



IMPLEMENTATION OF THE MATERNAL PERINATAL RESPONSIVE SURVEILLANCE AUDIT (AMP-SR) IN REDUCING MATERNAL AND INFANT MORTALITY RATES IN INDONESIA: A PRISMA-MODELED SYSTEMATIC LITERATURE REVIEW

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ABSTRACT

The Maternal Mortality Rate (MMR) and Infant Mortality Rate (IMR) remain major challenges in Indonesia's health system, requiring a systems-based evaluation approach. The Maternal Perinatal Surveillance and Responsive Audit (AMP-SR) was developed as a strategy to identify the causes of maternal and neonatal deaths and improve the quality of healthcare services through an integrated surveillance and response system. This study aims to analyze the implementation of AMP-SR in reducing MMR and IMR through a Systematic Literature Review (SLR) using the PRISMA model. This study employed a Systematic Literature Review approach using the PRISMA framework. Articles were retrieved from Google Scholar through the Publish or Perish application using keywords related to AMP-SR and published between 2021 and 2026. A total of 50 articles were initially identified through the database search. After undergoing the identification, screening, eligibility, and inclusion stages, 12 articles met the inclusion criteria and were included in the final analysis. The findings indicate that AMP-SR is effective in identifying risk factors associated with maternal and neonatal mortality and improving the quality of healthcare services through a systematic audit process. However, several challenges remain, including poor documentation quality, limited human resources, and weak monitoring and follow-up of audit recommendations. Strengthening the reporting system, enhancing the capacity of healthcare workers, and optimizing the use of digital technology are essential factors in improving the effectiveness of AMP-SR implementation in reducing MMR and IMR in Indonesia.

Keywords: AMP-SR; infant mortality; maternal mortality; systematic literature review

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INTRODUCTION

The Maternal Mortality Rate (MMR) and Infant Mortality Rate (IMR) are key indicators used by the government to assess the success of a country's health development. The government uses these indicators because the MMR and IMR reflect the overall quality of maternal and neonatal health services (Saleh et al., 2026). High MMR and IMR indicate that the health care system still faces various challenges, particularly regarding access to services, service quality, and the referral system (Ambarwati et al., 2023). These conditions necessitate integrated improvement efforts within the national health system, making the reduction of MMR and IMR a top priority in Indonesia's health policies.

Indonesia continues to face the problem of high maternal mortality rates compared to other countries in the ASEAN region (Suarayasa, 2020). According to a study by (Sari et al., 2023), the leading causes of maternal mortality include hemorrhage, hypertension, and obstetric complications occurring during pregnancy and childbirth. Most of these deaths could actually be prevented if mothers received prompt, appropriate, and high-quality health care (Rusmawati & Siregar, 2023). In this regard, the health care system plays a crucial role in preventing complications through early detection and effective management (Mbata et al., 2024). Therefore, improving the quality of maternal health care has become an urgent priority.

Infant mortality remains a significant public health issue in Indonesia, particularly during the first four weeks of a child's life (Fithriany, et al., 2024). Research by (Yuliasih et al., 2023) indicates that risk factors such as prematurity, low birth weight, and delayed care are the primary causes of infant mortality. The healthcare system has not yet been fully capable of optimally addressing these risk factors. Healthcare workers require more effective detection and management systems to reduce infant mortality rates (Klos, 2024). Therefore, system-based interventions are crucial in reducing mortality rates during the first four weeks of a child's life. Efforts to reduce maternal and infant mortality rates require not only improved healthcare quality but also an evaluation system capable of comprehensively identifying causes of death (Sari et al., 2025). The evaluation system must be able to assess both medical and non-medical factors contributing to maternal and neonatal deaths. The government has developed the Maternal Perinatal Audit (MPA) as one approach to evaluate cases of maternal and infant deaths. The MPA provides an overview of the factors causing deaths as well as weaknesses in the healthcare system (Utari et al., 2025). Therefore, the MPA serves as the foundation for continuous improvement of the healthcare system.

In line with developments in health policy, the government has expanded AMP into the Maternal and Perinatal Audit and Responsive Surveillance (AMP-SR) program. AMP-SR integrates the processes of case identification, reporting, audit, and response to maternal and neonatal deaths (Nurhayati et al., 2026). This approach emphasizes the importance of following up on audit findings to prevent similar incidents in the future. The AMP-SR system also prioritizes the principles of continuous, data-driven surveillance. Consequently, AMP-SR represents a significant innovation in improving the quality of maternal and neonatal healthcare services. AMP-SR plays a strategic role in comprehensively identifying risk factors for maternal mortality. This system is capable of revealing factors contributing to delays in decision-making, limited access to healthcare services, and suboptimal quality of medical care (Maulidah & Silviani, 2026). Research indicates that the majority of maternal deaths result from delays in care and a lack of coordination among healthcare facilities (Tesfay et al., 2022). Risk factor analysis using AMP-SR can assist healthcare workers in formulating more effective prevention strategies, making AMP-SR a vital tool in efforts to reduce the maternal mortality rate (Wandita et al., 2022).

The implementation of AMP-SR in Indonesia still faces a number of complex challenges. Healthcare facilities often lack sufficient human resources with the expertise to conduct audits (Widjaja, 2025). Additionally, the quality of documentation and reporting of death cases remains suboptimal in some regions (Sari et al., 2025). According to research (Saleh et al., 2026), cross-sectoral coordination has also not been functioning effectively to support AMP-SR implementation. These conditions have prevented the audit process from achieving its full potential in reducing maternal and infant mortality rates, making follow-up on audit recommendations a critical aspect of AMP-SR success. However, the implementation of such follow-up measures often falls short in practice. Research (De Francesco et al., 2024) indicates that monitoring and evaluation of audit recommendations remain weak, preventing sustainable system improvements. Healthcare workers frequently face challenges in implementing recommendations due to systemic limitations and resource constraints.

Advances in digital technology offer significant opportunities to improve the effectiveness of AMP-SR implementation (Solang et al., 2025). Digital reporting systems can enhance data accuracy, reporting speed, and coordination among healthcare facilities (Putri, 2025). The use of digital systems can improve healthcare workers' compliance in conducting screening and reporting cases (Maulidah & Silviani, 2026). Digitalization also aids in real-time monitoring and evaluation processes, making the integration of digital technology a strategic solution for strengthening AMP-SR (Suprpto, 2023). Given these various challenges, a comprehensive study is needed to systematically evaluate the implementation of AMP-SR.

This study employed a Systematic Literature Review (SLR) approach to comprehensively examine the implementation of AMP-SR through systematic and structured steps. The researcher conducted a literature search using the Publish or Perish application with the keywords “Audit Maternal Perinatal,” “AMP-SR,” and “Maternal Perinatal Surveillance and Response” for the years 2021–2026, then screened the articles based on title, abstract, and topic relevance using the PRISMA model. The researchers established inclusion criteria consisting of full-text empirical articles relevant to the implementation of AMP-SR, while excluding duplicate articles and those not aligned with the study’s focus. Although global theories such as Maternal Death Surveillance and Response (MDSR) (Pusponegoro et al., 2025) and the Three Delays model (Kodish et al., 2023) have been widely used to explain causes of maternal mortality, empirical research indicates that AMP-SR implementation in Indonesia still faces a gap between policy and practice, particularly regarding reporting, audit quality, and follow-up on recommendations (Ambarwati et al., 2023). Therefore, there is a research gap stemming from the lack of systematic studies that integrate the effectiveness of AMP-SR implementation with its barriers and enablers within the context of the Indonesian health system; thus, this study is crucial for providing a more comprehensive synthesis of the evidence.

METHOD

Research Design

This study employs a Systematic Literature Review (SLR) approach to comprehensively examine the implementation of the Maternal Perinatal Responsive Surveillance Audit (AMP-SR). The researcher adopted the SLR method because it enables the systematic and objective synthesis of various research findings. The researcher used the PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses) model as a guideline in the process of identifying, selecting, and analyzing articles. The PRISMA model helps the researcher ensure transparency and the replicability of the research process.

Data Sources

The researchers obtained data from scientific databases via the Publish or Perish application, which is linked to Google Scholar. They used the keywords “Maternal Perinatal Audit,” “AMP-SR,” and “Maternal Perinatal Surveillance and Response” to identify relevant articles. The researchers limited the search to articles published between 2021 and 2026 to ensure the data’s recency. Using this strategy, the researchers successfully identified a number of relevant articles for analysis.

Inclusion and Exclusion Criteria

Table 1.
Inclusion and Exclusion Criteria

Criteria	Inclusion	Exclusion
Publication Year	2021–2026	<2021
Article Type	Empirical Article	Non-empirical Review
Topic	AMP-SR / Maternal Perinatal Audit	Not Relevant
Access	Full Article	Not Available
Languages	Indonesian & English	-

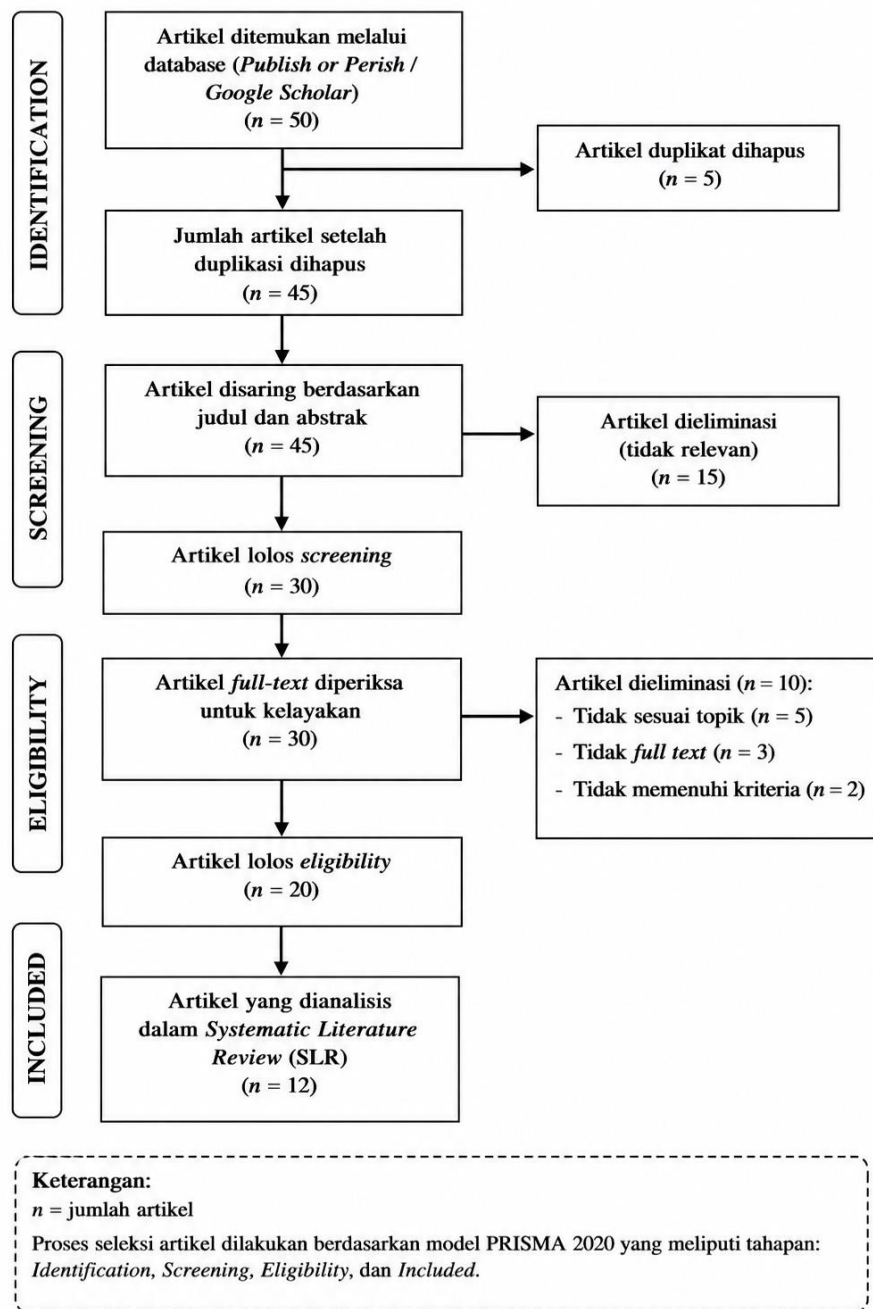
The researchers used inclusion criteria to select articles relevant to the research focus. They excluded articles that did not meet the criteria to ensure the validity of the study’s results. As a result, the article selection process became more focused and systematic.

Data Analysis Techniques

The researchers used a thematic analysis approach to identify patterns and key themes in the research findings. They grouped the findings into three main categories: the effectiveness of AMP-SR implementation, supporting factors, and implementation barriers. The researchers conducted a qualitative interpretation of the data to understand the relationships among the variables identified in the literature. The researchers also compared the research results to identify similarities and

differences in the findings. Using this approach, the researchers were able to produce a comprehensive and in-depth synthesis.

PRISMA Flowchart



The researchers identified 50 articles through the Publish or Perish database. After removing 5 duplicate articles, the researchers obtained 45 articles for the screening stage. During the screening phase, the researchers excluded 15 irrelevant articles based on their titles and abstracts, leaving 30 articles. Next, the researchers assessed the eligibility of the 30 full-text articles and excluded 10 articles because they did not meet the inclusion criteria. In the final stage, the researchers obtained 12 articles that were analyzed in this study.

RESULT

Based on the article selection process using the PRISMA model, the researchers identified 12 articles that met the inclusion criteria and were analyzed in this study. The analyzed articles encompassed various research designs, such as qualitative, quantitative, mixed methods, and

action research, and addressed the implementation of the Maternal Perinatal Surveillance Responsive Audit (AMP-SR) in various healthcare settings. This variety of research methods provided a comprehensive overview of AMP-SR implementation from various perspectives. The researchers then conducted data extraction to identify the main themes emerging from the literature. The analysis results revealed three main themes: the effectiveness of AMP-SR implementation, supporting factors, and implementation barriers.

Table 2.
Analisis Article

No	Author	Method	Focus	Findings
1	(Khalidah et al., 2025)	Quasi-experimental	Effectiveness of AMP-SR	Improving the effectiveness of audits and risk identification
2	(Pusponegoro et al., 2025)	Mixed methods	Implementation of MPDSR	Improving the audit system, but obstacles remain
3	(Nurhayati et al., 2026)	Qualitative	Policy implementation	Audit follow-up is not yet optimal
4	(Saleh et al., 2026)	Qualitative	Health policy	AMP-SR supports the reduction of MMR
5	(Listya et al., 2025)	Qualitative	Reporting system	Documentation is not yet optimal
6	(Utari et al., 2025)	Qualitative	Mortality analysis	Most deaths are preventable
7	(Rusmawati & Siregar, 2023)	Qualitative	Causes of death	Preeclampsia and hemorrhage are the dominant causes
8	(Maulidah & Silviani, 2026)	Action research	Digitalization	Digital systems improve compliance
9	(Ambarwati et al., 2023)	Literature Review	Implementation of AMP-SR	Implementation is not yet optimal
10	(Wandita et al., 2022)	Instrument development	Neonatal audit	Audits help identify the causes
11	(Yuliasih et al., 2023)	Qualitative	Infant mortality	Dominant neonatal factors
12	(Salvinia Amanitia Setiawan, 2025)	Quantitative	Risk management	Healthcare workers' knowledge has an impact

DISCUSSION

Effectiveness of AMP-SR Implementation in Reducing MMR and IMR

The study findings indicate that AMP-SR plays a crucial role in improving the quality of maternal and neonatal health care. The AMP-SR system is capable of identifying risk factors for mortality more systematically through a structured audit process. The implementation of AMP-SR also helps health care workers understand the causes of preventable deaths. Research indicates that the majority of maternal deaths occur during the postpartum period and can be prevented through improvements in healthcare services (Utari et al., 2025). Therefore, AMP-SR serves as a vital tool in efforts to reduce maternal mortality and neonatal mortality rates. Additionally, quality improvement approaches such as Point of Care Quality Improvement (POCQI) have been shown to enhance the effectiveness of audits. This improvement is evident in the increased knowledge, practices, and quality of documentation among healthcare workers (Khalidah et al., 2025). This indicates that AMP-SR functions not only as an evaluation tool but also as a means of enhancing healthcare workers' capacity. Thus, the implementation of AMP-SR contributes to the continuous improvement of healthcare service quality.

Factors Supporting the Implementation of AMP-SR

The success of AMP-SR implementation is influenced by various interrelated supporting factors. The main factors identified in the study are leadership support and health facility management. Organizational leaders play a crucial role in ensuring that audits are conducted in accordance with standards. Additionally, the existence of clear standard operating procedures (SOPs) also supports successful implementation. Organizational support and a sound management structure can enhance the effectiveness of AMP-SR implementation (Pusponegoro et al., 2025). Beyond organizational factors, cross-sectoral collaboration is also a key factor in supporting AMP-SR implementation.

Coordination among healthcare facilities, local governments, and healthcare workers is essential to the program's success. The use of digital technology is also a significant supporting factor in improving the effectiveness of reporting and audit systems. Therefore, the integration of various supporting factors is crucial for strengthening the implementation of AMP-SR.

Barriers to the Implementation of AMP-SR

Despite its great potential, the implementation of AMP-SR still faces various challenges in the field. One of the main obstacles is the poor quality of documentation and reporting of maternal deaths. Reporting systems such as the Maternal Death Notification (MDN) are not yet functioning optimally in some health facilities. This situation results in data that is inaccurate and difficult to use as a basis for decision-making. Additionally, limited human resources pose a barrier to AMP-SR implementation. Health workers often lack the necessary competencies and training related to maternal and perinatal audits. High workloads also hinder the optimal conduct of audits. Research (Nurhayati et al., 2026) indicates that weak monitoring and evaluation result in audit recommendations not being effectively followed up. Therefore, strengthening human resource capacity and the monitoring system is of critical importance.

Analysis of Gaps in the Implementation of AMP-SR

Based on the results of the literature review, there is a gap between theory and practice in the implementation of AMP-SR. Global theories such as Maternal Death Surveillance and Response (MDSR) and the Three Delays model emphasize the importance of an integrated and responsive surveillance system. However, implementation in Indonesia indicates that these systems are not yet functioning optimally, particularly regarding reporting, auditing, and follow-up on recommendations (Ambarwati et al., 2023). This situation highlights a gap between designed policies and on-the-ground implementation. Furthermore, previous research has been limited to partial analyses, such as focusing solely on risk factors or reporting systems. Research that comprehensively integrates various aspects of AMP-SR implementation remains very limited. Therefore, this study contributes by presenting a synthesis that combines effectiveness, enabling factors, and barriers in AMP-SR implementation. Consequently, the findings of this study can serve as a foundation for formulating more effective policies.

CONCLUSION

Based on the results of a Systematic Literature Review (SLR) using the PRISMA approach, the implementation of the Maternal Perinatal Responsive Surveillance Audit (AMP-SR) has been proven to play a strategic role in reducing the Maternal Mortality Rate (MMR) and Infant Mortality Rate (IMR) in Indonesia. AMP-SR is capable of systematically identifying risk factors for maternal and neonatal mortality through a structured audit process, thereby serving as a foundation for improving the quality of health care services. The implementation of AMP-SR functions not only as an evaluation tool but also as a mechanism for improving service quality through strengthening the capacity of health workers, improving the quality of documentation, and developing a responsive surveillance system. In addition, the success of AMP-SR implementation is influenced by supporting factors such as leadership, the availability of standard operating procedures (SOPs), cross-sector collaboration, and the use of digital technology. However, AMP-SR implementation in Indonesia still faces various obstacles, such as poor reporting quality, limited human resources, and weak monitoring and follow-up on audit recommendations. These conditions indicate a gap between policy and practice on the ground.

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