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Bring Aceh people to a better life

IBU4ACEH Meulaboh Office

Update – June 2006

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OVERVIEW

One and a half years after the huge earthquake and tsunami, there are still a lot to be done in the reconstruction and rehabilitation of Aceh. **IBU4ACEH** team still focuses its operation in facilitating improvement of health, psychosocial, and livelihood of more than 120,000 IDPs and affected community in the district of Aceh Barat.

We highly acknowledge the cooperative work of Rotary-club SYKE Germany with our psychosocial program for six months (January to June 2006), and we will continue this program under a new agreement with DRI. We hope it will go as smooth and fun as with Rotary-club.

At health program our nurse resigned due to her being accepted as government staff and we recruited a new midwife. A change of personnel also happened in psychosocial program. The former child program specialist resigned and replaced by another bachelor in psychology.

PROGRESS OF ACTIVITIES

© Health Program

Primary Health Service. *Static clinics* to serve IDPs at three TLCs in the sub districts of Johan Pahlawan, Meurebo, and Kaway XVI still open in the afternoon five days a week. We also still conduct *mobile clinic* activities to CHCs in the sub districts of Woyla Barat, Woyla Induk and Sungai Mas. **Total number of cases** treated in June was **1871** (235 <5 year-olds; 890 female adults; 1576 new cases), which is slightly higher than the last period (1347). **Total cases in the first half of project** (December 1, 2005 to June 30, 2006) are **11,987** or **59.9%** of target 20,000 cases until November 2006. Through static clinics we maintain close coordination with local CHC for disease surveillance at TLCs.

Maternal and Child Health. As a pointer of community based health program, we still assist *posyandu* in five IDP camps at Johan Pahlawan, Meurebo, and Kaway XVI sub districts. The total number of kaders involved in posyandu activities is **29**. According to data collection conducted in April, total posyandu beneficiaries are 500 children <5 years old and 95 pregnant women. The **total number of children attending Posyandu** in all sites is **182**, quite the same as in the last period (36.64% vs 36.6% of total <5 year-old population) and **total number of pregnant women did antenatal care** at posyandu is **14**, almost doubled the number in last period (14.7% vs 7.3% of total pregnant women population). Of all children attending Posyandu, only **42 (23.1%)** of them gained weight. In light of the low achievement of posyandu indicators, we conducted **coordination with kaders** and identified four main causes, i.e. mobilization of IDPs to houses causing low attendance, lack of visit frequency and reward from IBU4ACEH to kaders, reduced number of kaders because they prefer to go to work instead of volunteering as posyandu kader, and lack of knowledge especially about immunization among parents of children <5 years old.

In *Posyandu reactivation project at Woyla Induk sub district* beneficiary data collection by kaders is almost finished. We had collected data from **40** out of 43 villages resulting in **909** <5 year olds and **134** pregnant women. After reviewing the results of posyandu event, we noted two posts that covered too many beneficiaries so we decided to expand from 24 to **26** posyandu posts.



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Training for Health Personnel. *Training of trainers (ToT) to train posyandu kaders for CHC staff at Woyla Induk sub district in collaboration with Aceh Barat District Health Office took place at the second week of June. There were 11 staff attending the training, 8 of them are midwives.*

IEC Sessions. Regular talk show every Friday morning on a local radio station that broadcasts throughout the districts of Aceh Barat, Nagan Raya and Aceh Jaya were held five times this period. Topics covered were *avian influenza, food for your child, antenatal care, sexually transmitted diseases, and dyspepsia syndrome*. So far we have discussed **22 (91.7%)** of the 24 target topics.

Coordination. At the end of this month one of our doctors was involved in a malaria and nutrition survey held by UNICEF and the DHO of Aceh Barat.

© **Psychosocial Program**

Play and Learn. We still have *Play and Learn activities for children aged 2 to 6* at Beureugang TLC and Ujong Tanjong TLC. Two volunteers helped the activities at Ujong Tanjong, while at Beureugang the helper did not actively participate. The **number of participants** increased from 82 to **140**. In the aspect of **cognition**, we use plastic figures and at the end of the period **40%** of children in Beureugang and **60%** in Ujong Tanjong were able to **recognize numbers**; **30%** were able to **recognize alphabets A to E**. In Ujong Tanjong, we noted improvement in recognizing number and color compared to previous period. **All children were able to differentiate colors. Eighty per cent** of them showed **improvement of creativity** through completing communication blocks. In **emotion and aggression** the goal was reduced verbal and nonverbal aggressive behavior in the class (yelling and hitting). In Beureugang we noted that children feel insecure when making a mistake. In Ujong Tanjong, children frequently hit their friends because they do not want to share pencil, stuff or toys. When they hit or yell at their friends, we taught them to admit their fault and apologize. Aggressive behavior only displayed by one or two children at a time so we could talk to them individually after class. The goals in **discipline** were 70%-80% increase of session attendance and reduced unruly behavior in the class. **Attendance** was **12-15** children per session, no significant difference with the previous period. Rules were applied to all children (come on time, no eating in class, take a bath before class). They also learned to use greetings as well as the words "sorry" and "thank you" appropriately. In **gross motor exercise** we play ball. For **fine motor exercise** in Beureugang, **80%** of children were **able to draw, cut and stick shapes, and arrange domino**. In Ujong Tanjong by the first week **20%** were **able to write numbers 1-10** and at the end of the period this increased to **80%** although some still needed assistance. **Eighty per cent** of children could **draw shapes** very well and all of them can **color picture**. In **independency and self-confidence** we develop skills of decision-making, heighten self-confidence by lead prayers and sing in front of class, and improve motivation through competitive games. Most children still constantly asked for help in completing task before trying, but in Beureugang they can **choose a song and sing alone in front of the class, and lead prayers** before class.

Children Group Counseling. *Group counseling for children aged 7 to 13*, which are also conducted in both camps, have increased total number of participants from 128 to **140** in June. In **cognition** the goals were develop creativity; learn about time (hour and minute); and learn English. All children were able to complete **communication block**. In Beureugang, **ninety per cent** of children were able to **draw a clock** and name the **time to do daily activities**, in Ujong Tanjong **80%** of children at 4th to 6th grade did while **30%** of children in the 1st to 3rd grade still needs help to do it. We introduced **new English words** and **all children** could memorize **80%** of them. In Ujong Tanjong all children were able to **write down English words** but could **not pronounce it well**. Children displayed **improvement of creativity** by **arranging bricks** and almost all of them were able to **finish a puzzle**.



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In emotion and aggression aspects the goal was to reduce verbal and nonverbal aggressive behavior in the class (yelling and hitting). In Beureugang we asked the children to **write a letter to express empathy** for the children in Yogyakarta. **Reduced aggressive behavior** displayed by some children in Beureugang, while in Ujong Tanjong they still frequently hit their friends if they do not share pencil, stuff, or toys. In **discipline** the goals were 70%-80% improvement of attendance and reduced unruly behavior in the class; while **teamwork** is built through games and group activities. The **average of children attendance** in Beureugang and Ujong Tanjong are 15 and 26, respectively. In Beureugang, children had become **accustomed with Play House rules**. Children are also taught to **use greetings as well as the words "sorry" and "thank you" appropriately**. We asked them to **work together** cleaning the Play House. Tasks done in teams taught them how to appreciate their peers. **Fine motor exercise** was integrated in other activities (write letters, draw clocks, etc.) and for **gross motor exercise** we played ball. In **independency** the goal was to develop decision-making skills. In Beureugang, 75% of children can **choose activities** to do in one day, and **all children** can **decide what to draw**. In Ujong Tanjong, they used to ask for help before trying to finish tasks by themselves and only 50% of them were able to **determine daily activities**.

We also held meetings with parents of both programs at both locations.

Teenage Programs. We have a 3.9% increased number of participants in *teenage sharing and counseling program*, from 128 in May to 133 in June. We **assisted teenagers to study** in facing school examination using Encarta Encyclopedia, which attracted the teenagers in Beureugang a lot. In Ujong Tanjong they were more interested in **English Class**. We learned simple present tense and giving advice in English and asked them to translate the song 'I Have A Dream', which motivated them to set goals in life. **Peer Helper training** at the barrack was stopped this month because of the examination, but at SMU 2 and SMU 1 we had several sessions to review previous knowledge, give new techniques in helping process, and involve some of them in our program at the barracks and at on air counseling. The main problem emerged in **individual counseling** was related to marriage and engagement. After examination, in Beureugang we play all kind of games and in Ujong Tanjong we facilitated their desire to **hold an event** for the children and to show their ability in Acehese traditional dance. There were eleven teenagers in the committee, led by one of the peer helpers. They held sports and art competition as well as dancing performances, and they call it "**Olimpiade Fantastik**." For the committee, it is a means to learn to organize, lead, and work in a team. And for other children, it diminished gap between blocks because the sports team were mostly consist of children from all four blocks and they have to work together and support each other.

Adult Programs. There was a 21% increase in the number of participants in June (182 vs 152). We held an FGD **about parenting pattern** after our peer helper identified the topic as the main concern among women at the barrack. There were 49 participants of FGD. At Ujong Tanjong, activities of **Qur'an reading group** had finished and they cook together to celebrate, but some of them wish to continue the activity. In **individual counseling** most women discussed problem related to their children. **Peer helper training** sessions showed better progress at Beureugang compared to Ujong Tanjong. We conducted **evaluation using Parenting Pattern Questionnaire** from 54 women at both locations, which results indicated that 72.2% of women have **authoritative** parenting pattern; 5.55% were **authoritarian**; and 2.25% have two dominant patterns.

IEC Sessions. We held nine **on-air counseling** sessions at two radio stations this month. The topics discussed were *preparation to face examination, infidelity, how to face bad school marks, how to deal with*



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failure, low self esteem, choosing friends, self evaluation, and being single. There were a total number of 86 short messages from the listeners.

CONSTRAINTS

In health program, vehicle compatible to support mobile clinic activities are still unavailable. We have to stop mobile clinic to Sungai Mas at the fourth week of June because one doctor participated at research methodology training in Jakarta and another one got fully occupied at the survey conducted by UNICEF. In psychosocial program, we only have one adult counselor which make the program must be stopped if she is sick or take a leave. The Play House door at Beureugang is broken and could not be tightly closed, which sometimes makes it difficult for children to concentrate. Another constraint is evaluation of on-air radio talk shows as IEC program, because there is no rating system to count the number of listeners.

RECOMMENDATIONS

We still have to recruit one doctor and one nurse, primarily to support primary health service. The new midwife will be assigned at maternal and child health program. To support mobile clinic activities, a 4x4 car and budget consideration is needed. We will arrange health message campaign through posters or direct education to the community. We will fix the Play House door.

LOGISTIC

To support posyandu reactivation at Woyla Induk we procured all equipments needed along with the regular monthly supply. It is still preferable to purchase goods directly in Medan and ship it by ourselves because we have not found any expedition company that meets our needs. We have not succeeded in getting the fund to restore function of one of the trail bikes, because it is not ideal to cover programs to remote villages through bad road condition with only one bike. We go almost every day so the bike does not have time for proper maintenance. It is also the issue with the car that covers programs surrounding Meulaboh, because it is not possible to append maintenance with a single vehicle and tight schedule.