

# NATIONAL ACTION PLANING SERVICES 2014-2015

### **PREFACE**

This National Action Plan for Family Planning Services for 2014 - 2015 has been successfully prepared in close collaboration with BKKBN, other programs, sectors, professional organizations, non-governmental organizations, experts and donor agencies associated with the strengthening of family planning services in Indonesia.

Improving maternal health by reducing the maternal mortality rate (MMR) by ensuring that childbirth is attended by health personnel is Goal 5a of MDGs we all seek to achieve. In addition to birth attendance by health personnel, another effort which supports the improvement of maternal health is the provision of increased universal access to reproductive health as \contained in Goal 5b. This includes active participation in family planning or Contraceptive Prevalence Rate (CPR), antenatal coverage which meets the standard, teen birth rate or Age Specific Fertility Rate (ASFR) and unmet need. In order to achieve Goal 5 of MDGs, it is necessary to carry out some acceleration efforts to achieve the goal, one of which is the preparation of the National Action Plan for Family Planning Services for 2014-2015 in collaboration with BKKBN and other relevant programs and sectors.

This book contains the acceleration efforts for the achievement of targets of family planning services, situation analysis of family planning services, the National Action Plan for Family Planning Services as well as its monitoring and evaluation. The publication of this book is expected to provide a clear direction for the organizers of the family planning program at the national and local levels. I would like to thank all parties who have contributed to the preparation of this National Action Plan, BKKBN, consultants in the writing of this Action Plan as well as other relevant programs and sectors. We also welcome any inputs and valuable suggestions for future improvement of this National Action Plan.

Jakarta, 23 December 2013
Acting Director General of Nutrition and MCH
Ministry of Health

Prof. Dr. dr. Akmal Taher, SpU (K)



# REMARK BY MINISTER OF HEALTH OF THE REPUBLIC OF INDONESIA

The IDHS 2012 data shows that the Maternal Mortality Rate (MMR) remained high at 359 per 100,000 live births. The high rate of cases of 4 Too's (too young, too old, too close together and too many children born) is one of the factors that significantly contributes to the increasing maternal mortality rate.

Strengthening family planning services is one of the important efforts which supports the acceleration in the reduction of maternal mortality rate by preventing unwanted pregnancies and pregnancies in the state of 4 Too's. The data indicates that the scope of the active participation in family planning or Contraceptive Prevalence Rate (CPR) only increased by 0.5% from 57.4% (2012 IDHS) to 57.9%, the unmet need only decreased by 0.6% from 9.1% (2007 IDHS) to 8.5% (2012 IDHS) and teen birth rate or Age Specific Fertility Rate (ASFR) of those aged 15-19 years was still high at 48/1000 among women aged 15-19 years. Less optimal achievement of these indicators contributes to the stagnant Total Fertility Rate (TFR) and ultimately resulted in the high maternal mortality rate in Indonesia.

Intervention efforts in the strengthening of family planning has been carried out through the provision of education on reproductive health for adolescents, counseling and family planning services for bridesto-be and couples of reproductive age. The groundbreaking effort in accelerating the decline in Maternal Mortality Rate is contained in the National Action Plan for Family Planning Services for 2014 -2015. The action plan is prepared together with BKKBN, academia, professional organizations, other programs and sectors.

I would like express my highest appreciation to all parties who have been involved in the preparation and publication of this National Action Plan for Family Planning Services the 2014-2015. I hope that this action plan can be useful for those implementing the family planning program at the central and local levels, government institutions, private sector, and all relevant parties in the implementing of this program.

I hope that our efforts to reduce the Maternal Mortality Rate and Total Fertility Rate in order to improve maternal health and public health of Indonesian people will optimally achieve the targets.

Jakarta, December 2013 MINISTER OF HEALTH

dr. Nafsiah Mboi, SpA, MPH

# **TABLE OF CONTENTS**

Preface Remark Table of Cor List of Abbra List of Termi List of Table List of Figur	eviations inology es	i 7 8 9 10
Chapter 1	Introduction 1.1. Background 1.2. Objectives 1.3. Legal Foundation 1.4. Goals	13 13 15 15
Chapter 2	The Policy to Accelerate Achievement of Targets of Family Planning Services 2.1 Concept of Family Planning Services 2.2. Targets	17 17 19
Chapter 3	Situation Analysis of Family Planning Services 3.1. Conceptual Framework of Situation Analysis 3.2. Impacts of the National Population and Family Planning Program 3.3. Environmental Factors 3.4. Characteristics of Population 3.5. Health-related Behavior	21 22 25 29 32
Chapter 4	National Action Plan for Family Planning Services 4.1. Strategic Issues 4.2. Goals and Strategies 4.3. Strategies and Programs 4.4. Activities, Indicators, Targets, Methods of Verification, Units in Charge and Implementers	37 38 38 40 46
Chapter 5	Monitoring and Evaluation 5.1. Indicators of the Success of Family Planning Services 5.2. Planning and Implementation of Family Planning Services 5.3. Monitoring and Evaluation	47 47 48 50
References		

Appendix 1 Matrix of National Action Plan for Family Planning Services

## LIST OF ABBREVIATIONS

IUD	Intra Uterine Device	PKPR	Youth Friendly Health Services
MMR	Maternal Mortality Rate	PKRT	
Contraceptive	Contraceptive Commodities		Integrated Reproductive Health Services
ASFR	Age Specific Fertility Rate	Polindes	Village Birth Facility/ Maternity Hut
Bappenas	National Development	PPB	Postpartum Bleeding
	Planning Agency	RS	Hospital
BKIA	Maternal and Child Health Center	RSB	Maternity Hospital
BPJS	Social Security Implementing Agency	Posyandu	Maternal and Child Health Center
BPS	Statistics Indonesia	CRA	Couple of Reproductive
CPR	Contraceptive Prevalence Rate	Puskesmas	Age Community Health Center
DTPK	Isolated Areas, Border Areas and Islands	Pustu	Auxiliary Community Health Center
PIH	Pregnancy-Induced Hypertension	PUP	Increasing the Age of Marriage
Jampersal	Maternity Insurance	RPJMN	National Medium-term
JKN	National Health Insurance		Development Plan
KKB	Population and Family Planning	RPJPN	National Long-term Development Plan
IFC	•	SD	Elementary School
IEC	Information, Education and Communication,	IDHS	Indonesian Demographic and Health Survey
PGR	Population Growth Rate	HR	Human Resources
MDGs	Millennium Development Goals	SJSN	National Social Security
MKJP	Long-Acting Contraceptive		System

### 预览已结束, 完整报告链接和二维码如下:





