

Effectiveness of the Integrated Management of Childhood Illness (IMCI) Implementation in Indonesia: A Systematic Review

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Abstract : Background: Pneumonia, diarrhea, and malaria are leading causes of under-five mortality globally, including in Indonesia. The Integrated Management of Childhood Illness (IMCI) is a comprehensive approach aimed at reducing morbidity and mortality in children under five, particularly from infectious diseases. This systematic review evaluates the effectiveness of IMCI services in addressing pneumonia, diarrhea, and malaria within the Indonesian context. Methods: A literature search was conducted using Google Scholar, PubMed, Scopus, Portal Garuda, Electronic Theses and Dissertations (ETD), and Berita Kedokteran Masyarakat (BKM) without time restrictions. Studies were included if they focused on children under five receiving IMCI services, used observational designs, and were published in English or Indonesian, including grey literature. The selection process involved screening titles, abstracts, and full texts. A quality assessment was conducted using the Hoy risk-of-bias table to minimize bias. Findings were synthesized using a descriptive narrative approach to identify patterns, themes, and key results. Results: Of the 516 studies screened, six met the inclusion criteria. Among these, one study focused on acute respiratory infections (ARI), two on diarrhea, one on both ARI and diarrhea, one on pneumonia, and one on malaria. The studies included three cross-sectional and three cohort designs, with sample sizes ranging from 30 to 200 children under five. The findings consistently showed that IMCI services improved recovery rates and reduced recurrence of illnesses. Conclusion: IMCI services for pneumonia, ARI, diarrhea, and malaria in children under five demonstrate significant effectiveness in improving recovery and preventing disease recurrence. Strengthening healthcare workers' capacity to deliver IMCI services according to standards and enhancing family counseling on home-based care is critical to sustaining these outcomes.

Keywords : childhood infection diseases, children under five, effectiveness, integrated management of childhood illness (IMCI).

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