SANPIISAN MATRIX PERFORMANCE

MAP THAT BEST ILLUSTRATES THE PHYSICAL CONTEXT OF THE INITIATIVE



IN 2015

229

 Number of perinatal mortality

283

Number of child mortality

79%

 Antenatal care examination

65%

• High risk pregancy

RISK FACTOR

- 65% High risk pregnancy
- Teenage pregnancy (pregnant women under 20 years old): 3%
- Geriatric pregnancy (pregnant women over 35 years old): 64%

Health Service

- Inadequate health service access
- Childbirth helper by non-health workers
- Inadequate antenatal care examination

Health information and technology

- Maternal health data collected manually and has a risk of duplicate data and nonintregated data
- · Delayed of data report

SOCIAL

- · Poor knowledge related to MCH services
- Poor community participation in healthrelated community activities

ECONOMY

health insurance unequally distributed

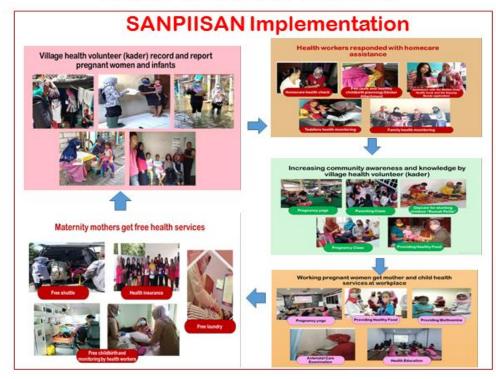
SAN PIISAN

- . Data collection, reporting, and health screening of pregnant women, postpartum women, infants and toddlers by village health volunteers (kader)
- 2. Assistance for pregnant women, postpartum and toddlers by health workers with the community
- 3. Health education through counseling, classes for pregnant women, classes for mothers of toddlers
- 4. Women's health services at workplace
- 5. Free delivery services and health insurance through the "RAISA" program
- 6. Provision of additional food for pregnant women, infants and toddlers
- 7. Referral for mothers with emergency conditions
- 8. Integrated single data reporting

Chart that best illustrates the initiative



In 2015 there's an improvement of number in maternal mortality Semarang city to 35 cases.



SAN PIISAN (SAYANGI DAMPINGI IBU ANAK KOTA SEMARANG) become an innovation program as a solution and an action of concern for maternal and child health problems by bringing health services access closer to the community through homecare



The target of reducing maternal and infant mortality has been achieved with the SAN PISAN Program

2015

- Maternal mortality were 35 cases
- Perinatal mortality were 229 cases
- Child mortality were 243 cases

2022

- Maternal mortality were
 15 cases
- > Perinatal mortality were 125 cases
- Child mortality were 147 cases



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Joint commitment with community



Community assistance and empowerment



Monitoring and evaluation

CROSS-SECTOR ENGAGEMENT

