

# HANDS

Health and Development Service

2004  
Annual Report  
September, 2005



## Our Fifth Year: A Turning-Point

Health and Development Service (HANDS), a Japanese non-profit organization (NPO), has now entered its fifth year of operation. HANDS continues to carry out short- and long-term assignments in Japan and developing countries. The scope of the activities has expanded greatly with strong support. HANDS has collaborated with many organizations; Management Sciences for Health (MSH) has been a partner since the beginning, but the partnership has expanded to such diverse organizations as the Government of Japan, Japan International Cooperation Agency (JICA), many non-governmental organizations (NGOs) and NPOs in Japan, and the UN organizations. The 2004 fiscal year proved to be an important turning point for HANDS. HANDS completed its project in Afghanistan; assisted local people in the Amazon region in Brazil to independently implement activities; and started a new project in Kenya in collaboration with JICA. HANDS would like to continue these activities with local people and strengthen our working relationship with new partners and old colleagues.

As a NPO, we are aware of the great expectations people have for the quality of our work; transparency of our organization; and accountability regarding our activities. We would be most grateful for your continued support and advice in fulfilling our mission.

Yasuhide Nakamura  
HANDS Representative

## Field Projects

### Overview

In collaboration with NGOs, governments, and international organizations, HANDS is supporting the development of national and community health care systems, taking into consideration the unique local environment and culture. Past activities have included project implementation, consultation, and studies in Asia, Africa, and Latin America. HANDS is currently implementing health service improvement projects in western Kenya and the Amazon region in Brazil.

## Kenya : Project for Improving Health Services with a focus on Safe Motherhood in Kisii and Kericho Districts

JICA Proposed-Type Technical Cooperation Project: March 2005 to March 2008

In March 2005, HANDS commenced a project aimed at improving maternity care at health centers in the communities of Kericho District of Rift Valley Province and Kisii District of Nyanza Province. These two districts are both located about 350 km west of Nairobi, the capital of Kenya.

### Background of the Project

The maternal mortality ratio in Kenya, about 1,000 per 1000,000 live births, is among the highest in the world (WHO, UNICEF and UNFPA). Several reasons contribute to this high rate: (1) delayed decision by traditional midwives and pregnant women experiencing problematic symptoms to seek obstetric care; (2) obstacles getting to obstetric facilities (health care facilities), and (3) lack of timely and appropriate obstetrics care at health care facilities. In the Kericho and Kisii Districts where the HANDS project is being implemented, more than 50% of childbirths take place without skilled care. As a result, the area has very high maternal mortality ratio. The low usage of health care facilities such as hospitals and health centers to deliver suggests an urgent need to increase the community's awareness about safe delivery practices and increase the number of deliveries assisted by a skilled midwife



The first District Project Coordination Committee was held on 6th May, 2005



Location Map of Project Site

or deliveries at medical facilities. Other challenges include: (1) the promotion of closer collaboration between communities and primary health care facilities, (2) the establishment of a patient referral system from primary health care facilities, such as health centers, to secondary health care facilities, such as district hospitals, and (3) strengthening of the management function of the health centers, hospitals, and district health management team including the management of drugs and medical equipment.

### Goals and Outcomes of the Project

The project began to improve maternal care in the target areas by first making the health centers the primary health care facilities and improving their maternal care services and educational activities.

The first phase of the project (2005 - 2006) was focused on the health centers by (1) rehabilitating and upgrading equipment; (2) developing their human resources; (3) strengthening their management function and the district health management teams; and (4) conducting community activities to promote maternal health.

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## Project Activities

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Four Japanese HANDS staff are working on the project in Kenya: a project manager, two technical advisors on maternal care and health management, and a project coordinator. An advisor in community participation was part of the team in August. In addition, five nationals are employed: a project assistant that provides logistical support for procurement, two technical assistants, and two secretaries. The number of local staff members will increase as the project goes on.

From April to July 2005, HANDS focused on setting-up the project and the research studies. Joint project meetings with representatives of district health management teams (DHMTs) in Kericho and Kisii have been held almost monthly since the start of the project to discuss the progress and future activities.

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## Studies conducted on the Project

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The activities under this project are conducted at the health center where actual health care is provided and at the community with the participation of the residents. Two studies were conducted in September 2005 to ascertain the effectiveness of maternity care at these two levels.

First, a baseline study on health centers was conducted to establish a clear picture of the health centers located in the project area. The information in this baseline study included (1) equipment records and human resources related to maternity care; (2) operation and management of each health center; and (3) basic information about each health centers (i.e. demographic and geographical data). HANDS and a counterpart from the DHMT conducted the study.

This study discovered records and data were not properly managed at the health centers. Other problems that were identified include surgical equipment used in childbirth were not being properly disinfected and used syringes, needles, and general waste were not appropriately disposed. Furthermore, the study found many health centers had shortage of drugs, doctors, and nurses. The findings of this study will be used to examine the equipment required at each health centers, training needed for the health care professionals, and the contents of the training to strengthen the management of health centers.

The second study was a community study that investigated (1) the knowledge, attitude, and practice of the local residents regarding pregnancy and childbirth and (2) the details of maternal care provided by health centers for local residents and the degree of satisfaction with such care on the part of these residents. The findings of the study will be used primarily to discuss poli-



HANDS staff monitoring on maternal care at Health Center

cies and plans for community activities with the local residents, members of the DHMTs and health centers in the project area.

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## Future Plan for the Project

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HANDS will develop a plan for each activity based on the findings from the above studies together with the feedback from members of DHMTs, health centers and other stakeholders. This will be followed by procuring and supplying of equipment and materials for the health centers; preparing a curriculum and textbooks for human resources development; as well as starting various community activities.

The project is still in its infant stage and may encounter challenges. However, the HANDS team in Kenya and Japan are determined to improve the maternal health care in the project areas by collaborating with the community, members of the health centers, DHMTs, the Kenyan Ministry of Health, and JICA.



Mothers waiting at Health Center

## Health Improvement Program in the Amazon, Brazil

JICA Grassroots Technical Cooperation Project: October 2003 to March 2006

The Fish Family Foundation/ The William and Flora Hewlett Foundation: July 2004 to December 2005

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### Influence of mayoral election on the program

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An election took place in 2004 and a new mayor took office in January 2005. This leadership change affected the health system in Manicore, displacing Community Health Workers (CHWs) and the staff of the Health Secretariat.

The new government displaced 30 out of the 95 CHWs who worked with HANDS and in total 120 CHWs were assigned under the new administration .

However, the CHW program coordinator lobbied to the new mayor and Secretary of Health, they have allowed HANDS to continue its collaboration with Health Secretariat.

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### Activity in alignment with the request of a Community Health Worker

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In April an introductory training for CHWs was conducted on the following topics; who are CHWs, CHWs as main actors of our project, community diagnosis method and the promotion of community participation. CHWs created a community health map of the area of their coverage and made a presentation to review the health status of their coverage area to Community Leaders, Health center staff and HANDS.

HANDS will continue to explore training themes accommodating to the needs of CHWs.

Also, in May, HANDS began to supervise the CHWs to help them be more effective at carrying out their duties at home visits and health promotion activities in their community.

In the urban areas, a local HANDS supervisor evaluates and instructs CHWs during their home visits and conducts group educational activities every day.

Also, in remote riverside area two supervisors a local HANDS staff and Health Secretariat staff make a two-week-long boat trip every month to offer similar support to CHWs.



The monthly visits to remote areas revealed that some areas were too large to be taken care of by one CHW leaving some communities without any CHWs.

HANDS staff working with CHWs for building the community health map

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### Aiming at the community health worker (CHW) who cooperates with residents

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CHWs are gradually improving their skills in home visits and health promotion through training and supportive supervision. For example, in one area, CHWs developed an opportunity to lecture at a school on "HIV/AIDS and a sexually transmitted disease". HANDS would like to continue to make presentations in public to help CHWs to improve their professional skills.

It is desirable to use educational materials that reflect the local realities to which the residents can relate. HANDS created videos titled "Damage of Alcohol" and "Super Tooth Brush Man and Cavity Monster" that were portrayed by the members of youth drama club in Manicore, and these videos are being shown in the waiting room of health center or hospital.

HANDS created flip chart about the "Importance of antenatal care", "STI/AIDS", "Hypertension", and "Dengue fever" for CHWs to use in health education activities in the community and at home visits.

Also, more CHWs are beginning to participate in the "Child Health Program" conducted by the Christian faith based local organization in their community. This event can now be organized in the area which had not been possible before as a result of HANDS 'support in the training for CHWs and residents themselves becoming "the volunteer of a child health program".

Through collaborations with Christian organization and meetings between CHWs and the community leaders, CHWs are strengthening their links with the community.



Children and parents on "Child Health Day"

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### Future

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The mayoral election brought about the negative influence to the project that CHWs and the Health Secretary, who had worked with us, were let go.

On the other hand, the local staff of HANDS Brazil participated in program management proactively from the sense of impending crisis generated by the stagnated activity.

Going forward, we hope to respect their motivation strengthen the health management system and build their capacity that enable Manicore people to achieve health for themselves.

## Afghanistan Project Final Report

United Nations Population Fund (UNFPA) June to December 2002/

United States Agency for International Development (USAID) June 2002 to March 2005

### HANDS' role in the reconstruction of the Health System in Afghanistan

HANDS worked in Afghanistan from June 2002 to March 2005 to support the reconstruction of the Health Sector. In 2002, HANDS helped to conduct the National Health Resources Assessment in collaboration with the Ministry of Health of Afghanistan, Management Sciences for Health (MSH) and UNFPA. HANDS assisted to mobilize 167 Afghan to survey over 1,000 health facilities as part of the Afghanistan National Health Sector revitalization plan. This survey helped to collect essential data which were previously unknown about the health sector of Afghanistan such as the number and condition of health facilities, equipment and human resources. Utilizing the information gained from the Afghanistan National Health Resource Survey, HANDS collaborated with MSH from June 2003 to March 2005 to help implement the Rural Expansion of Afghanistan Community-based Health

Care (REACH) Program for the United States Agency for International Development (USAID). HANDS assisted in the development of a Health Management Information System (HMIS) in Afghanistan. Technical assistance focused on strengthening human capacity to create a database of health information that enables the Ministry to analyze the data and use it to plan and make sound decisions on policies.

HANDS was also involved in a grant programme to which 60% of the REACH program budget is allocated. This grant programme aims at enabling more people in Afghanistan to have access to local health care facilities by providing grants to local and international NGOs which work in Afghanistan. The funds made available under this grant programme are used for the training of health care workers, maintenance of health care facilities, wages for staff, purchase of medical equipment, and free distribution of essential drugs. HANDS' role in Afghanistan ended in March 2005; however MSH continues to work on the REACH program.

## Human Resource Development

### Overview

In order to improve the quality of international health cooperation, HANDS is making a conscious effort to train Japanese and foreigners to become the next generation of development health professionals.

#### JICA Country-Focused Training Course On Maternal and Child Health in Indonesia, Phase 3 (August to September 2004)

HANDS has conducted JICA's group training course for personnel engaged in the Maternal and Child Health (MCH) Handbook program in Indonesia since 2002. In 2004, individuals from local governments and pediatricians, obstetricians and midwives participated in the training. Through lectures and practicum, participants learned about health administration system, community health promotion activities and how MCH Handbook are distributed and used in Japan. In order to share the experiences of Japan and Indonesia's MCH Handbook, a technical seminar with Japanese MCH professionals and the MCH Symposium were conducted during the training course. The participants produced an action plan based on the knowledge they gained at the end the 21-day training that they will implement when they return to their country.

For the first time this year, HANDS invited former Japan Overseas Cooperation Volunteers (JOCVs) who spent time as midwives and nurses in Indonesia to the training. The JOCVs served as assistant trainers to help with translation and share their experiences. As a result, all participants were able to gain better understanding of the content without any language barrier.



Indonesian Participants getting a briefing on Midwifery



Indonesian Participants writing Action Plan based on the experiences through the training course

## Lectures

Date	Title	Venue
September 15, 2004	"Managing Medical Supplies in Developing Countries" <i>Part of "7th Training for international medical cooperation personnel" and "7th Training experts for global infectious disease control"</i>	International Medical Center of Japan
December 11 - 13, 2004	Fourth International Symposium On Maternal and Child Health Handbook	ASEAN Institute for Health Development (AIHD) of Mahidol University, Thailand
May 31, 2005	Guidance II "Living in the civil society ~civil society and non-profit organization (NPOs)"	Kanazawa Sogo High School
June 22 - 23, 2005	"Drug Management System" <i>Part of "15th JICA Group Training Course in Community Health Services"</i>	International Cooperation Division, St. Mary's Hospital
June 27, 2005	"The World of NPO"	Soka University
June 28, 2005	"Proposal Writing" <i>Part of "15th JICA Group Training Course in Community Health Services"</i>	International Cooperation Division, St. Mary's Hospital

## Advocacy

### Overview

HANDS returns the valuable experience and knowledge it obtained from field work to people working in Japan on international health sector, by working as consultant for studies by Japanese aid organizations as well as through promotional activities such as publishing academic papers. Also, HANDS actively makes recommendations to enhance the status of NGOs through networking with other organizations working in development, especially the international health sector.

### Advocacy and research Project

Date	Project
March 2004	International Cooperation Research Grant from International Medical Center of Japan, IMCJ (Ministry of Health, Labour and Welfare, MoHLW) <ul style="list-style-type: none"> <li>• Study on the development of an comprehensive health promotion program with active behavior of people : In Brazil, rational drug use from a local resident's viewpoint and proposed techniques to promote behavioral changes among the residents.</li> <li>• A Multidisciplinary Research on the Sustainability of Health Projects in International Collaboration : In Indonesia, evaluated a project using interdisciplinary approach and verified the sustainability of the project</li> </ul>
March 2004	Social Security and International Cooperation Research Grant from Ministry of Health, Labour and Welfare <ul style="list-style-type: none"> <li>• Research on the post-war Japan experience in improvement of health and its application to the developing countries in strengthening medical-care system : Analyzed the path of the development of Japanese medical care system using precedent research and qualitative investigation and proposed measures to expedite on Japanese experience in developing countries.</li> </ul>
February 2003 to December 2004	Project Formulation Advisor (HIV/AIDS in Eastern and Western Africa) : Dispatched planner/researcher to JICA Kenya office
July 2004 to April 2005	JICA "Health Facility Census in Zambia" : Refer to lower berth
September to December 2004	JICA "Approaches for Systematic Planning of Development Projects in Reproductive Health; Youth Reproductive Health and Maternal Care" : Refer to order page
October 2004 to January 2005	HIV/AIDS Research Grant from MoHLW <ul style="list-style-type: none"> <li>• HIV/AIDS program in the developed countries; generating trend, research system and program analysis : To establish effective trend research and project planning in Japan, collected and analyzed data on occurrence and status of research and prevention system about HIV/AIDS among women and youth in the UK</li> </ul>
January 2005 to September 2005	Project Formulation Advisor (HIV/AIDS in Eastern and Western Africa) : Dispatched planner/researcher to JICA Regional Support Office For Eastern and Southern Africa
April 2005 to April 2006	Project Coordinator/Technical Advisor on Human Resources in Health : Dispatched long-term specialist to JICA Technical Cooperation Project for the Development of Human Resources in Health in Mozambique
May 2005 to July 2005	<ul style="list-style-type: none"> <li>• Proposal Document on HIV/AIDS prevention in the economic and social infrastructure projects by ODA [The Open Regular Dialogue between Ministry of Foreign Affairs (MoFA) and NGOs on Global Issue Initiative/ Infectious Disease Initiative(GII/IDI)]</li> <li>: Proposed jointly with other NGOs on the importance of HIV/AIDS prevention in large-scale infrastructure development projects, such as road construction and port maintenance.</li> </ul>
May 2005 to August 2005	Japan Platform "Monitoring of NGO activities for the earthquake and tsunami off Sumatra Island" : Participated in the monitoring of NGO activities in Sri Lanka as a member of the mid-term evaluation

### Zambia Health Facility Census

Since the 1990's, 'Health Reform' has been carried out in many developing countries. Key features of the Health Reform include decentralization of the health administration system, promotion of Basic Health Care Package, and introduction of Sector-Wide Approach. In order to effectively implement the Health Reform, it is necessary for a

country to have high quality data on the country's health system, including detailed information regarding health facilities. However, in reality, many developing countries do not have such data, and the demand for quality data on the health facilities is still very high.

In order to respond to this demand, the Health Facility Census (hereafter referred as the 'Census') was developed. Census is a comprehensive package to build a country's capacity in establishing a baseline database on the health facilities and using the data for planning. So far, the Census and its follow-up activities are being implemented in Malawi and Zambia, with support from the Japan International Cooperation Agency (JICA). In 2004 and 2005, HANDS dispatched a program officer to Zambia to provide technical assistance in the management of the implementation of the Census. The work included the establishment of a data collection system, development data collection tools (e.g. questionnaires and manuals), training of data collectors, and monitoring the data collection.

As of September 2005, the data collection from Level 1 and other health facilities was completed in Zambia, but HANDS continues to provide technical assistance to the Census.

### The Approaches for Systematic Planning of Development Projects in Reproductive Health "Youth Reproductive Health" / "Maternal Care"

HANDS participated in a research on JICA's Strategy Paper, the Approaches for Systematic Planning of Development Projects in Reproductive Health "Youth Reproductive Health" / "Maternal Care". JICA judged that these two subjects were processing subject in reproductive Health field.

This study reviewed and analyzed various projects about "Youth Reproductive Health" and "Maternal Care". This information was obtained from existing reference and Internet. Based on these analyses, this study arranged various approaches currently carried out in this field, and at the same time, showed the relevance of each subject with the Millennium Development Goals, Human Security, and capacity development at the execution organization. These reports notice the practical use of the approaches in a JICA enterprise. HANDS received much useful advice from the experts and JICA staff in this research.

HANDS was able to be continuously involved in research on the "Reproductive Health" by JICA and the Ministry of Foreign Affairs in these years. HANDS expects to utilize these experiences for project implementation in a "Reproductive Health" in the future.

#### Presentation at Academic Conferences

Date	Title	Name of Forum
October 2004	How to utilize Japanese experiences of improving Maternal Health to international cooperation for the developing countries	19th Japan Association for International Health in Tokyo
	Community Health Project in Amazon, Brazil 1; Baseline survey on the roles and the functions of Community Health Workers	
	Community Health Project in Amazon, Brazil 2; Trial of participatory planning of action	
	Open Discussion "The present situation and challenges of care for the handicapped children in developing countries" in the case of Negros Island in the Philippines	
	Workshop "Maternal and Child Health : How to apply Japanese experiences of improving MCH after World War II to international cooperation"	

#### Networking meetings

Title	Frequency
The Open Regular Dialogue between Ministry of Foreign Affairs (MoFA) and NGOs on Global Issue Initiative/ Infectious Disease Initiative(GII/IDI)	Every 2 months
Committee on International NGOs, Policy Research Council, Liberal Democratic Party	Occational

#### Articles

Date	Title	A printing place / broadcasting station
September 2004	"Training on Maternal and Child Health in Indonesia: Training participants visited our town" at News Yashiro	Telenet Yashiro (Hyogo Prefecture )
September 2004	Front Line "JICA Osaka Center, Country focused Training on Maternal and Child Health in Indonesia ~ Introduction of MCH Handbook to Indonesia ~"	Japan International Cooperation Agency (JICA) Annual Report 2004
July 2005	"Global Supporter guided by Toru Nakamura ~JICA Project for Improvement of the Health Services in Western Kenya ~"	TV Tokyo

## Source of Funding

HANDS would like to express its gratitude for the funding and support provided by the following organizations.

- The Fish Family Foundation
- Japan International Cooperation Agency (JICA)
- Ministry of Foreign Affairs (MoFA)
- Ministry of Health, Labor and Welfare (MoHLW)
- The David and Lucile Packard Foundation
- The William and Flora Hewlett Foundation
- United States Agency for International Development (USAID) \*

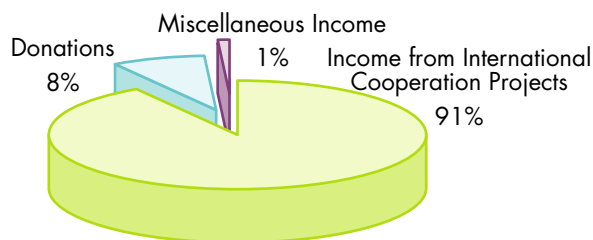
\*Management Sciences for Health (MSH) funding under a USAID contract

## Settlement of Accounts for FY 2004

Settlement of Accounts for the 5th term (July 1, 2004 to June 30, 2005)

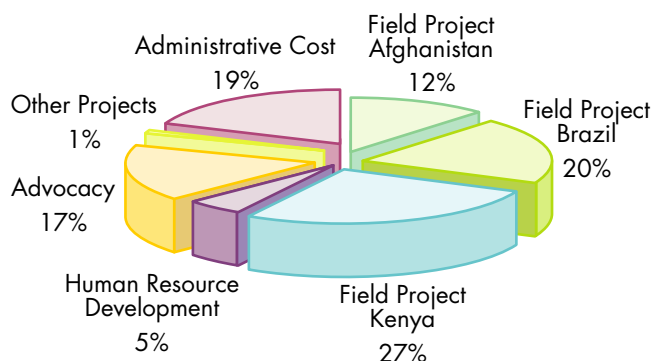
Income	Figures below \1,000 are omitted
Income from International Cooperation Projects	117,958
Donations	10,137
Miscellaneous Income	1,170
<b>Total Income</b>	<b>129,265</b>

(Unit: in thousand yen)



Expenditure	Figures below \1,000 are omitted
Field Project: Afghanistan	12,674
Field Project: Brazil	21,386
Field Project: Kenya	30,431
Human Resource Development	5,100
Advocacy	18,485
Other Projects	374
Administrative Cost	20,289
<b>Total Expenditure</b>	<b>108,739</b>

(Unit: in thousand yen)



Nonprofit Organization

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