc.
recipient countries
- Work on formulating model projects combining grant aid, yen loan, and technical cooperation
- Recommendation on the review of assistance methods

d. Strengthening of partnership with local aid community
- Strengthen close partnership with international organizations and other donors in line with Japan’s aid policy.

f. Strengthening coordination with Japanese stakeholders working in aid recipient countries
- Active exchange of opinions with Japanese NGOs, academic institutions, and economic associations, active in aid recipient countries

g. Review of Japan’s ODA
- Review whether Japan’s aid in the past has achieved initial objectives and purposes and whether the direction of goals has been appropriate

h. Information disclosure and publicity
- Active disclosure of information on activities of ODA Task Forces on websites, etc.

Activities in Bangladesh ..........

The activities of the ODA Task Force in Bangladesh that started in the middle of 2001 remain active. The ODA Task Force played a leading role in the process of revising Japan’s Country Assistance Program for Bangladesh, which started in the latter half of 2004. Teams were set up in every priority sector of aid and common recognition shared by local stakeholders about the issues and basic aid policies for each sector were compiled in the Sector-specific Aid Policy. Furthermore, project implementation schedule in a given sector was compiled into a rolling plan*. Owing to these activities, the following outcomes and new attempts have been generated.

First, the formulation of aid policies by sector involving all concerned parties has facilitated programs that organically combine grant aid, loan assistance, and technical cooperation. The formulation of prospective projects that meet the needs has become possible through two processes: (1) analysis of development needs by local stakeholders utilizing the knowledge and experience of their own; and (2) dialogue with the government of Bangladesh after formulating Japan’s aid policies/strategies by sector.

By demonstrating inter-organizational concerted All-Japan power, Japan’s aid policy can be clearly communicated to the government of Bangladesh and other aid organizations, thus promoting aid coordination. One of the achievements is the Joint Country Assistance Strategy formulated through the collaboration between the World Bank, the Asia Development Bank (ADB), and the Department for International Development (DFID) of the UK, and Japan. The government of Bangladesh drew up the Poverty Reduction Strategy Paper (PRSP), which is the basis of their poverty reduction measures. Meanwhile, in the Joint Country Assistance Strategy, the above mentioned four major donors share the direction of aid policy with one another and promote cooperation at the project level with the aim of assisting with the implementation process of the PRSP more effectively. To that end, common strategies for the four donors and outcome matrix have been established, including outcomes to be pursued and monitoring index, etc. A framework for coordinating with other donors and monitoring outcomes according to the respective responsibilities, which are divided into four parties by issue and sector, is being built.

In addition, the ODA Task Force in Bangladesh is active in overseas PR activities and development education. On March 11, 2006, the ODA Task Force in Bangladesh held a seminar connecting Japan to the aid fields jointly with the ODA Task Force in Tanzania. This seminar, an idea of both ODA Task Forces, was illustrated by a participant’s comment: “It was worth talking directly with the Osaka venues. The effect of sending a direct message from the field was illustrated by a participant’s comment: “It was worth talking directly with the young people in the field and Japan involving general participants about the ‘international cooperation we can do.’” It was successful, with a total of 246 participants at both the Tokyo and the Osaka venues. The effect of sending a direct message from the field was illustrated by a participant’s comment: “It was worth talking directly with the young people in the field and Japan involving general participants about the ‘international cooperation we can do.’” It was successful, with a total of 246 participants at both the Tokyo and the Osaka venues.

JICA intends to actively participate in the activities of ODA Task Forces in order to carry out projects with accurate understanding of the needs of developing countries in cooperation with local stakeholders in the field.

*1 Rolling Plan: A planning chart showing chronological correlation of projects in each sector.