

Program Description: Technical and Operational Support for the Indonesia Maternal and Newborn Health Evidence Summit (MNH ES) and Banten II Study

Background:

The Evidence Summit activity is convened and organized by the Indonesian Academy of Sciences (*Akademi Ilmu Pengetahuan Indonesia* or AIPI) under the leadership of senior and highly respected health professionals, where one of the two conveners and the head of the Core Technical Group also serve as Special Advisors to the Minister of Health. The Evidence Summit has achieved high profile, with associated expectations, in Indonesia and will also provide important input to USAID's future MNH activities. This activity is conceived as the first step in a process of evidence review, formulation of recommendations, and priority setting that will continue for many years. In addition, this is the first Evidence Summit conducted at the country level and the subject matter covered is broad compared to previous global Evidence Summits. So this activity is demanding in terms of methodology development or adaptation and technical support requirements. As this activity has developed, the need has become apparent for additional USAID support to be provided through a partner well established in Indonesia with capabilities in the subject areas. The attached Fact Sheet provides general background of the Evidence Summit.

In addition to the Evidence Summit, there is an activity to repeat the Impact/UI maternal mortality study in three study districts in Banten to assess how maternal mortality has changed over time and inform current priorities. The study will also develop and pilot the addition of newborn mortality to MADE-IN/MADE-FOR methodology in two sub-districts. It is expected that the results of this study (Banten II) will provide important, new evidence to the Evidence Summit activity.

Current Status:

Evidence Summit

The Steering Committee has been named, the Core Technical Group has been activated and is fully operational, and the Evidence Review Teams have been initiated. International expert participation in the CTG and ERTs, though anticipated, has not received operational support and has not been initiated. Focal questions and the review methodology have been drafted (17 – 18 August), and revised in subsequent meetings, but not finalized. A fellows program to provide full time, mid-level professional support to each ERT has been initiated with Fellows identified, engaged and trained by AIPI. There is no communications plan and there is no stakeholder engagement plan, though both are acknowledged to be important elements of this activity.

The initial timeline for the Evidence Summit was February 2017 and a stakeholder consultation in March 2017. Because of end of project constraints, URC/TRACtion grant for financial support to AIPI must close out no later than March 31, 2017. Seeking to fit all Evidence Summit development and implementation activities in this timeline has proved to be difficult if quality and sufficient breadth of the subject are to be maintained. The AIPI and MNH ES teams are eager to have USAID support to reassess and lengthen the timeline by up to 6 months (April – September 2017).

There is currently no on-the-ground, day-to-day presence of external support, and many smaller day-to-day issues as well as larger issues (e.g. the Launch of the MNH ES by the Minister of Health on 18 August) are not being identified and supported through USAID assistance, though cumulatively such assistance is critical to the success of this activity.

Banten II Study

URC/TRAction had completed the Banten II solicitation process to select UI as the sub-awardee for the study. The study was initially planned to be conducted in one district, but with availability of extra funds it was broadened to cover all the original districts in the Banten I Study (i.e. Kota Serang, Kabupaten Serang, Kabupaten Pandeglang) to improve comparability. The protocol finalization was slow because of discussions on the study methodology. The study was not started until December 2016 and since URC/TRAction will end by March 2017, therefore, the activity was closed out from TRAction and moved to MCSP.

Requests for Assistance:

Assistance is required in 4 main areas:

- Intermittent short term international technical assistance to support the MNH ES activity;
- Full time presence in Indonesia working directly with AIPI and the MNH ES team on a daily basis to provide direct technical assistance and advice, and to identify issues and facilitate solutions to meet both operational and technical needs;
- A sub-grant to AIPI for local implementation of the activity; and
- Technical and operational support to initiate and complete the replication of Banten II study with a sub-grant to University of Indonesia.

Tasks include:

1. Assess international and local technical assistance needs and formulate a comprehensive TA plan – Immediate need – November 2016.

This activity is a scoping activity to assess the needs of an ongoing process. A scoping team with expertise in evidence summits, MNH, and operational support to local organizations will travel to Indonesia within 2 weeks to:

- Assess activity status and a full range of urgent and longer term technical assistance needs and
- Provide short term technical assistance where urgent and feasible.

The team should include a team leader of appropriate professional stature to consult and advise the most senior health professionals in Indonesia.

2. Assess the scope of a sub-grant to AIPI and make a sub-grant to AIPI

Post the closeout of the current sub-grant with AIPI through URC/TRAction, a grant to AIPI to cover local costs should be substantially scoped and issues identified, with a plan to negotiate and finalize a grant agreement once the URC/Traction grant closes out. It is expected that the URC/TRAction grant will close out on March 31, 2017, but depending on the availability of funds and the expenditure rate the grant may need to be closed out earlier than March 31, 2017.

3. Provide technical assistance to AIPI for the following specific activities:

- Technical assistance to AIPI for development of a comprehensive communications and dissemination plan for the Evidence Summit activity.
- Technical assistance to AIPI for development of a comprehensive stakeholder engagement strategy and plan. Stakeholder engagement is crucial for local ownership and access to good data and evidence through the life of the MNH ES.
- Technical assistance to implement the Evidence Summit, including identification, recruitment, and logistical support of international subject matter experts to serve on the Evidence Review Teams and in other capacities as needed. Subject matter expertise may include: newborn health, maternal health, quality of care, care seeking and referral, local governance in relation to health services, routine data systems and use of data in decision-making, maternal and newborn health epidemiology, national health insurance, health related equity, and others – where prior knowledge of maternal and newborn health and health systems in Indonesia is an advantage.

4. Provide on the ground, day-to-day technical assistance and operational support to the Evidence Summit team at AIPI.

This may be done immediately on an interim basis using short term international TA (starting in November 2016), while the MCSP team puts into place and executes a comprehensive and long term TA plan. The long term TA can be provided by an expatriate staff or Indonesian staff.

Activities under this section will be determined by the outcome of the initial scoping mission to take place in November 2016 (1. Assess international and local technical assistance needs and formulate a comprehensive TA plan – Immediate need – November 2016).

5. Make a sub-grant to AIPI

This sub-grant is to provide financial support to AIPI for operational expenses in implementing the MNH ES. This grant to AIPI should reflect the overall AIPI work plan and support activities. There should be a seamless transition between the close of the URC/TRAction AIPI sub-grant and the MSCP sub-grant to AIPI.

6. Make a sub-grant to the University of Indonesia to complete the Banten II Study.

Make a rapid assessment on the current status of sub-grant process between UI and URC/TRAction, protocol development, and IRB process. This will include identifying the expenses from UI from previous activity with TRAction which need to be reimbursed (if any) and issues from the previous protocol development process.

Continue the Banten II study sub-award process with UI. Since URC/TRAction had completed the solicitation process to select UI as the sub-awardee, it is recommended to use a sole source mechanism to move forward the sub-award with UI rather than start over the solicitation process.

7. Provide technical assistance to University of Indonesia for the following specific activities:

- Technical support on the finalization of the protocol, development and validation of data collection tools – with the objective of maximizing comparability of current survey with that of 11 years ago.
- Technical assistance for analysis, report writing, journal article writing, and communications.

Other considerations:

- As this is an ongoing activity fully owned by the Indonesian Academy of Sciences and Indonesia participants, it will be very important that those scoping and providing TA be able to operate effectively in this context, including understanding decisions made to date and listening carefully to current plans and views.
- Criteria for selection of individuals to support this activity must include ability to operate successfully in Indonesia. Where possible, experience in Indonesia is preferred.
- As noted for the scoping team leader, but also important for day-to-day support, technical assistance providers, and in electronic communications, careful attention to seniority and authority of the individuals appropriate to the task or communication is required. In many cases, support will be provided to some of the most senior and respected health scientists in Indonesia and those providing support must be able to operate effectively and add value at that level.
- Seamless transition from URC/TRAction to MCSP.

Summary of Support Requirements:

Beginning October 2016	Beginning on or before April, 1 2017 – as URC/TRAction support ends
1. Assess Technical Assistance Needs and formulate a TA plan (<i>immediate need – November 2016</i>)	
2. Assess the scope of a sub-grant to AIPI and make a sub-grant to AIPI	
3. Provide technical assistance to AIPI for the following specific activities: communications strategy, stakeholder engagement strategy, facilitation of international subject matter experts to serve on the Evidence Review Teams	(continues)
4. Provide on the ground, day-to-day technical assistance and operational support to the Evidence Summit team at AIPI.	(continues)
	5. Sub-grant to AIPI
	6. Technical Assistance and sub-grant to UI for Banten II study

