



JOCV: Working with Africa

Japan's popular volunteer program Japan Overseas Cooperation Volunteers (JOCV) was established in 1965 as a means for young Japanese citizens to support the development of partner countries. Of the 40,000 young people dispatched under the program to date, some 13,000 have worked in Africa, in fields including health care, agriculture and education. Among these volunteers is Aya Tsubota, who works as a nurse at a hospital in Uganda.

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THE Japan Overseas Cooperation Volunteers (JOCV) is a program of the Japan International Cooperation Agency (JICA) with stated objectives to contribute to the economic and social development as well as the reconstruction of developing countries, to deepen friendly relations and mutual understanding between the partner countries; and to cultivate in young people

an international perspective so that they can return their experience of serving as a volunteer to Japanese society.

All Japanese citizens between the ages of 20 and 39 are eligible to become members of JOCV. If selected for dispatch, the volunteers generally serve a term of two years. Fields of activity include education, agriculture, public health care, computer technology,

electronics, auto maintenance, sports training, and support for disabled people. Over the fifty-one years of the program's existence, about 41,000 volunteers have been dispatched to eighty-eight countries. Malawi, in Africa, has received the largest number of JOCV members, some 1,700 all told. Africa has received roughly 13,000 members in total, making it the main region to receive volunteers along with Asia.

Aya Tsubota is a nurse on the JOCV program who was dispatched to the Jinja Regional Referral Hospital in April 2015. The Hospital is roughly two hours away by car from Kampala, the capital of Uganda.

"There are a limited number of nurses and a shortage of drugs




- 1 Aya Tsubota with nurses from the Jinja Regional Referral Hospital
- 2 A drug storage shelf neatly organized on the 5S principle
- 3 Tsubota (right) and staff members make records files from cardboard.

very thin slips of paper. Tsubota and her fellow staff cut cardboard into notebook-sized sheets and taped them together to make files. The patients' bed number is now written on the spine of these files making it easy to locate records at any time.

"The staff members were so busy they had no motivation to change the unsatisfactory situation," Tsubota says. "It was the same situation when implementing the 5S activities, but having seen the effectiveness of that they now realize that they can change the situation by themselves."

5S consists of very low profile activities and it is difficult to see immediate results in the improvement of the quality of medical services. Consequently, there was a time when Tsubota too found herself losing motivation. However, one day a nurse encouraged her: "Aya, what you are doing is helpful for us. Patients are also benefiting from this, so you should be more confident."

"I was inspired to know that she really understood the meaning behind the 5S activities," says Tsubota. "Using my experience in Uganda, in the future I would like to become a lecturer on global health nursing and research means of support for the development of human resources in the nursing sector of developing countries." 

and medical equipment here," says Tsubota. "I have been really moved by the nurses working in these difficult conditions who unflinchingly continue to smile when caring for their patients."

Tsubota, who has three years of experience at a Japanese national hospital, is working to introduce the 5S system of orderliness in the hospital to improve its operational environment and thereby improve medical services.

As part of this process, Tsubota initiated the organization of the drugs storage shelf. Drugs, syringes and clinical records had previously all been randomly stored on the shelf. Working alongside the nurses and other staff members, Tsubota made cardboard boxes for the drugs and medical equipment, and labeled each box. Even so, drugs and medical equipment continued to be misplaced, and it took three months for the staff to become accustomed to the necessary procedures and voluntarily

organize the supplies.

"The nurses are very busy because each one looks after more than thirty patients," says Tsubota. "It was very important to find time to hold discussions and share ideas with the staff when they are not so busy."

One of problems that most troubles Tsubota is the shortage of general medical supplies. In addition to the shortage of basic consumables such as drugs and medical equipment, scissors, tape, and files are also sorely lacking. As a result, wise choices are often required to efficiently use what little is available. One example is the files for patients' clinical records, which Tsubota and the staff created from cardboard. Until recently in the ward for the Department of Maternity, which sees a large number of patients coming and going, such as expectant and nursing mothers, the patients' clinical records were often mislaid because they were written on