

Overview of PH-Japan (People's Hope Japan)

First certified NPO by Japan Tax Agency

April 2018

History



- 1997.1 Project HOPE Japan, a volunteer organization, was established as a Japan Branch of US NGO Project HOPE. Founders: Yokogawa Electric Corp., Hewlett-Packard Japan, Ltd. And GE Healthcare Japan Co., Ltd.
- 1999.7 Certified as a Non-Profit Organization by the Economic Planning Bureau of the Japanese Government
- 2001.12 Certified by the Japan Tax Agency as the Certified NPO (since 2014 certifying organization is Tokyo Municipal Government.)
- 2006.4 Reorganized as PH-Japan (People's Hope Japan) independent from Project HOPE



In 1958, Dr. William B. Walsh requested the President Aisenhower to dispose a Navy hospital ship for his project. After remodeling it, Dr. Walsh started to extend medical and health care support to the South Pacific countries. Thus the Project HOPE was born.





Mission

In order to help the people in Asia to empower themselves in health care, PH-Japan extends following health and medical educational support, as well as medical and health support in disaster relief.

Presently, PHJ is implementing maternal and child health improvement projects in Cambodia and Myanmar, where the infant mortality rate, under 5 mortality rate and maternal mortality rate are poor.

| | Japan | Cambodia | Myanmar |
|-------------------------------------------------|-------|----------|---------|
| Infant mortality rate (per 1,000 births) | 2 | 25 | 40 |
| Under 5 mortality rate (per 1,000 births) | 3 | 29 | 50 |
| Maternal mortality rate (per 100,000 births) | 5 | 161 | 178 |
| Delivery attended by skilled attendants (%) | 100 | 89 | 71 |
| Average life (years at birth) | 84 | 69 | 66 |

Health Conditions in Southeast Asia

Source: The State of the World's Children 2016

PHJ shares with the world community the Sustainable Development Goals from 2016 to 2030 established at the United Nations meetings. PHJ projects in Cambodia and Myanmar are implemented to achieve the following goals:

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- Goal 3: Good health and well-being for all persons
- Goal 5: Gender equality
- Goal 6: Clean water and sanitation



Activity Sites and Programs



All PHJ projects in Thailand and Vietnam were transferred to local organizations. On October 31, 2016 the PHJ-Thailand Office was closed. Thank you for your support.



Revenue and Expenditure Trend (Grants and Goods included)



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PHJ's Unique Features



Local operation 84.4%

① Dedicated to maternal and child health

 In order to help the people in South East Asia to empower themselves in health care, PH-Japan extends educational support in health and medical services.

② Certified NPO (The first certified NPO by Japan Tax Agency)

Donors enjoy tax exemption benefits

③ Efficient operation with low administrative costs

- Energetic and committed staffs are conducting local operations
- Experienced business people at the head office back up local operations
- More than 80% income is spent for local operations

64.8%



About 100 Myen/year

Income and expenditure (average since 2010)



In February 2018, PHJ implemented the NGO Accountability Self-check (ASC) 2012 to assess its own accountability and successfully acquired the Accountability self-check 2012 certification mark.

The ASC, a set of standards of accountability, was provided by Japan NGO Center (JANIC) for strengthening Japanese NGOs' ability to answer to the expectations and requirements of stakeholders. The standards cover four aspects of NGO's organization management, project implementation, financial status, and information disclosure activities.

http://www.janic.org/MT/img/new/acctblt/ASC2012EnglishJANIC2014April.pdf

PHJ recognizes the importance of its abilities to perform social responsibility and to enhance its organizational reliability and acquired the Accountability Self-check 2012

mark.



*Among 400 international NGOs in Japan, 81 organizations have implemented the ASC2012, as of March 2018.





Beneficiaries Happiness Happiness to enjoy healthy life Staffs' happiness Happiness to connect beneficiaries Donors' Happiness Happiness to bring happiness to others

Corporate Support Programs (2009 ~ 2018)



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|-------------------------------------|---------------------------------------|------------------------------------------------------|-------------------------------------|---------------------------------------------------------------|--------------------------------|
| Ajinomoto | Astellas Pharma | Canon | Edwards Life Sciences | Dunhill Japan | Cartier |
| Nutrition education Indonesia | Delivery health clinic Indonesia | Maternal and child health care Cambodia | PC surgery Thailand | Health clinic with midwife service, Doctor car Myanmar, Japan | Nutrition education Cambodia |
| Hewlett-Packard | NTT Finance | Otsuka Pharma | Daiichi Sankyo | Sumitomo Dainippon Pharma | Takeda |
| Japan | | | | Filama | |
| Donation of PCs & Printers | Health Clinic with Midwife Service | Health clinic with midwife service, | HIV/AIDS prevention | Promoting sound | Cerival cancer prevention |
| East Japan Disaster | Myanmar | Doctor car Myanmar, Japan | Thailand | child growth Cambodia | Thailand |
| NaritaCosmopolitan | Hino Motors | Termo | Yagami | Yokogawa Electric | Unicharm |
| Rotary Club | | OPHU DE | | | |
| Training of midwives Cambodia | CC Prevention Thailand | Blood pressure monitor, etc. Cambodia, Myanmar | Maternal and child health education | Delivery health clinic Indonesia | Donation of masks Thailand |

Cambodia Project (1) September 2014-August 2018



Maternal and Child Health Improvement in Kampong Cham





[Project site] Steung Trang Health District, Kampong Cham Province Population: 126,000 persons Expecting mothers; 2,900

[Project goal]

To help the health center strengthen its services so that expecting mothers and newborns have access to the continuous health care services.

[Expected achievements]

① strengthen health care services implementation capabilities and establish a solid system

② improve health care knowledge of villagers so that they can take preventive actions

③ enhance cooperation between district health administration and health facilities

[Project period]

2014.9~2018.8

[Benefitiaries]

District health administrative staffs, health center staffs (midwives) and women and children in the Project site

[Regional Health Administration System and PHJ's Project]

The Cambodian health administration system is described below. PHJ's scope is shown in a red line (operational district, health center and mothers and children.







PHJ Cambodia Office

Cambodia Project (2) September 2014-August 2018



1. Strengthen health care service

2017 achievements



- Monthly health meetings held Facilitation skill check to keep average 90 points and over
- Evaluation, planning workshop
- Organized twice (Oct. 2016 and July 2017)



- 2017 achievements
 - Implemented skill monitoring of health admin. staff and primary midwives and revised check list
 - Training of primary midwives (lecture, practical training at hospital, follow-up)
 - Midwives coordination meetings (held every 3 months)

3. Enhance health facility fundtions

2017 achievements

- · Health center admin. monitoring with health admin. officers (Kept 90 points and over for maintenance of medical equipment and sanitary conditions)
- Organized Health center steering committee meeting and health volunteer meetings
- Refresh training of health center steering committee members

Sanitary conditions maintenance

Medical equipment maintenance



4. Improve health awareness of villagers

- 2017 achievements
 - Health education and monitoring by health volunteers
 - Refresh training of health volunteers
 - Training of community health volunteers
 - Distribution of gift sets (maternal health checks before and after delivery, family planning)







Photo right: Gift set B

Pilot Project: Healthy growth of children

A person's life health is determined during the 1,000days after birth. To ensure the healthy growth, PHJ promotes health care service at home from pregnancy to the child's two years birthday.

- July 2016 to June 2018 (2years) 2017: Preparation for the pilot project
- Target area: 7 villages under Kupotagon Health Center. Stuntron Health Administration District
- Target population: 8,673 persons (Estimated) pregnant women 247)
- Benefitiaries:

Health center staff 7 Community health volunteer 19 Children of under two years old and their parents



Myanmar Project (1) October 2017 – September 2020



Strengthening Maternal and Child Health Improvement in Tatkon Township





PHJ 's project site is the Tatkon Township under the Nay Pyi Taw Union Territory.

The children in Tatkon Township

PHJ implemented the first project of maternal and child healthcare improvement at Tatkon Township from August 2014. Since October 2017, PHJ is implementing the second project of maternal and child health care improvement in rural area under Myauk Myiek Rural Health Center.

[Project site]

Twenty seven (27) villages under Myauk Myiek Rural Health Center area, Tatkon Township, Nay Pyi Taw Union Territory (population: 37,174 persons).

[Benefitiaries]

About 565 pregnant women per year, about 560 infants per year, 7 midwives, 6 auxiliary midwives, 6 public health supervisors II, and 130 maternal and child health promoters.

(Objective)

Mothers and children in the project site receive the appropriate health service including antenatal care, delivery by skilled birth attendant, postnatal care, newborn care, vaccination, family planning, etc. under safe environments.

[PHJ's four approaches]

- 1. Ensuring safe delivery environment in both medical facilities and at home.
- 2. Midwives and auxiliary midwives improve their skills to provide appropriate maternal and child health services.
- 3. Pregnant women and mothers improve their health knowledge.
- 4. Training volunteer maternal and child health (MCH) promoters to promote cooperation between pregnant women/postpartum women and midwives.
- 5. Improving cooperation between health officers to reflect the project achievements in the annual health planning of the Department of Public Health, Tatkon Township.

[Expected achievements]

- Improvement of delivery at medical facilities to over 60%, antenatal care to more than four times, postnatal care five times, newborn care more than 5 times, vaccination rate exceeding 95%, contraceptive prevelence rate more than 75%.
- Expand the model project to other sites.
- Health services will be continuously provided, despite transfer and change of midwives.
- · Building the monitoring system of the Tatkon Township as the local health administration center





5 Sub Rural Health Centers (SRHC) covering 27 villages

Sub Rural Health Center



MCH education at village



Midwife talking to mother and newborn at medical facilities

Myanmar Project (2) August 2014- August 2017



Achievements of the First Project of Maternal and Child Health Improvement at Tatkon Township

[Project site]

Tatkon Township under the Nay Pyi Taw Union Territory Population 200,000 Target: Five (5) Sub Rural Health Centers (SRHCs) and 24 villages [Objective]

Expected mothers receive appropriate health care service for safe delivery.

[PHJ's approach]

- 1. Strengthening transportation system
- 2. Building medical facilities & provide medical equipment
- 3. Enhancing midwife and auxiliary midwife functions
- 4. Maternal and child health (MCH) education

1. Strengthening transportation system

Donated the second hand ambulance from Japan to the Department of Public Health, Tatkon Township. To encourage the effective use of the ambulance, PHJ made promotion activities for transportation from the Tatkon Township Hospital (secondary hospital) to the Nay Pyi Taw Hospital (Tertiary hospital).

2. Building medical facilities and providing medical equipment

Donated three newly built SRHCs, each of which is equipped with a delivery bed, bed, chairs, etc. The resident midwives started to extend health care services.

In one village under one of the three SRHCs, the delivery at medical facilities increased from 38.8% to 51.6% (medical facilities + SRHC) in one year after the building of the SRHC.

Ambulance



Provided training of 43 midwives aimed at increasing their knowledge and skills on antenatal care, vaginal delivery attendance, and postnatal care. PHJ also organized meetings of midwives working at medical facilities and auxiliary midwives working at villages periodically to enhance their cooperation.

4. Maternal and child health education

Provided training to 50 MCH volunteers in 5 SRHCs. Following this training, each SRHC organized monthly MCH education with these volunteers and extended the MCH education to 809 women in total.

[Achievements of the First Project]

- 1) Established trust between local counterparts
- 2) Acquired license, permits, etc. necessary for project implementation
- 3) Executed project activities involving the target community
- 4) Met the local requirements both in hardware and software



The left building is the clinic, while the right is the midwife's residence.



A delivery bed donated to the SRHC



Training of midwives



Training of MCH volunteers

Japan Disaster Support Program (2011-

Reconstruction support of hospitals suffering from the disaster – support scheme ended in December 2017. From 2018 PHJ will support the people in Fukushima.



Mori Obsterics & Gynecology Clinic Comprehensive care beds

Newly built public housing

Home visit using doctor car

Diatric treatment

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Donation for East Japan Disaster (from March 15,2011 to December 31, 2017) Unit: M Yen

| Revenue | Cash | 155.43 |
|-------------|----------------------------------------------------------|--------|
| | Goods | 209.97 |
| Expenditure | Dispatch of doctors, procurement of medical equipment | 112.49 |
| | Support of goods | 209.97 |
| | Transportation, staff | 33.15 |
| Balance | | 9.79 |



New Ishinomaki City Hospital



Restored Tagajo Kidney Clinic

PHJ Board of Directors as of September 6, 2017



| Title at PHJ | Name | Title at respective organization | | |
|------------------|--------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Chairperson | Shingo Oda | Former President, Hewlett-Packard Japan, Ltd. | | |
| Vice Chairperson | Shigeru Tanaka | Professor Emeritus, Keio University | | |
| Director | Akira Haseyama | President, Keio University | | |
| " | Kimimasa Hiromi | Managing Director, PHJ | | |
| " | Yuji Inokuchi | Chairman, All Japan Hospital Association; Chairman of Medical Foundation Jukoukai | | |
| " | Katsuto Kohtani | Former President, Hewlett-Packard Japan, Ltd. | | |
| " | Ken-ichi Matsumoto | Advisor, JFMDA; Chairman, Sakura Global Holding Co., Ltd. | | |
| " | Fumio Mizoguchi | Former Auditor, Yokogawa Electric Corporation | | |
| " | Miyuki Moriguchi | Citizen of Musashino City | | |
| " | Yasuo Nakajima | Professor, St. Marianna University School of Medicine | | |
| " | Mitsuhiro Saotome | First Ambassador of Civil Society of Japan, Former Ambassador of Japan to the Republic of Zambia and Republic of Malawi | | |
| " | Masayo Tada | Chairman, The Federation of Pharmaceutical Manufacturers' Association of Japan; Representative Director and President, Sumitomo Dainippon Pharma Co., Ltd. | | |
| Auditor | Kazunori Yagi | Member of Certified Public Accountants and Auditing Oversight Board, Advisor to Yokogawa Electric Corp. | | |