Indonesian Advocacy Working Groups Revitalize Family Planning Efforts at the District Level

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With a strong track record in family planning and engagement of national leaders, Indonesia shows promise in meeting its Family Planning 2020 commitments and national goals. But it also faces a significant challenge: fostering that engagement at lower levels of government. Due to decentralization and devolution of government authority, many budgeting and programmatic decisions are made by decisionmakers in more than 500 districts and municipalities.

District-level working groups—first established in two districts in 2010 and expanded in 2012 to an additional nine districts—are proving to be effective change agents at the local level. With technical assistance from Advance Family Planning (AFP) partners Yayasan Cipta Cara Padu Foundation (YCCP) and the Johns Hopkins Center for Communication Programs (CCP) Indonesia, working group members are leading coordinated efforts to increase funding for family planning, improve access to family planning services, and champion the use of family planning in their communities.

In 2013, as most groups entered their second year of operation, districts showed significant district budget increases, ranging from 36 to 62%; greater ownership and coordination of family planning activities; and better evidence-based decisionmaking. In project year 2013-2014, the 11 district working groups achieved a total of 16 “quick wins,” or discrete funding increases and policy advancements (see Tables 1 and 2).

In 2014, the Government of Indonesia demonstrated its interest in scaling up the district working group model by investing in a 5:1 cost-share agreement with AFP. The National Population and Family Planning Board (BKKBN) put forward US $1.2 million to AFP’s $230,000 to expand advocacy efforts through the “KB Kencana” family planning revitalization program. The expansion began in September 2014 with a planned execution in four provinces (Maluku, Papua, South Sulawesi, and East Java), with participation from 30 district representatives. AFP will provide follow-up implementation support to two districts in each province over the next year.

Facing Decentralization and Stagnation

In 2001, Indonesia’s central government devolved many of its administrative and budgetary powers to district governments. This change, on the heels of a
The decline in overall funding for BKKBN, resulted in a stagnation and even reversal of gains made in what was previously one of the world’s most successful family planning programs.

From 2002 to 2012, the total fertility rate remained stagnant at 2.6 and the contraceptive prevalence rate increased only marginally (1%) to 62% among all married women. Use of intra-uterine devices (IUDs) decreased from 13% from 1991 to 4% in 2012.

Since decentralization went into effect, district governments have struggled to identify health issues, prioritize health budgeting, and interpret local data to make evidence-based decisions. BKKBN offices at the district level closed or merged with other programs, such as women and child’s health and community empowerment. As a result, commitment and resources to promote and provide access to family planning dwindled.

**Rallying Local Support**

To position family planning as a multi-sector development issue required the support of many local stakeholders, for which AFP facilitated the establishment of working groups with broad representation. This effort began in two districts (Bandung and Pontianak) in 2010 and in an additional three districts (Bogor, Karanganyar, and Karawang) in early 2012. Later that year, the Improving Contraceptive Method Mix (ICMM) project launched in six districts (Lumajang, Kediri, and Tuban in East Java and Lombok Barat, Lombok Timur, and Sumbawa in West Nusatenggara). A three-year operations research project, ICMM aims to monitor and evaluate the effectiveness of advocacy efforts carried out by the six district working groups. The project was conceived by AFP, is managed by CCP, and funded by the United States Agency for International Development, the Australian Department of Foreign Affairs and Trade, and the Bill & Melinda Gates Foundation.

All 11 district working groups were established by mayoral decree, giving the groups formal operating power with the local government. Members typically include representatives from district government and the community, such as the development and planning agency, the midwives association, district health office, the community empowerment office, religious leaders, and the private sector. A local representative of BKKBN or the local health office usually leads the group, and AFP and ICMM fund part-time consultants who support the group. In ICMM districts, provincial BKKBN and health offices take part in the working groups. Although membership is similar across the districts, working group activities differ depending on each district’s needs and priorities.

**Channeling Advocacy and Budgeting Skills**

YCCP and CCP Indonesia provide technical assistance to the district working groups to develop advocacy strategies and budget for community family planning needs with three tools:

- **Netmap**, an interview-based mapping tool that helps people understand, visualize, discuss, and improve situations in which many actors influence outcomes. Using the tool, working group members learn to understand who influences decisions and develop a networking plan of action.
TABLE 1: AFP INDONESIA YEAR 2 QUICK WINS

- District family planning budgets increase in Bandung, Bogor, Karawang, and Karanganyar in the 2013/2014 fiscal year (see Table 2).

- 271 villages in Bandung allocated a portion of their village budgets to family planning activities: Indonesian Rupiah ( IDR ) 5-15 million ( US $ 412 to $ 1200 ) per village.

- Family planning field workers, midwives associations, local universities, and religious leaders sign partnership agreements with district working groups in Karanganyar, Lumajang, Tuban, Kediri, Lombok Timur, and Sumbawa.

- Twenty work places agree to provide referrals for long-acting and permanent methods in Pontianak district, expanding private sector workplace commitment to family planning, for a total of 45 workplaces in 2013/14.

- Karanganyar District Government allocates IDR 15,000,000 ( US $ 1,500 ) per year to support operations of its district working group.

- Under the Government of Indonesia’s KB Kencana Program, AFP Indonesia expands to an additional 30 districts in four provinces on a cost-share basis with BKKBN: $ 230,960 USD from AFP and $ 1.2 million from BKKBN.

- Lombok Barat and Lombok Timur District Mayors sign an endorsement letter instructing village heads to allocate IDR 500,000 ( US $ 50 ) per village per year in their 2015 village budgets for family planning activities. This applies to all 254 villages in Lombok Timur and 119 villages in Lombok Barat.

TABLE 2: DISTRICT WORKING GROUPS GENERATE FAMILY PLANNING FUNDS IN FIVE DISTRICTS, USD

<table>
<thead>
<tr>
<th>Districts</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bandung</td>
<td>717,647</td>
<td>659,913</td>
<td>710,607</td>
<td>748,173</td>
<td>994,104</td>
</tr>
<tr>
<td>% increase/year</td>
<td>-13%</td>
<td>+20%</td>
<td>+14%</td>
<td>+51%</td>
<td></td>
</tr>
<tr>
<td>Bogor*</td>
<td>924,562</td>
<td>1,102,840</td>
<td>1,501,370</td>
<td>2,130,000</td>
<td></td>
</tr>
<tr>
<td>% increase/year</td>
<td>+33%</td>
<td>+48%</td>
<td>+62%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Karanganyar*</td>
<td>11,303</td>
<td>26,914</td>
<td>63,602</td>
<td>76,774</td>
<td></td>
</tr>
<tr>
<td>% increase/year</td>
<td>+60%</td>
<td>+156%</td>
<td>+37%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Karawang*</td>
<td>410,550</td>
<td>590,412</td>
<td>606,208</td>
<td>724,199</td>
<td></td>
</tr>
<tr>
<td>% increase/year</td>
<td>+60%</td>
<td>+11%</td>
<td>+36%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pontianak</td>
<td>305,261</td>
<td>315,984</td>
<td>454,420</td>
<td>476,952</td>
<td>92,872</td>
</tr>
<tr>
<td>% increase/year</td>
<td>-2%</td>
<td>+60%</td>
<td>+14%</td>
<td>-78%</td>
<td></td>
</tr>
</tbody>
</table>

*AFP advocacy activities began in 2012. Bandung and Pontianak began in 2010. ** Indonesian Rupiahs were converted to US Dollars using historical exchange rates for the first of August for each corresponding year using oanda.com.
• The Family Planning Costing Projection Tool, a modified version of the Reproductive Health Costing Tool developed by the United Nations Population Fund, which helps estimate the required cost to implement effective family planning programs at the district level.

• AFP SMART: A Guide to Quick Wins, which outlines a step-by-step approach to developing a focused, collaborative advocacy strategy that leads to quick wins. The guide features examples on what has worked to increase financial and political support for family planning.

Used together, the tools provide a foundation for evidence-based advocacy and decisionmaking.

Approval for budget increase requests typically requires a multi-pronged approach: district working group members undertake roundtable discussions among government officials, presentations to the mayor and district legislature, and one-on-one advocacy meetings of district working group members with key decisionmakers.

**Strengthening Family Planning Field Activities in Bandung**

Bandung’s working group aimed to create a budget allocation for family planning staff and volunteers from district leadership. Using the AFP SMART approach, they identified the Association of Indonesian Village Governments (Asosiasi Pemerintahan Desa Seluruh Indonesia, or APDESI) as having the most influence over local village leaders, including the village council and headman, who in turn control budgets. Leveraging the existing village budget to fund family planning field activities had never been attempted previously.

The district working group used a number of strategic tactics including meeting with village heads and influential members from local governance groups and workshop presentations on how family planning supports sound economic investment. Advocacy efforts directed toward APDESI led to a new mandate that village leaders in Bandung allocate funds, within their Village Equity Budget, to specific activities such as: 1) coordination meetings between family planning field staff and volunteer workers and 2) efforts to meet the need for counseling and transportation to health centers for those seeking access to long-acting and permanent methods. In 2014, the 270 villages in Bandung district allocated between five to 15 million Indonesian Rupiah (IDR) per village (US $412 to $1200).

YCCP and CCP ensure successful strategies from one district are applied to others. For instance, East Lombok’s district working group also sought to create a village budget allocation, reinforced with an endorsement letter from the mayor. Although the advocacy efforts were quite similar to those in Bandung, the budget needs are different. In 2015, East Lombok’s 254 villages will allocate IDR 127 million (US $11,500) to support operational costs for village family planning cadres to provide long-acting and permanent methods.

**Lessons Learned**

**Be flexible when facing roadblocks:** Pontianak experienced a budget decrease of 78% in 2014. This was due to a decline in local revenue of Pontianak city, which led the local government to cut budgets for all programs, including BKKBN. Following recent elections Pontianak has a new legislature and executive government. YCCP is working to orient the new legislative members to family planning to increase the budget for next year.

**Involve provincial-level stakeholders:** ICMM-supported district working groups encompass a wider range of stakeholders, including district medical offices and provincial-level BKKBN staff. This participation has proven effective in getting better coordination and support from provinces. Coordinating efforts between districts and provinces is particularly important since some responsibilities fall upon provincial offices, e.g., training midwives and ordering contraceptive supplies, while others can be shared, e.g., funding for each. It will also
facilitate expansion and replication of the working groups to other districts.

Next Steps

To continue to amplify the effectiveness of the working groups over the next year, AFP partners YCCP and CCP will:

• Include village budget advocacy efforts in all 11 districts in 2015. According to current laws, all villages have a budget of one million Rupiah to spend at their discretion. This allocation is expected to increase to eight million Rupiah next year. Many village heads choose to spend this on infrastructure programs; AFP will prioritize advocating for allocation of this budget to family planning.

• Enhance focus on monitoring and evaluation of advocacy efforts. AFP and its partners are working on an accurate way to measure community-level activities in order to be able to attribute any changes in long-acting and permanent method use to the activities of district working groups, particularly in ICMM districts. Several MOUs have been signed and, as a next step, the team will ensure that the community level activities occur once the MOUs have been put into place.

• Ensure long-term sustainability of district working groups. The mayor of Karanganyar has endorsed the district working group by allocating 15 million Rupiah in the district budget to fund its operations. AFP will work to replicate this success across other districts so the groups can continue after the project ends.

• Expand advocacy efforts to other districts. YCCP and CCP are working with with national, provincial, and local governments to continue to expand advocacy efforts throughout the archipelago. For example, in November 2014 the provincial-level BKKBN office in East Java agreed to buy-in and provide funds to adopt AFP’s advocacy approach and replicate it in 38 districts in 2015.

References


3 DHS 2012

4 CIPTA Annual Report: 2014

Cover photos by Michael Thirnbeck, DFAT, Nils Axel Braathen, Dini Haryati, YCCP (pg.2), US Pacific Air Forces (pg.5), and Deepak Sharma (pg.6).
Acknowledgments

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Advance Family Planning (AFP) aims to increase the financial investment and political commitment needed to ensure access to quality family planning through evidence-based advocacy. An initiative of the Bill & Melinda Gates Institute for Population and Reproductive Health with the Johns Hopkins Bloomberg School of Public Health, AFP works to achieve the goals of the FP2020 initiative: to enable women and girls in some of the world’s poorest countries to use contraceptive information, services and supplies, without coercion or discrimination.

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