



**Japanese Organization for
International Cooperation in Family Planning (JOICFP)**

Annual Report 2020

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A women visiting
health center for
her health check-up



JOICFP ANNUAL REPORT 2020

JFY2020 (April 2020-March 2021)



Reflections on JFY2020 (April 2020-March 2021)

For over a year, COVID-19 has seriously and globally affected the sexual reproductive health and rights (SRHR) of women and girls, who have been forced into a particularly difficult situation. With vast amounts of money being invested in the fight against the pandemic, the SRHR issue has become less of a priority and women's right to self-determination is under threat.

In developed countries, birth rates are reported to have fallen, whereas in some low- and middle-income countries, survey results have revealed that the number of maternal deaths and stillbirths have increased. According to the United Nations Population Fund (UNFPA), the family planning needs of approximately 12 million women in low- and middle-income countries have not been met, resulting in an estimated 1.4 million unintended pregnancies. Dubbed the "shadow pandemic," the sexual exploitation of and violence against women and girls, as well as harmful practices such as child marriage and female genital mutilation, which were once on the decline due to international efforts, have begun to increase again. In Japan, the number of domestic and sexual violence-related consultations at the one-stop support center have increased, and there is growing concern about current trends in unexpected and teenage pregnancies.

Throughout the COVID-19 pandemic, JOICFP never stopped carrying out its activities, both in Japan and abroad. In collaboration with domestic and international partners, we continue to operate our SRHR programs in the relevant communities, as well as advocate the promotion of gender quality and empowerment of women and girls with the involvement of younger generations. We are most grateful for the support and encouragement granted by individual supporters, like-minded private companies, local and international agencies, global foundations, and so on, that have been the source of our strength this past year.

2020 HIGHLIGHTS

Continued Support with a New Approach

Despite the challenges presented by the COVID-19 crisis, JOICFP has been unwavering in its stance to continue supporting women and girls, and pregnant and nursing mothers. We actively communicated online with international staff stationed in countries/regions where we at Japan headquarters were unable to travel to, and continued to provide SRH support remotely. In Japan, we also extended our support for women and mothers in the Tohoku region, where there was a greater need for assistance.



"My health is my right" (Ma santé, c'est mon droit) A Rights-based Project Launched in Burkina Faso

In collaboration with the UNFPA Burkina Faso, KIMI Foundation, and ABBEF (L'Association Burkinabè pour le Bien-Être Familial/Burkina Faso Association for Family Welfare / a member association of International Planned Parenthood Federation (IPPF)), JOICFP launched a project to support adolescents and young people in enhancing their capacity to exercise their sexual and reproductive health rights. The project has been implemented based on the concept that ensuring the understanding that each adolescent and youth has a right to make decisions about their bodies and how they live their lives.



Mayumi Katsube
Executive Director, JOICFP

SUSTAINABLE DEVELOPMENT GOALS



The pandemic has significantly slowed the progress of the Sustainable Development Goals (SDGs). To build back better, the global community must remember its promise to "Leave No One Behind," and JOICFP will continue its efforts in preventing women and girls from being deprived of their right to self-determination and risking their health and lives. We will draw from the lessons of the pandemic and continue to work towards a future where SRHR can be enjoyed by all.



Giving Youth a Voice on Gender Equality

The social networking campaign was initiated by Japan's youth with the aim of boosting public feedback in the national consultation on updating the government's 5-year national strategy on Gender Equality (Fifth Basic Plan for Gender Equality). It generated a huge response, with the opinions of over 1,000 young people collected from all over the country. JOICFP supported the youth to prepare a "Youth Position Paper," which was presented to and discussed with the then Minister of Gender Equality, Seiko Hashimoto. As a result of the youth paper, two new policies were introduced in the updated strategy.

WHY? Why do you support women?

295,000 women

This is the number of women who die due to pregnancy, childbirth, or abortion every year (2017 estimate)*. That's more than 800 women per day.

JOICFP works to protect the lives and health of women around the world because their lives and health are threatened by disparities, especially in developing countries.

*WHO et al. "Trends in Maternal Mortality: 2000-2017"



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Where are you working? WHERE?



WHAT? What are you working on?

Number of projects : 16

Focusing on maternal and child health, we implement projects that enable people to take initiatives in their communities to protect their health. We also supply health facilities with the medical equipment they need.

Donations of goods : 722,006 items

(including recycled clothing, children's shoes, and reconditioned bicycles)

We also donate used school bags, as well as other items donated by private companies.





Promotion of Women's Health throughout the Life Cycle at One Stop Service Site in Zambia

In 2020, JOICFP continued community health activities while taking preventive measures against COVID-19. This included awareness-raising and educational activities through training human resources such as health staff, Safe Motherhood Action Group members (SMAGs), and Youth Peer Educators (PEs), improving the management and environment for quality health services at health facilities through follow-up of 5S* training, and "Mama-Papa classes" for promoting male participation. JOICFP further strengthened the local community network supporting adolescent health in collaboration with teachers and traditional leaders in the community through the Women's Empowerment Sport Program which had been introduced the previous year.

*5S: Seiri, Seiton, Seisou, Seiketsu, Shukan, meaning "Sort, Set in Order, Shine, Standardize, Sustain."

During the three-year project, two one-stop sites were completed in existing health facilities to provide quality sexual and reproductive health (SRH) services and information at a single location, including a maternity ward, maternity waiting house, youth center, midwife's residence, and water tank. The one-stop sites served as bases for promoting primary health care, stimulating community-driven health promotion activities. Income-generating activities were initiated by the community for sustainable implementation of the project activities, and JOICFP has enhanced community ownership through the sharing of good experiences among communities.



Protecting the Lives of Pregnant Women in Africa: Community-centered sustainable health promotion program

JOICFP trained local community members as SMAGs and Youth PEs. We developed communication strategies in line with community needs based on which health messages and tools were created for enhancing behavioral change in the community. We continued to improve these Behavior Change Communication (BCC) tools through pretesting, and the tools have been finalized. SMAGs and Youth PEs are conducting SRH educational activities using the following BCC tools during group talks, home visits, and Mama-Papa Classes.

- Two types of SRH message pads (SMAGs and Youth PEs)
- Three types of SRH flipcharts (SMAG, Youth PE, Mama-Papa Class (developed in collaboration with other project))
- Two types of T-shirts (SMAG, Local Steering Committee)
- Radio drama script

By using these tools effectively, JOICFP has strengthened community educational activities, and the number of community members who have access to accurate SHR information has increased. Compared to the 2017 baseline survey, the number of women receiving antenatal care four times has increased from 15% to 70% in 2020, women giving birth in a health facility increased from 19.4% to 52.3%, and women receiving a postnatal care after six days increased from 19.1% to 46.2%.



Community health volunteers (Maternal Child Health Promoters and Youth PEs), who have been trained in the project area, conduct home visits and group sessions where they engage in community health education activities and make health facility referrals as necessary. Based on a Social Behavior Change Communication (SBCC) strategy developed by the stakeholders, health education content was reviewed and SBCC tools were created for activities in JFY 2020. Film showings—an example of good practices in other countries—have been held as a community health education activity. Remote refresher training sessions for health care workers were conducted by Japanese experts to improve the quality of health services, including customer care and 5S (a workplace organization method). Furthermore, Community Health Management Committees have been activated to develop action plans to address challenges in health service uptake and review the plans quarterly to improve people's access to health services. A new health facility has also been established, making it easier for local people to access quality health services.



Ghana's first outbreak of COVID-19 was confirmed in March 2020, after which the disease spread throughout the country, particularly in its capital city, Accra. Limited medical resources were directed towards controlling COVID-19, which affected the provision of basic medical services. At the same time, an increasing number of expectant mothers avoided health facilities for ante-natal and post-natal care due to fear of infection of COVID-19, or chose to deliver at home without any assistance of trained health care workers. These choices increase the risk of death for both mother and newborn child. Furthermore, as women stopped going to health facilities to avoid infection, they had less access to family planning services.

In August 2020, with the support of Astellas Global Health Foundation, JOICFP launched a program to strengthen the capacity of communities to continue working throughout the COVID-19 pandemic. The program implemented infection prevention measures and promoted access to sexual and reproductive health and rights (SRHR) information and services for people in the community, including over 42,000 women and girls.

JOICFP conducted training sessions on universal infection prevention measures for approximately 450 community health volunteers, pharmacy staff/over-the-counter medicine (OTCM) sellers, and health care workers, providing necessary supplies such as personal protective equipment (PPE), as well as contraceptives and medicines in short supply. The program secured access of women and girls to safe and quality SRH services and accurate information related to COVID-19 prevention through strengthening community health education activities.



Project for Improving Reproductive Health at Primary and Community Level

This project was a community-wide effort to provide better quality reproductive health services in Myanmar's rural areas, with a focus on women (especially during pregnancy, delivery and post-delivery period) and children. It was concluded in December 2020 after three years and four months of operation. With the spread of COVID-19 during the project's final year, many unforeseeable things happened: Japanese staff were unable to travel to the project site, there were limits on the number of participants in activities such as trainings, workshops and meetings, and we took the work online. Despite this, JOICFP was able to successfully complete the activities planned for the project's last year by changing the way we did things.

Health staff were trained in team-building and leadership skills needed to lead future health activities in the community. Exhibitions were held to share the outcomes of Maternal and Child Health (MCH) promoters' activities, which are carried out by volunteers serving to bridge the gap between health staff and members of the community. Also, through the cycle of planning, implementation, monitoring, and experience sharing in community-based participatory health planning activities, new small projects emerged such as community-initiated support for emergency transportation and mobile clinic operation services. These good practices were compiled into a document that was widely shared with those concerned.



Overcoming Socio-cultural and Decision-making Barriers to Family Planning and Maternal Health Services in Rural Areas of Myanmar

The local staff movement within Myanmar was restricted due to COVID-19, which made it difficult to proceed with community activities as planned. However, we have been preparing to resume activities when the COVID-19 crisis ends by increasing email and phone communication frequency, keeping in close contact with the Ministry of Health and Sports and other local project officials, and holding online meetings to discuss our activities and how to proceed.

Aside from completing the manuals, handbooks, and implementation guides necessary for us to introduce the voucher system, we were able to establish criteria for monitoring activity outcomes and develop a system to collect necessary data. We also developed the training modules needed to create educational materials to use in community activities. We have provided protective equipment such as masks and disinfectants to prevent infection among medical personnel such as midwives, as well as MCH promoters trained in FY 2019. This has allowed us to continue activities in the community such as health education even during the COVID-19 crisis.



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Project for Rural Health Development through Strengthening Basic Health Services

In addition to pregnancy and childbirth-related diseases and deaths, the number of non-communicable diseases (NCDs) such as diabetes and hypertension has been increasing in Myanmar in recent years, such that health facilities at community level must now deal with the prevention and treatment of a variety of diseases. This project aims to establish a system under which people of all ages can access basic health services at a health facility close to them.

In JFY2020, the launch of this project was delayed to the end of July due to COVID-19, and after February 2021, local activities were suspended due to a coup d'etat. During this period, we implemented the project remotely from Japan, carrying out the following activities in preparations to promote community health: listing active health volunteers and mapping their locations, preparing a draft volunteer training plan, developing a draft outline of the members of village health committees and their roles, and collecting and analyzing health education materials.



The Kenyan government has implemented a number of containment policies since its first case of COVID-19 was confirmed in March 2020, and this has affected JOICFP's activities due to restrictions on the number of people to gather and be admitted into health facilities. Community Health Volunteers (CHVs) engaged in Sexual and Reproductive Health (SRH) awareness-raising activities ensured the use of hand sanitizer and masks and transitioned their activities from health education group sessions to focus on home visits instead. As a result, JOICFP was able to disseminate information to over 45,000 people, exceeding last year's results despite this year's restrictions on our activities. These awareness-raising activities were greatly accelerated by the efforts of leaders in the community such as religious leaders who trained as CHVs and youth leader initiatives.



In addition, the Community Health Committee, which had been trained in fundraising, consulted with local government agencies to procure furniture, recreational games, and paint in order to revive the health facility's youth center to serve as a base for youth interaction and for Peer Educators (PEs) to review their communication strategies.



Although restrictions on activities due to the COVID-19 outbreak were limited, JOICFP encouraged CHVs to reduce the risk of infection and disseminate SRH information to the community in a safe manner. With the support of the Niwano Peace Foundation, we provided hand sanitizer and masks to CHVs and PEs working in the project sites, and instructed them on the proper use of these items based on WHO guidelines.

Since communities in the Bahi District are geographically scattered, CHVs continued to focus on conducting awareness-raising activities through home visits, and in JFY2020, were able to disseminate SRH information to over 100,000 people. Health facilities, schools, local administrators, and CHVs worked together to make the project activities more effective, with health care workers collaborating with PEs to conduct health education sessions in schools, and administrative officials in Bahi district regularly attending meetings of CHVs in each area to offer supervision and guidance. In 2020, Bahi District received an award from the President's Office, Regional Administrative Local Government for its tremendous success in improving the health of mothers, children, and youth in the region.



UGANDA

Many medical facilities in Uganda do not have running water due to inadequate infrastructure. JOICFP's project thus aimed to prevent infections without the need for water by installing alcohol disinfectants in clinics to disinfect hands, while at the same time provide safe and high quality sexual and reproductive health (SRH) services by training medical personnel and improving medical facilities.

For our public-private partnership project, we implemented: 1) hygiene and sanitation training, including hygiene management and hand disinfection for health care workers; 2) the installation of alcohol disinfectants in clinics; and 3) training for health care workers on how to improve SRH services. Comprehensive infection prevention measures, including hand sanitization with alcohol disinfectants, were implemented at 36 medical facilities, including 18 RHU (Reproductive Health Uganda: a member association of International Planned Parenthood Association (IPPF)) clinics.

Ninety-two percent of health care workers who participated in health and hygiene training now practice the WHO's "5 Moments for Hand Hygiene." Hand disinfection is also practiced when providing mobile health services to those with limited access to healthcare facilities. In addition, health care workers were provided with standard operating procedures to prevent hospital infections, and during Quality of Care (QOC) training, they learned the essential elements for improving health care service quality and how to establish a referral network of health care facilities.

Although service delivery was delayed for some time with the spread of COVID-19, SRH services were provided to 31,274 people in the first half of 2020. Since the project began, a total of 183,690 people in the target districts have been provided with SRH services, including family planning.



BURKINA FASO

In Burkina Faso, which faces issues such as early pregnancy, child marriage, and female genital mutilation (FGM), JOICFP, together with United Nations Population Fund (UNFPA) Burkina Faso and two local NGOs, launched a project aiming to empower young people to understand their SRHR, and to exercise their rights and respect those of others. This project is funded by the Government of Japan. When First Lady of Burkina Faso Madame Sika Kabore, founder and president of the KIMI Foundation—which works towards improving people's health in Burkina Faso—visited Japan in 2018 and 2019, we had the opportunity to introduce JOICFP's work to her, and she said that it could be useful in promoting the health of young people, especially girls, in her country.

The three pillars of the project are: improving access to SRHR information and services, providing quality SRHR services, and creating a supportive and enabling environment to promote SRHR among adolescents. JOICFP has been providing technical assistance to KIMI Foundation and ABBEF (Association Burkinabè pour le Bien-Être Familial, a member association of IPPF), mainly in the areas of social behavior change communication and monitoring and evaluation. We had to be creative amidst the COVID-19 pandemic to be able to organize communication strategy workshops to develop plans for strategic and effective implementation of sensitization activities and family life education aimed at behavioral change. We developed a French version of the modules for communication strategy development, obstacle-based message creation and communication action plan development, and 12 facilitators were trained online so that the workshops could be conducted without dispatching JOICFP staff from Tokyo. We also developed monitoring tools to keep track of the progress of and changes in our activities.

GABON

UNFPA Gabon's project targets not only adolescent girls, but also boys, parents, and community leaders in delivering messages to prevent early pregnancies. One in three teenage girls in Gabon experiences pregnancy, leading to a high maternal mortality rate. Although the new version of Civil Code banning marriage under the age of 18 was enacted in 2019 as part of a ban on child abuse, the importance of these efforts has yet to be sensitized at the community level. Community leaders need to fully understand the law and take concrete actions in their communities accordingly. With some parents opposed to comprehensive sexual education in schools, parents need to better understand its importance. Among boys, a greater awareness of gender stereotypes is needed.

To conduct its activities in Gabon during the COVID-19 pandemic, JOICFP, together with the UNFPA Gabon office, conducted remote training for officers in leadership roles in staff capacity building within the Ministries of Health and Education and provincial partner agencies on how to facilitate communication strategy development. We later provided technical advice at communication strategy development workshops held in two target provinces. A total of 50 participants from organizations, schools, and other institutions working on SRHR with adolescents, participated to create strategies on how to effectively communicate messages to encourage behavioral change in their communities. This project is supported by the Government of Japan.

NEPAL

Gender-based discrimination and violence still persist in Nepal. Discussing sex is taboo, resulting in insufficient understanding of sexual and reproductive health and rights (SRHR). The trafficking of women also continues. For the Nepal project, JOICFP conducted comprehensive sex education classes through Peer Educators (PEs) in three locations: Kathmandu Basin and Kavre District, where the devastating impact of the 2015 Nepal earthquake continues to create hardship; and Makwanpur District, where, in addition to the earthquake's aftereffects, trafficking is common due to its proximity to the Indian border. We provided comprehensive sex education to a total of 10,889 young people, including 6,548 students in schools and 4,341 youths in other locations such as youth centers.

PEs took advantage of International Youth Day to organize SRHR-related skits and flash mobs online. We also conducted make-up lessons in tandem with comprehensive sex education sessions to attract more participation from women. Our goal was to empower women both physically and mentally by creating opportunities for them to gain self-confidence and a positive outlook on being a woman.



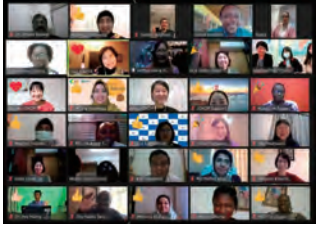
Human Resource Development

Since its foundation, JOICFP has been focused on and devoted to the capacity building of human resources in the field of sexual and reproductive health (SRH). In JFY2020, JOICFP was able to impact a total of 2,251 people in the field of RMNCAH (Reproductive, Maternal, Newborn, Child and Adolescent Health), aligning with the global agenda of Sustainable Development Goals (SDGs) 3 and 5.

Six hundred and ninety-three (693) participants from 30 countries participated in a total of 21 training sessions/programs conducted for national or local government officials and private sector administrators from developing countries. JOICFP provided input on issues such as community voluntary health promotion activities, outreach MNCH services, and the development of effective communication strategies, all related to the promotion of sexual and reproductive health and rights (SRHR).

A total of 1,558 people (Japanese nationals) were reached through 25 training sessions/programs conducted for high schools, universities and local authorities. JOICFP provided information on global issues related to SRHR as well as domestic issues, to promote increased awareness of these on a local level.

Due to the Covid-19 pandemic, all sessions/programs were conducted either online or through a hybrid system (both online and on-site).



Advocacy

JOICFP advocates the advancement of SRHR, gender equality and women's empowerment both in Japan and abroad. As an international collaborative partner and the Tokyo liaison office for International Planned Parenthood Federation (IPPF), an international NGO promoting SRHR and gender equality, we push the Japanese government to fulfill its commitment to increase universal access and financial contribution to SRHR in cooperation with IPPF.



JOICFP continues to play a main role in Japanese civil society networks. As a co-chair of the Gender Unit of the Japan Civil Society Network on SDGs, JOICFP organized a webinar to call for more participation in the national consultation process of updating the 5-year national strategy on gender equality. As a result of JOICFP's efforts, the total number of comments submitted online increased by about 2,000 messages compared to the previous consultation. The Japan CSO Network on Global Health, which JOICFP has served as secretariat for since 1994, marked its 150th dialogue with the Ministry of Foreign Affairs of Japan (MOFA). After JOICFP submitted a request for the Japanese Government to support SRHR during this dialogue, the Government signed an international joint press statement entitled "Protecting Sexual and Reproductive Health and Rights and Promoting Gender-responsiveness in the COVID-19 crisis".

Advocating for gender equality with the youth

In FY2020, we collaborated with young people on advocacy activities. With the aim of reflecting the voices of youth in updating Japan's 5-year national strategy on gender equality, JOICFP launched the "#男女共同参画ってなんですか" (or "#What does Gender Equality mean to you?") project and supported youth advocacy. Young female students and workers in their twenties gathered online to hone policy making skills among the youth and amplify their voices in policy dialogue about gender equality in Japan. The project involved over 600 young men and women, mainly participants of youth-led online events held almost weekly (mostly by Instagram live sessions). The campaign's SNS accounts gained more than 1,600 followers. The team successfully gathered more than a thousand comments from the youth within a month and a half. Campaign members met Seiko Hashimoto, then Minister of State for Gender Equality, and gave these comments to her directly. As a result of this youth-led project, the following policy changes were achieved: a) Increased access to emergency contraception at drugstores and b) Protective measures for job-hunting students who are targets of sexual harassment at job interviews.



AFGHANISTAN

In the province of Nangarhar, one of JOICFP's project areas, many women have to cover their entire body to hide their skin from men outside their families. Some avoid having their blood pressure taken by male doctors, don't reveal their faces, or don't go to clinics at all. To remedy this, JOICFP supports an Afghan NGO United Medical Center for Afghans / Rehabilitation Program for Afghanistan (UMCA/PRA)-operated Community Based Health Care (CBHC) clinic, which has a female doctor and staff to provide health and medical services exclusively for women and children. In addition to ensuring a safe and secure environment for women to receive medical care, the clinic provides services such as prenatal and postnatal checkups, immunizations for newborns and expectant mothers, and family planning services.



Testimony of a woman who visited the clinic (age 24)

I have four children. My husband developed symptoms of the coronavirus infection and was hospitalized for a week. After that, my children and I also fell ill, but we couldn't afford treatment. We then heard about the CBHC Clinic. A female doctor carefully examined us and determined that our illness was throat related. She prescribed medicine for us, and we are feeling much better now. I'm very grateful to the clinic staff and everyone supporting us in Japan.

School Bag

Local schools were closed for a long time when JFY2020 started, due to COVID-19, so our distribution of school bags was postponed. Taking the necessary precautions to prevent infection, JOICFP and UMCA/PRA distributed school bags, school supplies, and health education materials immediately after schools reopened.

The militant Islamic State (IS) and other militant groups have been gaining power in recent years in Nangarhar Province, where we have been donating school bags from Japan since 2004. In a district, where JOICFP operates the project and which was under IS occupation from 2016 until it was liberated in 2019, schools and mosques were destroyed and many people lost their lives. After IS withdrew, JOICFP supported the reopened school by sending school bags and school supplies from Japan, and communicating this message to the children there: "Don't give in to terrorism and keep on learning."



White Ribbon Run 2021, a Hybrid Event Healthy Women, Healthy World.

Held annually on March 8, International Women's day, the White Ribbon Run aims to foster a movement to support women's health. This was the event's sixth year. In JFY 2020, JOICFP started to open registration for local running communities ("runners' bases") nationwide in August, and after setting these up, invited the general public to register in November.

Amidst the COVID-19 crisis, we received over 3,000 entries as we continued to convey the joy of running and how it can improve people's health and fitness. Due to the COVID-19 situation, many potential participants gave up on entering the event, so we introduced a new program called "T-shirts for Charity" starting February 1, 2021, mainly to allow such people to buy the official event T-shirt (not usually for sale) and then donate these proceeds to JOICFP projects in developing countries. JOICFP will deliver support to women in Zambia and Afghanistan using the proceeds from both the event's entry fees and T-shirt program.



Funds will be used for activities to deliver SRH services to women, which are often neglected during the COVID-19 crisis.

JOICFP Ambassador AI TOMINAGA

JOICFP ambassadors are public relations leaders tasked with communicating the status of women's health around the world and what JOICFP is doing to address gender issues. Ai Tominaga became a JOICFP ambassador in 2011, and through mass media, events, and social media, actively shares her experiences as a JOICFP member, including project site visits, international conferences, and briefings provided for JOICFP supporters.

About Ai Tominaga

Ai Tominaga made her debut at 17 years old during New York Fashion Week, and rapidly acquired a great reputation in the fashion world. She continues to work worldwide as a top model, while being actively involved in a variety of other fields, including television, radio, event appearances, and acting. As a Japanese supermodel, her career is unique and continues to expand, including significant charity and social action work and efforts to promote traditional Japanese culture to the world and to new generations in Japan. In addition to being JOICFP's Ambassador, she is the Ethical Lifestyle SDGs Ambassador for Japan's Consumer Affairs Agency.

Photo published in AERA for International Women's Day White Ribbon Online Festival.



Breakdown of Participants (3,017 in 16 countries)

Participants in Japan:	2,806
Participants overseas:	211 in 15 countries
Total:	3,017

Breakdown of Donation Recipients

Zambia	3,000,000 yen
Afghanistan	2,292,238 yen
Total:	5,292,238 yen



JOICFP Supporters: Companies / Foundations / Organizations

Major donors for JOICFP in JFY 2020

 Takeda Pharmaceutical Company Limited.	 Astellas Global Health Foundation	 UNIQLO CO., LTD.	 FONDATION CHANEL
 MSD K. K.	 Sogo & Seibu Co., Ltd.	 Kuraray Foundation	 produced by SARAYA Saraya Co., Ltd.
 The Nippon Foundation	 Ridgelinez Limited	 LINK THEORY JAPAN CO., LTD.	 LOTTE CO., LTD.
 Japanese Electrical Electronic & Information Union (JEIU)	 JAPAN POST BANK Co., Ltd.	 Virina Japan Inc.	 INSOU HOLDINGS Co., Ltd.
 三菱UFJ銀行 MUFG Bank, Ltd.	 Natural Science Co.,Ltd.	 The Federation of Electric Power Related Industry Worker's Unions of Japan	 FMG & MISSION CO., LTD.
 Defactostandard.Ltd.	 大衛株式会社 Daiei Co., Ltd.	 A brand of FCA FCA Japan Ltd.	 Nippon Yusen Kaisha

Our History

Founded in 1968, JOICFP marked its 50th anniversary in 2018. Over the past 50 years, JOICFP's international projects have spread to 36 countries in Asia, Africa, and Latin America, where community people remain central to all efforts.



By the middle of the 1970's, JOICFP started its technical cooperation with International Planned Parenthood Federation (IPPF) member associations (MAs) in Asia. JOICFP implemented family planning projects integrated with maternal and child health (MCH) and public health promotion based on Japanese experiences. The collaboration in promoting family planning and MCH with local partners in African countries started in the 1980s.



The International Conference for Population and Development (ICPD) in 1994 was the pivotal threshold for JOICFP to initiate reproductive health projects through Official Development Assistance (ODA). In 1997, JOICFP successfully launched the first RH project funded by Japanese ODA after a couple of years of persistent negotiation and preparation with the Government. Since then, JOICFP has been an essential partner of the Government in the area of Sexual and Reproductive Health and Rights (SRHR), managing many ODA projects.

During the year 2000-2019, JOICFP implemented a total of 134 projects, including those ongoing. Among those 134 projects, over 90% were national-level projects in 25 countries from Asia, Africa, and Latin America regions. The remaining projects were at the regional level, with several countries participating.

JOICFP's in-kind donations have also been opportunities to connect Japanese citizens with vulnerable populations overseas. Commodities such as reconditioned bicycles were sent to over 80 countries since the 1970s, and school bags used by primary school students were donated from families in Japan to Afghanistan since 2004.

After the Great East Japan Earthquake Disaster in 2011, JOICFP expanded the scope of its programs from international to domestic. From March 2011 to March 2016, JOICFP conducted aid activities for women and particularly mothers who survived the earthquake and tsunami. Since then, JOICFP provides disaster relief and support to women in Japan and abroad, such as Aceh, Indonesia, Tacloban, the Philippines, and Kathmandu, Nepal.

As the IPPF Tokyo Liaison Office, JOICFP has been providing technical and logistics support to IPPF. To further strengthen the relationship, JOICFP became IPPF's International Collaborative Partner in May 2020.

Awards & Certificates

JOICFP was granted the Foreign Minister's Award in 1991 and the United Nation's Population Award in 2001. In 2017 JOICFP received the first "Japan Sustainable Development Goals (SDGs) Partnership Award" by the Prime Minister of Japan and his Cabinet. Among the awardees, JOICFP was the only NGO working in overseas cooperation. JOICFP also received a Letter of Appreciation from JICA (Japan International Cooperation Agency) President in 1990, and from the Commissioner of the Japan Sports Agency in 2019. JOICFP has been holding the UN/ECOSOC Consultative Status since 2000.



A Legacy of Founder, Chojiro Kunii

JOICFP evolved out of the "Humanistic Family Planning" initiative which made its international debut in the 1970s under JOICFP Founder Chojiro Kunii. A progressive people-centered approach that focused on individual well-being, Kunii's strategy stood in contrast to the then-popular top-down population policy based on a "macro" perspective of population issues. JOICFP's consistent focus on the individual developed out of this far-sighted reproductive health orientation toward population issues.



Triggering a movement

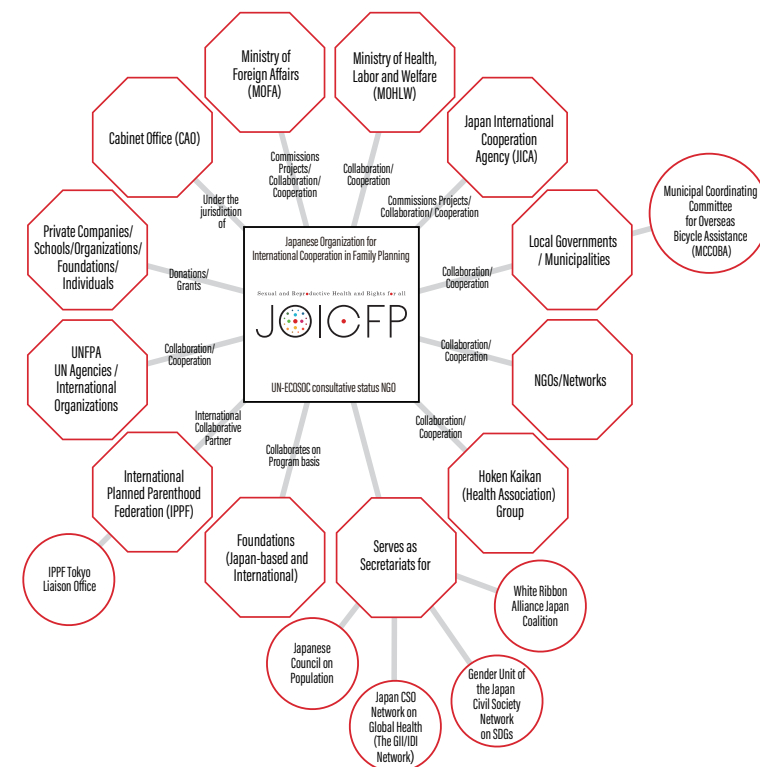
To promote family planning, JOICFP Founder Chojiro Kunii integrated family planning services with parasite control. The immediate and obvious health benefits of parasite elimination made it ideal as an education tool and entry point into communities for initiating family planning movements. Expanding upon this model, JOICFP sought and used other "triggers" to motivate residents as it applied the "Integrated Approach" in Asia, Africa, and Latin America.

A preventive health collaboration

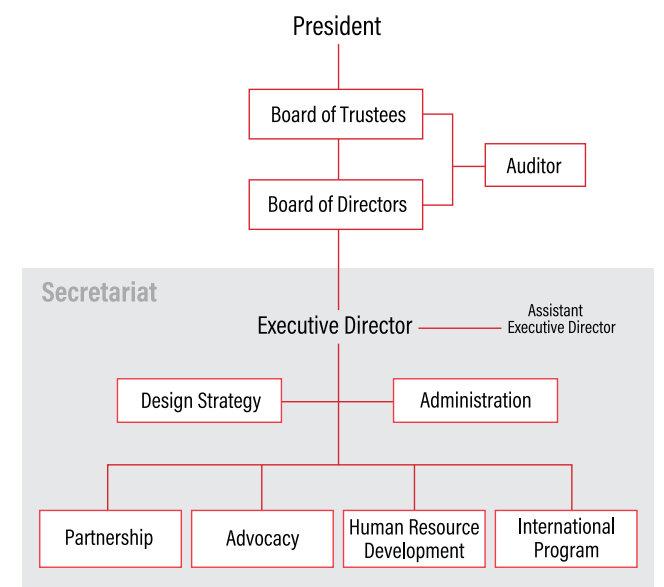
Health personnel and community volunteers vigorously promoted family planning as part of a community-based movement in post-war Japan. Its goal was not population control but rather preventive health and empowerment of women, fueled by the need to prevent unintended pregnancies and unsafe abortions. The movement was implemented alongside stakeholders within the community, reflecting the common goal to improve the well-being of all citizens. Experiences, insights, and cautionary tales gained through the movement are the essence of JOICFP's community participatory approach used today.

Collaboration with other Organizations

Collaboration with domestic and international Organizations



Organization Chart



Financial Report : Japan Fiscal Year 2020

JOICFP Balance Sheet for the Fiscal Year 2020 as at 31 March 2021

Account item	2020	2019	Variance
I Assets			
1. Current assets			
Cash/Bank deposit	240,337,974	275,389,338	△35,051,364
Accounts receivable	43,195,729	24,561,653	18,634,076
Suspense payments	956,000	100,000	856,000
Total current assets	284,489,703	300,050,991	△15,561,288
2. Fixed assets			
(1) Basic assets			
Time deposit	50,000,000	50,000,000	0
(2) Designated assets			
Designated fund	50,000,000	50,000,000	0
Accrued retirement benefits deposited	18,681,789	24,112,641	△5,430,852
	68,681,789	74,112,641	△5,430,852
(3) Other fixed assets			
Buildings and accompanying facilities	501,834	575,701	△73,867
Fixtures	592,229	916,522	△324,293
Telephone subscription right	648,000	648,000	0
Lease deposit	3,762,000	3,762,000	0
Total other fixed assets	5,504,063	5,902,223	△398,160
Total fixed assets	124,185,852	130,014,864	△5,829,012
Total assets	408,675,555	430,065,855	△21,390,300
II Liabilities			
1. Current liabilities			
Deposits received	847,723	898,088	△50,365
Accounts payable	11,386,354	8,927,244	2,459,110
Advances received	123,986,704	154,391,510	△30,404,806
Suspense receipt	0	0	0
Reserve for accrued bonuses	13,023,000	14,726,000	△1,703,000
Total current liabilities	149,243,781	178,942,842	△29,699,061
2. Fixed liabilities			
Accrued retirement benefits payable	25,868,230	42,503,575	△16,635,345
Total fixed liabilities	25,868,230	42,503,575	△16,635,345
Total liabilities	175,112,011	221,446,417	△46,334,406
III Net assets			
1. Designated net assets			
Contribution	0	0	0
Sub-total	0	0	0
2. General net assets			
(Transferred to basic assets)	(50,000,000)	(50,000,000)	(0)
Total net assets	233,563,544	208,619,438	24,944,106
Total liabilities and net assets	408,675,555	430,065,855	△21,390,300

JOICFP Net Assets Increase and Decrease Statement for the Fiscal Year 2020

Account item	2020	2019	Variance
I. Variance in general net assets			
1. Variance of ordinary revenues and expenditure			
(1) Ordinary revenues			
Basic assets interest	6,513	3,500	3,013
Received membership fee	8,095,000	7,641,000	454,000
Operating income	324,204,922	428,451,220	△104,246,298
Ministry of Foreign Affairs fund	34,655,755	55,269,119	△20,613,364
JICA fund	71,369,042	110,296,969	△38,927,927
IPPF fund	44,000,000	49,500,000	△5,500,000
UNFPA fund	6,701,613	0	6,701,613
Public organization fund	157,692,911	196,148,495	△38,455,584
Collaborative support fund	6,991,823	10,968,648	△3,976,825
Proceeds from sales of charity items	2,793,778	6,267,989	△3,474,211
Contribution received	129,577,148	332,700,746	△203,123,598
Miscellaneous income	2,562,164	2,091,607	470,557
Total ordinary revenues	464,445,747	770,888,073	△306,442,326
(2) Ordinary expenditure			
Operating expenses	403,959,164	702,584,045	△298,624,881
Personnel expenses	123,576,817	125,050,461	△1,473,644
Operation	21,705,810	24,308,018	△2,602,208
Transfer to other account	△30,090,087	△32,899,414	2,809,327
Ministry of Foreign Affairs fund	28,336,920	47,437,454	△19,100,534
JICA fund	10,625,255	51,866,395	△41,241,140
IPPF fund	44,000,000	49,500,000	△5,500,000
UNFPA fund	481,784	1,911,981	△1,430,197
Public organization fund	98,051,073	144,331,008	△46,279,935
Collaborative support fund	75,808,480	262,477,415	△186,668,935
Charity items produced	1,802,872	5,463,816	△3,660,944
Fund raising expenses	1,057,690	1,933,800	△876,110
Public relations expenses	4,805,787	6,017,398	△1,211,611
Project promotion expenses	23,796,763	15,185,713	8,611,050
Administration	48,431,470	39,035,874	9,395,596
Personnel cost	38,312,669	27,961,449	10,351,220
Secretarial cost	10,118,801	11,074,425	△955,624
Total ordinary expenditure	452,390,634	741,619,919	△289,229,285
Total variance	12,055,113	29,268,154	△17,213,041
2. Variance in extraordinary revenues and expenditure			
Total extraordinary revenues	16,635,345	0	16,635,345
Total extraordinary expenditure	3,746,352	30,877	3,715,475
Variance in extraordinary revenues and expenditure	12,888,993	△30,877	12,919,870
Variance in general net assets	24,944,106	29,237,277	△4,293,171
Balance of general net assets at beginning of fiscal year	208,619,438	179,382,161	29,237,277
Balance of general net assets at end of fiscal year	233,563,544	208,619,438	24,944,106
II. Variance in designated net assets			
Variance in designated net assets	0	0	0
Balance of designated net assets at beginning of fiscal year	0	0	0
Balance of designated net assets at end of fiscal year	0	0	0
III. Balance of net assets at end of fiscal year	233,563,544	208,619,438	24,944,106