Background

The Republic of Indonesia, the fourth most-populated country in the world, comprises more than 17,500 islands. Despite a long history of social programs and a strong policy environment in support of maternal, newborn and child health, Indonesia’s health indicators remain poor. To improve health in the country, the Government of Indonesia has taken a number of key steps, including development of a national strategy to address maternal mortality, development of a national child health policy and national action plan to improve newborn health, and devolution of authority to local governments.

Since the early 1980s, Jhpiego has led a diverse portfolio of activities with multiple partnerships. Jhpiego’s work in Indonesia began with funding from the U.S. Agency for International Development (USAID) to support competency-based training in reproductive health in collaboration with the Department of Obstetrics and Gynecology at the School of Medicine at the University of Indonesia. Jhpiego also worked to strengthen the country’s reproductive health training system by training trainers and establishing a National Clinical Training Network for reproductive health at provincial and district levels, and a National Resource Center at the national level. In 1991, Jhpiego began to work with the Ministry of Health (MOH) to provide IUD and Norplant® implants services, including a field assessment of the arm model for Norplant training and overseeing training of more than 6,000 providers in IUD and/or Norplant services. By 1995, this experience culminated in the development of the “U” technique for Norplant removal, proven to be more easily learned by clinicians, as well as being an improvement over the standard technique in terms of speed and safety. From 2000 to 2006, Jhpiego, along with the Johns Hopkins Center for Communication Programs, led the USAID-funded Sustaining Technical Achievements in Reproductive Health/Family Planning (STARH) Project, which focused on improving quality and choice of family planning (FP) and reproductive health services in Indonesia. Following the December 2004 earthquake and tsunami that devastated parts of the country, Jhpiego also provided immediate assistance in the disaster situation. From 2007 to 2011, under a Ford Foundation-supported initiative in the Karawang District, Jhpiego built the capacity of 17 community health centers, or Puskesmas, and health care providers to identify and treat cervical cancer, and worked with local groups to build awareness and increase demand for cervical cancer prevention services.

More recently, from 2010 to 2012, Jhpiego worked under USAID’s Maternal and Child Health Integrated Program (MCHIP) to facilitate the uptake of evidence-based and integrated maternal, newborn and child health programs and policies at the district level.

Quick Facts

Estimated total population: 251.5 million

Maternal mortality ratio: 359/100,000 live births

Infant mortality rate: 32/1,000 live births

Under-five mortality rate: 40/1,000 live births

Total fertility rate: 2.6

Contraceptive prevalence: 58% (modern methods) 62% (all methods)

HIV prevalence: 0.3%

Births with skilled provider: 83.1%

Sources:
1 Population Reference Bureau 2014 Population Data Sheet
2 Indonesia Demographic and Health Survey 2012
Jhpiego—with implementing partners Save the Children and John Snow, Inc., and a host of local institutions—collaborated with the MOH and District Health Offices to design and implement a dynamic and innovative approach to providing technical assistance to the maternal, newborn and child health programs in three selected program districts. In addition, Jhpiego has a history of collaboration with corporations that continues to this day (e.g., ExxonMobil, Chevron, BP) to strengthen demand for and quality of primary health care services in company worksites.

From developing training systems, to strengthening medical and midwifery schools, to re-establishing health care services in a time of crisis, Jhpiego’s collaboration with the Indonesian Government has resulted in establishment of tools and approaches that are now used as models for organizations and partners worldwide. Over the past decade, Jhpiego has provided technical leadership to address the following MOH priorities:

- **Strengthening the Quality of Maternal and Newborn Health (MNH) and Reproductive Health Services:** Jhpiego ensures that essential MNH and reproductive health services are available and that the referral system is effective and efficient. Jhpiego utilizes a proven quality improvement approach using performance standards. As improvements are made and standards are achieved, health facilities are recognized or rewarded by the District Health Office, peers and others.

- **Building Training Capacity for MNH and Reproductive Health:** Jhpiego has expanded training capacity of the National Clinical Training Network by developing new classroom training sites, identifying and improving clinical practice sites, and developing classroom and clinical trainers. Jhpiego has also served as a national leader with this network in the development of new training curricula.

- **Strengthening Midwifery Training:** Jhpiego works to re-establish and strengthen midwifery education in support of the Government of Indonesia’s national strategy for strengthening pre-service education of nurses and midwives. Graduating from school with stronger skills means that midwives are able to provide higher-quality services and mothers and children have better health outcomes. Jhpiego’s technical assistance helps to improve the overall quality of midwifery education by strengthening classroom teaching, laboratory practice and clinical practice.

- **Preventing Cervical Cancer:** Jhpiego provided support to the Cervical Cancer Prevention Initiative in Indonesia, which laid the foundation for a national cervical cancer prevention program. Jhpiego helped develop national-level policies, guidelines and systems to support the delivery of a single visit approach for cervical cancer detection and treatment. Jhpiego also led a model program for cervical cancer screening and treatment service delivery to identify best practices to inform scale-up of the approach to other districts across Indonesia.

- **Strengthening Infection Prevention Practices:** Jhpiego supports efforts to strengthen infection prevention and control (IPC) practices at health facilities, in line with the national strategy. Initiatives to date include development of IPC guidelines and standards, development of a training strategy and plan, adaptation of training packages, training of trainers, development of job aids to support best practices, development of a supervision model/tools and development of an IPC management package for health office staff at district and provincial levels. Jhpiego has also adapted the IPC model to combat avian influenza.
**Ensuring Community Mobilization:** To increase skilled birth attendance and facility births, Jhpiego has been using community-based approaches such as mothers’ support groups, *Desa SIAGA* and midwife-traditional birth attendant partnerships. *Desa SIAGA* (or “alert village”) is a community mobilization strategy developed by Jhpiego’s MNH Program with funding from USAID. Currently being scaled up nationwide by a variety of donors and partners, this strategy promotes community readiness for childbirth through pregnancy notification and referral, organization of transportation to a health facility, organization of blood donors and the development of a village fund to pay for care in emergencies. Additionally, Jhpiego is promoting partnerships between traditional birth attendants and midwives by clarifying roles, agreeing on mutual compensation and providing recognition for strong partnerships to increase skilled attendance and facility births.

**Current Program Highlights**

**Expanding Maternal and Neonatal Survival**

Jhpiego leads a five-year, $55 million, USAID cooperative agreement to implement the Expanding Maternal and Neonatal Survival (EMAS) program in Indonesia. EMAS seeks widespread impact on maternal and newborn survival. The program is active in 150 hospitals and 300 health centers in the six provinces with the highest rates of maternal and newborn death. EMAS focuses on two priorities: 1) working to make sure hospitals and health centers are held accountable for providing high-quality care for maternal and newborn-related emergencies; and 2) helping to ensure that in emergency situations, pregnant women and babies are sent to an appropriate health facility in a timely manner and are given lifesaving treatment while en route to the hospital. EMAS is implemented in partnership with Budi Kemuliaan Maternal and Child Health Hospital (RSIABK), Muhammadiyah, Save the Children and RTI International.

**Leveraging Mobile Technology to Save Lives**

With support from GE Foundation, Jhpiego is demonstrating how low-cost mobile technologies, or mHealth, can contribute to improved knowledge about and access to MNH services. To meet the need for mothers to receive important clinical information, Jhpiego developed an SMS service, called SMSBunda, that educates mothers about what to expect during the antenatal, delivery and postnatal periods, and how to recognize danger signs. The service, which also encourages mothers to seek facility-based care, is designed to provide a model that the MOH can scale up across the country, and is currently being rolled out in 15 districts across the country.

**Rapidly Expand Access to FP in Selected Districts in Indonesia (My Choice)**

My Choice, funded by the Bill & Melinda Gates Foundation, is designed to contribute to the Government of Indonesia’s goal to increase the nation’s modern contraceptive prevalence rate by overcoming identified barriers and creating a consumer-driven environment where every woman can choose and access the right FP method given her life stage. As a subcontractor to the Johns Hopkins Center for Communication Programs, Jhpiego is responsible for improving readiness of high-volume birthing facilities to deliver high-quality postpartum FP services and counseling. To this end, Jhpiego ensures: on-the-job training of health care providers in postpartum FP and long-acting, reversible contraception services and counseling; placement of trained postpartum FP counselors in birthing units; contraceptive supplies at points of service; and promotion of a culture of informed choice and respectful care among clients.

**Key Accomplishments**

Over the last 30 years, Jhpiego has seen its programming make a difference in Indonesia. Some of our accomplishments include:

**Development of National Policies and Guidelines**

Jhpiego materials (clinical guidelines, training package and training plans) are now used nationally for the prevention of avian influenza and other emerging diseases.

Ensuring Skilled Delivery and Improving Knowledge for Maternal and Newborn Care
- Under the MCHIP program, between 2010 and 2012, the actual number of deliveries assisted by skilled birth attendants increased by 28% and the actual number of facility-based deliveries increased by 20% in MCHIP-assisted sites.
- Under the MCHIP program, Jhpiego contributed to reaching an estimated 12,025 mothers and pregnant women through mothers’ support groups, or kelas ibu, with MNH messages.

Improving Performance of Health Care Providers
- Under the MCHIP program, Jhpiego provided on-the-job mentoring and/or training to a total of 5,335 providers and community health workers on various clinical and non-clinical skills related to maternal, newborn and child health.
- While still in the first phase of implementation, the EMAS program has already improved skills for managing maternal and newborn complications and preventing infections in 23 hospitals and 93 Puskesmas.
- Jhpiego also trained five national and 30 regional trainers to conduct avian influenza training.

Ensuring Availability of Health Services
- In the aftermath of the tsunami, Jhpiego re-established, equipped and renovated 20 midwife practices and two midwifery schools, established and equipped the obstetric unit of one provincial hospital, equipped 50 village midwives with delivery and suturing kits, and equipped two midwifery schools. Three hospitals, 16 Puskesmas and 50 midwifery clinical sites in Aceh have become models of high-quality MNH services and IPC practices.
- Under the same program, Jhpiego recruited and deployed 127 midwives to fill the gap in reproductive health services at health facilities and camps for displaced persons. Services provided by these midwives covered an estimated 1,504 children and 3,852 women. Jhpiego also helped provide counseling to 141 midwives who lost their practices and/or family members.

Improving Access to Cervical Cancer Screening and Treatment
- More than 50,000 women have been screened and treated, as needed, for cervical cancer using the single visit approach described above.

Partners and Donors
Jhpiego has formed multi-level partnerships in Indonesia with communities, community-based providers, health care facilities, nongovernmental organizations, government institutions and policymakers, private sector corporations (e.g., ExxonMobil, GE, Johnson & Johnson, GlaxoSmithKline, BP Rio Tinto, Chevron), and international agencies and foundations such as USAID, AusAID, UNICEF, Ford Foundation and the German company GITEC Consult GmbH.

References