



# Socialization & Advocacy to Policy Makers

**Bulukumba District** July 16 2009

The meeting of socialization and advocacy to policy makers in Bulukumba district was held on July 16, 2009 located in Bappeda conference room. The aim of this meeting is to improve the understanding of PRIMA Kesehatan program and to gain more support from policy makers.

This meeting was attended by the head of Bulukumba district, H.A.M. Sukri A. Sappewali, vice head of district council, Drs. A. Mutammar Mattotorang, Head of Bappeda, Ir. Burhanuddin Kadir, MP, head of Health office, Dr. Hj. Rusni Sufran, M.Kes, head of other offices, council members, health office staff, heads of Puskesmas, head of sub-districts, representatives of PHCI Team, and Field Consultants. Representative of

JICA - MFO, Mr. Chiguru Yamashita (Project Formulation Advisor) is also present, while from PRIMA Kesehatan Team were Mr. Shigeki Kawahara, Mr. Kiyofumi Tanaka, Ms. Saeko Hatta, Mr. Ricky Djojoko, Ms. Fatmawaty Nur, Asti Djarigau, and Mr. Noval Rahman. The number of participants was 70.

In the occasion, Head of Bulukumba health office expected to have concrete actions to be formulated for PRIMA Kesehatan expansion to 10 sub-districts in Bulukumba.

The head of district then gave his opening remarks and opened the meeting officially. He said that the health improvement through

community independency is the best way, which they can grow, maintain, and implement health preventive and promotive action. "The important thing of health improvement is how to encourage community empowerment, PRIMA Kesehatan program is a program that benefits community to be empowered for the sake of health improvement" he said.

Mr. Shigeki Kawahara as the team leader of PRIMA Kesehatan gave his remarks and presented a PRIMA video. "The team of

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The Head of Bulukumba District, H.A.M. Sukri A. Sappewali(right), Vice Head of District Council, Drs. A. Mutammar Mattotorang(left) together with Head of PRIMA Kesehatan-JICA, Mr. Shigeki Kawahara(middle)



The Participants of socialization that was attended by Other Offices, Sub-district Staff, Puskesmas Staff and Representatives of PHCI Team

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Bulukumba is well-cooperative. The village PHCI-Teams are very motivated in improving their health as well as Kecamatan and Kabupaten Teams” he said.

The progress of PRIMA Kesehatan program in Bulukumba was presented by one of KIT members, Mr. Alwi, SKM, M.Kes, then continued with presentation of activities and impacts achieved by Bialo and Bira village PHCI Team, delivered by each representative.

In the discussion session, the participants were active in giving their comments and suggestions. The comments generally were about the sustainability of program through several budget alternatives such as APBD, or ADD (Alokasi Dana Desa) fund. “Budget to support PRIMA Kesehatan program through ADD is possible to be used as long as it is utilized for the community needs” vice head of district council said.

by : Noval Rahman | PRIMA Kesehatan Staff



Sosialisasi & Adukasi bagi Penentu Kebijakan

Kabupaten Bulukumba 16 Juli 2009

Health improvement through community independency is the best way, which they can grow, maintain, and implement health preventive and promotive action

Head of Bulukumba District, H.A.M. Sukri A. Sappewali



# Courtesy Call of PRIMA Kesehatan and PRIMA Pendidikan Team to Head of Wajo District

PRIMA Kesehatan and PRIMA Pendidikan conducted a courtesy call to new head of Wajo district, Mr. H.A. Burhanuddin, M.M. on Friday, July 17 2009 in head of district office. The aim of this visit is to introduce JICA Programs (PRIMA-K and PRIMA-P) to the new elected head of district, and also as an initial socialization about the programs. The participants who attended the meeting were head of Wajo district and his expert team members, head of health office and staff, Bappeda staff, 2 chairperson of PHCI Team (Tanasitolo sub-district and Baru Tancung village), representative of JICA-MFO, PRIMA Pendidikan and PRIMA Kesehatan Team, with a total number of 40.

The meeting was started with opening remarks by JICA-MFO representative, Mr.Chiguru Yamashita, continued with head of health office Drs. H. Abdul Azis, M.Kes, with his presentation of introducing PRIMA Kesehatan program in Wajo district. The next is presentation by Mr. Shigeki Kawahara, who explained about three main components of PRIMA Kesehatan program sustainability, which are good system, human resource who will run this system, and the last is budget to support the system and human resource. Head of Wajo then gave a comment that these two programs shall be supported by Wajo districts government as these are for the sake of government and community.

The next presentation was from Muh. Saing, SKM representative of Tanasitolo sub-district PHCI Team. The presentation from Education office was presented by the KIT member of PRIMA Pendidikan program, Drs. Muhammad Haris, M.Si. , then continued with presentation by PRIMA Pendidikan Team Leader, Mr. Norimichi Toyomane, and at the end of presentation, it was representative from Baru Tancung village PHCI Team, H. Aburrosyid, S.Pd. Within the discussion led by head of Wajo health office, it was explained about the importance of coordination between PRIMA Kesehatan and PRIMA Pendidikan stakeholders, and also to discuss on how to continue these two programs. Each of KIT members from PRIMA Kesehatan and PRIMA Pendidikan introduces their program, and stated the importance of coordination among health office, education office, and Bappeda.



From left to right: Head of Health Office of Wajo District, Dr.H. Abdul Azis, M.Kes, Head of Wajo District; Drs.H.Andi Burhanuddin,M.M; Head of PRIMA Kesehatan-JICA, Mr. Shigeki Kawahara; Operational Field Advisory of PRIMA Kesehatan, Ir. Ricky Djodjoko; and Head of PRIMA Pendidikan-JICA, Mr. Norimichi Toyomane



Mr. Chiguru Yamashita from JICA-MFO give opening remarks

Dr.H.Abdul Azis,M.Kes presented Introducing of PRIMA Kesehatan Program in Wajo District.

Head of Wajo district gave comments about both of PRIMA programs .

Drs. Muhammad Haris, M.Si presented about PRIMA Pendidikan Program in Wajo District



# Coordination Meeting of Donor Agency for Health Sector in South Sulawesi



The Governor of South Sulawesi, Dr. H. Syahrul Yasin Limpo, SH, M.Si, MH, (middle) Head of BAPPEDA Province, Ir. Tan Malaka Guntur, M.Sc as moderator (left) and Vice head of Provincial Health Office, Dr. H.M. Saad Bustan, M.Kes (right)

Discussion session in Coordination Meeting of Donor Agency for health sector in South Sulawesi

On Wednesday June 25, 2009, located in BaKTI office, Coordination meeting of donor agency for health sector in South Sulawesi was held. Mr. Ricky Djodjobo attended this meeting as a representative of PRIMA Kesehatan –JICA.

This meeting, initiated by Regional Investment and Promotion Board (BPPMD/Badan Promosi dan Penanaman Modal Daerah) of South Sulawesi, is aimed to brainstorm the ideas coming from government and donor agencies that have health programs regarding health activities as well as its constraints. This meeting also tried to find out how the donors can be compatible with the health program available in South Sulawesi. This meeting was attended by the governor of South Sulawesi Dr. H. Syahrul Yasin Limpo., SH, M.Si, MH, head of BAPPEDA Province, Ir. Tan Malaka Guntur, M.Sc, who acted as a moderator, and vice head of provincial health office, Dr. H.M. Saad Bustan, M.Kes and several representatives of donor agencies for health sector in South Sulawesi.

Governor highly appreciated and thanked to donor agencies for their effort have been done in this province. He felt proud knowing that in several

meeting held in Jakarta, South Sulawesi is a province in which its donors are much better than others.

Especially in health sector, there are two supports expected by the governor; 1. How to develop community health (healthy life condition), 2. Improve hospital management by supporting the "source" first, since health will be much better if environment and government are better as well.

Within discussion, Mr. Ricky Djodjobo from PRIMA Kesehatan expressed his interest of what the governor said, and continued that PRIMA Kesehatan program is no related directly with Free Health program, however, they have similar goal which is better health in community. He explained that the program has run for 3 years, and aims to search/develop a model for community health care improvement. The achievement is on how to optimize community participation on preventive and promotive action.

Therefore, this program functions to keep community healthy, which means reducing sick people. As a result, this program can reduce the cost of Free Health program. This program is

implemented in three target district; Barru, Bulukumba, and Wajo, and it is expected to be sustained by each district government through APBD fund.

In that discussion, the governor responded PRIMA Kesehatan Program to send him a summary of its achievement. It is expected to have donor agencies to make a policy that may become blueprint of what necessary things to do and health office is expected to conduct a coordination meeting by inviting all health offices in whole districts and hospitals. Besides, he also asks donors to share priority area of 24 districts within province, not only the three districts, to have all districts move forward together and have the similar impacts.

Lastly, the governor expected that the initiative of holding a coordination meeting is not merely coming from the government side, but also from donor agencies with attaching program.

By : Notilen of BaKTI – coordination meeting of donor agency for health sector in South Sulawesi.



Participants in Coordination Meeting of Donor Agency for health sector in South Sulawesi



Since PHCI programs entering Pancana village, there are many changes significantly, especially in community awareness on healthy life behavior. Among programs available in Pancana village, JICA support is the easiest program in terms of planning process to the reporting. All of those process are under consultants' assistance directly. One important thing is that PHCI has inspired the village government for construction of 95 units of toilet through ADD fund. Even in this year planning, Pancana village government starts to make a garbage dump area (TPA/Tempat Pembuangan Akhir). Of this plan can implemented, Pancana village will become the first village in Tanete Rilau that has it. Therefore, I am so grateful as a head of village for the implementation held by PHCI.



**Muhlis Sulaeman, BA**  
Head of Pancana Village  
Tanete Rilau Sub-district  
Barru District

With PHCI, we are learned to think of what is the best for the sake of community in village/Kelurahan. Before I join this program, I thought that community conduct activity decided by PHCI, but it is community who identifies their health problems and implements their activity up to the monitoring and evaluation. Although it is quite difficult to implement the socialization process considering the different condition of one community people to others, the bottom-up approach had by PHCI is very help-ful to accomplish all implementation of activities.



**Indrayana, SKM**  
Nutritionist  
Puskesmas Ponre,  
Bulukumba District

Experience as implementation Team member of PRIMA Kesehatan since TOT (Training for Trainer) is new for me. This is the first time for me joining PHCI activity. During this learning process, I find differences between my experiences as a participant in TO and facilitator. When I became a participant, It was easy to absorb material given by the facilitator of the previous TOT and Field Consultants, but after being a facilitator for village and sub-district PHCI Teams, who have different ages and backgrounds, I found difficulties, especially in assisting their health problem identification. Become a facilitator is not easy as we thought.



**Ena Surtini, Am. Kep**  
Facilitator  
Puskesmas Ponre  
Bulukumba District



## Hypertension

Hypertension or high blood disease is a condition when someone is above normal blood pressure shown systole and diastole on blood pressure examination or by sphygmomanometer or any digital instrument.

If the blood pressure is less than 120/80, it means you are in normal condition. On high blood pressure, there is increase point of systole and diastole. Hypertension is a condition where the point of the pressure is around 140/90, it is measured in the arms three times for couple of weeks.

High blood pressure can risk stroke, heart attack, and aneurysm arterial, and as

the main cause of chronic heart failure. High blood pressure that keeps continued in human may cause a person's heart works too hard. It can damage blood vessel, kidney, brain and eyes.

### Cause of hypertension

Medicine consumption like cortisone, and other hormonal medicines, anti-flammable medicines, that can raise blood pressure. Smoking is also the cause of high blood pressure as it contains nicotine. Drinking alcohol is the cause as well, so stop alcohol!

A person with high blood pressure is better to control him/herself in consuming salty food.

## <<< PRIMA Health Info

Potassium supplement 2-4 grams a day can be helpful in reducing blood pressure, it can be had from fruits and vegetables, such as watermelon, avocado, melon, pariah, pumpkin, bligo, cucumber, aloe vera, celery, and garlic. Besides that, food with omega-3 is also helpful to reduce hypertension.



Source: taken from several source

## Best Regards from PRIMA News

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PRIMA News editorial accept article input, news and commentary from some parties as media to share information and knowledge to improve this program. The editor retains the right to conduct necessary editing to adjust with the design and layout. Thank you.

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