

**Health**

# Harmonization of support to People-centred Development



## Project Information Sheet

**LIP 1-2-001**

Contributed by **AUSAID**

<p><b>Project Title:</b></p> <p>Indonesia-Australia HIV/AIDS Prevention and Care Project (IHPCP) – Phase 2</p>	<p><b>Implementing Partner:</b></p> <p>GRM International and the Burnet Institute Office of Coordinating Ministry for Social Welfare, Republic of Indonesia Jl. Merdeka Barat No.3 Jakarta Pusat – 10110 PO BOX 3271, JKP 10032 Phone: (62 21) 350 5561 Fax: (62 21) 350 5564</p> <p>Australian Team Leader: Tim Mackay Email: <a href="mailto:tmackay@ihpcp.or.id">tmackay@ihpcp.or.id</a></p> <p><i>IHPCP Papua Office</i> Mr. Kel Brown Adviser: Gender and Sexual Transmission Officer-in-Charge Jl. Kesehatan No.2 DOK.II Jayapura (KOM. SEKRETARIAT KPAD) Phone (0967) – 531925 Fax: 0967- 537714 E mail : <a href="mailto:ihpcp@jayapura.wasantara.net.id">ihpcp@jayapura.wasantara.net.id</a>/ <a href="mailto:kelwynb@ihpcppapua.or.id">kelwynb@ihpcppapua.or.id</a></p>
<p><b>Funding:</b></p> <p>A\$ 1,720,000 in year 2006 (total)</p>	<p><b>Counterparty (Local government partner):</b></p> <ul style="list-style-type: none"> <li>• Provincial and Districts AIDS Commissions/Komisi Penanggulangan AIDS Propinsi (KPAP) Papua dan Komisi Penanggulangan AIDS Daerah (KPAD)</li> <li>• Health Dept, Mimika</li> <li>• Radio of Republic Indonesia (RRI) Jayapura, Wamena, Biak, Serui, Nabire, Merauke</li> </ul>

**Project Description:****The objective of IHPCP:**

- Strengthen the capacity of the Komisi Penanggulangan AIDS (KPA), provincial and district KPADs, and NGOs for evidence-based strategic planning, coordination and policy development.
- Reduce the risk of sexually transmitted HIV among identified population groups (men who buy sex, sex workers and men who have sex with men).
- Reduce the risk of HIV transmission through injecting drug use using a public health approach.
- Improve the quality and utilisation of care, support, and treatment for People Living with HIV/AIDS (PLWHA) and vulnerable population groups.

**Activities:**

- *Provincial and Districts AIDS Commissions:* Seconding four (4) staff covering media relations, behaviour change communications, CST and capacity building for district KPAs. IHPCP Papua also provides additional assistance for strategic and operational planning, advocacy to Local Parliament/Dewan Perwakilan Rakyat Daerah (DPRD) and other stakeholders, support to attend training, study tours and conferences, and strengthening for KPADs.
- *Dinas Kesehatan Mimika:* Increasing Community Health through HIV/AIDS and STD Program
- *Radio Republik Indonesia (RRI) Jayapura and eight RRI stations in Papua and West Papua:* Increasing HIV/AIDS Knowledge and Consciousness of Community through Radio in Papua

**Working sector:**

- 1-1 Food & Nutrition Intake
- 1-2 Health
- 1-3 Education
- 1-4 Local Economy
- 1-5 Gender Equality
- 1-6 Basic Infrastructure
- 1-7 Village level Capacity Development
- 2-0 Environmental Management and sustainable development
- 3-0 Vocational Training / Human Resource Development
- 4-0 Other

**Location:**

- Province:
- Regency:
- Municipality:
- District(Kecamatan):
- Village:

<b>Province</b>	Papua	West Papua
<b>Regency</b>	Mimika, Wamena, Nabire, Biak Numfor, Keerom, Sarmi	Fakfak, Manokwari, Raja Ampat
<b>Municipality</b>	Jayapura	Sorong
<b>District (Kecamatan)</b>		
<b>Village</b>		

**Plan, methods and mechanism of the implementation:****Planning:**

- IHPCP support is based on a collaborative planning process with key stakeholders. This process identifies key priorities, develop agreed strategies for responses and make a commitment to building integrated, multisectoral responses.

**Methods and mechanism of the implementation:**

- Close collaboration with local government, in particular KPAD.
- Strategic partnership with nongovernment counterparts, including churches, community leaders and the local media.

**Lessons learn and progress of the project:****Lessons learned**

- The importance of developing sustainability in the government sector through the provincial and district KPAs.
- The need to build an integrated referral and treatment system between subdistrict, district and provincial health services.
- The need to build an integrated referral and treatment system between government, non government and private sectors.
- The importance of strengthening the technical and administrative capacity of all partner organisations, including government counterparts.
- The importance of systematic procedures for HIV testing, counseling, care ,support and treatment of people living with HIV/AIDS.
- Identification of need for Papuan specific communication approach using local culture and languages.

**Progress of Project**

- Improvement in HIV programs and budget required by provincial and district governments.
- An increase in the sustainability of referral and treatment services for HIV/AIDS between government, community, private sector in Timika.eg. link between Timika puskesmas and Tembagapura hospital, Malaria control clinic and the reproductive clinic.
- Development and distribution of culturally appropriate Information, Education and Communication (IEC)/Audio visual materials
- Increased knowledge about HIV and AIDS services in general population through radio and print media.
- Working with government counterparts is not adequate to remove the social discrimination/stigma in the efforts of HIV/AIDS Prevention and Care, therefore IHPCP is also working with Churches and other faith-based-organizations which have been effective in removing such barriers given the role of these organizations in Papuan community.

# Harmonization of support to People-centred Development



## Project Information Sheet

**LIP 1-2-002**

Contributed by **Global Fund-Tuberculosis**

<p><b>Project Title:</b></p> <p>Expansion of DOTS Projects in Papua and West Papua Province.</p>	<p><b>Implementing Partner (Office address, phone number, fax, email and name of the representative):</b></p> <p>PPO GF-ATM TB Component (Global Fund TB)</p> <p>Jl. Kesehatan No. 2 Dok II Jayapura Telpn (0967) 536818 E-mail: <a href="mailto:dots_tb_papua@yahoo.co.id">dots_tb_papua@yahoo.co.id</a></p>
<p><b>Funding (Amount of the budget and funding source/donors):</b></p> <p>Plan for 2007 Rp. 11.872.920.000,- (Global Fund TB) Rp. 1.342.609.000,- (Special Autonomy Fund from Papua Province) Rp. 2.366.222.000,- (Special Autonomy fund from regencies and municipalities budget) Rp. 525.689.800,- (National Budget/Budget Proposals/Daftar Isian Proyek of Papua Province) Rp. 733.490.000,- (Others)</p>	<p><b>Counterparty (Local government partner):</b></p> <p>Health Department</p>
<p><b>Project Description (The aim and the activities):</b></p> <ol style="list-style-type: none"> <li>1. Standards for TB DOTS Strategy- WHO for TB treatment are implemented.</li> <li>2. Increase the findings and treatment of TB patient.</li> <li>3. Program and services for TB DOTS treatment expansion.</li> <li>4. Improve the quality of TB DOTS program management at all level.</li> <li>5. Cooperate and build networks between supporting components.</li> </ol>	
<p><b>Working sector:</b></p> <p><input type="checkbox"/> 1-1 Food &amp; Nutrition Intake <input checked="" type="checkbox"/> 1-2 Health <input type="checkbox"/> 1-3 Education <input type="checkbox"/> 1-4 Local Economy <input type="checkbox"/> 1-5 Gender Equality <input type="checkbox"/> 1-6 Basic Infrastructure</p>	<p><b>Location:</b></p> <p><input checked="" type="checkbox"/> Province: <input checked="" type="checkbox"/> Regency: <input checked="" type="checkbox"/> Municipality: <input checked="" type="checkbox"/> District (Kecamatan): <input type="checkbox"/> Village:</p>

<input type="checkbox"/> 1-7 Village level Capacity Development <input type="checkbox"/> 2-0 Environmental Management and sustainable development <input type="checkbox"/> 3-0 Vocational Training / Human Resource Development <input type="checkbox"/> 4-0 Other	<b>Province</b>	Papua	West Papua
	<b>Regency</b>	Jayapura Biak N. Merauke Mimika Nabire Jayawijaya Pania Yapen Waropen Bovendigoel Mappi Asmat Keerom Peg. Bintang	Manokwari Fakfak Sorong Sorong Selatan
	<b>Municipality</b>	Jayapura	Sorong
	<b>District (Kecamatan)</b>	15 hospitals, 122 community health services, 8 clinics	54 community health services and 4 hospitals.
	<b>Village</b>		

**Plan, methods and mechanism of the implementation:**

- a). Strengthening the systems of TBC treatment through:
1. Training the TB program manager at provincial and regency level, manager from Health Services Units, Community Health Services at regency and district level, village midwives, and hospitals.
  2. Provide microscopes and laboratory supplies for community health services and hospitals.
  3. Provide computers, operational vehicle for Health Department at provincial and regency level.
  4. Monitoring and evaluation of TB prevention programs at national, provincial and regency level, twice in a year.
  5. Supervision, assistance and facilitation from province to regency, from regency to community health services.
  6. Encourage hospitals to be involved in TB DOTS program.
- b) Partnership with the communities, cadre and private health services
1. Train TB cadres as Medicine Intake Watch at community health services areas.
  2. Support the provisions of facilities and TB drugs, and assist private health services (hospitals, clinics) in remote areas.
  3. Advocacy on TB DOTS to provincial and regency governments.
  4. Cooperate with NGOs and other potential community elements.

**Lessons learn and progress of the project:**

1. Trainings for TB program managers have been conducted at provincial and regency level.
2. Trainings on TB DOTS have been conducted for doctors and paramedics from 216 community health services (54%), 13 regional hospitals, 8 army-owned hospitals, and 3 private hospitals in Papua and West Papua.
3. Support for microscopic laboratory available at 102 community health services, and 5 regional hospitals.
4. Detection and treatment of new cases have been increased at hospitals and community health services in 17 regencies in Papua and West Papua.
5. Gradual supervision, facilitation and regular monitoring and evaluation have been conducted.
6. Collaboration to manage TB-HIV between hospitals in Jayapura, Merauke, Mimika, Nabire, Manokwari, and Sorong has been established. Referrals system from community health services to the hospitals has been established.
7. Services for TB DOTS have been provided at private clinics, army-owned hospitals at all urban areas and some villages at remote areas in Mambramo, Waropen and Sarmi.
8. Trainings for TB cadres at 4 community health services area have been conducted.
9. Collaboration with Leprosy Program to socialize TB prevention to the Family Welfare Program (Pendidikan Kesejahteraan Keluarga) at provincial level has been established.
10. Governments from seven regencies start to support TB programs (Mappi, Merauke, Boven Digoel, Kota Jayapura, Kabupaten Jayapura, Keerom, Biak, Serui, Nabire, Pegunungan Bintang and Jayawijaya)

# Harmonization of support to People-centred Development



## Project Information Sheet

**LIP 1-2-003**

Contributed by **NLR**

<p><b>Project Title:</b></p> <p>Leprosy Control Program, supported by Netherlands Leprosy Relief</p>	<p><b>Implementing Partner (Office address, phone number, fax, email and name of the representative):</b></p> <p>Dinas Kesehatan Provinsi</p> <p>E-mail : <a href="mailto:nlrpapua@yahoo.com">nlrpapua@yahoo.com</a> <a href="mailto:arrypongliku@yahoo.com">arrypongliku@yahoo.com</a></p>
<p><b>Funding (Amount of the budget and funding source/donors):</b></p> <p>In 2005: Rp.792,487,750 In 2006: Rp. 803,477,200 In 2007: Rp.1,258,015.900</p>	<p><b>Counterparty (Local government partner):</b></p> <p>Provincial Health Office</p>
<p><b>Project Description (The aim and the activities):</b></p> <ul style="list-style-type: none"> <li>a) The project has been started since 1990s, will end in 2010</li> <li>b) Early case detection and treatment of leprosy cases ,the health center is a basis</li> <li>c) Cut transmission of the disease in community and reduce disability</li> <li>d) Training doctors and nurse as well as laboratory technicians</li> <li>e) Quarterly meeting in districts together with TB program and improve recording and reporting system.</li> <li>f) Supervision and on the job training to districts and health centers</li> <li>g) Reduce stigma and increase people awareness about leprosy</li> <li>h) Community Based approaches (Rapid Village Survey), Self care Group</li> <li>i) Improve rehabilitation including social economic rehabilitation for those people who are affected by leprosy</li> </ul>	
<p><b>Working sector: (Check one)</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> 1-1 Food &amp; Nutrition Intake</li> <li><input checked="" type="checkbox"/> 1-2 Health</li> <li><input type="checkbox"/> 1-3 Education</li> <li><input type="checkbox"/> 1-4 Local Economy</li> <li><input type="checkbox"/> 1-5 Gender Equality</li> <li><input type="checkbox"/> 1-6 Basic Infrastructure</li> <li><input type="checkbox"/> 1-7 Village level Capacity Development</li> <li><input type="checkbox"/> 2-0 Environmental Management and sustainable development</li> <li><input type="checkbox"/> 3-0 Vocational Training / Human Resource Development</li> </ul>	<p><b>Location: (Check working area level, and list the name of the places)</b></p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Province:</li> <li><input type="checkbox"/> Regency:</li> <li><input type="checkbox"/> Municipality:</li> <li><input type="checkbox"/> District (Kecamatan):</li> <li><input type="checkbox"/> Village:</li> </ul> <p>*The service of NLR Papua is given to all districts until village both in Papua and West Papua.</p>

<input type="checkbox"/> 4-0 Other	<b>Province</b>	Papua	West Papua
	<b>Regency</b>	Merauke, Jayapura, Nabire, Mimika, Keerom, Mappi, Boven Digoel, Biak Numfor, Yapen Waropen, Paniai, Jayawijaya, Yahukimo, Asmat, Sarmi	Fakfak, Manokwari, Sorong, Sorong Selatan, Teluk Bintuni, Teluk Wondama, Kaimana, Raja Ampat
	<b>Municipality</b>	Jayapura	Sorong
	<b>District (Kecamatan)</b>		
	<b>Village</b>		
	Districts: Merauke, Jayapura, Fakfak, Manokwari, Nabire, Mimika, Kerom, Mappi, Boven Digoel, Biak Numfor, Sorong, Sorong Selatan, Yapen Waropen, Paniai, Jayawijaya, Yahukimo, Asmat, Teluk Bintuni, Teluk Wondama, Kaimana, Raja Empat dan Sarmi  Municipality: Kota Sorong dan Kota Jayapura  (for all Papua and West Papua)		
	<b>Plan, methods and mechanism of the implementation:</b>		
a) Funds supported by NLR (Netherlands Leprosy Relief), and increase local government commitment for sustainability. b) Implemented by province, districts, health centers and hospitals. c) Drugs available and free of charge. d) Follow national guideline. e) Monitoring and evaluation based on quarterly meeting, supervision and reports. f) Combined Leprosy and TB program.			
<b>Lessons learn and progress of the project:</b>			
a) Self Care Group in Biak, Sorong and Nabire. b) Partnership with Nations Petroleum Company to reach remote areas in Sarmi and Waropen c) Movement to detect leprosy cases in Jayapura declared by Head of District Jayapura d) Additional trainings for doctors and nurses.			

# Harmonization of support to People-centred Development



## Project Information Sheet

**LIP 1-2-004**

Contributed by **UNICEF**

<p><b>Project Title:</b></p> <p>HIV/AIDS prevention and care through Life Skills Education (LSE) and peer education among young people in Papua and Irian Jaya Barat provinces (Phase Two)</p>	<p><b>Implementing Partner (Office address, phone number, fax, email and name of the representative):</b></p> <p>Ministry of National Education (MoNE)</p>
<p><b>Funding (Amount of the budget and funding source/donors):</b></p> <p>Government of Nederland</p>	<p><b>Counterparty (Local government partner):</b></p> <p>Maternal and Child Survival, Development and Protection (MCSDP/KHPPIA)</p>
<p><b>Project Description (The aim and the activities):</b></p> <p>The direct result of programme activities are in two key areas :</p> <ol style="list-style-type: none"> <li>1. The programme has brought the issue of HIV/AIDS to the forefront. The programme's contribution to create this important shift in attitude is substantiated by a review of programme documentation, which indicates that virtually all advocacy and capacity development activities include at least a brief summary of trends in HIV/AIDS prevalence in Papua and West Papua and of baseline data on knowledge, attitudes and behaviour among Papua and West Papua youth.</li> <li>2. Increasing in awareness of HIV/AIDS has led to a variety of programme activities being undertaken at both the provincial and district levels. These programme have focused on disseminating information on the nature and scope of HIV/AIDS in Papua and West Papua and proving opportunities for ongoing planning at the provincial and district levels.</li> </ol> <p>The programme team has established a very strong record of developing and implementing activities in a short time, consistently achieving annual input and output targets. These activities have taken place in five key areas including :</p> <ol style="list-style-type: none"> <li>1. Materials development</li> <li>2. Teacher training</li> <li>3. Peer programme development and outreach</li> <li>4. Capacity development with local government, gatekeepers and other community leaders</li> <li>5. Advocacy for local ownership and future programme development</li> </ol>	
<p><b>Working sector: (Check one)</b></p> <p><input type="checkbox"/> 1-1 Food &amp; Nutrition Intake</p> <p><input checked="" type="checkbox"/> 1-2 Health</p> <p><input type="checkbox"/> 1-3 Education</p>	<p><b>Location: (Check working area level, and list the name of the places)</b></p> <p><input type="checkbox"/> Province:</p> <p><input checked="" type="checkbox"/> Regency:</p>

<input type="checkbox"/> 1-4 Local Economy <input type="checkbox"/> 1-5 Gender Equality <input type="checkbox"/> 1-6 Basic Infrastructure <input type="checkbox"/> 1-7 Village level Capacity Development <input type="checkbox"/> 2-0 Environmental Management and sustainable development <input type="checkbox"/> 3-0 Vocational Training / Human Resource Development <input type="checkbox"/> 4-0 Other	<input type="checkbox"/> Municipality: <input type="checkbox"/> District (Kecamatan): <input type="checkbox"/> Village:		
	<b>Province</b>	Papua	West Papua
	<b>Regency</b>	Jayapura, Jayawijaya, Biak Numfor	Sorong, Manokwari
	<b>Municipality</b>		
	<b>District (Kecamatan)</b>		
	<b>Village</b>		

**Plan, methods and mechanism of the implementation:**

In area of materials development, over 3,000 training kits for teachers have been developed and distributed as a supplement to the formal teacher's manual prepared by MoNE. In addition, over 100,000 copies of parent booklet developed with Phase One funding have been distributed across the programme's five districts

To accomplish the key area of teacher training, 113 principals and 608 teachers in 160 junior secondary schools have participated in a variety of training seminars covering a number of key topics ranging from basic information on HIV/AIDS to developing systems for ongoing monitoring and evaluation

Pertaining to outputs related to building an effective peer education outreach programme component, a cascade training model reached 594 young people across a variety of institutional setting, including senior high schools, Cendrawasih University, voluntary organisations and faith-based organisations. In turn, these peer educators have conducted outreach activities for about 6,000 young people. In addition, student-led anti-AIDS Clubs have been established in 114 junior high schools.

In area of capacity development, a number of key training seminars and other awareness building activities have taken place. Approximately 1,000 people have participated in these training seminar events. In addition, study tours to Myanmar and Thailand were conducted for staff of MoNE, providing opportunities for observation of established life skills education programme.

With regards to advocacy for programme ownership and local support, Provincial Education Department staff and other counterpart agencies have reactivated the HIV/AIDS Committee and are considering inclusion of civil society representatives.

**Lessons learn and progress of the project:**

There are three lessons learned that can be thought of as a three-legged stool :

1. Providing additional aids for teachers on presenting skill-based lessons; training for educators on the approaches and pedagogy of LSE; and continuing to advocate at all levels for the adoption of LSE as core curriculum to ensure programmes of adequate scope.
2. General capacity to plan, implement, monitor and evaluate programme initiatives
3. Gaining a deeper understanding of the challenges involved in creating a sense of local ownership

# Harmonization of support to People-centred Development



## Project Information Sheet

**LIP 1-2-005**

Contributed by **UNICEF**

<p><b>Project Title:</b></p> <p>Strengthening Student Clubs for effective HIV/AIDS prevention and care in Papua and West Irian Jaya province in Indonesia</p>	<p><b>Implementing Partner (Office address, phone number, fax, email and name of the representative):</b></p> <p>Ministry of National Education (MoNE)</p>
<p><b>Funding (Amount of the budget and funding source/donors):</b></p> <p>AusNatCom</p>	<p><b>Counterparty (Local government partner):</b></p> <p>Maternal and Child Survival, Development and Protection (MCSDP/KHPPIA)</p>
<p><b>Project Description (The aim and the activities):</b></p> <p>This project addresses HIV/AIDS prevention among adolescents with scholar-based Life Skills Education (LSE) as the key strategy. It is expected that this intervention will contribute to increased application of knowledge and skills to prevent HIV infection in young people in Papua and West Papua Province, especially in 5 districts, i.e. Jayawijaya, Jayapura, Manokwari, Sorong and Biak Numfor.</p> <p>The Major development objectives of this project are :</p> <ol style="list-style-type: none"> <li>1. Strengthen and expand school anti-AIDS clubs for HIV/AIDS prevention education among students of junior high school.</li> <li>2. Provide knowledge and skills on HIV/AIDS prevention and care among children in junior high schools and among out-of-school youth through an interactive radio programme.</li> </ol> <p>Significant output expected :</p> <ol style="list-style-type: none"> <li>1. District facilitator team support to regularly supervise and monitor school club activities in 5 districts in Papua after receiving refresher training on the HIV/AIDS situation and skills for management of student clubs</li> <li>2. Students in junior schools are trained on student club leadership and management</li> <li>3. Network of school anti-AIDS clubs established and supported to exchange ideas, knowledge and skills about LSE, HIV/AIDS and other concerns of young people.</li> <li>4. Peer educator from Manokwari and Sorong trained on radio script writing and presentation techniques for HIV/AIDS , reproductive health and drug abuse.</li> <li>5. Record and disseminate radio programme for school club.</li> <li>6. Provided technical assistance to strengthen the linkage between school clubs and radio programme activities.</li> </ol>	

The project benefits are :

1. Increased management leadership for school clubs by the students
2. Increased knowledge and skills to prevent HIV/AIDS among junior secondary school students

**Working sector: (Check one)**

- 1-1 Food & Nutrition Intake
- 1-2 Health
- 1-3 Education
- 1-4 Local Economy
- 1-5 Gender Equality
- 1-6 Basic Infrastructure
- 1-7 Village level Capacity Development
- 2-0 Environmental Management and sustainable development
- 3-0 Vocational Training / Human Resource Development
- 4-0 Other

**Location: (Check working area level, and list the name of the places)**

- Province: Papua & Papua Barat
- Regency:
- Municipality:
- District (Kecamatan):
- Village:

<b>Province</b>	Papua	West Papua
<b>Regency</b>		
<b>Municipality</b>		
<b>District (Kecamatan)</b>		
<b>Village</b>		

**Plan, methods and mechanism of the implementation:**

Intoduction of radio broadcast programme in Manokwari and Sorong districts is based on research conducted by University Cendrawasih in 2005 among youth out of school in 5 districts. In order to accelerate implementation of the technical assistance for 25 days to cover 5 districts, the radio programme will be recorded in audio tapes for extended use by school clubs.

The project will maintain its policy/approach ensuring equal of girls and boys selected and trained for club leader in all schools. The same principle will apply for the training of districts facilitators and peer educator/radio presenters training. All training events and orientation will ensure that HIV/AIDS prevention and care is presented in a gender-sensitive perspective.

**Lessons learn and progress of the project:**

The project will benefit the following groups in the districts of Biak, Sorong, Jayapura, Jayawijaya, Manokwari and 2 cities of Jayapura and Sorong :

1. 32 districts facilitators of school club leaders
2. 320 new student leaders of the clubs
3. Approximately 30,000 students in 142 junior secondary school (28 schools in Jayapura, 20 schools in Biak Numfor, 20 schools in Jayawijaya , 28 schools in Sorong, 18 schools in Manokwari and 28 schools in Jayapura city).
4. 16 peer educators-cum-radio presenters
5. 20,000 young people educated and entertained through radio programme on HIV/AIDS

# Harmonization of support to People-centred Development



## Project Information Sheet

**LIP 1-2-006**

Contributed by **UNICEF**

<p><b>Project Title:</b></p> <p>Malaria Program in Eastern Indonesia:</p>	<p><b>Implementing Partner (Office address, phone number, fax, email and name of the representative):</b></p> <p>Ministry of Health</p>															
<p><b>Funding (Amount of the budget and funding source/donors):</b></p> <p>The total budget for the Malaria Program is US\$ 2,189,879 for over 2005-2008.</p> <p>USAID, GFATM</p>	<p><b>Counterparty (Local government partner):</b></p>															
<p><b>Project Description (The aim and the activities):</b></p> <p>The core goal of the Malaria program is to work with the Indonesian Ministry of Health (MOH) and other partners to build a sustainable system to deliver malaria diagnosis, treatment, and prevention through routine antenatal care to pregnant women living in 11 of the most malaria-endemic districts of Indonesia, to demonstrate that the system is logical, workable, and effective, and extend it to other malaria-endemic districts in Indonesia. The long-term impact of such a system will be a reduced burden of malaria in pregnancy and improved maternal and child health.</p>																
<p><b>Working sector: (Check one)</b></p> <p><input type="checkbox"/> 1-1 Food &amp; Nutrition Intake</p> <p><input checked="" type="checkbox"/> 1-2 Health</p> <p><input type="checkbox"/> 1-3 Education</p> <p><input type="checkbox"/> 1-4 Local Economy</p> <p><input type="checkbox"/> 1-5 Gender Equality</p> <p><input type="checkbox"/> 1-6 Basic Infrastructure</p> <p><input type="checkbox"/> 1-7 Village level Capacity Development</p> <p><input type="checkbox"/> 2-0 Environmental Management and sustainable development</p> <p><input type="checkbox"/> 3-0 Vocational Training / Human Resource Development</p> <p><input type="checkbox"/> 4-0 Other</p>	<p><b>Location: (Check working area level, and list the name of the places)</b></p> <p><input type="checkbox"/> Province:</p> <p><input checked="" type="checkbox"/> Regency: In 11 of the most malaria-endemic districts (Papua, West Papua, NTT, Maluku and Maluku Utara)</p> <p><input type="checkbox"/> Municipality:</p> <p><input type="checkbox"/> District (Kecamatan):</p> <p><input type="checkbox"/> Village:</p> <table border="1" data-bbox="842 1697 1415 1957"> <tr> <td><b>Province</b></td> <td>Papua</td> <td>West Papua</td> </tr> <tr> <td><b>Regency</b></td> <td>Jayapura</td> <td>Sorong, Manokwari</td> </tr> <tr> <td><b>Municipality</b></td> <td></td> <td></td> </tr> <tr> <td><b>District (Kecamatan)</b></td> <td></td> <td></td> </tr> <tr> <td><b>Village</b></td> <td></td> <td></td> </tr> </table>	<b>Province</b>	Papua	West Papua	<b>Regency</b>	Jayapura	Sorong, Manokwari	<b>Municipality</b>			<b>District (Kecamatan)</b>			<b>Village</b>		
<b>Province</b>	Papua	West Papua														
<b>Regency</b>	Jayapura	Sorong, Manokwari														
<b>Municipality</b>																
<b>District (Kecamatan)</b>																
<b>Village</b>																

## Plan, methods and mechanism of the implementation:

Under Malaria program, UNICEF develops a strong relationship with the MOH, encouraging cooperation within different departments of the MOH, building partnerships with technical and implementing organisations, and raising funds.

## Lessons learn and progress of the project:

**CEGAH MALARIA PADA IBU HAMIL**

The infographic illustrates several key malaria prevention strategies for pregnant women:

- Health Services:** A health worker provides counseling and services to a pregnant woman.
- Bed Nets:** A pregnant woman is shown sleeping under a bed net.
- Insecticide Spraying:** A person is shown spraying insecticide on a wall.
- Community Meetings:** A group of people, including pregnant women, are gathered for a community meeting.
- Health Education:** A pregnant woman is shown reading educational materials.
- Health Services:** A pregnant woman is shown receiving health services from a health worker.

Logos at the bottom include USAID | INDONESIA, the Indonesian Ministry of Health, and UNICEF 1946-2025.

In its first year, the Malaria Program program has made excellent progress in forging the needed alliances and leveraging additional funding to realize this broad goal, though actual delivery of services to communities is only just beginning.

Significant progress has also been made in assisting the MOH in developing a sound, balanced malaria control program. Besides, the first stage of training for MOH staff, collection a baseline survey data from East Nusa Tenggara (NTT), the ordering and placement of materials for diagnosis and prevention at district level in each of our target districts, social mobilization, and developing of educational materials with input from P2B2 and Kesehatan Keluarga (KesGa) have been implemented.

# Harmonization of support to People-centred Development



## Project Information Sheet

**LIP 1-2-007**

Contributed by **UNICEF**

<p><b>Project Title:</b></p> <p>Women's and Child Health Program</p>	<p><b>Implementing Partner (Office address, phone number, fax, email and name of the representative):</b></p> <p>Subdirectorate of Maternal Health and Malaria Control of the Ministry of Health</p>
<p><b>Funding (Amount of the budget and funding source/donors):</b></p> <p>The total budget for WCHPP program is AUD 4,264,541 million over the periode 2006-2009</p> <p>AusAID</p>	<p><b>Counterparty (Local government partner):</b></p> <p>District Health Office</p>
<p><b>Project Description (The aim and the activities):</b></p> <p>The WCHPP program constitutes UNICEF's continued commitment to improving maternal and child health in papua &amp; West Papua, and focuses on an integrated programmatic approach that addresses the issues of access and affordability of quality health service by the poor and the health needs of women of reproductive age and children under five years. The program focuses on the strengthening roles of women of reproductive age, communities and district health services in improving women's and child health, improving community engagement and accountability within existing (and improved) district health systems, increasing access to and availability of quality health care services, and strengthening district and sub-district service delivery.</p>	
<p><b>Working sector: (Check one)</b></p> <p><input type="checkbox"/> 1-1 Food &amp; Nutrition Intake</p> <p><input checked="" type="checkbox"/> 1-2 Health</p> <p><input type="checkbox"/> 1-3 Education</p> <p><input type="checkbox"/> 1-4 Local Economy</p> <p><input type="checkbox"/> 1-5 Gender Equality</p> <p><input type="checkbox"/> 1-6 Basic Infrastructure</p> <p><input type="checkbox"/> 1-7 Village level Capacity Development</p> <p><input type="checkbox"/> 2-0 Environmental Management and sustainable development</p> <p><input type="checkbox"/> 3-0 Vocational Training / Human Resource Development</p> <p><input type="checkbox"/> 4-0 Other</p>	<p><b>Location: (Check working area level, and list the name of the places)</b></p> <p><input checked="" type="checkbox"/> Province:</p> <p><input checked="" type="checkbox"/> Regency:</p> <p><input type="checkbox"/> Municipality:</p> <p><input type="checkbox"/> District (Kecamatan):</p> <p><input type="checkbox"/> Village:</p>

	<b>Province</b>	Papua	West Papua
	<b>Regency</b>	Jayapura, Jayawijaya	Sorong Manokwari
	<b>Municipality</b>		
	<b>District (Kecamatan)</b>		
	<b>Village</b>		

**Plan, methods and mechanism of the implementation:**

Under WCHPP program, UNICEF is responsible for the financial disbursement and day-to-day management of the Program at central level. Central MoH, through the Subdirectorates of Maternal Health and Malaria Control, is responsible for providing policy advice and feedback, and for participating at province level meetings as appropriate. Implementation of WCHPP will be decentralised to district health offices working closely with the district and sub-district health services teams, which are responsible for planning, financial management, implementation supervision, monitoring and reporting. The Central and Provincial Health teams, together with staff from UNICEF Jakarta and the UNICEF Field Offices, provide technical and monitoring support to districts.

**Lessons learn and progress of the project:**

The implementation of WCHPP is just began in July 2006, thus activities that has been conducted is introduction of the new project to Provincial Health officials in Papua and West Papua and subsequently to the four focus Distric Health Office teams. and staff, and preparation of a letter of intent that delineates the terms of programme cooperation between UNICEF and four focus districts.

# Harmonization of support to People-centred Development



## Project Information Sheet

LIP 1-2-008

Contributed by USAID

<p><b>Project Title:</b></p> <p>Basic Human Services – HIV/AIDS</p>	<p><b>Implementing Partner (Office address, phone number, fax, email and name of the representative):</b></p> <p>Family Health International          Dr. Robert Magnani          Phone: 62-21-422-3463          Fax: 62-21-422-3455          Hp: 0811-920-513          E-mail: magnani@fhi.or.id</p>
<p><b>Funding (Amount of the budget and funding source/donors):</b></p> <p>Regional funding levels are not available</p>	<p><b>Counterparty (Local government partner):</b></p> <p>Provincial and district health offices, provincial and district AIDS Commissions</p>
<p><b>Project Description (The aim and the activities):</b></p> <p>Aksi Stop AIDS (ASA): Within the past decade, Indonesia has witnessed a dramatic increase in the prevalence of HIV/AIDS. The window of opportunity to prevent the exponential spread of HIV into the general population, with disastrous consequences, is fast closing. USAID is assisting the government of Indonesia to address the spread of HIV among most-at-risk-groups, including commercial sex workers and their clients; injecting drug users; men who have sex with men; and the general population of Papua &amp; West Papua, where the epidemic is emerging rapidly. The program aims to: (1) increase coverage and use of risk reduction behaviors, practices and services; (2) improve the capacity of partner agencies to self-assess and enhance their performance; and (3) strengthen institutional responses from the AIDS Commissions (at all levels), clinics, the prison system, and the uniformed services.</p> <p>ASA is a three-year program (2005-2008), being implemented by Family Health International (FHI), which works in seven provinces, including DKI/Jakarta West Java, East Java, Central Java, Papua &amp; West Papua, Riau Islands, and North Sumatra. In these seven provinces, ASA works in 78 of the total 100 districts identified by the Government of Indonesia as being priority areas. This program is implemented in partnership with British Petroleum through a multi-year public-private alliance.</p>	
<p><b>Working sector: (Check one)</b></p> <p><input type="checkbox"/> 1-1 Food &amp; Nutrition Intake  <input checked="" type="checkbox"/> 1-2 Health  <input type="checkbox"/> 1-3 Education  <input type="checkbox"/> 1-4 Local Economy</p>	<p><b>Location: (Check working area level, and list the name of the places)</b></p> <p><input type="checkbox"/> Province:  <input checked="" type="checkbox"/> Regency:  <input checked="" type="checkbox"/> Municipality:</p>

<input type="checkbox"/> 1-5 Gender Equality <input type="checkbox"/> 1-6 Basic Infrastructure <input type="checkbox"/> 1-7 Village level Capacity Development <input type="checkbox"/> 2-0 Environmental Management and sustainable development <input type="checkbox"/> 3-0 Vocational Training / Human Resource Development <input type="checkbox"/> 4-0 Other	<input type="checkbox"/> District (Kecamatan): <input type="checkbox"/> Village:		
	<b>Province</b>	Papua	West Papua
	<b>Regency</b>	Jayapura, Keerom, Pegunungan Bintang, Nabire, Jayawija, Puncak Jaya, Paniai, Mimika, Biak Numfor, Mappi, Asmat, Merauke	Manokwari, Faf-fak, Kaimana, Teluk Bintuni, Sorong
	<b>Municipality</b>	Jayapura	Sorong
	<b>District (Kecamatan)</b>		
	<b>Village</b>		
<b>Plan, methods and mechanism of the implementation:</b>  Technical Assistance, training and commodities			
<b>Lessons learn and progress of the project:</b>  New program. An evaluation will be conducted in the near future.			

# Harmonization of support to People-centred Development



## Project Information Sheet

LIP 1-2-009

Contributed by USAID

<p><b>Project Title:</b></p> <p>Basic Human Services - Tuberculosis</p>	<p><b>Implementing Partner (Office address, phone number, fax, email and name of the representative):</b></p> <p>Royal Netherlands Tuberculosis Society (KNCV)          Contact: Benson Hausman          Phone: 62-21-428-84176          Fax: 62-21-428-84178          HP: 0813-109-077104          Email: hausmanb@kncvtbc.nl</p>
<p><b>Funding (Amount of the budget and funding source/donors):</b></p> <p>Regional funding levels are not available</p>	<p><b>Counterparty (Local government partner):</b></p> <p>Provincial and district health offices; public health centers, public Hospitals, and Provincial and district labs.</p>
<p><b>Project Description (The aim and the activities):</b></p> <p>Indonesia has the third highest tuberculosis (TB) burden in the world. It is estimated that approximately 100,000 Indonesians die from TB each year. USAID provides technical and operational assistance to strengthen and expand DOTS (Directly Observed Treatment Short-Course) coverage in Indonesia through the TB Coalition Technical Assistance (TBCTA) program, implemented by the Royal Netherlands TB Association (KNCV). TBCTA is supporting the National TB Program in nine provinces, covering approximately 62% of the total Indonesian population. TBCTA supports the National TB Program to improve program management; laboratory diagnosis of TB; treatment for TB patients; training for provincial, district and sub-district the National TB Program staff; management of TB drugs; local government commitment; and research. With support from TBCTA and others, Indonesia has made remarkable progress, increasing the detection of TB patients (Case Detection Rate) from 28% in 2001 to 52% in 2004, increasing the cure rate from 67% in 2001 to 85% in 2004, and reducing the overall burden of TB in Indonesia. The period of performance for this project is 2006 to 2010. This program is implemented in partnership with British Petroleum through a multi-year public-private alliance.</p>	
<p><b>Working sector: (Check one)</b></p> <p><input type="checkbox"/> 1-1 Food &amp; Nutrition Intake  <input checked="" type="checkbox"/> 1-2 Health  <input type="checkbox"/> 1-3 Education  <input type="checkbox"/> 1-4 Local Economy</p>	<p><b>Location: (Check working area level, and list the name of the places)</b></p> <p><input type="checkbox"/> Province:  <input checked="" type="checkbox"/> Regency:  <input type="checkbox"/> Municipality:</p>

<input type="checkbox"/> 1-5 Gender Equality <input type="checkbox"/> 1-6 Basic Infrastructure <input type="checkbox"/> 1-7 Village level Capacity Development <input type="checkbox"/> 2-0 Environmental Management and sustainable development <input type="checkbox"/> 3-0 Vocational Training / Human Resource Development <input type="checkbox"/> 4-0 Other	<input type="checkbox"/> District (Kecamatan): <input type="checkbox"/> Village: <table border="1" data-bbox="842 286 1410 555"> <tr> <td><b>Province</b></td> <td>Papua</td> <td>West Papua</td> </tr> <tr> <td><b>Regency</b></td> <td>Jayapura</td> <td>Sorong, Manokwari</td> </tr> <tr> <td><b>Municipality</b></td> <td></td> <td></td> </tr> <tr> <td><b>District (Kecamatan)</b></td> <td></td> <td></td> </tr> <tr> <td><b>Village</b></td> <td></td> <td></td> </tr> </table>	<b>Province</b>	Papua	West Papua	<b>Regency</b>	Jayapura	Sorong, Manokwari	<b>Municipality</b>			<b>District (Kecamatan)</b>			<b>Village</b>		
<b>Province</b>	Papua	West Papua														
<b>Regency</b>	Jayapura	Sorong, Manokwari														
<b>Municipality</b>																
<b>District (Kecamatan)</b>																
<b>Village</b>																
<p><b>Plan, methods and mechanism of the implementation:</b></p> <p>Technical assistance, training, and commodities</p>																
<p><b>Lessons learn and progress of the project:</b></p> <p>New program.</p>																

# Harmonization of support to People-centred Development



## Project Information Sheet

**LIP 1-2-010**

Contributed by **USAID**

<p><b>Project Title:</b></p> <p>Basic Human Services - Malaria</p>	<p><b>Implementing Partner (Office address, phone number, fax, email and name of the representative):</b></p> <p>UNICEF          Dr. David Hipgrave          Phone: 62-21-570-5816          Fax: 62-21-571-1326          HP: 0811-979-016          Email: dhipgrave@unicef.org</p>
<p><b>Funding (Amount of the budget and funding source/donors):</b></p> <p>Regional funding levels are not available</p>	<p><b>Counterparty (Local government partner):</b></p> <p>Provincial and district health offices;          Provincial and district labs; and Indonesia Midwives Associations (IBI)</p>
<p><b>Project Description (The aim and the activities):</b></p> <p>USAID supports a three year program (2005-2008) to address malaria in pregnancy by improving health services, systems and behaviours that contribute to a reduction of malaria in pregnancy in selected districts in Papua and West Papua. In Papua and West Papua, the program covers Sorong, Jayapura and Biak districts. The program ensures the integration of malaria control and maternal health systems development and quality control; provides and distributes insecticide treated bed nets (ITNs) for pregnant women and young children; and provides technical assistance for increasing awareness and understanding of malaria in pregnancy, including strengthening antenatal care to ensure both quality diagnosis and treatment of malaria. This program is implemented in partnership with British Petroleum through a multi-year public-private alliance.</p>	
<p><b>Working sector: (Check one)</b></p> <p><input type="checkbox"/> 1-1 Food &amp; Nutrition Intake  <input checked="" type="checkbox"/> 1-2 Health  <input type="checkbox"/> 1-3 Education  <input type="checkbox"/> 1-4 Local Economy  <input type="checkbox"/> 1-5 Gender Equality  <input type="checkbox"/> 1-6 Basic Infrastructure  <input type="checkbox"/> 1-7 Village level Capacity Development  <input type="checkbox"/> 2-0 Environmental Management and sustainable development</p>	<p><b>Location: (Check working area level, and list the name of the places)</b></p> <p><input type="checkbox"/> Province:  <input checked="" type="checkbox"/> Regency:  <input type="checkbox"/> Municipality:  <input type="checkbox"/> District (Kecamatan):  <input type="checkbox"/> Village:</p>

<input type="checkbox"/> 3-0 Vocational Training / Human Resource Development <input type="checkbox"/> 4-0 Other	<b>Province</b>	Papua	West Papua
	<b>Regency</b>	Jayapura	Sorong, Manokwari
	<b>Municipality</b>		
	<b>District (Kecamatan)</b>		
	<b>Village</b>		
<b>Plan, methods and mechanism of the implementation:</b>			
Technical assistance, training, and commodities.			
<b>Lessons learn and progress of the project:</b>			
New program. An evaluation will be conducted in the near future.			

# Education

# Harmonization of support to People-centred Development



## Project Information Sheet

**LIP 1-3-001**

Contributed by **SIL**

<p><b>Project Title:</b></p> <p>Literacy Program</p>	<p><b>Implementing Partner (Office address, phone number, fax, email and name of the representative):</b></p> <p>SIL International P.O. Box 1 Sentani 99352, Jayapura - Papua Phone: (0967) 593 971 Fax : (0967) 593 974 Email: <a href="mailto:mike_eastwood@sil.org">mike_eastwood@sil.org</a> Director – Mike Eastwood</p>
<p><b>Funding (Amount of the budget and funding source/donors):</b></p> <p>Special Autonomy fund Government fund Oikonomos Foundation CIDA UNDP Private funds for several projects. Facilities from BPMD</p>	<p><b>Counterparty (Local government partner):</b></p> <p>Ministry of National Education Teaching and Learning Department– Nonformal Education Division Village Community Empowerment Agency Social Welfare Department Yayasan Pengembangan Masyarakat Edopi</p>
<p><b>Project Description (The aim and the activities):</b></p> <p>The goal of Literacy Program is to eradicate illiteracy and to keep the continuance of local languages and cultures. Expectantly, literacy will give opportunities and motivations to the communities to develop their living and their communities.</p> <p>The Literacy Program supports the literacy activities in more than ten language or indigenous groups (e.g. Walak, Isirawa, Kemtuik, Ketengban, Edopi, Bauzi, Ambai, Yale, Maibrat, Mpur, Tehit, Kirikiri, Korowai, and Iau). Some of the literacy activities are:</p> <ul style="list-style-type: none"> <li>• Reading and writing for adults</li> <li>• Development of alphabet curricula</li> <li>• Development of local content for primary school</li> <li>• Revising and developing elementary school textbooks in both local language and Bahasa.</li> <li>• Development of tone alphabet books</li> <li>• Development of basic counting books</li> <li>• Development of illustrated dictionaries</li> <li>• Development of health information books</li> <li>• Development of appropriate technology books.</li> <li>• Training for teachers and tutors</li> <li>• Training for local volunteers/cadres.</li> <li>• Training on translation local languages to Bahasa or vice versa.</li> </ul>	

<p><b>Working sector: (Check one)</b></p> <p><input type="checkbox"/> 1-1 Food &amp; Nutrition Intake</p> <p><input type="checkbox"/> 1-2 Health</p> <p><input checked="" type="checkbox"/> 1-3 Education</p> <p><input type="checkbox"/> 1-4 Local Economy</p> <p><input type="checkbox"/> 1-5 Gender Equality</p> <p><input type="checkbox"/> 1-6 Basic Infrastructure</p> <p><input type="checkbox"/> 1-7 Village level Capacity Development</p> <p><input type="checkbox"/> 2-0 Environmental Management and sustainable development</p> <p><input type="checkbox"/> 3-0 Vocational Training / Human Resource Development</p> <p><input type="checkbox"/> 4-0 Other</p>	<p><b>Location: (Check working area level, and list the name of the places)</b></p> <p><input type="checkbox"/> Province:</p> <p><input checked="" type="checkbox"/> Regency:</p> <p><input type="checkbox"/> Kota:</p> <p><input checked="" type="checkbox"/> District (Kecamatan):</p> <p><input checked="" type="checkbox"/> Village:</p> <table border="1" data-bbox="826 421 1428 994"> <tr> <td><b>Province</b></td> <td>Papua</td> <td>West Papua</td> </tr> <tr> <td><b>Regency</b></td> <td>1. Jayapura 2. Sarmi 3. Yapen Waropen 4. Waropen 5. Yahukimo 6. Pegunungan Bintang 7. Jayawijaya 8. Puncak Jaya 9. Boven Digoel</td> <td>1. Sorong Selatan 2. Manokwari</td> </tr> <tr> <td><b>Municipality</b></td> <td></td> <td></td> </tr> <tr> <td><b>District (Kecamatan)</b></td> <td>15</td> <td>3</td> </tr> <tr> <td><b>Village</b></td> <td>More than 20</td> <td></td> </tr> </table> <ul style="list-style-type: none"> <li>• Jayapura Regency: Kemtuik and Kemtuik Gresi District</li> <li>• Sarmi Regency: Sarmi, Mamberamo Tengah and Pantai Barat District)</li> <li>• Yapen Regency: Yapen Timur District</li> <li>• Waropen Regency: Waropne Atas District</li> <li>• Yahukimo Regency: Anggruk District</li> <li>• Pegunungan Bintang Regency: Kiwirok, Oksibil, Okbibab and Borme District</li> <li>• Jayawijaya Regency: Ilugwa District</li> <li>• Puncak Jaya Regency: Fau,</li> <li>• Boven Digoel District: Bomokia District</li> <li>• Sorong Selatan Regency: Ayamaru and Teminabuan District</li> <li>• Manokwari Regency: Kebar District</li> </ul>	<b>Province</b>	Papua	West Papua	<b>Regency</b>	1. Jayapura 2. Sarmi 3. Yapen Waropen 4. Waropen 5. Yahukimo 6. Pegunungan Bintang 7. Jayawijaya 8. Puncak Jaya 9. Boven Digoel	1. Sorong Selatan 2. Manokwari	<b>Municipality</b>			<b>District (Kecamatan)</b>	15	3	<b>Village</b>	More than 20	
<b>Province</b>	Papua	West Papua														
<b>Regency</b>	1. Jayapura 2. Sarmi 3. Yapen Waropen 4. Waropen 5. Yahukimo 6. Pegunungan Bintang 7. Jayawijaya 8. Puncak Jaya 9. Boven Digoel	1. Sorong Selatan 2. Manokwari														
<b>Municipality</b>																
<b>District (Kecamatan)</b>	15	3														
<b>Village</b>	More than 20															
<p><b>Plan, methods and mechanism of the implementation:</b></p> <ul style="list-style-type: none"> <li>• Research on phonology to develop the orthography of local languages.</li> <li>• Develop bilingual teaching aid using local languages.</li> <li>• Develop bilingual story books using local languages.</li> <li>• Write and publish books and illustrated dictionaries in local languages</li> <li>• Conduct workshop to develop curricula in local languages</li> <li>• Conduct workshop on local languages literatures writing.</li> <li>• Conduct trainings for tutors and coordinators of adult literacy programs</li> <li>• Establish community libraries.</li> <li>• Support the literacy activities conducted by SIL facilitators.</li> <li>• Assist tutors and coordinators trough refresher trainings and mentoring, evaluation program</li> <li>• Conduct trainings for primary school teachers to socialize the bilingual curricula</li> <li>• Printing the curricula books.</li> </ul>																

**Lessons learn and progress of the project:**

- Adult who finished their literacy courses can continue their education through Equivalency Education. Literate adult tend to have more dignity and participate actively in social and economic life. Literacy also improves people's understanding on health and education matters.
- The competition between dialect groups may lead to horizontal conflicts between groups. To solve the conflicts, SIL has facilitated the formation of Literacy Committee for the conflicting groups.
- To overcome the transportation problems (some areas are not reachable by boats, cars or foots) SIL have helped facilitate the building of airplane strips in some isolated areas.
- Books which are written in local languages can build community self esteem. Children and adults are very proud because they have books in their own languages.
- The local content modules are used by local teachers. There were 38 teachers and 13 tutors in Teminabuan District who are trained to use the module.
- The local content text books are used by 2200 elementary students in Teminabuan District.
- Sometimes local community only wants money or financial aids but they misuse the aids. To increase local community participation, we have to build communities' sense of belonging to the program, involve local community as the cadre or facilitator.
- Another challenge is limited funding. For a solution to this problem, we are still relying on our personal funds.
- Conflicts between villages and lack of transportation to reach isolated areas may worsen the living condition of local people's group. SIL has asked the local government to facilitate the conflict resolutions between conflicting groups.

# Harmonization of support to People-centred Development



## Project Information Sheet

LIP 1-3-002

Contributed by **UNICEF** and **UNESCO**

<p><b>Project Title:</b></p> <p><b>CLCC (<i>Creating Learning Communities for Children</i>)</b>. In Ministry of National Education, it is so-called as SBM (<i>School-Based Management</i>)</p>	<p><b>Implementing Partner (Office address, phone number, fax, email and name of the representative):</b></p> <p>UNICEF (<b>Yance Tamaela, HP: 0813 445 606 77</b>) and UNESCO (<b>John Tupamahu, HP: 0813 445 98 195</b>).</p>
<p><b>Funding (Amount of the budget and funding source/donors):</b></p> <p>± 3 million USD from NZAID, New Zealand (2002-2005) and ± 2,8 million USD from AusAID, Australia (2004-2006).</p>	<p><b>Counterparty (Local government partner):</b></p> <ul style="list-style-type: none"> <li>- BAPPEDA Papua and West Papua Province</li> <li>- Dinas Pendidikan dan Pengajaran Papua and West Papua Province</li> <li>- Dinas Pendidikan dan Pengajaran Jayapura District (Jl. Sentani-Depapre, Gunung Merah, Sentani, Ph. 0967 – 594716) <b>Contact Person: Drs. Andrias Ramandey (HP: 0812 489 98 27)</b></li> <li>- Dinas Pendidikan dan Pengajaran Sorong District (Jl. Klamono, KM 24, Kab. Sorong); <b>Contact Person: Drs. Fritz Simanjuntak (HP: 0813 444 66 500)</b></li> <li>- Dinas Pendidikan Biak Numfor District (Jl. Majapahit, Ph. 0981 – 21288; Fax 0981 - 23574); <b>Contact Person :Felix Rumbewas, BA. S.Sos, MM (HP: 0813 440 847 08)</b></li> <li>- Dinas Pendidikan Dasar dan Pra Sekolah Manokwari District (Jl. Pahlawan, Ph. 0986-211679; Fax: 0986-214 760); <b>Contact Person : Drs S. Arrongear (HP: 0812 485 0829)</b></li> <li>- Dinas Pendidikan dan Kebudayaan Jayawijaya District (Jl. Jl. Diponegoro Wamena Ph. 0969-31141) <b>Contact Person: Paul Awandoy (HP: 0813 441 199 46)</b></li> </ul>

**Project Description (The aim and the activities):**

The goal of this project is to contribute to the improved quality of Basic Education in Indonesia. The purpose of the program is develop and disseminate an appropriate and replicable model for improving the quality of learning for primary school children in Indonesia and particularly in Papua & **West Papua** through the implementation of 3 components of CLCC, which are School Management, AJEL (Active, Joyful and Effective Learning), and Community Participation. In line with the issuance of Autonomy Law, education field is also changed from centralization into decentralization pattern in which the management of education policies is handed over to schools as the smallest education units that understand more about their situation and are able to develop their schools by utilizing surrounding resources.

Some activities that have been implemented so far are:

Orientation Workshop on SBM/CLCC Program, Study Visit to CLCC schools, Cascade Trainings (National to school), Coordination Meeting of CLCC Task Forces, Monitoring by CLCC Task Forces, Block Grant for CLCC schools (only for CLCC schools in the first year), Review and Planning Meeting.

**Working sector: (Check one)**

- 1-1 Food & Nutrition Intake  
 1-2 Health  
 1-3 Education  
 1-4 Local Economy  
 1-5 Gender Equality  
 1-6 Basic Infrastructure  
 1-7 Village level Capacity Development  
 2-0 Environmental Management and sustainable development  
 3-0 Vocational Training / Human Resource Development  
 4-0 Other

**Location: (Check working area level, and list the name of the places)**

- Province: 2  
 Regency: 5  
 Municipality: 0  
 District (Kecamatan): 18  
 Village: 204

Province	Papua	West Papua
<b>Regency</b>	Jayapura, Jayawijaya, Biak Numfor	Manokwari Sorong
<b>Municipality</b>		
<b>District (Kecamatan)</b>	<b>Jayapura</b> (Depapre, Kemtuk, Gresi, Kaureh), <b>Jayawijaya</b> (Wamena Kota, Asologaima, Kurulu), <b>Biak Numfor</b> (Samofa, Biak Timur, Warsa, Yendidori)	<b>Manokwari</b> (Manokwari Masni, Prafi, Warmare, Ransiki), <b>Sorong</b> (Aimas, Klamono, dan Salawati)
<b>Village</b>	Jayapura: 34 Jayawijaya: 44 BiakNumfor: 45	Manokwari: 59 Sorong : 22

**Plan, methods and mechanism of the implementation:**

## **Lessons learn and progress of the project:**

Some existing progresses and changes:

- The establishment of CLCC Task Forces from province till sub districts levels.
- The increase of local government, particularly Education offices commitment through the provision of matching fund from APBD (local government budget) province and districts.
- The support of community towards education is increasing in various kinds of contributions such as fund collected by School Committee, construction workers to build school facilities for free, and ideas to develop schools ahead.
- Replication of CLCC project to some non Unicef focused districts/municipalities with APBD fund.
- Students have not been afraid to express their opinions, become more creative so that the teaching learning process remains effective and enjoyable.
- Teachers have been developing various methods of creative and enjoyable teachings.

Some implementation of activities:

- Ministry of National Education (MoNE)-UNICEF-UNESCO has conducted a meeting to design second phase of CLCC. For Papua, the meeting which was conducted in Surabaya on 24-26 July 2006, was represented by Biak Numfor district as many as 4 people: 2 from Education office; 1 from BAPPEDA and 1 from Religion Affair Department.
- The ongoing CLCC activities in the 5 districts include trainings, advocacy, monitoring, School Grant. CLCC Project funded by NZAID ended in September 2006 while project funded by AusAID will end in December 2006. However, the activities funded by NZAID and AusAID are still going on until early March 2007 based on Unicef-Unesco consideration.
- Education Office, Papua Province has replicated the CLCC project to 4 districts/municipalities with APBD Papua province in 2005. The districts are Keerom, Merauke, Mimika dan Jayapura municipality. Those districts have conducted Study Visit to East Java province. At the end of 2006, this project will be desimeinated to another 5 districts, namely Tolikara, Mappi , Pegunungan Bintang, Nabire and Yapen districts.
- The cooperation with LPMP (Lembaga Pengembangan Mutu Pendidikan) in Papua has been started through CLCC Master Training that involved 5 trainers in Denpasar, Bali in September 2006. The cooperation continued with the involvement of one LPMP's trainer in Child-Friendly School Workshop in Bandung. Moreover, one of the LPMP trainers has also been involved as CLCC Task Force in Papua province. Beside that as a commitment of LPMP to support the CLCC project, they are ready to provide space for CLCC secretariat in province level along with its facilities and also to support with KKG (Teachers' Group Meeting) fund.

The lesson learned is that the distribution of teachers in each school proportionally is strongly needed so that the education process can run well and the attention of Education office in the form of periodic monitoring and supervision can give significant motivation to the headmasters, teachers and school supervisors. To support learning process, supported system and facilities such as student books and reading books become very important.

# Harmonization of support to People-centred Development



## Project Information Sheet

**LIP 1-3-003**

Contributed by USAID

<p><b>Project Title:</b></p> <p>Basic Education – Decentralized Basic Education</p>	<p><b>Implementing Partner (Office address, phone number, fax, email and name of the representative):</b></p> <p>Education Development Center Attn: Mike Calvano Jakarta Stock Exchange, Tower 2 Suite 1403, Jakarta Tel: 62-21-515-0454 Email: <a href="mailto:mcalvano@edc.org">mcalvano@edc.org</a></p> <p>Research Triangle Institute Attn: Dan Moulton Jakarta Stock Exchange, Tower 1 29th Floor, Jakarta Tel: 62-21-515-2772 Email: <a href="mailto:dmoulton@rti.org">dmoulton@rti.org</a></p> <p>Note: Project office being established in Sorong, in connection with USAID Local Government Support Project.</p>
<p><b>Funding (Amount of the budget and funding source/donors):</b></p> <p>Regional funding levels are not available.</p>	<p><b>Counterparty (Local government partner):</b></p> <p>District Education Offices in Kota Sorong, Kab. Manokwari and Kab. Sorong Selatan</p> <p>Cendrawasih University, Education Faculty</p>
<p><b>Project Description (The aim and the activities):</b></p> <p>The focus of the Decentralized Basic Education (DBE) program in Papua &amp; West Papua is two-fold: 1) to improve district level capacity in West Papua province to effectively manage basic education services; and 2) improve the quality of teaching and learning in primary schools. Through the Research Triangle Institute, DBE will develop local capacity to prepare and implement education development plans based on community and parental participation, strengthen school committees, and improve education financial, asset and personnel management. Through the Education Development Center, DBE will improve the quality of teaching and learning by training education faculty and teachers at Cendrawasih University in Jayapura. USAID's education activities in Papua and West Irian Jaya provinces are implemented in partnership with British Petroleum through a multi-year public-private alliance.</p>	

<p><b>Working sector: (Check one)</b></p> <p><input type="checkbox"/> 1-1 Food &amp; Nutrition Intake</p> <p><input type="checkbox"/> 1-2 Health</p> <p><input checked="" type="checkbox"/> 1-3 Education</p> <p><input type="checkbox"/> 1-4 Local Economy</p> <p><input type="checkbox"/> 1-5 Gender Equality</p> <p><input type="checkbox"/> 1-6 Basic Infrastructure</p> <p><input type="checkbox"/> 1-7 Village level Capacity Development</p> <p><input type="checkbox"/> 2-0 Environmental Management and sustainable development</p> <p><input type="checkbox"/> 3-0 Vocational Training / Human Resource Development</p> <p><input type="checkbox"/> 4-0 Other</p>	<p><b>Location: (Check working area level, and list the name of the places)</b></p> <p><input type="checkbox"/> Province:</p> <p><input checked="" type="checkbox"/> Regency:</p> <p><input checked="" type="checkbox"/> Municipality:</p> <p><input type="checkbox"/> District (Kecamatan):</p> <p><input type="checkbox"/> Village:</p> <table border="1" data-bbox="842 488 1410 784"> <tr> <td><b>Province</b></td> <td>Papua</td> <td>West Papua</td> </tr> <tr> <td><b>Regency</b></td> <td></td> <td>Manokwari, Sorong Selatan</td> </tr> <tr> <td><b>Municipality</b></td> <td>Jayapura</td> <td>Sorong</td> </tr> <tr> <td><b>District (Kecamatan)</b></td> <td></td> <td></td> </tr> <tr> <td><b>Village</b></td> <td></td> <td></td> </tr> </table>	<b>Province</b>	Papua	West Papua	<b>Regency</b>		Manokwari, Sorong Selatan	<b>Municipality</b>	Jayapura	Sorong	<b>District (Kecamatan)</b>			<b>Village</b>		
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<b>District (Kecamatan)</b>																
<b>Village</b>																
<p><b>Plan, methods and mechanism of the implementation:</b></p> <p>Technical assistance and training</p>																
<p><b>Lessons learn and progress of the project:</b></p> <p>Program activities began in September 2006.</p>																

# **Local Economy**

# Harmonization of support to People-centred Development



## **Papua Indigenous Peoples Empowerment (PIPE) Programme** *Reducing Poverty and Strengthening Peace and Development Mechanisms involving Indigenous Peoples in Papua and West Papua (Indonesia)* **INS/04/MO1/HSF**

### Project Information Sheet

**LIP 1-4-001**

Contributed by ILO

<p><b>Project Title:</b></p> <p>Papua Indigenous Peoples Empowerment (PIPE) Programme: Reducing Poverty and Strengthening Peace and Development Mechanisms involving Indigenous Peoples in Papua and West Papua, Indonesia</p>	<p><b>Implementing Partner (Office address, phone number, fax, email and name of the representative):</b></p> <ul style="list-style-type: none"> <li>• Traditional community organizations (<i>Adat institutions</i>) in the pilot project sites i.e. <i>Reba A'ling</i>; <i>Forum Dumtru</i>; <i>Win Hamo</i>; and. <i>Ventori</i> in partnership with assisting local government units.</li> <li>• Partner agencies and NGOs in relation to specific activities.</li> </ul>
<p><b>Funding (Amount of the budget and funding source/donors):</b></p> <p>+/- 1.5M USD (2006-2008); UN Trust Fund for Human Security (UNTFHS -Government of Japan)</p>	<p><b>Counterparty (Local government partner):</b></p> <p>ILO (with other UN agencies) and partners in the National Project Advisory Committee (NPAC) and in the Provincial Project Steering Committee (PSC) – BAPPEDA (as Chairperson), Dinas Tenaga Kerja, Dinas Social, BPMD, APINDO and SPSI;</p>
<p><b>Project Description (The aim and the activities):</b></p> <p>The project is a 3-year pilot undertaking which seeks to test a community-driven participatory development (CDPD) approach to poverty reduction and village development among indigenous peoples and a stakeholder-driven strategy for strengthening peace and development mechanisms in Papua and West Papua-Indonesia. It capitalizes on the native capacity of the indigenous peoples for individual and collective self-reliance and on the fundamental capacity and willingness of multi-sectoral stakeholders to sustain peace and development in the area.</p>	

The project is being implemented in the context and within the framework of the Special Autonomy Law (OTSUS), the 25-Year Papua Development Plan and the New Papua Development Strategy.

**Objectives:**

The primary objectives of the project are the following:

- 1) Enhance the capacity of the indigenous Papuans, together with non-Papuans with whom they live, to initiate, plan, implement and sustain their own poverty reduction and community development activities within their traditional villages using primarily their indigenous knowledge systems and practices;
- 2) Mainstream gender issues and promote gender equality in the local development process; and
- 3) Strengthen the capacity of multi-sectoral stakeholders to sustain existing site-specific peace and development mechanisms.

**Working sector: (Check one)**

- 1-1 Food & Nutrition Intake
- 1-2 Health
- 1-3 Education
- 1-4 Local Economy
- 1-5 Gender Equality
- 1-6 Basic Infrastructure
- 1-7 Village level Capacity Development
- 2-0 Environmental Management and sustainable development
- 3-0 Vocational Training / Human Resource Development
- 4-0 Other

The project focuses on providing support to poverty reduction and community development initiatives of indigenous peoples at the village level; support to initiatives for strengthening peace and development mechanisms; and, support to mainstreaming gender issues in the development process at the community level.

**Location: (Check working area level, and list the name of the places)**

- Province:
- Regency:
- Municipality:
- District (Kecamatan):
- Village:

<b>Province</b>	Papua	West Papua
<b>Regency</b>	Jayapura	Manokwari
<b>Municipality</b>	Jayapura	
<b>District (Kecamatan)</b>	Muara Tami, Kemtuk Gresi	Tanah Rubuh, Kebar
<b>Village</b>		

- District Muara Tami in the City of Jayapura; District Kemtuk Gresi in Kabupaten Jayapura; and Districts Tanah Rubuh and Kebar in Kabupaten Manokwari.
- Province of Papua/ West Papua.

**Plan, methods and mechanism of the implementation:**

In its implementation, the project adheres to the processes set out under the community –driven participatory development (CDPD) methodology. Relative to the first objective, the project activities are implemented by the partner communities in the pilot project sites through their own traditional community organizations. They identify, plan and implement their own gender-sensitive poverty reduction and village development activities based on their felt needs and existing resources. Concerned local government agencies and the ILO provide facilitative support services in the form of physical and social infrastructure, complementary technical knowledge and small grants.

In relation to the second and third objectives, the implementation project activities is done by the stakeholders themselves including the government, church groups, LSMs and business organizations. For purposes of these activities, cooperating local government agencies and the ILO likewise provide facilitative support services such as necessary social infrastructure, relevant technical inputs and small grants.

The PSC provides policy guidance in the preparation and implementation of annual project work plans and of the annual community action plans for poverty reduction and village development. They also help monitor the progress of project implementation activities. As financial manager of the project funds, the ILO makes direct payments in relation to the cost of activities and services rendered. Local government units at the Provincial, Regency/Municipality and District levels are encouraged to provide counterpart OTSUS resources for the project in order to expand its coverage in terms of direct beneficiaries.

**Lessons learn and progress of the project:**

The project, which is covered by a Memorandum of Understanding between the Provincial Government of Papua and the ILO has just been through its first year of implementation. During this period, the preparatory stage has been completed and the implementation stage has begun.

Project orientation meetings with partner agencies have already been conducted and, in order to systematize the delivery of support by the partner agencies, the NPAC and the PSC have been organized.

Through the coordination of the PSC, pilot project sites have been identified and validated. Community development facilitators (CDFs) have been selected by the partner communities and have undergone training on community-driven participatory development and poverty reduction techniques. Community leaders have also undergone initial training on village development and organizational management.

With the help of the CDFs, all four partner communities have completed their respective baseline survey and action plan for poverty reduction and village development. They have also prepared their specific activity proposals and identified corresponding training needs.

The implementation by the partner communities, through their own traditional community organizations, of their community action plans for village development and poverty reduction has started. Basic socio-economic skills development training activities covering priority local areas of production such as in agriculture (vegetable production), horticulture (Kakao and Coffee production), poultry/animal husbandry (native chicken, hogs and cows), inland/deep sea fishing, fruit/food processing and cooperatives management have been completed. More than 700 community members have already participated in these skills development activities.

Preparations are now underway for follow-through activities and the implementation of activities under the second and third objectives – the strengthening of peace and development mechanisms and the mainstreaming of gender equality issues in the development process.

Initial feedback indicate that most partner agencies as well as indigenous community leaders and members welcome the CDPD approach to poverty reduction and village level development. They are enthusiastic and willing to support and participate in the undertaking.