



ID/Nomination from DDG/NCD

Kapita S.  
Please advertise on website

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November 05, 2021

Director General  
Department of External Resources  
Ministry of Finance  
The Secretariat



Attention: Additional Director General, TA & Multilateral Division

Dear Sir,



**Request Nomination for JICA Knowledge Co-Creation Program (ONLINE)**  
**Lifestyle-Related Diseases Prevention**  
**(Course No.: 202003016-J001)**

This is to inform you that Japan International Cooperation Agency (JICA) will consider completed applications of qualified participants nominated by the Government of the Democratic Socialist Republic of Sri Lanka for the above training course to be conducted online in Sri Lanka.

Please note that as a preventive measure against global spread of COVID 19 pandemic program will be conducted using Internet facilities through distance learning modality to selected participants only. Accordingly, nominations should be made in accordance with the General Information (GI) regulations attached herewith, in consideration of below information.

JICA recommends below "Target Agencies" in line with GI content to facilitate your nomination process. Please refer GI for details on eligibility of applicants.

- **Ministry of Health**
- **Directorate for Non-communicable Disease (NCD), Ministry of Health**
- **School Health Unit- Family Health Bureau**
- **Provincial Departments of Health (NCD units), All provinces**

Nominating agencies are requested to apply New JICA KCCP online application forms (to be downloaded from ERD website).

Applicants should be able to fully attend online sessions from **25<sup>th</sup> January to 18<sup>th</sup> February 2022** as mentioned in attached GI.

The venue to attend the online training should be determined by the internet environment of the participant (e.g. home or office) and in between selected participant and his/her nominating Agency.

- (note: For accepted participants who may not have accessibility to sound internet environment, JICA Sri Lanka office will arrange to lend WiFi broadband on his/her request.)

Nominating agencies will be expected to grant essential leave to accepted participant for successful course participation.

In consideration of above procedures, you are kindly requested to arrange to submit duly completed application documents as below to reach JICA Sri Lanka office on or before 03<sup>rd</sup> December 2021 2021, besides requesting line agencies to share advance copies of application documents by 30<sup>th</sup> November 2021 via email.

- **Duly filled prescribed Application Form**
- **Copy of the Nominee's English Score Sheet, if available (e.g. TOEFL, TOEIC, IELTS)**
- **Copy of the passport or other official ID if do not possess a passport (P.S – should include Name, Date of Birth, Nationality & Sex)**
- **Inception Report – (Refer Annex 1 of the attached GI)**

Yours sincerely,



**TAKASHIMA Kiyofumi**  
Senior Representative  
JICA Sri Lanka office

C.c:  The Secretary – Ministry of Health  
 Chief Secretaries, All provinces  
Deputy Director General (NCD), Ministry of Health  
Director-School Health, Family Health Bureau  
Director – International Health Unit, Ministry of Health  
Ms. Chiharu Hoshiai, First Secretary-Embassy of Japan



For JICA application:

ERD website



# 【Online】 Knowledge Co-Creation Program (Group & Region Focus)

GENERAL INFORMATION ON

LIFESTYLE-RELATED DISEASES PREVENTION

課題別研修「生活習慣病予防対策」

JFY 2021

NO. 202003016-J001

Course Period : From January 25, 2022 to February 18, 2022

This program is ONLINE.

There is no component of on-site program in Japan.

This information pertains to one of the JICA Knowledge Co-Creation Programs (Group & Region Focus) of the Japan International Cooperation Agency (JICA), which shall be implemented as part of the Official Development Assistance of the Government of Japan based on bilateral agreement between both Governments.

'JICA Knowledge Co-Creation Program (KCCP)' as a New Start

In the Development Cooperation Charter which was released from the Japanese Cabinet on February 2015, it is clearly pointed out that "In its development cooperation, Japan has maintained the spirit of jointly creating things that suit partner countries while respecting ownership, intentions and intrinsic characteristics of the country concerned based on a field-oriented approach through dialogue and collaboration. It has also maintained the approach of building reciprocal relationships with developing countries in which both sides learn from each other and grow and develop together." We believe that this 'Knowledge Co-Creation Program' will serve as a center of mutual learning process.

Deadline of A2A3 application in  
JICA Sri Lanka office

03/12/2021

For JICA applications download: ERD website

# **I. Concept**

## **Background**

Recently, as reported by World Health Organization (WHO) and other organizations, developing countries are increasingly facing spread of lifestyle-related diseases (LSRD, here after), otherwise known as non-communicable diseases (NCD), and they are expected to increase in the future. LSRD is a syndrome whose onset or progression is provoked by human lifestyles, such as less balanced daily diet, lack of exercise, stress, smoking and drinking habits. As LSRD leads to premature death and lowers quality of lives (QOL), effective LSRD prevention/control policies are urgently sought in developing countries.

Primary prevention (health promotion, behavior change and social support) and the secondary prevention (early detection and prompt treatment) are both important LSRD measures and coalition of prevention and medical care is indispensable. It is also important to formulate LSRD prevention/control policies based on the local contexts and to select most effective measures in accordance with the stage of LSRDs in the country.

Japan has a long-term experience of taking measures against major LSRDs and thus we believe that we can utilize such experiences to support solve those problems in developing countries, though there are some differences in types and causes of LSRDs.

## **For what?**

This program aims to contribute to better health and welfare of the people in developing countries by transferring the knowledge and skills related to LSRD control measures. Participants will acquire Japanese knowledge and application skills to take effective measures in area of responsibility.

## **For whom?**

The target of this program is the government officials who are responsible for the LSRD control policy in the countries that are currently facing or expected to have an increase of LSRD in the near future.

## **How?**

Participants shall have opportunities to learn effective measures against LSRD, such as health check-up system, health education and physical exercise through lectures, practices and observations. In the end of the program, each participant will select suitable measures to control LSRD in one's country and formulate an action plan describing what one will do after going home. Participants will receive advice and comments from the course leader, lecturers and fellow participants in consultation and presentation sessions.



## **II. Description**

- 1. Title(No.): Lifestyle-Related Diseases Prevention (202003016J001)**
- 2. Course Period in Online Program**  
January 25 to February 18, 2022
- 3. Target Regions or Countries**  
Iraq, Uzbekistan, Egypt, Ghana, Gabon, Kyrgyz, Sri Lanka, Dominica, Nicaragua, Bangladesh, Mauritius
- 4. Time for Online Class**  
The following day's LIVE sessions will be live-streamed via Zoom for three hours. The time in each participating country is as follows.  
  
LIVE Sessions day's: January 25 (Tue), February 1 (Tue), February 10 (Thu), February 18 (Fri)  
Japan Time: 19:00-22:00  
Iraq: 13:00-16:00  
Uzbekistan: 15:00-18:00  
Egypt: 12:00-15:00  
Ghana: 10:00-13:00  
Gabon: 11:00-14:00  
Kyrgyz: 16:00-19:00  
Sri Lanka: 15:30-18:30  
Bangladesh: 16:00-19:00  
Mauritius: 14:00-17:00  
Dominica: 6:00-9:00  
Nicaragua: 4:00-7:00  
(The LIVE session time may change when the participants have been decided.)
- 5. Eligible / Target Organization**  
This program is designed for offices/divisions/departments in charge of LSRD control in the health administration of central or local government.
- 6. Course Capacity (upper limit of Participants)**  
12 participants
- 7. Language to be used in this program**  
English
- 8. Course Objective**  
To be able to formulate Action Plan in consideration of current circumstances of each country, by acquiring the practical knowledge to promote Lifestyle-Related Diseases Prevention.
- 9. Overall Goal**  
LSRD prevention/ control measures become widely taken in developing countries.

**10. Expected Module Outputs and Contents:**

This program consists of the following components. Details on each component are given below:

<b>(1) Preliminary Phase in a participant's home country</b>	
<i>Participating organizations make required preparation for the Program in the respective country.</i>	
Expected Module Output	Activities
	Job report Preparation

<b>(2) Core Phase in Online Program</b>		
<i>Participants dispatched by the organizations attend the Program implemented in online program.</i>		
Expected Module Output	Subjects/Agendas	Methodology
<b>Module 1:</b> To understand and analyze the current situation, support, local resource and problems of Lifestyle-Related Diseases (LSRD) in area of responsibility.	Job Report Presentation	<ul style="list-style-type: none"> <li>- Watching Video teaching materials</li> <li>- Discussion</li> </ul>
<b>Module 2:</b> To understand Japanese programs and measures on LSRD control.	<ul style="list-style-type: none"> <li>- To learn about policies and systems of LSRD control in Japan and Aichi Prefecture.</li> <li>- To learn about LSRD control activities; such as exercise/meals guidance, enlightenment campaign, health promotion measure, resident consciousness survey, and advice at medical check-up and health care.</li> <li>- To learn about methods of human resource development, program preparation, project assessment and data analysis.</li> </ul>	<ul style="list-style-type: none"> <li>- Watching lecture videos</li> <li>- Watching videos introducing activities, etc.</li> <li>- Exercise</li> </ul>
<b>Module 3:</b> To compile the direction of policies, programs and projects for LSRD control.	To organize the problems of LSRD, and to select the specific measures.	<ul style="list-style-type: none"> <li>- Watching lecture videos</li> <li>- Watching videos introducing activities, etc.</li> <li>- Exercise</li> <li>- Discussion</li> </ul>



Module 4: To formulate Action Plan on LSRD prevention.	- Action Plan Guidance, - Action Plan Formulation and Presentation	- Discussion - Presentation
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### Reference

List of countries participated in the past

Region	Country	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017 (A)	2017 (B)	2018	2019	Sub Total	Total		
Africa	Ghana								1									1		1	1	1	5	8		
	Sudan																			1			1		1	
	Zambia																						1		1	
	Kenya																					1	1		1	
Asia	Cambodia																				1		1	69		
	Viet Nam			1							1					1							1		1	
	Sri Lanka			3								1	2	2	2	3	1	4	2	2	2	1	2		27	
	Thailand		2		2																				5	
	Bangladesh								1																4	
	Malaysia		1																1			2			4	
	China										1	1	1	1	2	1									1	3
	Philippines																									7
	Bhutan											1	1	1								2				6
	India														1											1
Oceania	Uzbekistan														1	1		2						4		
	Azerbaijan															1	1	1					1	4		
	Myanmar																1							1		
	Mongolia																			1		1		2		
	Samoa	1			1		1					1	1										1	2		
	Solomon Islands		1					1	1															5		
	Tonga															1	2		1			1		8		
	Nauru															1	1							1	3	
	Vanuatu								1									1							2	
	Palau						1																		1	
Latin America	Fiji			1	1	1																		1		
	Marshall Islands										1	1						1		1				7		
	Moronesia			2		1	1																	2		
	Niue															1								5		
	Cook Islands																1							1		
	Kiribati																	1	1					2		
	Uruguay																1		1					2		
	Costa Rica			1					1	1														3		
	Jamaica					1		1	1	1	1	1												1		
	Chile	2	1		1			1	1	1	1													6		
Middle East	Panama	1	3		2	1	2																	8		
	Paraguay		1	1	1		2																	9		
	Honduras									1	1													5		
	Brazil	1												2	1	1								6		
	Antigua and Barbuda																		1		1			2		
	Dominica																							1		
	Grenada																							1		
	St. Lucia																				1			2		
	St. Vincent and The Grenadines																					1		2		
	Guyana																							1		
Europe	Mexico																					1		1		
	Suriname																		2	1	2			5		
Middle East	Serbia																					1		1		
	Iraq															1								1		
Middle East	Palestinian Authority																						1	1		
	合計	5	9	8	7	6	7	5	7	6	7	7	5	7	8	10	12	12	12	12	10	11	173			

<Structure of the program>

**Program on Lifestyle-Related Diseases (LSRD) Prevention**  
 The organizations which are currently engaged in Lifestyle-Related Diseases (LSRD) Prevention plans, and the plans are operated through knowledge and skills acquired from this program.

**[Contents]**

**Course Orientation**

Program objectives and curriculum are confirmed

**Job Report Presentation**

Each participant will make a presentation about current situations and problems of LSRD prevention and control measures in his/her country in order to promote better understanding of the lecturers and fellow participants in this program.

**Current Activities for LSRD prevention in this program**

- Health condition of the Japanese people and LSRD prevention measures are introduced.
- Japanese healthcare, health insurance system and laws (Health Promotion Law, Health and Medical Service Act for the Aged, Industrial Safety and Health Act, etc.)
- National Health Promotion Plan (HEALTH JAPAN 21) and specific Health Checkup and Health Counseling
- Measures against LSRD in Aichi Prefecture and function of Aichi Health Plaza

**LSRD Prevention Program**

- Obesity
- Diabetes
- Metabolic syndrome (Dyslipidemia, Hypertension)

**Health Promotion Activities for Different Age Groups**

- School children
- Guidance for adults (workplace, community, etc.)
- Health promotion for the elderly

**Practical Methods for Health Promotion**

- Health level evaluation
- Exercises (Walking, Strength training, Water exercise, etc.)
- Nutritional guidance
- Guidance for rest and stress management
- Antismoking guidance

**Improvement of Infrastructure for LSRD Prevention**

- LSRD monitoring system, regional diagnosis
- Personnel training plan (Training for health promotion volunteers)
- Planning and management of health checkup and health education system

**Formulation and Presentation of Action Plan**

Participants will formulate Action Plan on LSRD prevention activities using the knowledge acquired in the program and make a presentation.

- Planning of health education program
- Improvement of infrastructure
- Personnel training plan
- Setting of short-term, medium-term and long-term goal
- Evaluation

**[Methodology]**

**[Lecture]** Participants will have better understanding of Japan's LSRD prevention activities, health education program suitable for a target group or disease state, monitoring system, etc.

**[Observation]** Participants will learn the actual implementation of prevention activities that can be applied to their respective countries and think of issues on planning, management and evaluation.

**[Presentation]** Participants will make a presentation about LSRD prevention program and infrastructure improvement plan that are formulated using the knowledge and technique acquired in the program. They will be able to develop a more concrete and feasible program by receiving questions and suggestions from lecturers.

**Implementation of Action Plan**

- Start of LSRD prevention activities
- Revision to adjust the country's own situation
- Evaluation



Reference: Program schedule in previous year (2021)

Date			Programme	Lecturer
25-Jan	Tue	LIVE	(PR) Job Report Presentation	AHP
From 26-Jan to 31-Jan		ODM	(L) Health Counseling system in AHP	AHP (Video)
		ODM	(L) Points for creating an action plan	AHP (Video)
		ODM	(L) NCD Policies in Japan ①	AHP (Video)
		ODM	(L) NCD Policies in Japan ②	AHP (Video)
		ODM	(L) Program creation and development of health promotion class	AHP (Video)
		ODM	(L) Physical exercise for health promotion	AHP (Video)
		ODM	(L) Diet for health promotion	AHP (Video)
1-Feb	Tue	LIVE	Consultation for creating an action plan Q & A about various lectures	AHP
From 2-Feb to 8-Feb		ODM	(L) Health Promotion for School children	AHP (Video)
		ODM	(L) Health Promotion for worker	AHP (Video)
		ODM	(L) Health Promotion for the elderly	AHP (Video)
		ODM	(L) Teaching materials for health promotion	AHP (Video)
		ODM	(L) Human Resource Development for Health Promotion	AHP (Video)
10-Feb	Thu	LIVE	Consultation for creating an action plan Q & A about various lectures	AHP
From 11-Feb to 17-Feb		JICA-V AN	Consultation for creating an action plan	AHP
18-Feb	Fri	LIVE	(PR) Action Plan Presentation/ Closing Ceremony	AHP

(LIVE) LIVE Session (ODM) On-demand training (L)Lecture (D)Discussion (PR)Presentation

### **III. Conditions and Procedures for Application**

#### **1. Expectations from the Participating Organizations:**

- (1) This program is designed primarily for organizations that intend to address specific issues or problems identified in their operation. Participating organizations are expected to use the project for those specific purposes.
- (2) This program is enriched with contents and facilitation schemes specially developed in collaboration with relevant prominent organizations in Japan. These special features enable the project to meet specific requirements of applying organizations and effectively facilitate them toward solutions for the issues and problems.

#### **2. Nominee Qualifications:**

Applying Organizations are expected to select nominees who meet the following qualifications.

##### **(1) Essential Qualifications**

- 1) **Current Duties:** be an officer who is currently engaged in public health service, and responsible for the LSRD control activities in the central or local government.
- 2) **Experience in the relevant field:** have at least 5 years or more of experience in this field
- 3) **Educational Background:** be a graduate of university
- 4) **Language:** have a competent command of spoken and written English which is equal to TOEFL iBT 100 or more (The workshop includes active participation in discussions, which requires high competence of English ability. Please attach an official certificate for English ability such as TOEFL, TOEIC etc, if possible)
- 5) **Computer skills:** to be proficient in Microsoft Excel and Power Point
- 6) **Health:** must be in good health, both physically and mentally, to participate in the 4-weeks program.

##### **(2) Recommendable Qualifications**

**Age:** between the ages of thirty (30) and fifty (50) years

**Gender Consideration:** JICA is promoting Gender equality. Women are encouraged to apply for the program.

#### **3. Required Documents for Application**

(1) **Application Form:** The Application Form is available at the JICA office (or the Embassy of Japan). Please submit a type-written application form.

(2) **Photocopy of Passport or Official ID:** You should submit it with the



application form if you possess your passport. On application to this course, you may submit the photocopy of official ID instead of passport.

\*The following information should be included in the photocopy: Name, Date of Birth, Nationality, Sex, Passport Number and Expiry Date

**(3) Nominee's English Score Sheet:** to be submitted with the application form. If you have any official documentation of English ability. (e.g., TOEFL, TOEIC, IELTS)

**(4) Inception Report:** Each nominee is requested to prepare a report explaining the present situation of her/his own job in her/his home country (organization), as well as to introduce her/his job description and own interest. This report should be typed in the attached form at ANNEX 1 and submitted with the Application Form. The report will be a reference for selecting program participants.

Note: Accepted participants are required to make presentation material based on the report in order to share it at beginning of program.

#### **4. Procedure for Application and Selection:**

##### **(1) Submitting the Application Documents:**

Closing date for applications: Please inquire to the JICA office (or the Embassy of Japan).

**After receiving applications, the JICA office (or the Embassy of Japan) will send them to the JICA Chubu Center in JAPAN by December 7, 2021.**

##### **(2) Selection:**

After receiving the documents through proper channels from your government, the JICA office (or the Embassy of Japan) will conduct screenings, and then forward the documents to the JICA Chubu Center in Japan. Selection will be made by the JICA Chubu Center in consultation with concerned organizations in Japan. The applying organization with the best intention to utilize the opportunity of this program will be highly valued in the selection. Qualifications of applicants who belong to the military or other military-related organizations and/or who are enlisted in the military will be examined by the Government of Japan on a case-by-case basis, consistent with the Development Cooperation Charter of Japan, taking into consideration their duties, positions in the organization, and other relevant information in a comprehensive manner.

##### **(3) Notice of Acceptance**

Notification of results will be made by the JICA office (or the Embassy of Japan) **not later than December 21, 2021.**

## **5. Conditions for Attendance:**

The participants of KCCP are required

- (1) to adhere to the program schedule
- (2) to attend all of the program activities
- (3) not to change the program topics
- (4) to follow the Term of Use for the Online KCCP (privacy and copyright policy)

[https://www.jica.go.jp/english/our\\_work/types\\_of\\_assistance/tech/acceptance/training/index.html](https://www.jica.go.jp/english/our_work/types_of_assistance/tech/acceptance/training/index.html)



## IV. Administrative Arrangements

### 1. Organizer:

(1) Name: JICA Chubu

(2) Contact: Mr. OJIMA Atsushi (Email to: [cbictp1@jica.go.jp](mailto:cbictp1@jica.go.jp) AND [Ojima.Atsushi2@jica.go.jp](mailto:Ojima.Atsushi2@jica.go.jp))

※Please insert "course number & the title" in the subject when emailing. For instance, "202003016J001 & Lifestyle-Related Diseases Prevention"

### 2. Implementing Partner:

Name: AICHI Health Plaza

URL: <http://www.ahv.pref.aichi.jp/www/genre/1000100000085/index.html>

### 3. Other arrangements

LIVE session of this program will be live-streamed via Zoom, participants will need a computer with a microphone and webcam, stable/high-speed internet connection. If you are not able to arrange internet access/devices necessary to participate in the online course, JICA will make arrangements for the participants. Please contact the JICA office in your country or JICA Chubu for more information.

### 4. About JICA Chubu Center

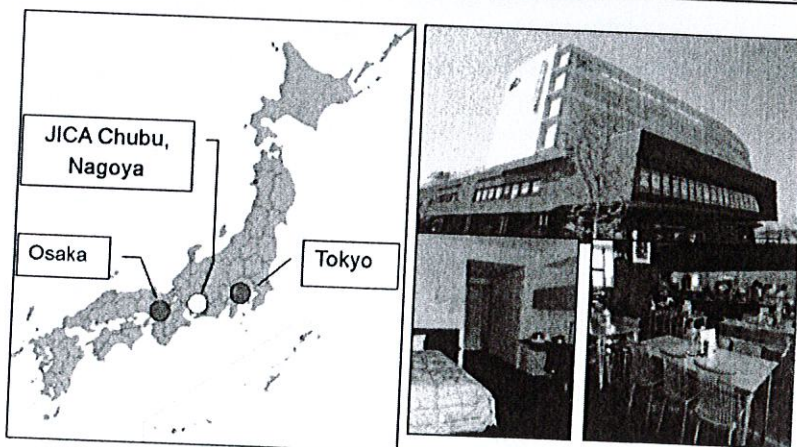
<Location>

- It is located at the center of Nagoya-city. The Nagoya main station, the regional hub of various transports, is 15 mins walk from JICA Chubu Center.

<Recommended Websites>

- JICA Chubu's website: [www.jica.go.jp/chubu/english/office](http://www.jica.go.jp/chubu/english/office)

- Virtual guide of JICA on YouTube: [www.youtube.com/watch?v=tNelkQUmTRQ](https://www.youtube.com/watch?v=tNelkQUmTRQ)



## **VI. ANNEX:**

### **ANNEX I            Inception Report**

Applicants are requested to prepare an Inception Report on the following issues and submit it to JICA office together with the application form. The report should be typewritten in English on A4 size paper. (8 pages or less)

#### **[Contents]**

\* Please indicate the following on the cover page:

Name of Nominee: \_\_\_\_\_  
Country: \_\_\_\_\_  
Organization: \_\_\_\_\_  
Department /Section: \_\_\_\_\_  
Position: \_\_\_\_\_  
E-mail address: \_\_\_\_\_

#### **1. Fundamental indicator of health in your country -the trend of LSRD-**

- (1) Population (classified by sex and age)
- (2) Life expectancy
- (3) Top 10 causes of death
- (4) Number of affected individual and prevalence of LSRD (including indicate of average level)
- (5) Number of medical facilities (ex. hospitals, clinics, health centers, etc.)

#### **2. Current activities and problems for the LSRD prevention**

##### (1) Dietary habits and nutritious condition

- 1) Total energy, protein, fat, carbohydrate, dietary fiber, frequencies of meals
- 2) Typical menu of the day from breakfast to dinner, recipe of typical dish
- 3) Negative factors of dietary habits, customs and environments
- 4) Activities and problems for the LSRD prevention  
(contents, locations, target persons, responsible persons, and implementing persons of activities)

##### (2) Alcohol drinking and tobacco control

- 1) Rate of drinkers and smokers
- 2) Related law (legal age of drinking alcohol and smoking cigarettes, etc.)
- 3) Enforcement of separated smoking area
- 4) Negative factors of drinking and smoking habits
- 5) Prevention activities and problems  
(contents, locations, target persons, responsible persons, and implementing persons of activities)



(3) Exercise

- 1) Current Condition and Problems
- 2) Activities and Problems (contents, locations, target persons, responsible persons, and implementing persons of activities)
- 3) Work style
- 4) Exercise Facilities

(4) Relaxation and stress management

**3. Current condition and assignment of the infrastructure development**

- (1) Health-Related Policies and Laws
- (2) Systems (health check and health education, medical care and medical insurance)
- (3) Human resources development (medical personnel and volunteers)
- (4) Partnership with related sectors  
(ex. government, community, citizen, schools, private sectors, researchers, etc.)

**4. The organization and duty of the applicant**

(1) Organizational Level

- 1) Organization chart and number of staff members in each division
- 2) The work of your organization and the services and activities it provides
- 3) Any serious problems that impede improvement of the LSRD prevention services in your organization

(2) Personal Level

- 1) Your occupational background, training and work experience
- 2) Your specific duties in your organization
- 3) Ongoing activities that you are engaged in with regard to the LSRD
- 4) Difficulties in performing your duties/ activities
- 5) Please mark the subjects in which you are most interested in the program.

**Please choose best 3 subjects.**

- |  |  |  |                                 |
|--|--|--|---------------------------------|
| <input type="checkbox"/> Diabetes        | <input type="checkbox"/> Obesity           | <input type="checkbox"/> Hypertension          | <input type="checkbox"/> Cancer |
| <input type="checkbox"/> Tobacco control | <input type="checkbox"/> Alcohol drinking  | <input type="checkbox"/> Exercise prescription |                                 |
| <input type="checkbox"/> Nutrition       | <input type="checkbox"/> Stress management | <input type="checkbox"/> Awareness promotion   |                                 |
| <input type="checkbox"/> Others (        |  |  | )                               |

**5. Purpose of your participation and your mission**

## *For Your Reference*

### **JICA and Capacity Development**

The key concept underpinning JICA operations since its establishment in 1974 has been the conviction that “capacity development” is central to the socioeconomic development of any country, regardless of the specific operational scheme one may be undertaking, i.e. expert assignments, development projects, development study projects, training programs, JOCV programs, etc.

Within this wide range of programs, Training Programs have long occupied an important place in JICA operations. Conducted in Japan, they provide partner countries with opportunities to acquire practical knowledge accumulated in Japanese society. Participants dispatched by partner countries might find useful knowledge and re-create their own knowledge for enhancement of their own capacity or that of the organization and society to which they belong.

About 460 pre-organized programs cover a wide range of professional fields, ranging from education, health, infrastructure, energy, trade and finance, to agriculture, rural development, gender mainstreaming, and environmental protection. A variety of programs and are being customized to address the specific needs of different target organizations, such as policy-making organizations, service provision organizations, as well as research and academic institutions. Some programs are organized to target a certain group of countries with similar developmental challenges.

### **Japanese Development Experience**

Japan was the first non-Western country to successfully modernize its society and industrialize its economy. At the core of this process, which started more than 140 years ago, was the “adopt and adapt” concept by which a wide range of appropriate skills and knowledge have been imported from developed countries; these skills and knowledge have been adapted and/or improved using local skills, knowledge and initiatives. They finally became internalized in Japanese society to suit its local needs and conditions.

From engineering technology to production management methods, most of the know-how that has enabled Japan to become what it is today has emanated from this “adoption and adaptation” process, which, of course, has been accompanied by countless failures and errors behind the success stories. We presume that such experiences, both successful and unsuccessful, will be useful to our partners who are trying to address the challenges currently faced by developing countries.

However, it is rather challenging to share with our partners this whole body of Japan’s developmental experience. This difficulty has to do, in part, with the challenge of explaining a body of “tacit knowledge,” a type of knowledge that cannot fully be expressed in words or numbers. Adding to this difficulty are the social and cultural systems of Japan that vastly differ from those of other Western industrialized countries, and hence still remain unfamiliar to many partner countries. Simply stated, coming to Japan might be one way of overcoming such a cultural gap.

JICA, therefore, would like to invite as many leaders of partner countries as possible to come and visit us, to mingle with the Japanese people, and witness the advantages as well as the disadvantages of Japanese systems, so that integration of their findings might help them reach their developmental objectives.





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