

Groundwork for Strengthening the Rural Health System: How to Revitalize the Roles of Village Midwives? Nias District – North Sumatera Province



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Introduction

- Village Based Midwives Program / VBMP (1990s) → improve access, equity and coverage of PHC especially for mother and child
- Problems:
 - Community acceptance
 - VM's capacity
- Focus of this study:
 - Management-Organization-Administration (MOA) of VBMP
 - VMs' capacity in delivering PHC



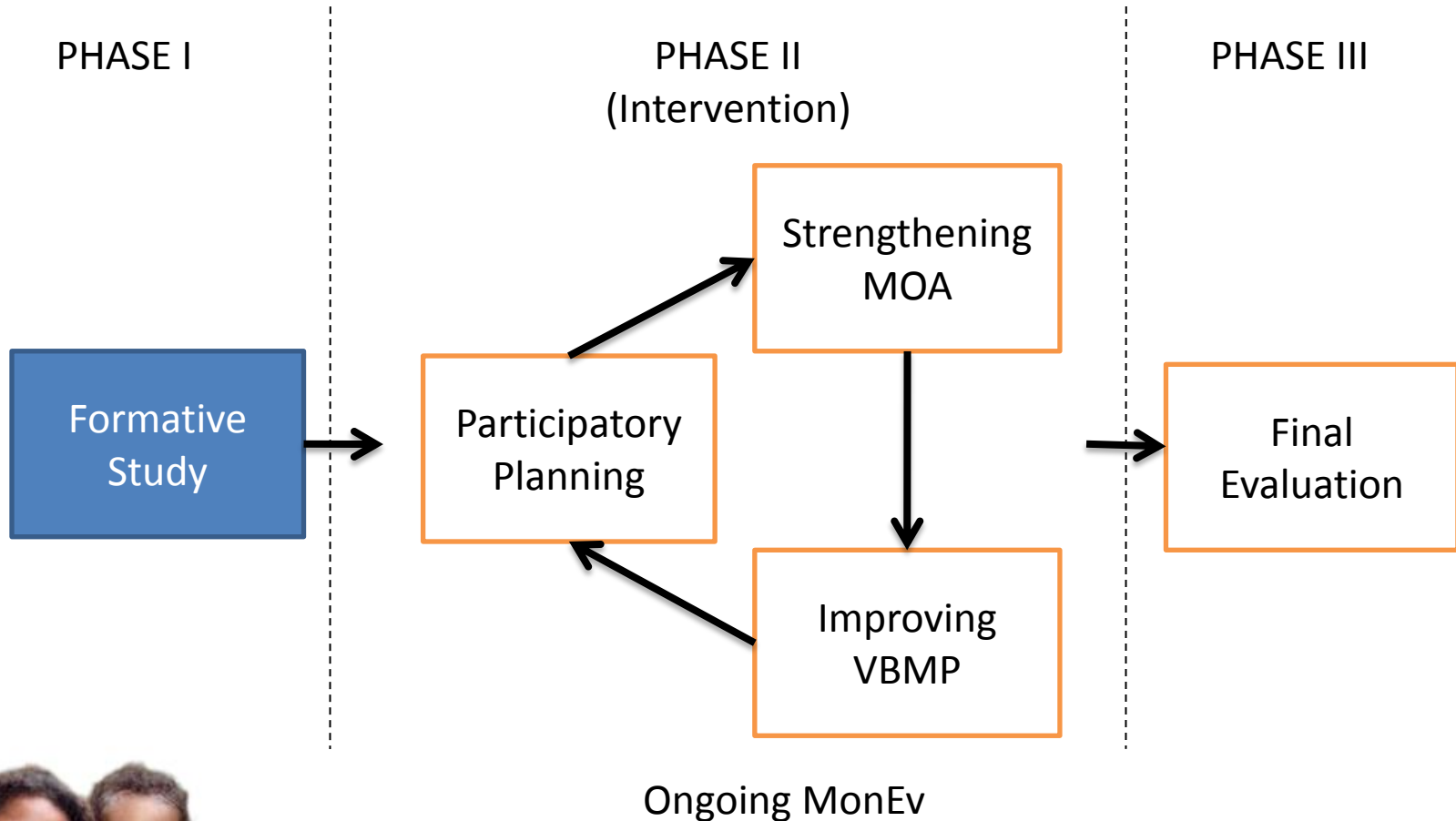
Objectives & Purpose

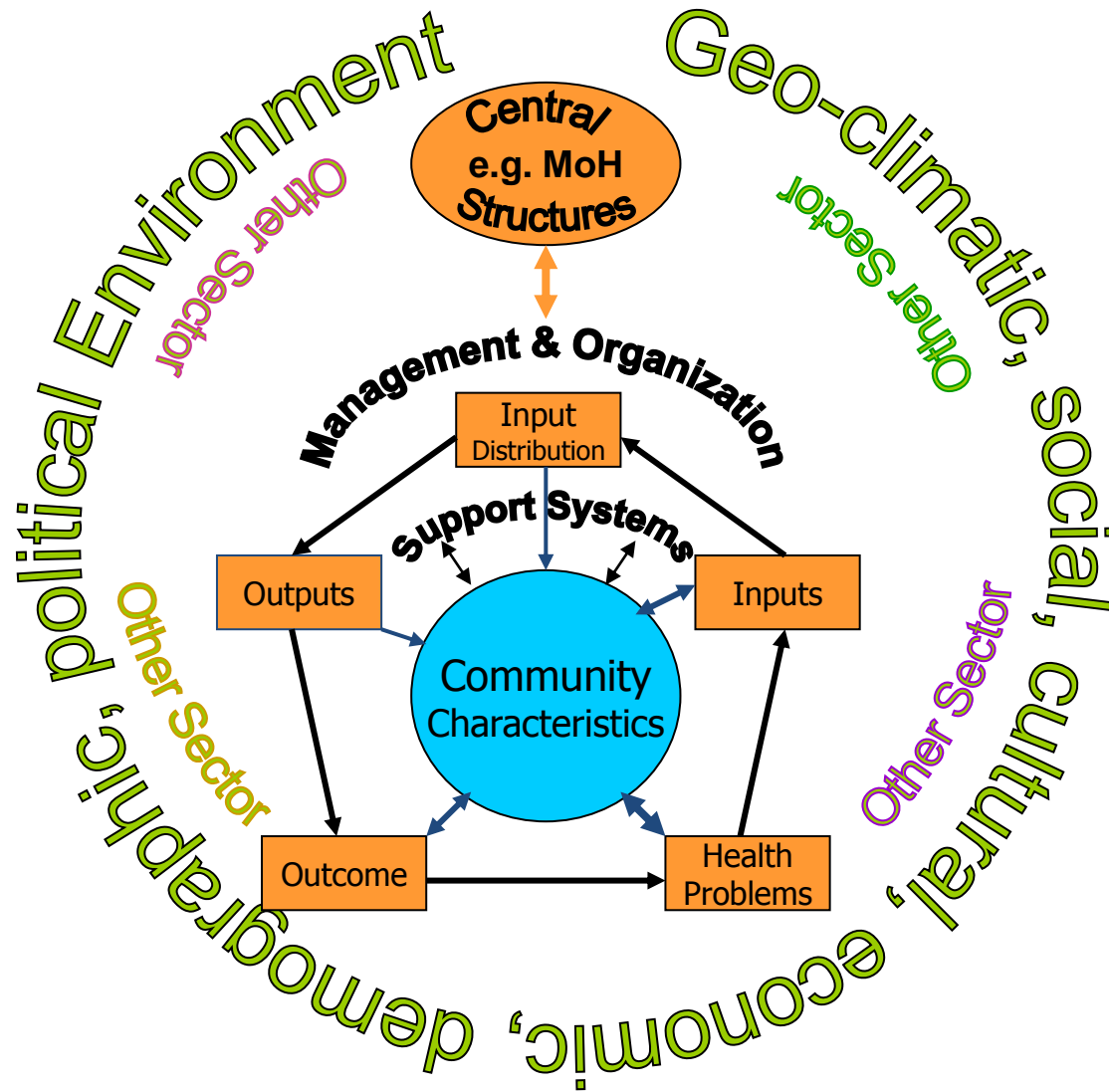
- **Objective:** to evaluate and improve the functioning of the VBMP at rural Nias
 - To assess the potential determinants of VMs' performance in delivering VBMP
 - To assess the potential determinants of community acceptance, participation, and utilization of VBMP
- **Purpose:** finding out how to develop an effective MOA of VBMP and improving VMs' competence in performing their duties, will assist on improving and strengthening the rural health system.



Methodology

FLOW OF THE STUDY

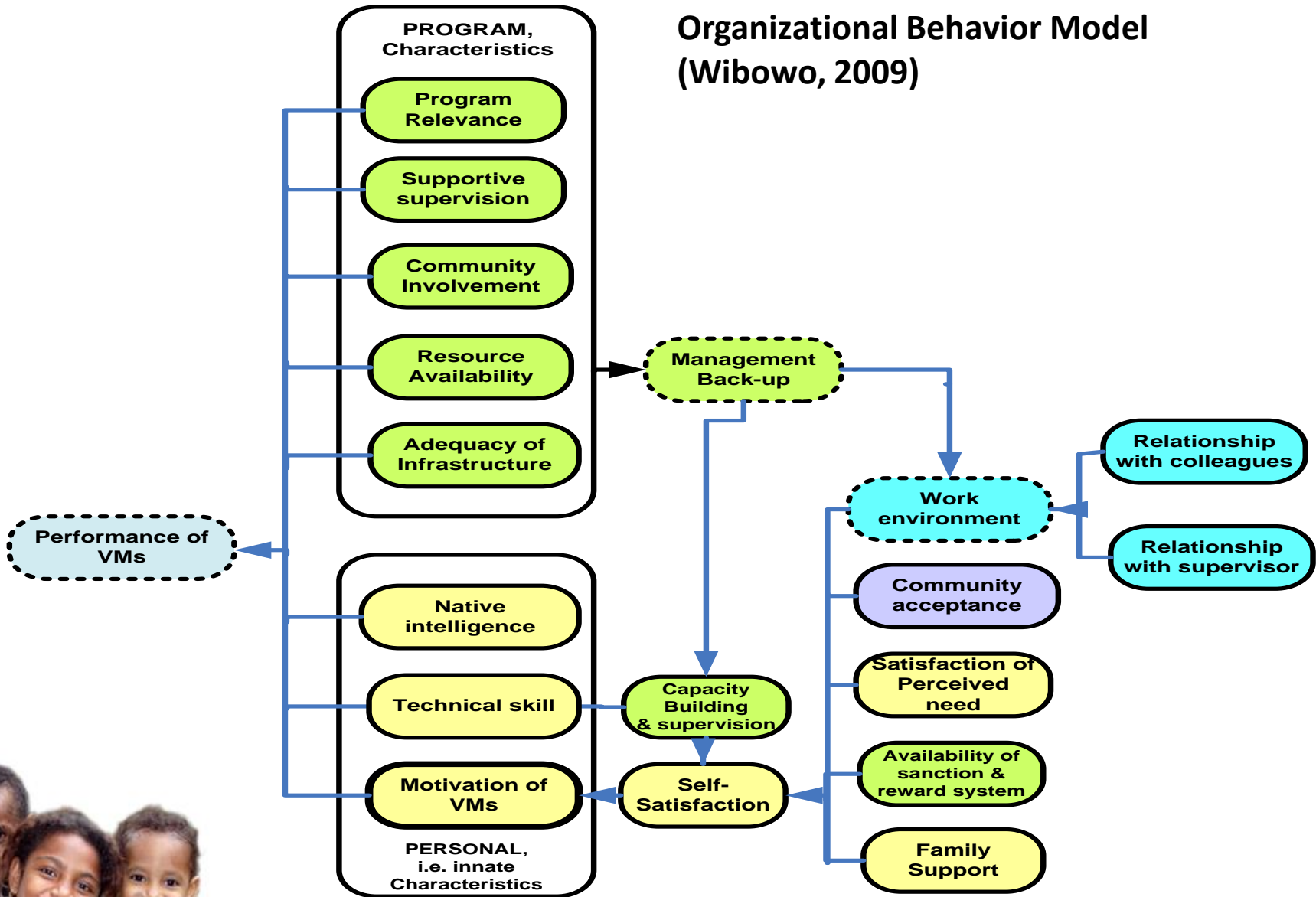




Health System Model (Kielmann, 2008)



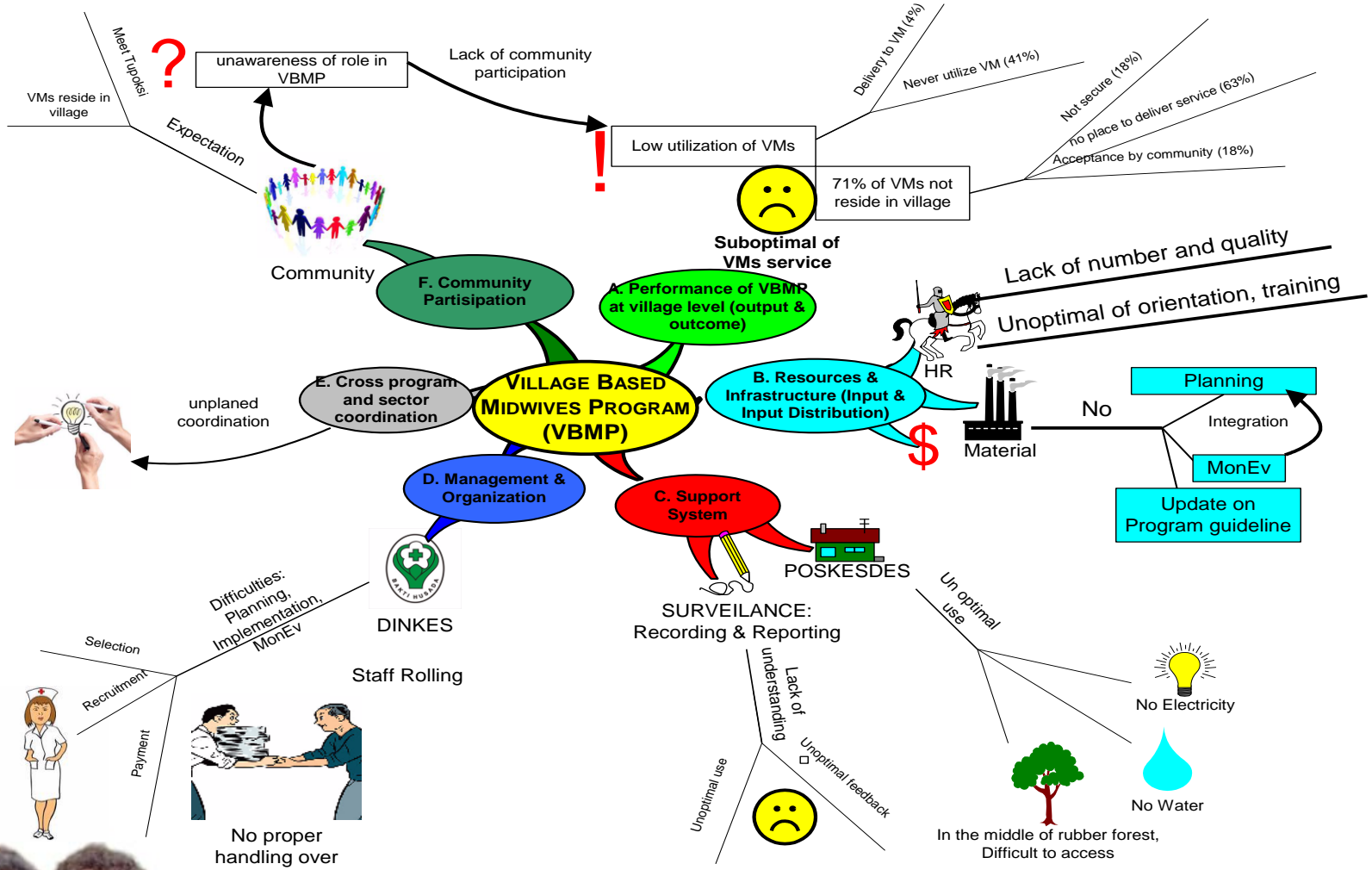
Organizational Behavior Model (Wibowo, 2009)



- **Quantitative:**
 - Census for mother of children 0 – 3 mo (N=44) and VMs at 3 sub districts (N=24).
- **Qualitative:**
 - In-depth interview:
 - 7 mothers of children 6 – 9 mo,
 - 7 VMs,
 - 7 cadres,
 - 7 head of villages,
 - 5 Health Center (HC) staffs and
 - 6 district health office (DHO) staffs.
- This study followed the ethical guideline of the Council for International Organization of Medical Sciences (CIOMS, 1990) and received ethical approval from Faculty of Medicine, University of Indonesia, Jakarta, Indonesia.



Findings of Study



Conclusion

- Two major problems:
 1. Poor comprehension of the pre-designed VBMP master plan by those at the district level
 2. Inexistence of its detail operational plan prepared by the DHO



Recommendation

- *With respect to the VBMP functioning:*
 1. Improving the overall management and MonEv system at all administrative levels through periodic advocacy for policy makers and any relevant stakeholders to ensure their performance quality.
 2. Improving the internal management and MonEv system at district level and HC through periodic advocacy and capacity building for staff to ensure their performance quality.
- *With respect to community acceptance and participation:*
 1. Optimizing the utilization of VMs as the spearhead of MCH Care at the village level.
 2. Optimizing the community mobilization within the VBMP.

