

PROGRESS ON FAMILY PLANNING 2020 (FP2020) COMMITMENTS IN

INDONESIA



By 2020, the government of Indonesia, in collaboration with its partners and the private sector, will increase the availability of modern contraceptive methods at all levels of its health system in an effort to meet its goal of enabling **120 million** more women to use contraceptives.

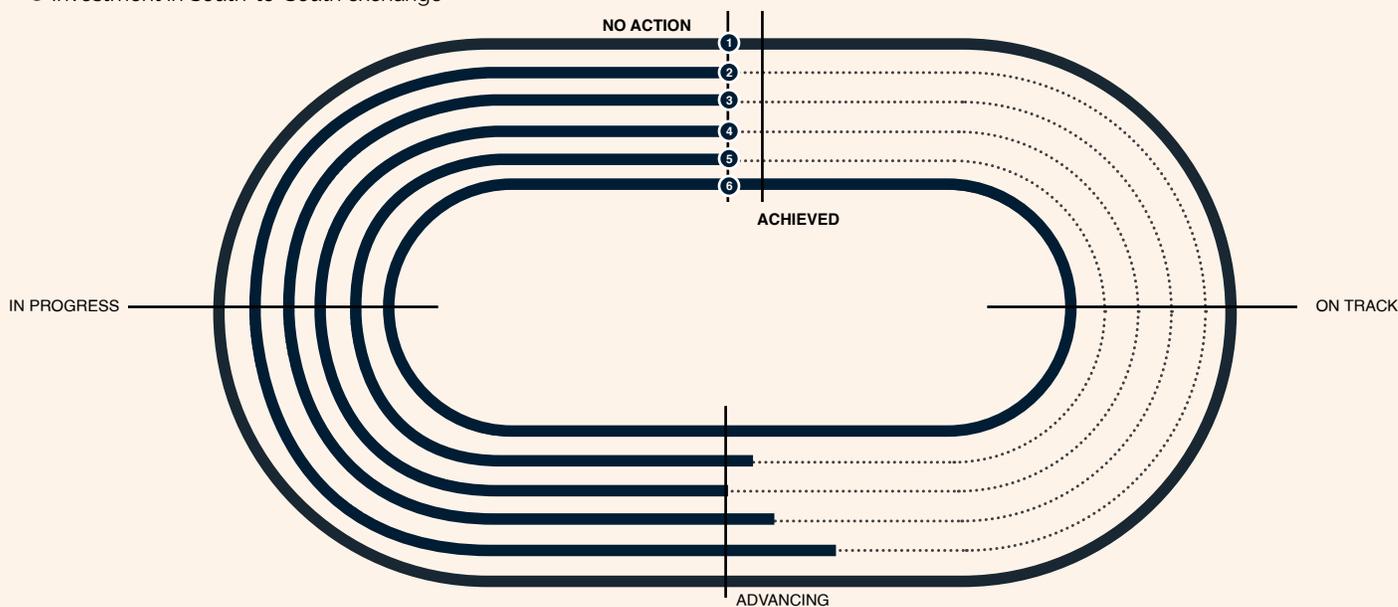
Between 2015 and 2019, the Indonesian government will maintain quality family planning (FP) services for more than **30 million** current users and ensure accessibility to at least **2.8 million** additional users. In order to achieve this goal, the government will allocate **\$1.6 billion** for FP programs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

Additional funding assistance for health programs including FP will also be provided to local governments in the amount of **\$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 the 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-South exchange.

IS INDONESIA ON TRACK TO ACHIEVE ITS FP2020 COMMITMENTS?

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



The government of Indonesia has met its financial allocation goal made as part of its renewed commitment to FP2020. Indonesia has also successfully undertaken several South-South exchanges to share insights and promote FP. As of this reporting period, there are several important guidelines regarding UHC; postpartum and postabortion care; FP services in places experiencing humanitarian crises; and FP services to youth and adolescents that remain under review by the government. Targeted advocacy efforts are needed to ensure that the review process is transparent and that the guidelines are finalized expeditiously.

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

- ❷ NATIONAL GOVERNMENTS
- ❺ DONORS/UN AGENCIES
- ❶ INTERNATIONAL NGOS (INGOS)
- ❸ LOCAL NGOS
- ❷ PRIVATE COMPANIES



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



Annual allocation for FP programs

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

Information provided by: National Population and Family Planning Board (BKKBN); Demographic Institute of the Faculty of Economics and Business, University of Indonesia; Yayasan Cipta Cara Padu (Cipta)



Allocations for FP programs from 2015-2019

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

Information provided by: BKKBN, Ministry of Health (MoH)



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

In 2019, the yearly allocation to Local Government through Special Allocation Fund (DAK) via BKKBN amounted to \$185 million. This is a build up from \$166 million and \$56 million in 2018 and 2017 respectively.

Information provided by: BKKBN



Annual allocations for FP and maternal child health programs through DAK via MoH

In 2019, Government of Indonesia through MoH allocated \$2.1 billion to the special allocation fund (DAK) for health programs including family planning and maternal child health, exceeding the \$1.7 billion target.

Information provided by: MoH



Annual allocations for FP Operational Fund (BOKB)

From 2018-2019, the government increased the BOKB through BKKBN from \$129 million to \$140 million, respectively. The Kampung KB initiative (Family Planning Village) received a \$6 million increase, while information, education and communication (IEC) received a \$200,000 decrease in allocated funds.

Information provided by: BKKBN



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, Sistem Jaminan Sosial Nasional (SJSN), since the beginning of its implementation. A number of revisions have been made since then, including Presidential Decree No. 19/2016 to replace Presidential Decree No. 12/2013. The new decree expanded services to include vasectomy, tubectomy, and FP counseling as components of the UHC scheme, as well as establishing authority of the central and local governments to conduct commodities procurement.



In 2019, the MoH, BKKBN and other stakeholders held a series of discussions for establishing Manlak (implementation management) guidelines for FP benefit in the UHC scheme. The guidelines development process is currently ongoing and will be comprehensive, covering FP and other medical services.

Information provided by: MoH, BKKBN

Affiliated private providers sign onto Badan Penyelenggara Jaminan Sosial Kesehatan (Indonesian National Health Insurance, BPJS)



The government continues its commitment to improve access to FP services by establishing more BPJS-affiliated health care facilities. As of January 2020, a total of 10,360 private health facilities comprised of 9,427 primary (FKTP) units and 1,623 referral (FKRTL) units are eligible to provide FP services as part of BPJS.

Information provided by: Aisyiyah, BKKBN, ThinkWell, Perkumpulan Keluarga Berencana Indonesia (PKBI)

Develop a policy on postpartum and postabortion FP counseling and services predischarge



Through BKKBN, the government released the BKKBN Chairperson Decree No. 24/2017 concerning postpartum and postabortion FP services. Under this decree, counseling of postpartum and postabortion FP can be integrated with antenatal care, pregnancy classes and other activities.

The updated policy from the MoH is currently under final review in the legal division and is a revision of MoH Decree No. 97/2014.

Information provided by: MoH, USAID Jalin, Médecins Sans Frontières (MSF) Indonesia, Ipas, JHPIEGO, PKBI

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.

Information provided by: World Health Organization (WHO), BKKBN, MoH

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



Collaboratively, the BKKBN Directorate of Special Lines, UNFPA Indonesia, Badan Nasional Penanggulangan Bencana (Indonesian National Board for Disaster, BNPB) and the MoH are drafting contraceptive service guidelines for crisis and disaster areas which include pre-service, implementation and post-service processes. The service guidelines are under final review by UNFPA before being formalized in the form of a BKKBN decree.

Information provided by: Aisyiyah, United Nations Population Fund (UNFPA), PKBI, BKKBN, MoH

Inclusion of FP services in the Healthy Indonesia Program



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

Information provided by: MoH

Fulfillment of Keluarga Sehat indicators



The MoH also regularly conducts visitation and intervention at the family level to optimize the fulfillment of the Keluarga Sehat indicators. There have been no updates on the number of visitations and initial interventions made during this reporting period.

Information provided by: MoH



The government of Indonesia will improve the contraceptive method mix by expanding the number of service delivery points (SDPs) providing long-acting contraceptives.

Service delivery points (SDPs) provide full choice of FP services



SDPs provide the following FP services:

- The pill, injection and condoms at the sederhana (simple) level;
- Intrauterine devices (IUDs) and implants at the lengkap (complete) level;
- Postpartum services, vasectomy and tubectomy services at FKRTL units at the sempurna (advanced) level; and
- Sempurna-level services, fallopian tube recanalization and infertility services at the paripurna (sustainable) level.

93.57% — approximately 17,621 facilities — of SDPs are classified as sederhana level. DKT Indonesia, on the other hand, provides a wider range of contraceptive options.

Information provided by: BKKBN, HaloDoc

Capacity building of public health providers in FP services



BKKBN developed a system to monitor the verification and certification process of previously-trained midwives and doctors on CTU, IUD, and implant services by BKKBN between 2011 and 2016 with a system called MONIKA (quality monitoring). As of January 2020, 7,996 doctors and 36,622 midwives had been trained; 11 doctors and 1,922 midwives qualified as "competent," while only five doctors and 1,069 midwives had received competency certification.

Information provided by: BKKBN, Jhpiego, Ipas, Johns Hopkins Center for Communication Programs (JHCCP)

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% and 26% short-acting contraceptive methods demand. Data will be used to set procurement targets.

Information provided by: BKKBN, John Snow, Inc. (JSI), UNFPA

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



Private sector providers continue to support the government in capacity building for health care providers. Working together with the MoH, the Centers for Nutrition and Health conducted capacity-building programs related to the prevention of stunting and maternal and reproductive health. DKT Indonesia regularly conducts contraceptive technology update training for private midwives with legal certification from the Clinical Reproductive Health Training Network.

Information provided by: Centre for Nutrition and Health Studies – UI, DKT Indonesia, Yayasan Kusuma Buana



LEADERSHIP AND GOVERNANCE



HEALTH INFORMATION SYSTEM



SERVICE DELIVERY



HUMAN RESOURCES



FINANCE

The government of Indonesia will ensure the availability, quality and supply chain management of contraceptive commodities.



Update the national supply chain management guidelines

The Ministry of Law and Human Rights is currently reviewing BKKBN Decree No. 9/2019, which covers comprehensive supply chain regulation — including product selection, planning, procurement, distribution, monitoring and evaluation activities.

Information provided by: BKKBN, JSI



Develop an online system for monitoring contraceptive commodities

The Excel-based inventory management and monitoring (MIM) tools were adapted by BKKBN into the Information System for Contraceptive Supply Chain (SIRIKA), which will be used nationally to strengthen the supply chain management system. SIRIKA is a digital online system with two interconnected platforms: the web-based MIM, operated by BKKBN's family planning unit for calculating the contraceptive need for distribution, and Android-based Stokku, used to execute distribution orders.

A series of activities, including assessment, infrastructure setup, tier-level training and activity implementation, have been agreed upon with BKKBN.

Information provided by: BKKBN, JSI



Develop technical guidelines for forecasting contraceptive needs and procurement

The technical guidelines draft was completed and integrated into the BKKBN decree for supply chain management. *Refer to indicator 4.1.

Information by provided: BKKBN, JSI



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

Policy related to youth-friendly services developed



In collaboration with five ministries, the MoH and Coordinating Ministry for the Development of Human and Culture are developing a national action plan for youth (RAN).

*The progress of this process indicator will be tracked in process indicator 5.3.

Information provided by: MoH

BKKBN and MoH develop adolescent and youth IEC materials



As of January 2020, data show a 50% (24,606) increase in the number of established Pusat Informasi dan Konseling Remaja (Youth Information and Counseling Center, PIK-R) from the previous update in September 2019. BKKBN is in the process of revitalizing PIK-R to be more youth-friendly and enrich reproductive health information, education and counseling materials for adolescents. In addition, BKKBN is also currently designing a special youth and adolescents program for the Papua and Papua Barat provinces.

Furthermore, in December 2019, BKKBN held an annual event for the inauguration of the Youth Family Planning Ambassadors (GenRe) and National Jamboree of the Youth Creativity. The GenRe ambassadors, selected at the provincial and national levels, are expected to be youth motivators for FP and especially adolescent reproductive health programs, information and education in their local areas.

Information provided by: BKKBN, MoH, UNFPA, WHO

Develop a RAN to include RH programs



There are ongoing discussions regarding the development of the 2020-2024 RAN by partners supported by the MoH and Coordinating Ministry for Human Development and Cultural Affairs. However, there are notable delays in the development of a new plan due to the concurrent evaluation of the previous 2017-2019 RAN, which notes that a total realignment of previous indicators and other components may be necessary.

Information provided by: MoH

Establish public-private partnerships for the provision of youth-friendly services



There are multiple ongoing public-private partnerships that support the government in providing youth-friendly services. For example, Perkumpulan Keluarga Berencana Indonesia (Indonesia Planned Parenthood Association, PKBI) clinics have provided FP and abortion services for young people under the age of 25, with clients making up 9.69% of FP clients and 19% out of total beneficiaries seeking abortion services. Rutgers WPF Indonesia is collaborating with IPPF Indonesia, Aliansi Remaja, reproductive health research center UGM, Sahabat Kapas Foundation, Rahima, Ardhanyar, Damar and others to implement various programs including: Get Up Speak Out, Yes I Do, Dance4Life, Explore4Action and Prevention+.

Information provided by: Jaringan Aksi, MSF Indonesia, Positive Deviance Research Centre, Aisyiyah, UNFPA, Rutgers WPF, Canadian Embassy, JHCCP, PKBI

Develop district costed implementation plans (CIPs)



Building on the successful pilot of CIPs in the districts of Malang of East Java, Meulaboh of Aceh and Lahat of South Sumatra in the implementation of the rights-based FP (RFP) strategy, there is ongoing discussion for the national scale-up of the district action plans (RAD and CIP approaches). Badan Perencanaan dan Pembangunan Nasional (National Development Planning Agency, BAPPENAS) and UNFPA, in collaboration with Cipta, are developing a document for advocacy and expansion strategy for the integrated rights-based FP and maternal health program, based on lessons learned from the three piloted districts.

Information provided by: UNFPA, Cipta, BAPPENAS

Pilot district CIPs from 2016-2020 and obtain the pilot report



The pilot project in three districts for integrated rights-based FP and maternal health strategy have been completed. BAPPENAS and partners have conducted a dissemination event to report the results of pilot CIPs in the three districts in November 2019. The lessons learned and reports from the three pilot districts became one of the references in developing advocacy and expansion strategy for all of the districts.

Information provided by: UNFPA, BAPPENAS



Integrate local government population and FP indicators into medium term development plans

BKKBN, through the Directorate of Advocacy and IEC, developed a subnational advocacy strategy, aimed to encourage local governments to prioritize FP as part of their local development plans. A multi-step process has been developed. First, advocacy groups at the provincial and district levels must be established, and then formalized by a governor, mayor or district head decree. BKKBN facilitated advocacy workshops in 13 provinces in 2018 and in seven provinces in 2019. In 2020, this scaling-up advocacy will be included in the BKKBN's 2020-2024 strategic plan with the focus in 2020 on improving the quality of established working groups.

Information provided by: BKKBN, Ministry of Home Affairs, Cipta, JHCCP



Establish RFP coordinating team at the central level

The RFP coordinating team provides guidance on the operationalization of the RFP strategy and CIP at the national and subnational levels, specifically in the pilot districts.

Information provided by: MoH, BAPPENAS, UNFPA



Implement the Kampung KB initiative

BKKBN is currently developing a Kampung KB classification model as the initial phase of establishing Kampung KB. The developed classifications have been discussed across all directorates in BKKBN and received reviews and feedback. BKKBN's technical assistance in developing Kampung KB strategies for the next five years includes follow-up strategies after classification. Each strategy will be adjusted based on Kampung KB classification.

As part of this progress, Kampung KB is now under the directorate of population impact. (It was previously under the directorate of field development.) As of January 2020, the number of Kampung KB initiatives that had been launched was 15,660.

Information provided by: BKKBN, Cipta, Ministry of Home Affairs, JHCCP



Develop Kampung KB online monitoring and reporting system¹

BKKBN developed an online monitoring and reporting system for Kampung KB which contains resources such as local policies related to initiative, the number of activities and multisectoral activities and others. Coordinated by FP field officers for data inputs and monitoring at the district level, only 61% of initiatives had submitted and updated data to the online system as of September 2019.

Information provided by: BKKBN

Investment in South-South exchange



Annual South-South FP exchange activities

BKKBN conducts South-South exchange programs on FP. From 2017-2019, it was promoted through a series of activities — including an observational study tour on population, reproductive health and FP, comprehensive RFP and training on the maternal and child health handbook.

Information provided by: UNFPA, BKKBN, MoH

¹ <https://kampungkb.bkkbn.go.id>