

Citra Diri Training for ASUH Midwives

Self-Awareness, Self-Confidence, and Communications

Midwives are central to the ASUH program's aim to improve the health and nutrition of infants in Indonesia. In order to improve the coverage and the quality of health services for newborns, ASUH's *Citra Diri* (self-image) training provides midwives with participatory adult learning experiences to increase their self-awareness, self-confidence, and communication skills.

Citra Diri training was developed in response to needs expressed by village midwives and their host communities during ASUH's participatory planning phase. Specifically, midwives were puzzled and demoralized by what they reported as lack of support and respect from clients and communities they served, but they seemed unaware of how they were perceived by their clientele. To gain their patients' and communities' respect, they needed to become aware of their strengths and weaknesses, their expectations, and how their communities perceived them. *Citra Diri* training provides tools for midwives to improve their attitudes and behaviors, allowing them to establish a more positive connection with their communities. Once this foundation is laid, training in technical skills can improve the quality of care midwives provide.

Training Goal and Objectives

The goal of *Citra Diri* training is to increase village midwives' knowledge, skills, and self-confidence in order to provide improved health and nutrition services in their communities.

The objectives are to increase participants' self-awareness and identify ways to build upon their personal strengths and successes, increase skills in interactive dialogue when providing clinical services and when working with communities, and develop concrete steps they can take to empower families and communities to improve health and nutrition.

Learning Strategy

The Ministry of Health (MOH) and PATH developed the *Citra Diri* curriculum and training methods based on well-known principles of participatory, collective, adult learning where each person is acknowledged as having experiences valuable to others and where "trainers" facilitate interactive learning rather than teach information. In *Citra Diri* training, participants need to be involved in problem-solving discussions about health because they, not the trainers, are the practitioners and resource persons on the front lines of village public health.

On the first day of the three-day *Citra Diri* training, participants explore their personal strengths, experiences, opportunities for growth, and their views of the adequacy of health facilities and professional support. Done in an open way, this increases participant interactions and their ability to listen and to accept feedback from others. The second day covers theory and classroom practice of interactive communications skills related to the midwife's job—

alternating analyses, reflective discussions, and role playing of ways of solving job-related problems. The last day involves field practice and group analysis of post-partum home visits.

Interested district officials, including a local physician, were trained for four days to be “collective-learning” facilitators. They then trained more than 1,200 village midwives. In addition, the village midwives’ supervisors were trained, and in turn their supervisors—*Puskesmas* directors—were given a one-day orientation.

Results

- Household surveys of mothers showed post-training increases in one year in midwife-assisted deliveries (increasing from 26.3 percent to 31.6 percent), midwife home visits (from 25.3 percent to 41.1 percent), and timely newborn hepatitis B immunizations by midwives (from 12.0 percent to 34.1 percent).
- *Citra Diri* training has been well accepted by government partners, training facilitators, midwives, and their supervisors. Scores on tests of knowledge of effective communication styles and on attitudes towards clients also improved.
- Encouraging the midwives in improved listening, communications, and confidence has led to changes in how they interact not only with their clients but also with their colleagues and supervisors. They are more active in meetings, and *Puskesmas* doctors are getting more information about field conditions.

Replication and Sustainability

Further indications of the success and sustainability of the *Citra Diri* training can already be seen just one year later. Using *Citra Diri* methods, ASUH’s teams of experienced facilitators have already conducted several innovative training programs using funding from the Government of Indonesia and other sources, including:

- Maternal and Child Health Section Heads in all East Java districts.
- Implementers of the Safe Motherhood Project in five East Java districts (Jombang, Trenggalek, Ngawi, Sampang, and Pamekasan).
- Nurses from Community Health Centers and Auxiliary Health Centers in Blitar.
- Program Officers for Nutrition for the Elderly, Directorate of Nutrition (MOH).
- Members of a West Java community to solve their problem of neighborhood security.

Anecdotal field reports provide insight into changes after *Citra Diri* training

- A midwife’s husband said his wife had increased the number of her patients and income.
- A midwife reported that she felt irritated at being disturbed after clinic hours but remembered the training injunction to smile. She smiled and found the interaction satisfying.
- A supervisor reported listening more instead of simply getting angry at “bad” news from the field, and the midwives openly appreciated the change.

For more information, contact the Directorate of Community Health, MOH via email: jjpg@centrin.net.id or PATH Indonesia via email: path@pathjkt.or.id.

