



part

6

Examples of SSC Projects in Indonesia

TCTPs by Governmental Institutions



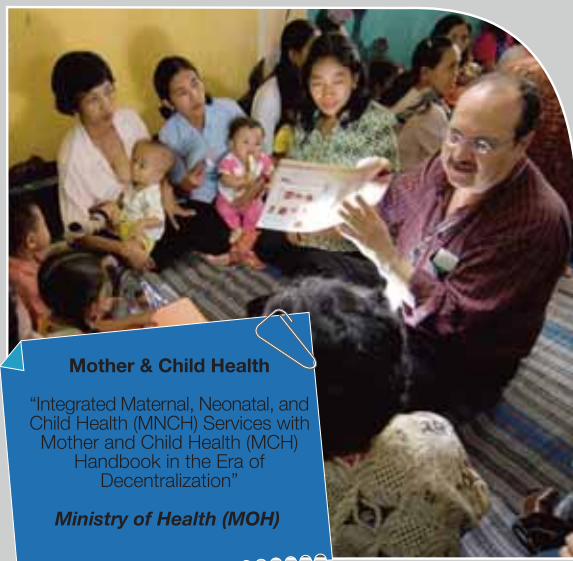
Family Planning
 "Planning and Managing Behavioral Change Communication for Family Planning / Reproductive Health"
National Family Planning Coordinating Board (BKKBN)



Agrobusiness
 "Agrobusiness Technology"
Agency for Agriculture Human Resource Development (AAHRD) - Ministry of Agriculture (MOA)



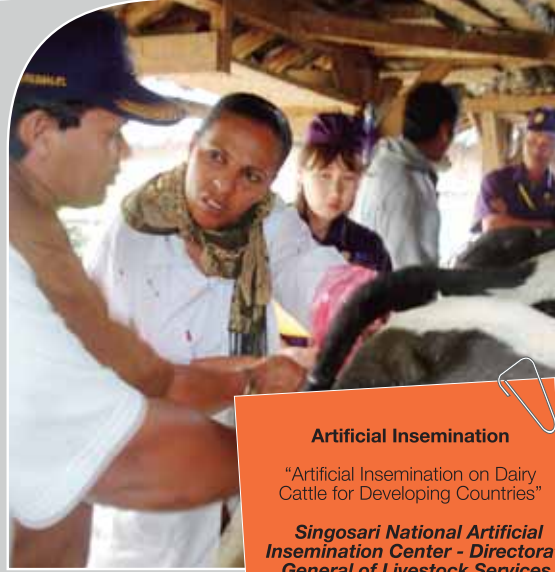
Engineering Education
 "Education for Computer Based Industrial Automation"
Electronic Engineering Polytechnic Institute of Surabaya (EEPIS-ITS)



Mother & Child Health
 "Integrated Maternal, Neonatal, and Child Health (MNCH) Services with Mother and Child Health (MCH) Handbook in the Era of Decentralization"
Ministry of Health (MOH)



Vocational Rehabilitation
 "Vocational Rehabilitation for Person with Disabilities"
National Vocational Rehabilitation Center (NVRC) - Ministry of Social Affairs (MOSA)



Artificial Insemination
 "Artificial Insemination on Dairy Cattle for Developing Countries"
Singosari National Artificial Insemination Center - Directorate General of Livestock Services, Ministry of Agriculture (MOA)

TCTP on Poverty Reduction: Solving Global Issue of Poverty with a Local Perspective



Poverty has been a pressing and continuing issue throughout the world, especially where limited resources are faced with rapid population growth. Considering its importance, the United Nations (UN) has put the issue of eradicating extreme poverty and hunger as the first target to be met by countries by 2015, as enlisted in the Millennium Development Goals (MDGs). However, even though many poverty reduction programs have been made, there has been the problem of low program-managing capacity of the agencies-in-charge. Moreover, weak coordination among the agencies has been posing as another problem. As a result, many of the programs have not been much effective in achieving the target.

As a means to increase the capacity of government officials, NGO practitioners, and other related stakeholders dealing with poverty reduction programs, the Governments of Japan and Indonesia have been collaborating in conducting a series of international training programs since 2001. Through the trainings, the participants are first expected to have an in-depth understanding of what poverty is, what the indicators - measurement as well as causes - impacts are, including its connection with rural (agricultural) and urban (industrial) development. They will be able to develop proper responses and policies, by addressing the dynamic changes in poverty.

The next objective is for the participants to be able to manage poverty reduction programs - from designing, planning, to implementing - as well as understand and develop local institutions in enhancing the poor communities build their own capacity to help themselves. In achieving those objectives, the participants are not only given (classroom) lectures by Indonesian resource persons, but also taken for field trips around Indonesia to learn the success stories of capacity building on poverty reduction. The training in 2010 featured field trips to the South Sulawesi Province to observe the application of "PLSD", which utilizes the experiences of community-based local governance in Japan, as well as the implementation of "RISE/PNPM PISEW" as part of Japan's contribution to poverty reduction in Indonesia.

The field visit site, Takalar Regency, has been recognized as a "model region" for the importance of local participation and

involvement in poverty reduction and how Participatory Local Social Development (PLSD) frameworks are implemented at the local government and village community's levels. Meanwhile, "RISE/PNPM PISEW" is the project supported by ODA Loan



provided by the Government of Japan (JICA) to accelerate social-economic infrastructure development through access of the poor to economic opportunities and various basic facilities, such as health, education, water and sanitation, and so on.

Basically, the training, which has entered its tenth year, is a means for African and Asian countries to learn from Indonesia's experience and development actors on the efforts made in alleviating poverty through capacity building. Indonesia is believed to be knowledgeable, as it has reduced the number of the poor from nearly 50% during the economic crisis in 1998 to 31.0% in 2010. During the first five years, a total of fifteen countries participated in the training. With the consideration of creating greater impact on each country, the number has been narrowed down to eight countries with more than one person per country in recent years. The consideration was made jointly by JICA and CESS - the organizing institution in Indonesia led by Prof. Mangara Tambunan.



Although the trainings have usually been conducted within a limited period of time, it is believed to have enhanced the participants' understanding on poverty, especially through the practical examples given during the field trips and sharing each other's experience in dealing with the global issue. ■



Supplementary Training on Reproductive Health : Indonesian NGO's Collaboration for Improving Access to Reproductive Health



When as many as 67 countries gathered for an international conference in 1994, they had a consensus on goals for the international community to achieve. The goals, among others, are the reduction of maternal mortality and access to reproductive and sexual health services including family planning. With a similar spirit, the Millennium Development Goals (MDGs) also targets the achievement of universal access to reproductive health by 2015. However, developing countries are still facing difficulties in achieving such target, especially with the on-going issues of population growth as well as maternal-child mortality rates.

One of the things the conference recognized is the importance of closer partnerships between the government institutions and NGOs in promoting successful reproductive health program. That is why JICA collaborated with a Japanese NGO called Japan Organization for International Cooperation in Family Planning (JOICFP) in conducting training programs for NGO personnel from various countries. The trainings focused on sharing Japan's experiences in establishing and sustaining self-reliant reproductive health services. From 2004 to 2009, the trainings included sessions in which selected developing countries shared their own success experience as reference for participants who were also from developing countries.

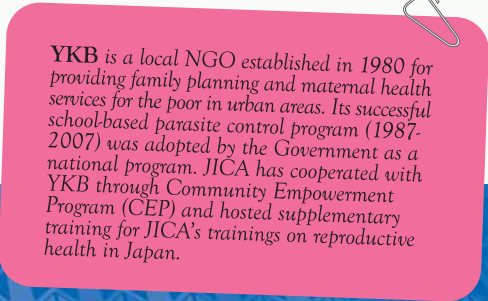
In the first two years (2004 - 2005), the sharing method was through "distant learning" or video teleconference between the participants in Tokyo (Japan) and the resource person(s), who in this case was from Jakarta (Indonesia). The Kusuma Buana Foundation (YKB), a local NGO focusing on family planning and maternal health services, was selected to present on how to

establish and sustain reproductive health clinics with limited situation; a situation commonly shared by the training participants. As a former participant, (in 2001 - 2003), YKB deemed to be sufficient in playing such role. The participants responded positively to the approach and they even suggested actual visits to Indonesia, which was then followed-up by JOICFP.

YKB's cooperation with JOICFP actually dates back to 1984, through a project for the promotion of family planning through parasite control and nutritional improvement activities. Japan's success in controlling parasite infection through primary schools after World War II was then adopted by YKB from 1987 and became the first primary-based parasite (intestinal worm) control program in Indonesia. Targeting the Greater Jakarta Region, the program was implemented through the network of YKB's health clinics. It expanded from 34 to 741 target schools and decreased the prevalence rate from 78.6% to 5% (1987 - 2007), which then inspired the Government to adopt the model and integrate parasite control in the national program for elementary school children's supplementary food.

Meanwhile, the consecutive trainings (2006 - 2009) - still jointly facilitated by JICA and JOICFP - each included a one-week visit to Jakarta and some other activity sites of YKB in Indonesia. The visits were always begun with presentation on YKB's experience and philosophy in assisting the Government of Indonesia to develop a clinic model for family planning and maternal health services to low-income communities in the urban areas. Then participants were taken to YKB's clinics for observation and discussions with the stakeholders. The visit also included observation of YKB's parasite and anemia control activities that were supported also by JICA as part of the Community Empowerment Program (CEP) scheme. Observation of YKB's cooperation with the private sector for AIDS prevention was also part of the trainings.

The direct observations and discussions with the local Indonesian people - combined with experiences of Japan as a long-term perspective for future development - are believed to have helped the 50 participants of the developing world understand as well as plan and implement feasible activities in their respective countries, ranging from Asia, Africa, Middle East, Latin America, Pacific Islands, to East Europe. This facilitation by JICA, hopefully, will enable Indonesian and Japanese non profit organizations to play a role in achieving the universal access to reproductive health in 2015. ■



YKB is a local NGO established in 1980 for providing family planning and maternal health services for the poor in urban areas. Its successful school-based parasite control program (1987-2007) was adopted by the Government as a national program. JICA has cooperated with YKB through Community Empowerment Program (CEP) and hosted supplementary training for JICA's trainings on reproductive health in Japan.