REPORT

JICA
COUNTRY-FOCUSED TRAINING COURSE
on MATERNAL AND CHILD HEALTH
in INDONESIA

January 13 – February 6, 2003

OSAKA INTERNATIONAL CENTER, JICA

Nonprofit Organization
Health and Development Service (HANDS)
Preface

In Japan, it is very common that a pregnant woman gets Maternal and Child Health (MCH) Handbook. In Indonesia, a MCH Handbook was firstly distributed in 1994 and the MCH Handbook program has successfully spread through the country to ensure the quality of MCH services in Indonesia.

It is my great pleasure to conduct the country-focused training course on maternal and child health in Indonesia in 2003 under the collaboration between the Government of Indonesia and Japan International Cooperation Agency (JICA). The participants from Indonesia visited many places in Japan and discussed on MCH Handbook. I am sure that both Indonesian fellows and Japanese professionals could learn each other and exchange the ideas to improve maternal and child health through MCH Handbook.

I would like to express my great gratitude to the participants from Indonesia and Japanese professionals who participated in the training course. And I would like to thank Health and Development Services (HANDS) for its excellent arrangement of this training course.

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Research Center For Civil Society, Graduate School of Human Sciences
Osaka University

Steering committee member
The country-focused training course on MCH in Indonesia
Contents

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Background</td>
<td>1</td>
</tr>
<tr>
<td>Course purposes</td>
<td>1</td>
</tr>
<tr>
<td>Participants</td>
<td>2</td>
</tr>
<tr>
<td>Period</td>
<td>2</td>
</tr>
<tr>
<td>Places</td>
<td>3</td>
</tr>
<tr>
<td>Component of the training</td>
<td>3</td>
</tr>
<tr>
<td>Training schedule and the subject</td>
<td>4</td>
</tr>
<tr>
<td>Review of technical training</td>
<td>7</td>
</tr>
<tr>
<td>Evaluation meeting</td>
<td>9</td>
</tr>
<tr>
<td>Suggestions for next year</td>
<td>11</td>
</tr>
</tbody>
</table>

Annex

1. List of participants
2. Training program
3. Plan of action from participants
4. Texts
5. Persons who involved the training course (in Japan)
6. Article in newspaper (Japanese & Indonesian)
I. Background

The training course “Maternal and Child Health in Indonesia” is designed to provide participants with a deeper understanding of the maternal and child health service system in Japan and enable them to introduce and sustain the Maternal and Child Health (MCH) Handbook system to their own region in Indonesia.

First developed in 1994, the MCH Handbook system in Indonesia has since successfully improved the situation of maternal and child health in the provinces that have implemented it. As of 2002, 22 provinces among 30 provinces have started to implement MCH Handbook at the whole area or a partial area in each province. There are still more provinces eager to adopt the system that have yet to gain access to it.

Japan has more than 50 years experience on using MCH Handbook as one important component of maternal and child health service system. So there are many aspects to learn from maternal and child health policy and service system in Japan. “The ensuring quality of maternal and child health through MCH Handbook” project, since 1998, conducted counter part training in Japan every year, and 19 counter parts were trained by JFY 2001. The trainees were only from the Ministry of Health and from selected provinces. Unfortunately those provinces which eager to implement MCH Handbook program, but outside of project sites could not have opportunity to learn much about maternal and child health system in Japan.

In addition, policy of decentralization and autonomy of local government in Indonesia has been progressing year by year. So sustainability of MCH Handbook program strongly depends on health policy of local government.

Therefore JICA develops country specific training course for three years from JFY 2002 for providing the opportunity to more decision makers from local government and professional organization to achieve a certain understanding of important role of MCH Handbook in the context of maternal and child health service system in Japan.

II. Course purposes

By the end of the course, the participants are expected to:

1. Deepen their understanding of maternal and child health policy and the usage of MCH Handbooks in Japan.
2. Deepen their understanding of regional community health policy related to MCH Handbook.
3. Make an action plan, applicable in Indonesia.
Specific objectives:
1. Deepen their understanding toward maternal and child health policy and the usage of MCH Handbook in Japan.
2. Deepen their understanding of community health policy in local government related to MCH Handbook.
3. Deepen their understanding of usage on MCH Handbook in daily health and medical services
4. Deepen their understanding of cooperation between professional organizations and local government in the field of maternal and child health policy making and implementing the services.

III. Participants
Criterion
Who have the authority to decide on and promote an MCH Handbook program after this training course as person with at least 5 years experience working in one of the following organizations;
  a. A provincial health office
  b. A district / municipal health department
  c. A provincial obstetricians’ association
  d. A provincial pediatricians’ association
  e. A provincial midwives’ association

Characteristics of the participants
Seven trainees participated to the course, though eight candidates were approved to be participants. There were 6 doctors, four were from provincial and district health office in a local government and two were from professional organization, and one midwife form Indonesia Midwife Association. All participants were men except one.

IV. Period
From January 13th 2003 to February 6th 2003
Total 26 days
  General orientation 4 days
  Technical training 16 days
  Evaluation meeting 1 day
V. Places

Osaka International Center (JICA)
Tokyo International Center (JICA)
Hyogo International Center (JICA)
Health institutes in Tokyo and Hyogo Prefecture
Study tour in Hiroshima

VI. Component of the training

<table>
<thead>
<tr>
<th>Output</th>
<th>Lecturer / Institute</th>
<th>Method</th>
<th>Day</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 To understand health policy and system, health insurance system in Japan</td>
<td>Dr. Yasuhide NAKAMURA Professor Graduate School of Human Sciences, Osaka Univ.</td>
<td>Lecture</td>
<td>0.5</td>
</tr>
<tr>
<td>2 To understand role of the Ministry of Health and maternal and child health policy</td>
<td>Ms. Yoshiko NIINO MCH division, Ministry of Health, Labor and Welfare</td>
<td>Lecture</td>
<td>0.5</td>
</tr>
<tr>
<td>3 To understand MCH handbook program</td>
<td></td>
<td>Total 1.0</td>
<td></td>
</tr>
<tr>
<td>• Process of revision of MCH handbook</td>
<td>MCH division, Ministry of Health, Labor and Welfare</td>
<td>Lecture</td>
<td></td>
</tr>
<tr>
<td>• History and present role of MCH Handbook</td>
<td>Ms. Yoshiko SATO TAC International Co. Ltd</td>
<td></td>
<td>0.5</td>
</tr>
<tr>
<td>• Printing and distribution management</td>
<td>Mr. Toshihide EI, Mother’s &amp; Children’s Health and Welfare Association</td>
<td></td>
<td>0.5</td>
</tr>
</tbody>
</table>
| 4 To understand role and maternal and child health policy in local government | * Dr. MORI, Public Health Center in Kobe City  
* Ms. IMANISHI, Welfare and Health Div., Sanda City, Hyogo | Lecture | 1.0 |
| 5 To understand various maternal and child health services in local government through observation | * Welfare and Health Center in Sanda City, Hyogo  
* Nada-ku Health Center | Visit & Observation | Total 3.5 |
<p>| 6 To understand daily usage of MCH Handbook                           | * Submission to a pregnant woman Welfare and Health Center in Sanda City, Hyogo |             |     |</p>
<table>
<thead>
<tr>
<th>Output</th>
<th>Lecturer / Institute</th>
<th>Method</th>
<th>Day</th>
</tr>
</thead>
</table>
| • Usage (antenatal care, delivery, outpatient clinics) | * Hayashi maternity hospital  
* Ebara children's clinic  
* Mouri maternity home | | |
| • Usage (mother's class, child rearing group) | * Welfare and Health Center in Sanda City  
* Hayashi maternity hospital | | |
| • Usage (health check up for infant / children) | * Welfare and Health Center in Sanda City  
* Nada-ku Health center  
* Ebara children's clinic | | |
| 7 Exchange information | Faculty of Medicine & Health Science, Kobe University | Seminar | 0.5 |
| • Let Japanese know maternal and child health situation in Indonesia | * Hyogo Children’s Hospital  
* Japan Obstetrician Assoc.  
* Japan Pediatric Association  
* Health promotion div. in Hyogo prefecture | Seminar | 0.5 |
| • To understand collaboration between professional organization and local government | * Japan Pediatric Association  
* Japan Midwife Association | Visit & discussion | 0.5 |
| • Role of professional organizations | * Kobe university hospital  
* Hyogo Children's hospital  
* Hayashi maternity hospital  
* Ebara children's clinic  
* Mouri maternity home | Visit & lecture, observation | 2.0 |
| 8 To understand referral system and medical facilities | Dr. Chandavone PHOXAY, Ms Herrera C. L. ROSARIO, Osaka University | Practice & presentation | 2.0 |
| 9 To make an action plan in Indonesia | Kansai Indonesia Association | Friendship meeting | 0.5 |
| 10 To understand friendship program with NGO | Dr. Yoko WATANABE, HANDS | Lecture & Discussion | 1.0 |
### VII. Training schedule and the subject

<table>
<thead>
<tr>
<th>Date</th>
<th>Day</th>
<th>Activities</th>
<th>Instructor/Organization</th>
<th>Training Place</th>
<th>Training Objective</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Jan.</td>
<td>Sun</td>
<td>Departure from Jakarta (Sleep on Plane)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Jan.</td>
<td>Mon</td>
<td>Arrival at Osaka</td>
<td>OSIC</td>
<td>OSIC</td>
<td>Training Orientation</td>
</tr>
<tr>
<td>3 Jan.</td>
<td>Tue</td>
<td>General Briefing</td>
<td>OSIC</td>
<td>OSIC</td>
<td>General Orientation (Japanese culture, regional exchange, developmental education, etc.)</td>
</tr>
<tr>
<td>4 Jan.</td>
<td>Wed</td>
<td>General Orientation</td>
<td>OSIC</td>
<td>As above</td>
<td></td>
</tr>
<tr>
<td>5 Jan.</td>
<td>Thu</td>
<td>General Orientation</td>
<td>OSIC</td>
<td>As above</td>
<td></td>
</tr>
<tr>
<td>6 Jan.</td>
<td>Fri</td>
<td>General Orientation</td>
<td>OSIC</td>
<td>As above</td>
<td></td>
</tr>
<tr>
<td>7 Jan.</td>
<td>Sat</td>
<td>Holiday</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Jan.</td>
<td>Sun</td>
<td>Move from Osaka to Tokyo</td>
<td>TIC</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Jan.</td>
<td>Mon</td>
<td>Lecture (Health policy, and system health insurance, MCH service system)</td>
<td>Prof. Yasuhide Nakanura, Osaka University</td>
<td>TIC</td>
<td>To understand general outline of Japanese health system</td>
</tr>
<tr>
<td>10 Jan.</td>
<td>Tue</td>
<td>Conference visit to Ministry of Health, Labor and Welfare</td>
<td>Ministry of Health, Labor and Welfare</td>
<td></td>
<td>To understand function of MOH and process of revision of MCH handbook</td>
</tr>
<tr>
<td>12 Jan.</td>
<td>Thu</td>
<td>Lecture and observation (Printing and delivery management system on Management)</td>
<td>Mr. Toshihide Ei (MCH and Welfare Association)</td>
<td></td>
<td>To understand logistic management system on MCH handbook.</td>
</tr>
<tr>
<td>13 Jan.</td>
<td>Fri</td>
<td>Visit to Japan Midwife's Association, Japan Pediatrician's Association,</td>
<td></td>
<td>TIC</td>
<td></td>
</tr>
<tr>
<td>14 Jan.</td>
<td>Sat</td>
<td>Friendship with NGOs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15 Jan.</td>
<td>Sun</td>
<td>Holiday</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 Jan.</td>
<td>Mon</td>
<td>Courtesy call and lecture (MCH policy and service in Local Government)</td>
<td>Public Health Center in Kobe Municipality</td>
<td>Kobe Public Health Center</td>
<td>To understand regional health policy and system</td>
</tr>
<tr>
<td>17 Jan.</td>
<td>Tue</td>
<td>Observation on mothers' class</td>
<td>Sanda city</td>
<td>Sanda Health Center</td>
<td>To understand MCH service to community</td>
</tr>
<tr>
<td>18 Jan.</td>
<td>Wed</td>
<td>Observation of MCH service in each level.</td>
<td>Sanda city</td>
<td>Sanda Health Center</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Training Activities</td>
<td>Instructor/Organization</td>
<td>Training Place</td>
<td>Training Objective</td>
</tr>
<tr>
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<td>------------------------------------------------------------------</td>
<td>---------------------------------------</td>
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<td>-----------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>17</td>
<td>29</td>
<td>Wed.</td>
<td>Health checkups for pregnant women &amp; children, Mother class, Out patient clinic, etc</td>
<td>Nada Ward Health Center, Mouri Maternity Home</td>
<td>Nada Ward Health Center, Mouri Maternity Home</td>
</tr>
<tr>
<td>18</td>
<td>30</td>
<td>Thu.</td>
<td>Hayashi Maternity Hospital</td>
<td>Hayashi Maternity Hospital</td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>31</td>
<td>Fri.</td>
<td>Study trip to Hiroshima</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td></td>
<td>Sat.</td>
<td></td>
<td>Hiroshima</td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>2</td>
<td>Sun.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>3</td>
<td>Mon.</td>
<td>POA preparation</td>
<td>Dr. Poxhay, Ms Herrera (Osaka University)</td>
<td>OSIC</td>
</tr>
<tr>
<td>23</td>
<td>4</td>
<td>Tue.</td>
<td>POA preparation and presentation</td>
<td></td>
<td>To make action plan to Indonesia that is applicable from Japan</td>
</tr>
<tr>
<td>24</td>
<td>5</td>
<td>Wed.</td>
<td>Evaluation meeting, Closing ceremony</td>
<td></td>
<td>OSIC</td>
</tr>
<tr>
<td>25</td>
<td>6</td>
<td>Thu.</td>
<td></td>
<td></td>
<td>Leave for Jakarta</td>
</tr>
</tbody>
</table>
VIII. Review of Technical training

VIII-1 Achievement of major purposes
1. Deepen their understanding toward maternal and child health policy and the usage of MCH handbooks in Japan
   There were three lectures. It was not enough time for lectures, because trainees have a lot of questions, not only MCH policy but also health system and policy. It seemed that trainees could solve their questions and achieve enough understanding through two sessions of follow up meeting. Additional explanation of structure of administration, decentralization system, organization structure of the Ministry of Health, Labor and Welfare, etc., should be added by lecture at the beginning. It was very practical issues to learn the process of the revision and printing management of MCH handbook. Thorough these lectures, the trainees could understand comprehensively about MCH handbook program.

2. Deepen their understanding of community health policy in local government related to maternal and child health handbook
   There were two lectures about maternal and child health services among the policy on community health from the standpoint of local government in Sanda city and Kobe city. In Sanda city, several maternal and child health services to citizens could be observed, including delivery of MCH Handbook to pregnant woman. So the trainees could grasp whole picture on usage of MCH Handbook through maternal and child health policy and service system. Kobe city, however, is an ordinance-designated city, so it was difficult to understand the structural position and role of Kobe city and public health centers. It would be better to avoid an ordinance-designated city as an example.

3. Deepen their understanding of usage on maternal and child health handbook in daily health and medical services
   Not only maternal and child health service from local government, but also maternal and child health service and usage of MCH Handbook in several medical facilities were observed. The trainees could find all related medical facilities use MCH Handbook essentially but ordinary. Visiting to the primary medical facilities, such as maternity hospital and maternity
home, was very impressive for the trainees. They found the Japanese trend of natural delivery, and well organized referral system to the upper medical facilities.

4. Deepen their understanding of cooperation between professional organizations and local government in the field of maternal and child health policy making and implementing the services.

Through two seminars and visit to the office of professional associations, contribution and role of professional association to maternal and child health policy and service could be understood well by all trainees. Each professional organization showed its own role in the context of “Sukoyaka (Healthy Parents and Children)” 21, national plan of the early 21st century, which was one good example of cooperation between professional organizations and local government in the field of implementing maternal and child health services.

VIII-2 Effectiveness of training method

1. Province/ District report

   Report that each participant prepared before leaving Indonesia. By presenting each report, all trainees could share the situation of each province/district in Indonesia.

   It is better to have longer time for question and answer, and encourage attending more Japanese to this presentation.

2. Lecture

   It was arranged to start in the general hen shift in the particular, then it seemed that all trainees could get deep understanding of the contents. There were many questions arouse from the trainees, so very active discussion was seen at every lecture.

   Sometimes trainees felt shortage of discussion time, so it is better to plan longer discussion time in each lecture.

3. Seminar

   There were two seminars and both were with many Japanese attendants. It was planed to all trainees have opportunity to make presentation except province/district report in front of Japanese. Unfortunately, though, some presentations were canceled because of constrain of time by many questions from the trainees became to discuss. So time arrangement and management is the issue to be
considered for the next year.

4. Visit and observation to health and medical institutes
   It took longer time to move from one institute to the next one then made the
   trainees tired, though, it was worth for visiting the institutes to be exposed the
   atmosphere. In Sanda city, we visited to Welfare and Health Center where has
   many activities and facilities in the field of welfare, so the trainees could observe
   health service and welfare service at one time. It was good opportunity to
   understand comprehensive role of local government and community group
   activities.

5. Making an action plan
   It was practical work and grand summary of the training course for each trainee
   to make an action plan in each area to implement and/ or sustain MCH Handbook
   program with adapting system and/ or method which learnt from Japan. Each
   trainee developed an action plan which character of catchments area and target
   group is different.
   At the beginning of two days session, a lecture about theory for action plan was
   provided, and it was very helpful to make the plan.
   It is better to have a lecture on theory of action plan in very early period of the
   training, so it would let all trainees prepare and remind to develop an action plan
   at the end of training.
   In addition that, monitoring these action plans can be one evaluation way to
   effectiveness of the training.

6. Follow up meeting
   There were two sessions of follow up meeting. It was practical for reminding
   and solving questions that arose during lectures and observation. It was
   fortunate that the facilitator knew health system both in Indonesia and in Japan,
   so the trainees could get appropriate responses. In general, though, if a
   facilitator is not so deeply familiar with the health system, each lecturer can be
   responsible to questions and answers from trainees.

IX Evaluation meeting

It was done on February 5th, 2003, the last day of the training with seven trainees,
steering committee members, and staffs in OIC, JICA.

IX- 1 What learnt from Japan

Points that applicable to Indonesia or hope to apply for the purpose of sustaining MCH Handbook in each area.

a Socialization of MCH Handbook
  • Conduct advocacy of MCH Handbook intensively to professional organization, council of province/ district/ municipality.
  • Socialization is very crucial to get budget of MCH Handbook printing.
  • By conducting socialization strongly, MCH Handbook program will be approved and legitimated among local government.

b Develop legitimate authority
  • Make ordinance for pregnancy report and birth report.
  • Use MCH Handbook routinely for those ordinances.
  • With advocacy and existence of the ordinance makes budget of MCH Handbook printing consist and stable.
  • Existence of the ordinance make MCH Handbook be used widely among private, general big hospital and specialists’ clinics

c Establish health committee and steering committees for MCH Handbook in province,
  • Use MCH Handbook routinely in front line of maternal and child health service for improving quality of service.
  • Strengthen referral system by integrating other projects
  • Role as local authority for reconsideration and revision of the contents on MCH Handbook.
  • To make more concrete advocacy to council.

IX- 2 General opinion and suggestion from participants

All trainees gave very constructive suggestion. It was the first batch of training course with the following two more years for 2 groups, there are many scopes of improvement.

1. Curriculum
  • It was well prepared
  • Enough curriculum
  • Necessary to briefing of curriculum
Wanted to have related text in English; i.e. manual of health check up for children
- Wanted all texts to be CD-ROM instead of hard copies.
- Wanted to have more discussion time.
- Wanted to have information and lecture for making action plan in Indonesia at the beginning of training for preparation.
- Wanted to observe not only maternal and child health service but also other activities in public health center.

2. Period and participants
- Length of training is appropriate
- Schedule was too tight in one day
- Council members can be candidates of trainees
- Period of the training is better in warmer season

X. Suggestions for next year

1. Preparation of presentation
   In addition to provincial/ district report, provide an opportunity to make presentation in front of Japanese audiences. So enough preparation for presentation should be done before leaving Indonesia.

2. Use enough time for developing action plan
   From the early period of the training, give a lecture and information for making action plan as grand summary of the training. Trainees should keep it in mind whenever having lectures and visiting institutes, then prepare a draft of action plan.

3. Briefing and follow up meeting of the subjects
   A facilitator makes aims of each lecture / visit clear, then responds to questions during follow up meeting.

4. Make better supporting system in Japan
   - Use bus for moving institute to institute, for avoiding waste of time and tire.
   - Hire assistants for operation of computer to type documents and make presentation files.
Persons who involved the training course (in Japan)
Steering committee = Planning of curriculum

Dr. Yasuhide NAKAMURA, Professor, International Collaboration Division, Research Center For Civil Society, Graduate School of Human Sciences, Osaka University
Dr. Satoshi TAKADA, Professor, Faculty of Health Science, Kobe University, School of Medicine
Ms. Yoshiko NIINO, Specialist for MCH guidance, Equal employment, Children and Families Bureau, Maternal and Child Health Division, the Ministry of Health, Labor and Welfare
Dr. Yoko WATANABE, Technical advisor, HANDS

OSIC, JICA = Administration management

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Mr. Yoshikazu KOIKE, Deputy director, Program division
Mr. Yohei TAKAHASHI, Officer, Program division
Ms. Momoko SUZUKI, Officer, Program division

JICE = Training coordinator, translator

Ms. Toshiko WATANABE (English)
Ms. Eriko YUI (Indonesian)

HANDS = Technical training management

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