

[In Japan & Online] Knowledge Co-Creation Program (Group & Region Focus)

General Information on

Improvement of Maternal Health 課題別研修「妊産婦の健康改善」 JFY 2023

Course No.: 202208274J001

Internet connection check and Guidance: May 9, 2023 Kick off session: May 16, 2023 Online Program Period: From May 16 to May 25, 2023 In Japan: June 7 to 28, 2023 Online Follow-up Program: July 27 and 28, 2023

This information pertains to one of the JICA Knowledge Co-Creation Programs (Group & Region Focus) of the Japan International Cooperation Agency (JICA) implemented as part of the Official Development Assistance of the Government of Japan based on bilateral agreement between both Governments.

* In the context of the COVID-19 pandemic, please note that there is still a possibility the course period will be changed, shortened, or the program in Japan to be cancelled.

JICA Knowledge Co-Creation Program (KCCP)

The Japanese Cabinet released the Development Cooperation Charter in February 2015, which stated, *"In its development cooperation, Japan has maintained the spirit of jointly creating things that suit partner countries while respecting ownership, intentions and intrinsic characteristics of the country concerned based on a field-oriented approach through dialogue and collaboration. It has also maintained the approach of building reciprocal relationships with developing countries in which both sides learn from each other and grow and develop together." JICA believes that this 'Knowledge Co-Creation Program' will serve as a foundation of mutual learning process.*

I. Concept

Background

Sustainable Development Goals 2030 (SDGs) Goal 3 aims to "Ensure healthy lives and promote well-being for all at all ages", which includes improvement of maternal, newborn, and child health (MNCH). One of the target indicators of Goal 3 (SDG 3.1), aims to reduce the global maternal mortality ratio (MMR) to "less than 70 deaths per 100,000 live births by 2030, with no individual country exceeding an MMR of 140 maternal deaths per 100,000 live births". The global MMR is projected to be approximately 189 in 2023 (at the halfway point), a significant gap from the MMR of 118 which we need to reach by that year in order to be on track to achieve the final SDG target of below 70 by 2030.

According to the United Nations Report 2019, 295,000 maternal deaths were estimated in the world (211 maternal deaths per 100 000 live births). Despite the significant reduction in overall maternal mortality as of 2017 (35% lower than in 2000), a recent study demonstrates wide disparity and inequity in access to health services underlies this global trend. Sub-Saharan Africa had the highest regional MMR at 542¹. Furthermore, our attention needs to focus on the existing in-country disparities -urban-rural gaps.

To overcome safe motherhood challenges, "Continuum of Care"* during the period from pre-pregnancy, pregnancy, to postpartum by increased health seeking behaviors towards reproductive health and safe motherhood among the people, ensuring skilled human resources, adequate essential supplies and making family planning accessible at the community levels as well as referral to timely obstetric care. As experienced in Japan, building a strong health system and community support system are prerequisites to change.

Under this COVID-19 pandemic, the additional maternal and under-5 child deaths are estimated due to the obstacle of the Continuum of Care. Ensuring Continuum of Care under this new normal era is the key to achieve SDG 3.1 and SDG 3.2, also will contribute to preparedness for other newly emerging infectious diseases (EID).

* Maternal, Newborn and Child Health (MNCH) "Continuum of Care" is the operational context for health programming to ensure that there is continuity of care for women and children. To improve the overall health of women and children, continuity of care is necessary throughout the lifecycle as well as between places of caregiving. It includes the seamless and integrated service delivery from pre-pregnancy to delivery, the immediate postnatal period and childhood – and across all places of care, including families and communities, outpatient services, clinics and other health facilities. Programs range from comprehensive MNCH efforts on both the demand and supply sides of primary health care to community-based activities that are focused mainly on the promotion of improved health practices and care-seeking behavior.

For what?

This program aims to strengthen the strategies to reinforce "Continuum of Care" at a community level so as to contribute to improve MNCH. The participants are expected to develop an **Mini Action Plan (MAP) to strengthen the existing programs/strategies to improve "Continuum of Care" at the community level**.

For whom?

This program is designed for staff of national or local government organizations (GOs) responsible for planning, designing and implementing maternal, newborn, and child health (MNCH) programs, and/ or of non-governmental organizations (NGOs) who work in collaboration with the GOs mentioned above.

<u>* This course is **NOT** a **clinical training program**. (Do not expect detailed medical technical or methodological guidance.)</u>

¹ Trends in Maternal Mortality 2000-2017, UNFPA, World Health Organization, UNICEF, World Bank Group, the United Nations Population Division, 2019.

How?

- 1. By identifying and analyzing the "gaps and bottlenecks" existing in the issues related to continuum of MNCH care of the participant's country.
- 2. By understanding the effective interventions to improve "Continuum of Care" at the community level from cases of Japan and other countries:
 - a) provision of quality information and quality care services for MNCH at the community level
 - b) creation of supportive environment to link the adolescent, pregnant women, mothers and children to health care services
- 3. By developing and implementing an Mini Action Plan derived from the course.

II. Description

1. Title (Course No.) Improvement of Maternal Health (202208274J001)

2. Program

[Online] Internet connection check and Guidance: May 9, 2023
[Online] Kick-off session: May 16, 2023
[On-demand] Video learning and report submission: May 16 to 18 2023
[Online] Zoom live session :May 23 to 25, 2023
[In Japan] Face to face session and site visits : June 7 to 28, 2023
[Online] Follow-up Program: July 27 and 28, 2023

3. Target Regions or Countries

Angola, Comoros, Indonesia, Laos, Pakistan, Papua New Guinea, Sierra Leone, Tajikistan, Tanzania, Timor-Leste

4. Eligible / Target Organization

This course is designed for staff of relevant organizations that qualify (A) or (B) below:

- (A) National/Local government organizations (GOs) responsible for planning/designing/ implementing maternal, newborn and child health (MNCH) programs
- (B) Non-governmental organizations (NGOs) in the field of MNCH working in collaboration with the GOs mentioned above

5. Capacity (Upper Limit of Participants)

14 participants

6. Language

English

7. Course Objective

To reinforce "Continuum of Care" with special focus on "Maternal health" at the community level so as to contribute to improve the maternal, newborn, and child health (MNCH). Mini Action Plan is to be revised and implemented within their organization.

8. Overall Goal

Contribute to SDG 3.1 and SDG3.2 of SDGs Goal 3 target indicators:

- 3.1: By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births.
- 3.2: By 2030, end preventable deaths of newborns and children under 5 years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1000 live births and under-5 mortality to at least as low as 25 per 1,000 live births.

9. Output and Contents

This course consists of the following components. Details on each component are given below.

Modules	Subjects/Agendas	Methodology
Output 1 To identify and analyze the "gaps and bottlenecks" existing in the issues related to improvement of MNCH of the participant's country.	 Discussion based on the situation analysis (Inception Report/ mini reports) per country/ participants to identify the existing challenges, good practices and lessons learned surrounding the issues of maternal health. 	Presentation and discussion (Online/ program in Japan)
Output 2 To acquire better understanding on the interventions necessary to ensure " Continuum of Care" at the community level: (1)provide quality information and quality services at the community. (2) create supportive environment for adolescent, pregnant and parturient women and infants at the community level to increase uptake of services.	 Global Trend: Global trend and Japan's experience in MNCH Continuum of care: Role and function of home-based record for continuum of maternal, newborn and child health care ~world and Japan ANC (antenatal care): Continuum of MNCH ~how best can we promote early booking/ regular antenatal care contacts PNC (postnatal care): Continuum of MNCH ~how to improve the quality of PNC and increase PNC/ postpartum family planning uptake Respectful Maternity Care ASRH: Promotion of community-based adolescent sexual reproductive health and rights (SRHR) 5S/ KAIZEN Community oriented maternal and child nutrition ~case from Ghana and Zambia (tentative) Community supportive system: role and function of CHWs and local stakeholders for sustainable management of the program 	lectures and discussion (Online/ program in Japan)
Output 3 (1) To develop an Mini Action Plan (2) To analyze and review the progress of the Mini Action Plan implementation	 Development of an Mini Action Plan: "Strategy to strengthen the maternal health programs at the community level" based on the lessons learned from the course. Follow up report on the initial action taken/ video report / analysis of the progress/ lessons learned/ revision (modification) of the Mini Action Plan 	discussion, individual works and presentation (Online/ program in Japan)

Timetable:

Internet connection check and Guidance: May 9 The internet connection check will be held for the accepted candidates. Participants are required to attend it by using the computer, not by smartphone or tablet under same condition as farther online program.	Time (Tentative) <u>90 min.</u>					
Group A: Pakistan, Tajikistan, Laos, Indonesia,						
Timor-Leste, Papua New Guinea						
 Tajikistan 	13:00 - 14:30					
• Laos	15:00 – 16:30					
Indonesia	15:00 – 16:30					
Timor-Leste	17:00 – 18:30					
Papua New Guinea	18:00 - 19:30					
Group B: Angola, Comoros, Sierra Leone,						
Tanzania						
 Angola 	11:00 - 12:30					
Comoros	13:00 – 14:30					
Pakistan	15:00 – 16:30					
Sierra Leone	10:00 – 11:30					
• Tanzania	13:00 – 14:30					

Kick-off session: May 16	Time		
Live sessions: May 23~25	Approx.		
Follow-up sessions: July 27, 28	150min. to 180min.		
 Angola Comoros Indonesia Laos Pakistan Papua New Guinea Sierra Leone Tajikistan Tanzania Timor-Leste 	09:00 - 12:00 11:00 - 14:00 15:00 - 18:00 15:00 - 18:00 13:00 - 16:00 18:00 - 21:00 08:00 - 11:00 13:00 - 16:00 11:00 - 14:00 17:00 - 20:00		

10. Time of the online session

The online session consists of "Individual on-demand (video) sessions" and "Joint live online sessions".

"On-demand (video) session" means watching video lectures whenever you want to study them and submit mini-reports **between May 16 to 18, 2023**.

"Live-online sessions" will be held starting from the day of the kick-off session. <u>For live</u> <u>online session, all the participants are expected to participate as scheduled.</u> You are required to attend all the sessions (requirement to be certified by the course). Please refer to the tentative schedule. (Described on **page 7.**)



"Improvement of Maternal Health" 2023 Tentative Program



				The pro	gram below is subject to change		
Date	Time		Type Contents				
2023/05/09	For 90 minutes*		Online	[Connection Check and Guidance]			
2023/05/16	For 150 minutes*		Online	[Kick Off Session]			
2023/ 05/16-18	On demand(3days)		On demand	 [Video learning] Global trend and overview of Japan's MNCH Role and function of home-based record for continuum of MNCH How best can we promote early booking and regular ANC How to improve the quality and uptake of PNC 			
2023/ 05/23-25	For 150 minutes* (3days)		Online	【Online Live Session】 Reflection session from Video learning			
0000 /00 /07	A		(al				
2023/06/07 2023/06/08	Arrival						
	9:30	~	17:00	In Japan	<pre>[Face to face Lectures and Site Visits] • Kick off session in Japan • Inception report sharing and Analysis • Japanese experience in MNCH • Site visit : MCH hospital • Site visit : Midwifery home • MNCH services and governance in local municipality • Activity of MCH Promoters • Activity of adolescent peer educators • Activity of adolescent peer educators • Advocacy strategy to get people on board • Discussion with past participants • Mini Action Plan development • Mini Action Plan Presentation / Summing-up</pre>		
2023/06/27							
2023/06/28	Departure						
0000 /07 /07							
2023/07/27	For 180 minutes*						
2023/07/28	For 150 minutes*		or 150 minutes* Online 【Follow up session:way forward】				

*Online session has different starting time according to your country: Refer timetable at P6.

11. Assignments

All the Participants are required to submit assignments strictly following the due date as indicated below.

Assignment	Schedule
Inception Report	End of May, 2023.
Mini Reports (Reflection Paper)	0:00 (midnight) of each video lecture assignment day
Mini Action Plan	End of June, 2023
Mini Action Plan Progress report	Mid-July, 2023

Further information will be provided to accepted candidates later.

12. Circumstance for the Internet Connection

Part of the program will be conducted via online which requires the use of various applications: YouTube, Zoom and Google applications. It's necessary to ensure a stable and secure internet connection. Internet speeds of downloading and uploading are recommended approximately 3 to 5 Mbps. (0.5 to 1.5 Mbps at least). Please refer to this URL for how to measure internet speed. https://www.speedtest.net/

Attending the program by mobile phone is not recommended due to the screen size and functions. Each participant needs to make an Mini Action Plan and presentation by his/her own device.

[Note] If you are not able to arrange internet connection or necessary devices, please consult with JICA office in your country.

13. Attendance Requirement

Participation in all online programs is an essential requirement for the completion of the course. Partial attendance is not allowed.

III. Eligibility and Procedures

1. Expectations to the Applying Organizations

- (1) This course is designed primarily for organizations that intend to address specific issues or problems identified in their operation. Applying organizations are expected to use the program for those specific purposes.
- (2) In this connection, applying organizations are expected to nominate the most qualified candidates to address the said issues or problems, carefully referring to the qualifications described in section **III**-2 below.
- (3) Applying organizations are also expected to be prepared to make use of knowledge acquired by the nominees for the said purpose.

2. Nominee Qualifications

Applying organizations are expected to select nominees who meet the following qualifications.

(1) Essential Qualifications

- <u>Current Duties:</u> staff of government organization (GO), and/ or non-governmental organization (NGO) responsible for planning/designing maternal, newborn and child health (MNCH) programs.
- 2) <u>Professional Background:</u> have a minimum of three (3) years of experience in planning, administration, implementation, and monitoring/evaluation in the field of MNCH and/or reproductive health.
- 3) <u>Language Proficiency:</u> have a competent command of spoken and written English proficiency.
- 4) <u>Health:</u> must be in good health to participate in the program.

(2) Recommended Qualifications

- 1) Age: be between the ages of thirty (30) and fifty (50) years
- 2) Organization: for the nomination of NGOs, a member association of International Planned Parenthood Federation (IPPF) is recommended. – refer to Annex II. *International Planned Parenthood Federation (IPPF) is a federation that works with over 170 country national Member Associations which deliver sexual and reproductive health services and advocacy. List of IPPF member association is listed on page 15 and 16 for reference.
- 3) Gender Consideration: JICA promotes gender equality. Women are encouraged to apply for the program. JICA makes a commitment to promote gender equality and women's empowerment, providing equal opportunity for all applicants regardless of sexual orientation and gender identity.
- 4) Related to JICA projects: Staff or members of counterpart organizations of JICA past and on-going technical cooperation projects in reproductive, maternal, newborn, and child health.

(3) Expected requirements specific for the online course

- Must obtain official permission from the applicant's superior (in written form) to allow the participant to fully commit and participate in the course (to avoid the participant by being disturbed from being appointed to sudden duties)
- 2) Hardware: PC with speaker/microphone and web camera
- 3) Software: Zoom, YouTube, Google Chrome, Google applications (Gmail), Microsoft Excel, Word and Power Point
- 4) Internet Access/Connection: speed enough to use the software as shown in 2)
- 5) Time availability: Required to join all the live sessions shown on **page 7**.

3. Required Documents for Application

(1) Application Form: The Application Form is available at the JICA overseas office (or the Embassy of Japan)

* If you have any difficulties which require assistance, please specify necessary assistances in the QUESTIONNAIRE ON MEDICAL STATUS RESTRICTION (1-(c)) of the application form. Information will be reviewed and used for reasonable accommodation.

(2) Photocopy of Passport: You should submit it with the application form if you possess your passport which you will carry when entering Japan for this program. If not, you are requested to submit its photocopy as soon as you obtain it.

* The following information should be included in the photocopy: Name, Date of Birth, Nationality, Sex, Passport Number and Expiry Date

- (3) English Score Sheet: to be submitted with the application form, if the nominees have any official English examination scores. (e.g., TOEFL, TOEIC, IELTS)
- (4) **Questionnaire**: To be submitted with the application form. Detailed information is provided in the ANNEX 3 "Questionnaire".

4. Procedures for Application and Selection

- (1) Submission of the Application Document
 - Closing date for applications: Please confirm the local deadline with the JICA overseas office (or the Embassy of Japan).

(All required material must arrive at JICA Center in Japan by April 14, 2023)

(2) Selection

Primary screening is conducted at the JICA overseas office (or the embassy of Japan) after receiving official documents from your government. JICA Center will consult with concerned organizations in Japan in the process of final selection. Applying organizations with the best intentions to utilize the opportunity will be highly valued.

The Government of Japan will examine applicants who belong to the military or other military-related organizations and/or who are enlisted in the military, taking into consideration of their duties, positions in the organization and other relevant information in a comprehensive manner to be consistent with the Development Cooperation Charter of Japan.

(3) Notice of Acceptance

The JICA overseas office (or the Embassy of Japan) will notify the results **<u>not later</u> <u>than April 28, 2023</u>**.

5. Additional Document(s) to Be Submitted by Accepted Candidates Inception Report to be submitted by May 31, 2023.

Accepted candidates are required to prepare an inception report. Further information will be provided to accepted candidates later.

6. Conditions for Participation

The participants of KCCP are required

(1) to strictly observe the course schedule,

- (2) not to change the program topics,
- (3) to respect copyright and portrait rights. To refrain from recording and sharing the video material, audio material, text, images, graphics and other content available during the program except for cases with specific permission.

- (4) not to change the air ticket (and flight class and flight schedule arranged by JICA) and lodging by the participants themselves,
- (5) to understand that leaving Japan during the course period (to return to home country, etc.) is not allowed (except for programs longer than one year),
- (6) not to bring or invite any family members (except for programs longer than one year),
- (7) to carry out such instructions and abide by such conditions as may be stipulated by both the nominating Government and the Japanese Government in respect of the course,
- (8) to observe the rules and regulations of the program implementing partners to provide the program or establishments,
- (9) not to engage in political activities, or any form of employment for profit,
- (10) to discontinue the program, should the participants violate the Japanese laws or JICA's regulations, or the participants commit illegal or immoral conduct, or get critical illness or serious injury and be considered unable to continue the course. The participants shall be responsible for paying any cost for treatment of the said health conditions except for the medical care stipulated in (3) of "5. Expenses", "IV. Administrative Arrangements",
- (11) to return the total amount or a part of the expenditure for the KCCP depending on the severity of such violation, should the participants violate the laws and ordinances,
- (12) not to drive a car or motorbike, regardless of an international driving license possessed,
- (13) to observe the rules and regulations at the place of the participants' accommodation, and
- (14) to refund allowances or other benefits paid by JICA if the program is shortened for any reason.

IV. Administrative Arrangements

1. Organizer (JICA Center in Japan)

- (1) Center: JICA Tokyo Center (JICA TOKYO)
- (2) Program Officer: Ms. Mihoko Nakazawa and Ms. Mitsuko Ogawa (ticthdop@jica.go.jp)
- (3) URL: <u>https://www.jica.go.jp/tokyo/english/office/index.html</u>
- (4) Facebook: <u>https://www.facebook.com/jicatokyo</u>
- (5) YouTube: Knowledge Co-Creation Program and Life in Japan

https://www.youtube.com/watch?v=SLurfKugrEw

2. Implementing Partner

- (1) Name: Japanese Organization for International Cooperation in Family Planning (JOICFP)
- (2) Contact:
 - Ms. Hayashi (<u>mhayashi@joicfp.or.jp</u>),JOICFP.
- (3) URL: https://www.joicfp.or.jp/eng/
- (4) Remark: Founded in 1968, JOICFP is a Japan based NGO, active in the field of sexual and reproductive health and rights (SRHR), gender equality and women's empowerment where it works to improve the status of women, men and young people around the world. JOICFP focuses on people-centered community-level interventions based on the lessons learned from post-war Japan. Received United Nations Population Award in 2001, Yomiuri International Cooperation Prize in 2016 and 1st SDGs Partnership Award in 2017. Holds UN/ECOSOC Consultative status since 2000.

3. Internet connection check and Guidance for accepted candidates

Internet connection check and guidance will be held on <u>May 9, 2023</u>. This session includes interview about the venue of online course, internet access, and platform orientation. The accepted candidates will be required to attend it <u>by using a computer</u>, <u>not by smartphone or tablet</u>. Further information will be provided later.

4. Accommodation in Japan

Basically, JICA will arrange the following accommodation(s) for the participants in Japan:

JICA Tokyo Center (JICA TOKYO) Address: 2-49-5 Nishihara, Shibuya-ku, Tokyo 151-0066, Japan TEL: +81-3-3485-7051 FAX: +81-3-3485-7904 (where "81" is the country code for Japan, and "3" is the local area code) Please refer to facility guide of JICA TOKYO at its URL, https://www.jica.go.jp/tokyo/english/office/index.html

<u>If there is no vacancy at JICA TOKYO</u>, JICA will arrange alternative accommodation(s) for the participants.

5. Expenses

The following expenses in Japan will be provided by JICA

- (1) Allowances for meals, living expenses, outfits, and shipping and stopover.
- (2) Expenses for study tours (basically in the form of train tickets).
- (3) Medical care for participants who become ill after arriving in Japan (the costs related to pre-existing illness, pregnancy, or dental treatment are <u>not</u> included).

- (4) Expenses for program implementation, including materials.
- (5) For more details, please see "III. ALLOWANCES" of the brochure for participants titled "KENSHU-IN GUIDEBOOK," which will be given before departure for Japan. *Link to JICA HP (English/French/Spanish/Russian): <u>https://www.jica.go.jp/english/our_work/types_of_assistance/tech/acceptance/training/ index.html</u>

6. Pre-departure Orientation

A pre-departure orientation will be held at respective country's JICA office (or the Japanese Embassy), to provide Participants with details on travel to Japan, conditions of the course, and other matters.

*YouTube of "Knowledge Co-Creation Program and Life in Japan" and "Introduction of JICA Center" are viewable from the link below.

Image videos of 'Introduction of JICA Center (YouTube)' show the following information of JICA Centers: Location, Building, Entrance, Reception (Front desk), Lobby, Office, Accommodation (Room), Amenities (Hand dryer), Bathroom (Shower and Toilet), Toiletries, Restaurant, Laundry Room (Washing machine, Iron), ICT Room (Computer for participants), Clinic, Cash dispenser, Gym, Neighborhood

V. Other Information

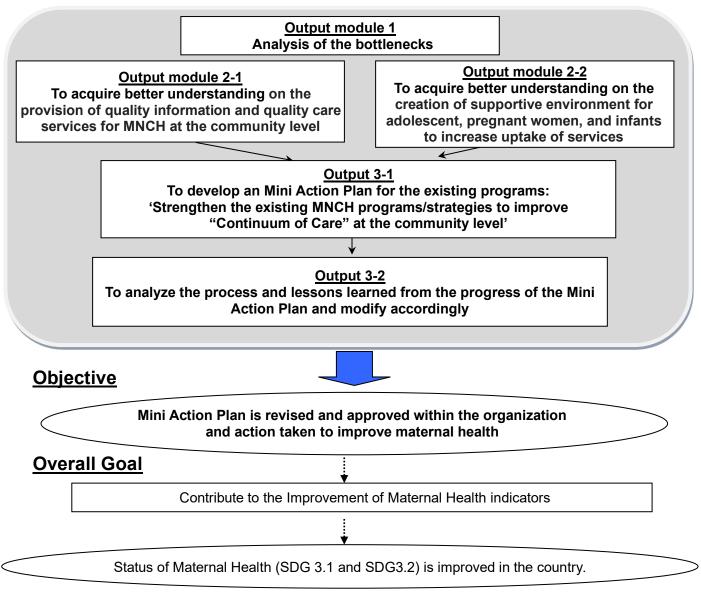
1. Certificate

Participants who have successfully completed the online course will be awarded a certificate by JICA.

* It is required for participants to fully participate in the program.

Improvement of Maternal Health

[Online Program: Output module 2] [Face-to-face Program (in Japan): Output module 1, 2 & 3] [Online Follow-up Program: Output module 3-2]



Implementation of the Mini Action Plan to contribute to the improvement of maternal health status of the country. SDGs Goal 3 target indicators:

3.1: By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births.

3.2: By 2030, end preventable deaths of newborns and children under 5 years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live births and under-5 mortality to at least as low as 25 per 1,000 live births.

Annex 2

LIST OF IPPF MEMBER ASSOCIATIONS/ Supporting Organizations

International Planned Parenthood Federation (IPPF: headquarter in London) is a federation that works with 120 autonomous members with a presence in over 146 countries which deliver sexual and reproductive health services and advocacy. (Source: IPPF List of Member Associations as of January 2023)

(IPPF Member Associations)

Angola None

Comoros

Association Comorienne pour le Bien-Etre de la Famille (ASCOBEF) Address: 524 Moroni, Comoros Tel: +269 773 53 01/+269 773 87 72 E-mail: <u>ascobef94@gmail.com</u> Facebook: https://www.facebook.com/ASCOBEF/

Indonesia

Indonesian Planned Parenthood Association Address: JI. Hang Jebat III/F Kebayoran Baru Jakarta Selatan 12220 Tel: +62 21 7253172 E-mail: <u>ippa@pkbi.or.id</u> Website URL: <u>http://pkbi.or.id/ https://twitter.com/suarapkbi</u>

Laos

The promotion of family health association of Lao PDR (PFHA) Address: House no 180/16 Thatluangneua village, Saysettha district, Vientiane Capital, Lao PDR Tel: + 856 21 413261 E-mail: info@pfhalaos.org / pfha@outlook.com Website: http://www.pfhalaos.org/en/main/ Facebook: https://www.facebook.com/PFHA-Promotion-of-Family-Health-Association-1268419219978897

Pakistan

Rahnuma-Family Planning Association of Pakistan(R-FPAP) Address: 3 - A Temple Road, Lahore-54000, Pakistan Tel: +92 42 111 22 3366 Fax: +92 42 3636 8692 E-mail: info@fpapak.org Website:http:www.fpapak.org

Papua New Guinea

Papua New Guinea Family Health Association Address: P.O.BOX 6525 BOROKO,NCD,PORT PNG 111 Port Moresby, Papua New Guinea Tel: +675 7365 7028 E-mail: <u>mlohia48@gmail.com</u> Facebook: <u>https://www.facebook.com/PNGFHA</u>

Sierra Leone

Planned Parenthood Association of Sierra Leone (PPASL) Address: 1 Richard Street, Off Jones Street Tel: +232 76 607817 / +232 76 477250/ +232 79 446 564/ +232 77 644477 E-Mail: <u>ppasl@ppasl.org</u> / <u>dwilliams@ppa-sl.org</u> Website URL: <u>https://ppa-sl.org/</u> Facebook: <u>https://www.facebook.com/groups/454639337890032/</u>

Tajikistan

<u>The Tajikistan Family Planning Association (TFPA)</u> Address: Rudaki avenue 10, 7th floor Dushanbe, Tajikistan Tel: +992 44 601-1771 E-Mail: <u>office.tfpa@gmail.com</u> Website : http://tfpa.tj/en/ Facebook: https://www.facebook.com/TFPA.TAJIKISTAN/

Tanzania

<u>Chama cha Uzazi na Malezi Bora Tanzania (UMATI)</u> Physical Address: UMATI Head Quarter Upanga - Maliki Street P.O.Box 1372 Dar-es-salaam, Tanzania Tel: +25522-2150156 / +255-22-2152479 E-mail: <u>infor@umati.or.tz</u> Website: <u>https://umati.or.tz/</u> Facebook: <u>https://www.facebook.com/profile.php?id=100067579410316</u>

Timor-Leste

None

Annex 3

For all candidates: to be submitted together with the Application

Questionnaire (Internet learning environment)

Name:			
Country:			

Please answer the following question. If you need any assistance for preparation of the learning environment, please consult with the JICA office. <u>These answers do not affect your selection.</u>

1. Device & Network (Please describe your device and network.)

(1) Computer (not tablet or smartphone)

□Yes, I have the computer

□No, I do not have the computer

- (2) Operating System: ex) Windows10, MacOS X, MacOS 10.9.X, etc.
- (

(3) Chrome Browser:

 \Box Yes, I use Chrome

□No, I do not use Chrome

(4) Do you have stable access to internet (including the use of YouTube clip over 30 min)? Sample: Maternal and Child Health Handbook to the World(Digest): <u>https://www.youtube.com/watch?v=NpJWREhyYjl&t=0s</u> [JICA-Net Library]

)

 \Box Yes, I do (where: at office \Box / at home)

□No, I do not

(5) Have you ever used zoom before?

 \Box Yes, I have

□No, I have not

2. WhatsApp account

(1) Do you have a WhatsApp account? \Box Yes \Box No

 \rightarrow If yes, please indicate your WhatsApp number.

(WhatsApp mobile number:

For Your Reference

JICA and Capacity Development

Technical cooperation is people-to-people cooperation that supports partner countries in enhancing their comprehensive capacities to address development challenges by their own efforts. Instead of applying Japanese technology per se to partner countries, JICA's technical cooperation provides solutions that best fit their needs by working with people living there. In the process, consideration is given to factors such as their regional characteristics, historical background, and languages. JICA does not limit its technical cooperation to human resources development; it offers multi-tiered assistance that also involves organizational strengthening, policy formulation, and institution building.

Implementation methods of JICA's technical cooperation can be divided into two approaches. One is overseas cooperation by dispatching experts and volunteers in various development sectors to partner countries; the other is domestic cooperation by inviting participants from developing countries to Japan. The latter method is the Knowledge Co-Creation Program, formerly called Training Program, and it is one of the core programs carried out in Japan. By inviting officials from partner countries and with cooperation from domestic partners, the Knowledge Co-Creation Program provides technical knowledge and practical solutions for development issues in participating countries.

The Knowledge Co-Creation Program (Group & Region Focus) has long occupied an important place in JICA operations. About 400 pre-organized courses cover a wide range of professional fields, ranging from education, health, infrastructure, energy, trade and finance, to agriculture, rural development, gender mainstreaming, and environmental protection. A variety of programs is being customized by the different target organizations to address the specific needs, such as policy-making organizations, service provision organizations, as well as research and academic institutions. Some programs are organized to target a certain group of countries with similar developmental challenges.

Japanese Development Experience

Japan, as the first non-Western nation to become a developed country, built itself into a country that is free, peaceful, prosperous and democratic while preserving its tradition. Japan will serve as one of the best examples for our partner countries to follow in their own development.

Experience in industry, health, education, etc., most of the know-how that has enabled Japan to become what it is today has emanated from a process of adoption and adaptation, of course, has been accompanied by countless failures and errors behind the transition process .

Through Japan's progressive adaptation and application of systems, methods and technologies from the West in a way that is suited to its own circumstances, Japan has developed a storehouse of knowledge not found elsewhere from unique systems of organization, administration and personnel management to such social systems as the livelihood improvement approach and governmental organization. It is not easy to apply such experiences to other countries where the circumstances differ, but the experiences can provide ideas and clues useful when devising measures to solve problems.

JICA, therefore, would like to invite as many leaders of partner countries as possible to come and visit us to interact with the Japanese people, and witness the advantages as well as the disadvantages of Japanese systems, exchange good practices and sharing the lessons learned among the participants so that integration of their findings might help them reach their developmental objectives.



Contact Information for Inquiries For inquiries and further information, please contact the JICA overseas office or the Embassy of Japan. Further, address correspondence to:

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