



TRANSPARENCY FOR DEVELOPMENT

SOCIAL ACTION STORIES & CARTOONS (INDONESIA)

These stories and cartoons were designed for the T4D initiative in collaboration with Pattiro (Indonesia).



SOCIAL ACTION STORIES

STORY 1: INDIVIDUAL CHOICE

In some communities, people who are unhappy with the health care they are receiving choose to go to a different provider:

Dogiyai: Bad service has led the community to shift to a different provider

DOGIYAI, 20 Oct. 2013 – The Head of Dedemani Puskesmas in Dogiyai District, Papua, told the media that 15,000 community members in Dogiyai District chose to seek medical attention in the District's Health Hospital (RSUD) Dogiyai, despite the longer distance, instead of their local Puskesmas. They made this decision due to the lack of doctor availability at the local Puskesmas—the assigned doctor was often absent from the Puskesmas.

"I really regret what happened, due to doctor's absenteeism people no longer seek healthcare in my area," the Head of Dedemani Puskesmas said. "I will do my best to improve the services here so people will come back and seek the healthcare in the Puskesmas."

The head of the sub-village (dusun) in Dogimani, Piter Tagi, shared his own bad experiences in going to the local Puskesmas: "The doctor came very late, so it's too bad that I have to seek medical treatment in another place. I actually want to appreciate and love the health facility in our own area, but this is necessary to make the Puskesmas improve their service. (PAPUA POS NABIRE)

Summarized from

<http://www.papuaposnabire.com/index.php/kabar-dari-papua-tengah/21-dogiyai/509-dokter-tak-ditempat-warga-dogiyai-memilih-berobat-ke-rsud-dogiyai>



SOCIAL ACTION STORIES

STORY 2: INDIVIDUAL COMPLAINT, PETITION OR SUPPLICATION

In some communities, people who are unhappy with the health care they are receiving complain to the providers or to officials and ask them to make improvements.

Cipayung: Voice Complaints by Writing to ‘Reader’s Letter’ Poskota

CIPAYUNG, November 2013 – Community members complained about the quality of the service of Puskesmas staff in Cipayung Village. After receiving these complaints, the Health Department Officials for East Jakarta, Yudhita, went to investigate the Puskesmas directly. “We have assembled a team to check the reports from the community members,” she stated. One of the complaints regarding the Puskesmas was in the format of a Reader’s Letter in the newspaper *Poskota*, which detailed the case. “The Puskesmas in Cipayung Village was closed at 11:30, even though it should be open from 08:00-12:00 and 13:00-16:00. I came back at 13:00 and it was still closed. When I asked why it was closed, one Puskesmas staff said ‘the doctors are in a meeting.’” The investigation report said that the doctors at the Puskesmas had to complete another task (to check the health of those who will go to Mecca – Haji). Yudhita promised that the quality of the Puskesmas will be improved and encouraged the community members to report any problems with the Puskesmas. When Pos Kota (local media) returned to the Cipayung Puskesmas approximately one month later, the Puskesmas was open during operational hours, and they found that it was well organized. (POS KOTA)

Summarized from

<http://poskotanews.com/2013/11/07/pelayanan-puskesmas-cipayung-dikeluhkan-warga/>



SOCIAL ACTION STORIES

STORY 3: COLLABORATIVE PROBLEM SOLVING AND MUTUAL COMMITMENT TO IMPLEMENTING SOLUTIONS

In some communities, people who are unhappy with the health care they are receiving arrange for meetings with doctors and nurses or health officials. During these meetings, they work together to develop solutions to problems with health service delivery, and then they agree to implement those solutions.

Garassikang Community's Cooperation Results in Access to Clean Water

People of Garassikang in Jeneponto Regency have had a problem with access to clean water for a long time. Many women and children had to walk and carry the water for miles every single day. They have been trying to write a proposal for digging a well through the National Program for Community Empowerment (PNPM) and Village Development Planning (Musrenbang). Unfortunately, this plan was never approved nor implemented.

Finally in 2011, several community members decided to take the matter into their own hands. They gathered and discussed what they can do to improve the situation. The discussion began with distributing task of finding funding and labor to accomplish build the well. They fundraised and were able to collect around Rp 500.000 for initial capital. This was used to hire people to start the digging process for the well. When the digging process started to show some results, they informed the rest of the community so that the larger community could also contribute to this effort. They received positive responses and more residents joined the effort. The men contributed their labor and money, while the women helped prepare meals for all of the workers and donated rice, vegetables, and food. A community member also donated the land used to build the well because he realized that it was for the common good.

Now, the people of Garassikang are able to access clean water easily through a collaborative effort of the community. They also formed a committee for water management and agreed on well management regulation so that the water will be enjoyed for a long time. (DIDIK / STAFF PATTIRO JAKARTA)



SOCIAL ACTION STORIES

STORY 4: EXAMINING BETTER-PERFORMING SERVICES

In some communities, people who are unhappy with the health care services they receive visit places where health care is working better, so they can learn what they can do to improve their own health services.

African Community Studied Health Facility in Neighboring Village and Lobbied for Funding

In one district in Africa, community members noticed that the clinic in their village was very poor quality, while the clinic in the neighboring district was much better. Their clinic was unhygienic and only had two staff members serving around 4,000 patients, while the clinic in the neighboring district had 5 staff members and better equipment.

They asked to meet with the medical officer in charge of their clinic to discuss why the clinic's quality in the neighboring district was better than their own clinic.

During the meeting the health care workers learned about the community's concerns and the community members came to better understand the problems facing their clinic. Together, they wanted to improve the services in the clinic by learning what the neighboring district had done. The health care workers and the representatives of the community gathered data on the condition of the neighboring clinic through personal visits and meetings with health officials there.

They learned that the clinic in the neighboring districts were able to access the District's fund, which allowed them to have more staff and better equipment. Upon learning this, the clinic and community members tried to voice their concerns to the District.

After this effort, the community successfully convinced the district to provide funds to construct a new health clinic. Once the clinic was built, four new staff members, including two midwives, were recruited, and the district purchased new equipment. The clinic now serves 11,000 people out of a catchment area of 7,000-10,000, meaning many people from outside the district come to the clinic due to its good quality. Of the women who have received antenatal services, 70 percent have returned to the clinic to give birth and receive more services, far surpassing the government target of 50 percent. (WORLD VISION)

Source:

http://www.worldvision.com.au/Libraries/3_3_1_Children_PDF_reports/Citizen_Voice_and_Action_Civic_demand_for_better_health_and_education_services.pdf



SOCIAL ACTION STORIES

STORY 5: SOCIAL DEMONSTRATION OR PROTEST

Citizens could demonstrate to target underperforming providers or civil servants, like the district medical officer, who are not doing enough to improve health care.

Yanomami and Yekuana Indians: Demonstration to Reelect Health Coordinator

Yanomami and Yekuana Indians are the indigenous community in the Amazon rainforest in Brazil. For years, they have enjoyed good quality healthcare through a health coordinator who had been living there for years and was familiar with their health concerns. The Indians are particularly vulnerable as they have little resistance to outside diseases. With thousands of gold miners coming in and operating illegally on their land, polluting their rivers and transmitting diseases, it is very important that they have a health coordinator who understand their specific needs.

However, a new health coordinator was appointed in 2011. The new person had little experience with the indigenous community, was unable to speak their language, and thus was unable to provide good quality service. It seemed clear to the community that the new health coordinator had been nominated solely for political reasons.

The Indians were outraged by this nomination. They led protests for weeks so that they could continue to receive good healthcare. Their protests included sending letters to the Brazilian authorities and the UN, urging them to take action on this serious issue. They even seized an airplane used by health workers in the Yanomami territory as part of their protests against the corruption in the health system. Their protests led to the appointment of their preferred candidate for health coordinator: the same person who had worked closely with the Yanomami for years, and who has been providing good quality healthcare. A Yanomami spokesman said, "Now we Yanomami are very happy with our fight for our right to receive good healthcare services."

Source: summarized from <http://www.survivalinternational.org/news/7394>



SOCIAL ACTION STORIES

STORY 6: DEVELOPING AND ADVOCATING FOR REFORMS TO IMPROVE HEALTH CARE

People who are unhappy with the health care they are receiving could brainstorm solutions and then take those proposals to their fellow community members to be implemented. Sometimes they need to do this repeatedly, but eventually they get what they are asking for.

Grobogan Village: Community Members Work in a Team to Reduce Open Defecation

In 2010, the community members of Grobogan Village worked with a local organization to improve the village's sanitation. Indonesia has long tried to battle the issue of sanitation through providing public toilets. However, the simple availability of toilets did not always change the mindset of people, who were used to open defecation. There was no sense of ownership of government-constructed public toilets, and nobody bothered to maintain them. Often, the toilets were used as chicken coops or storage spaces, while villagers continued to defecate in the fields and by water sources.

Members of the Sanitation Entrepreneurs Association of Grobogan (Papsigro) try to reduce open defecation by ensuring that every household has a toilet. Papsigro was established in 2011 and consisted of a watermelon seller, a rice farmer, a mason, a retired government health official, and a *kyai* or Islamic scholar from different villages within the district. They came individually to a training offered by a local organization to set up sanitation-related businesses, and then the 30 members divided themselves into groups specializing in different areas.

Fifty-year-old Pak Pardiyanto focuses on manufacturing the actual closets, which he sells for as little as IDR 40,000 (\$4). Forty-four-year-old Pak Suminto, the "latrine package" specialist, sources toilets and installs them. Sixty-seven-year-old Pak Iwan, a retired health department specialist, keeps up with the latest toilet research. There are technicians, fiberglass mould makers, and even a local Islamic scholar, 39-year-old Pak Umar.

Ibu Siticoma, mother of five grown children, cannot stop giggling with embarrassment when talking about the latrine. "We used to just go outside, under the trees," she says before covering her mouth in a fit of laughter. "But my son thought it was dangerous. We could slip and fall, or get bitten by snakes. So he asked Pak Suminto to build us one [toilet] inside." She breaks out into another round of laughter. "It's very good now. Safe and comfortable, even if it's raining." Within two years, 150 of the 153 target villages in Grobogan, were open defecation-free. (THE HINDU TIMES)

Summarized from

<http://www.thehindu.com/todays-paper/tp-opinion/indonesias-toilet-trojans/article5412345.ece>



STORY 7: TALKING TO JOURNALISTS / LOCAL MEDIA TO PUBLICIZE PROBLEMS

Often local journalists and media can be powerful allies in helping citizens publicize problems with health services, which can put pressure on underperforming service providers to improve.

Media Reports Raised Awareness on Vaccine Unavailability in Ngada Regency

In Ngada District, NTT, people successfully proposed an anti-rabies vaccine budget allocation of Rp 40 million in the 2013 local government budget amendment. Previously, Ngada Regency relied on the vaccine stocks from the Special Allocation Fund of Health from the central government. Unfortunately this was never adequate due to the high number of dog bite cases in the area. The fund from the Central Government was apparently only enough for 175 patients, which not close to enough for a year. By May of 2013, the vaccines were already out of stock. Realizing that this was a huge problem, the community members sought the local mass media to publicize it. The bad news on vaccines was then prominently featured and published in the local media Ngada Mandiri and was reported by other local journalists organized in Bajawa Media Club (BMC). Finally, the District Government listened to their complaints and approved the budget changes in early November of 2013. Now, Ngada District has enough vaccines to cure the community members who have been bitten by dogs. (DIDIK / STAF PATTIRO JAKARTA)



SOCIAL ACTION STORIES

STORY 8: WORKING THROUGH A 'BROKER' WHO COULD LINK COMMUNITY DEMANDS WITH ALLIES IN THE GOVERNMENT

A community that is unhappy with the quality of healthcare they are receiving can ask for help from a member of their community who is good at getting government officials to be responsive to community needs.

Cikukur: Pak Oni, a Community Activist

Pak Oni is a regular community member in Lebak District, Banten. He learned about his rights as a citizen to petition the government for better services and gained significant advocacy skills from an NGO. He knows a lot about different persuasive methods: asking persistently, invoking religious duty, and shaming. He also knows about a lot government programs that should be accessible to citizens, such as annual grants to establish and run ECCD (Early Childhood Care and Development) centers in the village, health insurance, and programs to get equipment for the Rice Farmers' association (Gapoktan). Moreover, he spent a lot of time writing letters to government agencies to ask for information regarding their programs and their budget plans. Once, he managed to initiate road construction after a series of advocacy efforts with the Public Works office. Although Pak Oni does not formally hold any position in the village, the villagers have come to know him as the go-to-guy to talk to about community problems because he can connect them to specific government employees. His village did not have a health facility and community members had to travel to the Puskesmas to access even the most basic healthcare. **Community members sought help from Pak Oni to address this issue.** Pak Oni organized meetings between the community members who felt strongly about having a Poskesdes in the village, the District's Health Department, and several other donors to provide funding. Pak Oni also organized open donations for community members who wanted to provide support (such as cement, woods, and rocks) for the construction. The Poskesdes was completed in 2012, and is now used by community members in the village. (PANDJI & ANYEP / STAF PATTIRO BANTEN)



SOCIAL ACTION STORIES

STORY 9:
HIGHLIGHTING HIGH PERFORMING PROVIDERS OR
NAMING AND SHAMING UNDERPERFORMING
PROVIDERS

Citizens could reward high performing providers with praise or other social recognition and/or sanction poorly performing providers by failing to include them in village events or by ignoring/ shunning them.

**Banyuasin Residents Reported Outstanding and Underperforming
Government Service Providers**

Community members in Banyuasin District recognized that not all of the government officers in their area were working diligently. In some cases, the community members went to meet officials but couldn't find them in their offices. Community members then met with a local organization (Pengabdian Putra Banyuasin/PBB) regarding this issue. Based on the discussion, it was agreed that it is important to name the high performing officials to encourage them to keep up the good work, and also to name the underperforming officials in order to shame them into performing better.

The head of PBB then held a press conference to publicize this finding. He criticized several Department Heads in Banyuasin District for absenteeism. Community members provided him with information on the department's performance throughout the year. With this information, he named the underperforming Department Heads and praised several of the Departments that were performing well. According to community members' report, the Department Head of PU (Public Works) received the most complaints for absenteeism and for being unavailable for meetings. (PALEMBANG POS)

Summarized from

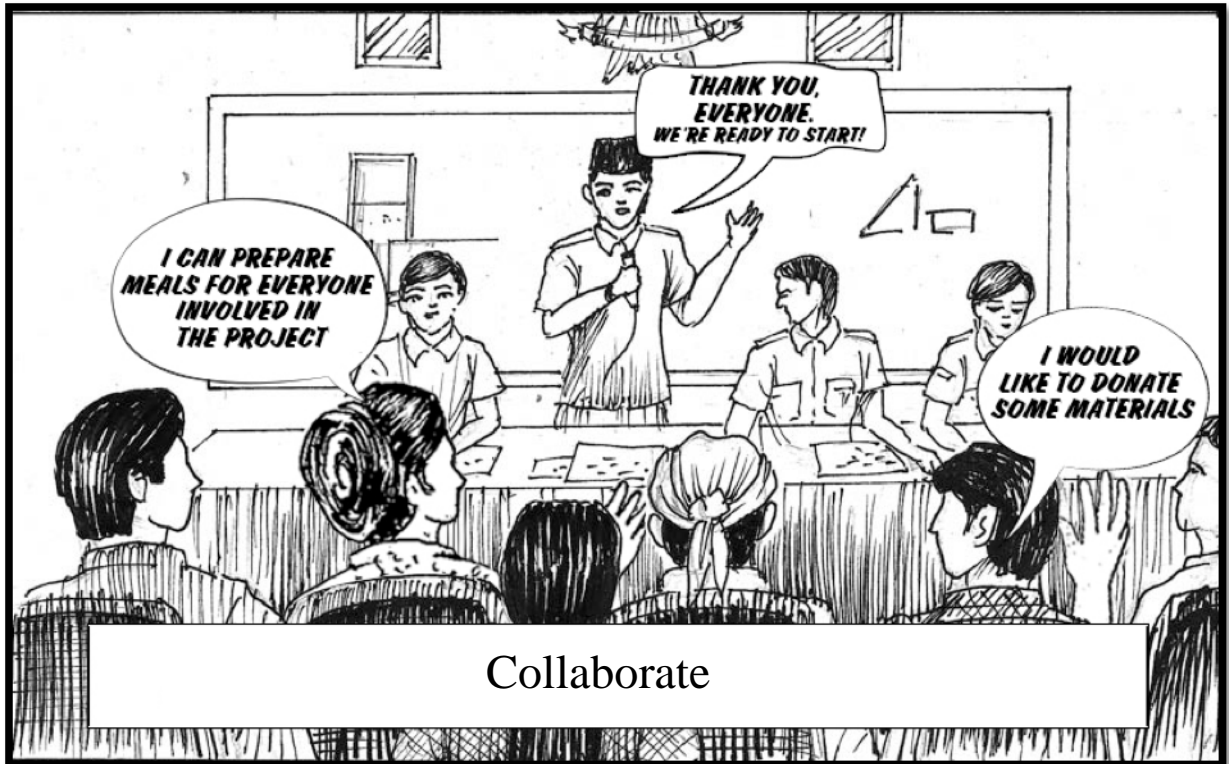
http://palembang-pos.com/index.php?option=com_content&view=article&id=6350:kadis-puck-dituding-jarang-ngantor&catid=49:sumsel-roya&Itemid=62



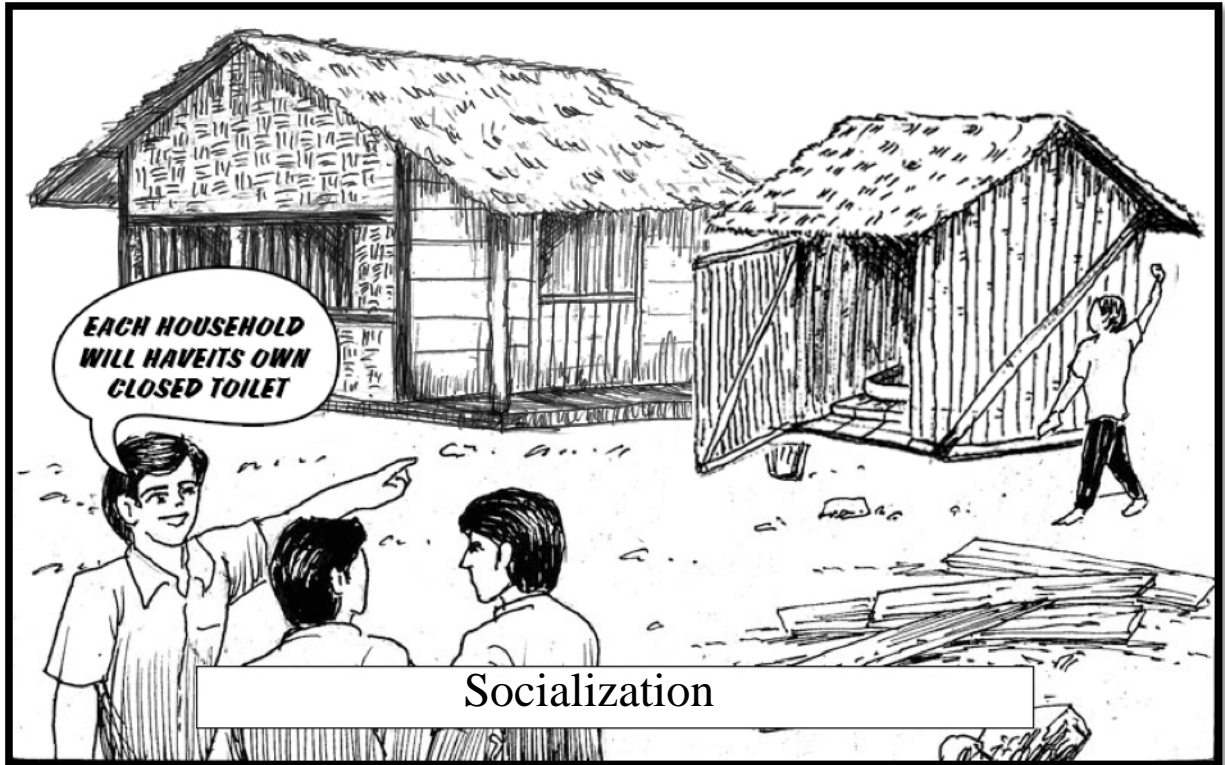
TRANSPARENCY FOR DEVELOPMENT

SOCIAL ACTION ILLUSTRATIONS

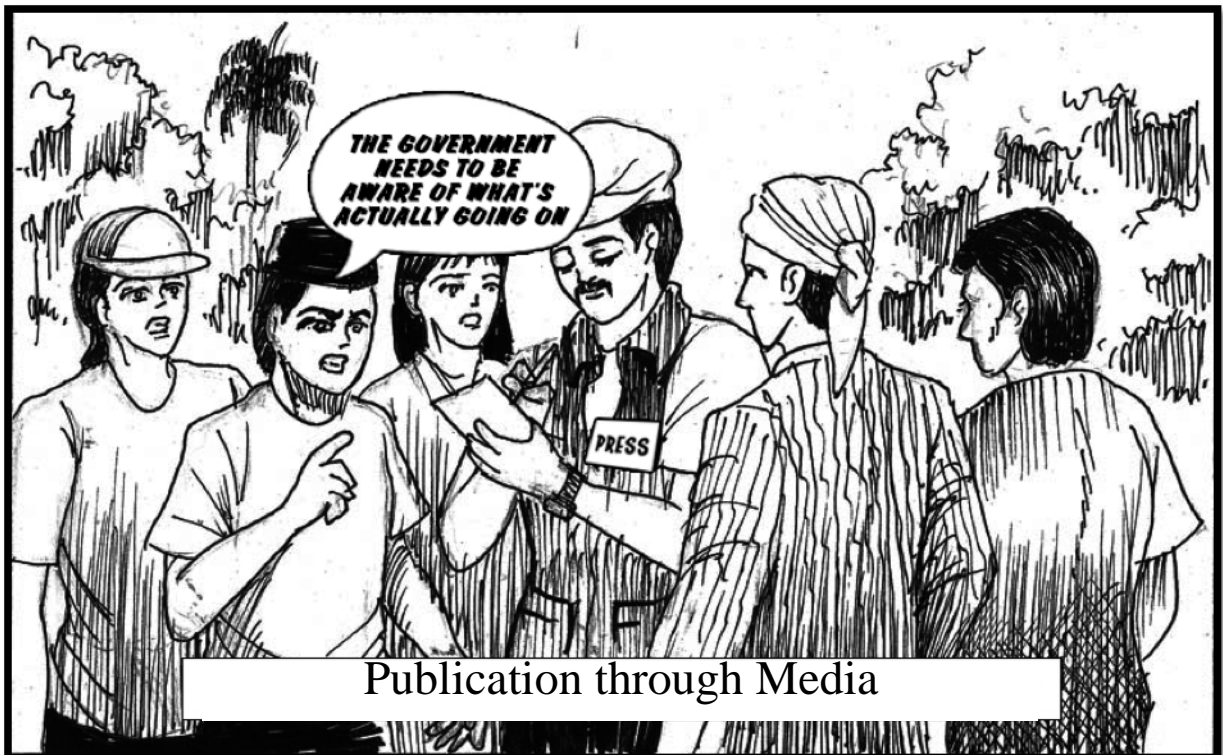








Socialization



Publication through Media

