

# Japan's Global Health Policy 2011-2015



Government of Japan

# **1. VISION**

Contributing toward global health is an integral part of Japan's foreign policy strategy. In order to help achieve the Millennium Development Goals (MDGs) through realizing human security, Japan's new policy aims to deliver results effectively and efficiently by addressing bottlenecks impeding progress on the health MDGs.

## **2. GOALS**

Mobilizing US\$ 5 billion over five years, Japan will work to achieve, in cooperation with other development partners, the following objectives by ensuring sustainable health systems strengthening:

- 1) Acceleration of progress towards MDGs 4 and 5 through delivering a more effective package of proven interventions for maternal and newborn survival as well as scaling up high-impact child health intervention. In so doing, Japan will:
  - Save approximately 11.3 million children's lives, including 2.96 million newborns, across partner countries, in cooperation with other donors.
  - Save approximately 680,000 maternal lives across partner countries, in cooperation with other donors.
- 2) Further progress in MDG6 concerning HIV/AIDS, tuberculosis (TB) and malaria through strengthening support for the Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund), including by making further financial contributions to the Global Fund and stepping up complementarity between the Global Fund's activities and Japan's bilateral assistance.
  - Avert approximately 470,000 deaths by AIDS, 990,000 deaths by TB and 3.3 million deaths by malaria across partner countries, in cooperation with other donors.

## **3. NEW APPROACH**

- 1) Japan will implement evidence-based interventions in its assistance centering on health systems strengthening, by mobilizing a strategic mix of bilateral assistance and assistance through multilateral organizations and partnerships.
  - Building strategic partnerships with international and domestic stakeholders including UN agencies, other multilateral organizations,

- NGOs, private-sector entities, and academic institutions.
  - Encouraging country ownership.
  - Securing the necessary resources on health as well as delivering efficient and effective assistance based on Japan's core competencies.
- 2) Japan will fulfill accountability through setting quantified goals and establishing relevant mechanisms for monitoring and evaluation, in line with the principles of the Paris Declaration on Aid Effectiveness and internationally agreed goals.
  - 3) Japan will help strengthen global health architecture through enhancing its own capacity in addressing global health, particularly by developing human resources on policy-making and strengthening communication strategies.
    - Ensuring high levels of expertise and transparency in the process of global health policy formulation.

## **4. ASSISTANCE MEASURES**

Japan will provide health assistance centering on the strengthening of health systems such as the following, based upon the notion of ownership and empowerment of partner countries.

### **MDGs 4 and 5**

Japan will focus on addressing bottlenecks in the strengthening of health systems, and based on a program approach, it will deliver a more effective package of preventive and clinical interventions for maternal and newborn survival at both community and facility levels, create linkages between those communities and facilities by introducing innovative strategies, and scale up high-impact child health interventions.

### **MDG 6**

To halt the spread of HIV/AIDS, TB and malaria as well as to save lives otherwise lost by these infectious diseases, Japan will scale up effective interventions through the Global Fund while promoting an integrated approach of combining the efforts through the Global Fund with health systems strengthening and maternal, newborn and child survival programs utilizing Japan's bilateral assistance.

## **Other Assistance**

Japan will provide active support in response to global public health emergencies and various health crises due to natural disasters and conflicts, thereby contributing to peace-building and community stabilization.

## **5. JAPAN'S POLICY IN DETAIL**

### **MDGs 4 and 5**

Substantial progress has been made in reducing child deaths, with the total number of under-five deaths declining from 12.5 million in 1990 to 8.8 million in 2008. Despite this achievement, many children continue to die within the first month of their birth due to preventable or treatable causes, many countries still have unacceptably high levels of child mortality, and there has been little or no progress in reducing neonatal deaths that account for nearly 40% of child mortality, or 4 million lives per year. Without concerted efforts to save millions of newborns, achieving MDG 4 would be impossible.

While a substantial fall in the mortality rate of children under the age of five has been observed in some developing countries, disparities in the rate of progress, particularly in countries in Sub-Saharan Africa and some parts of Asia, are of great concern, as are disparities within a country. Many women in developing countries are exposed to the risks of unwanted pregnancy, and the fact that they benefit little from family planning can result in maternal deaths. Many pregnant women lose their lives without getting quality preventive and clinical services at the relevant facilities.

Infectious diseases are also bottlenecks for maternal and child health. For instance, preventing mother-to-child transmission of HIV as well as malaria infection, which accounts for the third largest causes of child mortality, must be addressed.

In order to ameliorate the situation, Japan will focus on addressing bottlenecks in the strengthening of health systems and, based on a program approach, it will deliver a more effective package of preventive and clinical interventions for maternal and newborn survival at both community and facility levels, create linkages between those communities and facilities by introducing innovative strategies, and scale up high-impact child health interventions.

## 1) Maternal and Newborn Health

### A) Strengthening community-based preventive and clinical care

While collecting quality data in developing countries on maternal mortality – death resulting from the complications of pregnancy or childbirth – is challenging at the best, current available data do suggest that the vast majority of maternal deaths occur in communities. It is essential to provide timely and adequate preventive and clinical interventions in communities based on the early detection of danger signs and identification of high-risk groups in order to reduce maternal mortality.

Japan will deliver assistance based on a program approach which brings together an effective package of proven preventive and clinical interventions to mothers and newborns at the community level as well as technical assistance to help develop necessary human resources for maternal, newborn and child health. Specific measures may include:

- ✓ Antenatal Care (ANC)+:  
Provision of Antenatal Care (ANC) at least four times, as well as tetanus immunization, intermittent preventive treatment in pregnancy (IPTp), and vitamin A supplementation;
- ✓ Community-Emergency Obstetric Care (C-EmOC)+:  
Strengthen basic and comprehensive obstetric care including the appropriate preventive and clinical care for post-partum hemorrhage, essential newborn care such as temperature maintenance, clean delivery practice and early and exclusive breastfeeding.

### B) Strengthening facility-based preventive and clinical care

The leading causes of maternal mortality in developing countries are hemorrhage, sepsis, hypertension and obstructed labor whereas major causes of neonatal deaths include preterm birth, asphyxia and severe infections such as sepsis and pneumonia. These realities point to the fact that most of these deaths can be prevented by strengthening facility-based preventive and clinical interventions.

Japan will help develop facilities with the capacity to provide emergency obstetric care, and deliver assistance based on a program approach at such facilities including an effective package of proven preventive and clinical interventions. Specific measures may include:

- ✓ Facility-Emergency Obstetric Care (F-EmOC)+:  
Provision of key interventions for post-partum hemorrhage, obstructed labor, maternal sepsis, and neonatal complications.

C) Innovative strategy to create linkages between community- and facility-based care

It is essential to create linkages between communities and facilities by establishing both referral and outreach systems for the continuum of preventive and clinical care in order to achieve MDGs 4 and 5.

Japan will work to realize a high-quality continuum of care through strengthening health systems including referral and outreach systems that would enhance effective coordination between communities and facilities. Japan would also welcome collaboration with the private sector that can bring innovative approaches and input to this effort.

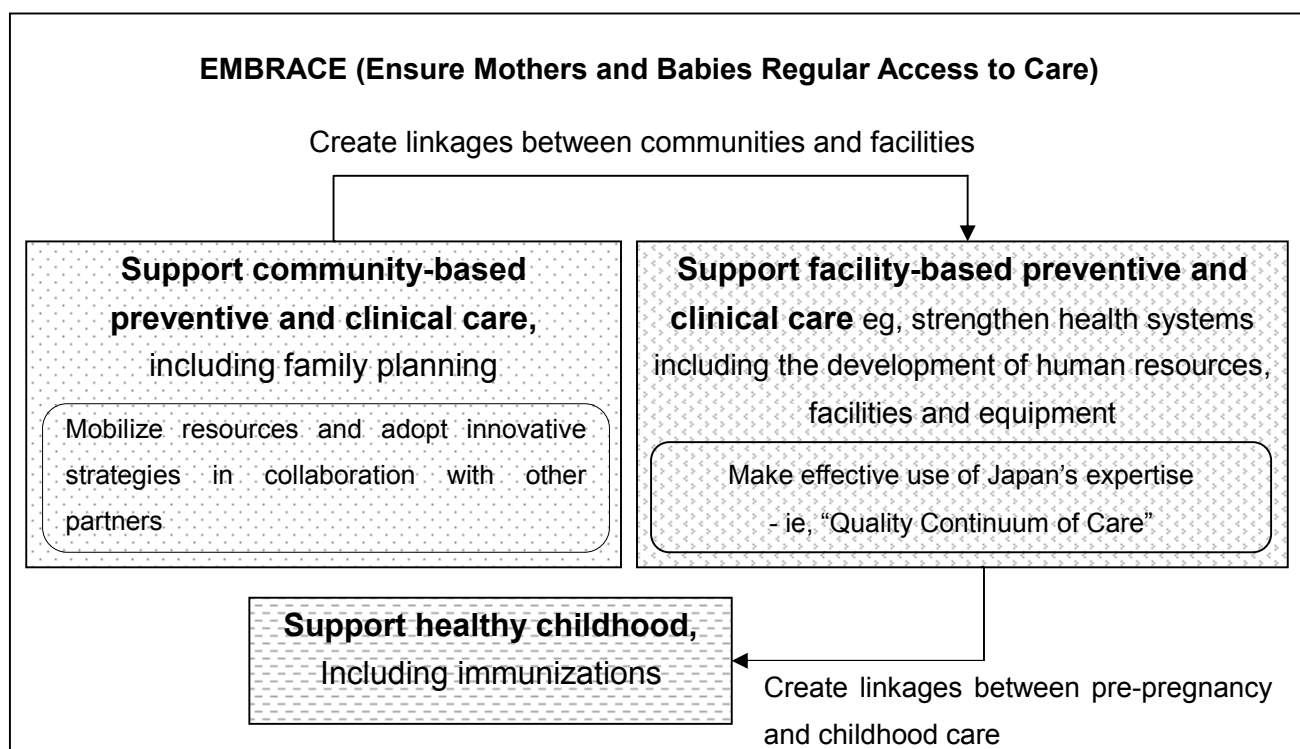
2) Child Health

A) Scaling-up proven health interventions that have been successful particularly at the community level. Specific measures may include:

- ✓ Expanded Program on Immunization (EPI)+:  
Immunization, vitamin A/multivitamin supplementation, Screening for malnutrition
- ✓ Community-Integrated Management of Childhood Illness (C-IMCI)+:  
Promotion of health education at household; exclusive breastfeeding, ORS, zinc, LLINs (Long-Lasting Insecticidal Nets), case management of malaria and pneumonia.

B) Achieving strengthened partnerships with relevant multilateral organizations such as UNICEF and the GAVI Alliance, under which integrated efforts are promoted to achieve synergistic results along with bilateral assistance.





**Box: Ensure Mothers and Babies Regular Access to Care (EMBRACE)**

EMBRACE is a package of effective interventions to save lives of mothers and babies in partnership with all stakeholders, with broad approach, including better infrastructure, safe water and sanitation, and other social developments.



## MDG6

In response to epidemics of HIV/AIDS, tuberculosis and malaria, Japan and others in the international community have increased their assistance by a significant amount. As a result, the international community has succeeded in reducing deaths by AIDS, which peaked in 2004, and the mortality rate from tuberculosis, which peaked in 2002. Deaths due to malaria have also seen a reduction in recent years. Moreover, the international community has saved 5.7 million lives so far through the Global Fund's support for 144 countries. Leading multilateral agencies such as WHO and UNAIDS have successfully contributed to improving the response capacity of developing partners. Nevertheless, 4.5 million lives continue to be lost each year due to HIV/AIDS, tuberculosis and malaria, and there is an urgent need for expanded efforts to address the issue.

The number of people receiving life-saving antiretroviral therapy increased from 0.4 million in 2003 to 5.2 million in 2009. Deaths due to AIDS dropped to 2 million from 2.2 million at their peak in 2004 thanks to various HIV/AIDS interventions. As a consequence, more people are now living with HIV and there is a greater need for treatment and care as well as for more strategic efforts for prevention.

Although the global prevalence of tuberculosis is declining gradually, additional challenges such as multidrug-resistance TB (MDR-TB) as well as HIV and TB co-infection are emerging.

The distribution of insecticide-treated mosquito nets and antimalarial drugs has increased. Yet challenges remain in malaria control, marked by the greater need for artemisinin-based combination therapy (ACT) due to the expansion of drug-resistant malaria, disparities in access to ACT and the fact that malaria is still the third largest cause of child mortality.

In order to realize effective and sustainable implementation, it is critically important that efforts to fight HIV/AIDS, tuberculosis and malaria be promoted as part of an overall and integrated approach together with health systems strengthening to address human resource development, improvement of infrastructure and equipment, supply chain management and enhanced monitoring and evaluation, as well as maternal, newborn and child survival programs.

In order to ameliorate the situation, Japan will contribute to scaling up effective

interventions through the Global Fund, which has an impact on the fight against major infectious diseases, while pursuing synergies between the Global Fund's activities and Japan's bilateral assistance in collaboration with multilateral agencies with high expertise such as WHO and UNAIDS, by taking measures such as the following:

3) Scaling up effective interventions through the Global Fund to halt the spread of HIV/AIDS, TB and malaria as well as to save lives otherwise lost by these infectious diseases.

A) Achieving expanded and sustained access to integrated quality health services including preventive intervention, early detection and treatment, and distribution of therapeutic drugs; promoting a program-based approach of disease control aligned with country-led national health plans; and strengthening administrative capacity and community engagement for these purposes. Specific measures may include:

- ✓ Promotion of disease prevention and treatment; capacity development for prevention campaign, distribution of drugs and medical supplies such as condoms and LLINs; strengthening diagnostic and treatment capacity including VCT (Voluntary Counseling and Testing), DOTS (Directly Observed Treatment, Short-course) and ACT; and supporting the establishment of systems for HIV and TB co-infection control and drug resistance management.
- ✓ Strengthening support for activities by central and local governments as well as civil society and the private sector.
- ✓ Strengthening support for vulnerable groups.

B) Promoting and scaling up integrated efforts together with health systems strengthening including human resource development and improved supply chain management, as well as maternal, newborn and child survival programs including the prevention of mother-to-child transmission of HIV and prevention of malaria infection. Specific measures may include:

- ✓ Promotion of appropriate medical supply management and distribution.
- ✓ Adequate prescription of antimalarial drugs for pregnant women, and ART for preventing mother-to-child transmission of HIV.
- ✓ Enhancement of infectious disease control within the context of continuum of care.

C) Stepping up efforts, in collaboration with other leading agencies such as WHO and UNAIDS, when providing Japan's bilateral assistance, for achieving greater synergies with the Global Fund's activities, with the aim of improving the effectiveness, efficiency and sustainability of assistance. Specific measures may include:

- ✓ Cooperation throughout the process of formulating, implementing, monitoring and evaluating, and reviewing country-led national strategies.
- ✓ Strengthened assistance for improving health service management, as well as testing and diagnosis capacities in remote areas where access to health services is not necessarily guaranteed.
- ✓ Development and improvement of infrastructure including medical facilities.
- ✓ Enhancement of preventive service and clinical care at the community level and establishment of a system of referral to higher facilities.
- ✓ Support for capacity development in conducting household prevalence survey such as for tuberculosis as well as monitoring and evaluation.

## **Assistance to meet other important challenges**

- 4) The recent outbreak of pandemic influenza in 2009 reminded the global community of the importance of preparedness and international collaboration against emerging and reemerging infectious diseases. The number of polio cases across the globe has declined by more than 99 percent since 1988. The recent resurgence of the polio virus in countries that had long been polio-free, however, runs the risk of rendering in vain all the global investment and efforts to date towards the eradication of polio. Japan will provide active support in response to global public health emergencies such as pandemic influenza and polio, and various health crises due to natural disasters and conflicts, thereby contributing to peace-building and community stabilization.
- 5) Globally, over 1 billion people in 149 countries are said to suffer from one or more neglected tropical diseases (NTDs). While most of these diseases can be prevented and eliminated, they continue to be neglected because they are mostly nonlethal and those who suffer tend to be in poor and marginalized communities. It is unacceptable that progress in the research and development (R&D) and distribution of effective diagnostic tools, treatment and drugs should be so slow for such reasons. Japan will continue its efforts to reduce the burden of NTDs and to improve the health of individuals.

## Relevant Approaches

- 6) Social and economic infrastructure development based upon the ownership and empowerment of partner countries is fundamental to the achievement of the health goals. Japan will therefore consider securing resources, including loan assistance to partner countries when feasible and appropriate, working to effectively scale-up health interventions.
- 7) Japan will support the development of policy-oriented human resources in order for the governments of partner countries to formulate and implement evidence-based country-led national health plans based on the best and the most adequate information. Japan will also support the establishment of a network for health systems research and human resource development, particularly in sub-Saharan Africa, with the aim of promoting implementation research for effective and efficient health interventions and tying that research into evidence-based policy making.
- 8) It is essential to bring together a variety of assistance including Japan's own, under a single country-led national health program in order to measure and track the outcomes in a quantifiable manner. With a view to enhancing this program approach, especially in selected pilot countries, Japan will strategically secure health-related human capital, technologies and financial resources, including by enhancing Japan's overall capacity to address global health, and promote the efficient and effective use of existing resources.
- 9) Health goals cannot be achieved by health interventions alone. Diarrheal disease is the leading cause of infant mortality. In order to save the 2 million lives currently lost every year from this preventable and treatable disease, improved access to safe water and sanitation is indispensable. Approximately one third of child deaths are attributable to undernutrition, which suggests that efforts to bolster nutrition critical in improving maternal and child health. Furthermore, it is important to promote gender equality and education in order that women and girls can have greater opportunities to gain knowledge as to seeking appropriate healthcare and life skills including family planning. It is obvious that all these development areas are closely intertwined in the eyes of those who live in developing countries, and promoting a multi-sectoral approach is therefore essential in increasing access to quality health services.

In formulating of this policy and the EMBRACE model, Japan conducted dialogues and consultation with various stakeholders including UNAIDS (The United Nations Programme on HIV/AIDS), UNFPA (United Nations Populations Fund), UNICEF (United Nations Children's Fund), WHO (World Health Organization), World Bank, The Global Fund to Fight AIDS, Tuberculosis and Malaria, GAVI Alliance, and NGOs such as IPPF (International Planned Parenthood Foundation) as well as academics. The Government of Japan would like to express its appreciation to these organizations and people. Japan will ensure transparency in implementing its assistance through cooperation and collaboration with a broader range of international organizations, NGOs and the public and private sectors.

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