PROGRESS ON FAMILY PLANNING 2020 (FP2020) COMMITMENTS IN

INDONESIA

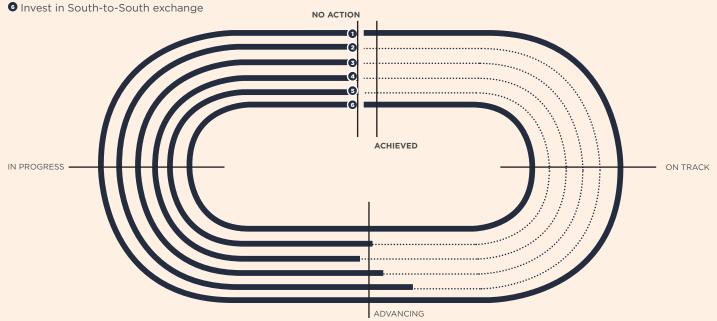
Between 2015 and 2019, the Indonesian government will maintain quality family planning (FP) services for more than **30 million** current users and ensure accessibility to at least **2.8 million** additional users. In order to achieve this goal, the government will allocate **USD 1.6 billion** for FP programs between 2015 and 2019—an almost twofold increase from **USD 255 million** in 2015 to **USD 458 million** in 2019.

Additional funding assistance for health programs including FP will also be provided to local governments in the amount of **USD 1.7 billion** per year.

Indonesia plans to fulfill its commitment to the FP2020 goal by ensuring the: (1) provision of FP services and contraceptives through the National Health Insurance scheme toward universal health coverage (UHC) by 2019; (2) improvement of contraceptive method mix; (3) availability, quality and supply chain management of contraceptive commodities; (4) empowerment of young people; (5) implementation of an integrated approach to rights-based FP programming at the subnational level; and (6) investment in South-to-South exchange.

IS INDONESIA ON TRACK TO ACHIEVE ITS FP2020 COMMITMENTS?

- Allocate USD 1.6 billion for FP programs and USD 1.7 billion in additional funding assistance per year to local government
- Provide FP services and contraceptives through the National Health Insurance scheme by 2019
- Improve contraceptive method mix by expanding the number of service delivery points for long-acting contraceptives
- Ensure the availability, quality and supply chain management of contraceptive commodities
- Address reproductive health needs of young people by implementing integrated, comprehensive policies and strategies



The Indonesian government has met its financial allocation goal made as part of its renewed commitment to FP2020. Indonesia has also successfully undertaken several South-to-South exchanges to share learnings and promote FP. In collaboration with civil society organizations (CSOs) and partners, Indonesia has made significant advances in implementing a national health insurance scheme, developing guidelines to improve supply chain management and ensuring that FP services are more accessible to young people and covered under health insurance. CSOs have been particularly crucial in mobilizing resources at the subnational level.

In addition to the Ministry of Health, partners in Indonesia contributed to the development of this report:



LOCAL NONGOVERNMENTAL ORGANIZATIONS (NGOS)







GOVERNMENT INSTITUTIONS



DONORS



FOR MORE INFORMATION:











Allocate USD 1.6 billion for FP programs and 1.7 billion in additional funding assistance per year to local governments between 2015-2019



Annual allocation for FP programs

The government allocated USD 458 million for FP in 2019, nearly doubling the 255 million budget in 2015. Yayasan Cipta advocated for the prioritization of population and FP programs for local governments.



Allocations for FP programs between 2015-2019

The government allocated USD 1.9 billion in 2019, exceeding the target of 1.6 billion.



Annual allocations to local governments through the Special Allocation Fund (DAK) via BKKBN

In 2015, USD 40.6 million was allocated through DAK for 431 districts and increased to 45 million in 2019 for 508 districts.



Annual allocations for FP and maternal child health programs through DAK via Ministry of Health

In 2017, USD 1.65 million was allocated through DAK and increased to 2.1 billion, exceeding the 1.7 billion target.



Annual allocations for Family Planning Operational Fund (BOKB)

Between 2018-2019, the government increased the BOKB through BKKBN from USD 166 million to 185 million, respectively. Kampung KB received a 6 million increase, while information, education and communication (IEC) received a 200,000 decrease in allocated funds.

Ensure the provision of FP services and contraceptives through the National Health Insurance scheme toward UHC by 2019



Revised FP regulations, policies and guidelines for UHC

FP services have been included in the UHC scheme since its inception, but revisions include vasectomy, tubectomy and FP counseling, as well as establishing central and local governments' authority to conduct commodities procurement.



Affiliated private providers sign onto Badan Penyelenggara Jaminan Sosial Kesehatan (BPJS)

As of the first semester of 2019, the number of BPJS-affiliated primary health care facilities (FKTP) increased by 3.67% and almost 5% of all facilities are eligible to provide FP services nationwide. BPJS-affiliated referral health care facilities (FKRTL) increased by 3.75%. PKBI, a private organization, has two BPJS clinics registered.



Develop a policy on postpartum and post-abortion FP counseling and services pre-discharge

The policy is under revision to be better aligned with the World Health Organization's standardized guidelines for FP services and medical eligibility criteria (MEC) for contraceptive use. CSO contributions include participating in the policy development process, capacity building of post-partum FP providers and advocating for amendment of the abortion law.



Develop a policy for FP commodities and services for the most hard-to-reach populations

BKKBN issued a policy in 2018 that regulates the organization of mobile FP services. The regulations include technical implementation of FP services in areas that have limited or no health facilities that are in accordance with standards and have competent FP medical staff.



Develop a policy for FP commodities and services for emergency and crisis situations

The BKKBN Directorate of Special Lines is in collaboration with UNFPA Indonesia, BNPB and the Ministry of Health to prepare contraceptive service guidelines—including pre-service, implementation and post-service processes—in crisis and disaster areas.



Inclusion of FP services in the Healthy Indonesia Program

Under the Healthy Indonesia Program with Family Approach, the Ministry of Health has incorporated FP indicators into the 12 national standard Healthy Family indicators. The program operates in all 34 provinces, with the primary health care (Puskesmas) as lead implementer.



Fulfillment of "Keluarga Sehat" (Healthy Family) indicators

As the target for the Healthy Indonesia Program, the Ministry of Health has incorporated FP indicators into the set of Healthy Family indicators. 50.62 % of household visited during data collection reported use of FP services.

Improve the contraceptive method mix by expanding the number of service delivery points (SDPs) providing long-acting contraceptives



SDPs provide full choice of FP services

SDPs provide the following FP services: primary SDPs provide the pill, injection and condoms at the *sederhana* level. IUD and implants are offered at the *lengkap* level. FKRTL provides post-partum services, vasectomy and tubectomy services at *thesempurna* level.At the *paripurna* level, facilities provide *sempurna*-level services, as well as fallopian tube recanalization and infertility services. 93.57%—approximately 17,621 facilities—of SDPs are classified as *sederhana* level. DKT Indonesia, on the other hand, provides a wide range of contraceptive options.



Capacity building of public health providers in FP services

In 2019, the training budget was reallocated to focus on MONIKA, a system developed by BKKBN to monitor the verification and certification process of previously-trained midwives and doctors. CSO organizations such as JHCCP greatly contributed to accelerating the process of certification through advocacy and supporting the government's accreditation of the National Clinical Training Network (JNPK).



Contraceptive Total Market Assessment (TMA) conducted

In collaboration with JSI and UNFPA, BKKBN conducted the Contraceptive TMA in 2018 to determine the proportion of contraceptive use between private and public sectors. Results showed that the public sector covered 99% of implant demand and 72% of IUD demand, but only between 16-26% of demand for short-acting contraceptive methods. Data will be used to set procurement targets.



Capacity building of health providers in FP services provided by private sectors

From 2018-2019, Yayasan Kusuma Buana advocated for workplaces in the Subang district to be able to provide FP services for their employees in their private clinics.

Ensure the availability, quality and supply chain management of contraceptive commodities



Update the National Supply Chain Management (SCM) guidelines

Updates will be incorporated with the issuance of newest decree from the head of BKKBN, which aims to optimize the synchronization of data management and the forecast of contraceptive needs in order to support FP services and facilities.



Develop an online system for monitoring contraceptive commodities

BKKBN and JSI developed the Management and Monitoring Tools under the MyChoice Program. It is web-based and enables the administrator to automatically calculate the re-supply based on consumption data from all service levels.



Develop technical guidelines for forecasting contraceptive needs and procurement

Technical guidelines supported by JSI improve the supply chain process—including the reception process, storage and warehouse administration, control of distribution, monitoring and reporting—and ensure the availability of contraceptives at the primary SDPs.

Address reproductive health (RH) needs of young people by implementing integrated, comprehensive policies and strategies through youth-friendly health care services (YFS) and community-and school-based programs



BKKBN and MOH develop adolescent and youth IEC materials

Adolescent friendly health services (AFHS) enables school-age children and adolescents to have easy access to medical procedures, counseling, information and referral systems. As of December 2018, 6,204 Puskesmas PKPR have been established nationally. Additionally, BKKBN has implemented the GENRE program youth centre (PIK-R), a YFS facility integrated in schools, religious organizations and youth organizations that aims to provide IEC to youth.



Develop a National Action Plan on Adolescent Health to include RH programs

Currently, the National Action Plan addresses eight issues of school-age and adolescent health—including RH—and will be updated for the period of 2020-2024.



Establish public-private partnerships for the provision of YFS

YFS contributions from the private sector and NGOs include PKBI-operated centres of information and counseling services, as well as youth forums.

Collaborative youth-centered programs include Get Up Speak Out, Yes I Do, Dance4Life, Explore4Action and Prevention+.



Develop district costed implementation plans (CIPs)

The implementation of the rights-based FP strategy (2017-2019) has encouraged districts to establish their own CIPs and District Action Plans (RAD) based on the issues, integrated RFP and maternal health.



Pilot district CIPs from 2016-2020 and obtain pilot report

Three districts in three provinces—Malang of East Java, Meulaboh of Aceh and Lahat of South Sumatra—have been identified in RFP strategy and district CIPs.



Integrate local government population and FP indicators into Medium-term Development Plans

CSOs such as Yayasan Cipta and JHCCP advocate for and assist local governments to integrate population and FP indicators into their plans.



Establish rights-based FP coordinating team at central level

The rights-based FP coordinating team provides guidance on the operationalization of the RFP strategy and the CIP to the national and sub-national level, specifically the pilot districts.



Implement the Kampung

KB Initiative

Since 2016, Yayasan Cipta supports Kampung KB with team capacity building at the village level and developing evidence-based workplans with AFP SMART-adapted tools. At the national level, Yayasan Cipta supports the government by advocating the Ministry of Village, Disadvantaged Regions and Transmigration for the inclusion of FP in village fund allocations.



Develop Kampung KB online monitoring and reporting system

BKKBN has developed an online monitoring and reporting system coordinated by FP field officers for Kampung KB (https://kampungkb.bkkbn.go.id). It contains components related to local policies and activities.

Investment in south-to-south exchange



Annual south-to-south FP exchange activities

BKKBN conducts south-to-south exchange programs on FP. Between 2017-2019, it was promoted through a series of activities—including an observational study tour on population, RH and FP, comprehensive rights-based FP and training on the maternal and child health handbook.



FOR MORE INFORMATION:

Inne Silviane | Executive Director, Yayasan Cipta Email: i.silviane@yccp-indonesia.org