

## **The 2<sup>nd</sup> FP/RH Roundtable Summary Notes**

### **“Best Practices of Sustainable Partnership Model between Company and NGO in a Safe Motherhood Program”**

#### **A Partnership between PT. Dewhirst and Yayasan Kusuma Buana**

Wednesday, 14 May 2014, 9AM-12AM

The 2<sup>nd</sup> Roundtable of Family Planning/Reproductive Health (FP/RH) was attended by 34 participants from 5 companies, 9 NGOs, 1 UN Agency with Yayasan Cipta Cara Padu (YCCP) as the host of the Roundtable. Inne Silviane, Executive Director of YCCP was the moderator for the discussion. Topic of the discussion was Sustainable Partnership in a Safe Motherhood Program, a partnership between Dewhirst and Yayasan Kusuma Buana (YKB).

After the safety briefing, the Roundtable meeting was opened by Kemal Soerawidjaja, Executive Director of CCPHI. He explained that the Roundtable is conducted every three months as a forum to exchange information and knowledge on FP/RH issues among organizations in Indonesia. The Roundtable was initiated by CCPHI and YCCP. Cut Idawani, Board Member of YCCP, gave her welcome remarks and thanked participants for attending the Roundtable. Cut Idawani shared that YCCP has been focusing its programs on strategic communication, advocacy, community development, clean sanitation and environmental initiatives to encourage people to have a clean and healthy lifestyle.

After the introduction session led by the moderator, Didin Mujahidin Fatah, Dewhirst Human Resources and General Affairs Executive and Adi Sasongko, Medical Director of Yayasan Kusuma Buana (YKB) presented their partnership. Dewhirst is a garment company in West Java with its majority workers are female (94%) ([www.dewhirst.com](http://www.dewhirst.com)) while YKB is a non-profit organization that focuses on maternal child health, and family planning/reproductive health issues.

Safe Motherhood Program began in 2003 and it is still underway. The program involves four partners namely Dewhirst, YKB, the Indonesian Midwives Association (IBI) and an insurance company. The Partnership model built by the four organizations is mutually beneficial (win-win partnership) and sustainable. Dewhirst pays a premium to the insurance company to cover the cost for the workers' health services. The insurance company, based on capitation contract, paid YKB in advance for the health services for up to 6,000 workers every month. The insurance company also paid Midwives (IBI) to cover their services for workers' reproductive health and pregnancy services including anemia, multi-vitamin (iron and folic acid), immunization, and examination of ultrasonography (USG). In addition to covering health care costs, the insurance company also funded the prevention education activities and provided training to improve the quality and capacity of midwives through *Bidan Delima* program<sup>1</sup>. Dewhirst provided a lactation room for workers who breast-feed their babies.

This partnership model is mutually beneficial for each organization. Dewhirst benefited by the improved health status among its workers; decreased infant mortality rate (IMR), absenteeism, and workers' turnovers. While YKB<sup>2</sup> and midwives are financially benefitted by the healthcare capitation system. The insurance company benefited by the decreased of inpatient and outpatient claims as the result of prevention activities conducted by YKB<sup>3</sup> and midwives.

The impact of the program has reduced infant mortality rate from 81.2 in 2007 to 19.2 per 1,000 live births in 2013. While absenteeism and employees turnover rate has decreased into 1.2% and 2.5% in first quarter of 2014.

## Summary of Discussion

In this session, participants discussed the experiences in building such a sustainable partnership model. The summaries of discussion are as follow:

- This Partnership model in Rancaekek (Dewhirst factory location) is a form of partnership involving companies - insurance - NGO / health care providers that utilize the existing health insurance system. The health insurance provided by company or organization to its workers is mandatory by law. Therefore, this partnership model can potentially be replicated in other places.
- This mutual beneficial partnership model can be applied nationwide and through a solid working group to advocate the central government to incorporate into national health insurance system (BPJS). Participants support the plan to have a meeting to discuss on advocacy strategy with related parties such as National Population and Family Planning Board, Center for Health Security and Financing- Ministry of Health, and InHealth (the company that manages BPJS). The purpose of the meeting is to advocate for similar partnership with capitation system to include a broader prevention and hospitalization coverages for workers. Currently BPJS has already been implementing a capitation system, but it only covers primary care including family doctors.
- The Dewhirst's experience shows that insurance companies have an important role to facilitate preventive-promotive efforts, which in the long run will benefit the company and eventually will reduce the claims of curative cares.
- YKB shared the experiences in approaching some companies. Some of the activities undertaken include a top-down approach by contacting the head of the company (top-level management) to initiate the communication with the management ranked below (mid-level); set-up innovative programs suitable to the interests of the company; share information about the benefits of program including labor productivity; identify and disseminate information to buyer/customers to support the proposed program; and the most significant element is to build company's trust and emotional bonding to the program.

## Closing

DY Suharya *Partners Relations Specialist* CCPHI closed the forum by thanking the moderator from YCCP, presenters from Dewhirst and YKB. Summary notes of the meetings can be accessed at [www.ccpfi.org](http://www.ccpfi.org). The 3rd FP/RH Roundtable will be held in September 2014. If you need the attendance list, please contact [admin@ccphi.org](mailto:admin@ccphi.org).

### Footnotes:

1. Bidan Delima is a program by Indonesian Midwives Association (IBI), to improve the quality of private midwives service in reproductive health. Information about the program can be seen in the Bidan Delima [http://ccphi.org/ccphidoc/study\\_idn/JnJ\\_IBI\\_Eng.pdf](http://ccphi.org/ccphidoc/study_idn/JnJ_IBI_Eng.pdf)
2. YKB has expanded the scope of partnership with the 10 insurance companies that manages health issues for other companies in Rancaekek (West Java). Based on this partnership, YKB has reached "break-even point" just within two years time.
3. Since 2008, YKB provides Tuberculosis (TB) sputum examination services, covered by the insurance company. Local health office provides free drugs for people diagnosed with TB as the results of this examination.