



Ministry of Health  
Republic of Indonesia

# THE MANAGEMENT GUIDEBOOK FOR APPLICATION OF THE MCH HANDBOOK



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MINISTRY OF HEALTH, REPUBLIC OF INDONESIA  
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Departemen Kesehatan  
Republik Indonesia

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## MESSAGE FROM THE DIRECTOR GENERAL OF PUBLIC HEALTH

We thank God for the opportunity to present you with the management guidebook for application of the MCH handbook 2009. This guidebook contains management of application of the Maternal and Child Health handbook (the MCH handbook) in accordance with the MCH handbook revised edition of 2009 and the newest policies related to the maternal and child health.

Government's policy guarantees the children's rights as referred to the Convention of the Rights of the Child and the Law of Republic of Indonesia, No. 23 year 2002 on Child Protection which says that all children have their rights to live, survive, and develop, and receive the protection. These rights would be realized if the government together with the private sector and communities provides quality human resources, infrastructure, facilities and services that are accessible and affordable to the community people. Especially, health services for pregnant women and children until five years old are important, and these health services provided should be recorded in the MCH handbook.

The MCH handbook, which is commonly referred to as the pink book is one of tools for maternal and child health services which is directly provided to mothers and their family. It can be said that the use of the MCH handbook is one of the steps in the improvement of social empowerment for mother and child health. This includes a families' role in the fulfillment of nutrition and stimulation of child development. Success in the implementation depends on the role of frontline services falls under the responsibility of local governments.

The Management guidebook for the application Management of the MCH handbook helps the operators of maternal and child health programs and related programs on the central level, provincial/regency/municipal levels and various other parties to improve the implementation of the MCH Handbook.

Good luck and success with you in implementing the MCH handbook.

Jakarta, August 2009

**Director General of Public Health**



**Dr. Budihardja, DTM&H, MPH**



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## INTRODUCTION

The Maternal and Child Health handbook (MCH handbook) has been applied in Indonesia since 1994. Application of the handbook started in all 33 provinces.

With the enactment of Law No. 22 Year 1999 regarding the Regional Government, Law No. 25 Year 1999 regarding Financial Balance Between the Central and Regional Governments, and Government Regulation No. 25 Year 2000 regarding the Authorities of the Central Government and Provinces as autonomous regions; development policy in the health sector is one of the compulsory authorities that must be implemented by Regions (Districts/Municipalities). This means that District/Municipal Governments are fully responsible for the implementation of health development to improve the community's health standards in their respective regions including the fulfillment of mother and child health service and community empowerment on mother and child health.

The use of the MCH handbook is one of the strategies to empower communities, especially families, in maintaining their health and obtaining quality mother and child health services, the District/Municipal Governments must implement and apply the use of the MCH handbook.

To allow the use of the MCH handbook by all families, decision-makers at provincial and district/municipal levels needs to be equipped with Management Guidelines for the MCH handbook. These general guidelines provide information about the management of the MCH handbook so that they can be used in line with the standard and reach the target, and describe the stages of activities and efforts to ensure the sustainable use of the MCH handbook by the community.

The stages in the MCH Handbook application are:

- I. Preparation
- II. Implementation
- III. Monitoring and Evaluation
- IV. Development

In order to facilitate integrated monitoring in the implementation of mother and child health, all the activities must be must be coordinated with the local health office.



# CHAPTER I PLANNING

In order to be able to implement the MCH Handbook properly, the provincial and district/municipal health office together with related stakeholders including professional organizations needs to conduct the steps of data analysis, planning and budgeting the activities of the MCH Handbook annually.

## A. DATA ANALYSIS

In planning the application of the MCH Handbook, it is necessary to study first the needs, resources, facilities and infrastructures that are available in order to make a proper planning.

### 1. Objectives

*General Objective:*

There is an estimate of the MCH Handbook in the operational area.

*Specific Objectives:*

- There is an indication of the condition of the use of the MCH Handbook in the operational area
- There is a map of the use and distribution of the MCH Handbook
- There is a map of the availability of resources that support the application of the MCH Handbook (human resources, funding, health facility and other facilities and infrastructures)

### 2. Activities:

- Collecting all secondary data in the health area/facility.
  - Target data of pregnant mothers, babies and young children.
  - Data on the number of health facilities either belonging to the government or private sector in the area.
  - Data on human resources either in the government or private sector (Hospitals, Maternity hospitals, Private Clinic, PHC, Auxiliary PHC, Midwives in Villages, Village Health Posts and Private Practices of Midwives/Doctors, etc.).
  - Data on cadres in the operational area of PHC.
  - Inventory of funding.
  - Coverage of the MCH Handbook distribution in each operational area.
- Analyzing and determining district/municipality and or PHC operational areas that require special attention.
- Making inventory on the availability of the MCH Handbook and determining the number of the required MCH Handbook.
- Analyzing the evaluation monitoring result of the use of the MCH Handbook.

### 3. Implementers:

Provincial/District/Municipal Health Office together with related stakeholders.

#### 4. Time-frame:

Data analysis is conducted before the beginning of the routine planning process to be included in the activities in the next year. This activity can be conducted separately or integrated in the meeting related to Maternal and Child Health.

### B. ACTIVITY PLANNING AND BUDGETING

Activity planning and budgeting related to the MCH Handbook is actually the result of data analysis that becomes an important element in the activity planning and budgeting related to Maternal and Child Health program. Thus, **it is not an activity that stands alone**, but it has the purpose of integrating the MCH Handbook and Maternal and Child Health program and assuring the sustainability of funding for the application of the MCH Handbook.

Prior to the meeting on the activity planning and budgeting related to the MCH Handbook, the party in charge of the MCH Handbook together with related cross-programs and related *stakeholder* (professionals, donors, non-government organizations, and so on) have discussed the activities that will be conducted by the respective parties that can be integrated for the application of the MCH Handbook.

#### **Agenda of activities related to the MCH Handbook:**

1. Procurement and distribution of the MCH Handbook and the recording as well as reporting.
2. Socialization and Advocacy of the MCH Handbook
3. Monitoring and Evaluation of the MCH Handbook
4. Orientation of the MCH Handbook for Maternal and Child Health cadres and observers
5. Socialization on the use of the MCH Handbook to Midwifery and Nursing Educational Institutions (using the MCH Handbook Orientation Package for HEALTH providers).

#### **The Party In Charge of the MCH Handbook Planning:**

Maternal and Child Health Program Director

#### **Outputs from the activity planning and budgeting of the MCH Handbook:**

- Activity planning of the MCH Handbook in cross-program and cross-sector related to Maternal and Child Health
- A documentation of activity planning and budgeting related to the MCH Handbook
- Activities related to the application of the MCH Handbook are included in the Provincial/District/Regional Budget.
- Activities on the MCH Handbook in the budget of private health facilities.
- Contribution from the private sector (among others through *Corporate Social Responsibility-CSR*), donor and non-government organizations.

## CHAPTER II IMPLEMENTATION

The implementation of the application of the MCH Handbook is as referred to in the previously stated activity planning and budgeting. The whole chains of activities are the keys to a successful use of the MCH Handbook in Maternal and Child Health service.

The chains of the activities are among others:

### A. INTRODUCTION AND ADVOCACY OF THE MCH HANDBOOK

Socialization and advocacy of the MCH Handbook are conducted **periodically, integrated or becomes a part of the implementation of socialization and advocacy related to Maternal and Child Health**, among others; nutrition program, immunization and family planning and other cross-sector activities.

#### 1. INTRODUCTION OF THE MCH HANDBOOK

To enable optimal application of the MCH Handbook, it is required introduction for all parties and distribution of the MCH Handbook for health personnel related to Maternal and Child Health. Implementation of the socialization is integrated with the activities related to Maternal and Child Health.

##### **Objectives:**

Comprehension of the application concept of the MCH Handbook by all parties; observers of Maternal and Child Health, health personnel, family and the community

##### **Implementers,** among others:

- Parties in charge of central, provincial, district/municipal MCH program
- Parties in charge of program related to central, provincial, district/municipal MCH
- Parties in charge of government and private health facilities (hospitals, private clinics, maternity hospitals, PHC, Private Practices of Midwives/Doctors, and so on)
- Professional organizations, health educational institutions, non-government organizations, donor organizations, and so on.

##### **Materials to be presented**

- i. Analysis of local Maternal and Child Health
- ii. What is the MCH Handbook?
- iii. Benefit of the application of the MCH Handbook
- iv. Development of the application of the MCH Handbook (Pregnant Mother Class and Class of Mother with babies and children under-five)

**Resource Persons**

- Parties in charge/Organizers of Maternal and Child Health who understand the application of the MCH Handbook in a comprehensive and integrated way
- Professional organizations related to the needs of technical materials (POGI, IDAI, IDI, IBI, PPNI, PERSAGI, and so on)

**Participants of the MCH Handbook socialization**

Participants are selected based on the needs of the local operational area.

Sample of Participants List:

<ul style="list-style-type: none"><li>• Central level :</li></ul>	Cross program, cross sector and professional organizations, religious organizations, women’s organizations, and so on.
<ul style="list-style-type: none"><li>• Provincial, district/municipal level :</li></ul>	<ul style="list-style-type: none"><li>- Cross program in Health Office</li><li>- Related cross sectors (DPRD, provincial, district/municipal secretariat, People’s Welfare Sector , BAPPEDA, Women’s Empowerment and Family Planning Agency, Office of Social Affairs, Education Office, provincial, district/ municipal office of the Department of Religious Affairs</li><li>- Educational Institutions for Health Personnel</li><li>- Central, provincial, district/municipal Hospitals and private hospitals</li><li>- Professional organizations (IBI, IDAI, POGI, IDI, PPNI, PERSAGI)</li><li>- PKK, Non-government organizations in health sector</li></ul>
<ul style="list-style-type: none"><li>• Sub-district and village level:</li></ul>	<ul style="list-style-type: none"><li>- Sub-district head and staff</li><li>- Midwives/Doctors with Private Practices</li><li>- Village head and staff</li><li>- Community leaders</li><li>- Religious Leaders</li><li>- Midwives in Village and Cross Program PHC</li><li>- Cross sectors and private sector</li><li>- And others as required in the locality</li></ul>

### **Schedule and Material**

Sample of Schedule:

<b>Time</b>	<b>Topic</b>	<b>Method</b>	<b>Material</b>
The time is adjusted with the local condition	Situation of Maternal and Child Health in locality	Presentation Discussion	<ul style="list-style-type: none"> <li>• PowerPoint (.ppt)</li> <li>• Up to date MCH data in the locality</li> </ul>
	General description on the MCH Handbook	Brainstorming Presentation Discussion	<ul style="list-style-type: none"> <li>• PowerPoint (.ppt)</li> <li>• the MCH Handbook</li> </ul>
	Benefit of the use of the MCH Handbook	Video film show	<ul style="list-style-type: none"> <li>• Computer/LCD/TV</li> <li>• DVD/VCD players</li> </ul>
	Development of the use of the MCH Handbook	Brainstorming Presentation Discussion	<ul style="list-style-type: none"> <li>• PowerPoint (.ppt)</li> </ul>
Materials can be distributed gradually	Commitment and follow-up planning	Presentation	<ul style="list-style-type: none"> <li>• PowerPoint (.ppt)</li> <li>• RTL Documents</li> </ul>
	Summary	Recording	Minutes of meeting

## **2. THE MCH HANDBOOK ADVOCACY**

### **Objectives**

Building commitment, policy support and funding for the application of the MCH Handbook

### **Implementers**

1. Parties in charge of central, provincial, district/municipal MCH program
2. Parties in charge of program related to central, provincial, district/municipal MCH
3. Parties in charge of government and private health facilities

### **Resource Persons, among others:**

1. Parties in charge of Maternal and Child Health on the central level
2. Head of provincial, district/municipal Health Office
3. Parties in charge of MCH program in provincial, district/municipal Health Office
4. Parties in charge of MCH program KIA in government and private health institutions
5. Parties in charge of MCH program educational institutions
6. Related professions

**Materials** to be presented related to the MCH Handbook

1. Analysis of local Maternal and Child Health
2. Benefit of the application of the MCH Handbook
3. Advocacy of the MCH Handbook through video show

**Participants of the MCH Handbook Advocacy**

Participants are selected based on the needs of the local operational area

Sample of advocacy participants:

<ul style="list-style-type: none"> <li>• Central level:</li> </ul>	DPR, Bappenas, Donor Agencies, PKK, Health educational institutions, Non-government organizations, and so on.
<ul style="list-style-type: none"> <li>• Provincial, district/municipal level :</li> </ul>	<ul style="list-style-type: none"> <li>- Governor, District Head, Major</li> <li>- DPRD, BAPPEDA,</li> <li>- Educational Institutions for Health Personnel</li> <li>- Central, provincial, district/municipal Hospitals and private hospitals and so on</li> </ul>
<ul style="list-style-type: none"> <li>• Sub-district and village level :</li> </ul>	<ul style="list-style-type: none"> <li>- Sub-district head and staff</li> <li>- Cross sectors and private sector</li> <li>- And others as required in the locality</li> </ul>

**Outputs of the MCH Handbook Advocacy**, among others:

1. There is policy support and funding for the application of the MCH Handbook
2. The existence of support and commitment for the application of the MCH Handbook

**B. ORIENTATION OF THE MCH HANDBOOK FOR HEALTH CADRES AND MCH SUPPORTERS IN THE COMMUNITIES**

Orientation of the MCH Handbook for Maternal and Child Health cadres and supporters in the communities is required because the Maternal and Child Health cadres and supporters exist in the middle of the community to help health personnel in providing health services to mothers and children in posyandu (integrated health post) or in other related activities.

**Objectives**

*General Objective*

Maternal and Child Health cadres and supporters can assist families in the application of the MCH Handbook in line with the standard

*Specific Objectives*

Maternal and Child Health cadres and observers are able to:

1. Conduct counseling/communicate messages in the MCH Handbook
2. Motivate and move pregnant mothers and mothers with babies and children under-five to come and bring their children under five to health service facilities.

3. Make records of weight and distribution of Vitamin A in the MCH Handbook
4. Provide referral to mothers or children under-five that have health problems to the health personnel.
5. Remind mothers always to bring the MCH Handbook anytime visiting health service facilities (PHC, hospitals, maternity hospitals, private clinics), posyandu (integrated health post), and health personnel.
6. Motivate mothers and families to read and apply messages in the MCH Handbook
7. Use the MCH Handbook in conducting early detection concerning the problems of Maternal and Child Health.
8. Use the MCH Handbook in conducting early detection concerning the problems of child growth.

### Activities

Orientation of the MCH Handbook for Maternal and Child Health cadres and observers is conducted in 2 (two) days or it can be conducted in a separate event/ integrated with other programs related to Maternal and Child Health, as long as the material to be presented is in line with the existing standard.

### Materials to be presented

1. What is the MCH Handbook?
2. Components of mother health in the MCH Handbook
3. Components of child health in the MCH Handbook
4. The role of cadres in the application of the MCH Handbook

### Implementers

- PHC
- Non-government organizations, donor, PKK
- District/Municipal Health Office

### Participants

- Posyandu (integrated health post) cadres
- Observers of Maternal and Child Health

### Schedule and Material

Sample

Time	Topic*	Method	Material
The time is flexible	The MCH Handbook and the Role and Duties of Cadres in the use of the MCH Handbook	<ul style="list-style-type: none"> <li>• Lecturing</li> <li>• Group Discussion</li> <li>• Assignment</li> <li>• Role Play</li> </ul>	The MCH Handbook Leaflet for participants Match Card Cadre Handbook Stationeries Flip-chart
Materials can be distributed gradually	Mother Health		
	Baby and Child Health		
	Counseling and Communication Techniques		
	Recording in the MCH Handbook		

\* 5 (five) Subjects

**Funding**

The activities can be funded through the National Budget (APBN) and Regional Budget (APBD), non-government organizations, professional organizations, private and other non binding funding resources.

**Outputs**

Cadres and observers of Maternal and Child Health are able to play their role in the application of the MCH Handbook

**C. ORIENTATION OF THE MCH HANDBOOK FOR HEALTH PROVIDERS**

It is focused on the pre-service education curriculum in supporting the use of the MCH Handbook by related professionals who later on will deal with the duties in the Maternal and Child Health service.

Materials for the "Orientation of the MCH Handbook for Health Personnel" can be given by professional organizations related to the Maternal and Child Health to their members.

It is necessary that the "Orientation of the MCH Handbook for Health Personnel" to be included in the educational curriculum of midwifery and nursing educational institutions.

**Implementers** can be done by:

1. Department of Health for the central level
2. Health Office for the provincial level
3. Professionals
4. Parties in charge of Educational Institutions

**Participants**

Parties in charge of the Maternal and Child Health material of educational institutions related to Maternal and Child Health.

**Time-frame**

3 (three) days



## Schedule and Material Sample

Time	Topic	Method	Materials
The time is adjusted with the condition	General description on the Orientation	Brainstorming Presentation Discussion	<ul style="list-style-type: none"> <li>• PowerPoint (.ppt)</li> <li>• Orientation Package</li> </ul>
	Pre Questionnaires	Objective written test	<ul style="list-style-type: none"> <li>• Pre Questionnaires (in the Participant Guidebook or it can be Xeroxed)</li> </ul>
	What is the MCH Handbook?	Brainstorming Illustrative lecturing Questions and Answers	<ul style="list-style-type: none"> <li>• PowerPoint (.ppt)</li> </ul>
	Advantages of the MCH Handbook	Brainstorming Illustrative lecturing Group Discussion	<ul style="list-style-type: none"> <li>• PowerPoint (.ppt)</li> <li>• Technical Guidebook for the use of the MCH Handbook</li> </ul>
	How to use the MCH Handbook <ul style="list-style-type: none"> <li>• How Mother and Family use the MCH Handbook?</li> <li>• How cadres use the MCH Handbook?</li> <li>• How Health Personnel use the MCH Handbook?</li> <li>• Directives and monitoring of the MCH Handbook</li> </ul>	Group activities	<ul style="list-style-type: none"> <li>• Technical Guidebook for the use of the MCH Handbook</li> <li>• Participant Guidebook</li> <li>• the MCH Handbook</li> </ul>
	Communication in the use of the MCH Handbook	Role play practices	<ul style="list-style-type: none"> <li>• the MCH Handbook</li> <li>• Technical Guidebook for the use of the MCH Handbook</li> <li>• Participant Guidebook</li> <li>• Facilitator Handbook</li> </ul>
	Filling in the MCH Handbook	Explanation and Exercises	<ul style="list-style-type: none"> <li>• the MCH Handbook</li> <li>• Technical Guidebook for the use of the MCH Handbook</li> <li>• Participant Guidebook</li> <li>• Facilitator Handbook</li> </ul>
	Skill practices on the use of the MCH Handbook on the observation of antenatal, babies, and children	Simulation Practices (Group activities)	<ul style="list-style-type: none"> <li>• the MCH Handbook</li> <li>• Participant Guidebook</li> <li>• Facilitator Handbook</li> </ul>
	Evaluation on the practices of the use of the MCH Handbook	Evaluation by using visit list	<ul style="list-style-type: none"> <li>• Facilitator Handbook</li> <li>• the MCH Handbook</li> </ul>
	Mid Questionnaires	Answering Questionnaires	<ul style="list-style-type: none"> <li>• Sheet of Questionnaires</li> </ul>
	Follow-up plan (RTL)	Each participant records their respective RTL and submit the work	<ul style="list-style-type: none"> <li>• Facilitator Notes</li> <li>• Notes on the follow-up plans of all participants</li> </ul>
Orientation Evaluation	Questionnaires & observation	<ul style="list-style-type: none"> <li>• Facilitator Report</li> </ul>	

## D. PROCUREMENT, DISTRIBUTION, RECORDING AND REPORTING OF THE USE OF THE MCH HANDBOOK

Management and distribution of the MCH Handbook must be coordinated with all related parties to **guarantee the availability of the MCH Handbook in each service facility and to ensure that each pregnant mother owns the MCH Handbook.**

District/municipal health office is responsible for the procurement and distribution of the MCH Handbook in its operation area which come different sources.

### 1. PROCUREMENT

- The required number of the MCH Handbook must be calculated based on the target number of pregnant mothers plus 10% for buffer stock
  - Procurement of the MCH Handbook by provincial government is just to support districts/municipalities that are not able to procure the MCH Handbook by themselves, yet.
  - Procurement of the MCH Handbook can be conducted by other parties such as; professional organizations, hospitals, maternity hospitals, private practices of doctors/midwives, non-government organizations, donor agencies, companies, and so on.
- a. The method for counting the target number:

***Estimate of target pregnant mothers:***

**1,1 X crude birth rate (CBR)\* X number of population in a year**

\* The applied Crude Birth Rate (CBR) is the current district/municipal data obtained from the representative office of district/municipal statistical bureau.

Sample:

For calculating the estimate of pregnant mothers in the A district in 2009 with the population number of 200.000 in 2008 with the Crude Birth Rate (CBR) of 0,027, is as follows:

Number of estimated pregnant mother =  $1,1 \times 0,027 \times 200.000 = 5.940$

So, the target of pregnant mothers in the A district is **5.940 persons**

- b. The printing of the MCH Handbook (either by the government, private sector, donor, professionals, non-government organizations, and so on) must meet the criteria and standard determined by the Ministry of Health of the Republic of Indonesia.
- i. Book dimension: 23 X 16 centimeter
  - ii. Paper, HVS 80 gram (not easily torn).
  - iii. Cover: Art Carton 210 gram, UV furnish glossy, print 4/4
  - iv. Wire sewn binding
  - v. Cover book color: *pink*

- vi. Minimum number of pages including KMS (8 pages) is 68 pages
  - vii. Bearing the logo of the Department of Health of the Republic of Indonesia
  - viii. Bearing the catalogue number issued by the Department of Health of the Republic of Indonesia
  - ix. Not bearing any message/picture contravening with Government program and policy (for example: formula milk for 0-6 month babies).
  - x. Standard substance of minimal service and counseling for mother's health, Family Planning, Nutrition, Immunization and Child Health.
  - xi. Completed with stickers for Delivery Plan and Complication Prevention with the specification (chromo, with the dimension of 17,5 X 11,5 centimeter, print 4/0)
- c. There are a number of things that can be modified in line with the condition of localities, namely:
- Cover picture of the MCH Handbook (can be replaced with other picture depicting mother, father and child which does not contravene with the government program).
  - Logo of regional government, health service facility, professional organization, non-government organization, donor agency can be added on the front cover.
  - The MCH Handbook which is printed by a sponsor cannot bear the name or picture of a product but the name of the company can be printed on the bottom of the back cover.
  - Adding the name of the father and the registration number on the book cover.
  - Terms/language and local cuisine.
  - Picture illustrations can be adjusted with the local condition as long as they do not interfere with the message.
  - Addition of provincial or district/municipal program of Maternal and Child Health which is closely related with Maternal and Child Health service/treatment.

Change/modification must be approved by the local health office.

## 2. DISTRIBUTION OF THE MCH HANDBOOK

- b. The MCH Handbook must be distributed through:
  - PHC
  - Hospitals (government and private)
  - Private Maternity Health Clinics
  - Professionals
- b. The MCH Handbook must be given to each pregnant mother. The following things must be kept in mind:
  - Mother will get the MCH Handbook in each pregnancy
  - The MCH Handbook is given **free** to a pregnant mother from a poor family
  - If the MCH Handbook missed, the mother/family would get the replacement of the MCH Handbook (as long as still available)
  - If a mother delivers twin babies, the mother will get an additional MCH Handbook

- After delivery, the MCH Handbook will belong to the child and registered into **baby cohort register, posyandu register** or **service register** in hospitals/health service institution
- In any provision of the MCH Handbook to a pregnant mother, the officer shall record the date in the **pregnant mother cohort**. If the book is given to the baby, it must be recorded in the **baby cohort** and if it is given to a child under five, it must be recorded in **under 5 and pre-school child cohort**.
- In a private institution, it is recorded in the record of use of the MCH Handbook in line with the technical guidance of the use of the MCH Handbook
- If the procurement of the MCH Handbook is conducted by the district/municipal health office, the Parties in charge of the MCH Handbook in the district/municipal health office shall distribute them to PHCs. The PHC shall distribute them to its network, namely auxiliary, posyandu and midwives in villages. If the number of the MCH Handbook is more than the number required in the PHC and its network, the PHC shall distribute them to other health facilities that do not have the stock of the MCH Handbook.

District/municipal health office shall report the procurement and distribution of the MCH Handbook to the Provincial Health Office. The report from the district/municipal health office shall also cover the procurement and distribution conducted by non-government organizations, hospitals, private sector, and other related stakeholders.

The MCH Handbook shall be distributed gradually to avoid overstocking of the MCH Handbook in one place and shortage in other places.

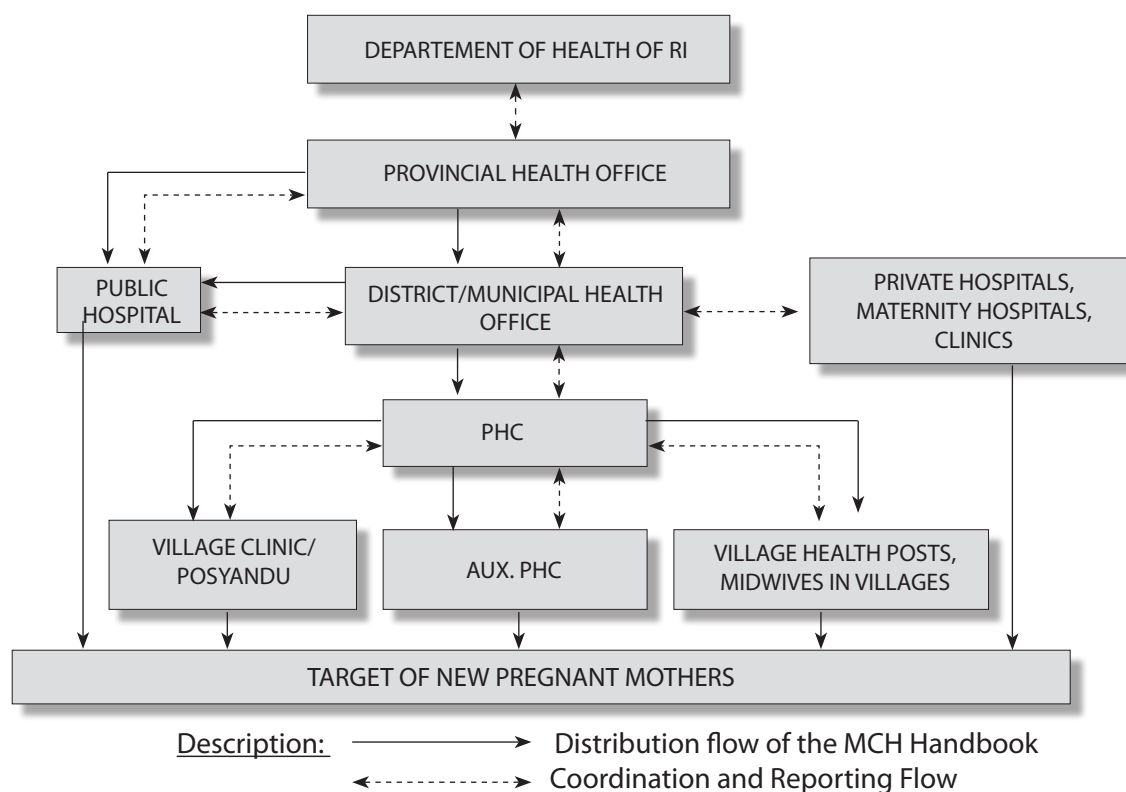
### 3. RECORDING AND REPORTING

- a. Officers in health facilities, such as PHC and its network (village health post, auxiliary PHC, midwives in villages), private practices, maternity hospitals and hospitals (government and private) must have a log book on the reception and delivery of the MCH Handbook, and consolidate it in the "Monthly Report Form on the MCH Handbook".
- b. The Monthly Report Form on the MCH Handbook shall be collected from village clinics, village health post, auxiliary PHC, midwives in villages to the PHC every month. Each month the PHC shall report the summary of the MCH Handbook to the district/municipal health office integrated with the Local Area Monitoring (PWS-KIA) system.
- c. Maternity hospitals, private clinics, government/private hospitals shall send the Monthly Report Form on the MCH Handbook to the district/municipal health office every month integrated with the MCH coverage report
- d. The PHC shall sum up the Monthly Report on the MCH Handbook to be submitted to the district/municipal health office every quarterly.
- e. District/municipal health office shall sum up the Monthly Report on the MCH Handbook from various sources to be submitted to the Provincial Health Office every 6 months.
- f. The Provincial Health Office shall report all consolidated report on the MCH Handbook to the Ministry of Health of the Republic of Indonesia each year.

**Notes:**

All of the recording and reporting forms are provided the concerned unit/agency by referring to the format of the standard forms (refer to Attachment 1 and 2)

**Diagram: Flow of Distribution and Reporting of the MCH Handbook:**



**E. PROMOTION OF THE USE OF THE MCH HANDBOOK**

Promotion of the use of the MCH Handbook for the community must be conducted all the time so that the community and the family apply the MCH Handbook optimally.

The use of the media and the form of the promotional activities shall be adjusted with the local condition.

**Objectives:**

The application of the MCH Handbook on family and community levels

**Implementers:**

All parties related to Maternal and Child Health in coordination with the health promotion unit.

**Promotion activities include:**

- Promotion to the community through print media (posters, leaflets, newspapers, magazines, tabloids), traditional media, religious learning forums and discussion, banners, print and electronic media (video on the MCH Handbook, TV spot, radio broadcast and so on). Promotional activities are integrated with community routine activities or conducted during the commemoration of national holidays.
- Promotion to the cadres and officers by utilizing the existing activities such as:
  - Quiz Competition for Cadres
  - Jamboree for Posyandu Cadres
  - Election of the Model Midwife
  - Election of the Model PHC Doctor

**Funding:**

The allocation of fund is adjusted with the needs and integrated with other health promotional activities. The fund can be originated from the APBN (National Budget), APBD (Regional Budget), General Allocation Fund (DAU), Non-government organizations, Private Sector/Businessmen and other non-binding funding resources.

**Outputs:**

- Mothers and families are familiar with and use the MCH Handbook.
- Mothers and families understand and utilize Maternal and Child Health service provided by the health personnel.

## **CHAPTER III MONITORING AND EVALUATION**

Application of the MCH Handbook needs to be monitored, evaluated and followed up because it is important for the sustainability and development of the MCH Handbook. Monitoring and evaluation of the MCH Handbook shall be conducted in integration with the monitoring and evaluation of the mother and child program. Monitoring shall be applied to ensure that the application of the use of the MCH Handbook runs smoothly, in good quality and in line with the plan. Meanwhile, the evaluation of the activities shall be applied after implementation has been going on for a certain period of time.

### **A. MONITORING THE APPLICATION OF THE MCH HANDBOOK**

#### **Objectives**

##### *General Objective:*

Sustainability and quality improvement of the application of the MCH Handbook in the framework of improving Maternal and Child Health

##### *Specific Objectives:*

- Identification of the sufficiency, procurement and distribution of the MCH Handbook
- Identification of constraints and supporting factors of the application of the MCH Handbook
- The existence of a follow up plan of the application of the MCH Handbook including the development plan

#### **Implementers**

Monitoring is conducted by the parties in charge of Maternal and Child Health program and/or parties in charge of programs related to Maternal and Child Health with professionals or parties that have the interests in evaluating the application of the MCH Handbook.

Monitoring is conducted on the central, provincial, district/municipal level.

#### **Method**

- Analysis of recording and implementation reporting
- Direct Observation
- Feed up

#### **Time-frame**

The implementation is integrated with the monitoring of Maternal and Child Health program

#### **Indicators of Success:**

##### 1) ***Indicator of the Coverage of the MCH Handbook***

The coverage of the MCH Handbook for pregnant mothers is the percentage of pregnant mothers that get the MCH Handbook against all target pregnant mothers in the operational area in 1 year

All pregnant mothers that are expected to own the MCH Handbook.

Calculation method:

$$\frac{\text{Number of pregnant mothers that own the MCH Handbook}}{\text{Number of target pregnant mothers in the operational area in 1 year}} \times 100\%$$

The MCH Handbook is given to a pregnant mother during the first contact of antenatal service (K1) or in the next antenatal contact if the pregnant mother still does not have MCH Handbook. Distribution of the MCH Handbook to pregnant mothers must be registered in the baby cohort register.

Coverage of the MCH Handbook for child under five years (0-59 months) is the percentage of child under five years that own the MCH Handbook against the target babies and child under five in the operational area. All babies and child under five must own the MCH Handbook as the continuation of their mothers' MCH Handbook.

Calculation method:

$$\frac{\text{Number of children under five years (0-59 months) that own the MCH Handbook}}{\text{Number of target child under five years in the operational area in 1 year}} \times 100\%$$

## 2) **Indicator of the use of the MCH Handbook**

To evaluate the quality of the use of the MCH Handbook, district/municipal health office or PHC and parties in charge of other health facilities can make rapid assessment in a small scale once a year.

Indicators being used are:

- Compliance with bringing the MCH Handbook (*bringing rate*): Percentage of the compliance of mother/family with bringing the MCH Handbook when coming to the health facilities.
- Filling rate: Percentage of completeness in filling the MCH Handbook
- Percentage of health service institutions that apply the MCH Handbook

Examples of rapid assessment on the use of the MCH Handbook are among others:

- Each PHC randomly selects 100 targets (40 pregnant mothers and 60 children under five years that have the MCH Handbook). The target pregnant mothers and children under five years that own the MCH Handbook can be originated from posyandu/PHC/hospitals.
- If rapid assessment cannot possibly be conducted by each PHC, district/municipal health office must plan an assessment that involves no less than 3 PHC. Calculation of the survey target is similar to the above.



Then, conduct the assessment:

(a) **Indicator of the compliance with bringing the MCH Handbook (*bringing rate*):**

Calculation method:

$$\frac{\text{Number of pregnant, delivering and post partum mothers that come with the MCH Handbook}}{\text{Sample size: 40 pregnant, delivering and post partum mothers}} \times 100\%$$

$$\frac{\text{Number of babies and children under five years coming with the MCH Handbook}}{\text{Sample size: 60 babies and children under five years}} \times 100\%$$

If the *bringing rate* is less than 90%, it is necessary to conduct the promotion in the use of the MCH Handbook so that the community members always bring the MCH Handbook anytime visiting the health facilities and the health personnel.

(b) **Indicator of the completeness in filling in the MCH Handbook:**

Calculation method:

$$\frac{\text{Number of the MCH Handbooks for pregnant, delivering and post partum mothers that have been completely filled}}{\text{Number of the sample: 40 pregnant, delivering and post partum mothers}} \times 100\%$$
$$\frac{\text{Number of the MCH Handbooks for babies and children under five years that have been completely filled}}{\text{Number of the sample: 60 babies and children under five years}} \times 100\%$$

2 Variables are used, namely: Completely filled up (**L**) Not completely filled up (**TL**).

- Completely filled up (**L**)
- Not completely filled up (**TL**)

Completely filled up (**L**) if all the parts in the MCH Handbook that should be filled up (either by writing or by marking) have been completely filled up. If one of the parts is not filled, the work is categorized as Not Completely filled up (**TL**)

*If there are more Not completely filled up (**TL**) of the MCH Handbook, it is necessary to conduct re-orientation/refreshing of health personnel related to the filling up of the MCH Handbook which is continued with intensive supervision.*

**Notes:**

Use the Compliance with bringing the MCH Handbook form and Reporting Form for the result of filling up the MCH Handbook in line with the objective of the reporting (*refer to **Attachment 3 and 4***).

## B. EVALUATION ON THE APPLICATION OF THE MCH HANDBOOK

### Objectives

Identify the achievement result and identification of constraints in the application of the MCH Handbook and the effort to follow up.

### Activities

Evaluation application of the MCH Handbook shall be conducted in integration with the activities of meetings related to Maternal and Child Health, either on the central level, provincial level, district/municipal level, sub-district level and village level.

### Time-frame

In line with the schedule of program evaluation activity related to Maternal and Child Health.

### Implementers

Evaluation on the application of the MCH Handbook shall be conducted by parties in charge of Maternal and Child Health or parties in charge of programs related to Maternal and Child Health, in:

1. The Department of Health of the Republic of Indonesia
2. Provincial Health Office
3. District/Municipality Health Office
4. PHC

### Participants

• Central Level:	Related cross program on the central level, Parties in charge of provincial MCH programs, professional organizations, donor, women's organizations.
• Provincial Level:	Cross programs related to province: representatives of Professionals, government/private hospitals; Head of Health Office and MCH operator in district/municipality, women's organizations.
• District/Municipality Level:	Cross programs related to district/municipality; representatives of Professionals and government/private hospitals; Head of PHC, Coordinating Midwife, Women's organization.
• PHC Level :	All PHC officers, auxiliary PHC and Midwives in Villages, PKK

### Materials:

- Policy on the application of the MCH Handbook on the central and regional level.
- Coverage and activities related to the application of the MCH Handbook.
- Logistics, distribution and distribution flow of the MCH Handbook.
- Constraints and supporting factors, problems and opportunities of the development of the MCH Handbook.

## **CHAPTER IV**

### **DEVELOPMENT OF THE MCH HANDBOOK**

Parties in charge of the program on provincial and district/municipal level, head of PHC and parties in charge of other health facilities shall improve the application of the MCH Handbook by involving related stakeholders. The purpose is besides ensuring the sustainability of the use of the MCH Handbook, it is also meant to increase the empowerment of families and community in the sector of Maternal and Child Health. The chances for developing the application of the MCH Handbook are among others in the form of:

1. Integration of the application of the MCH Handbook to Desa Siaga (Alert Village), P4K and so on.
2. Gathering the support of stakeholders especially from the cross-sectors to include the MCH Handbook in their activities.
3. For the sustainability in the provision of the MCH Handbook, it is necessary to endeavor the inclusion of the MCH Handbook funding into the tariff of services in health facilities, however, for the poor families the MCH Handbook shall remain to be given free of charge.
4. In line with the decentralization system, health offices in cooperation with the Civil Registration Office, the Department of Religion and the Department of National Education shall include the MCH Handbook as: the requirement to get Birth Certificate and to enter Kindergarten or Elementary School.
5. The MCH Handbook shall be included in the curriculum of midwifery and nursing educational institution and other educational institutions related to Maternal and Child Health and implemented into the field study program.
6. The MCH Handbook shall be used in the training program/skill enhancement on Maternal and Child Health (such as; Normal Delivery Treatment, PONED/PONEK, KIP-K, BBLR, MTBS, SDIDTK, Exclusive breastfeeding and so on).
7. Developing Pregnant Mothers' Class and Class for Mothers with Child under five as one of the way to improve the knowledge and skill of mothers and families in maintaining the health of mother and child.

## **ATTACHMENTS**

### **Attachment 1**

#### **MCH HANDBOOK QUARTERLY REPORT**

Months: January-March                      Year: .....

          April-June

          July-September

          October-December

Name of Service Location: .....

Address: .....

.....

.....

1. Total remaining books of last quarter = .....books \*
2. Total books received this quarter = ..... books \*
3. Total books being distributed:
  - a. Total books being distributed to pregnant mothers = ..... books \*
  - b. Total books being distributed to other needs = ..... books \*
4. Total remaining books this month = ..... books \*
5. Total target of pregnant mothers = ..... Pregnant Mothers\*\*
6. Total pregnant mothers receiving MCH Handbook = ..... Pregnant Mothers \*\*

Approving

Signature

(.....)

Date:

Reporting Officer:

Name:

Position:

Signature

(.....)

\* : Mark 0 (nil) if there is no remain/delivery/distribution

\*\* : Target of pregnant mothers, check the way to calculate in Procurement topic

**Attachment 2**

**FORM FOR CONSOLIDATION REPORT OF MCH HANDBOOK DISTRIBUTION**

Semester:..... Year:.....

Name of District/Municipal Office: .....

Address : .....

.....

Name of Service Location	Total books		Total pregnant mothers	
	Distribution quarter .....	Remain quarter.....	Target pregnant mothers	pregnant mothers receiving MCH Handbook
(1)	(2)	(3)	(4)	(5)
Coverage pregnant mothers receiving MCH Handbook: $\frac{\text{pregnant mothers receiving MCH Handbook}}{\text{target of pregnant mothers}} \times 100\%$				%

*Description:*

- Column (2) : Total of distributed books is based on monthly report.
- Column (3) : Total of remaining books is based on monthly report
- Column (4) : Refer to calculation in Chapter II D 1.Procurement page 9
- Column (5) : Total of pregnant mothers receiving MCH Handbook is based on monthly report

Approving  
Head of  
District/Municipal Office

Date:  
Officer in charge:

(.....)

(.....)

**Attachment 3**

**FORM FOR EVALUATION RESULT REPORT ON THE COMPLIANCE WITH BRINGING THE MCH BOOK**

Month: ..... Year: .....

Name of PHC: .....

Address: .....

.....

Health Service Location	Pregnant/delivering/post partum mothers			Babies/Children under five		
	Number of samples that own MCH Book	Number of samples that bring MCH Book	% samples that bring MCH Book	Number of samples that own MCH Book	Number of samples that bring MCH Book	% samples that bring MCH Book
(1)	(2)	(3)	(4)	(5)	(6)	(7)
	40			60		
	40			60		
	40			60		
	40			60		
	40			60		

Calculation Method:

$$\% \text{ mothers bringing MCH Book (4)} = \frac{(3)}{(2)} \times 100\%$$

$$\% \text{ babies/child < 5 y bringing MCH Book (7)} = \frac{(6)}{(5)} \times 100\%$$

Approving  
PHC Head  
or District/Municipal Health Office

Date:  
Officer in charge:

(.....)

(.....)

## Attachment 4

### REPORT ON THE EVALUATION RESULT ON COMPLETENESS IN FILLING UP MCH BOOK

Month:..... Year:.....

Name of PHC/hospitals/other health facilities:

Address: .....

No.	Evaluated Items	Samples	Complete	Not Complete	Percentage of completeness in filling up
(1)	(2)	(3)	(4)	(5)	(6)
1.	Family Identity*	40			
2.	Welcoming Birth (Birth Message)	40			
3.	P4K sticker is filled and attached on the house of the pregnant mother	40			
4.	Pregnant Mother Health Notes	40			
5.	Notes for delivering mother and newly born babies	40			
6.	Health Notes for Post partum Mother	40			
7.	Birth Information Letter	60			
8.	Neonatal Check-up	60			
9.	Notes on Illness and Development Problem	60			
10.	Vitamin A	60			
11.	SDIDTK Service	60			
12.	KMS	60			
13.	Immunization	60			

\* For pregnant mother, leave the column for child name blank until delivery.

#### Calculation Method:

Complete : If all columns completely filled up

Not Complete : If there are column(s) not filled up

% completeness in filling up (6) = (4) / (3) x 100%

For example: % completeness in filling up No. 3 Birth Message (6) = (4) 3 / (3) 3 x 100%

Approving  
Hospital Director/Head of PHC

Date:  
Officer in charge

(.....)

(.....)

**Note :**



**Note :**