Public Health And Political Commitment: Learning Toward Comprehensive Public Health Effort. Indonesia's Current Situation And Challenges

dr. Kirana Pritasari, MQIH
DIRECTOR GENERAL OF PUBLIC HEALTH
Denpasar, 28 NOVEMBER 2019
OUTLINE

CURRENT HEALTH SITUATION

THE POLICY OF THE MID-TERM NATIONAL DEVELOPMENT PLANNING (RPJMN 2020-2024)

THE POLICY AND STRATEGY OF PUBLIC HEALTH PROGRAM IN 2020

PUBLIC HEALTH PROGRAM PRIORITIES

CONCLUSION
CURRENT HEALTH SITUATION & CHALLENGES
MATERNAL AND INFANT HEALTH ISSUES

- Maternal death mostly occurs in health service facilities (77% in hospital) (source: SRS 2016).
- Postpartum death increases.
- Neonatal death mostly occurs in hospital (68%).
- Women married before 20 yo is 46.7%.
- Anemia in girls 5-12 yo is 26% and in girls 13-18 yo is 23%.
Every country in all over the world, facing nutritional problems

Indonesia is one of the countries who experience a **triple burden** on nutrition problems.

**Under 5 Nutritional Status (2013-2018)**

- **Stunting**
  - 2013: 37.2%
  - 2018: 30.8%
- **Wasting**
  - 2013: 12.1%
  - 2018: 10.2%
- **Overweight**
  - 2013: 11.9%
  - 2018: 8%

**Obesity among Adult 18+ tahun**

- 2013: 14.8%
- 2018: 21.8%

**Anemia among Pregnant Women**

- 2013: 37.1%
- 2018: 48.9%

**Source:** Global Nutrition Report, 2018

**Source:** *Riskesdas, 2013 dan 2018
THE CHANGES IN DISEASES PATTERN INFLUENCED BY BEHAVIOR FACTOR

1990
ACUTE RESPIRATORY TRACK INFECTION, TUBERCULOSIS, DIARHEA

2018
STROKE, ROAD TRAFFIC INJURY, HEART DISEASE, CANCER, DIABETES

Non-communicable Disease Risk Factor

<table>
<thead>
<tr>
<th>Basic Health Research</th>
<th>Hypertension</th>
<th>Obesity in Adult</th>
<th>Smoking</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013</td>
<td>25.8%</td>
<td>14.8%</td>
<td>7.2%</td>
</tr>
<tr>
<td>2018</td>
<td>34.1%</td>
<td>21.8%</td>
<td>9.1%</td>
</tr>
</tbody>
</table>
The Achievement of Healthy Living Community Movement (GERMAS) 2013 - 2018

- **No Smoking Area**: 309 Regency/City
  - 2013: 26.1% People ≥ 10 yo who did less physical activities
  - 2018: 33.5%

- **Education on balance diet including exclusive breastfeeding**: 514 Regency/City
  - 2013: 29.3% People ≥ 10 yo who smoke
  - 2018: 28.8%

- **Early detection (breast cancer and cervical cancer) in public health center**: 3,517,498 people in 4,861 Public Health Centre
  - 2013: 93.6%
  - 2018: 95.5%

*Source: Basic Health Research, 2013 and 2018*
The starting point for human resource development begins with ensuring the health of pregnant women, the health of infants, the health of children under five and the health of school children because it is a golden period to produce superior Indonesians. There must be NO STUNTING, NO INFANT MORTALITY AND NO MATERNAL MORTALITY.

Way Forward
The Instruction of Indonesian President 2020-2024

In a very competitive, dynamic and risky world, we must keep developing innovation, thinking out of box. We may not be trapped at the same routine activities.

1. Human Resource as Development Priority
2. Continuing infrastructure development
3. Simplifying, cutting down regulation barrier.
4. Simplifying bureaucracy.
5. Economic transformation.
**THE POLICY OF RPJMN 2020-2024**

Improving quality and community access to health care toward universal health coverage supported by strengthening of primary health care, promotive-preventive efforts, and innovation and utilization of appropriate technology.

---

**STRATEGY OF RPJMN 2020-2024**

01. Improving maternal & child health, Family Planning, and reproductive health

02. Accelerating community nutritional status improvement

03. Strengthening disease prevention & control

04. Institutionalizing Healthy Lifestyle Community Movement (GERMAS)

05. Strengthening health care and food and drug administration

**MAIN TARGET (RELATED TO PUBLIC HEALTH PROGRAM)**

<table>
<thead>
<tr>
<th>INDIKATOR</th>
<th>BASELINE</th>
<th>TARGET 2024</th>
</tr>
</thead>
<tbody>
<tr>
<td>MATERNAL MORTALITY RATE (PER 100.000 LIVE BIRTH)</td>
<td>305</td>
<td>183</td>
</tr>
<tr>
<td>INFANT MORTALITY RATE (PER 1.000 LIVE BIRTH)</td>
<td>24</td>
<td>16</td>
</tr>
<tr>
<td>STUNTING PREVALENCE UNDER-5 CHILDREN (PERCENTAGE)</td>
<td>30,8</td>
<td>19</td>
</tr>
<tr>
<td>WASTING PREVALENCE UNDER-5 CHILDREN (PERCENTAGE)</td>
<td>10,2</td>
<td>7</td>
</tr>
</tbody>
</table>
THE POLICY AND STRATEGY OF PUBLIC HEALTH PROGRAM IN 2020
PUBLIC HEALTH EFFORTS

Hendrik L Blum Theory

- GENETIC: 10%
- ENVIRONMENT: 40%
- BEHAVIOR: 30%
- HEALTH SERVICES: 20%

THE DETERMINANT OF PUBLIC HEALTH STATUS

COMMUNITY EMPOWERMENT

- DETECT
- RESPONSE
- PROMOTE
- PREVENT

KNOWLEDGE ➔ ATTITUDE ➔ PRACTICE

KEMENTERIAN KESEHATAN REPUBLIK INDONESIA

GERMAS
Gorakkan Masyarakat Bantu Sakit
PUBLIC HEALTH PROGRAM APPROACH

CONSIDERING ALL DETERMINANT FACTORS

Focus on 260 regency/city with high prevalence of Stunting & 120 regency/city with high MMR-IMR

INTREGATED IN MANAGEMENT
INTEGRATED IN THE IMPLEMENTATION
INTEGRATED IN PARTNERSHIP
INCREASING ACCESS TO HOLISTIC PUBLIC HEALTH SERVICES

INCREASING THE QUALITY OF PUBLIC HEALTH SERVICES

STRENGTHENING COMMUNITY EMPOWERMENT

STRENGTHENING HEALTH MANAGEMENT
PUBLIC HEALTH PROGRAM PRIORITIES
CONTINUUM OF CARE ACCORDING TO LIFE CYCLE

PROGRAM IMPLEMENTATION: HOLISTIC, INTEGRATED, SUSTAINABLE

PREGNANT, LABOR, AND POSTDELIVERY WOMEN
- Integrated Antenatal Care, Use of MCH Handbook
- Pregnant women class
- Maternity waiting home
- Delivery at health facilities AND Post Partum Family Planning
- Counseling of early breastfeeding initiation

INFANT
- Exclusive Breastfeeding Counseling
- Post Partum Family Planning
- Infant Feeding
- Basic Immunization
- Use of MCH Hand Book

UNDER-5 CHILDREN
- Revitalization of Posyandu (Integrated services post)
- Monitoring growth and development
- Advanced Immunization

CHILDHOOD
- Institution strengthening (TP UKS)
- Health screening and regular check up for students
- Use of Health Rapport
- Immunization

ADOLESCENCE
- Tetanus Immunization
- Pre-marital FP counseling
- Balanced nutrition counseling
- Reproductive health counselling and education at school
- Distribution of Fe Tablet

ADULTHOOD
- Reproductive health counseling and services at workplace
- Tetanus Immunization
- Balanced nutrition counseling

ELDERLY
- Preventive and Promotive health care in Elderly Integrated Health Services Post
- Elderly Friendly Health Services in PHC and Hospital
- Improving the quality of home care / long term care
- Elderly Empowerment in Family and Community to support the reduction of maternal and infant mortality.
- Use of Elderly Hand Book

SUPPORTED BY HEALTHY ENVIRONMENT, HEALTHY WORKPLACES & SUSTAINABLE HEALTH PROMOTION
STRATEGY TO DECREASE OF MMR-NMR

ACCESS IMPROVEMENT
- Placement of midwives in villages (40,199 people from Online SDMK data)
- Family planning, ANC, and delivery services in public health center
- Public health centers are capable of handling violence against women and children
- Birth waiting house (RTK)
- Emergency services: BEONC, CEONC, blood transfusion unit and blood bank,
- Regionalization of references

QUALITY IMPROVEMENT
- ANC with the 10T standard
- Public health center accreditation
- Hospital Accreditation/SNARS : Reducing maternal and infant mortality and improving maternal and infant health. Regulation of 24-hour CEONC implementation and RSSIB / RS Sayang Ibu and Bayi
- Improvement of infrastructure

EDUCATION AND COMMUNITY EMPOWERMENT
- MCH book
- Mother’s class
- Integrated Healthcare Center
- Delivery Planning and Complications Prevention Program
- education information communication for premarital couple
- My Health Report Book
- Adolescent Integrated Health Post
- Elderly Integrated Health Post
- Posbindu (community-based health center to monitor and early-detect the non communicable disease, accidents, and domestic violence

HOLISTIC AND INTEGRATED CARE
- Minimum Service Standards in Health
- Promotive, preventive, curative and rehabilitative according to the life cycle
- Triple elimination (HIV, Syphilis and Hepatitis B)
- Early detection of cancer and its treatment
- Development of reproductive health with assistance or pregnancy outside the natural way

TECHNOLOGY UTILIZATION
- Integrated referral system (Sisrute)
- Telemedicine
- Maternal Death Notification
- Other technological development
- SIKDA Generik

INPUT ➡️ PROCESS ➡️ OUTPUT ➡️ OUTCOME
# Conceptual Framework

## Integrated Program to Reduce Stunting

### Convergence Intervention

| PILAR 1 | Commitment and vision of highest country leader |
| PILAR 2 | Nutritional campaign and Behavioral Change |
| PILAR 3 | Convergence Program |
| PILAR 4 | Nutritional Food Security |
| PILAR 5 | Monitoring and Evaluation |

### Interventions

- **IFA Supplementation (Pregnant Women & Adolescent Girl)**
- **Promotion and counselling of breastfeeding**
- **Promotion and counselling of Infant Young Child Feeding**
- **Food Supplementation (PMT)**
- **Integrated Management of Acute Malnutrition**
- **Growth Monitoring and Promotion**
- **Calcium Supplementation**
- **Vitamin A**
- **Zinc for Diarrhea**
- **Antenatal Care**
- **Imunization**
- **Micro Nutrient Supplementation (Taburia)**
- **Worm Medicine**
- **Integrated Management of Childhood Illness (MTBS)**
- **Sanitation and Clean Water**
- **Non-cash Food Aid**
- **National health insurance**
- **Early Childhood Education (PAUD)**
- **Program Keluarga Harapan (PKH)**
- **Bina Keluarga Balita (BKB)**
- **Kawasan Pangan Lestari (KRPL)**
- **Food Fortification**

### Output

- **Increased coverage of intervention for the 1000 first days of life**
  - Nutrition Consumption
  - Parenting
  - Health Services
  - Environmental Health

### Intermediate Output

- **Improved Nutritional Intake**
  - Anemia
  - LBW
  - Exclusive Breastfeeding
  - Diarrhea
  - Worming
  - Underweight

### Impact

- **Decreased Infection**
  - Stunting
"Mainstreaming health into national development"

"HEALTH IN ALL POLICIES"

ADVOCACY

PRIVATE SECTOR-COMMUNITY PARTNERSHIP

CAMPAIGN AND EDUCATION

Improving education on healthy life

Improving the quality of environment

Improving prevention & Early detection of diseases

Provisioning healthy food & accelerating Nutritional improvement

Improving healthy lifestyle

Increasing physical activity
CONCLUSION
1. It is important to understand the concept of public health as a whole: DETECT - RESPONSE – PROTECT – PREVENT - PROMOTE

2. The efforts to increase public health status should be conducted in more COMPREHENSIVE AND SUSTAINABLE based on HITS (Holistic, Thematic, Integrated and Spatial) approach

3. Strengthening the promotion of healthy lifestyle so that it becomes a culture in Indonesia

4. COMMITMENT AND INTEGRATION OF MULTISECTORAL; ACADEMIA, PROFESSIONAL ASSOCIATION, PRIVATE SECTORS, CSO; are crucial.

5. Health Regency Office must push the implementation of HiAP (Health in All Policies)
THANK YOU