

# FP2020 Commitment 2020 Update Questionnaire INDONESIA



Since 2012, the Family Planning 2020 partnership has supported the rights of women and girls to decide freely and for themselves whether, when, or how many children they want to have. Together with our partners across the world, we have built global momentum to strengthen our focus on lessons learned and proven solutions, while broadening and deepening our network of partners to bring local actions and solutions to scale. Through the dedicated efforts of governments, policymakers, program implementers, service providers, donors, and family planning stakeholders, countries are better aligned to meet the needs of an ever-increasing number of women and girls. Our global community has developed a [shared vision for beyond 2020](#) through 2030 that builds on progress achieved to date and positions us to achieve the future women and girls around the world are seeking.

While we are eager to share more information about the new post-2020 partnership and re-commitment process in the coming months, we recognize that governments are presently mobilizing to secure the health of their citizens and respond to the global COVID-19 pandemic. We understand that these efforts will likely have an impact on the submission of the 2020 commitment update questionnaire. FP2020 has a suggested due date of July 31<sup>st</sup> for the questionnaire. This is a flexible deadline, given the current crisis. FP2020 is committed to working with all 47 commitment countries to ensure family planning programs remain operational and available to all women and girls who need them. We have created a [platform](#) with key information from global experts on family planning in the time of COVID-19.

The questionnaire process is scheduled to follow the annual national family planning data consensus meeting. This allows data that is discussed and validated during that process to inform this questionnaire. We are aware that these meetings are happening virtually this year, and FP2020 will coordinate with Track20 to ensure flexibility and responsiveness for this process.

The questionnaire responses support greater information and knowledge sharing, transparency, and accountability among the growing number of FP2020 commitment makers and the broader family planning community. As in previous years, we will share the responses on your country's dedicated FP2020 webpage—<http://www.familyplanning2020.org/Indonesia>—so in-country and global stakeholders

can follow Indonesia's progress in reaching the ambitious goals set on behalf of the women, girls, families, and communities in your country.

FP2020 commitments can be achieved with coordinated actions across multiple sectors and partners at various levels. We ask that you collaborate with your country focal point team, including youth focal point, civil society, and family planning stakeholders in-country to jointly review progress made and challenges faced.

Once completed, please submit to [msmith@familyplanning2020.org](mailto:msmith@familyplanning2020.org) and [chwang@familyplanning2020.org](mailto:chwang@familyplanning2020.org).

Should you have any questions or concerns, please contact Chonghee Hwang, Senior Manager, Asia, on [chwang@familyplanning2020.org](mailto:chwang@familyplanning2020.org). FP2020 is available to help you via teleconference as well, if needed.

Thank you for your time and effort to fill out this questionnaire and provide useful information for the broader partnership.

# FP2020 Commitment 2020 Update Questionnaire INDONESIA



The questionnaire includes 1) Indonesia's commitment and 2) seven standard questions to all 47 FP2020 commitment-making countries.

As you provide your updates below on each element of your commitment, kindly focus on:

- Major achievements, progress made and key challenges or barriers your country faced, during the July 2019 - June 2020 reporting period.
- Please include information on any key upcoming commitment-related milestones.
- Lastly, please reflect on progress per commitment through a self-assessment.

## SECTION I: COMMITMENT UPDATE QUESTIONS

### COMMITMENT OVERVIEW

With less than four years to 2020, the Government of Indonesia (GoI) remains committed to the goal of enabling 120 million more women to use contraceptives. Between 2015 and 2019, GoI will maintain quality family planning (FP) services to more than 30 million current users and ensure accessibility to at least 2.8 million additional users.

In order to do so, GoI will allocate USD 1.6 billion for FP programs between 2015 and 2019; this includes an almost two-fold increase in budget allocation from 255 million in 2015 to 458 million in 2019. Additional funding assistance for health programs including family planning will also be provided to local governments in the amount of USD 1.7 billion per year. Indonesia plans to fulfil its commitment to the FP2020 goal by ensuring the:

1. Provision of family planning services and contraceptives through the National Health Insurance scheme towards Universal Health Coverage 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 the integrated approach to rights-based family planning programming at the sub- national level

## OBJECTIVES

- By 2019, there will be at least 2.8 million additional users of modern contraceptives in Indonesia.
- By 2019, Indonesia will maintain quality family planning services to at least 30 million current contraceptive users.

**1. COMMITMENT:** The Government of Indonesia will ensure the provision of family planning services and contraceptives through the National Health Insurance scheme towards Universal Health Coverage by 2019.

Please provide an update below on achievements made in the July 2019 - June 2020 reporting period in support of these elements of your commitment, including any key upcoming commitment-related milestones:

### Check Points (extracted from 2017 revitalized commitment):

#### **Anticipated Impact:**

- *By the end of 2019, the National Health Insurance program aims to cover all of the country's population by which family planning services will be available to at least 2.8 million additional users between 2015 and 2019, while maintaining services at least 30 million current users.*

**1.1 Under the coordination of MOH, BKKBN, and BPJS, the Government of Indonesia will ensure the provision of free access to family planning services and contraceptives both in public and affiliated private providers under the National Health Insurance scheme towards Universal Health Coverage by 2019.**

#### **Update of Achievement:**

Family planning services have been included in the Universal Health Coverage (known as JKN) scheme since the beginning of its implementation (endorsed by the Law No. 40 year 2004 on National Social Security System and The Presidential decree no 82 of 2018 that is replacing the Presidential decree no 12 of 2013 on National Health Insurance). Condoms and pills services funded through the capitation system, while the IUD, implant, injection and MOP methods funded through the non-capitation system.

In the year 2019-2020, family planning services continue to be included in the JKN scheme, both for public and private hospitals. Orientation on the scheme is arranged by involving private sectors and professional institutions. The private sectors have been actively involved in the provision of family planning services in Indonesia.

As per 30 June 2020, the number of participants of the national health insurance Program has reached 221,021,174 (Source: BPJS Kesehatan) or 81.54% of the total population of Indonesia (source: BPS projection). The number of eligible couples with health insurance increased from 23,562,652 in July 2019 (Source: BKKBN) to 24,615,706 in May 2020 (Source: BKKBN) or increased by 4.47%.

The number of public and private health facilities that have joined BPJS is 11,314 facilities in the first semester year 2019 (Source: BKKBN). It increased to 4.2% or a total of 11,789 facilities in the second semester of 2019 (Source: BKKBN). The number of FP users participating in the JKN scheme was 17,270,962 participants in July 2019 increased 4.74% to 18,088,800 in May 2020 (Source: BKKBN). In term of provision of contraceptives and drugs nationwide, including for JKN's participants, BKKBN has issued the BKKBN Regulation No. 9 year 2019 on the fulfilment of needs of contraceptives and drugs for the eligible couple in the service of family planning in accordance with the decree of the regulation above.

**Progress:** in progress; partly achieved

**Key challenges if not achieve yet:**

#### **Ministry of Health**

- Improving competency of health providers in monitoring and evaluation for both public and private sectors.
- There is a need to improve private sectors' competency and development.

#### **BKKBN**

Some obstacles in family planning services through the JKN scheme, includes:

- Surgical procedures in the hospital can only be done when there is a referral from the first health facility (Puskesmas/Clinic) for family planning services with medical indication
- There are still limited trained health personnel at the first level health facility (Puskesmas/Clinics) that can provide sterilizations. Therefore, women should go to hospital for services with medical indication
- The postpartum-FP/PPFP program has been integrated into childbirth services so there will be no additional cost
- Condom, pills, injections, IUDs, and implants should be served at the first health facility and will be referred if there is a medical indication

## **1.2 Ensure that postpartum and post-abortion women have access to post-pregnancy family planning counselling and services pre-discharge.**

### **Update of Achievement:**

The Government of Indonesia through National Population and Family Planning Board (BKKBN) released the BKKBN's Chairperson Decree No. 24 of 2017 concerning postpartum and post-abortion FP services. Under such Decree, counselling of post abortion and postpartum FP can be integrated with antenatal care, pregnancy class, Posyandu and other activities.

The postpartum Family Planning (PPFP) program is also included in the National Medium Term Development Plan 2020-2024, and PPFP training is included in the Ministry of Health's Strategic Plan (Renstra) which ensure its implementation and budget allocation. PPFP care is included as an integrated part of delivery care, while family planning counseling is part of the antenatal care.

A National Guideline on Comprehensive Post-Abortion Care has also been developed where it is stated that every woman who received post-abortion care should be provided with counselling on pregnancy plan that includes choices of contraception, and should be able to decide on contraceptives method of their choice. MOH has conducted orientations in some provinces and plans to conduct the training programme for next year. The development of training curriculum and modules has started this year. Orientation has been done throughout the provinces involving private sectors. Face to face meetings for the first and second batch were conducted in March 2020, while for the third batch will be conducted virtually.

The Ministry of Health has also amended the regulation on family planning guidelines that include the postpartum family planning. Currently, the draft is in the Legal Bureau of Ministry of Health.

The postpartum family planning program has also been included in the BKKBN's strategic plan 2020-2024. Post-abortion care is provided including the counselling. The family planning field staff (PKB/PLKB) have been also involved in the promotion of Postpartum Family Planning. Videographics for the community and field staff has been made for promoting pregnant women while visiting health facilities.

Further, the Ministry of Health do a revision of postpartum family planning programme. The revision includes involvement of the government and private sector in terms of financing or mobilization. The regulation states that the local government obliged to support the implementation of the postpartum family planning up to the sub-national level. The Postpartum Family Planning Modules has been developed and accredited.

### **Key challenges if not achieve yet:**

The postpartum FP/PPFP is highly dependent on counseling to mothers starting from pregnancy. The quality of FP counseling is only 30%. The low quality of counseling will affect pregnant mothers' willingness to use contraceptive after delivery. The

postpartum-FP/PPFP program has been integrated into childbirth services therefore considered included in the maternity package and no additional cost. Financing mechanisms remain the issue.

**1.3 Warrant availability and accessibility of quality family planning services and contraceptives for hardest to-reach population: those living in emergency and crisis situations; remote and border regions, and outermost islands.**

**Update of Achievement:**

The Ministry of Health has provided FP services through implementation of Minimum Initial Service Package (MISP) for Reproductive Health in Crisis Situation for those living in emergency and crisis situation. One of the components of the MISP is family planning; the Ministry of Health provides the services while BKKBN provides the contraceptives. For those living in remote and border regions, and outermost islands, FP services are carried out by Primary Health care DTPK (Remote and border regions, and outermost islands) with the help of the Nusantara Sehat team, a special program by MOH for DTPK areas. The mobile FP services are operated by BKKBN.

The provision of mobile FP is regulated in the BKKBN's Decree No. 10 of 2018. The regulations include implementation of family planning services in areas that have limited coverage of health facilities in accordance with standards, competency of medical staff in providing family planning services. Family planning services covers the pre-service, service delivery (provision of contraceptive devices and medicines and support of the family planning skilled health personnel ) and post-service (post-service counseling, complications and side effects and complications service procedures).

With support from Rapid Response Mechanism (RRM) FP2020 fund and technical assistance provided by UNFPA, the Guideline on Contraceptive Services in Crisis Situations is available. This document has passed the national peer review process and has accommodated the inputs on COVID19 situations. A FP crisis team has been agreed by BKKBN and UNFPA, a series of FGD discussions with NTB, West Sumatera, Maluku, DKI Jakarta has been facilitated in July to gather the inputs and enrich the guideline. A field visit to Banten Province conducted in early July for testing the guideline and gathering the inputs from the field. After several consultative meetings, BKKBN will issue the decree letter to use the contraceptive guideline in crisis situations nationwide.

**Please mark an X below on progress toward elements of the commitment:**

**Achieved ( ) In-Progress ( X ) Off-Track ( )**

**2. COMMITMENT:** The Government of Indonesia will improve Contraceptive Method Mix in Indonesia by expanding the number of service delivery points capable to provide long-acting contraceptive.

a) Please provide an update below on achievements made in July 2019 - June 2020 in support of these elements of your commitment, including any key upcoming commitment-related milestones:

Check Points (extracted from 2017 revitalized commitment):

**Anticipated Impact:**

- Increased proportion of long-acting contraceptive users

**2.1 Under the coordination of BKKBN and the Ministry of Home Affairs, is ensuring the integration of population and family planning indicators into the local governments' Medium-term Development Plans in the era of decentralization.**

**Update of Achievement:**

BKKBN, through Directorate of Advocacy and IEC (Information, Education, and Communication) has developed a sub-national advocacy strategy which aims to advocate local governments to be able to prioritize family planning as part of their local development plans. This is a multi-step process that includes establishment of advocacy working groups (provincial and district level) and then is formalized in the form of Governor/Mayor/District Head Decree. Some part of the scaling-up process is assisted by "My Choice" program. In 2018, BKKBN has facilitated advocacy workshops in 13 provinces, and 7 provinces in 2019. This year, this scaling-up advocacy will be included in the BKKBN's Strategic plan 2020 – 2024 with the focus this year to improve the quality of established working groups

There are 28 provinces in Indonesia that have been reviewed for their Regional Midterm Plan (RPJMD) including Aceh and East Java. It has been identified that most of all have been RPJMN included indicators on the Population, Family Planning and Family Welfare program (or known as Bangsa Kencana). There are 141 districts (95.91%) that have integrated the Bangsa Kencana Indicators.

**Progress:** partly achieved

**Key challenges if not achieve yet:**

- East Java and West Kalimantan have included the indicators on family planning but not related to the indicator listed in Ministry of Home Affairs Regulation No. 86 year 2017 about the procedure of planning, control and evaluation of regional



development, procedures of evaluation of regional regulations on the plan of long-term development of regional and development plan of mid-term regional plan

- Riau Islands, Riau, West Java, Central Kalimantan, North Maluku, and Central Sulawesi have been included indicator of Bangsa Kencana, however the target is not in accordance with the existing regulation
- Difficulty access in obtaining Midterm Regional Development Plan (RPJMD) documents so that not all RPJMD could not be identified

## **2.2 Under the coordination of MoH and BKKBN, with support from the Indonesian Medical Association, is making sure that FP program is delivered as per the updated evidence based standards and guidelines.**

### **Update of Achievement:**

Ministry of Health together with professional organizations and the BKKBN have adapted the global guidelines known as the four cornerstones of Family Planning services to the Indonesian context, and have adapted screening tools for medical eligibility criteria for contraceptive use, and conduct the orientation to disseminate the PFP services according to the latest guidelines. Existing guidelines were adjusted based on WHO guidelines and adopted to Indonesia's context to be used for orientation to health personnel.

MOH, BKKBN and professional organizations, Indonesian Association for Obstetrics and Gynaecology (POGI) are currently compiling:

1. National Guidance on Medical Practice (*PNPK*) on contraceptive services
2. Guidance on contraceptive Services
3. Revision of Ministry of Health Regulation No. 97 year 2014 on health services before and during pregnancy, childbirth and postnatal period, implementation of contraceptive services and sexual health services
4. BKKBN has included an index on quality of family planning services in the 2020 National Strategic Planning

### **Key challenges if not achieve yet:**

#### Ministry of Health

- The socialization of the guidelines is still limited, not all service providers of the family planning and health facilities are well informed
- Challenges during COVID-19 to monitor and evaluation process

#### BKKBN

- The guidelines are still in the discussion stage with related parties
- BKKBN has made index quality of family planning services in the 2020 Renstra however need to adjust the measurement

**Commented [1]:** Informasi terlalu detail usulan:

Some of the provinces have integrated family planning or the Bangsa Kencana indicators, but not the complete indicators as listed by the Ministry of Home Affairs or the targets are not in line with the existing regulations

### **2.3 Strengthen population management and family development as entities in which family planning can be attributable to the achievement of sustainable development and family wellbeing.**

#### **Update of Achievement:**

BKKBN is still in the development of population databases in village-level region units to improve bottom-up planning to ensure targeted objectives and target beneficiaries of development programmes. Up to June 2, 2020, 3.872 data at the village level have been formed and registered.

#### **Key challenges if not achieve yet:**

- The capacity and capability of the program manager and manager of the population data
- District/city monitoring, and reporting system related to BKKBN has not been integrated into the family information systems application

Please mark an X below on progress toward elements of the commitment:

Achieved ( ) In-Progress ( X ) Off-Track ( )

### **3. COMMITMENT: The Government of Indonesia will ensure the availability, quality, and supply chain management of contraceptive commodities.**

a) Please provide an update below on achievements made in July 2019 - June 2020 in support of these elements of your commitment, including any key upcoming commitment-related milestones:

#### **Check Points (extracted from 2017 revitalized commitment):**

##### **Anticipated Impact:**

- Decline of contraceptive stock-out rates at sub-national levels

### **3.1 The Government of Indonesia (GoI) will update and revise the National Supply Chain Management (SCM) guidelines based on the results from the pilot project of three SCM models that was implemented in two provinces and nine districts.**

#### **Update of Achievement:**

The Ministry of Law and Human Rights is reviewing the BKKBN's Decree No. 9 of 2019. The process of implementation and introduction to the technical team have not started

yet. This decree covered comprehensive supply chain regulation, not only for distribution, but also on product of selection, planning, procurement, distribution, up to monitoring and evaluation activities.

The BKKBN's decree no. 9 year 2019 on Fulfilment of Contraceptive Equipment and Drugs for Eligible Couples in Family Planning services regulates product selection, planning, provision, acceptance, storage and distribution of equipment and contraceptive drugs. The decree also states about digitization of the supply chain management of contraceptives to prevent stock out in the health facilities. The application has used in 6 provinces as pilot projects and will nationally be implemented at the end of 2020. BKKBN is also implementing a policy that increases the choices of contraceptive methods through BKKBN's procurement.

**Progress:** partly achieved

Please mark an X below on progress toward elements of the commitment:

Achieved ( ) In-Progress ( X ) Off-Track ( )

**4. COMMITMENT:** The Government of Indonesia will address reproductive health needs of young people by implementing cross-sector, integrated, and comprehensive policies and strategies on sexual and reproductive health information, education, communication, and counselling through youth friendly healthcare services as well as community- and school-based programs.

a) Please provide an update below on achievements made in July 2019 - June 2020 in support of these elements of your commitment, including any key upcoming commitment-related milestones:

Check Points (extracted from 2017 revitalized commitment):

**Anticipated Impact:**

- Reduced ASFR 15-19

**4.1 The Government of Indonesia, through BKKBN and MoH, will ensure the availability of IEC materials related to reproductive health.**

**Update of Achievement:**

As per January 2020, the number of established Youth Information and Counseling Center (PIK-R) increased with the total of 24,606 (50%). Most of the PIK-R are being established at school level (64%).

In December 2019, BKKBN held an annual event for the inauguration of Youth Family Planning Ambassadors (GenRe) and the National Jamboree of Youth Creativity. The GenRe ambassadors, selected at the provincial and national level, are expected to be youth motivators for family planning programme, especially for socialization of adolescents' reproductive health program, information, and education in their respective areas. BKKBN is in the process of revitalizing PIK-R to be more "youth-friendly" and enrich reproductive health information, education, and counselling materials for adolescents. In addition, BKKBN is also currently designing a special youth/adolescents program for Papua and Papua Barat provinces, started with assessment in November 2019. BKKBN also provides online counseling services in collaboration with JHCCP.

The number of established PKPR from the Ministry of Health increased to 6,641 PKPR. In addition, collaborating with the Ministry of Education and Culture, with the support from UNFPA, Ministry of Health has conducted training focused on adolescents' reproductive health for teachers.

Further, Indonesia has adopted the International Technical Guidance on Sexuality Education Module to the Indonesian context and age of the child. The Indonesian adopted module emphasizes on mastering knowledge and healthy life skills and combined with knowledge on reproductive health (such as puberty, Safe and Healthy behaviour and premarital sex prevention); prevention of drug abuse and prevention of HIV AIDS. The module has been trained for teachers and applied in schools.

In addition, MOH also produced the health report book. There are two kinds of books for health records and to track the health information and health status. This book has been developed, but delayed in printing and distribution (including the IEC material) due to limited resources.

#### **4.2 The Government of Indonesia, led by the Coordinating Ministry of Human Development and Culture, is developing a National Action Plan on Adolescents' Health, which includes reproductive health programs for adolescents and youth.**

##### **Update of Achievement:**

There is an ongoing discussion of the 2020-2024 RAN development (revised from 2017-2019 RAN) under the coordination of the Ministry (Coordinating Ministry for Human Development and Culture) and MoH supported partners. The Government of Indonesia, led by the Coordinating Ministry of Human Development and Culture, has compiled the National Action Plan on Adolescents' Health 2017-2019, which includes reproductive health programs for adolescents and youth. Currently, the Government of Indonesia is in the process of drafting the 2020-2024 National Action Plan on School Age and Adolescents Health. However, there are notable delays in the development due to the current evaluation of previous RAN 2017-2019 which may require total realignment of previous indicators and other components.

The premarital guidance for adolescents aged 20-24 years is being developed, in collaboration between BKKBN, the Coordinating Ministry for Human Development and

Culture and Ministry of Religious Affairs. The pre-marital programme includes counseling and health examination. A National Action Plan (RAN) on School-age and Adolescent Children's health 2017 – 2019 was enacted with a decree of the Coordinating Ministry for Human Development and Culture number 1 of 2018. An evaluation of the implementation the action plan is currently underway.

**Progress:** partly achieved

**Key challenges if not achieve yet:**

Premarital guidance material for adolescents is in the trial process. Therefore, the impact is not yet seen. There is also a need for overview of evidence-based programs and activities and the role mapping and stakeholder responsibilities and define indicators for monitoring progress, as well as strengthening coordination internally and externally with other sectors.

**4.3 The Action Plans covers the guidelines on policy formulation, program planning, program implementation on school-age children and adolescents' health for related ministries and CSOs, including private sectors and academics.**

**Update of Achievement:**

Implementation of Youth Information and Counseling Center at the level of the junior high school, senior high school, universities and out-of school through religious youth community, Karang Taruna and Pramuka (Youth scout)

**Progress:** Achieved

Please mark an X below on progress toward elements of the commitment:

Achieved ( X )   In-Progress (   )   Off-Track (   )

**5. COMMITMENT: The Government of Indonesia will strengthen the integrated approach for rights- based family planning (RFP) programming at the sub-national level.**

a) Please provide an update below on achievements made in July 2019 - June 2020 in support of these elements of your commitment, including any key upcoming commitment-related milestones:

**5.1 The Government of Indonesia, led by the Ministry for National Development Planning (BAPPENAS), established the Rights-based Family Planning Coordination team to coordinate planning and policy for family planning at central level.**

**Update of Achievement:**

The Rights-based family planning coordinating team was established in 2018 and there have been efforts to activate the team by holding several coordination meetings. The establishment of the team was endorsed by a letter from Deputy of Human Development, Society, and Culture number no 56 p 56/D. 1/10/2016

In the years 2017-2019, an integrated planning and budgeting of maternal health program and integrated right-based family planning was implemented in 3 districts' pilot (West Aceh, Malang and Lahat) with integration of advocacy through the Bridging Leadership approach. A district action plan was developed in the 3 districts Regular monitoring was conducted in the areas by involving the Ministry of Health, BKKBN, the Ministry of Home Affairs, and the Ministry for National Development Planning (BAPPENAS).

In the year 2020, as a follow-up and technical assistance is providing to the 3 areas as well as review of its implementation and documentation of lessons learned.

**Progress:** Achieved

**Key challenges if not achieve yet:**

**5.2 Under the coordination of BAPPENAS, BKKBN, and MOH has developed the Rights-based Family Planning Strategy and its Costed Implementation Plan (2017-2019) and will be implemented at the sub-national level in July 2017.****Update of Achievement:**

The pilot project in 3 districts for Integrated rights-based family planning and maternal health strategy have been finalized. 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 become one of the references in developing advocacy and expansion strategy to all the districts, nationally.

The piloting process includes strengthening national's multi-stakeholder partnership, coordination and knowledge sharing under the leadership of the Ministry for National Development Planning (BAPPENAS).

- To assess the progress of implementation of the piloting of integrated planning and budgeting of the Rights-based Family Planning and Maternal Health in 3 districts and document the lessons learned, a review is needed. Therefore, in 2020, UNFPA recruited national consultants
  - To develop a Development of Technical Guidelines on how to implement the Integrated Rights based Family Planning (RFP) and Maternal Health (MH) Planning and Budgeting
  - To conduct Review and Documentation of Lessons Learned on the Implementation Integrated Rights-based Family Planning (RFP) and Maternal Health (MH) Piloting
  - To provide technical backstopping for the pilot districts in implementation and follow up of the District Action Plan (RAD) on Integrated Rights-based Family Planning (RFP) and Maternal Health (MH) programme.

- On-going consultative meetings for inserting the indicators and scope of work on Integrated Right based Family Planning and Maternal Health under the Midterm Regional Plan and in coordination with the Ministry of Home Affairs

**Progress:** achieved

**Key challenges if not achieve yet:**

**5.3 Under MoH's leadership, the Government of Indonesia will implement the Healthy Indonesia Program, which includes family planning services among its core activities and indicators.**

**Update of Achievement:**

Under the *Indonesia Sehat* Program, the family planning was implemented, the Ministry of Health has incorporated FP indicators into the national standard of 12 (twelve) Healthy Family indicators. This programme are operationalized in all 34 provinces, with primary health care facilities (Puskesmas) as the lead implementer

**Progress:** Achieved

**5.4 Under BKKBN's leadership is implementing the new initiative called "Kampung KB" (Family Planning Village) that will help the village communities to improve their quality of life and welfare through family planning, and family development program.**

**Update of Achievement:**

BKKBN has developed *Kampung KB* (Family Planning Village) with a classification as the initial phase of establishing a Grand Design for *Kampung KB*. The classification has been discussed across all the Directorates in BKKBN and received reviews and feedback. The follow up strategies after classification is also part of the technical assistance provided to BKKBN in developing *Kampung KB* strategies for the next 5 years. The strategies will be adjusted based on the classification of each *Kampung KB*.

As of July 2020, there are 15,980 *Kampung KB* that have been established. The evaluation result has shown the impact of "Kampung KB" were quite successful

The overall data of "Kampung KB" in the web until June 2020 classified as follow:

- |                             |         |
|-----------------------------|---------|
| - Basic/Dasar               | : 79%   |
| - Developing/Berkembang     | : 11,3% |
| - Developed/Mandiri         | : 4%    |
| - Sustainable/Berkelanjutan | : 5,7%  |

**Progress:** Achieved

### **5.5 Improve operational mechanisms at the field level in preserving FP participation through community engagement.**

#### **Update of Achievement:**

The operational mechanisms of family planning programs developed in accordance with the situation and demands. In 2018, on the president's initiation, BKKBN launched the Kampung KB program to improve the performance of the KB program in the field. The program also transforms and enriches operational mechanisms in the community. *Kampung KB* was one example of implementing a cross-sector government program that also actively involved local communities.

In the year 2020, the Directorate of Field Development is updating the field line operational mechanisms by issuing Operational Mechanism guidelines and 8 new Standards Operating Procedures (SOPs), including the SOP of the Working Group of Kampung KB (FP villages). This is to clarify the function and position of various elements implementing and supporting the family planning program in the field line.

For monitoring and evaluation of the implementation of this field line operational mechanism, currently BKKBN is developing a web-based monitoring and evaluation system, which is expected to be the decision-making tool before intervening into the field. According to the BKKBN's Strategic Plan for Family Planning and Reproductive Health Advocacy and Interventions in 2020-2024, the implementation of operational mechanism is expected to increase every year from a minimum of 10% to up to a minimum of 70% in 2024.

**Progress:** Achieved

### **5.6 Under the coordination of BKKBN and the Ministry of Home Affairs, the Government of Indonesia will ensure the integration of population and family planning indicators into the local governments' Medium-term Development Plans with respect to decentralized administration.**

#### **Update of Achievement:**

BKKBN has established an advocacy team on population, family planning, and family development programs both at national and sub-national level since 2017. The missions of the advocacy team are to advocate and facilitate the local government in integrating population, family planning, and family development program into Local Medium-Term Development Plan (RPJMD)

**Progress:** Achieved



**5.7 The Government of Indonesia has made the allocation of around USD 1.6 billion for family planning programs between 2015 and 2019.**

**Update of Achievement:**

As of FY2019, the Government of Indonesia had allocated USD 2.0billion, and exceeded the FP allocation target of USD 1.6billion. In 2015, budget allocation for FP programs was around USD 278 million, followed by an increase in 2016 with a total of USD 315 million. While slightly decreased in 2017 with USD 252 million, the allocation was then followed by an increase almost two times in 2018 with a total of USD 565 million. In 2019 alone, the Family planning budget allocation was USD 458 million. This budget was a combination of National's Expenditure Budget (APBN) and Special Allocation Fund/DAK and Family Planning Operational Fund/BOKB (LAKIP,2020).

**Progress:** Achieved

**Key challenges if not achieve yet:**

**5.8 The annual budget allocation for family planning programs will increase from USD 255 million in 2015 to around USD 458 million in 2019, an almost two-fold increase in the proposed budget allocation for FP programs.**

**Update of Achievement:**

The annual budget allocation for the family planning programme in 2015 was IDR 3,890,523,109,000 and in the year 2019 was IDR 6,415.313,314,614 (increased by 65%)

**Progress:** Achieved

**Key challenges if not achieve yet:**

**5.9 Increase in funding assistance from the central government to local governments through the Specific Allocation Fund (Dana Alokasi Khusus). Government of Indonesia has channelled the fund through MoH accounted for 17 USD 60 million for 492 districts in year 2017 to increase amounted USD 744 million for 548 districts in year 2018.**

**Update of Achievement:**

In 2017, physical Special Allocation Fund (DAK) for family planning sub-area was 501,093,500,000 to distribute among 492 districts/cities and Operational Fund for Family Planning (BOKB) was 292.8 billion for 508 districts/cities in 2018 physical DAK was 524,652,300,440 to 479 districts/cities and BOKB was 1,808,981,480,000 to 508 KAB/city

**Progress:** Achieved

**5.10 The Government of Indonesia also commits to maintain a steady increase of the Family Planning Operational Fund between 2018 and 2020, from USD 136**

**million to USD 174 million to support the daily operational cost of counselling centers where family planning field workers provide counselling and implement family welfare programs with local communities, and to support activities to ensuring contraceptive commodity security.**

**Update of Achievement:**

In FY 2019, the Government of Indonesia through BKKBN allocated USD 140 million to the Operational Fund for Family Planning (BOKB), an increase from USD 129 million in 2018. The allocation was to support the operational of FP counselling centre, contraceptive distribution, Kampung KB program, stunting management, program assistance by cadres, Information – education – counselling (IEC), and management operational fees.

**Progress:** Achieved

**5.11 The national government has made available Special Allocation Fund, transferred to the sub-national governments to cover both the operational cost for contraceptive distribution as well as the counselling centers and for physical infrastructure to better equip service delivery points. The Special Allocated Fund, both in BKKBN and MOH, is allocated to all (508) district governments to strengthen FP program by providing budget for operational activities (non-physical menu) and physical infrastructure of health facilities (physical menu).**

**Update of Achievement:**

To strengthen the implementation of services at the primary health care/Puskesmas level, the Ministry of Health has provided operational funds for the implementation of activities through Health Operational Assistance Fund (BOK funds), and improvement of infrastructure through DAK funds. This fund will be proposed by Puskesmas and Regency/city according to their needs. The Ministry of Health has implemented the Healthy Family Program, where the FP indicator has been included as one of the targets for achieving this program indicator. The implementation of the Healthy Indonesia Program uses a family approach strategy. The MOH through the Primary Health Center/PHC visits and intervenes at the family level to optimize the fulfillment of the target of the 12 indicators of the Healthy Family. The Physical Special Allocation Fund has started to distribute since 2008 to all districts. However, BOKB (non-physical) has starting to distribute to 508 districts from 2016

**Progress:** Achieved

**Please mark an X below on progress toward elements of the commitment:**

**Achieved ( X )   In-Progress (   )   Off-Track (   )**

**6. COMMITMENT: The country is investing in South-South Exchanges to share experiences**

**a) Please provide an update below on achievements made in July 2019 - June 2020 in support of these elements of your commitment, including any key upcoming commitment-related milestones:**

The Government of Indonesia has been conducting several activities within the framework of South-South Cooperation, as follows:

1. Under coordination of BKKBN, with support from MOH, Ministry of State Secretariat, UGM, UNFPA, the Government of Indonesia organized a Comprehensive Family Planning Training in Center of Excellence in Yogyakarta on 11 September - 2 October 2019, with 9 participants from LAO, Egypt, Pakistan, Sri Lanka, Indonesia.
2. Under coordination of BKKBN, with support from Ministry of State Secretariat, UNFPA, the Government of Indonesia organized a Knowledge Sharing Program on reproductive health for Bangsa Moro Autonomous Region in Muslim Mindanao of Philippines Youth Muslim Leaders in Surabaya on 27 October - 2 November 2019, with 12 participants.
3. Under coordination of BKKBN, the Government of Indonesia organized a Knowledge Sharing Program on FP and RH for Lembaga Penduduk dan Pembangunan Keluarga Negara (LPPKN) Malaysia in Yogyakarta on 16 - 21 December 2019, with 7 participants.
4. Under coordination of BKKBN, with support from Asian Population Association, John Hopkins Center for Communication Program, and Partners in Population and Development organized an international webinar on "Covid-19: Public health and economic perspectives" to share knowledge, experiences, and best-practices with southern countries on the success story of BKKBN to sustain family planning during covid-19, lesson learned from other countries in implementing family planning during covid-19, and family economic conditions as an impact of covid-19. The webinar was conducted on 25 June 2020, and participated by more than 1600 participants.
5. BKKBN has continue its long-standing partnership under the south-south cooperation with Commission on Population and Development (POPCOM) Philippines through extending the Memorandum of Understanding (MoU) between two countries in terms of knowledge sharing and best practices in family planning and reproductive health for 5 years signed on 2019
6. BKKBN has expanding the partnership under the South-South cooperation with Office National de la Famille et de la Population (ONFP) Tunisia through signing the Memorandum of Understanding (MoU) between two countries in terms of knowledge sharing and best practices in family planning and reproductive health for 5 years signed on 2019

Please mark an X below on progress toward elements of the commitment:

Achieved ( X )   In-Progress (   )   Off-Track (   )

## SECTION II: ADDITIONAL QUESTIONS

Please respond to all parts of the following 7 questions for the reporting period of July 2019 - June 2020.

1. **Please tell us the challenges (if any) and successes your country is experiencing in keeping family planning (FP) as an essential service in your country's COVID-19 response. What are the main barriers and obstacles? Please share your successes as well.**

### Ministry of Health

FP services during the COVID-19 pandemic and new normal adaptation periods were carried out by:

- Optimizing electronic media for counseling and delivery of information
- Increase the role of family planning field officers and cadres in the provision of pills and condoms, for people who cannot access health facilities
- Provision of PPE for officers and maximize the implementation of the Covid-19 prevention protocol to officers, acceptors, families and the community.

### Challenge:

- The availability of PPE for non-COVID services is not optimal. Including lack of Personal Protective Equipment (PPEs) for Health Workers in providing family planning services, particularly private practicing midwives
- The implementation of capacity building activities for health workers is hampered
- The availability of online counseling services is still limited, because the internet network is still not good
- The community access to online counseling services is still low. Lack of access to ICT and low levels of knowledge and skills to utilize ICT hinder many people from enjoying the benefits of technology
- The community refrained from visiting health facilities because of concerns about COVID-19 exposure or mobility restrictions
- Disruption of the distribution that results in the limited availability of drugs, BHP, and ingredients

## BKKBN

The challenges faced in delivering family planning services during the pandemic is limited access to obtain family planning services due to large scale limiting movement (PSBB) and protocol to prevent COVID-19. The needs to maintain services for continuation to maintain demand and supply for FP during Covid19 pandemic such as:

- Reluctance to use FP services, especially for long-term methods due to fears to access health facilities
- Movement restrictions to visit health facilities except for emergencies.
- The high potential of increasing pandemic of COVID 19 due to high migration, especially from the Red Zone areas to other areas that requiring private practicing midwives

Therefore, BKKBN has published the Head of BKKBN Letter no 8 year 2020 for family planning services during pandemic COVID-19, which include relaxation in contraceptive distribution's regulation to involve cadres in distributing repeated pills and condoms to eligible couples. BKKBN also developed guidelines on FP services during COVID-19 and new normal situations. BKKBN has celebrated "Pelayanan Serentak Sejuta Akseptor" (Family Planning Services for Million FP Clients) as a commemoration of National Family Day on 29 June 2020 as an effort to prevent discontinuation of FP clients and promote additional FP users.

## Inputs from CSOs

CSOs support the provision of maternal and adolescent health and services including family planning services during the pandemic: e.g. IPAS provides personal protective equipment (PPE), JHCCP is working with FP field officers (IEC & counselling through online media) and pharmacists (to provide information or suggestions to family planning clients through online platforms), IPPA (PKBI) provides online sexuality education for adolescents.

2. **Has your country integrated representatives from any of the below marginalized groups into the country's family planning technical working group, country engagement working group, or other decision-making bodies?**  
**Below please check all groups that have been engaged**

☒ **Adolescents and Youth**

☐ **People with disabilities**

☒ **Out of School Youth**

☐ **Minority groups**

☐ **Remote or displaced populations**

- a. How has engagement of the groups listed above influenced progress towards the achievement of your country's FP2020 commitments? Also, please share successes and/or lessons learned from these engagements

Youth working group established in 2017 led by FP2020 youth focal point in Indonesia. The members consist of several youth-led organizations championing the issue of Adolescent's Sexual and Reproductive Health, including youth with disabilities, out-of school/community youth group and religious youth group.

- b. If any of these groups have not been engaged in your country, what are the challenges working with these groups? (Please state specific examples)

- c. Have any of these groups engaged or participated in completing this questionnaire?  
Yes

**3. How is your country integrating family planning into universal health coverage efforts and what is/are the mechanism(s) being used or considered? What specific actions were taken in the reporting period on the following points:**

- a. Reduction in out of pocket costs for FP services
- b. Expansion of FP services covered
- c. Extension of population covered

Currently, BKKBN have not received updates from BPJS yet, however Directorate of Family Planning Services and Access (previously Directorate of Public Sectors) in the process of obtaining data from BPJS and plan to conduct study to review family planning in JKN scheme in Indonesia with support from UNFPA

**4. What efforts were made to improve resilience and/or emergency preparedness of family planning systems in-country? Has this been helpful during your country's COVID-19 response?**

With support from RRM FP2020 fund and technical assistance provided by UNFPA, the Guideline on Contraceptive Services in Crisis Situations is available. This document has passed the national peer review process and has accommodated the inputs on COVID-19 situations. An FP crisis team has been agreed by BKKBN and UNFPA, a series of FGD discussions with NTB, West Sumatera, Maluku, DKI Jakarta will be facilitated in late July to gather the inputs and enrich the guideline. A field visit to Banten Province was conducted in early July for testing the guideline and gathering the inputs from the

field. Through several consultative meetings the BKKBN will issue the decree letter to use the contraceptive guideline in crisis situations nationwide.

As the response for COVID-19, BKKBN also developed guidelines on family planning services in the new normal in June 2020 and BKKBN's circular letter no 8 year 2020 on the development of family planning services during COVID-19. A guideline on family planning services in the situation of COVID-19 has been developed jointly by BKKBN and MOH and has been revised. MOH and BKKBN also developing IEC materials (include graphics and text for social media information) during COVID-19

**5. What efforts were made to meet the FP needs of women who are postpartum or post-abortion or to improve family planning/maternal child health integration services?**

**Ministry of Health**

- Integrating the FP services especially PPFP into maternity services
- Development of policies related to post-delivery and post-abortion family planning counseling and services through the revision of Minister of Health Decree No. 97 of 2014, which is currently in the finalization process by the legal division at the MOH. The revision will be aligned with standard guidelines for FP services and medical eligibility criteria (MEC) for contraceptive use by WHO
- The latest version of Maternal and Child Book (KIA Book) have been printed according to the number of pregnant mothers each year. Postpartum family planning was incorporated in the childbirth training
- Insert Postpartum Family Planning in the training including the procedures
- Family planning information and services in the antenatal guideline including postpartum family planning counselling
- For the post abortion services, family planning counselling and services should be included, and insert in the post-abortion guideline. This guideline just finished and is piloting in some districts.

**6. Has your country worked to improve quality of care and rights based family planning into programs?**

- a. Do family planning programs provide a broad range of contraceptive methods (long-term, permanent, or short acting)? Is comprehensive information and counseling on all available methods, including information on any risks or side effects provided?

Yes, BKKBN is expanding the choice of methods of contraceptives by expanding progesterone only pills, 1 rod implant and one-monthly injectable. Counseling is carried out using FP decision-making tool, as well as the

medical eligibility criteria (MEC) to screen the client's medical feasibility, so the client's right to get an appropriate contraceptive based on her medical condition and special characteristics is fulfilled.

- b. To ensure a user-centered approach, do clients get a chance to provide feedback after clinic visits either through questionnaires, surveys, or suggestion boxes?

BKKBN is regularly conducting Indonesian Demographic and Health Survey (IDHS) where the methods information index (MII) was collected. Additionally, Index of Family Planning services is currently being introduced through exits interview approach

- c. After collecting client feedback, how is the data collected being used to improve quality of care?

The data are discussed in BKKBN and feedbacks are provided through provincial offices and below

**7. If applicable, has your country allocated GFF investment case resources to the family planning programs?**

**If yes, which elements of the program have been financed?**

**What were the challenges in prioritizing FP within GFF?**

Not applicable

**Please provide the following information for the government point of contact for this update**

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