

Millennium Development Goals (MDGs) and PHJ

■ MDGs

The United Nations (UN) Millennium Summit in 2000 adopted the goals of the world for the 21st century to solve the issues of poverty. The MDGs consist of following eight category goals to be achieved by 2015.

Goal 1: Eradicate extreme poverty

Goal 2: Achieve universal primary education

Goal 3: Promote gender equality and empower women

Goal 4: Reduce child mortality

Goal 5: Improve maternal health

Goal 6: Combat HIV/AIDS and other diseases

Goal 7: Ensure environmental sustainability

Goal 8: Develop a global partnership for development

(Source: UN Millennium Development Goals: www.un.org/millenniumgoals/)

PHJ's activities are in line with the achievement of the MDGs. Among the eight goals, our activities in Indonesia and Cambodia to strengthen community health care system are related to Goal 4: reduce child mortality. Our activities in Indonesia and Cambodia for strengthening maternal and child health care system are related to Goal 5: improve maternal health, while HIV/AIDS prevention education in Thailand is related to Goal 6: Combat HIV/AIDS, malaria, and other diseases.

Many corporations that are supporting PHJ are focusing their corporate social responsibility (CSR) activities on the MDGs programs. To respond to the increasing concern over the MDGs, PHJ has joined STAND UP-TAKE ACTION campaign (under the initiative of the United Nations, every year for three days across the globe, events are organized of all types to bring attention to the worldwide crisis we all face – poverty) and started the MDGs donation.

I have never met a person whom I dislike



Mitsuhiro Saotome
PHJ Director
First Ambassador of Civil Society of Japan, Former
Ambassador to Zambia and Malawi

I am honored to be appointed a director of PH-Japan, a well-reputed NGO in Japan having extended many medical and health educational supports to developing countries. As my PHJ director's message, I would like to introduce a phrase I am fond of.

People today are under a great stress. Why can't we avoid stressful lives? Stress is called the cause of all illnesses. Does our busy work cause such stress? It does not seem so. I like to call your attention on what Dale Carnegie, a writer and lecturer, said on this subject. "Many people believe that stress is caused from fatigue of work and study but it is not so.By creating a person whom you dislike or hate, you become obsessed with this person constantly. In the end you are controlled by that person feeling pain and strain, while that person never feels such pain and is unaware of your strain." It is natural for anyone in the present world to have likes and dislikes. Making it your principle not to dislike any person, try to acknowledge good points in every person, and like that person will create a pleasant and productive environment not only to you but also to the other person. As a result, you can build a stress free and comfortable environment.

Late Nagaharu Yodogawa, a movie commentator, had introduced hundreds of movies for more than a half century until he passed away at 89 years. He loved all movies (even poor and ordinary ones) and commented something good in each movie, after trying to find one or more fine features. He often wrote on sign paper his favorite phrase, "I have never met any person I dislike." What a happy life he must have had.

Today people still hate each other, a country fights with another country. I wonder when these conflicts and fights will end. The twentieth century, called the century of science and technology development and the century of wars, ended 10 years ago. I wish the twenty first century would be called the century of mutual aid when peoples and countries help each other. It is said that a person visiting one country becomes fond of that country. Such feeling would increase if the person found a friend in that country. It would be nice to say, "I have never known a disliking country."

Report of FY 2010 Activities and FY2011 Activities Plan

FY2010 Result and FY2011 Budget

Unit: Japanese Yen

Item	FY2010 Result	FY2011 Budget
I . Revenue		
1. Cash donation	78,342,446	74,420,000
Corporation	57,155,331	58,120,000
Individual	8,291,220	8,500,000
HOPE Partner	2,427,000	2,300,000
One-shot	10,468,895	5,500,000
2. GIK	3,136,448	15,000,000
3. Public fund	7,909,151	14,650,000
4. Bank interest	130,407	
Cash revenue	86,382,004	89,070,000
GIK	3,136,448	15,000,000
Total Revenue (A)	89,518,452	104,070,000
Bal-fwd (cash)	74,231,842	47,309,208
Bal-fwd (GIK)	0	
Total Revenue (B)	163,750,294	151,379,208
II .Expense		
1. Program	92,366,109 (79.3%)	81, 510, 000 (78.4%)
Cash	86,811,366	66,510,000
Currency	2,418,295	
GIK	3,136,448	15,000,000
2. Fundraising	15,396,605 (13.2%)	14, 500, 000 (13.9%)
Personnel	8,590,000	7,500,000
Expenses	6,806,605	7,000,000
3. Administration	8,678,372 (7.5%)	8, 000, 000 (7.7%)
Personnel	2,160,000	2,000,000
Expenses	6,518,372	6,000,000
Total Expenses ©	116,441,086 (100%)	104, 010, 000 (100%)
Cash	113,304,638	89,010,000
GIK	3,136,448	15,000,000
III. Bal-fwd (B-C)	47,309,208	47, 369, 208
1. Cash	47,309,208	47,369,208
2. GIK	0	0

FY2010 Breakdown of Expenses (Cash and GIK)

Supporting Site	Cash	GIK	Total
Thailand	31,369,472	3,080,000	34,449,472
Indonesia	31,930,049		31,930,049
Cambodia	25,930,140	56,448	25,986,588
Total	89,229,661	3,136,448	92,366,109

Auditor's Report

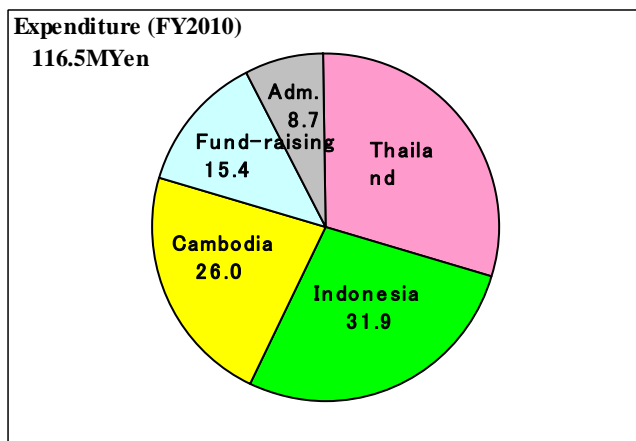
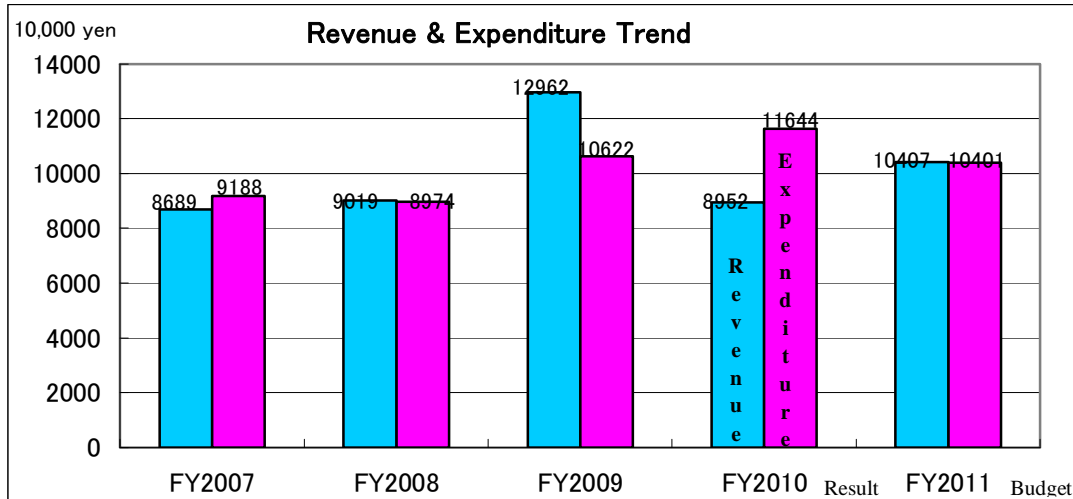
**To: Chairman of the Board of PH-Japan
Mr. Katsuto Kohtani**

Having audited the PH-Japan's FY2010 Activities Report and Financial Report, I hereby confirm that they are fully satisfactory and appropriate.

**Bungo Yoshimura (Seal)
Auditor
July 21, 2010**

FY2010 Activities Report

1. Financial Report



2. FY2010 Activities Report:

2-1. Thailand (Total program support in Jpn Yen 34.45 million)

(1) HIV/AIDS Prevention Education Program

Assisted by universities of Payap and Chiangmai, HIV/AIDS Preventive Education program centered on peer to peer education has continued to implement in Chiangmai and other neighboring provinces. The program is expanded to high school and junior high school students. The peer

education method was transferred to Ho Chi Min Medical and Pharmaceutical University in Vietnam implementing the education programs four times. This transfer program was completed in June 2010.

(2) Cervical Cancer Prevention Education Program

The three year program has been implemented in the districts of Mae Rim and Mae Tang successfully since 2007. The percentage of women receiving a pap smear test prior to the program was 10% and increased dramatically to 58% by April 2010, clearing the target rate of 50%.

(3) HOPE Partner Education Program

This program has been implemented since 1998 with support of individual and corporate members, focusing on enrichment of education. PHJ will continue this unique program. Presently 69 patients are supported by 67 Partners.

(4) Pediatric Cardiovascular Surgery Program

10 patients successfully received heart surgeries to survive during this past FY. This program extended to support training workshop to nurses and dispatched a caravan medical team to remote areas.

2-2. Indonesia (Total program support in Jpn Yen 31.93 million)

(1) Oral Hygiene Education Program

Oral hygiene education conducted with the MOFA support fund from 1998 to 2003 toward kindergarten and school children of East Bali has been practiced at the site even today. Since 2004, PHJ has been organizing technical seminars to continuously train and effectively support local self program implementation in East Bali. In this FY the program supported dental skill up seminars on pediatric dentistry and straightening teeth with specialists of Indonesia University as lecturers and more than 50 dental specialists participated.

(2) MCH Program in Banten Province

A MCH program designed to reinforce safe delivery and healthy growth of child, promoted in Millenium Development Goals (MDGs), is continuously implemented in Serang district of Banten province, West Java. Training of midwives at university hospitals was implemented and the number of MCH centers constructed increased to three. Nutrition improvement activities are continued to achieve long term goal of decreasing undernourished children. Nutrition counseling and developing new menus that use less costly local

food materials are provided to mothers. Further, training of midwives and local health staffs on nourishment was conducted at a national nutrition education center.

(3) Training of Radiation Medical Equipment and Ultra-sound Image Diagnosis

Since 2000, PHJ has been supporting Gianyar hospital with donation of various image diagnosis equipment and dispatching Japanese physician and technician. Continuing the previous FY activities, image diagnosis technical level of local Indonesian physicians and technicians is evaluated by a detailed technical achievement rating report under the supervision of dispatched expert.

(4) Safe and Hygienic Water Supply Program

Due to lack of public water supply service, water drawn from the river is only water supply source in the Banten MCH program site. In order to resolve the problem of dirty, contaminated, unhygienic and heavily salty water, PHJ drilled a deep well driven by eco-friendly solar batteries and successfully started to supply safe and hygienic water to four MCH centers.

(5) Influenza Prevention Program

Influenza prevention program was implemented toward doctors, medical specialists of provincial hospital, clinics and community residents in East Bali. Collaborating with provincial authority the program focuses to build a reliable system to protect people from influenza-A and implemented prevention education to health volunteers, elementary school children and villagers.

2-3. Cambodia MCH programs (Total program support in Jpn Yen 25.99 million)

(1) Midwives Training Program

Since 2007 midwives from local health stations in the province of Prey Veng have been trained in the Ob-Gyn dept. of provincial hospital, so that they acquire appropriate baby delivery assistance skills. This FY, the training was provided to 6 midwives of health centers in ob-Nyakruan.

(2) MCH Program

With the experience of successful achievement of health center function reinforcement program and training of midwives, a MCH program started in January, 2008 for farmers' community in the province of Kampong

Thom. Aiming that the health centers in the community provide appropriate MCH support, our program has proven effective in improving MCH services of health centers and increasing the number of pregnant women receiving antenatal tests and delivery with midwife's assistance.

Thailand: Cervical cancer test using minibus training at Learning Center



Indonesia: Construction of delivery center with a solar energy operated well



Cambodia: Pregnant woman receiving antenatal test



FY2011 Activities Plan

1. Thailand (Total program support: Jpn Yen 31.55 million)

(1) HIV/AIDS Prevention Education Program

Similarly to FY2010, our program will be extended to prevention education of younger generation in FY2011. The peer to peer education program will also be extended to other universities than Payap and Chiangmai universities so that the university students will promote the program by themselves.

(2) Cervical Cancer Prevention Program

A 3-year program has been implemented since 2007 and will be completed in October 2010. A new 3 year program covering both cervical and breast cancers will be implemented in other districts. A minibus donated in April 2010 will be used for this program.

(3) HOPE Partner Education Program

The program to support underprivileged challenged children and their families has been implemented since 1998 with the donation of individual and corporate members. The program will continue to focus on education aspects.

(4) Pediatric Cardiac Surgery Program

The program will provide cardiac surgeries to pediatric patients with the funds from Musashino City and corporations. Reportedly another 250 patients are on the waiting list for surgeries.

2. Indonesia (Total program support: Jpn Yen 20.11 million)

(1) MCH Program in Banten Province

The program continues to implement in order to reinforce local medical collaboration in Serang district of Banten province and ensure safer delivery and healthy growth of children which are included in Millennium Development Goals (MDGs). Facilitating collaborative works between midwives and TBAs, financial support for building local Poskedes that can provide sufficient medical services and also educational health seminars for local pregnant women will be implemented through this MCH program. This program also covers nutrition improvement services consisting of establishing a nutritious food center to provide educational nutrition counseling and cooking school to use locally produced food materials as well as building a pilot vegetable garden to secure food materials.

(2) Safe and Hygiene Water Supply

The area that our MCH program is implemented does not have public water supply system. Quality of water drawn from river and supplied to community residents is extremely poor. PHJ will continue to supply safe and hygienic water to local clinic using the know-how accumulated from this program.

(3) Influenza Prevention Program

PHJ implemented the influenza prevention education program since 2008 in Bali province. Other infectious diseases such as Dengue hemorrhagic fever and rabies are arising. Particularly, infection to rabies is a problem that the provincial health department is requesting PHJ's support on rabies vaccine. PHJ will collaborate with local hospital and clinics to establish effective infection prevention system.

(4) Other Programs

i) Image Diagnosis Technology Support Program

This program is continued to implement in order to brush up image diagnosis technique of Indonesian doctors and technicians serving in Gianyar hospital. Japanese technician will be dispatched for the program to provide training to a larger number of doctors and technicians and for longer training period.

ii) Oral Hygiene Education Program

This FY an orthodontics technical and educational seminar is planned for local specialists in East Bali.

3. Cambodia MCH program (Total program support in Jpn Yen 29.85 million)

(1) Education and Training of Midwives and TBAs

Since FY 2007 in the province of Prey Veng local midwives and TBAs have been furnished with a good amount of confidence to undertake appropriate assistance for baby delivery through training. By the end of last FY 2010, 22 midwives received training to improve skills and consequently number of assisting baby delivery increased. Recognizing successful results of this program provincial health department requested PHJ to expand our program to the other areas of the province. Expanded program will train 2 midwives of health center.

(2) MCH Improvement Project

Fully using experiences acquired during 3 program years of health center reinforcement ended in 2007, a new program relating to local clinic support was started in January 2008. Since FY2011 will be the last year of this program, we will make every effort to achieve the targets and to have fine evaluation.

The 15th Board Meeting and The 13th General Assembly

The 15th PHJ Board of Directors Meeting was held on August 19 at Josui Kaikan Building. The Board approved the fiscal year 2010 activities report and fiscal year 2011 activities plan as proposed. Also the Board approved the appointment and resignation of directors. Following the Board Meeting, the 13th General Assembly was held and approved all the agendas. The newly appointed directors and the auditor are shown in the following. Representatives of PHJ Cambodia, Indonesia, and Thailand reported the activities of respectively country.



Board of Directors of PH-Japan

Title at PHJ	Name	Title and Organization
Chairperson	Katsuto Kohtani	Former President, Hewlett-Packard Japan, Ltd.
Vice Chairperson	Shigeru Tanaka	Professor, Keio University
Vice Chairperson	Shingo Oda	Former President, Hewlett-Packard Japan, Ltd.
Director	Yukiko Goto	Citizen, Musashino City
Director	Mitsuhiro Saotome	First Ambassador for Civil Society of Japan, Former Ambassador of Japan to the Republic of Zambia and the Republic of Malawi
Director	Atsushi Seike	President, Keio Univeristy
Director	Takashi Shoda	Chairman, the Federation of Pharmaceutical Manufacturers' Association of JAPAN, Chariman of Daiichi Sankyo Co., Ltd.
Director	Yasuo Nakajima	Professor, St. Marianna University School of Medicine
Director	Hirotooshi Nishizawa	Chairman, All Japan Hospital Association, Chairman, Nishoka Hospital

Director	Yoshiaki Fujimori	President of GE Japan
Director	Kenichi Matsumoto	Advisor, JFMDA (Chairman, Sakura Global Holding Co., Ltd.)
Director	Fumio Mizoguchi	Former Auditor, Yokogawa Electric Corporation
Director	Toshio Kimura	President, PH-Japan
Auditor	Michio Ueno	Former Executive Director of Mizuho Corporate Bank Ltd.

Cambodia - Importance of Hygiene in Villages

In improving living conditions of villagers, we have to pay attention on hygiene or sanitation. Hygienic environment and sanitary life are essential to maintain health and prevent illnesses among the villagers.

In Cambodian villages, people are not much concerned about hygienic life. We encounter children drinking water directly from well. A few households have lavatories and people use tree shades. Their excrements ruin water resources but the villagers do not seem to care. Their houses are built as raised floor type and cattle are nurtured under the house spreading their excrements around the house. Even though people just lead traditional lifestyle, the impact of increasing



population and increasing number of cattle on living environments is getting serious.

PHJ Cambodia Office has been supporting village sanitation promotion campaign and lavatory construction to improve hygiene awareness. In the campaign, we have organized meetings to explain the need to keep living environments clean, hand washing, drinking boiled water, and other health-related subjects. Villagers participate in these campaign activities and learn about importance of hygiene to keep them healthy and happy.

Some of the villagers told me that they heard of hygiene but did not know what it

meant. They were truly happy to learn that a sanitary life leads to a healthy life.

To introduce a practical sanitary life, we supported the construction of lavatories. Selecting 15 households in each village, PHJ provided construction materials while the villagers constructed the lavatories themselves. PHJ is monitoring the use of these lavatories and found that people are keeping them clean. PHJ thinks it the first step of hygienic life for the villagers to have and use lavatories daily.

By Yoshimi Nakata, Director of PHJ Cambodia

Indonesia – Construction of Health Station on Remote Island

PHJ has been implementing community health care enhancement program in Kec. Tirtayasa, Serang District, Banten Province since 2004. One of the villages in the program site is Warga-sara Village on the Tunda Island with the population of 1800 persons. It takes two to three hours by a small fishing boat to go to the mainland. There is no electricity during daytime and at night people depend on a house electric generator. Under these circumstances, it is difficult to keep vaccines for immunization of diseases. The fishing boat is used for carrying a patient to a hospital on the mainland. When the sea is rough, the boat cannot carry patients to and from the island and food supply from the mainland stops. Further communication through mobile phone is often difficult and it takes a lot of efforts to communicate with the mainland. This is why we were unable to implement the community health care system strengthening program on the Tunda Island.



Fishing boat

In 2010, PHJ started the program officially. To improve the delivery conditions, we supported the construction of a delivery care unit and a health station for mother and child health and nutrition education.

The construction of these facilities on the remote island was a quite different experience from that of similar facilities on the mainland. While carrying construction materials, the boat sank with the heavy weight and a motor was caught with the trash on the seabed and the boat stopped several times. One time the sea

got rough and the boat shook up and down. I was about to be thrown out to the sea and got soaked wet. Another time, with the low tide, the boat could not reach the harbor and I had to wait in the dark until the tide came back and rescue team arrived. There are no cars on the island and all construction materials were carried on the manually operated vehicle under the hot sun with the temperature of 40 degree centigrade. It took a half day to carry the materials from the harbor to the construction site.

It was not all so bad. I was lucky to meet a group of dolphins and forgot all about the hard day.

We will make the best use of these facilities and support the people to live healthy and happy life.

By Mika Ito, Director of PHJ Indonesia



Carrying construction materilas



Delivery care unit

Thailand - Pediatric Cardiac Project

Since 1998 to June 2010, PHJ has been implementing Pediatric Cardiac Project in northern Thailand and has succeeded in providing a surgery to 261 children. The Project aims to support children in remote areas with heart problems to receive heart surgery and screening thus reducing mortality in infants and children. The way to reduce the mortality of infants and children with congenital heart disease is through early detection and early treatment.





PHJ has been implementing this project working closely with Chiang Mai Hospital and from 2007 with the donation of Central Glass Company for surgery of 10 patients per year. The project was also able to enhance the overall skills and knowledge of the pediatric cardiac intensive care unit for doctors and nurses by training nurses on post-operative care to pediatric cardiac patients.

Pisana Waiyueku , 9 years old

Her family is very large. They have all together nine children. Her father is 41 years old and her mother is 46 years old, her elder sister is 22 years old. They are farmers and earn around 25,000 Baht (about 75,000 Japanese yen) per year. She underwent a heart operation in December 2008 when she was 6 years old.



Pisana's mother said

“My daughter has had congenital heart disease since she was born and has been taking medication. The doctors recommended that we go to Chiang Mai University Hospital for her heart surgery. However, our house is very far from CMU and the cost of travel would have been very high, so when we found out that our daughter was selected to receive support from a Japanese company for her operation we were very happy and thankful.”

By Jeeranun Mongkondee, Director of PHJ Thailand

Thank You for Supporting Thai Toy Set Program

In October 2009, PH-Japan started the donation program called “Toy Set for Thai Children with Problems” to support the Rajanagarindra Institute of Child Development (RICD) program for children with mental, social, intellectual, and physical problems. Thanks to donations from Japanese individuals and organizations, the donation program ended at the end of September, 2010.



RICD has developed an original total support program for disabled children in screening, rehabilitation, and training using a toy set for training. PHJ decided to support the RICD program so that the program can be introduced to larger areas in Northern Thailand and started a donation program covering toy sets. With the donation of 3,000 yen, one small kit for rental purpose is donated, while 10 donations of 5,000 yen can cover one big kit for hospital use.



By August 2010, with donations from 62 individuals and organizations, 8 big training kits and 70 small training kits have been distributed to hospitals, health stations, and child care centers in 10 districts of the Chiangmai Province.

Each kit bears a name or names of donors.

In addition to the distribution of training kits, RICD, Provincial Department of Health, and PHJ provided training of 122 health staffs on the use of these training kits. RICD will visit the facilities that received the training kits periodically.



PHJ extends to all donors for responding its request of “Providing Opportunities to Children with Problems for Early Detection and Rehabilitation.”

Member's Voice – Completing Internship at PHJ

Mika Hosokawa

I participated in the works of PHJ for about three months as an Intern. I have been interested in the field of international cooperation, especially the contributions for health, nourishment and education in developing countries. I graduated from a university this March majoring in political science. I am going to study International Relations for master's program in France and the experiences here at PHJ have motivated me more than before.



At PHJ, I have learned a lot of things through practical works such as researches, making documents and translations. When providing some help, it is quite important to practice concrete aids responding to the demands of the people on the field. I strongly felt that PHJ is the very organization which responds to such necessities in each country. One of the strong points of PHJ is that, this organization has pipes directly communicating with the people who need aids. Another fine feature is that many supports from large number of enterprises and individuals are enabling PHJ to implement active projects. During these three months, I have made some researches on NGOs and NPOs, compiled country profiles, and also supported some event, which all brought me meaningful experiences. Fortunately, I had also the occasions to meet other staffs who work in the offices abroad and could learn the actual support activities conducted on the field. Generally it is very difficult to know real practices of international aids and cooperation. However, working with dedicated staffs of PHJ, I found these support activities truly useful and important. I am so pleased to have these occasions from this internship.

I would like to extend my sincere appreciation to all staffs at this office and also those who work in offices abroad.

PHJ Seminar at GE Womens' Network Meeting

On August 20, GE Japan's Womens' Network organized a seminar to introduce PHJ activities. Yoshiaki Fujimori, President of GE Japan and other GE Japan employees participated in the seminar and lunch. The presentation of the main theme "Child Birth in Cambodia" consisted of explanation by PHJ Cambodia Director and many slides. Also PHJ Indonesia and Thailand Directors introduced



respective activities. Some of the GE participants mentioned that they were interested in helping developing countries at university and several participants asked many questions to the PHJ directors.

Drawings for Charity Calendar !

PHJ's 2011 calendar will feature drawings based on fairy tales by children. In addition to the children of Cambodia, Indonesia, and Thailand, Japanese children attending some medical and health facilities of Musashino City where PHJ is located are participating in the charity calendar. Having received drawings and fairy tales, we are compiling the calendar now. With the 2011 PHJ charity calendar, you will get familiar with the culture of these countries



“The old man who made trees blossom (Japanese fairy tale)”

By a boy attending Musashino Red Cross School

Correction

PHJ News No. 53: Donation of Minibus for Cervical Cancer

The body of minibus is painted pink, [the color of cervical cancer prevention ribbon](#) should read [the color of breast cancer prevention](#).

PHJ E-mail News

In January 2010, PHJ started to distribute a monthly e-mail newsletter (in Japanese) to persons who registered their e-mail addresses with PHJ. The purpose of the PHJ E-mail Newsletter is to introduce PHJ's activities timely to supplement our quarterly newsletter. Persons who wish to receive the Japanese E-mail Newsletter, please send your e-mail address to info@ph-japan.org PHJ will use the personal information of registered persons strictly for the purpose of PHJ's activities.

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