

Gearing Up to Welcome 2021, CISDI Urges the Strengthening of Primary Care as Part of Pandemic Response to the Government of Indonesia in Its Policy Recommendation Health Outlook

- The handling of Covid-19 pandemic in Indonesia is constrained by six things including the ineffective role of primary healthcare in promoting case detection, tracing and treatment, and the absence of a measurable holistic strategy
- CISDI emphasizes the strengthening of primary health care as the main anchor of two upcoming government programs: vaccinations and economic recovery
- The Health Outlook 2021 document presents short, medium, and long term recommendations to build back better Indonesia's health sector by 2021 which is publicly accessed on <http://bit.ly/HealthOutlook2021>

Jakarta, 18 December 2020 – Center for Indonesia's Strategic Development Initiatives (CISDI) launched a policy recommendation document, the Health Outlook 2021 with its main theme on Covid-19: *the Disrupted Essential Health Services, the Impacts and the Know-How to Rebuild Indonesia's Health Sector* on Thursday (17/12). The Health Outlook document is published annually as part of CISDI's contribution in supporting policy-making efforts in health in Indonesia.

In the document, CISDI shared its observation that the government chose a path which led to an explosion of an epidemic that never ended and caused the loss of human lives. One indicator of this statement is the reopening of economic activity before the assessment of the outbreak situation is carried out optimally through tests, traces, treats, isolations, and quarantine. In fact, the pandemic is a very serious threat, so the country requires a strong bureaucracy, regulatory framework and budget to deal with it.

CISDI noted some government's negligence in dealing with the outbreak. First, there is no coherent strategy from the central government to the grassroots community on how to handle the outbreak. The sole control policy relies on the social restriction appeal which has not been conducted in parallel with aggressive tracking and testing actions.

Second, the amount of new cases in Indonesia is one of the worst in the Southeast Asia region, based on the highest number of confirmed cases and daily deaths, the trend of consistently increasing daily cases, and the number of tests per word of confirmation. Third, Indonesia has wasted a golden period in handling the outbreak. It can be seen from the enactment of the government regulation on Large-Scale Social Restrictions on April 1, 2020, two weeks after the determination of the pandemic by WHO and the national disaster by the President.

Fourth, resource constraints prevent test, trace, and isolation interventions from being in ideal proportions. With 270 million populations, Indonesia must consistently conduct tests for 40 thousand people per day to meet the minimum standard of 1 per 1,000 population every day. Fifth, the failure to identify people exposed to Covid-19 with those who were not. Indonesia's trace-isolation ratio (RLI) as of 9 December 2020 was 1.62, far from the WHO standard which requires an RLI of 30.

Sixth, the curves for Indonesia's COVID-19 epidemic, both at national and sub-national levels, are not available. Thus, the number of additional confirmed cases reported does not reflect the

daily number of new cases. Seventh, there was an overlap in the data collection system from the sub-district level to the central level.

Eighth, the service capacity threshold is not available so that the transmission of the outbreak is much faster than the availability of capacity monitoring needs in health services. Ninth, handling COVID-19 focuses too much on hospitals and does not place primary health services, such as community health centers (puskesmas), as the forefront protector of population health. Tenth, due to the buildup and concentration of epidemic handling in hospitals, the test, trace, and treat intervention stand on a fragile foundation.

Based on these observations, CISDI found five crucial things that the Indonesian government should fix in battling Covid-19 outbreak. First, shifting the priority of health development to transform primary health services - especially for epidemic control. Second, implement the principles of behavior change correctly and consistently so that people constantly wash their hands, stay away from crowds, and wear masks (3M) through building a supportive environment, policies with a clear and pro-society direction, and transparent public communication.

Third, it takes a holistic strategy that supports fast handling, drastic, and measurable steps. Fourth, it requires coordination, communication, openness, and building trust between the central government and the regions to handle Covid-19 at the micro level. Fifth, it takes agility to adjust strategies when evaluations are carried out with the same indicators and strategy update feedback is available immediately. Sixth, the placement of health and economy as two opposites costs many lives, even though it is known that the collapse of the health system will cause a vicious cycle of economic, political and social impacts that is impossible to unravel.

To ensure the choice of strategic steps that the government can take in rebuilding Indonesia's health sector, **Olivia Herlinda, Policy Director of CISDI**, emphasized the potential of Indonesia's primary health services. "CISDI has conducted a mapping in which vaccines and economic recovery are two key components to rebuild Indonesia's health sector in 2021. However, we see one big note: all scenarios require primary health services as an anchor for the response to the Covid-19 outbreak. Handling a pandemic requires the function of the Puskesmas to carry out individual health efforts (UKP) and community health efforts (UKM) in an integrated manner. "

Responding to the massive public communication narrative regarding vaccines that is currently being intensified by the government, **dr. Siti Nadia Tarmizi, M.Epid, Director of Prevention and Control of Direct Communicable Diseases of the Ministry of Health of the Republic of Indonesia**, stated that the adjustment of vaccine plans and technical readiness is in line with the President's commitment to provide vaccines free or charge. "We have prepared primary health services and coordinated with Health Offices throughout Indonesia regarding the vaccination program so that it is affordable to the wider community. All countries are learning so much from the pandemic as it has become everybody's business."

In line with the Indonesian Ministry of Health, **Budi Gunadi Sadikin, Chair of the National Economic Recovery Task Force**, agrees that health recovery is the key to national economic recovery. "We will state it right here right now that we will not run out of funding to support our national vaccination program. We are making sure that the logistic system to support vaccine

distribution does not only involve state-owned hospitals but also state-owned health clinics, private hospitals and other health facilities.”

Responding to the vaccine procurement, **Dr. Ines Atmosukarto, CEO of Lipotek as well as Developer of Drug Delivery and Vaccinology Systems**, reminded that of the six vaccines that have been approved by the Ministry of Health, each has different coverage. "We still have to prioritize scientific principles in providing vaccinations such as meeting clinical trials to ensure the safety and efficacy of vaccines considering that each vaccine has a different coverage." Even though vaccines are a central topic in this discussion, civil society again emphasizes the importance of implementing preventive measures that are carried out simultaneously with vaccine distribution.

Giovanni van Empel, Health Policy Kawal Covid-19, reminded that data transparency needs to be improved because data should be an accelerator in driving the success of handling a pandemic. "Data problems have arisen since the beginning of the pandemic, where the data on the number of positive cases, the number of tests, and the cases being tracked were out of sync with the situation in the field. Without quality and transparent data, it will be difficult for us to determine who has received the vaccine or not. In fact, the target the government wants to achieve is quite large with a wide reach. With quality data, the government will also increase public confidence in the efforts that are being intensified. "

Faisal Basri, Indonesia’s renown Economist, also encourages transparency in determining the strategic allocation of pandemic handling costs. "Financial planning must be conducted transparently by the Ministry of Health as the forefront of the pandemic. Currently our health budget is only 3% from our GDP - it is lower than Myanmar, the Philippines and India. This situation causes higher out of pocket spending to our people. In an unfortunate situation like today, it is important that the government reallocate some funding from our infrastructure development to support health financing instead.”

Akmal Taher, CISDI’s Board of Advisor, emphasizes the importance of prevention even after the pandemic is over. “Covid-19 has caused deaths among people with comorbidity such as Cardiovascular diseases and Diabetes. Before the pandemic, the government was supposed to strengthen primary health care to improve the quality of people’s lives and prevent communicable diseases. If that was not possible, no matter how hard we try, we will have a hard time to build back from our current situation.”

Diah Saminarsih, Senior Advisor for Gender and Youth Affairs Director General of WHO and Founder of CISDI, expressed the urgency of health system reform. "This pandemic has brought a lot of disruption to the fabric of our lives. Not only in health, pandemics have caused domestic violence and gender-based violence to become so widespread that it can be called a shadow pandemic. But on the other hand, the role of young people as the spearhead of epidemic control in health services is also very significant. These are the two sides of the pandemic's coin: destruction and hope - together. Therefore, solidarity and togetherness are very important. Only by upholding these two principles will we be able to escape the pandemic safely. So that holistic pandemic control is close to where people are; strengthening primary health services and reviving puskesmas should be one of the main focuses of health system reform. "

The Health Outlook 2021 document "COVID-19: Disruption of Essential Health Services, Impacts and Roads to Rebuild Indonesia's Health Sector" can be accessed by the public via link <http://bit.ly/HealthOutlook2021>.

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About CISDI

The Center for Indonesia's Strategic Development Initiatives (CISDI) is a think tank that encourages the application of scientific evidence-based health policies to create an Indonesian society that is empowered, equal, and prosperous with a healthy paradigm. CISDI carries out advocacy, research and program management to achieve transparent, adequate and equitable governance, financing, human resources and health services.

About Health Outlook 2021

Health Outlook (HO) is a policy recommendation document submitted by CISDI to policy makers as a recommendation for health policy making every year that has been held since 2019. The 2021 Health Outlook is entitled Disruption of Covid-19 in Essential Health Services, Impacts and Roads to Rebuild the Health Sector. Indonesia. This theme was taken as a response and recommendation for handling the COVID-19 outbreak that had been carried out by the Indonesian government.

For further information, please contact:

Mr. Amru Sebayang

Content & Media Officer

Email: communication@cisdi.org

www.cisdi.org