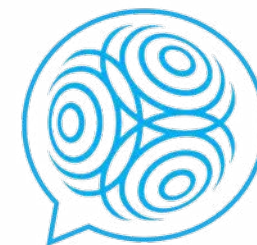




PULSE STORIES

02. MOTHER'S LOVE



Welcome to the second edition of Pulse Stories.

At Pulse Lab Jakarta, one of our design principles is to put citizens at the centre of our innovation processes. Pulse Stories is part of our work to better understand the life context of the people we serve.

For our second edition, we take you to Probolinggo, a city in East Java where we immerse ourselves in the lives of expectant mothers and healthcare providers to understand experiences of maternal health services from both sides of the service interface. The design research was conducted in advance of a service design bootcamp which PLJ facilitated jointly with the TRANSFORMASI programme.

Transforming Administration-Strengthening Innovation (TRANSFORMASI) is a programme funded by the German Federal Ministry for Economic Cooperation and Development (BMZ), implemented by GIZ (Gesellschaft fuer Internationale Zusammenarbeit GmbH). TRANSFORMASI contributes to the development of innovations in public service delivery under its overall aim to foster a more efficient, effective, accountable and citizen-oriented bureaucracy. The bootcamps are held under the framework of the Public Service Innovation Network East Java (JIPPJATIM), which is a joint initiative by the East Java Province, several local governments, KPP, JPIP, the Universities of Brawijaya and Airlangga, CSOs and TRANSFORMASI.

TRANSFORMASI organised the bootcamp in collaboration with JIPPJATIM partners and PLJ supported with facilitation. Support to initiatives emerging from the bootcamps has been delivered by TRANSFORMASI to date.

Pulse Stories capture the anecdotes and inspiration gathered during Pulse Lab Jakarta's field trips to different parts of Indonesia. We hope that over time, these stories form patterns that will inspire our data innovations and the development of tools for public administrators.

The Pulse Lab Team



WHY WE DO THIS?



Probolinggo, a small city in East Java, has a relatively high maternal mortality rate, despite the predominantly accessible healthcare. The frontline healthcare workers feel that the crux of the issue lies with socialisation. But despite regular information sessions, it is still a challenge to get expectant mothers to attend regular checkups, especially among high-risk pregnancies.

We see the challenge as an opportunity for data innovation and human-centered design to better understand the issue and to influence behavior change. Our research team immersed itself in Probolinggo's health services, talked to mothers and healthcare providers, and dug down into the social and cultural context surrounding expectant mothers' pregnancy experience.

WHAT DID WE DO?

RESEARCH

24 INTERVIEWS
(with mothers, couples, families & healthcare providers)

3 HEALTH CLINIC
OBSERVATIONS

CO-CREATION WORKSHOP

1 CO-CREATION
WORKSHOP
(with District Health Administrations & Health Clinics from 4 cities in East Java)

25⁺ PARTICIPANTS

RESULT

6 PROTOTYPES

WE USE RELATIONAL MAPPING AND SCENARIOS TO HELP PARTICIPANTS AND RESPONDENTS ARTICULATE THEIR STORIES



Apakah Itu Salahku Jika Kehamilanku Berbeda?

Cerita Mba Sari: Ketika Semua Sudah Terlambat..

 1	 2	 3	 4	 5	 6
Mba Sari dan Mba Anto sudah menikah selama 12 tahun. Mereka sudah mencoba berbagai cara untuk memiliki anak tapi belum berhasil.	Jadwal menstruasi Mba Sari tidak tetap. Sejak kecil, ia selalu gemuk. Dia tidak melihat hal tersebut sebagai masalah.	Satu hari, Mba Sari memutuskan memeriksakan diri ke dokter puskesmas. Diagnosis dokter mengungkap, Mba Sari hamil 8 bulan.	Tidak sampai sebulan, Mba Sari kontraksi dan harus segera dirikan ke puskesmas dan kemudian melahirkan dalam perjalanan.	Keluarga bingung, karena koma, Mba Sari harus dibawa ke rumah sakit provinsi dan kemudian melahirkan dalam perjalanan.	Anak mereka lahir dengan selamat tetapi tidak dengan Mba Sari yang kemudian berpulang tanpa pernah sadar dari koma.

Cerita Ibu Yuli: Kejutan Setelah Sekian Lama..

 1	 2	 3	 4	 5
Ibu Yuli sudah menikah lebih dari 20 tahun. Anak perempuan mereka sudah remaja. Susahnya, Iwan, bekerja sebagai supir taksi.	Ketika menyadari jadwal menstruasi dia terlambat, dia panik dan malu. Dia membayangkan ruang puskesmas yang terbuka. Semua orang akan tahu kehamilannya, "apa kata orang?"	Ibu Yuli akhirnya menemui Ibu Bidan di rumah dan mendapatkan konfirmasi mengenai kehamilannya.	Ibu Yuli mendapatkan informasi bahwa kehamilannya berusia tinggi dan ada beberapa tes yang harus dia lakukan di puskesmas atau rumah sakit.	Bukan itu saja, dia harus menempatkan informasi mengenai kehamilannya di kaca depan rumah.

Tak Hanya Sehat Jasmani, Ku Juga Harus Sehat Rohani..

 1	 2	 3	 4
Cerita Ibu Rini: Lesanan Palsu Palsu..	Cerita Ibu Rini: Lesanan Palsu Palsu..	Cerita Ibu Rini: Lesanan Palsu Palsu..	Cerita Ibu Rini: Lesanan Palsu Palsu..



WHAT HAVE WE UNCOVERED THROUGH OUR RESEARCH?

01. CARE FOR THE HEART

Expectant mothers' experience with healthcare providers is significantly influenced by how well they are treated. The emotional side of the experience is as important as the clinical care.

02. PARTNER UP

Husbands give extra care for their pregnant wives, as long as it does not interfere with public perceptions of their "masculinity."

We uncovered five insights that help us to understand the behavior of expectant mothers (and healthcare providers) when it comes to managing pregnancy. These insights, while illuminating common pain points, also serve as opportunity areas for new activities to alleviate some of the challenges faced by expectant mothers and healthcare providers.

03. RISK AND REWARD

There is a tendency among expectant mothers to avoid knowing more about the state of their pregnancy if it is classified as high risk.

04. PERSUADE THE INNER CIRCLE

Expectant mothers place more value on the advice of their parents and friends than on the sound medical opinion of healthcare specialists.

05. LIGHTEN THE LOAD

Due to the highly centralized approach, healthcare providers have to spend a significant amount of time completing forms.

Care for the heart

Expectant mothers' experience with healthcare providers is significantly influenced by how well they are treated. The emotional side of the experience is as important as the clinical care.



**“MY MOST MEMORABLE
EXPERIENCE WITH A
MIDWIFE WAS WITH
BU NUR. SHE WAS SO
NICE AND ATTENTIVE,
SHE EVEN WENT THE
EXTRA MILE TO MAKE
SURE THAT I FEEL
COMFORTABLE DURING
MY DELIVERY”**

BU ITA, EXPECTANT MOTHER



Care for the heart

For expectant mothers, going through pregnancy can feel like an emotional rollercoaster. For healthcare providers, the utmost importance is for mothers to know how to manage their pregnancy in order to avoid risks. There is a gap between the emotional needs of mothers, the expectations of healthcare providers, and the healthcare that these mothers receive. As a result, the most common pain points relating to healthcare experiences are connected to how mothers' emotions are managed.

WHY IS IT A CHALLENGE?

What expectant mothers remember from their healthcare experience acts as a base for them to gauge the relevance of such a service – in other words, expectant mothers may withdraw from regular checkups, no matter the quality of the clinical care, if it is a sub-optimal experience emotionally.

WHY IS IT AN OPPORTUNITY?

When it comes to quality, providing an intimate service experience is a quicker win than having to provide additional health infrastructure. Also, it is easier for communication to influence behavior change if it is delivered in a more personal, emotionally-sensitive way.



Risk and Reward

There is a tendency among expectant mothers to avoid knowing more about the state of their pregnancy if it is classified as high risk.



“SOMETIMES WHEN WE TELL PREGNANT MOTHERS OF THEIR HIGH-RISK PREGNANCY, THEY STOPPED COMING. MAYBE THEY’D RATHER NOT KNOW, AND ONLY COME WHEN THEY ARE ALREADY IN PAIN..”

BU NUR, MIDWIFE





Risk and Reward

Most maternal mortality cases occur because of unattended high-risk pregnancies. Much focus has been directed towards socialisation and training on how to deal with high-risk pregnancy. However, it is not uncommon for mothers to deliberately avoid checkups when they encounter problems with their pregnancy.

WHY IS IT A CHALLENGE?

While being aware of the risk, many expectant mothers found comfort in not knowing about the potential problems with their pregnancy. They cite “God’s will,” as a way to justify their action.

WHY IS IT AN OPPORTUNITY?

Fatality in high-risk pregnancies can be avoided with regular checkups and well-informed management of the pregnancy. Thus, finding an appealing way to impart important information and assist expectant mothers going through high-risk pregnancies can lower the maternal mortality rate.

Partner Up

Husbands give extra care for their pregnant wives, as long as it does not interfere with public perceptions of their “masculinity.”



“MY HUSBAND COMES WITH ME ON REGULAR CHECKUPS. BUT RATHER THAN SITTING NEXT TO ME DURING THE CHECKUP, HE PREFERS TO SIT OUTSIDE BY THE CEMETERY NEXT TO THE PUSTU [HEALTH CLINIC]. HIS GRANDFATHER’S GRAVE IS THERE AND HE PREFERS TO WAIT OUTSIDE.”

BU ANDRIANI, MIDWIFE



Partner up

For expectant mothers, their partner's involvement in their pregnancy provides a sense of security, however, many pregnancy “rituals” involve activities that husbands often perceive to be “for women alone.”



WHY IS IT A CHALLENGE?

Husbands are often the closest support available to an expectant mother and thus need the knowledge imparted by healthcare specialists. They also provide the much needed moral support, and can positively influence the interaction between expectant mothers and healthcare providers. When a husband chooses to limit his involvement in his wife's pregnancy, it also inadvertently limits other forms support.

WHY IS IT AN OPPORTUNITY?

As the issue deals with perception and image, there is an opportunity to rethink the role of a husband in his wife's pregnancy. Rather than framing him as a “supporting unit,” he can be positioned as the trusted partner, even a hero, or any other framing that can evolve his perception from one of emasculation.



Persuade the inner circle

Expectant mothers place more value on the advice of their parents and friends than on the sound medical opinion of healthcare specialists.



“SOMETIMES THE MOTHERS AND PREGNANT WOMEN FOLLOW THEIR PARENTS’ ADVICE, RATHER THAN OUR ADVICE. SOME MYTHS ABOUT FISH AND MEAT CONSUMPTION WE HEAR A LOT. THEY BELIEVE THAT CONSUMING FISH OR MEAT DURING PREGNANCY CAN LEAD TO SKIN ALLERGIES AND PROBLEMS FOR THE MOTHER AND CHILDREN. IN THIS CASE, THEY ONLY RELY ON TEMPE AND TOFU AS A SOURCE OF PROTEIN. WE INFORM THEM THAT THIS IS NOT ENOUGH BUT NOTHING CHANGES.”

BU IRMA, OUTREACH OFFICER

Persuade the inner circle

Research has found that people trust recommendations from friends and family more than others. Our research found that local shopkeepers sometimes commanded more influence over expectant mothers than healthcare providers. What is clear is that many expectant mothers prefer the advice of their inner circle than that of healthcare providers.

WHY IS IT A CHALLENGE?

Many parents still stick to traditional beliefs and practices that sometimes can be problematic especially in the case of high-risk pregnancies. Expectant mothers often stick to their parents' advice, and it is a challenge for healthcare providers to convince them otherwise.

WHY IS IT AN OPPORTUNITY?

If trust and respect are the key factors for influence over expectant mothers, then there is an opportunity to educate not only the expectant mothers, but also the people they trust.



Lighten the load

Due to the highly centralized approach, healthcare providers have to spend a significant amount of time completing forms.



“WE WANT TO TAKE BETTER CARE OF THE MOTHERS, BUT IT IS SO HARD TO MAKE A FULL COMMITMENT TO IT WHEN WE ARE ALSO REQUIRED TO FILL DOZENS OF FORMS FOR DIFFERENT INSTITUTIONS.”

BU NURUL, MIDWIFE

Lighten the load

There are certain metrics that need to be reported to the Ministry of Health as well as other national and regional health agencies, the burden of which is on local-level data collection. As a result, local healthcare providers are required to complete numerous forms, often with overlapping variables.

WHY IS IT A CHALLENGE?

The administrative burden distracts from delivering frontline healthcare services - that is, taking care of the patients.

WHY IS IT AN OPPORTUNITY?

The current data collection process is paper-based and contains repeated variables. Potential exists to digitise the system, consolidate different datasets, and free more resources for service delivery.





As a way to establish better ownership of the issues and to improve frontline maternal healthcare services, Pulse Lab Jakarta collaborated with GiZ to organize a co-creation session with healthcare providers in East Java: the local health department, heads of local clinics, midwives, and community outreach officers.

Using the insights that we discovered during our fieldwork, the participants envisioned resolutions that can alleviate the challenges or take advantage of the opportunities.



TIPS ON HOSTING SERVICE DESIGN WORKSHOPS:

<http://unglobalpulse.org/blog/design-workshops-public-officials>



BY THE END OF THE CO-CREATION SESSION,

participants developed prototypes that they tested live with a group of expectant mothers. Some of the prototypes they developed included...





01

PREGNANT MOTHERS' SNAKES AND LADDERS

The team redesign the socialisation materials on managing high-risk pregnancies by transforming it into an interactive snakes and ladders game.

02

MATCHMAKING CARDS FOR PREGNANCY CLASSES

The team created a facilitation tool for midwives and health outreach workers to make the sessions more interactive and interesting for expectant mothers.



03

A MEANINGFUL AND FUN HEALTH EXPERIENCE

By understanding pregnant mothers' checkup journey, the team creates personal and entertaining communication collaterals that are given to mothers at different milestones, such as pre, during, and post-pregnancy.

04

"CHARMING MIDWIVES" APP

The team created a gamified online platform that contains all of the necessary information that midwives need to know about assisting with pregnancy and delivery.



05

AN APP FOR BETTER PREGNANCY PLANNING

The team developed an outline app with information on financial planning and health advice for expectant mothers.



06

LADDERING ASSISTANCE PROGRAM

The team created a cross-collaboration platform that provides an integrated service to pregnant mothers.





Three months after the workshop, the Probolinggo District Team is still all in for service innovation. The prototypes have been implemented, with cards given to newly pregnant mothers and certificates to mothers who exclusively breast-fed for six months. But the team's passion for innovation goes beyond giving stickers and cards. The head of the clinic is actively promoting the concept they developed during the workshop, namely "delivering a service that people love," as a mantra to be embodied by the dozens of local health workers in the 12 villages they serve. Through their experience, we are reminded that the key to a sustainable initiative does not lie only in its implementation, but also in the mindset of the people behind it, which puts users at the centre of their work.



NEXT STEPS...

Sustaining the momentum: mentoring the teams, continual feedback on the implementation of their ideas, and leveraging the UN's and GIZ's assets and capabilities to ensure that the only constraint on the teams is the nature of their ambitions.

More service design bootcamps: continuing the collaboration with GIZ by hosting another bootcamp in South Sulawesi in early 2016, as well as spreading the successes from elsewhere through the TRANSFORMASI network.

Data innovation opportunity: significantly reducing midwives' administrative burden by creating a system that streamlines and digitises data management. We plan to test the system in NTB province during 2016.



**PULSE
STORIES**



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