EQUITABLE HEALTHCARE ACCESS

FACILITY IMPROVEMENT AND PROMOTION TO INCREASE EQUITY IN INDONESIA

CHALLENGE

Health inequities occur when health services are not accessible to certain people due to gender, socio-economic status, ethnicity, geographic residence, or other characteristic. Because of this lack of access, disadvantaged populations are at much higher risk of adverse health outcomes. For example, in Indonesia the maternal mortality rate was 216 per 100,000 live births in the poor rural province of East Nusa Tenggara.

In 2009, the Indonesian government initiated a strategy to reduce maternal and child mortality. The strategy, called Revolusi KIA, seeks to improve the quality of healthcare facilities and encourage women to deliver in facilities. In the Nusa Tenggara Timur (NTT) province, the number of women delivering in facilities has increased. However, many women continue to deliver at home despite the availability of local health centers, called Puskesmas. TRAction supported the development of a case study to identify factors that influence whether women deliver in a Puskesmas or not.

STUDY APPROACH

The study used both qualitative and quantitative methods to 1) identify factors influencing use or non-use of Puskesmas (or other health facilities) for delivery and 2) determine the impact of current programs on coverage and equity.

Two villages were included in the study: one located close to the Puskesmas, Wae Nakeng, and one located within a 1 hour drive. In both villages, in-depth interviews were conducted with women who delivered in a facility and women who delivered at home, birth decision influencers (such as the husband or mother-in-law), the village midwife, traditional birth attendants, and village leaders. Quantitative data was also collected to determine if the health facility is serving the poorest women in the community.

LOCATION

Manggarai Barat district, East Nusa Tenggara Timur (NTT) Province, Indonesia

TIMELINE

January 2014 to June 2015

IMPLEMENTED BY

Nusa Tenggara Timur Provincial Health Office; National Institute of Health Research and Development, Ministry of Health, Indonesia; Macquarie University, Australia

KEY QUESTIONS

The aim of this case study is to identify factors that influence the use of available facilities for delivery, within the context of the Revolusi KIA program. Research questions include:

- Why do some women deliver in a facility and others at home?
- What are the equity characteristics of women who deliver in facilities and at home?

PROJECT STATUS

Implementation Analysis Dissemination

KEY FINDINGS

Statistically, the health facility-based birth program achieved variable results in different areas within NTT province. The quantitative analysis revealed that several factors including age of mother, living in urban areas, higher socioeconomic level, owning insurance, and regular ANC...
visits positively affected the likelihood of a woman delivering in a health facility. The qualitative findings indicated several barriers to health facility delivery including low awareness of program benefits, perceived financial costs, and cultural practices. Most families still perceive that home births are less disruptive and that cost of delivery is expensive, leading to a preference for home delivery. Traditional birth attendants (TBAs) emerged as valued and influential members of the community and important players in the delivery process.

**IMPLICATIONS AND RECOMMENDATIONS**

Maternal mortality will decrease when women are able to give birth under the supervision of a skilled attendant and have access to high-quality treatment if complications occur. These improvements are feasible in low-income settings, but require continuous strengthening of health systems. This study revealed that increased community engagement can lead to better maternal and child health through the effective use of health promotion materials endorsed by the village leaders and involved fathers. In addition, it is important to increase the availability and capacity of midwives at the village level and strengthen the partnership between TBAs and midwives.

**RESEARCH INTO ACTION**

This case study identified contextual factors surrounding the decision to use available health facilities for delivery, and explored how well the Puskesmas are serving the poorest women in the community. The Provincial Health Office implementing the study will use the results to inform future programming and share results with the Indonesian Ministry of Health to inform national Revolusi KIA activities.

**TRACTION PROJECT OVERVIEW**

The Translating Research Into Action (TRAction) Project, funded by the U.S. Agency for International Development, focuses on implementation and delivery science—which seeks to develop, test, and compare approaches to more effectively deliver health interventions, increase utilization, achieve coverage, and scale-up evidence-based interventions. TRAction supports implementation research to provide critically-needed evidence to program implementers and policy-makers addressing maternal and child health issues.

For more information on the TRAction Project:  
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