

Japan's Role in Global Health and Human Security

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Why is global health on the global agenda?

- Reflections on the 2000 Okinawa G8 Summit
- Clarification of issues to be tackled
- Recommendations from an experienced policymaker
- Japan's past experience and progress on health
- Human security and health
- Issues to be discussed for Japan's future innovative role in global health

Why is global health on the global agenda?

- Poverty/Development and Health : Inseparable relations.
 - Social Determinants of Health
 - Increasing interdependence in Health
 - Influenza, HIV ; a matter of security, not limited to health
- Health as Global Agenda
- Foreign Policy and global Health
 - Issue on G8 and UN Assembly

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Reflections on the 2000 Okinawa G8 Summit

- The Okinawa Infectious Disease Initiative
 - “Selection & concentration” strategy
 - Focusing on HIV/AIDS, malaria, and tuberculosis.
- It is estimated that global development assistance for health has grown from about US\$6 billion in 2000 to US\$14 billion in 2005.
 - L leverage effects of disease-specific assistance to develop new treatments for neglected tropical diseases.
 - Including, to name a few, the Global Alliance for Vaccines and Immunization, the Global Polio Eradication Initiative, the global health activities of the Bill & Melinda Gates Foundation and other private foundations, and various public and private initiatives.
- However, new challenges continue to emerge...

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Issues to be tackled

- Social Determinants of health: Inevitable intersectoral cooperation
- Delay in achieving health-related MDGs
 - especially maternal, newborn, and child health (MNCH)
 - especially in Sub-Saharan Africa
- Weak health systems to deliver services
 - Human resource crisis in the health field
- Mushrooming of global health initiatives
 - IHP (International Health Partnership), Global Business Plan for MDGs 4&5, PEPFAR & PMI, International Catalytic Initiative, WHO, World Bank, etc.
 - Complex and overlapping set of activities with weak coordination
- Need to create political momentum and policy space
 - Health systems strengthening through a human security approach
 - Better coordination of global health initiatives to make a difference for people

Concern: fragmented understanding of health systems

- Need to re-establish a common understanding
- That is why global health is on the global agenda.
- Swinging pendulum
 - Stress on disease specific approach
 - Stress on health system strengthening
 - Need for well-balanced approach : Minister Koumura's speech.



Need to establish a common understanding through the G8 process

- Effective utilization of limited funding resources
- Rediscovering the importance of health workforce alliances and maternal and child health (MCH)
- Need for political commitment
 - Need to advocate tailor-made policies for each country

Japan's Role

- Japan can contribute to establishing health systems, underpinned by Japan's own experience with improving healthcare, particularly in areas of MCH and health system strengthening.
 - Promotion of **human security approaches**, reflecting Japan's own experience.
- **Health System Strengthening**
 - Supporting healthcare workers-**
 - Human resource development and retention as the essence of health system strengthening
 - Human resource development through empowerment including training, learning, motivation, etc.
 - Human resource retention through protection including financing, leadership and political commitment, etc.

What is human security?

- Definition of human security
 - To protect the vital core of all human lives in ways that enhance human freedoms and human fulfillment
- Strategies
 - *Empowerment*
 - enable people to develop capacity to cope with difficult conditions
 - *Protection*
 - set up by states, international agencies, NGOs and the private sector to shield people from threats

Japan's experience as a developing country right after World War II

- High prevalence of infectious diseases
- High infant mortality rate (IMR)
- Strengthening health care delivery system both in rural and urban areas
- Civilian efforts on infectious diseases and maternal and child health (MCH) through formal and informal collaboration



Japanese government's domestic strategy in the middle of the 20th century

Top Down

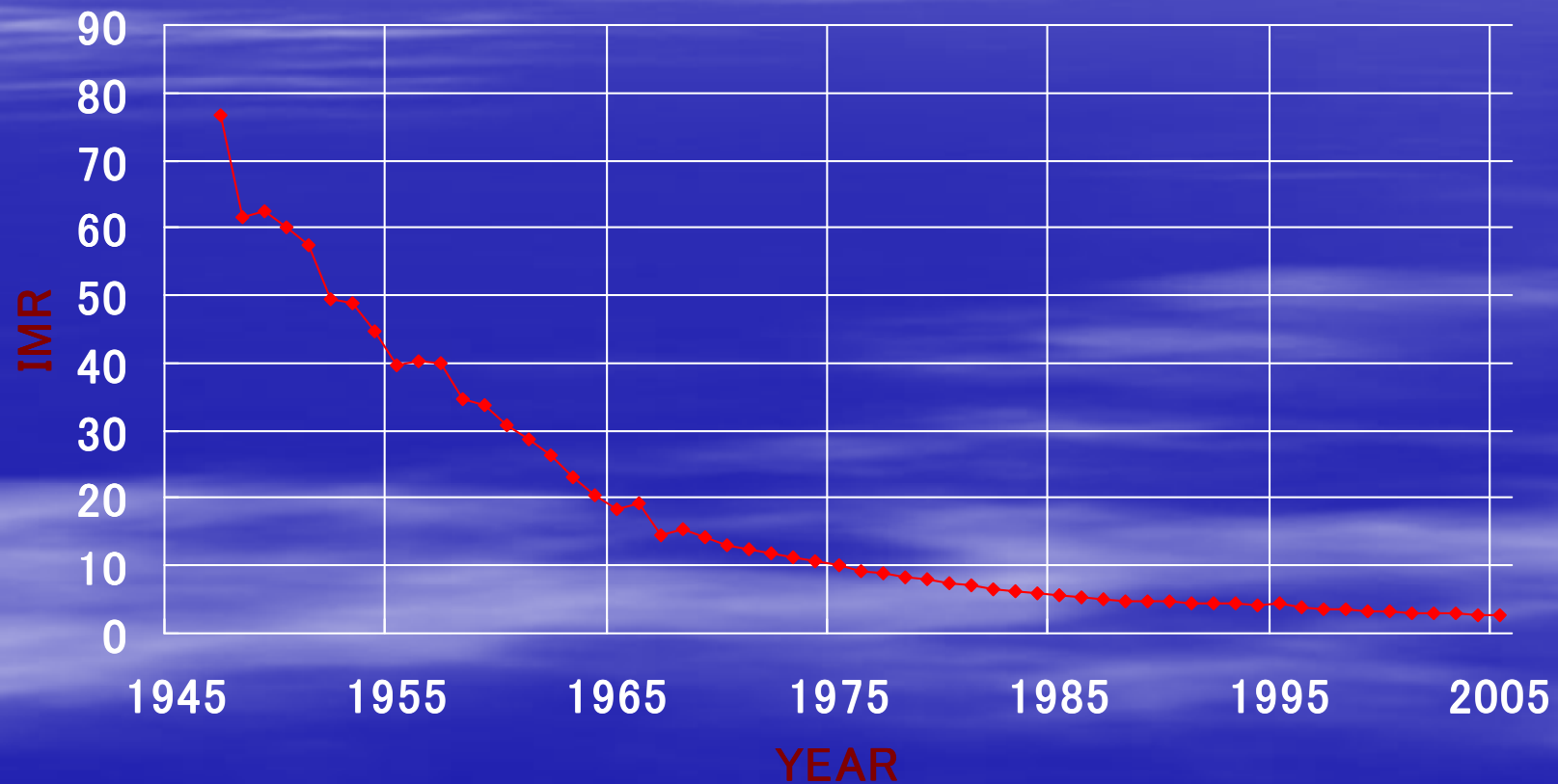
- Strong commitment by central government
 - Promoting good practices as a way to scale up
- Integrated Approach on MCH
 - MCH handbook as a tool for integrated services.

Bottom Up

- Service expansion to the communities by health workers
 - Public health nurses, midwives, as well as private physicians
 - Face-to-face communication in communities through outreach activities
- Support of the workers' activities by community volunteers
 - Child Rearing Associations by community volunteer groups (AIKU Groups; 1936-), Women's Anti-Tuberculosis Association (1950-)

One positive outcome

“Rapid decrease of IMR in Japan”



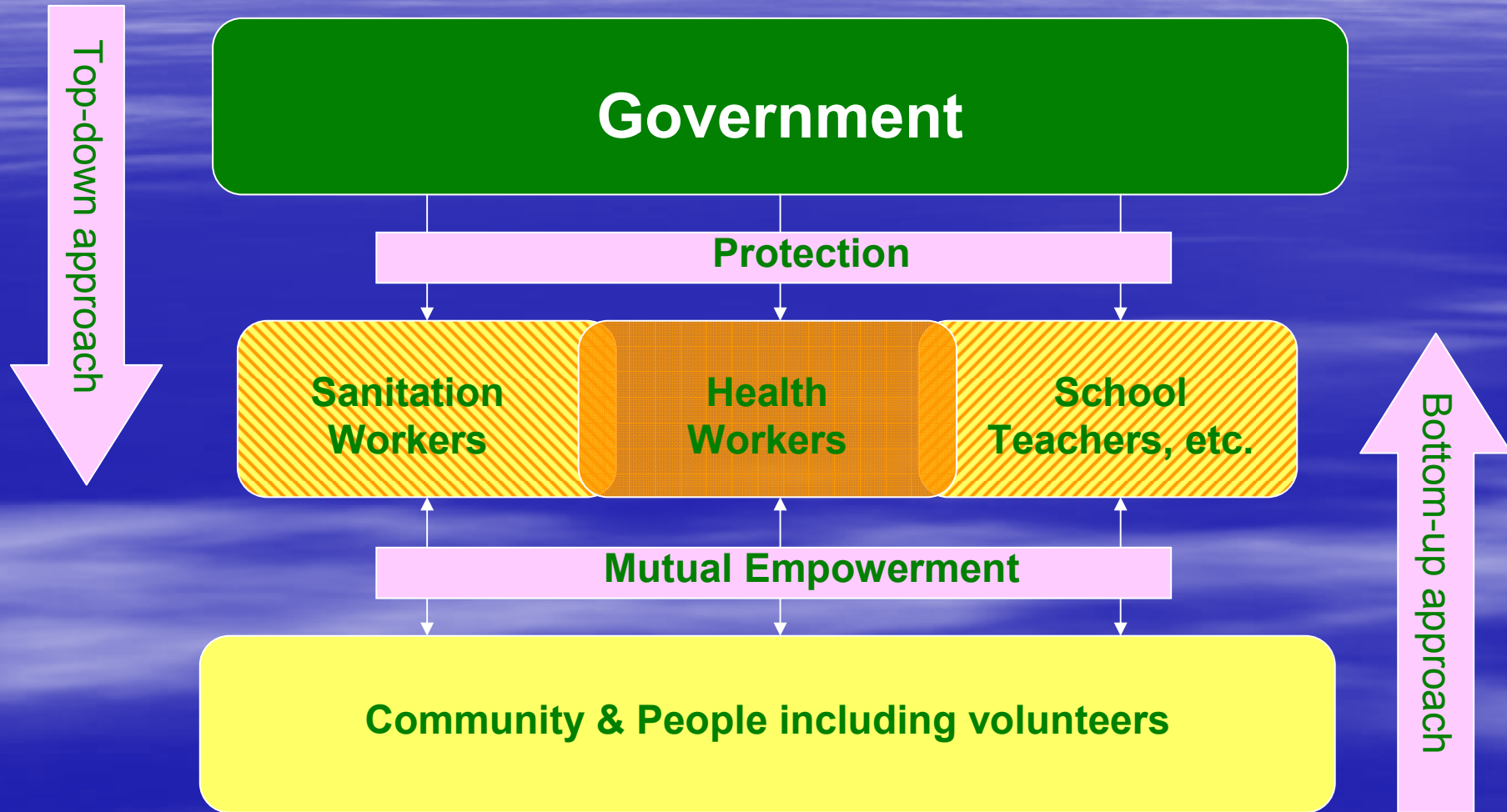
Sources: Ministry of Health, Welfare and Labor, Japan, 2006

Lessons learned from Japan's Experience

- Success of “two-sided” strategy
 - Strengthening of both top-down and bottom-up approaches
- Success of “selection and concentration” strategy
 - Focusing mainly on tuberculosis and MCH
- Success of health system strengthening
 - Service Integration through guidance tools such as Mother and Child Health (MCH) handbook
 - Wide spread of health workers to local communities
- Success of capacity development both for health workers in the community and volunteer organizations

Health System Strengthening

-Two sided strategy-



Health System Strengthening

-Support of health care workers-

- Human resource development and retention as essence of health system strengthening
 - Human resource development through empowerment including training, learning, motivation, etc.
 - Human resource retention through protection including financing, leadership and political commitment, etc.

- The essence of health systems is humans
 - *People are a vital ingredient in the strengthening of health systems.*
 - *When health workers leave to work elsewhere, there is a loss of hope and a loss of years of investment.*

Dr. Lee Jong-wook, World Health Report, 2006

Better balance in global health financing

- Challenges for more efficient investment between vertical program v.s. HSS..
 - Seeking new funding sources for HSS, while maintaining existing resources for vertical programs.
 - Seeking new ways to reallocate existing resources such as the GF to health system strengthening

How can we work them out?

Global action through participatory approach

- Creating political momentum and widening policy space in global politics
- G8 summit is the place to facilitate policy implementation

Study group on “Challenges in Global Health and Japan’s contributions”

- WG Leader : Prof. Keizo TAKEMI

WG members

- NGO representatives

- JCIE (Japan Center for International Exchange) → **WG secretariat**
- JOICFP (Japanese Organization for International Cooperation in Family Planning)
- Health Policy Institute, Japan
- The Nippon Foundation

- Experts Univ. of Tokyo, Osaka Univ., Waseda Univ.

IMCJ (International Medical Center of Japan)

NIPH (National Institute of Public Health)

- Governmental agencies

- JICA (Japan International Cooperation Agency)
- JBIC (Japan Bank for International Cooperation)

- Ministries

- MOFA (Ministry of Foreign Affairs)
- MHLW (Ministry of Health, Labour and Welfare)
- MOF (Ministry of Finance)

* UN agencies are invited at moments as observers