The Fifth Postgraduate Forum on Health Systems and Policy

"THE GROWTH OF PRIVATE HOSPITALS AND ITS IMPACT AND EQUITY; GOOD OR BAD"

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Introduction from the Forum Director

Welcome to the Universitas Gadjah Mada for the fifth Round of Postgraduate Forum!

This is the Fifth Postgraduate Forum on Health System and Policy held alternatively among three universities in Asia. Naresuan University hosted this forum in 2007. Universitas Gadjah Mada hosted in 2008, Universitas Kebangsaan Malaysia, hosted in 2009 and returned back to Naresuan in 2010.

The main objective of the Forum is to provide a platform for postgraduate students (Masters and PhDs) to communicate their knowledge and experience gained during postgraduate works and to share with those who are newly enrolled in the programme.

The Forum is open to all postgraduate students in health systems and policy studies across the world. But, this forum is also intended to bring policy makers and managers, senior researchers and academic in one venue. Researches who have research on health systems and policy, health economics and health financing are invited to actively participate in this Forum. Students who are in the final stage of their thesis writing and those graduated recently are invited to present their research outputs in this Forum.

In this year, we will bring the topic “The Growth of Private Hospitals and Its Impact on Equity: Good or Bad?”. Many private hospitals aim to serve the middle and upper class in the society, especially the for-profit ones. For example, during the last 10 years, the growth of for-profit is doubled in Indonesia, while the non-profit is stagnant. In other countries, the government encourages for-profit hospitals to grow with tax incentives and other protection policies. The question is: Whether this development is good or bad in term of equity?
The retention of skilled midwives in rural Indonesia

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The aim of this study is to explore factors that support midwives to remain in rural areas. A qualitative study was employed in this study. In-depth interviews were conducted with twelve midwives in rural Sulawesi. Interviews were recorded, transcribed and coded to identify themes.

Career prospects such as government employment on a full-time basis, family ties in the area of work, own area of origin influenced the willingness of midwives to remain in the study area. However, the acceptance and trust from the local community and community attitudes about midwives are major challenges. Local community women preferably use unskilled birth assistants, and call on midwives only for assistance when obvious problems emerge during labor. Community members associate skilled birth attendants with obstetric crises and this contribute to the low utilization rate of midwives.

Conclusion Midwives in Indonesia will remain in rural areas when they work full time as government employees. However, improvements to the health system and quality of care, and community outreach and education, are needed to address women’s reluctance to use trained midwives during labor and birth. For government health workers who are linked into communities through family, marriage and local identity, the challenge is not to prevent their out-migration, but to ensure their effective delivery of health services.

Key words: Indonesia, health workforce, midwifery, rural and remote areas, safe motherhood