Global Partnership for Sustainable Peace

Annual Report 2016
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Global Partnership for Sustainable Peace

In the spirit of

Sogo-Fujo

相 互 扶 助

‘Sogo-Fujo’ is a cycle of giving and receiving, a traditional value deeply rooted in the Japanese close-knit community life.

‘Sogo-Fujo’ is something we are all born with regardless of race, religion, and culture. We all have the desire to help others and to be of service to the community we live in.

‘Sogo-Fujo’ creates a true partnership based on respect and trust for each other. Human dignity and pride must be respected at all time especially for people at the receiving end of the assistance. People in need of help today may be the service-giver of tomorrow or in other occasions.

‘Sogo-Fujo’ unites the world. We will never abandon each other as we all are equally irreplaceable as a part of the whole global community. Each community with its own culture and sentiments should be embraced as a powerful element for peaceful coexistence of diversity and not as a dividing force.

AMDA advocates ‘Open Sogo-Fujo’, an universal foundation of peace, extending mutual assistance across and beyond one’s community.
What is GPSP?

In 2014, AMDA established a concept of global network named, “Global Partnership for Sustainable Peace” (GPSP). The aim of this network is coexistence of diversity which is virtually indispensable for world peace. Under this concept, programs have been developed beyond borders with the philosophy of Open Sogo-Fujo (which literally means “mutual support/help” in Japanese), the universal value of the 21st century, as its main theme. The framework consists of four fields of activities, namely, A) peace building, B) educational support, C) promotion of health, and D) livelihood support.

AMDA defines peace as “today's family life with hope for better tomorrow.” “Today’s family life” symbolizes a family condition where one has sufficient food to maintain a decent living. The phrase, “hope for better tomorrow” points to providing education to children. The said four fields of GPSP activities have been set to abate conflict, disaster, and poverty, all of which are considered hindrances to attaining peace.

By involving governments, local public authorities, public interest groups, corporate enterprises, and academia, AMDA hopes to enlighten the world with the concept of Open Sogo-Fujo to realize coexistence of diversity. This is the end goal of Global Partnership for Sustainable Peace.
A. Peace Building

1. GPSP Multinational Medical Mission

Emergency Relief
AMDA is extending a helping hand to the victims of both natural and man-made disasters around the world. As timely dispatch of relief personnel and aid delivery are crucial for emergency assistance, AMDA keeps an eye on the latest conditions and needs on the ground.
Kumamoto Earthquake (Japan)
Activity Location: Mashiki-machi and its vicinities
Project Period: 15 April-
Benefitted Population: 2,909
Counterpart: Soja City Government, Okayama Association of Corporate Executives etc.
Overview: In response to the earthquake (mag. 6.4) that struck Kumamoto, Japan at 9:26pm on 14 April 2016, AMDA conducted medical relief in Mashiki-machi, the hardest-hit town in the area. On 16 April, another massive quake hit the same region and, all together, left 50 people dead and 1,684 people injured. The extent of the disaster was the third-most severe case to occur after the Great East Japan Earthquake (2011) and Hanshin Great Earthquake (1995). In Mashiki-machi, AMDA was based in a local elementary school in which the team provided medical care as well as acupuncture services to ease people’s evacuation life.

Ecuador Earthquake
Activity Location: Pedernales, Manabi Province
Project Period: 23 April-
Benefitted Population: 140
Counterpart: Universidad San Francisco de Quito
Overview: In response to the massive earthquake (mag.7.8) that hit Ecuador on 17 April 2016, AMDA conducted medical relief in the disaster-stricken area. On 21 April, the Government of Ecuador announced that the quake had caused 570 deaths with over 7,000 people injured while strong aftershocks continued in the region. It was also reported that more than 25,000 people had been displaced and 155 people had been missing. On 23 April, AMDA sent one coordinator from its headquarters in Okayama, Japan, to work with medical personnel from Universidad San Francisco de Quito. The joint medical relief effort took place in Pedernales in Manabi Province located in the coastal region in the northwest. The team also supported local children in regaining normalcy in their daily life. Since schools had been closed for more than two months, the team conducted a summer-camp style education program to let the children carry on with school studies.
◆ Sri Lanka Floods and Landslides
Activity Location: Colombo and its suburbs
Project Period: 02 June-08 June & 20 June
Benefitted Population: 460+
Counterpart: AMDA Sri Lanka
St. John Ambulance Sri Lanka,
Lions Club Negambo
Rissho-Kosekai’s Donate-A-Meal Movement
Overview:
In mid-May, the greater part of Sri Lanka went through severe floods and landslides. Several days of incessant rain caused extensive floods in many parts including Colombo. More than 100 people died and more than 250,000 people were affected around the country. AMDA conducted emergency relief over two phases in which AMDA’s relief team 1) donated school supplies to local children in Malwana, and 2) offered free clinic services in Kolonnawa. AMDA also donated mosquito nets to prevent dengue fever.

◆ Iwate Typhoon (Japan)
Activity Location: Otsuchi, Iwate Prefecture
Project Period: 30 August-14 September
Benefitted Population: 25
Overview: Consecutive typhoons which hit Iwate in Japan’s northwest forced the residents to flee homes. AMDA Health Support Center in the locality provided shelter to the elderly who had difficulty reaching the designated evacuation centers. AMDA also supplied relief goods to the evacuees.

◆ Haiti Hurricane
Activity Location: Moron
Project Period: 08-27 October
Benefitted Population: 232
Counterpart: AMDA Haiti, TMAT
Overview: In response to the massive Hurricane Matthew that struck the Caribbean region on 04 October 2016, AMDA conducted emergency relief with AMDA Haiti and personnel from TMAT, a Japan-based medical NGO providing disaster relief. According to WHO, the death toll was 546 and 158 people were reportedly missing. The displaced population topped 175,000 nationwide. The joint relief team
mainly organized sanitation control and preventive education of cholera in Moron where cholera outbreak was feared. In addition, AMDA hired local people to provide free meals as malnutrition was affecting people’s health condition.

◆ Tottori Earthquake (Japan)
Activity Location: Kurayoshi City, Tottori Prefecture
Project Period: 24-26 October
Benefitted Population: N/A
Counterpart: N/A
Overview: The earthquake that hit the central part of Tottori Prefecture forced the residents to live in anxiety while frequent aftershocks shook Kurayoshi, one of the main cities in the region. AMDA dispatched one coordinator and two nurses to assess the conditions in local evacuation shelters, and conducted a door-to-door survey accompanying the Kurayoshi City staff. They also provided leaflets to encourage residents to use a volunteer center set up by the city’s social welfare council.

◆ Fukushima Coastal Earthquake (Japan)
Activity Location: Minami-soma, Fukushima Prefecture
Project Period: 22-24 November
Benefitted Population: N/A
Counterpart: Bridge for Fukushima
Overview: AMDA immediately sent a relief team after a mag.7.4 earthquake that occurred in Fukushima on 22 November 2016. The team met up with a Fukushima-based organization, Bridge for Fukushima, led by a former AMDA employee. As no visible damage or loss was reported from the quake, the team decided to withdraw from the area after conducting a needs survey in several locations.

◆ Sumatra Earthquake (Indonesia)
Activity Location: Aceh Province, Sumatra
Project Period: 09-15 December
Benefitted Population: 189
Counterpart: AMDA Indonesia, Hasanuddin University
Overview: To help the people affected by the earthquake that killed 102 and injured more than 500 people, AMDA sent a relief team comprising anesthetists (AMDA Indonesia) and orthopedists (Hasanuddin University) to Aceh Province in the northernmost part of Sumatra Island. After the
disaster assessment, the team conducted mobile clinic and provided relief supplies in Sigli.

◆ **Niigata Great Fire Disaster (Japan)**  
**Activity Location:** Itoigawa City, Niigata Prefecture  
**Project Period:** 24-26 December  
**Benefitted Population:** N/A  
**Counterpart:** Soja City Government (Okayama)  
**Overview:** AMDA sent relief personnel in collaboration with Soja City Government (AMDA’s longtime collaborator) after the great fire burned down as many as 150 buildings in Itoigawa, Niigata Prefecture. Alongside the disaster survey at evacuation shelters, the team visited the regional disaster headquarters to meet the Vice-Mayor of Itoigawa City. As it was in time for Christmas, AMDA provided Christmas cakes to the evacuees.

◆ **Indonesia Flood**  
**Activity Location:** Nusa Tenggara  
**Project Period:** 28 December-2 January (2017)  
**Benefitted Population:** 280  
**Counterpart:** AMDA Indonesia  
**Overview:** The cyclone that swept across the Indian Ocean brought torrential downpours to West Nusa Tenggara in Indonesia. The area is home to 100,000 people and was flooded across 33 districts. AMDA Indonesia sent a medical team to provide a mobile clinic service in the region and saw 280 patients in two days. The team also provided distributed goods such as toys to children and books to adults.

◆ **Ibaraki Earthquake (Japan)**  
**Activity Location:** Takahagi City, Ibaraki Prefecture  
**Project Period:** 29-30 December  
**Benefitted Population:** N/A  
**Overview:** AMDA sent personnel to assess the damage from a mag.6.3 earthquake that struck Takahagi City in Ibaraki Prefecture on 28 December 2016. The city was normalized by the morning of the next day, leading the evacuation shelters to close. No medical needs were seen although cracks were visible in the walls of the buildings.
Philippines Typhoon Activity Location: Catanduanes, Philippines
Project Period: 11-16 January (2017)
Benefitted Population: 500 households
Counterpart: The Office of the Cabinet Secretary of the Philippines, Catanduanes State University Extension School, local police, Barangay regional officers
Overview: On 25 October 2016, the typhoon which landed on the island of Catanduanes (located in southeast of Luzon) swept through Albay Province, leaving serious scars in the entire region. AMDA monitored the local condition by keeping in touch with its local counterpart and decided to carry out food distribution as a result of local assessment. The food donation was much appreciated by local farmers because Abaca, a native crop which had been their main source of income, was severely damaged by the typhoon.

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Earthquake in Central Nepal (April 2015)

The deadly earthquake (magnitude of 7.8) that hit Nepal on 25 April 2015 left more than 8,500 people dead and over 22,000 people injured. It was the worst natural disaster to strike Nepal since 1934. As many towns and villages were flattened throughout the country, AMDA deployed Multi-national Medical Mission to help numerous people who were forced to flee homes. Some of the afflicted people were impaired by the injuries they suffered. A Japanese physiotherapist residing in Nepal was asked to join AMDA’s relief effort in providing wheelchairs and other life-assistance devices. Not only handling the logistics, he was also in charge of making some of the life-support gear by himself. Ever since, he has been administering a wheel-chair related project to help supply wheelchairs to those in need.

Trauma care is one of the most in-demand assistance that needs to be fulfilled at disaster-stricken sites. AMDA, Japan Medical Association and Nepal Medical Association jointly organized psychiatric workshops for volunteers to boost the number of counsellors in Nepal. Now, more than 400 trained-counsellors are working to help the victims cope with emotional obstacles in their daily life.
Post-Disaster Assistance for Great East Japan Earthquake (2011～)

On 11 March 2011, the earthquake of unprecedented scale (mag.9.0) followed by dire tsunami wiped out the eastern part of Japan which resulted in 15,800 deaths with over 2,500 people missing. AMDA launched emergency relief in Sendai, Miyagi Prefecture on the following day the quake struck. Throughout the relief, AMDA sent 149 personnel to various locations. The emergency relief went on until the end of April followed by various post-disaster assistance, with which some of them are still ongoing. Five years on, the affected regions have entered the transitional phase where people have moved from make-shift residences to council housing or new houses. The pressing issue for now is how to rebuild local communities that are facing the problem of dwindling population. This also implies that the overall manpower for the regional reconstruction is getting less.

Disaster Preparedness

In recent years, “disaster preparedness” has become one of the key concepts for AMDA due to the drastic increase in natural calamities. It is deeply rooted in every AMDA staff to ensure a concrete response to unforeseen disasters.

AMDA Platform for Nankai Trough Earthquake Disaster Strategy

The Japanese government predicts that an earthquake of immeasurable scale is expected to strike Japan along the Nankai-Trough within the next 30 years. The quake is said to cause massive tsunami that could devastate the extensive coastline along the Pacific Ocean, from Shizuoka to Miyazaki (throughout the central to the west Japan). The estimated death toll is over 300,000 and 2 million buildings would be damaged. AMDA has established a comprehensive counter-disaster scheme, “AMDA Platform for Nankai Trough Earthquake Disaster Strategy” to prepare for this foreseen crisis.
AMDA’s focus is on Shikoku region (Kochi and Tokushima in particular) given that, 1) the access to the area will be difficult once the disaster strikes, and 2) aid assistance will be concentrated in Osaka and Nagoya as they are major cities with easy access.

By enhancing interactions between aid organizations, local governments and medical institutions, the platform enables a swift response to the crisis and provides assistance in a timely manner.

2. GPSP Soul and Medicine Program

AMDA believes that healing a human soul is essential to peace building. To pay tribute to war victims, AMDA has held GPSP Soul and Medicine Program in past battlefields around the world. The program has a twofold purpose: 1) to conduct a multi-religious memorial service to pay tribute to those who suffered or died in conflicts and wars, and 2) to provide medical services to the present communities.
In 2005, the concept was expanded to include natural disaster victims as a result of calamitous tsunami that hit South Asia on 26 December 2004. Since then, AMDA has held a memorial service in the locations where AMDA conducted emergency relief.

GPSP SMP in Mongolia 2016 (Gandan Monastery, Ulaanbaatar)
On 04 September 2016, GPSP Soul and Medicine Program in Mongolia was held for the ninth time to commemorate the victims of the Battles of Khalkhyn Gol which took place in 1939. The ceremony was attended by both Mongolian and Japanese priests to offer peace prayers for the realization of better world. Regardless of what one’s race or creed may be, AMDA is determined to spread the spirit of “Open Sogo-Fujo”, a concept which embodies mutual assistance in the most accessible manner.

B. Educational Support

1. GPSP Kids Projects

Children who are not given enough opportunities to harness their motivation or potential for self-realization are what we call “GPSP Kids”. They are often orphans, disabled, or children living in slums, disaster-affected areas or in remote mountains. The needs of these children differ from place to place. Providing physical checkups, nutritional meals, sports programs, inter-cultural or religious programs are some of the activities AMDA has incorporated into this initiative. GPSP will continue in this tradition to cater to the needs of these children.

AMDA Peace Building Program in Trincomalee, Sri Lanka
AMDA Peace Building Program (AMDA PBP) was initially started, having 26 years of ethnic conflict in Sri Lanka as a background. It was during the time of ceasefire (2003-2006) in which AMDA dispatched medical professionals from Japan to provide medical services and community health education to opposing communities in an equal manner. It was initially called “AMDA Peace Building through Medicine” which helped promote peace by building trust through medical services. AMDA started a youth exchange program in 2011 for the second phase of this peace-building initiative.

Ever since, the youth exchange has become a yearly event where students from different ethnic/religious communities get together to nurture mutual understanding.

For this year, the members of AMDA High School Club visited Sri Lanka in late July to participate in a cultural exchange program which convened students from Trincomalee, Kilinochchi, and Matale, all of which represented different ethnic/religious communities. The event deepened their mutual understanding through various activities including sports, dance and workshop, and by visiting the temple of each religious faith. For the workshop, they were randomly put into groups to work on certain topics and exchanged ideas to present the final outcome. It is hoped that this program will inspire the youths in creating a peaceful world by encouraging them to acknowledge and embrace each other’s differences.

2. Global Human Resource Development Projects

The whole idea behind AMDA’s global human resource development was to kick-start an educational program targeted toward youths who envision their future career on the international stage. Pursuant to this successful attempt, GPSP has been building more comprehensive human resource development programs by involving organizations from various GPSP member countries. Each stakeholder of GPSP has been taking an active part in the making of these programs for the future peace makers of the world.
Japanese Doctors to Contribute to Regional Medicine in Rwanda (September 2016)

Under the subsidy of Okayama Prefecture, AMDA sent a group of Japanese doctors to Rwanda to pass on their expertise in pediatrics, and transfer the school medical-check system standardized in Japan. This is part of Okayama Prefectural Government’s International Contribution Project for Local-to-Local Technical Transfer, which, at this time, aims to diffuse Japanese medical expertise.

The doctors were sent to the western part of Rwanda and Kigali. At Umuco Mwiza School, the Japanese doctors conducted medical examination on the students, and discussed how pediatrics can be improved in Rwanda based on their assessment.
Training for Nepalese Doctor in Okayama, Japan (September-November 2016)

In line with the said program run by Okayama Prefectural Government, one doctor from Nepal was invited to learn Japan’s advanced medical technology. During his two-month stay, he received training on endoscope techniques. He was eager to take back what he learned to Nepal. The doctor works for AMDA Damac Hospital located 500 km east of Kathmandu, the capital. From now on, it is hoped that people would no longer have to travel to Kathmandu for the endoscopic surgery. He is determined to dedicate rest of his professional life to the development of digestive medicine in his country.

Pakistan Home Health Education Program

The goal of this project is to improve hygiene and health in the remote areas of Pakistan by educating pre-marital women. It is an attempt at training these women to become peer health educators in each of their own communities.

_Funded/organized by AMDA, Chigasaki Chuo Rotary Club (Japan), National Rural Support Programme (Pakistan)_

AMDA Cambodia HIV/AIDS Project

In cooperation with Provincial Health Department of Tbong Khmom, AMDA Cambodia organizes a workshop at “Center for Peer to Peer Educators on HIV/AIDS”. Aiming to promote HIV/AIDS prevention, the effort is realized through the network of peer educators and those who are living with the disease. For this year’s event, 60 people attended the workshop of which 50 of them were from the said network. The gathering helps refresh their basic knowledge on HIV/AIDS and encourage the patients to receive the antiretroviral treatment on a regular basis. The project is made possible thanks to the continued financial assistance from Yamaichi Kanko, a Japanese travel agency that has long supported this program.
AMDA Cambodia Soccer Activities

AMDA Cambodia runs a soccer club to encourage young people to take part in sport activities. Not only does it foster healthy body and mind, it also allows to divert the youths from drugs, violence and other criminal activities.

Student Internship at AMDA Headquarters

From time to time, AMDA Headquarters in Okayama, Japan, has accepted interns from both in and out of the country. Among several Japanese students who did an internship this year was an intern from Korea, Miss. Kim, who joined the office for a month to work on accounting-related assignments, translation, and other clerical tasks. What got her interested in AMDA was the fact that a large-scale quake has become frequent in Korea in the last few years. She hopes to work in the field where she could bridge Korea and Japan in the near future.

3. Scholarship Programs

For many years, AMDA has supported students who are persevering through difficult times following natural and man-made disasters. Until now, the beneficiaries of AMDA’s scholarship programs have been mainly the students who wish to pursue a medical career. In the GPSP framework, AMDA encourages its international chapters and GPSP member-organizations to establish scholarship programs, preferably self-funded. The GPSP network allows to help find donors and provide necessary support.

SUGANAMI Scholarship

SUGANAMI Scholarship was established in 2004 for capable young medical and nursing students around the globe who are in need of financial assistance to complete their study.

Nursing Students (the scholarship recipients) in action (Turkey)
C. Promotion of Health

1. GPSP Friendship Hospitals

Securing medical assistance for unserved communities has always been high on AMDA’s agenda. Partnering with local chapters and collaborators, AMDA runs medical institutions which serve as a regional medical hub. It is hoped that each chapter would have one medical institution that can act as a focal point for the effective GPSP operation at the time of disaster.

Siddhartha Children and Women’s Hospital (Nepal)

Japan Afghanistan Friendship Hospital (Afghanistan)

Japan Bangladesh Friendship Hospital (Bangladesh)

AMDA GPSP Hospitals Around the Globe
- Siddharta Children and Women’s Hospital (Nepal)
- AMDA Damak Hospital (Nepal)
- AMDA Mechi Hospital (Nepal)
- Japan-Bangladesh Friendship Hospital (Bangladesh)
- Japan-Afghanistan Friendship Hospital (Afghanistan)
- Japan-Mongolia Friendship Hospital (Mongolia)
2. GPSP Medical Mission

AMDA has been carrying out medical missions to fulfill particular medical needs that arise from various people around the world. Coordinating those needs with appropriate medical-service providers is the basis of AMDA’s medical mission. In recent years, AMDA has been seeking to promote advanced medical expertise in developing countries.

Ophthalmologic Mission in Mongolia

Since 2011, AMDA’s ophthalmologic project in Mongolia has been one of the most viable efforts to date. Hoping to provide better eye-care for the people in Mongolia, the project primarily focuses on the institutionalization of children’s eye checkup: a medical system which is thought to be requisite in uplifting the visual health of Mongolian people from an early age.

In September 2016, a team comprising two Japanese orthoptists as well as AMDA President, Dr. Shigeru Suganami and Dr. Don Lau, the chairperson of AMDA Singapore, with couple of others visited the village of Guchin Us, Övörkhangai located 500 km southwest of Ulaanbaatar. The team organized children’s eye checkup, with some adults being examined upon request. On 05 September, AMDA collaborated with Mongolia Ophthalmology Association to hold a forum titled, “Children’s Eye Problems in Mongolia” at Mongolian Ministry of Health.

Cleft Palate Mission in Indonesia

For the past several years, AMDA Indonesia and Clebus Cleft Centre in Makassar, Indonesia, have provided a free surgical operation for those who are suffering from cleft palate. Also, Taiwan International Health Action (TaiwanIHA) has been the key collaborator since the start of the program.

In May 2016, AMDA and TaiwanIHA jointly organized the reconstructive surgical mission in Parepare and Barru in Eastern Sulawesi.
3. Primary Health Care

GPSP is promoting healthcare and awareness for people living in poverty or in places where health literacy is low. AMDA's primary healthcare brings people back to health in many parts of the world where even the basic medical care is scarce. At the same time, GPSP is also active at educating people about health which is indispensable for the prosperity of the entire community.

**AMDA Peace Clinic, Bodhgaya, India**

AMDA Peace Clinic in Bodhgaya (APC) has been providing various community health/social development services to the people of Bodhgaya, especially in Mastipur area, since its launch in 2009.

APC had initially provided Ayurvedic treatment as a main service. However, as needs among expectant mothers were increasing in the locality, the clinic shifted its focus on maternal healthcare. Since 2014, APC has conducted a home visit program for mothers-to-be, alongside the educational workshop on childbirth delivery and child-rearing.

The clinic also holds a dental checkup for local residents on a regular basis.

APC has now taken root in the community and is serving people by providing quality healthcare services to the poor.
D. Livelihood Support

1. Organic Farming

AMDA Food Program

“Food is the source of life” – This motto embodies AMDA Food Program which was launched in order to spread organic farming in Asia. In 2011, AMDA opened AMDA Notoro Farm at Shinjo Village in Okayama, Japan. The village enacted an ordinance called “Asian Organic Agricultural Platform Promotion Act” in 2010.

Likewise, another organic farm was launched in Malino in South Sulawesi, Indonesia in February 2014. At the farm, both the Japanese staff and local farmers are working hand in hand to uplift the level of agriculture in the region. While the program is providing Indonesian farmers with training opportunities in Japan, Japanese agricultural experts are regularly invited to Malino to give guidance.
International Network of 32 chapters and 71 collaborating organizations around the world

International Chapters

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AMDA Group (Japan)

AMDA MINDS, AMDA International Medical Information Center, AMDA Organization for Global Assistance and Relief, AMDA Hyogo, AMDA Okinawa Chapter, AMDA Kanagawa Chapter, AMDA Kamakura Club, AMDA Kochi Club, AMDA Fukuyama Club, AMDA Tamano Club, AMDA Otsuchi Club, AMDA Kobe Women's University Club, AMDA Takehara Club, AMDA High School Club