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UTS:CHINA RESEARCH CENTRE

China's Rural Health Governance: the case of maternity care

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Factors influencing policy formation and implementation of health policy in China

- **Economic/financial considerations** (central & local health budgets, incentives for health care providers, state capacity)
- **Political and ideological considerations** (values that shape the welfare system; power struggles with the CCP leadership and amongst government departments)
- **Social considerations** (concerns over social instability brought about by growing inequalities; maintaining a healthy workforce; building a 'harmonious society')

Policy change over the last 3 decades

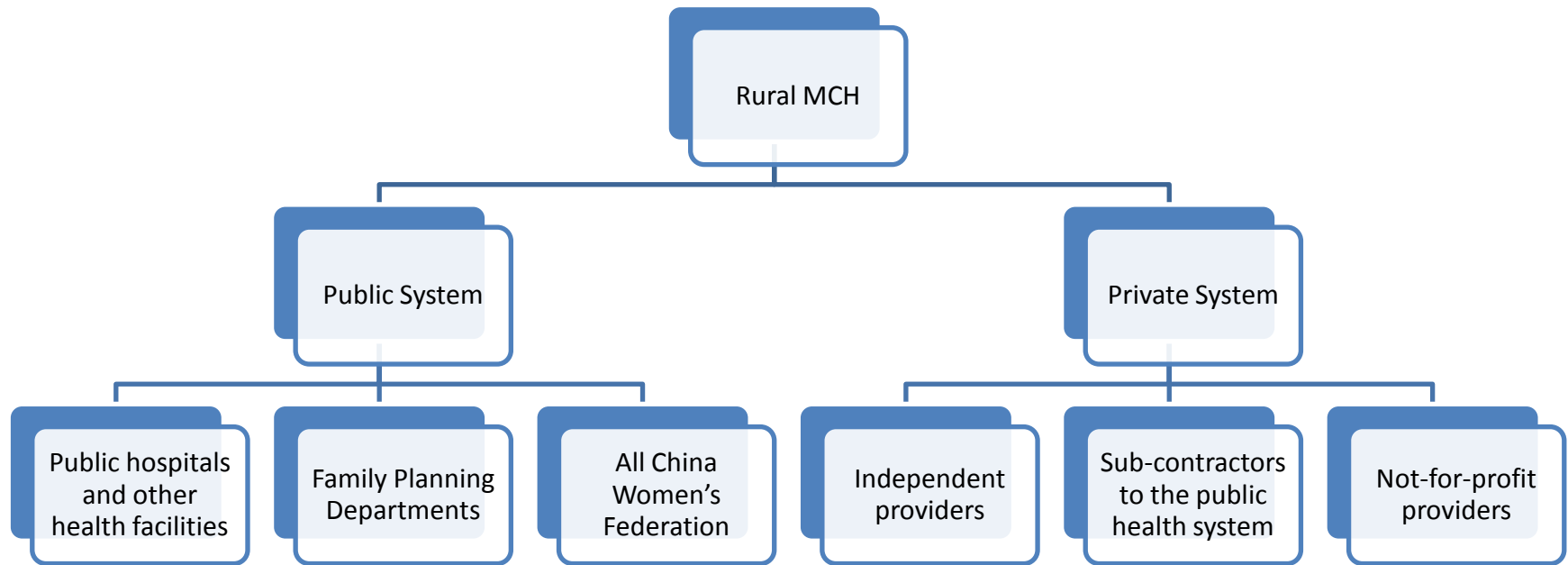
1980s-early 2000s

- Significant reduction of government funding for public health
- Dismantling of rural health risk protection system (CMS)
- Privatization of rural health
- Move towards a fee-for-service system
- Introduction of the One Child Policy
- Increased used of ultrasound and caesarean sections (partly revenue-raising strategies)
- Negative consequences for MCH

2003-2011

- Health system in crisis: few able to afford care; health risk protection underdeveloped
- Medicalisation of health and over-prescription of drugs (prescription and dispensation controlled by health providers)
- Implementation of a new rural CMS and basic medical insurance system
- Realignment of incentives for health-care providers
- Role of private providers not spelled out in policy (diverse patterns of medical organizations)
- Foster co-operation between government departments (Health, family planning, ACWF)
- Policy proposal: to provide free hospital delivery for all women

Mapping out China's rural MCH



Research Hypothesis

Using rural maternity care, this project hypothesises that given the high level of privatization of China's rural health, and in order to achieve a more efficient and affordable provision of medical services the government will need to engage and better regulate private health providers, while fostering collaboration between its own departments, which are currently separately providing maternity services (i.e. health and family planning).

Significance

- Limited empirical research on China's rural health governance, particularly of the role of private provision
- Lack of qualitative analysis of rural women's experiences accessing maternity care
- Need for interdisciplinary research that takes into consideration the wider social, political and economic factors influencing health seeking behavior

Policy Implications

- An examination of the balance of public-private provision of maternity services will help understand the consequences of changing delivery patterns in rural maternity care on women's health and their reproductive decisions,
- While elucidating changes in the values and norms shaping China's welfare provision