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Indonesia: Coordinated studies are needed to access trends

Frontiers in Reproductive Health

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Indonesia
Institutionalization
of OR

Coordinated Studies Are Needed to Assess Trends

OR Summary 8

Longitudinal studies with consistent indicators and representative study populations are needed to identify changes in maternal and child health indicators.

Background

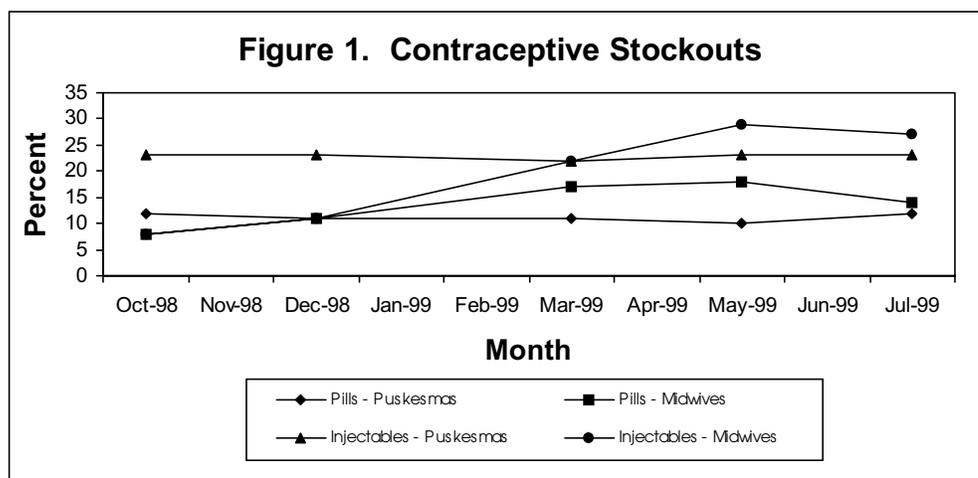
In 1999 the Population Council/Indonesia conducted a critical review of 11 Indonesian surveys and studies that measured various indicators of maternal and child health (MCH) between 1996 and 1999. Many of these studies tried to link these indicators with the nation's economic crisis, which began in July 1997. Council staff sought to explain how these studies came up with divergent findings.

Findings

- ◆ The timing of data collection activities and their geographical coverage are key factors leading to differences in findings.
- ◆ Data need to be disaggregated to the lowest level possible in order to ascertain differential

impacts across regions, among socio-economic and age groups, and by gender and urban/rural residence.

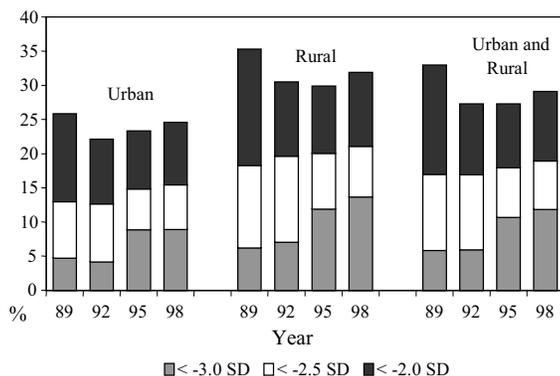
- ◆ Attributing changes in MCH indicators to the economic crisis may be misleading. Health and nutritional status appears to have been declining before the crisis began. The overall impact of the economic crisis may not be reflected in MCH indicators for several years.
- ◆ Family planning services experienced some disruptions during 1997-1999. The price of contraceptives rose in late-1997 and early 1998 and fluctuated greatly between mid-1998 and mid-1999. Clinics reported a significant increase in stockouts of contraceptives between 1997 and 1998. During October 1998 through July 1999 stockouts in primary health centers and at



midwives' clinics remained at relatively high levels (see Figure 1). Nevertheless, contraceptive prevalence and the number of health facilities offering contraception did not change significantly during 1997-1999.

- ◆ The incidence of sexually transmitted infections increased from 1997 to 1998, but it is unclear whether this trend is related to the economic crisis.
- ◆ The proportion of urban and rural children aged 6-17 months who were underweight – a sign of chronic malnutrition – was higher in 1998 than in 1995 (see Figure 2).

Figure 2. Percent of Children Aged 6-17 Months with Low Weight-for-Age, 1989-98



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Policy Implications

- ◆ Government and nongovernmental agencies, donors, and researchers need to coordinate the planning of key research studies to ensure that comparable and useful measures are developed.
- ◆ Program planners and other decision-makers must take into account the limitations of each dataset before making generalizations to a wider population or linking health indicators to socio-economic trends. They also need to understand that the various data collection methods have different advantages and disadvantages.
- ◆ To ensure that research findings are useful to program managers and planners, researchers should make sure that findings, research methodology and sample size are reported accurately and that indicators are comparable in time-series studies. In order to distinguish new trends from short-term fluctuations, researchers should analyze at least three data points and use trend analysis techniques. Tests of statistical significance are essential in order to identify true differences between groups.

Gardner, Michelle and Lila Amaliah, 1999. Analysis of Conflicting Crisis-related Research Results. For more information, contact: Population Council, Sanga Rchana, 53, Lodi Estate, 3rd floor, New Delhi, 110003, India; Tel. 91-11-461-10912; Fax 91-11-461-0912; E-mail: frontiers@pcindia.org; or Population Council Indonesia, Menara Dea Building, Suite 303, Jl. Mega Kunigan Barat Dav. E4.3, No. 1, Jakarta, 12950; Tel. 6221-576-1011; Fax: 6221-576-1013; E-mail: pcjkt@cbn.net.id.

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