



# **Does quality of delivery care differ between public and private health facilities in Madhya Pradesh, India?**


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# Indian situation

- Largest contributor to global maternal deaths
- Cash incentive program *Jannani Suraksha Yojana* (JSY) pays incentive to women on delivery at health facility
- Recent surge in facility births : Facility births increased from 34% in 2005 to 75% in 2013

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- Quality of care during facility births is hence crucial to better outcomes
  - Encouraging evidence on proportion of facility births but scarce literature on quality of facility births

- **Quality is a multidimensional concept**
- **Varying perspectives and methods of assessing QoC: technical, functional, managerial**
- **User experiences and views are important dimension of quality**
- **Highly technical elements of care are difficult to assess through user experiences, but some elements can be assessed so**
- **Exit interviews is a popular method to study user experiences**

- **Exit interviews method to assess delivery care practices at facility in Madhya Pradesh(MP) state of India**
- **MP is a central Indian state with poorer health indicators than national averages**
- **High proportion of facility births (80%) and majority are in public facilities**

# Methods

**Study area:** Three heterogeneous districts of MP

**Design:** Facility based cross sectional study

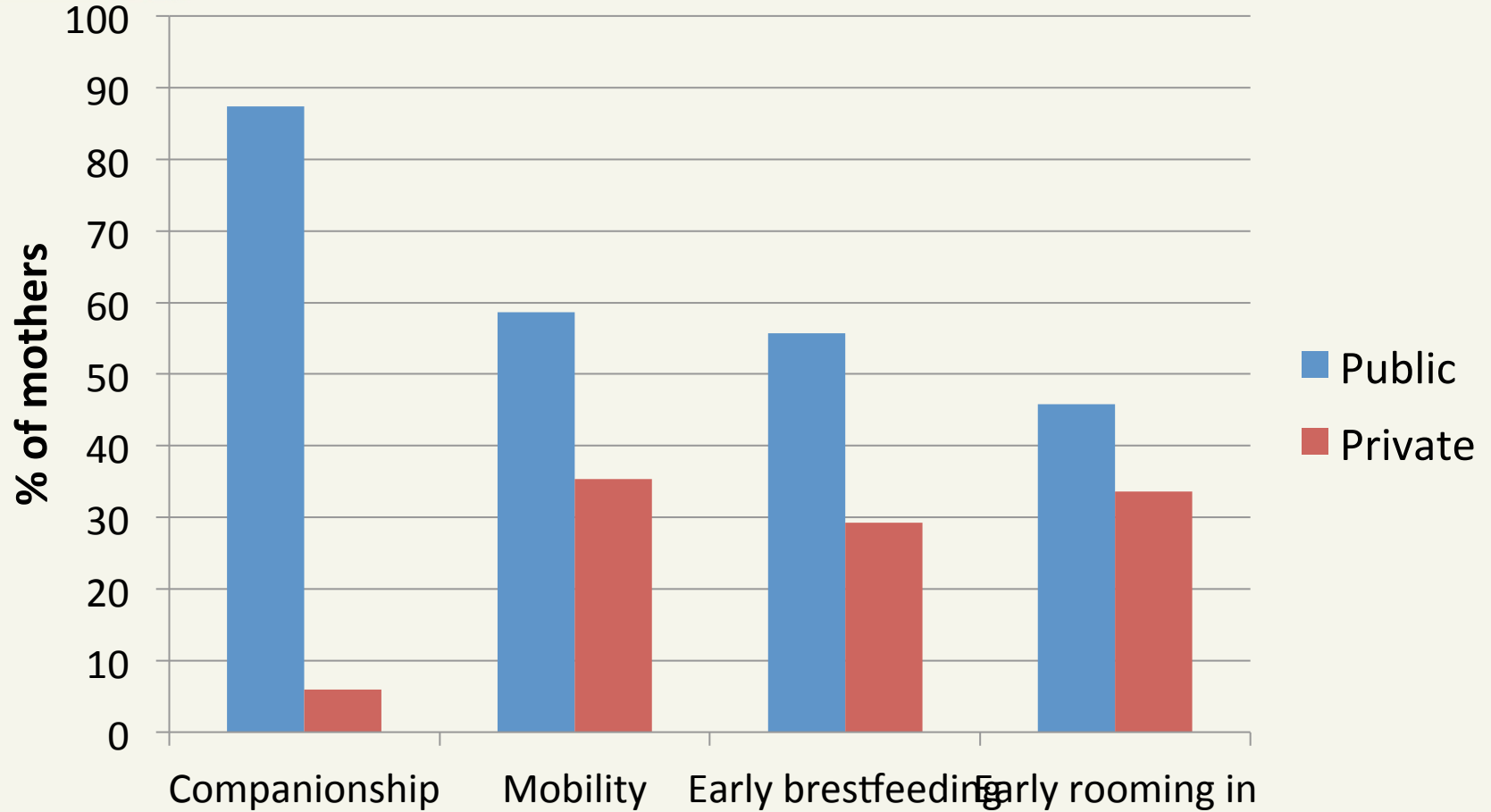
**Study facilities:** All facilities conducting min 10 deliveries/month  
(n=96 (73public +23 private))

**Respondents:** Women delivered at facilities during 5 days,  
interviewed at the time of discharge after delivery  
(n=997 (Facilities: Public 881 + 116 Private))

# Measure of quality

- **Selected practices of the WHO recommended standard delivery practices were assessed**
- **Following groups of practices were assessed:**
  - **Practices to be encouraged routinely**
  - **Practices to be discouraged routinely**
  - **Practices potentially harmful**

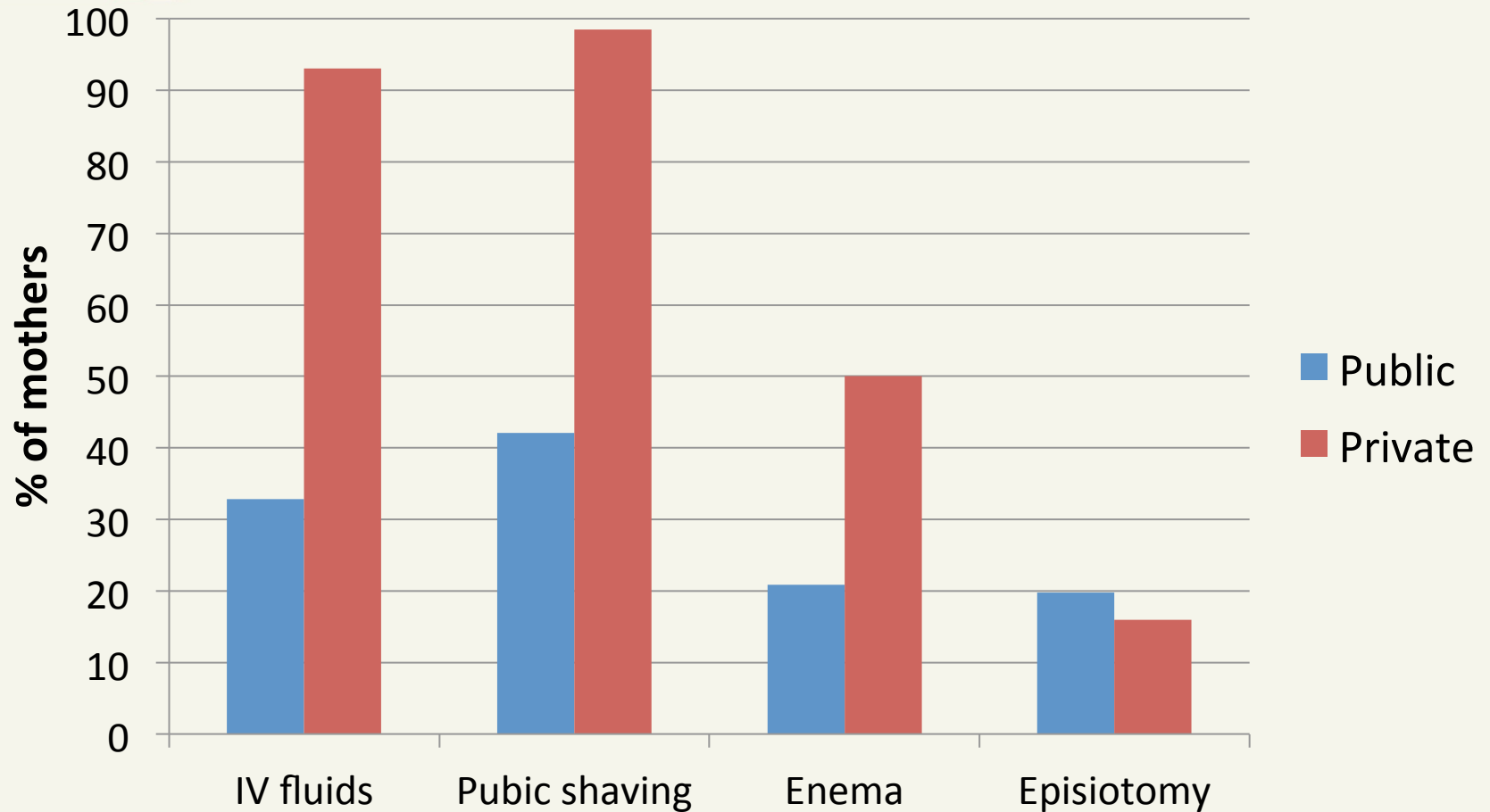
# Practices to be encouraged routinely



**More prevalent in Public facilities**

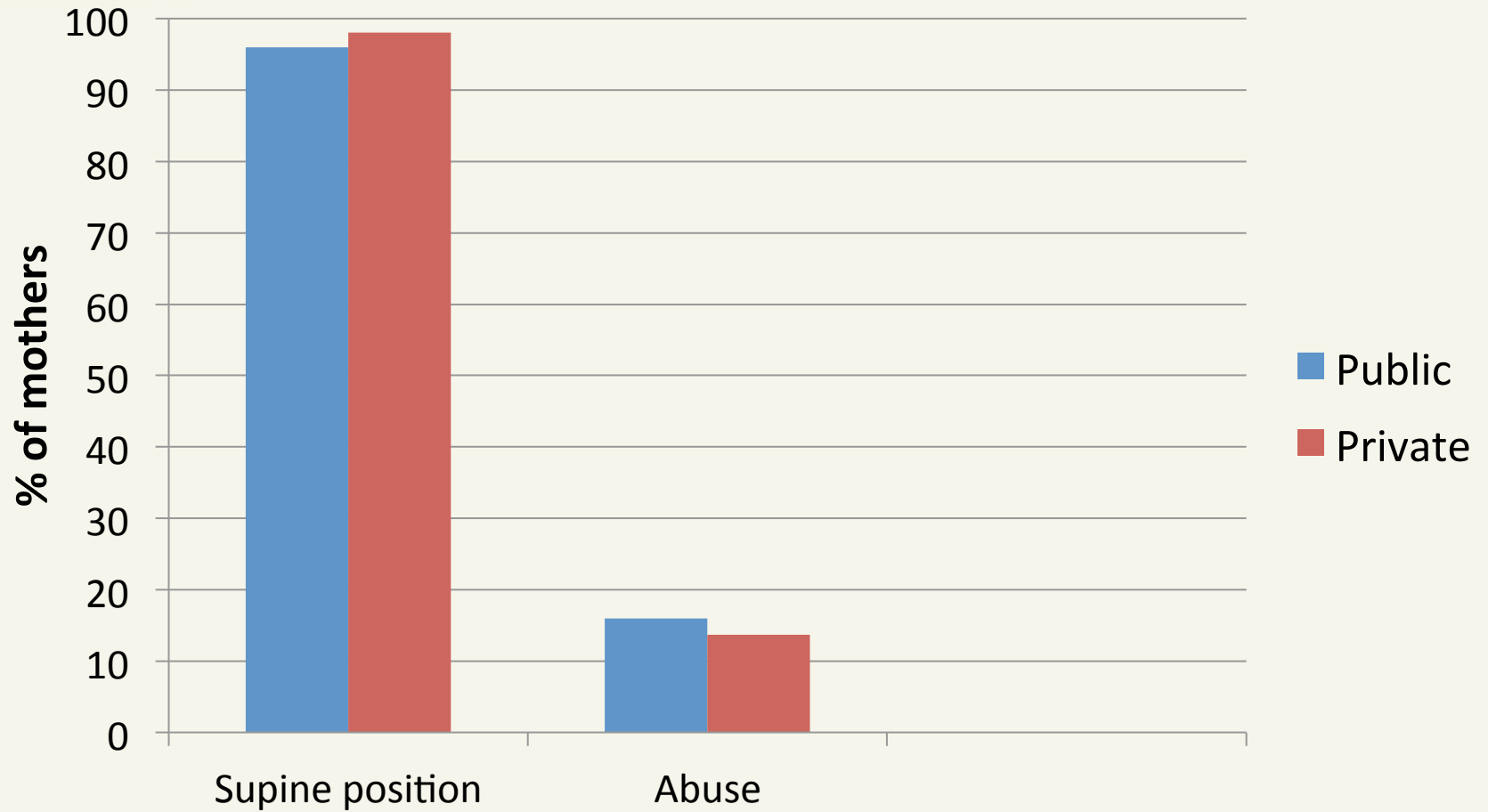


# Practices to be discouraged routinely



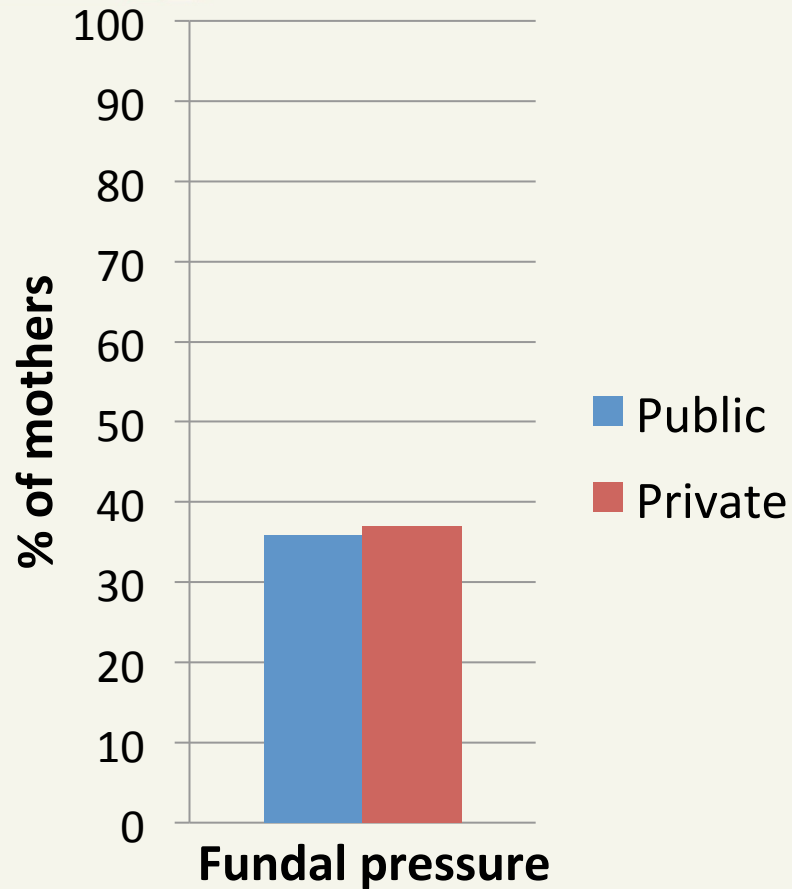
**More prevalent in Private facilities**

# Practices to be discouraged routinely



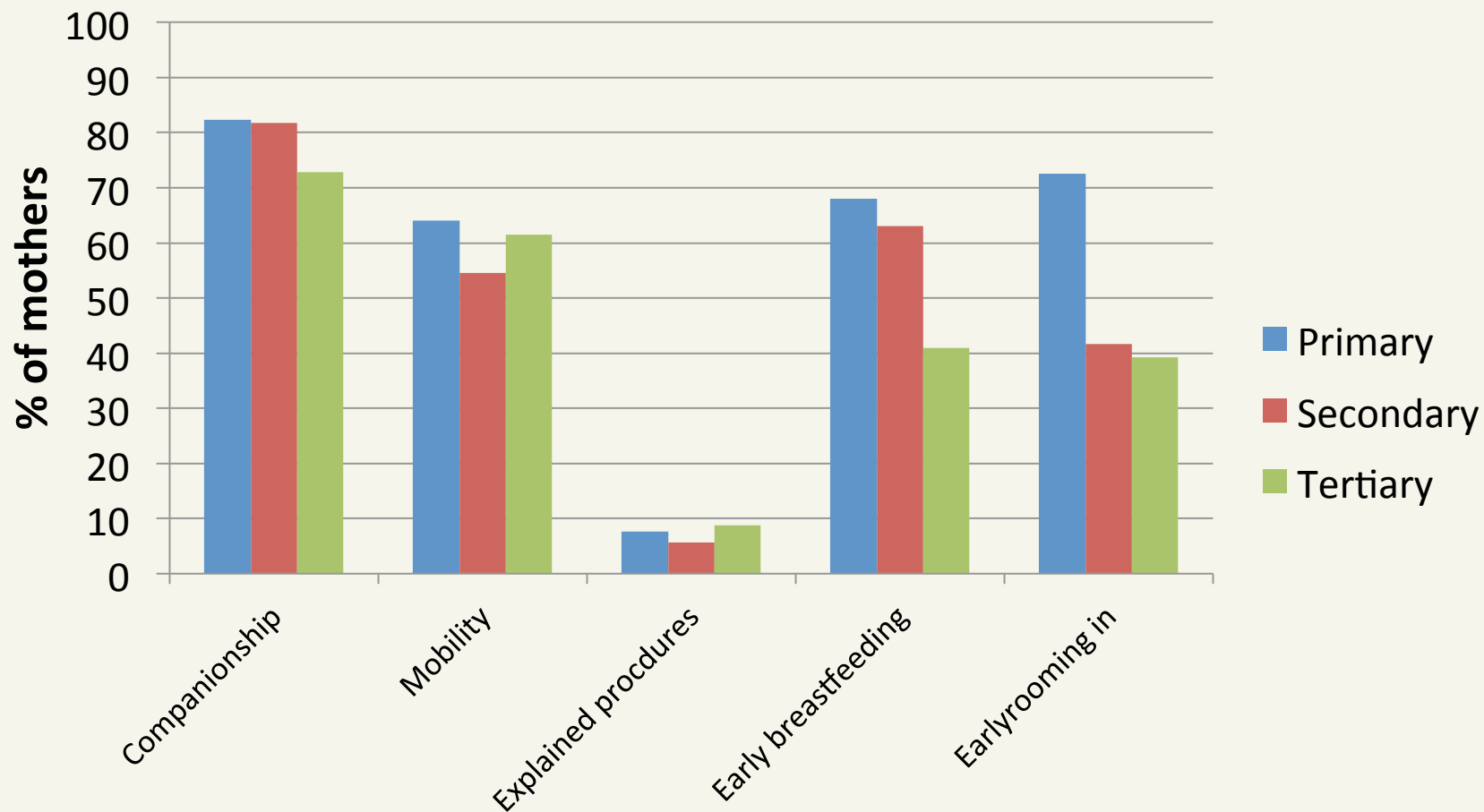
Practices not significantly different among public and private

# Potentially harmful practice

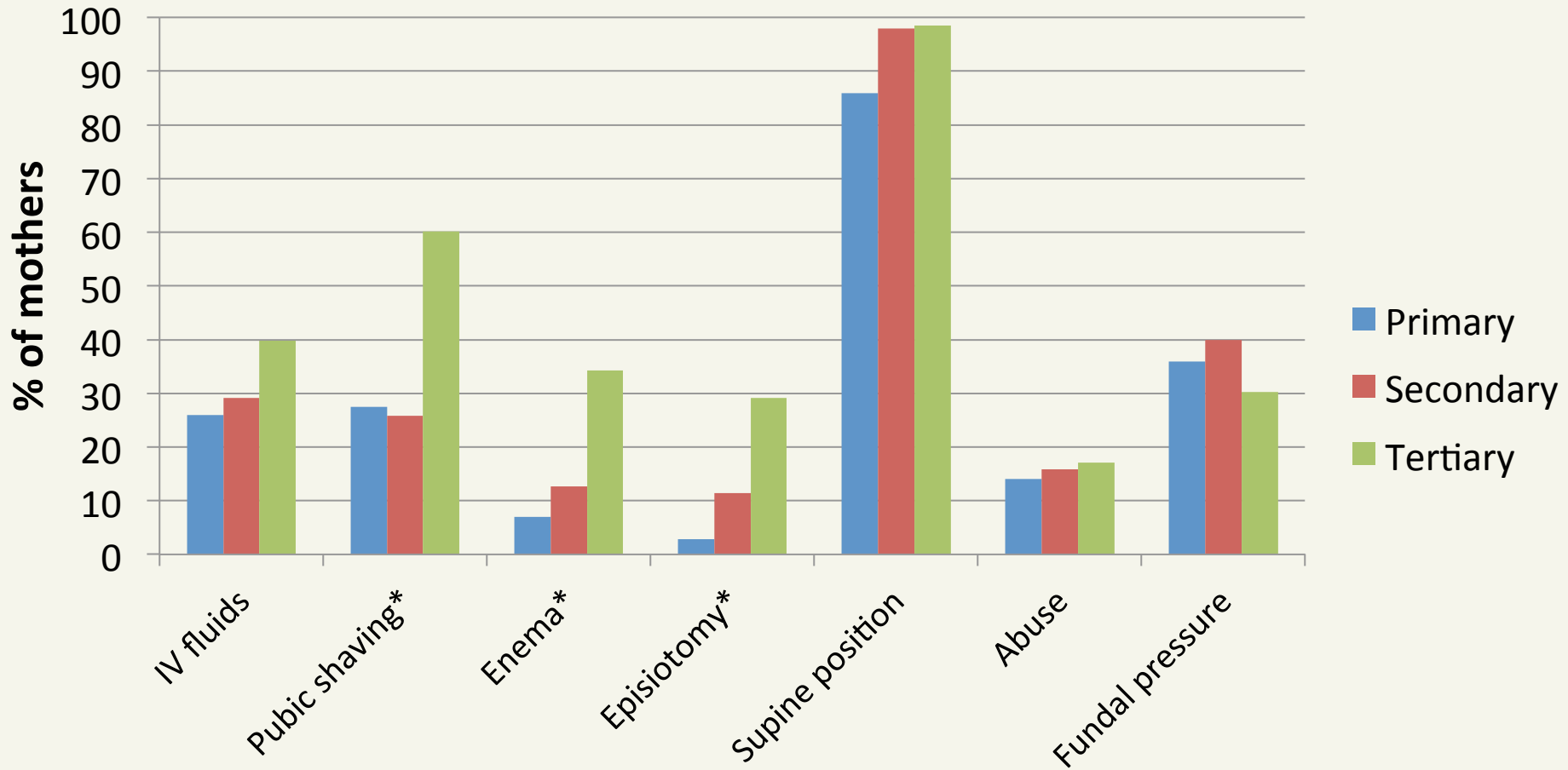


Fundal pressure was similarly prevalent in public and private facilities

# Practices to be encouraged routinely



# Practices to be discouraged routinely



# Conclusions

- Practices to be encouraged routinely are more prevalent in public facilities in MP
- Practices to be discouraged routinely are more prevalent in private facilities
- Practices do not differ by level of public facilities
- **Quality of routine delivery care in public facilities is better than in private facilities in MP, both need considerable improvement**

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THANK YOU