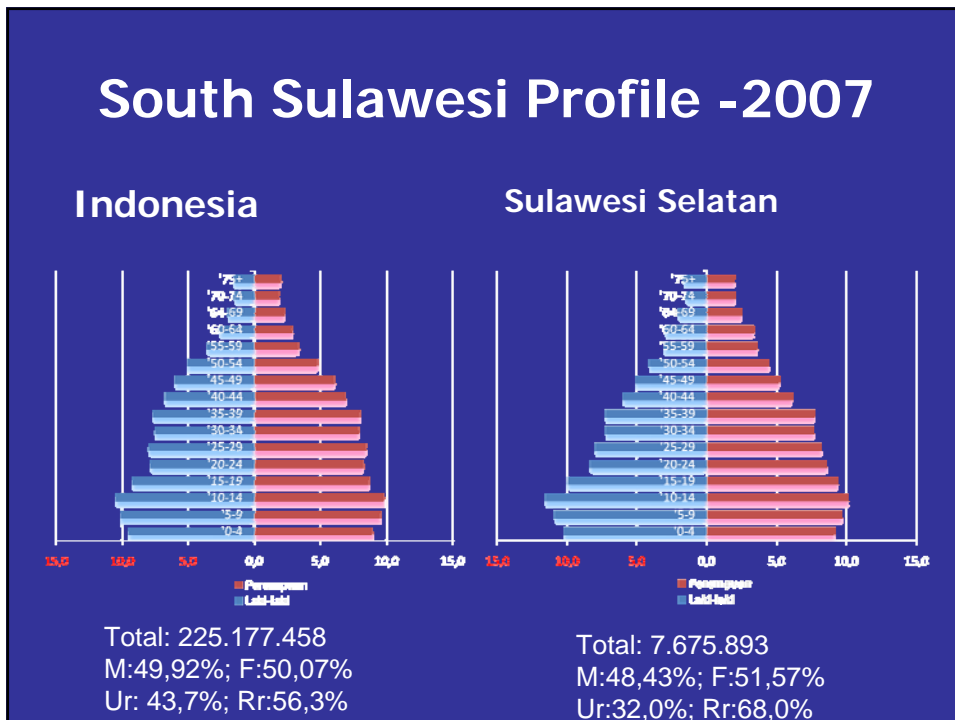


ACCESSIBILITY AND UTILIZATION OF HEALTH CARE INSTITUTIONS IN SOUTH SULAWESI, INDONESIA

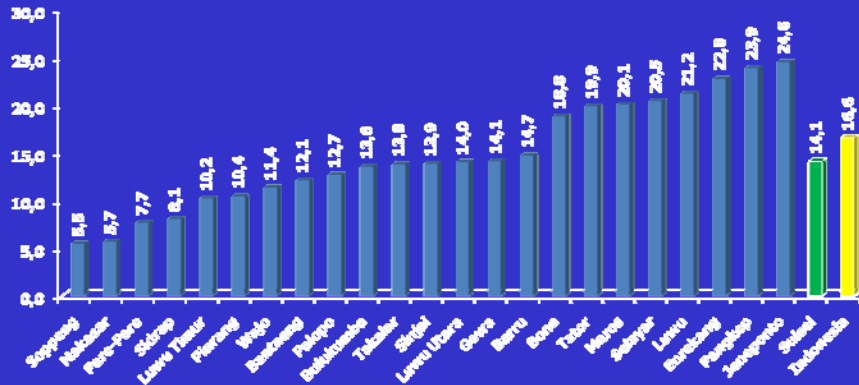
**Veni Hadju
Faculty of Public Health,
Hasanuddin University, Makassar,
INDONESIA**

**Welcome to Faculty of Public Health
Hasanuddin University
Makassar, INDONESIA**







Percentage of Poverty in South Sulawesi by District



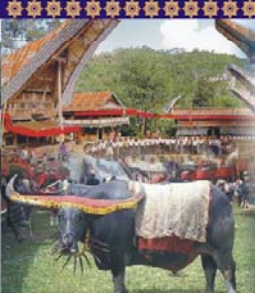



BPS: Poverty analyses 2007





LAPORAN HASIL RISET KESEHATAN DASAR
RISKESDAS
PROVINSI SULAWESI SELATAN
 TAHUN 2007

DEPARTEMEN KESEHATAN REPUBLIK INDONESIA
 JAKARTA, TAHUN 2008

Basic Health Research 2007

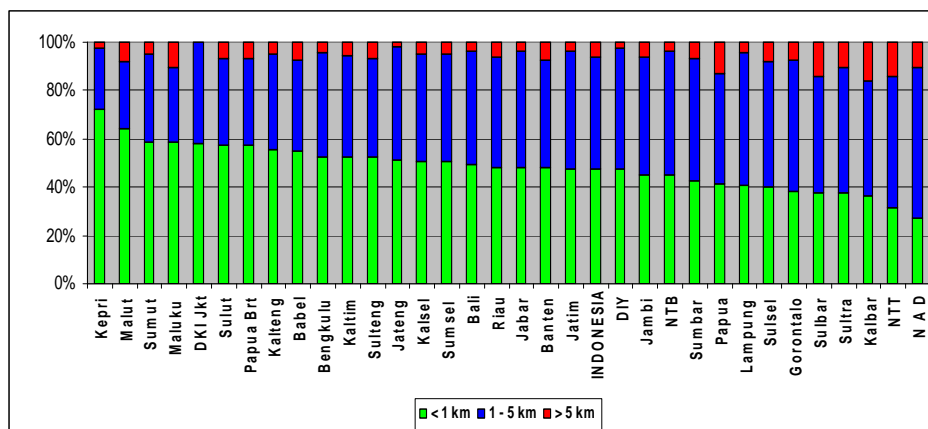
- A community-based research in the level of Sub-district to describe all health information including biomedical.
- A cross-sectional design covering all provinces and districts in Indonesia.
- Sample was 276.484 households and around 1.107.212 Individual.

ACCESSIBILITY OF HEALTH CARE INSTITUTIONS

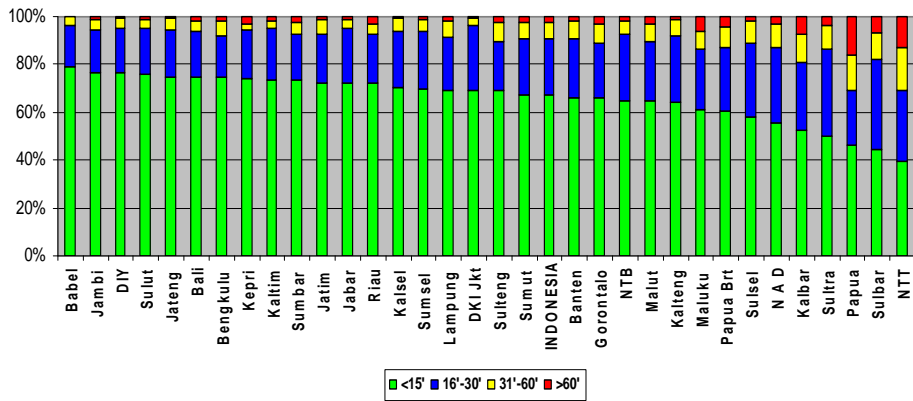
Health Care Facilities

- Health Care Facilities (at district and subdistrict level)
 - Hospital
 - Puskesmas (Primary Health Center=PHC)
 - Pustu (Sub-PHC)
 - Clinic (Private physician and Midwife)
- Community-based Health Care Facilities (CBHC; at villages and sub-villages level)
 - Posyandu (Integrated Health Post)
 - Poskesdes (Village Health Post)
 - Polindes (Village Delivery House) or midwives place

Distance to Hospital, Puskesmas (PHC), Sub-PHC, Physician, and Midwife

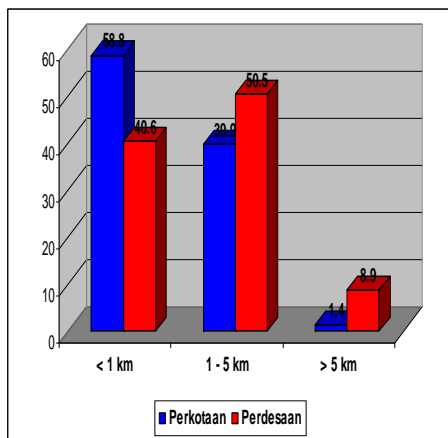


Time to Hospital, Puskesmas (PHC), Sub-PHC, Physician, and Midwife

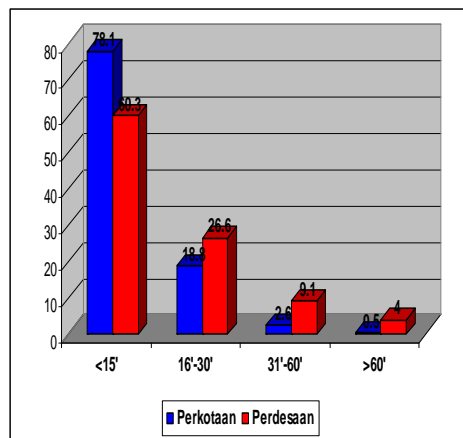


Accessibility to Hospital, Puskesmas (PHC), Sub-PHC, Physician and Midwife according to areas

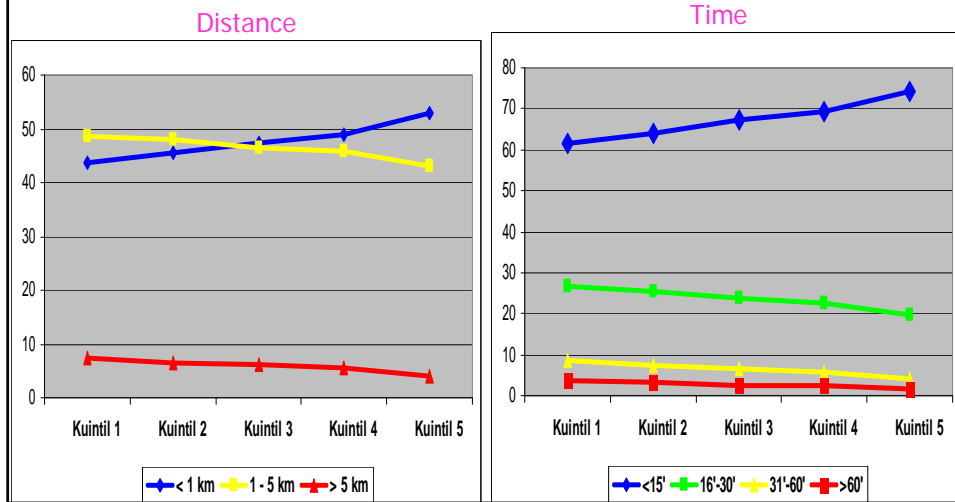
Distance



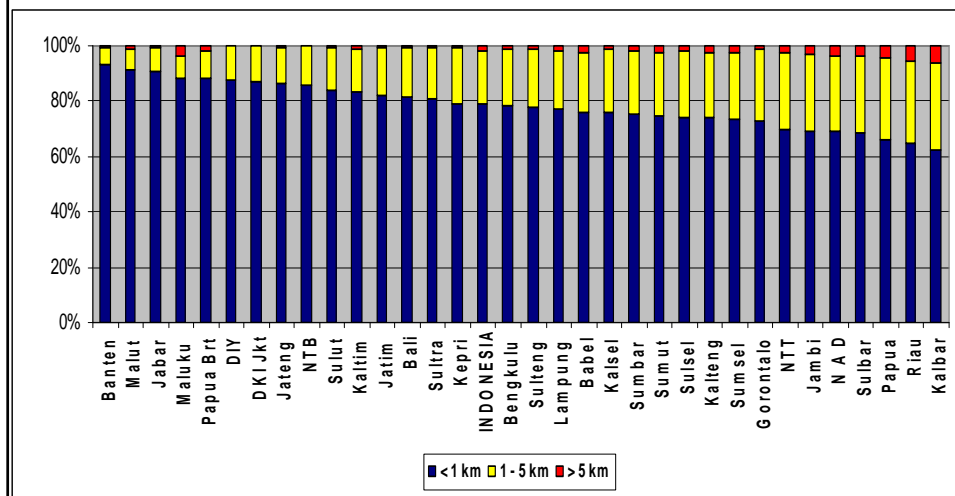
Time



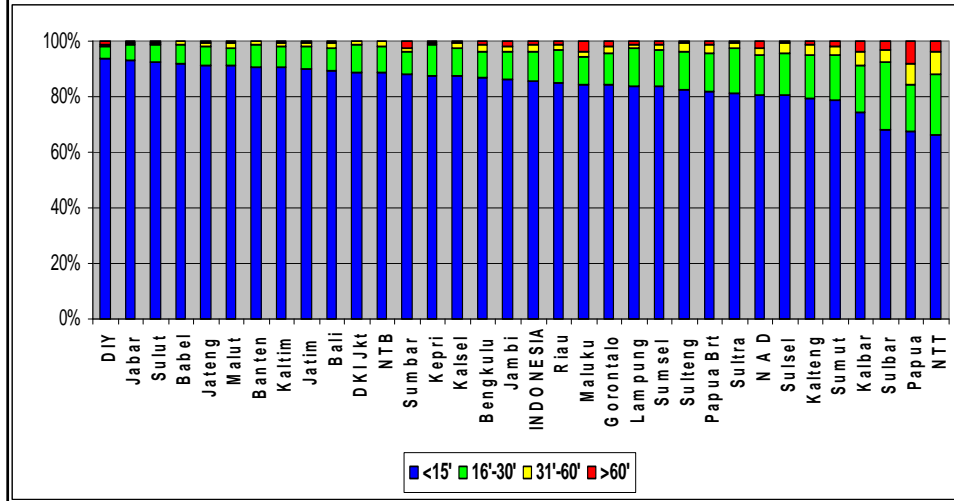
Accessibility to Hospital, Puskesmas (PHC), Sub-PHC, Physician and Midwife according to expenditure



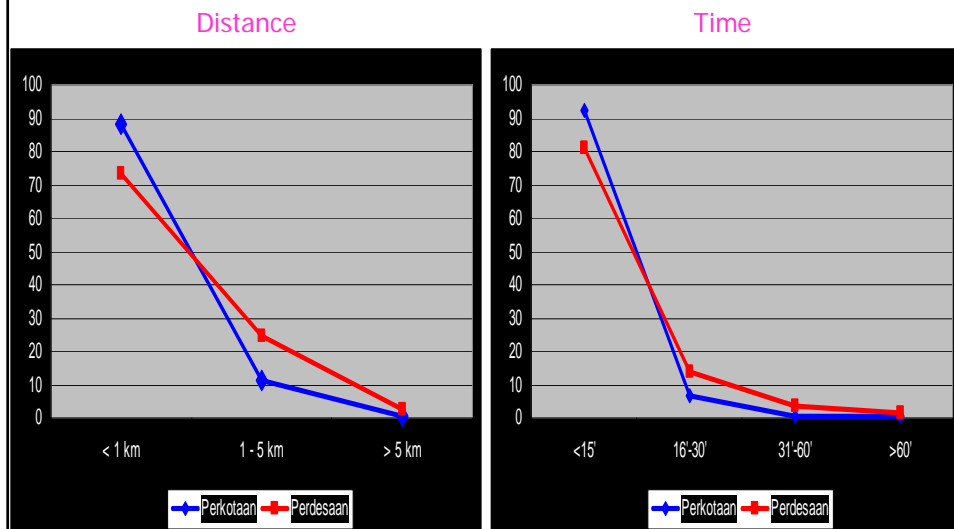
Distance to Posyandu, Poskesdes, Polindes/Midwife



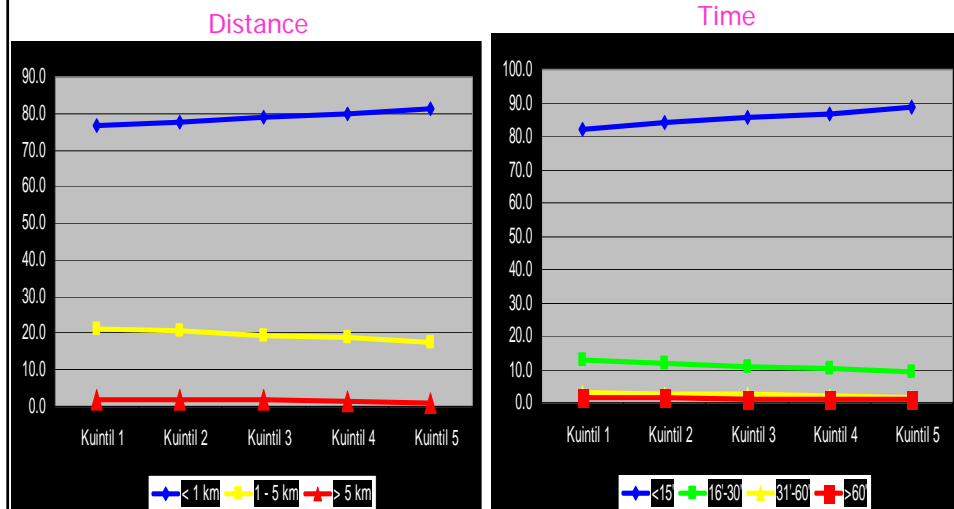
Time to Posyandu, Poskesdes, Polindes/Midwife



Accessibility to Posyandu, Poskesdes, Polindes/Midwife according to areas

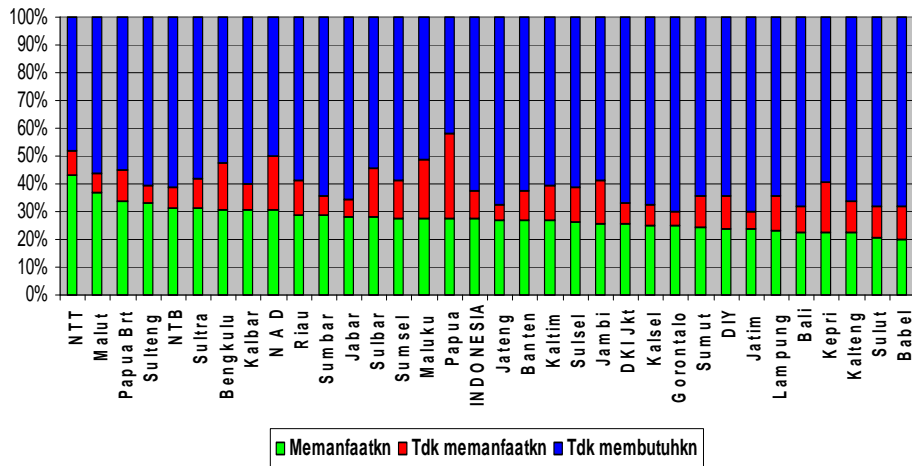


Accessibility to Posyandu, Poskesdes, Polindes/Midwife according to expenditure

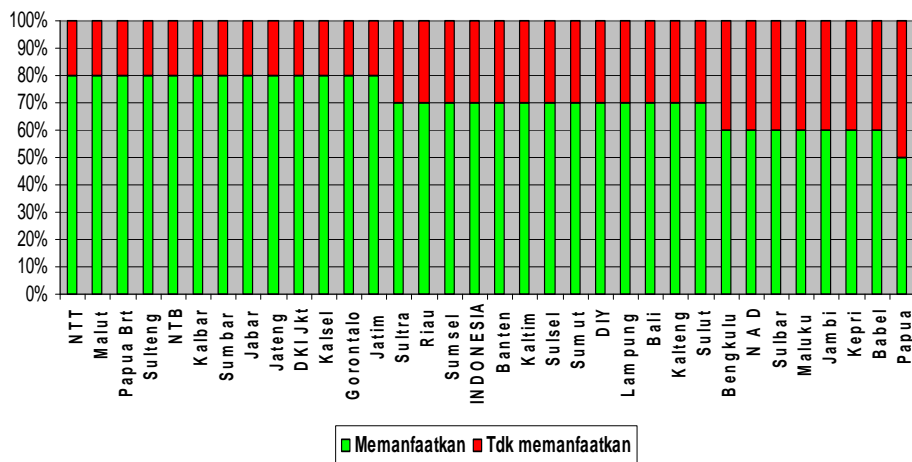


UTILIZATION OF HEALTH CARE INSTITUTIONS

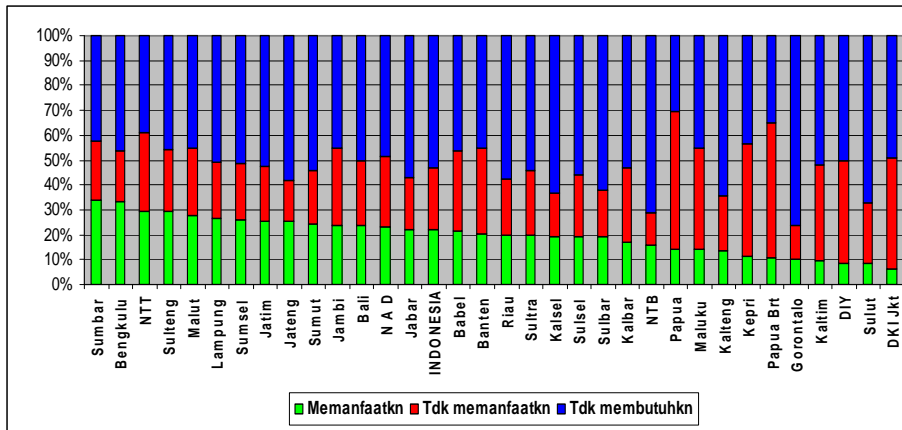
Utilization of Posyandu/Poskesdes



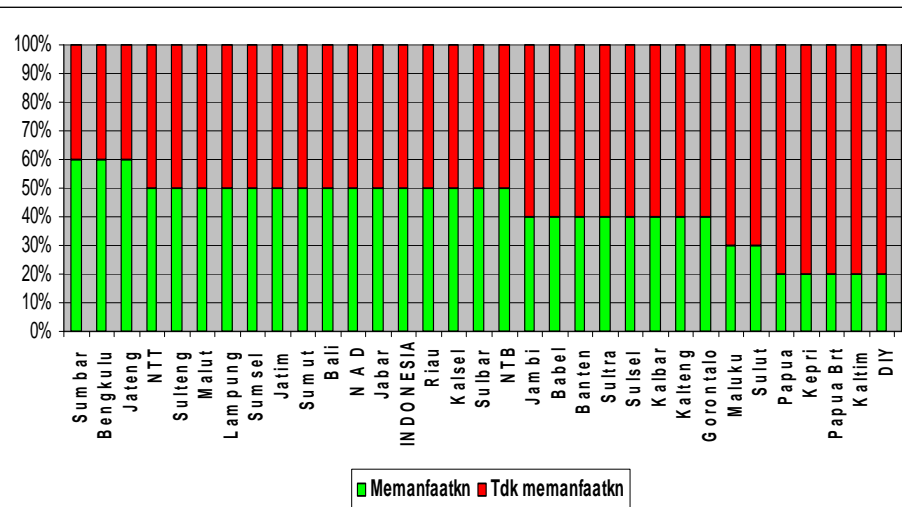
Utilization of Posyandu/Poskesdes



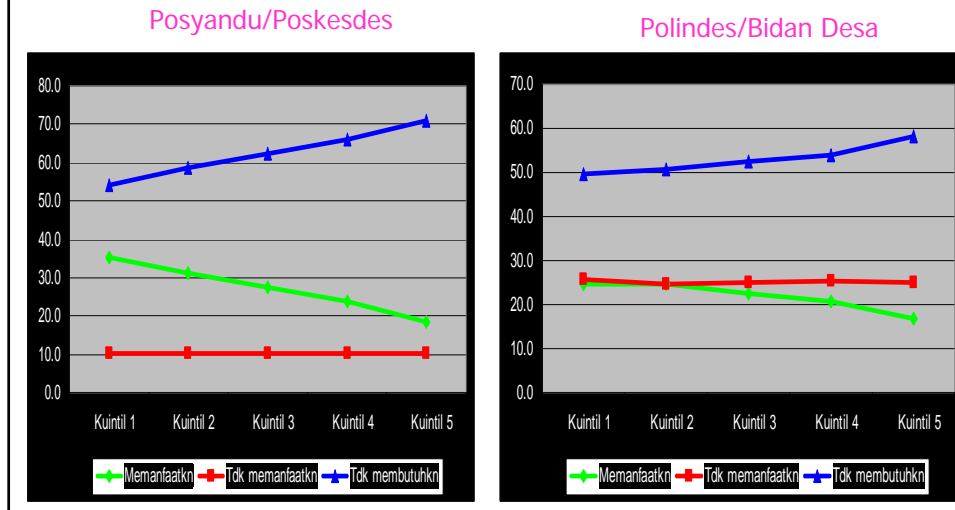
Utilization Polindes/Midwife



Utilization Polindes/midwife



Utilization of Health Care Services according to expenditure



Conclusion

- Accessibility and utilization of health care facilities in South Sulawesi were lower compared to national level.
- Accessibility is higher in urban compared to rural areas. It also differed based on expenditure.
- Utilization of Posyandu/Poskesdes was mostly child weighing and immunization. Only 10% household visited Polindes/Midwife for delivery, post partum, and neonatal exam.
- People did not go to the facilities mostly because of inadequate facilities and far from their houses.

