



Budi Aji <budi.aji57@gmail.com>

International Journal of Health Planning and Management - Manuscript number HPM-19-00521.R11 message

Kausalya Boobalan <onbehalf@manuscriptcentral.com>

Fri, Dec 3, 2021 at 5:40 AM

Reply-To: HPM@wiley.com

To: budi.aji57@gmail.com

02-Dec-2021

Dear Dr. Aji,

Your manuscript number is HPM-19-00521.R1. Please mention this number in all future correspondence regarding this submission.

For your reference: the manuscript number of the PREVIOUS manuscript version is:HPM-19-00521

Our journal is currently transitioning to Wiley's Research Exchange submission portal.

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If you submitted this manuscript through ScholarOne, you can view the status of your manuscript by checking your Author Center after logging in to <https://mc.manuscriptcentral.com/hpm>.

Thank you for submitting your manuscript to International Journal of Health Planning and Management.

Sincerely,

International Journal of Health Planning and Management Editorial Office

If you have any queries or concerns, please do not hesitate to contact the editorial office hpm@wiley.com



Budi Aji <budi.aji57@gmail.com>

International Journal of Health Planning and Management - Decision on Manuscript ID HPM-19-005211 message

Kausalya Boobalan <onbehalf@manuscriptcentral.com>

Wed, Oct 6, 2021 at 4:03 AM

Reply-To: HPM@wiley.com

To: budi.aji57@gmail.com

05-Oct-2021

Dear Dr. Aji,

Manuscript ID HPM-19-00521 entitled "Sustaining maternal and child health programs when donor funding ends: a case study of stakeholder involvement in Indonesia" which you submitted to International Journal of Health Planning and Management has been reviewed. The comments of the reviewer(s) are included at the bottom of this letter.

A revised version of your manuscript that takes into account the comments of the reviewer(s) will be reconsidered for publication.

Please note that submitting a revision of your manuscript does not guarantee eventual acceptance, and that your revision may be subject to re-review by the reviewer(s) before a decision is rendered.

You can upload your revised manuscript and submit it through your Author Center. Log into <https://mc.manuscriptcentral.com/hpm> and enter your Author Center, where you will find your manuscript title listed under "Manuscripts with Decisions".

When submitting your revised manuscript, you will be able to respond to the comments made by the reviewer(s) in the space provided. You can use this space to document any changes you make to the original manuscript.

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Once again, thank you for submitting your manuscript to International Journal of Health Planning and Management and I look forward to receiving your revision.

Sincerely,

Prof. Tiago Correia
International Journal of Health Planning and Management Editorial Office
HPM@wiley.com

Reviewer(s)' Comments to Author:

Reviewer: 1

Comments to the Author - note this field may be seen by the author

This paper presents findings from a case study of the transition of a donor-funded maternal and child health program in Indonesia to local ownership. Current research on donor transition has not addressed maternal and child health very much so this manuscript would be filling a gap in this space. However, this manuscript's biggest challenge is that it lacks crucial details on the program at the center of the case study. I have made specific points to this effect in my comments below.

Overall comment:

In the literature of donor transition in health, the transition in question typically is one where the donor is closing out all or a substantial part of its portfolio in a particular health topic. It is unusual to see what appears to be the natural conclusion of a time-limited project approached in this manner. There is an argument to be made that any donor-funded project should be implemented with the end in mind, however time-limited projects have not been typically captured as part of the transition literature to-date. It would be helpful for the authors to clarify if USAID/USG's support for MCH programming closed down along with EMAS or whether other projects in MCH continued to receive support and address the implications therein.

Comments:

1. Introduction:

a. The paper needs a lot more detail on the EMAS project to better understand its goals, how they were accomplished and the potential for institutionalization. The reader needs information on the EMAS project activities, how they were funded, who did the implementation and where. More details on the EMAS project would help clarify questions I have noted below.

b. Significantly more details are needed on the transition process took place, including when the transition was announced and whether any preparatory assessments or activities were conducted.

c. What are the data sources for the maternal death data cited on pgs. 3 and 4?

2. Methods:

a. Did the research team interview anyone involved with the implementation of the EMAS project itself, its funders or central MOH? If not, this is a considerable limitation that needs to be made explicit.

b. The analysis section needs more details on who conducted the data coding and analysis, and how consistency between coders was assessed and ensured.

3. Results:

a. Please indicate whether the FGDs were conducted with a mix of respondents in each group or whether the groups were segregated by role (e.g. district health officers separate from community leaders).

b. Section 3.1 speaks to collaborative culture and organizational capacity but it is difficult to ascertain if these were conditions in place during EMAS implementation or emerged specifically around transition. It seems that these themes emerged earlier and transitioned benefitted from them but if so, it needs to be made explicit.

c. Section 3.3 outlines challenges that are clearly health systems challenges, rather than unique programmatic challenges for MCH services. Did EMAS attempt to address any of these issues? Likewise, it would be helpful to understand whether these systems issues were new post-transition or persistent before/during EMAS.

d. Section 3.4 discusses the lack of funding to support an e-health application. Why is this relevant to the transition of this project?

e. Also in Section 3.4, the authors report intention by respondents to maintaining drills for obstetric care but do not comment on whether these drills have taken place.

4. Discussion:

a. The authors should introduce a more critical lens to the findings and address how a program with considerable political commitment but limited funding, as evidenced in their results, can be sustained in the long run and what could have been done differently to prepare for this situation.

b. Please note that replicating a program is not a key component of transition. It can be argued that replication is a component of institutionalization but the authors need to clarify where replication fits in the long-term goals for program activities, whose role it is to support replication, and how replication played a role in post-transition activities.

Editorial comments:

- The paper could use review and strengthening of the English language use.

Reviewer: 2

Comments to the Author - note this field may be seen by the author

Comments:

This manuscript aims to generate practical experiences concerning stakeholders' involvement in sustaining maternal and child health programs when donor support ends. There is limited relevant literature particularly from the region and this study will assist to fill the knowledge gap. The findings of this manuscript will also enhance understanding of the issue. However, I would like to share some general but minor comments to be considered before publication as below:

Minor comments:

The study timeframe needs to be shared.

Relevant ethical concerns such as how consent was obtained and confidentiality were considered, need to be mentioned.

It will be informative to share why 'stakeholders' collaborative culture and organizational capacity were considered as a single theme and not two separately.

It is suggested to share limitations of the study in a general context and avoid stating that this study had any specific number (only two) of limitations. Besides, some overlap and/or interrelatedness of the identified themes can also be considered.

Adding a few recent (from the last 5 years) relevant references/studies can be considered.

Reviewer: 3

Comments to the Author - note this field may be seen by the author

Dear Authors: In discussion, conclusion, and abstract, please identify and mention the factors responsible for sustaining maternal and child health programs when donor funds ends. Let the reader know clearly the issues or factors or causes of sustainability or not sustaining the MCH programs when donor funding is absent.

If you have any queries or concerns, please do not hesitate to contact the editorial office hpm@wiley.com



Budi Aji <budi.aji57@gmail.com>

International Journal of Health Planning and Management - Decision on Manuscript ID HPM-19-00521.R13 messages

Azubha Jemilet <onbehalf@manuscriptcentral.com>

Tue, Feb 8, 2022 at 8:13 PM

Reply-To: HPM@wiley.com

To: budi.aji57@gmail.com

08-Feb-2022

Dear Dr. Aji,

It is a pleasure to accept your manuscript entitled "Sustaining maternal and child health programs when donor funding ends: A case study of stakeholder involvement in Indonesia" in its current form for publication in International Journal of Health Planning and Management.

One of the reviewers highlighted the need to proceed with the amendment bellow, which can be handled in the production:

'I find that the substantive changes made by the authors enhance and strengthen this paper. The only revision I would request is to correct the spelling of "John Hopkins University" on pg. 4 to "Johns Hopkins University". If this change can be made on the editorial side, then it does not need to be referred back to the authors.'

We will publish a brief 'biosketch' of each author listed on the paper. This is a short description (50 words maximum for each author) of each author's research interests and current affiliation. The 'biosketch' will be included in the list of contributors for the issue in which the paper is published. Please email a 'biosketch' for you and each of your authors as soon as possible.

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Thank you for your fine contribution.

Sincerely,

Prof. Tiago Correia
Editor-in-Chief, International Journal of Health Planning and Management
HPM@wiley.com

P.S. – You can help your research get the attention it deserves! Wiley Editing Services offers professional video abstract and infographic creation to help you promote your research at www.wileyauthors.com/eeo/promotion. And, check out Wiley's free Promotion Guide for best-practice recommendations for promoting your work at www.wileyauthors.com/eeo/guide.

This journal accepts artwork submissions for Cover Images. This is an optional service you can use to help increase article exposure and showcase your research. For more information, including artwork guidelines, pricing, and submission details, please visit the Journal Cover Image page at www.wileyauthors.com/eeo/covers.

Reviewer(s)' Comments to Author:

Reviewer: 2

Comments to the Author - note this field may be seen by the author
The authors have adequately addressed my comments and suggestions shared earlier.

Reviewer: 1

Comments to the Author - note this field may be seen by the author
(There are no comments.)

If you have any queries or concerns, please do not hesitate to contact the editorial office hpm@wiley.com

Budi Aji <budi.aji57@gmail.com>
To: HPM <HPM@wiley.com>

Tue, Feb 8, 2022 at 9:31 PM

Dear Editor-in-Chief of IJHPM,

I appreciate your acceptance of my manuscript for publication in the IJHPM. Many thanks to the reviewers for their valuable comments on my paper.

I have also attached a short biosketch of the authors as required.

Once again thank you and looking forward to your further information.

Best wishes,
Budi Aji

[Quoted text hidden]

 **A short biosketch of the authors.docx**
14K

HPM <HPM@wiley.com>
To: Budi Aji <budi.aji57@gmail.com>


Thu, Feb 10, 2022 at 9:33 AM

Dear Dr. Aji,

Thank you for your email.

Regards,
Azubha Jemilet
Editorial Assistant
International Journal of Health Planning and Management

From: Budi Aji <budi.aji57@gmail.com>
Sent: Tuesday, February 8, 2022 2:31 PM
To: HPM <HPM@wiley.com>
Subject: Re: International Journal of Health Planning and Management - Decision on Manuscript ID HPM-19-00521.R1

 This is an external email.

[Quoted text hidden]



Budi Aji <budi.aji57@gmail.com>

Published: Your article is now published online!

1 message

cs-author@wiley.com <cs-author@wiley.com>

Mon, Feb 28, 2022 at 8:16 PM

To: budi.aji57@gmail.com

Dear Budi Aji,

Your article Sustaining maternal and child health programs when donor funding ends: A case study of stakeholder involvement in Indonesia in The International Journal of Health Planning and Management has the following publication status: Published Online

To access and share your article, please click the following link to register or log in:

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Sincerely,

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Responses to Reviewers' Comments

Reviewer: 1

Comments to the Author - note this field may be seen by the author

This paper presents findings from a case study of the transition of a donor-funded maternal and child health program in Indonesia to local ownership. Current research on donor transition has not addressed maternal and child health very much so this manuscript would be filling a gap in this space. However, this manuscript's biggest challenge is that it lacks crucial details on the program at the center of the case study. I have made specific points to this effect in my comments below.

Overall comment:

In the literature of donor transition in health, the transition in question typically is one where the donor is closing out all or a substantial part of its portfolio in a particular health topic. It is unusual to see what appears to be the natural conclusion of a time-limited project approached in this manner. There is an argument to be made that any donor-funded project should be implemented with the end in mind, however time-limited projects have not been typically captured as part of the transition literature to-date. It would be helpful for the authors to clarify if USAID/USG's support for MCH programming closed down along with EMAS or whether other projects in MCH continued to receive support and address the implications therein.

Comments:

1. Introduction:

a. The paper needs a lot more detail on the EMAS project to better understand its goals, how they were accomplished and the potential for institutionalization. The reader needs information on the EMAS project activities, how they were funded, who did the implementation and where. More details on the EMAS project would help clarify questions I have noted below.

Authors' response:

We thank the reviewer for this important point. We have added this issue in the introduction.

b. Significantly more details are needed on the transition process took place, including when the transition was announced and whether any preparatory assessments or activities were conducted.

Authors' response:

We thank the reviewer for noting this issue. We have added this information in the introduction section.

c. What are the data sources for the maternal death data cited on pgs. 3 and 4?

Authors' response:

We thank the reviewer for this point. We have added references in the paragraph in question.

2. Methods:

a. Did the research team interview anyone involved with the implementation of the EMAS project itself, its funders or central MOH? If not, this is a considerable limitation that needs to be made explicit.

Authors' response:

We thank the reviewer for raising this issue. We conducted interviews with district EMAS teams including the leader as a representative of EMAS project funder in the district level who responsible to manage the EMAS program implementation.

b. The analysis section needs more details on who conducted the data coding and analysis, and how consistency between coders was assessed and ensured.

Authors' response:

We thank the reviewer for raising this issue. We have added this information according to reviewers' suggestions.

3. Results:

a. Please indicate whether the FGDs were conducted with a mix of respondents in each group or whether the groups were segregated by role (e.g. district health officers separate from community leaders).

Authors' response:

We thank the reviewer for this point. We have added information that all FGDs were conducted separately for each group.

b. Section 3.1 speaks to collaborative culture and organizational capacity but it is difficult to ascertain if these were conditions in place during EMAS implementation or emerged specifically around transition. It seems that these themes emerged earlier and transitioned benefitted from them but if so, it needs to be made explicit.

Authors' response:

We thank the reviewer for raising this issue. We agree with reviewer comment. In the early paragraph of Section 3.1 (now become Section 4.1) provides information explicitly that since initial assistance came from a donor, stakeholders had been involved in determining their roles and responsibilities. It means that collaborative culture and organizational capacity emerged earlier and transitioned benefitted from them

c. Section 3.3 outlines challenges that are clearly health systems challenges, rather than unique programmatic challenges for MCH services. Did EMAS attempt to address any of these issues? Likewise, it would be helpful to understand whether these systems issues were new post-transition or persistent before/during EMAS.

Authors' response:

We thank the reviewer for this point. We have added a description to clarify the issue according to reviewers' comments.

d. Section 3.4 discusses the lack of funding to support an e-health application. Why is this relevant to the transition of this project?

Authors' response:

We thank the reviewer for this issue. We discussion about the e-application *SijariEMAS* because this becomes one of main objectives of the EMAS program i.e. increasing the efficiency and effectiveness of referral systems (describe in the section 2). The lack of funding to support the sustainability of this e-health implementation after donor-ends will have a consequence to the quality of services of MCH particularly the effort to improve quickness of referral process from community health center to hospital. It will prevent delays in handling high-risk pregnant women. So, the problem of e-health application funding insufficiency from local budget becomes a substantial issue, we try to highlight this evidence

e. Also in Section 3.4, the authors report intention by respondents to maintaining drills for obstetric care but do not comment on whether these drills have taken place.

Authors' response:

We thank the reviewer for noting this point. We have added the comment of a head of community health center that he has run the drills by his institutional funding, to make it clearer.

4. Discussion:

a. The authors should introduce a more critical lens to the findings and address how a program with considerable political commitment but limited funding, as evidenced in their results, can be sustained in the long run and what could have been done differently to prepare for this situation.

Authors' response:

We thank the reviewer for this point. We have added a description to clarify the issue according to reviewers' comments in discussion section.

b. Please note that replicating a program is not a key component of transition. It can be argued that replication is a component of institutionalization but the authors need to clarify where replication fits in the long-term goals for program activities, whose role it is to support replication, and how replication played a role in post-transition activities.

Authors' response:

We thank the reviewer for this point. We have added the information in discussion section about replication issue in EMAS program within target district has been conducted to achieve the long-term goals of EMAS program as well as an effort to maintain sustainability. This activity is handled by local government after donor-ends using local budget.

Editorial comments:

- The paper could use review and strengthening of the English language use.

Authors' response:

We thank the reviewer for this issue. We have asked a professional proofreader to correct and edit the English language.

Reviewer: 2

Comments to the Author - note this field may be seen by the author

Comments:

This manuscript aims to generate practical experiences concerning stakeholders' involvement in sustaining maternal and child health programs when donor support ends. There is limited relevant literature particularly from the region and this study will assist to fill the knowledge gap. The findings of this manuscript will also enhance understanding of the issue. However, I would like to share some general but minor comments to be considered before publication as below:

Minor comments:

- The study timeframe needs to be shared.

Authors' response:

We thank the reviewer for pointing this out. We have added the study timeframe in the methods section

→ Relevant ethical concerns such as how consent was obtained and confidentiality were considered, need to be mentioned.

Authors' response:

We thank the reviewer for this issue. We have added this information as suggested by reviewer in the methods section

→ It will be informative to share why 'stakeholders' collaborative culture and organizational capacity were considered as a single theme and not two separately.

Authors' response:

We thank the reviewer for this point. We have explained in this section (Theme 1) that a collaborative culture supported by capacity building will be able to build efforts for a conducive environment for all stakeholders involved for the sustainability of the EMAS program. Therefore, we consider it as one theme to describe the unity of meaning.

→ It is suggested to share limitations of the study in a general context and avoid stating that this study had any specific number (only two) of limitations. Besides, some overlap and/or interrelatedness of the identified themes can also be considered.

Authors' response:

We thank the reviewer for noting this point. We have revised the sentence according to the reviewers' comments.

→ Adding a few recent (from the last 5 years) relevant references/studies can be considered.

Authors' response:

We thank the reviewer for this point. We have several recent relevant references in this paper

Reviewer: 3

Comments to the Author - note this field may be seen by the author

Dear Authors: In discussion, conclusion, and abstract, please identify and mention the factors responsible for sustaining maternal and child health programs when donor funds ends. Let the reader know clearly the issues or factors or causes of sustainability or not sustaining the MCH programs when donor funding is absent.

Authors' response:

We thank the reviewer for noting this point. We have added and mentioned it explicitly in the abstract and conclusion sections.