STUDY ON MATERNAL HEALTH CARE IN DECENTRALIZATION ERA IN EAST JAVA PROVINCE, INDONESIA



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Rationale & Background :

Health Sector reform in Indonesia

Decentralization Health system



Reproduction Health

- Health reform ----- to increase the effectiveness, efficiencies, quality and financial of health system
- Reform in Indonesia is decentralization.
 There is changing responsibility of health program from central government to district government including changing responsibility of reproductive health program.
- Implementation of decentralization is quite complex, program has not always facilitated ---- may not be able to facilitate.

- There could be changing in many aspect of health centre such as payment process, financial, human resources.
- Many reproductive health programs have developed in Indonesia but MMR in Indonesia was 307/ 100.000 (2003)
- To identify barrier factors of maternal health ----information /data about payment system of health services, quality of health provider, facility of health services, Human resources

Research Question :

What are the importance factors that contribute on maternal health care in Era Decentralization in East Java Province Indonesia

General Objectives :

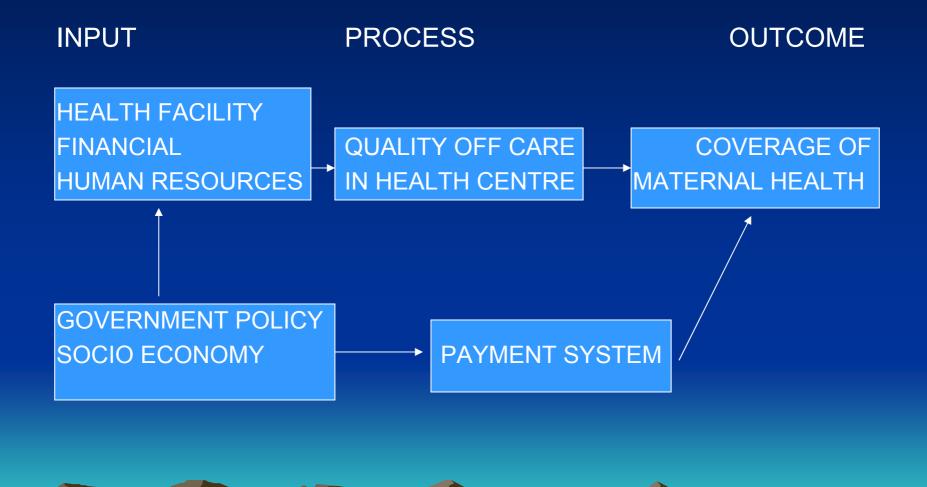
To identify barriers for assessing delivery care in Era Decentralization in East Java Province Indonesia Specific Objectives :

- 1. To assess many factors that contribute to three delays of maternal health care
- 2. To assess payment system and financing on maternal health care centre
- 3. To assess quality and facility of maternal health care centre
- 4. To asses the perception of health care providers and women's perspective of health care responsiveness

Study Design :

Cross sectional

CONCEPTUAL FRAMEWORK



Sample

- Women who gave birth at maternal health care
 (∑ 385)
- Manager of health care centre
- Health Provider

Research Setting :

- 7 cities/ districts in east Java province
- Hospital
- Primary Health Care with in-patient
- Village Maternity Home



Variable:

Socio-economy status



- (Income, occupation, religion, education, geographic factor)
- Three delays factors
 - (Delay to seek care, reach care, get care)

-Finance, Facility and Quality of Health care centre (Subsidy funding, drug supplies, Equipment, Human resources, referral system)

- 4 type of Payment system



- Out of pocket
- Government Insurance
- Private Insurance
- Free payment





- Health care provider perception
- Women's perspective of responsiveness in health care centre
 - (Dignity, prompt attention, autonomy, confidentiality)



Ethics : **Ethical clearance**

Admission Procedure : — Informed consent — Interview or questionnaire

Data Management : SPSS program

Duration of project: 18 months



Expected outcomes :

Local health providers Government Publication





