

**Minutes of FP2020 Country Engagement Working Group for Indonesia**  
**Thursday, 23 May 2013, 1-3pm, at BKKBN Headquarters, Halim 1 Building Operational Room**

Annex I: List of Attendees

Annex II: Presentation slides of Dr. Julianto

**Dr. Julianto**, Chair of the Indonesia Country Engagement Working Group and BKKBN Deputy for Reproductive Health and Family Planning, opened the meeting.

FP2020 architecture & the Indonesia Country Engagement Working Group

- At the global level, several coordination working groups (Market Dynamics; Rights & Empowerment; Performance, Monitoring and Accountability; and Country Engagement) are now forming. It is not yet determined whether all of these WGs will be instantiated at the country level.
- Dr. Julianto serves as a member of the FP2020 Reference Group, which will meet in KL at WD on 30 May. It first met in NY Dec. last year.
- The global Country Engagement Working Group has named Indonesia's co-focal points: the UNFPA Representative & USAID Deputy Director for Health. Dr. Julianto will offer more as to how the Indonesia CEWG will operate, but the CEWG in Indonesia is not intended to duplicate or replace existing structures. Rather, it is intended to position the national programme in coordinating initiatives planned or underway, benefit partners through the exchange of information, and to support Dr. Julianto to coordinate these efforts in his capacity as reporting member for Indonesia.
- UNFPA is providing BKKBN with an FP2020 Secretariat. Mr. John Curran already serves as Communications Officer, and discussions are ongoing about placement other technical experts and a senior adviser. An expanded, technically-oriented Secretariat is planned as part of UNFPA's role in ensuring TA support for revitalization of the national FP programme through the KKB Kencana pilot. UNFPA has a supply chain management consultancy ongoing from Mr. Jesse Brandt and Ms. Clara; earlier, UNFPA had a more strategic consultancy with Mr. Gary Lewis and Ibu Esty.
- In addition to Mr. Ferraris, the global CEWG has named Mrs. Rachel Cintron (USAID) as "co-focal point" for Indonesia. Mrs. Cintron functions also in a capacity representing the Alliance for Reproductive, Maternal, and Newborn Health (composed of USAID, AUSAID, DFID, & Gates). Mrs. Cintron sees this WG as a better way to coordinate, share information and activities to ensure we are all moving in the same direction and meeting the goals of FP2020.

Update on FP2020

- An overview of the global FP2020 architecture (see Annex II, slides 2-3) was presented.
- The Champions Group provides high level support for advocacy and fundraising. The Reference Group provides strategic direction, and overall governance and performance review, and drafts plans for the Task Team [=Secretariat] and working groups. All donor agencies that wish to assist countries will be channeled through the Reference Group, and will be processed in meetings of main groups, which will inform donor agencies as to the needs of their countries.
- The London Summit resulted in a number of goals and pledges (Annex II, slides 4-5). Pak MenKes committed to free FP services in 7 provinces; FP will be incorporated in universal health insurance, and by the year 2019, there is a goal of achieving free universal access to FP services. Pak MenKes also spoke of ensuring universal access/expanding access in marginal regions, such as through mobile service points; pledged to maintain the current level of funding commitments; and recognized there are many pharmaceutical companies in Indonesia who can assist in contributing towards progress on FP2020 goals.

Revitalization of National FP Programme in Context of FP2020

- Dr. Julianto summarized FP challenges in Indonesia (Annex II, slide 8), and outlined a set of 12 proposed "areas of activity," as well as a strategies for BMGF assistance (Annex II, slides 10-19). The presentation will be delivered at the AFP Roundtable Discussion at WD.

- IUD, tubectomy or vasectomy will be first priority, in terms of the national programme. Operations research is planned in the future to provide guidance on best policies/practices.
- BKKBN is having discussions with Gates on decreasing the price of long term methods. There has been success in decreasing the price of implants from 275,000 rupiah to 8.5 USD, which may be reduced further to ~5 USD.
- Indonesia has taken the lead in terms of government commitment as relates to funding, but gaps exist that contribute to low achievement.
- The BMGF proposal came about because of a meeting that had been planned between Melinda Gates and the Minister of Health.
- The FP2020 Reference Group and the global Country Engagement Working Group have sent a note emphasizing that proposals need to be produced in consultation with stakeholders.
- Clarity is needed as to involvement of BMGF in setting priorities, especially with respect to equity issues. More work and discussion may be necessary with respect to such proposals, but previewed BMGF presentation could serve as a roadmap for how to continue.

#### Role of the Private Sector

- 78% of FP services are provided by private sector, which claims an important role in terms “new acceptors.” There is a goal of having a 1:1 desa to bidan ratio, currently at 2:1. Cross-subsidies have been discussed, as has a Gates Foundation role for channeling assistance to deliver education to bidans.
- Practitioners are incentivized towards short term methods over long-term. By eliminating recurrent service visits, some fear an opportunity for advocacy may be lost.
- Promoting long-term methods may carry unconsidered costs, in light of service providers’ low capacity, e.g., training, side effects, removal.
- According to the RPJMN, there is a mandate to maintain the availability of FP services provided by the public sector, but these targets are the inverse of current reality. In the strategy of BPJS, the only criteria is quality of services, irrespective of public/private distinction. The strategy of midwives must be reconsidered, in terms of short term visits.
- UNFPA is planning to work with BKKBN on a more effective strategy for how to involve the private sector.

#### Rights and Choice in Country Plans

- Protection of women and girls’ rights has not been reflected in BKKBN strategies to the satisfaction of development partners. Concern was expressed as to how BKKBN will attend to women’s perspectives on the provision of FP services.
- There are reports, particularly from Jogja, about IUD insertions of clients who say they feel they cannot say ‘no’ to midwives, and soon after go to hospital for removal. This could “boomerang” on the FP programme. New efforts should enhance service providers’ ability to consult with clients about the full range of options.
- Mrs. Melinda Gates emphasized the matter of choice during a meeting with Mr. Magnani the previous week in Washington. Mrs. Gates wants to achieve the target of 120 million, but not without compromising on the matter of reproductive rights and choice. The challenge is figuring out a way of measuring that.
- The pledge of including contraceptives in universal health coverage was welcomed, but prompted the question, “That means 240 million Indonesians. Are we talking about universal the same way?”
- Among metrics/targets of the national FP programme outlined in Dr. Julianto’s presentation are “new acceptors,” subsequently broken into various categories. Concern was expressed that framing targets in terms of “acceptors,” and not “unmet need,” potentially introduces unintended incentives, despite best intentions at the higher levels.
- Practical concerns have been raised within the Government as to paying midwives, which BKKBN has tried to mitigate, the BKKBN Acting Chairman said.

### Indonesia Country Engagement Working Group

- The Indonesia CEWG will need to decide how it meets, and how often.
- The Indonesia CEWG meeting affords BKKBN an opportunity to know the intentions and plans of newcomers, and to ensure we coordinate among ourselves to support the national programme.
- The global Country Engagement Working Group had tasked the Indonesia CEWG with a landscaping exercise. This has a standardized format and is due on 30 May. UNFPA has offered support for this activity.

### Monitoring & Evaluation

- Mr. Bob Magnani (Futures Institute) said his organization has been contracted for FP2020 performance monitoring, which will be working in 24 pledging countries. This will involve supporting the Reference Group, as well as countries, in the use of data.
- Many countries have gotten in the habit of demographic health surveys, but routine data that is being collected can be better used.
- Other FP2020 initiatives may involve deployment of an M&E expert embedded in governments' FP programmes. Futures would like to pilot a service statistics assessment system, which must include not just the public sector, but private entities, such as PKBI.
- Revitalization efforts currently target data collection in 8 provinces [=pilot areas].

### BKKBN/MOH Collaboration

- Many development partners would like to see better collaboration between BKKBN and MOH. More thought is needed as to putting FP/BKKBN in the nation's health strategy.
- A high-level conversation started between MOH and BKKBN this year. In future, there may be a clarification or shift of responsibilities and roles with respect to supply side work, including the training of midwives and doctors, with respect to BKKBN and MOH.
- Criteria of hospital accreditation will include provision of FP.
- Ambiguous regulations on midwives' scope of practice are a barrier to FP provision. BKKBN is working with MOH, asking the Minister to provide midwives responsibility for IUD procedures. In many provinces and districts, they do not know how to interpret regulations on scope of practice. BKKBN sees resolution dependent on the Minister of Health's intervention, without which long-term methods are not a feasible solution.
- Other limiting factors are (1) continued ambiguity as to government's responsibility for providing services to unmarried people, and (2) the Minister of Health's preference for providing insurance coverage only for long-term methods.

### Further meetings:

- There will be an Indonesia Country Caucus on 29 May in KL at WD, and FP2020 is on the agenda, as well as MNCH issues. AFP's Roundtable is scheduled for the same time as the Country Caucus, at which "a BKKBN official will speak," possibly Dr. Julianto, according to consensus recollections of an email by Duff Gillespie. Merging the meetings was suggested.

### BMGF

- JHU CCP has contracted Mr. Jay Parsons, et al. to identify FP gaps in Indonesia. Gates Foundation hired McKinsey & Co. to analyze the impact of long-term methods and costing.
- The BKKBN Acting Chairman said there is agreement that the proposal should be filling the gaps for every source of funding; Ministry of Health is already looking at this. The Minister of Health will speak about the proposals with Melinda Gates. The two are being considered together. Melinda Gates can fill the gaps that in the government's programmes.

BKKBN, UNFPA, and USAID thanked participants and closed the meeting.