



JICA experiences in Health and Human Security



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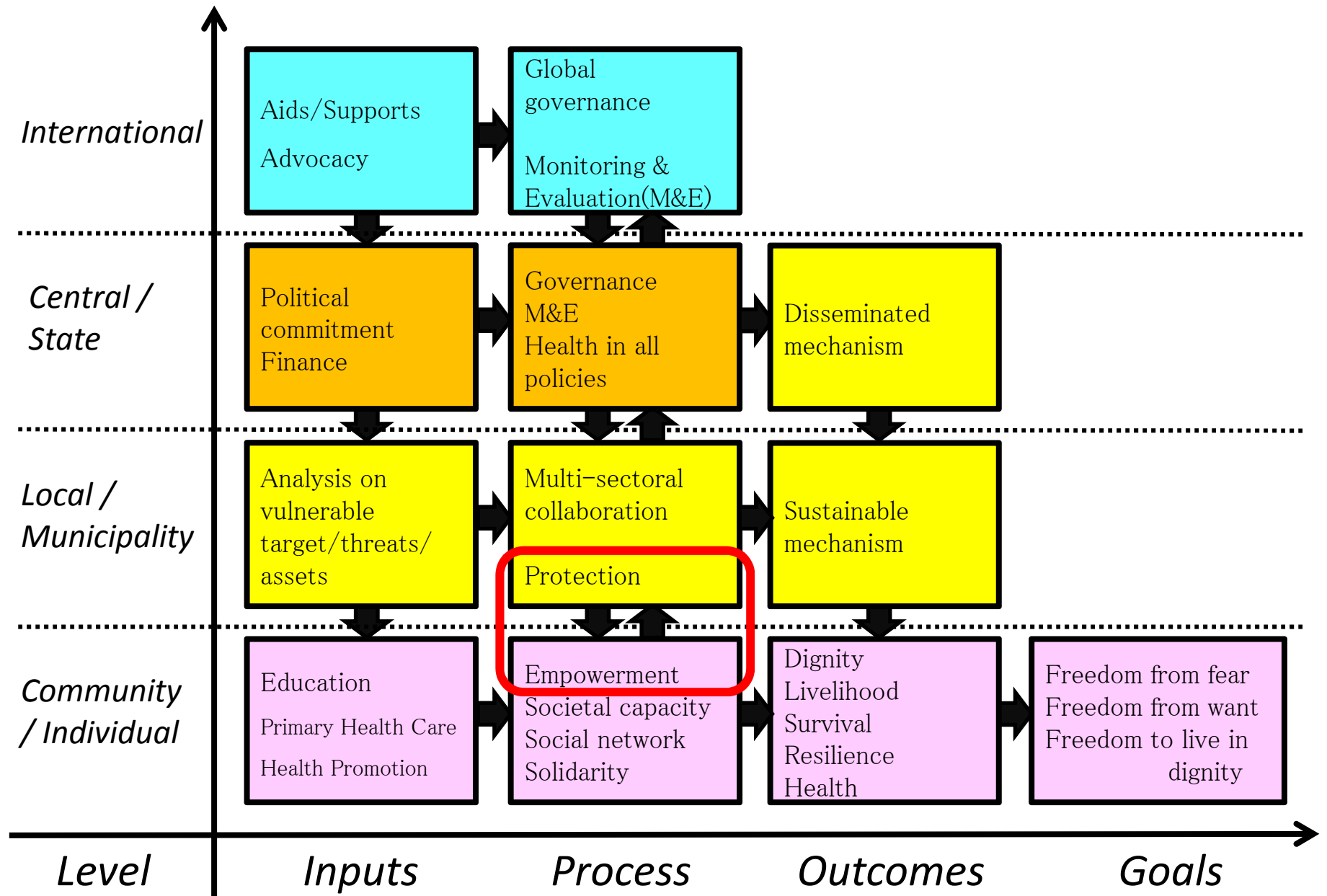
Dr Octavio Lenín Pérez



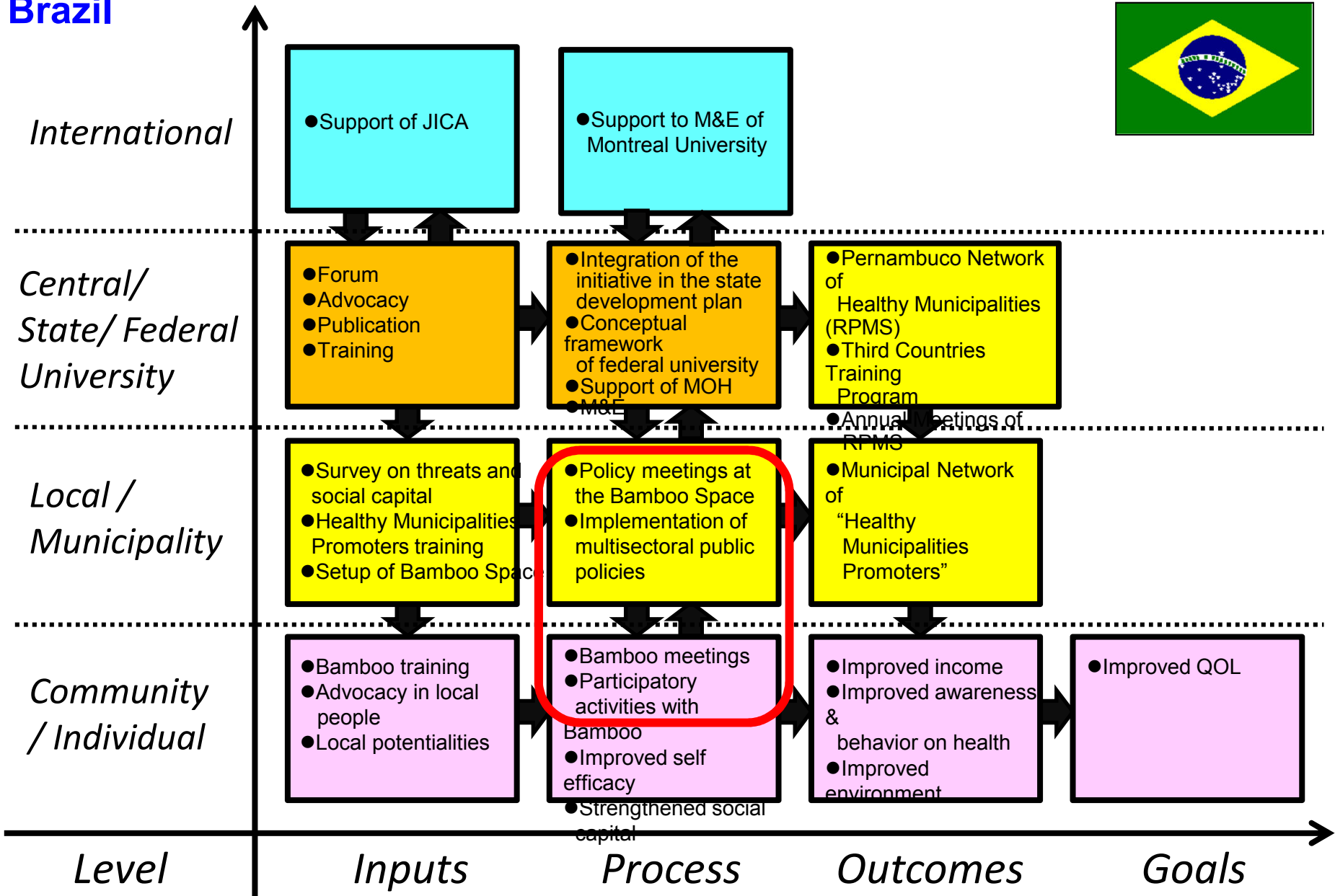
Dr Kota Yoshioka



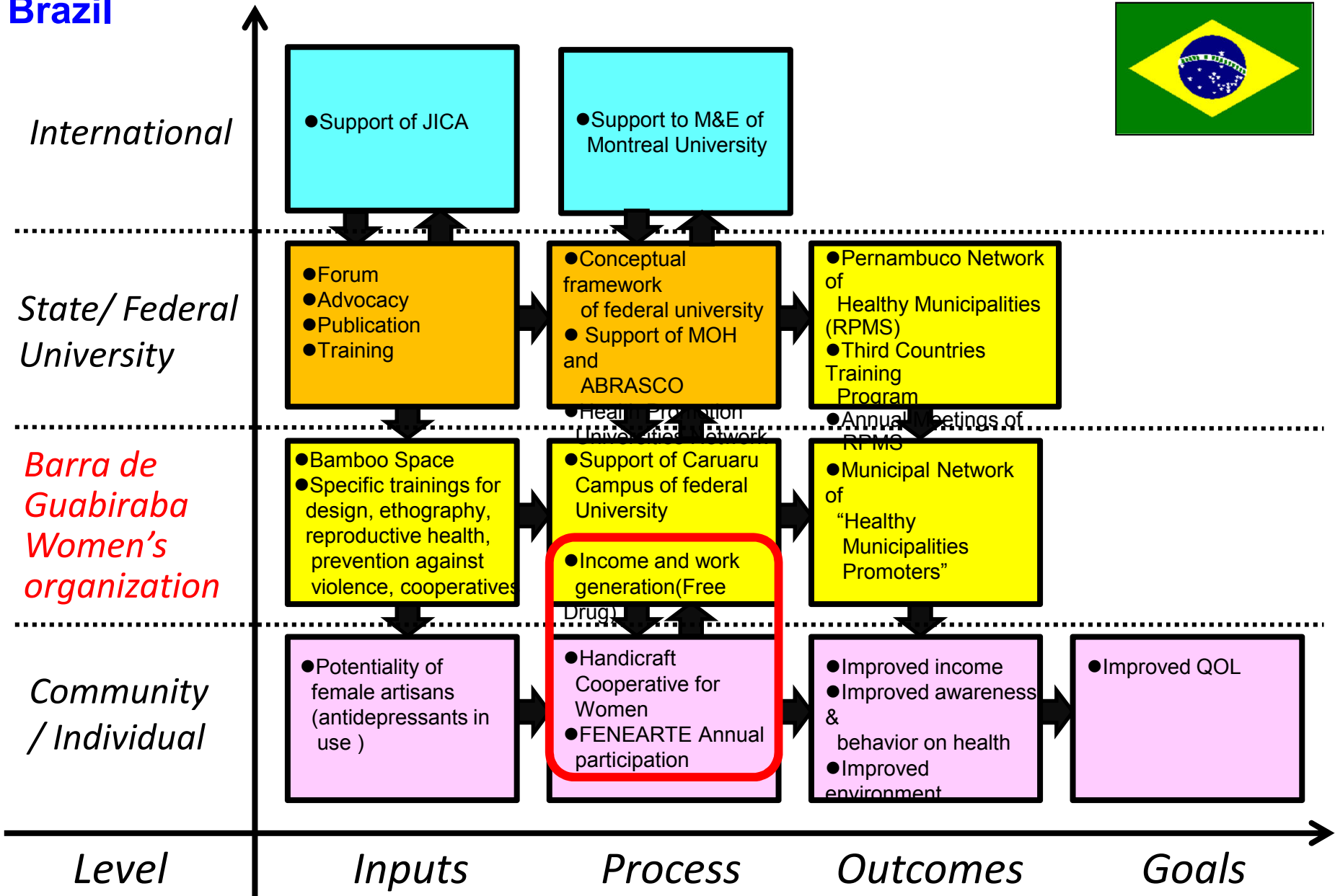
Cascade Model of Human Security in Health



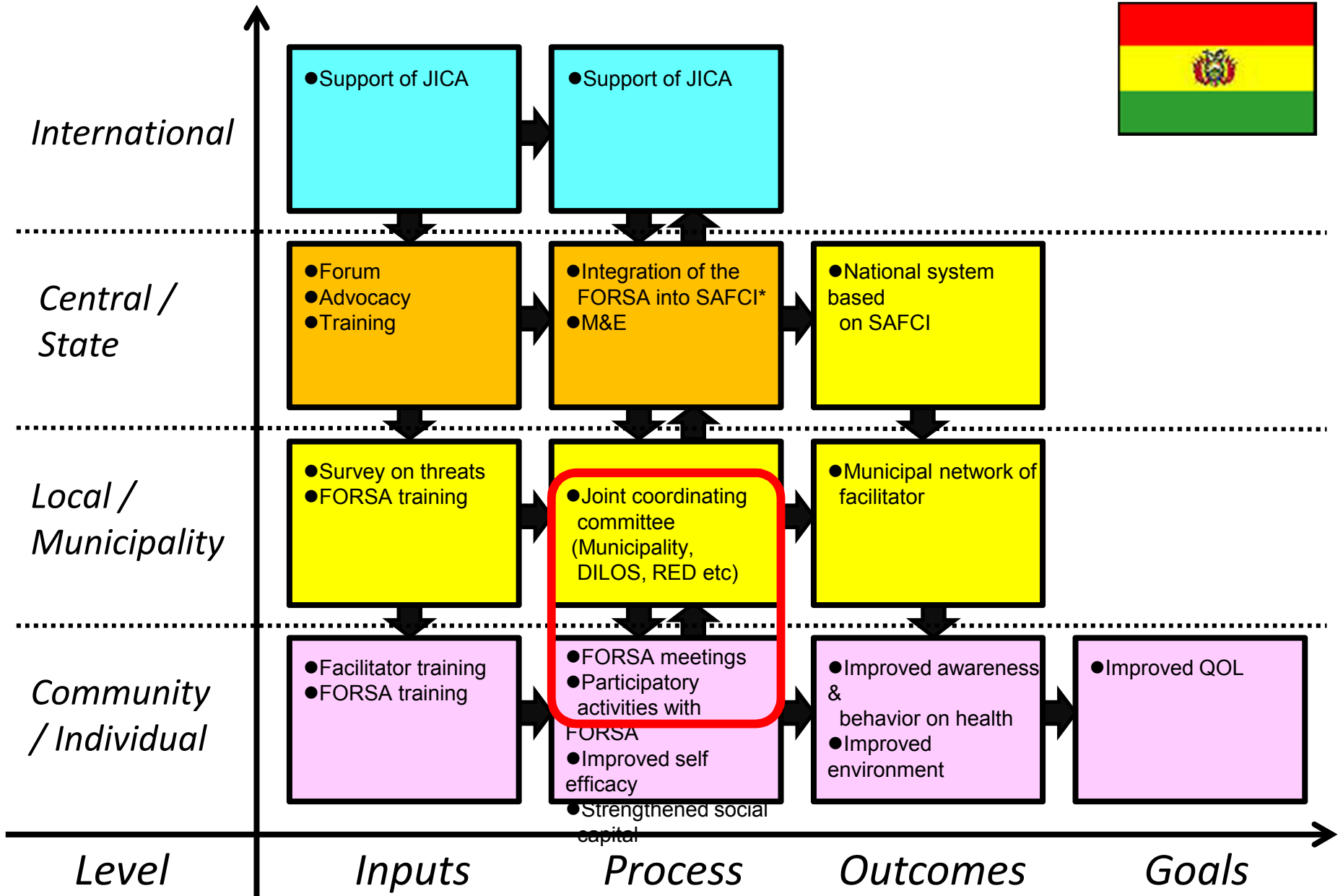
Case study 1: Healthy Municipalities Project in the northeast Brazil



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Case study 2: FORSA Santa Cruz Project in Bolivia



Cross-sectional evaluation of Community-based Health Promotion activities in Santa Cruz, Bolivia

Objective: The study aimed to elucidate the extent to which the Community-based Health Promotion activity via the FORSA model affected capacity development, social capital reinforcement and health related QOL.

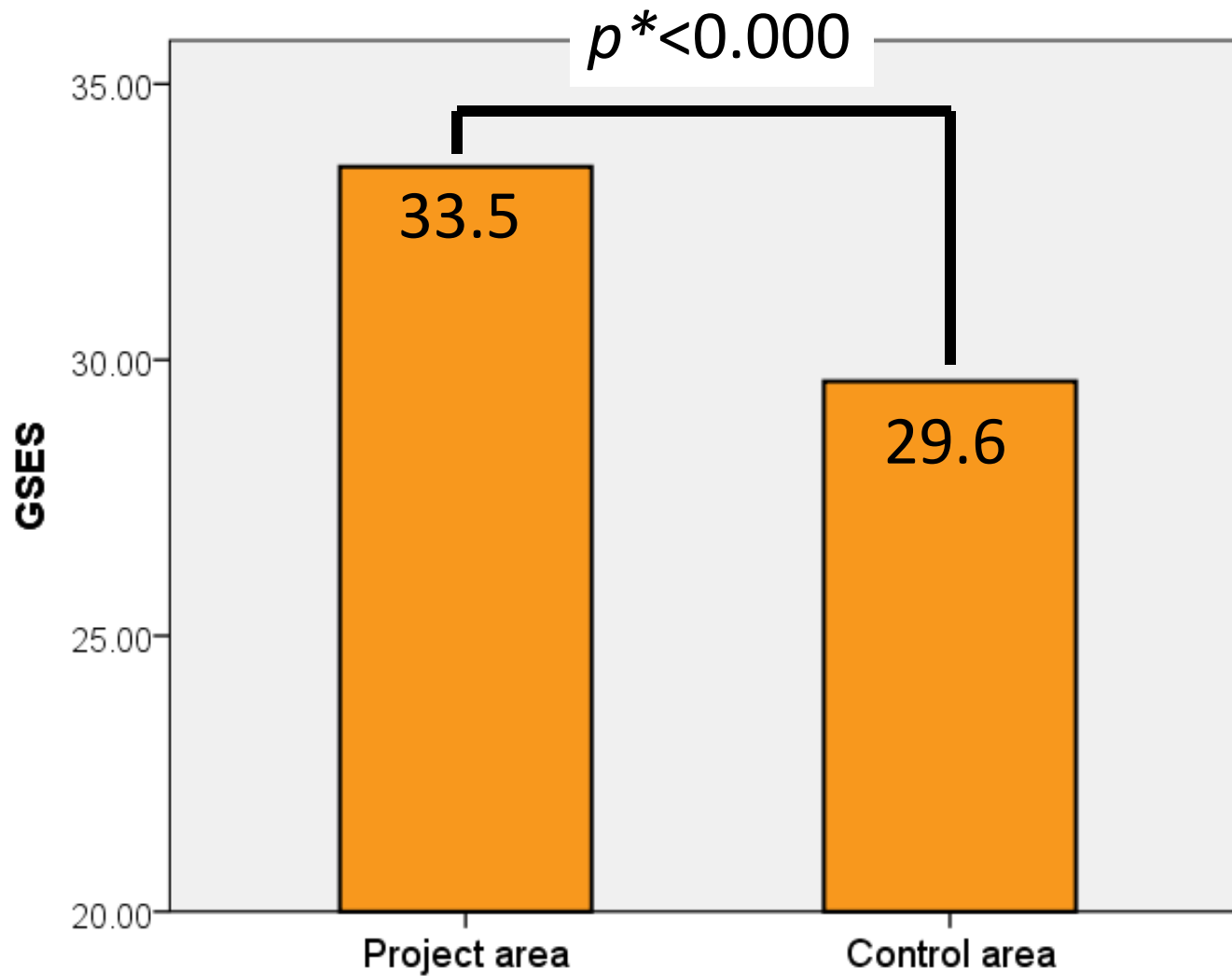


Result-1; Participant's characteristics

Item	Total (n=453)	Project area (n=340)	Control area (n=113)	p value*
Age (years \pm SD)	32.8 \pm 10.0 Min=16 Max=73	32.6 \pm 9.2 Min=17 Max=73	33.3 \pm 12.0 Min=16 Max=73	0.504
Gender	Male=111 Female=342	Male=63 Female=277	Male=48 Female=65	0.000
Educational Attainment (n(%))	Non=14(3.1) Primary=105(23.2) Secondary=238(52.5) Technical=42(9.3) College=54(11.9)	Non=6(1.8) Primary=74(21.8) Secondary=184(54.1) Technical=31(9.1) College=45(13.2)	Non=8(7.1) Primary=31(27.4) Secondary=54(47.8) Technical=11(9.7) College=9(8.0)	0.021

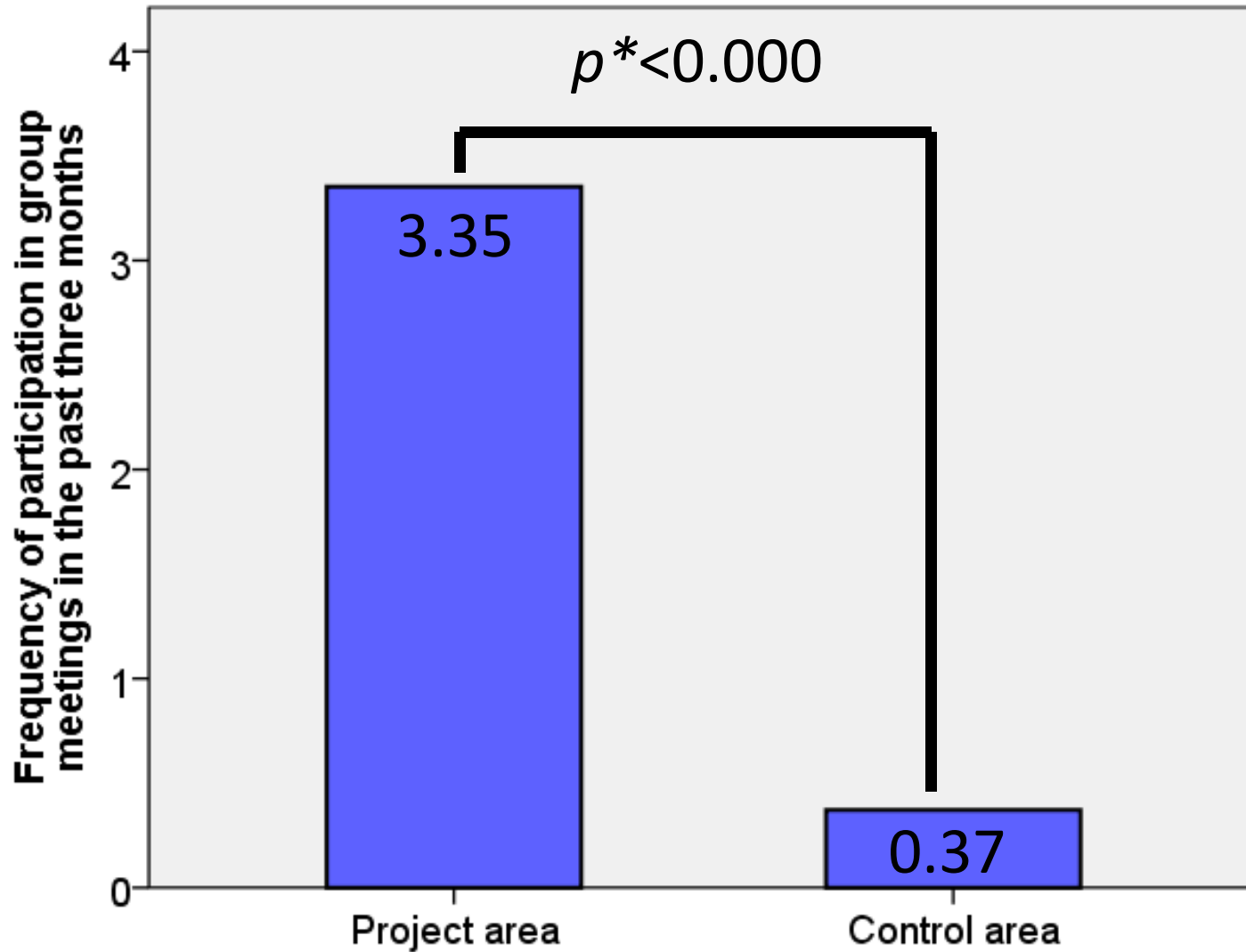
*; t-test, χ^2 -test

Result-2; General Self Efficacy Scale by area



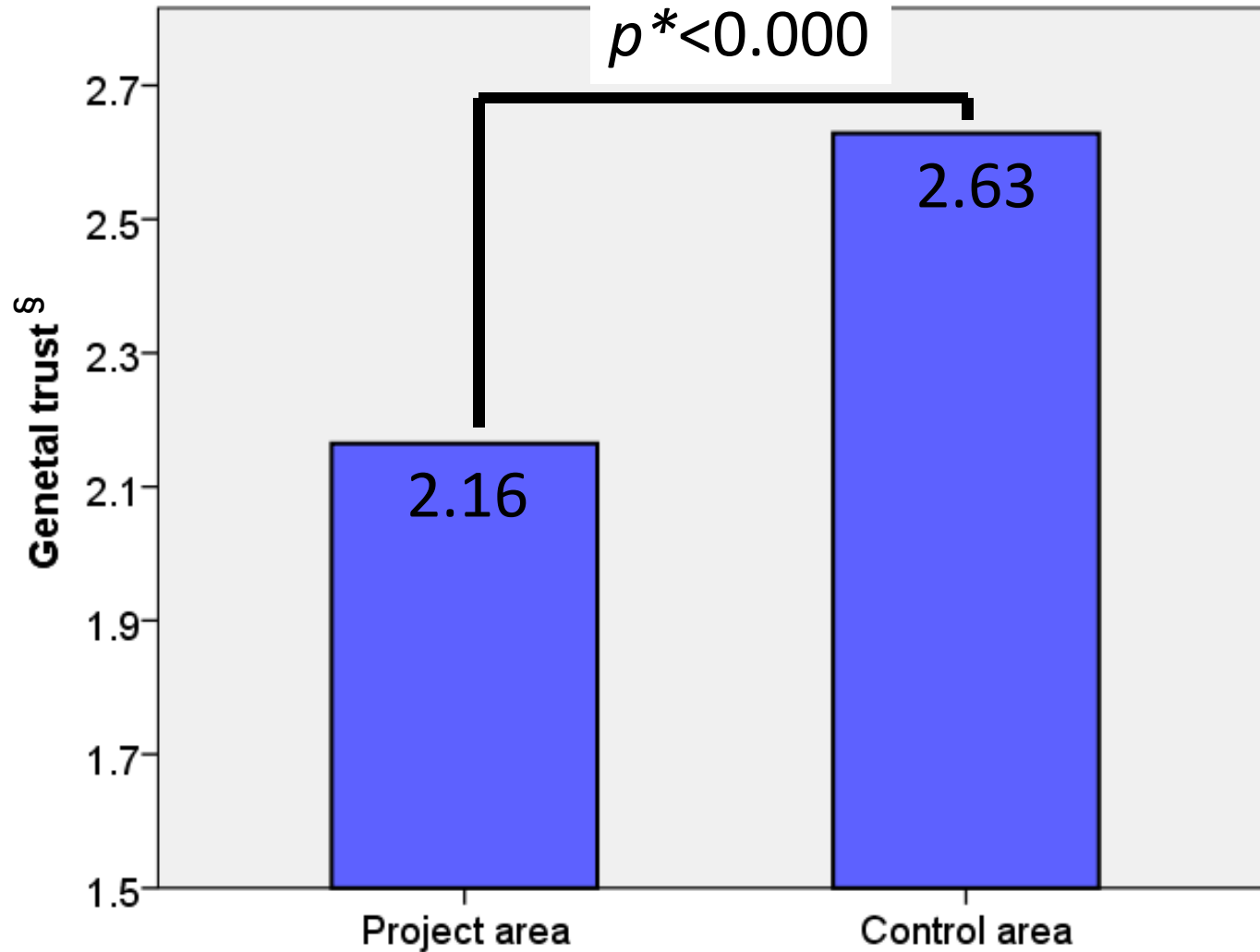
*; ANCOVA adjusted for gender and educational attainment

Result-3(1); Formal group participation by area



*; ANCOVA adjusted for gender and educational attainment

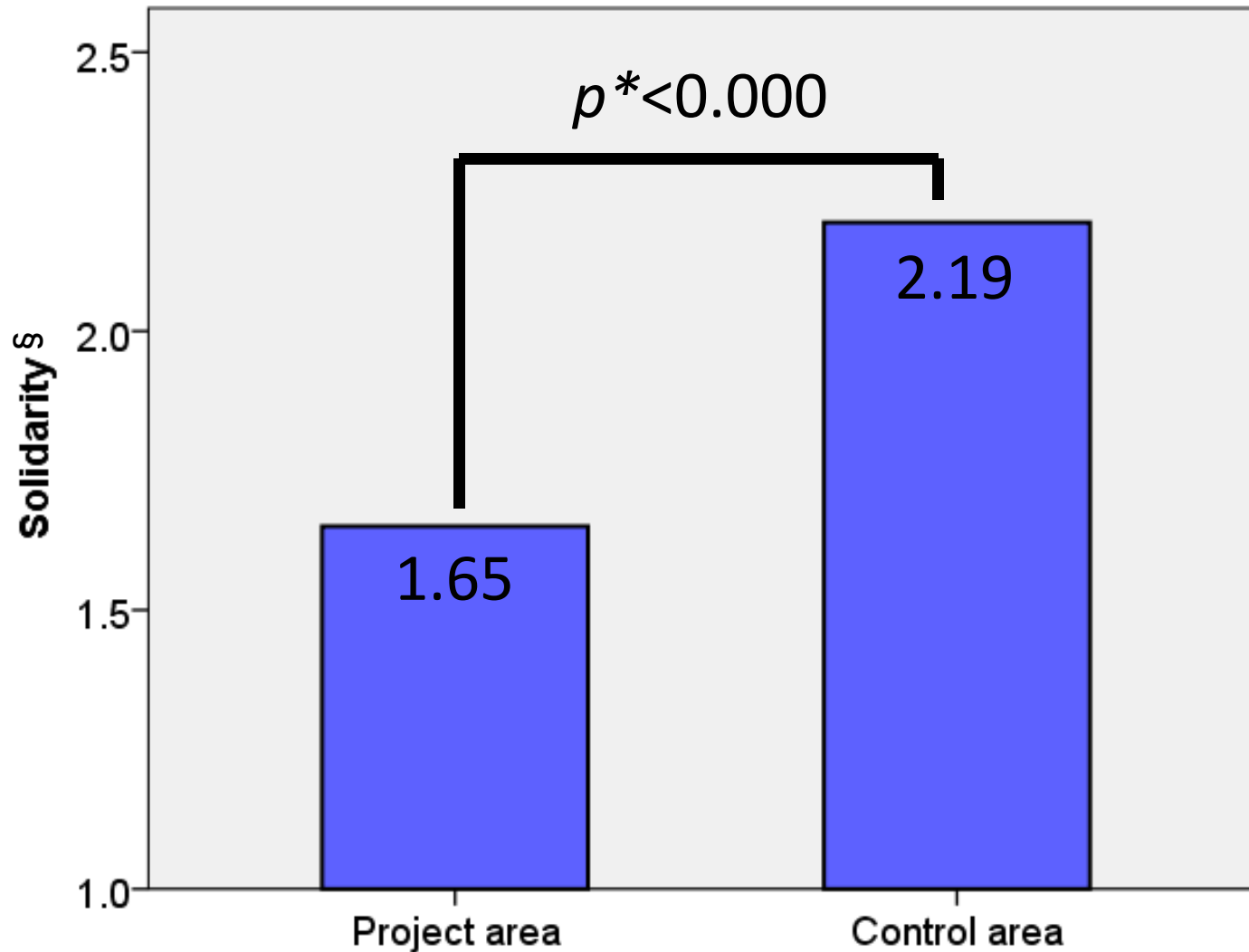
Result-3(2); General trust by area



§ ; General trust inquired “General speaking, would you say that most people can be trusted” indicating that lower score means higher general trust.

*; ANCOVA adjusted for gender and educational attainment

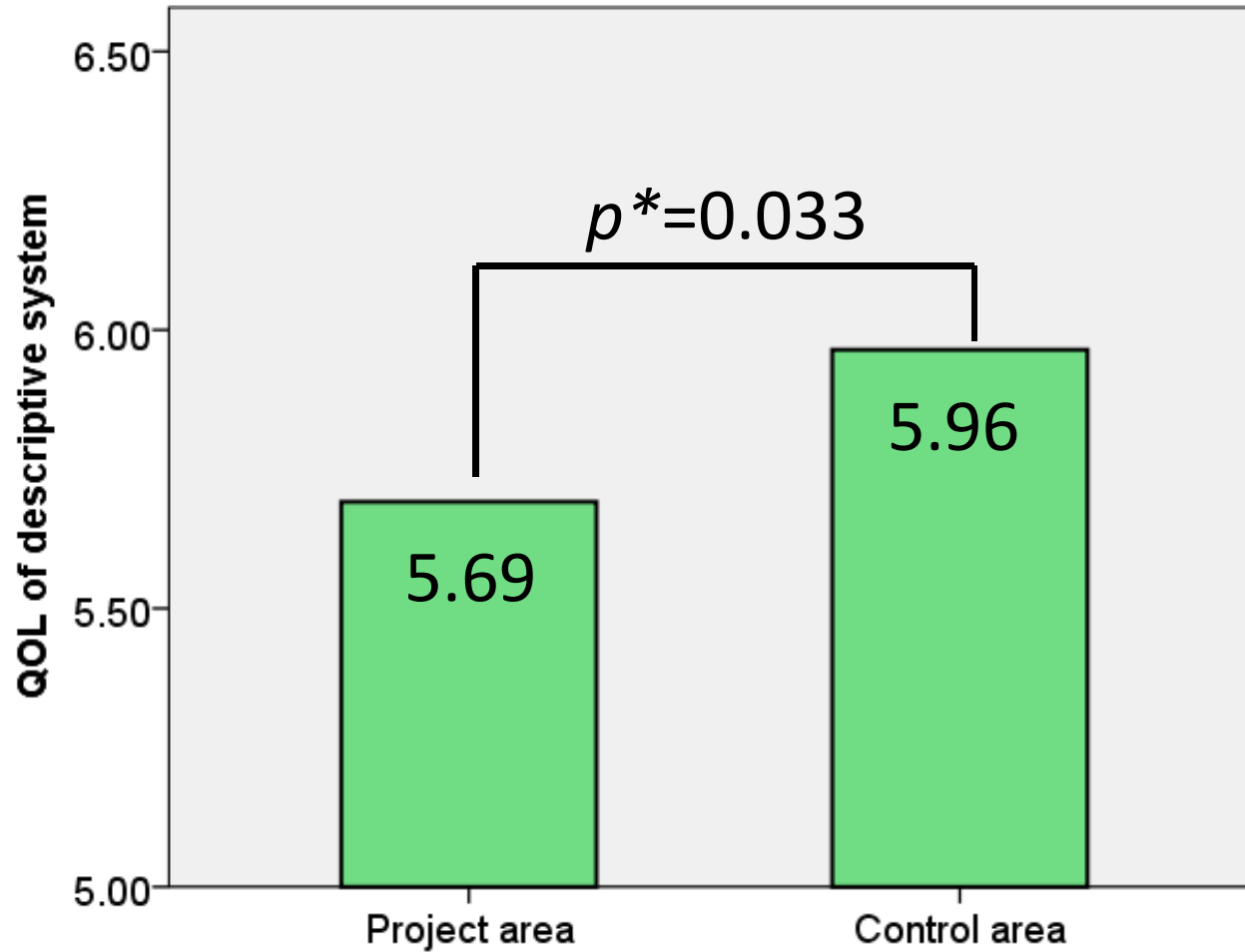
Result-3(3); Perceived solidarity by area



§ ; Solidarity inquired “In general, do you agree or disagree; most people in this village are willing to help if you need it?”, indicating that lower score means higher solidarity.

*; ANCOVA adjusted for gender and educational attainment

Result-4; Health related QOL by area

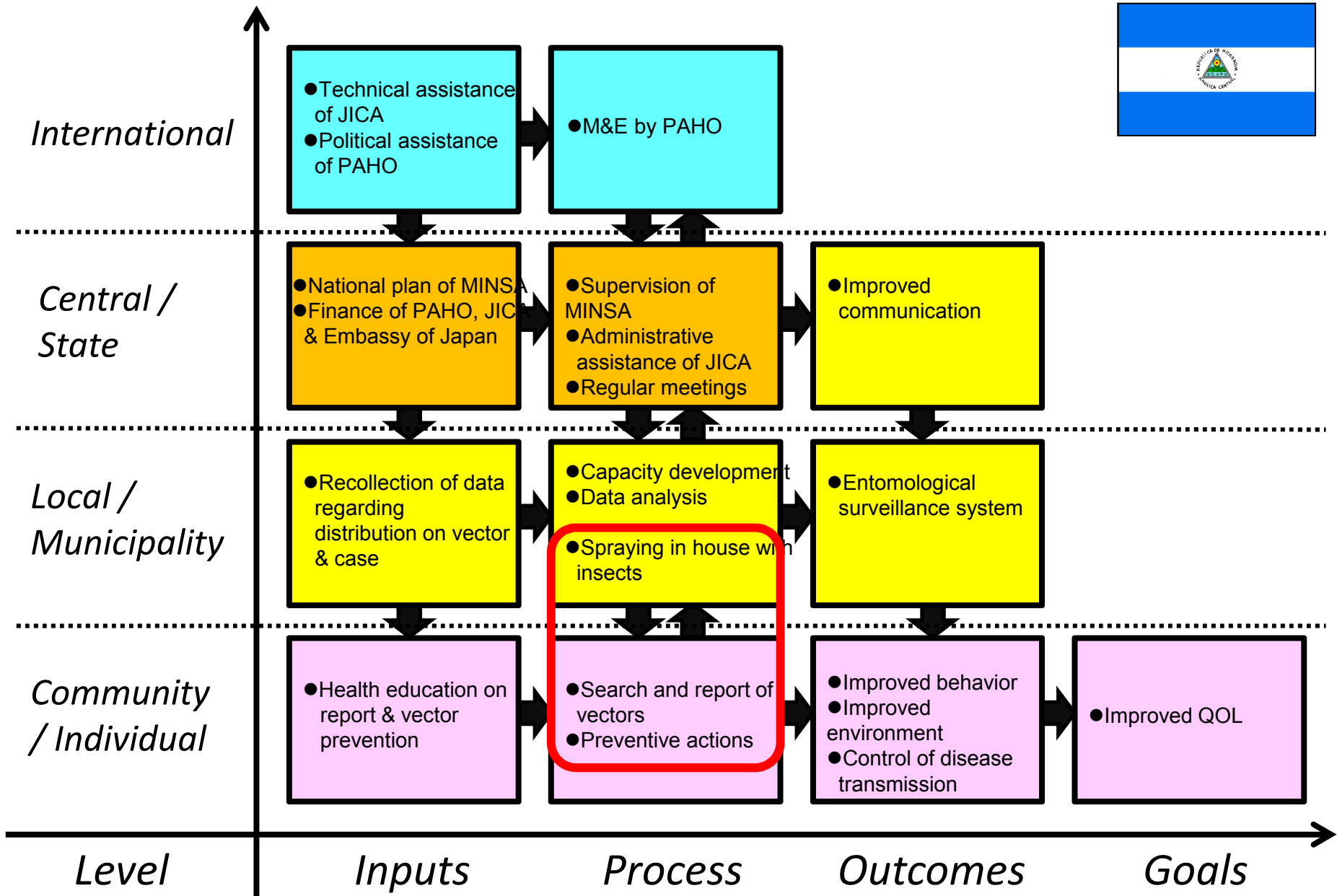


*; ANCOVA adjusted for gender and educational attainment

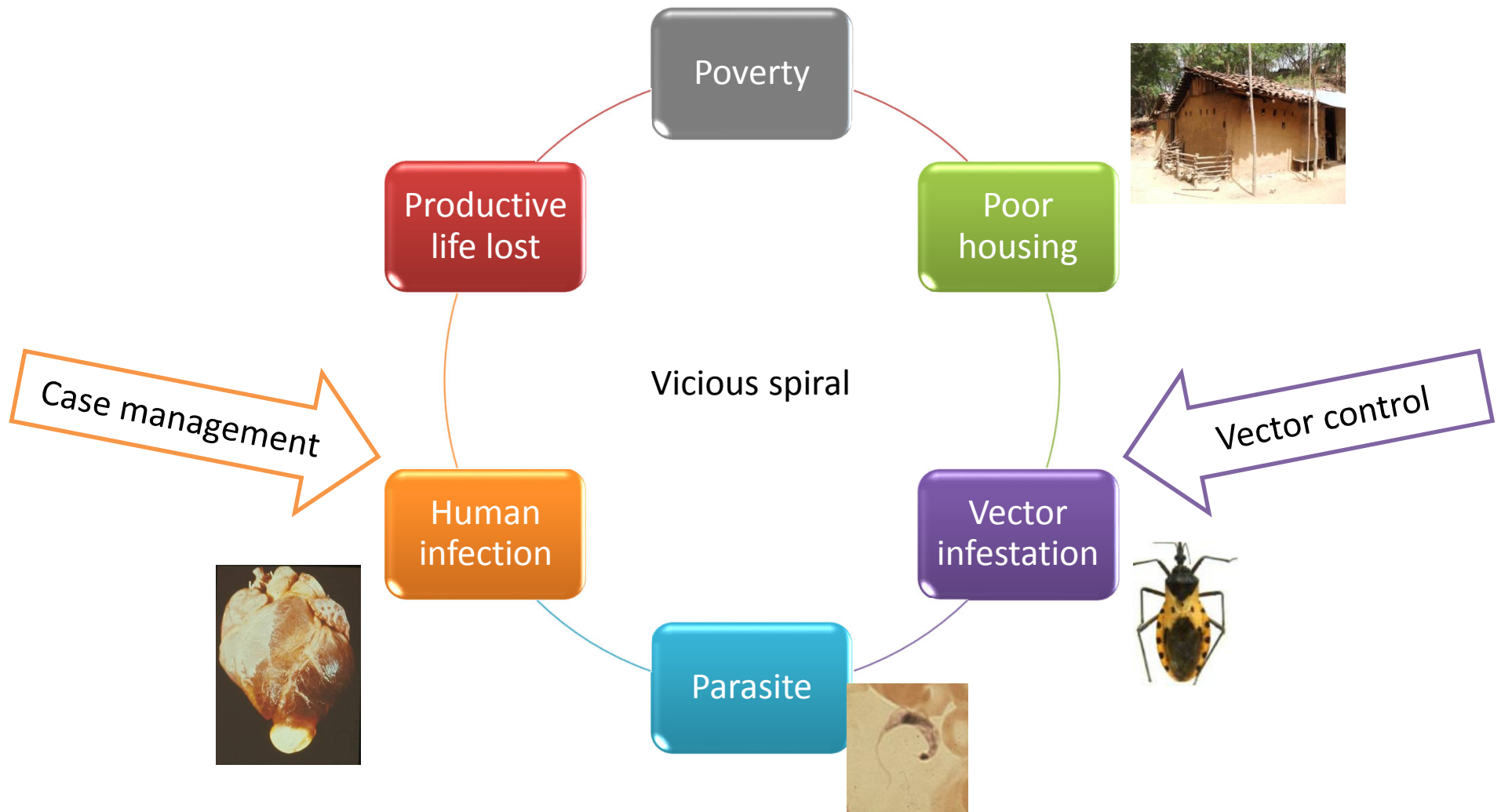
Conclusion

1. The findings show that in the project area compared to the control area, people were likely to have significantly stronger general self-efficacy, more frequent participation in the community activities, more robust general trust and solidarity.
2. The FORSA Model has statistically contributed to health related QOL.

Case study 3: Chagas' Disease Control Project in Nicaragua



Control of Chagas disease: Freedom from fear and want



Sustainable vector control: Integration of “Protection” and “Empowerment”

