

April 12 - 13, 2007 | Best Western Resort Country Club | Gurgaon, India

Demand-side financing of Services: Medical perspectives

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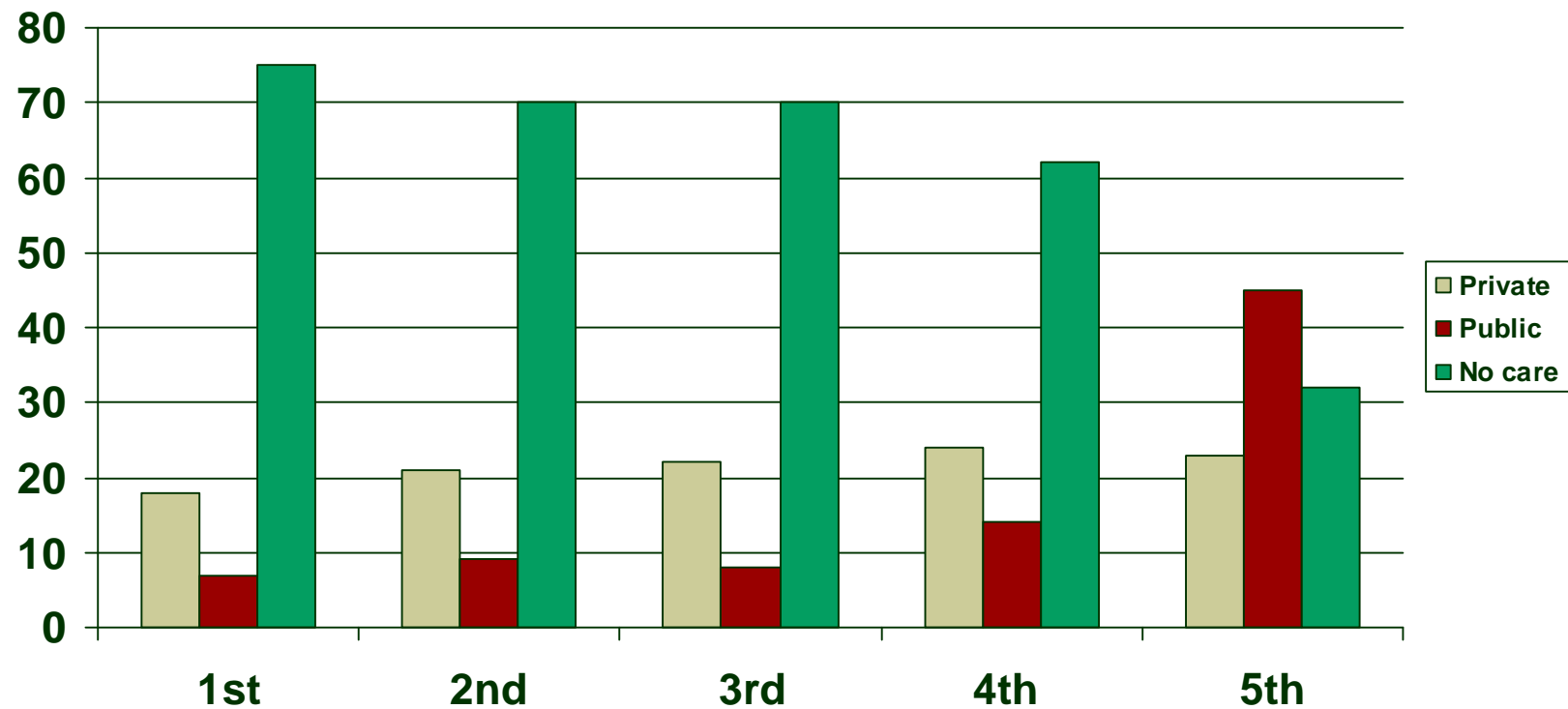
The medical infrastructure in low resource settings is:

- **Inadequate**
- **Overloaded**
- **Uneven quality**

The medical infrastructure is inadequate

- **but often underutilized!**
- *OBA has the potential to improve access by mobilizing the private and the faith-based sectors, as well as MoH services.*
- *OBA establishes equitable access to MoH services when these are underutilized because of high costs to patients.*

Use of public and private health care by economic quintile (1st poorest) Mozambique, diarrhea diseases



The medical infrastructure is overloaded

- **OBA permits basic services to be targeted in an equitable way so any person, however poor, has access to a basic health intervention, such as safe delivery or long acting contraception.**

ICPD Programme of Action

Action 8.22

- **All countries . . . must expand the provision of maternal health services in the context of primary health care. These services, based on the concept of informed choice, should include education on safe motherhood, prenatal care that is focused and effective, maternal nutrition programs, adequate delivery assistance that avoids excessive recourse to caesarian sections and provides for obstetric emergencies; referral services for pregnancy, childbirth and abortion complications; post-natal care and family planning. All births should be assisted by trained persons, preferably nurses and midwives, but at least by trained birth attendants. . . Adequate monitoring and evaluation . . . Programmes and education to engage men's support of maternal health and safe motherhood should be developed.”**

The Return of the Population Growth Factor. UK Parliament 2007

- **“Ten percent of the worlds maternal deaths occur in Nigeria, and while two thirds of women received antenatal care only one third were attended by a trained person, and that percentage is likely to fall as the number of women of fertile age rises form 31 million today to 45 million in 2015.**

The medical infrastructure is uneven quality

- *Top down efforts to improve quality are difficult to achieve and erode rapidly even if initially successful. OBA empowers the poorest person to make choices and improvements in quality are driven from the base.*

Impact of vouchers on voluntary family planning in Taiwan

Year	Total	Private	Government
1974	7,250	na	na
1975	16,686	na	na
1976	33,499	34,629	3,948
1977	38,692	35,156	3,593
1978	48,496	na	na
1979	51,807	na	na

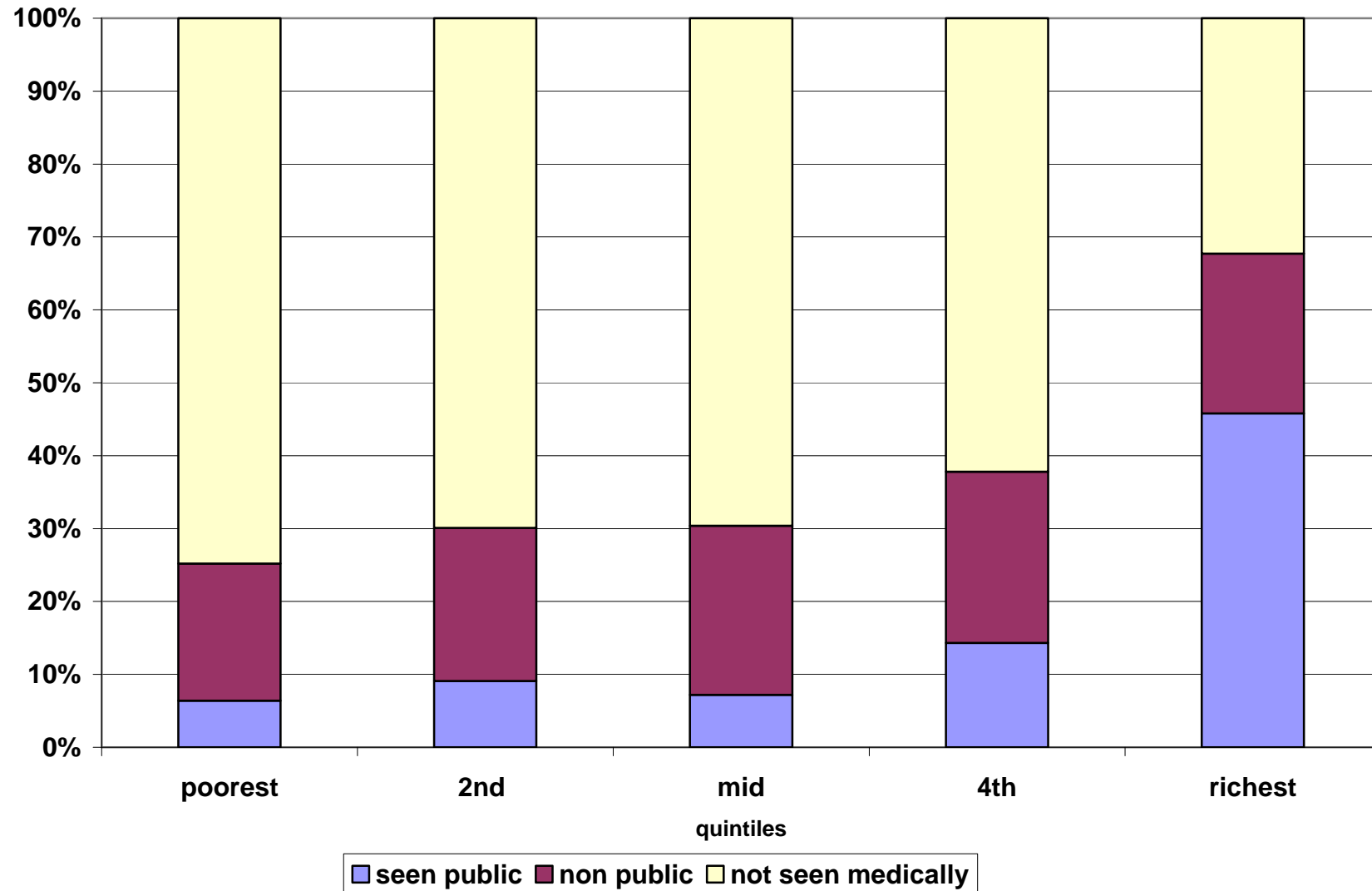


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Thank you

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Health seeking behavior for diarrheal diseases in rural Mozambique.



Percentage total household income spent on health care

Country	Mean expenditure (%)
Bangladesh	5.1
India	4.8
China	4.1
Vietnam	5.5
Nepal	2.8
Philippines	1.9
Thailand	1.7

Van Doorslaer et al. *Lancet* **368**:1357-1364. 2006