The Project for Ensuring Maternal and Child Health Service with MCH HB Phase II

1. Project period
October 2006 – September 2009 (3 years)

2. Project site
Jakarta. Model activities in West Sumatra, East West Java, West Kalimantan, and Wes Nusa Tenggara

3. Division in Charge
JICA Indonesia Office

4. **Input** Japanese side
Chief advisor, Maternal and Child Health advisor, Project Coordination, Survey design, Health education materials, Teaching material development

5. Overall goal
1. MCH services with MCH handbook become available at every health facility
2. All pregnant women and children under five years old have their own health record

6. Project purpose
MCH HB functions as a tool to integrate MCH services and a system to sustain MCH services with MCH HB is strengthened.

7. Outputs

Output 1. Accessibility to MCH HB by community residents is increased
Output 2. The system of orientation on MCH HB for relevant health personnel is strengthened
Output 3. The system of monitoring and reporting on MCH HB is strengthened
Output 4. Models for better utilization of MCH HB are developed
Output 5. Results of survey and evaluation of MCH HB on improvement of MCH are reflected in MOH’s policy making and implementation process
Output 6. The capacity of MOH and relevant local governments to effectively share the experiences of improving MCH services with MCH HB is strengthened through Third Country Program (TCTP) for foreign participants and In-Country Training Program for local participants
8. Activities

Output 1
1.1 Promote relevant stakeholders to utilize MCH HB for their health services
1.2 Increase distribution of MCH HB at health facilities
1.3 Organize and run Working Group within the Ministry of Health to consider
the technical aspects of MCH HB for further improvement
1.4 Collect data on the supply of MCH HB in local governments

Output 2
2.1 Strengthen the routine orientation of MCH HB for midwives
2.2 Introduce orientation of MCH HB in pre-service education for relevant
health personnel
2.3 Encourage relevant departments and programs in the MOH to provide
relevant health personnel with MCH HB orientation
2.4 Encourage the private sector (Association of Midwives etc) to become a
source of MCH HB facilitators

Output 3
3.1 Facilitate MCH HB monitoring by relevant programs
3.2 Facilitate the inclusion of items relevant to MCH HB, such as Kohort Ibu,
Kohort Bayi and Kohort Balita dan Anak Prasekolah, in the national reporting
system on MCH

Output 4
4.1 Develop MCH HB model activities for child health (i.e. To develop contents
regarding child care for Mother’s Class so that MCH is covered in the Mother’s
Class)
4.2 Develop model activities to facilitate the utilization of MCH HB in other
programs (i.e. Birth registration)
4.3 Develop model activities to utilize MCH HB during pregnancy and post
partum by integrating Mother’s Class with programs such as Desa Siaga
(Village Alert), KIP-K (Communication and Counseling skill for midwife
training) and BPCR (Birth Preparedness and Complication Readiness)
4.4 Promote the introduction of MCH HB to health volunteers (kader)
4.5 Promote the utilization of MCH HB at hospitals and private clinics
Output 5
5.1 Plan and design the survey and evaluation of MCH HB
5.2 Conduct Impact Survey of MCH HB on MCH improvement
5.3 Evaluate model activities
5.4 Provide National Review Meetings on MCH HB with feedback on survey and evaluation results
5.5 Support the revision of MCH HB with an evidence-based approach
5.6 Disseminate Project experiences and results to relevant stakeholders

Output 6
6.1 Convene National Review Meetings on MCH HB
6.2 Implement Third Country Program (TCTP) for foreign participants, with In-Country Training Program for local participants

END