

# Estimating the size of the unsubsidized private sector in Indonesia

Barbara Janowitz and Conrad Otterness APHA 2007 Annual Meeting Session: 5073.0 Policy Perspectives in International RH November 07, 2007





# Background: financial sustainability in doubt

- Declines in donor funding and limited local government funding
- Growth of private sector viewed as helping to solve problem
- But growth of private sector may not increase financial sustainability
  - NGOs included in private sector
  - Commercial sector may receive subsidies



## For Example:

According to the 2002/03 Indonesia DHS, 23% of women who got their IUDs in the private sector did not pay for the method



### Objective

 Develop and test a methodology to determine percentage of "private sector" FP clients who actually received unsubsidized services



### Methods

- Assumption : provider will not sell a product/service for which price < direct costs</p>
- Women that paid a price > direct costs = unsubsidized private sector
- Direct costs include provider time, contraceptives, drugs, supplies



#### Data

#### Direct Costs

- RH model: labor time for provision, counseling and salary data
  - Survey of earnings of midwives
- MSH's international drug price indicator: cost of contraceptives
  - But generics for implants and injectables available

#### 2. Prices

DHS provides data on price paid by method



### Calculation of direct costs

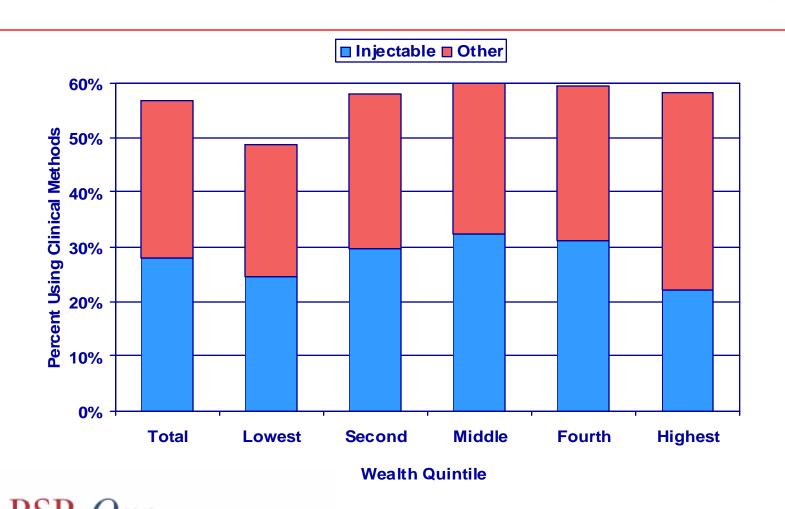
Direct cost of "average" visit

Estimate of X Cost per Labor time minute (in minutes)

- + cost of contraceptives
- + costs of supplies

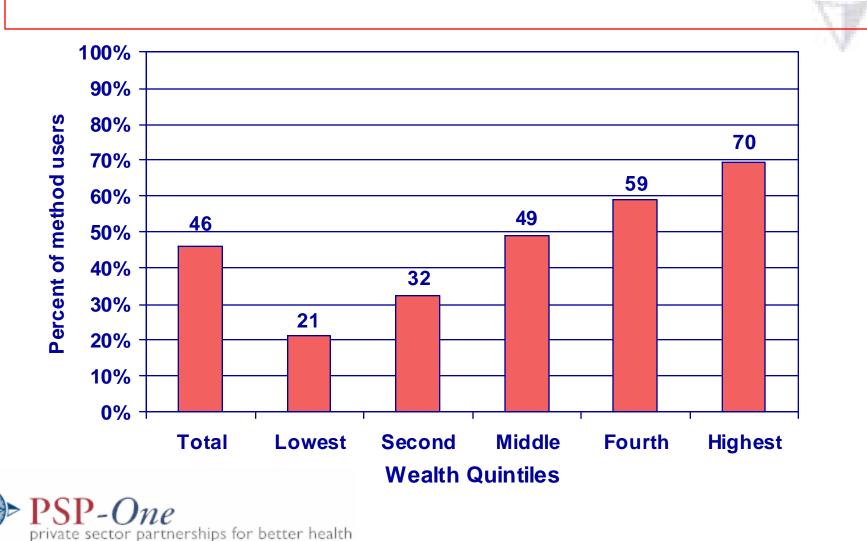


# Use of injectables and total modern method use among women in union in Indonesia by wealth quintile (2002/3)



rivate sector partnerships for better health

# Percent of injectable users that got their method in the private sector, by wealth quintile



### **Direct cost of injectable service**

Resource	Cost
Labor	
Nurse	\$0.35
Supplies	
Contraceptive method	\$0.55
Other	\$0.11
Total	\$1.01

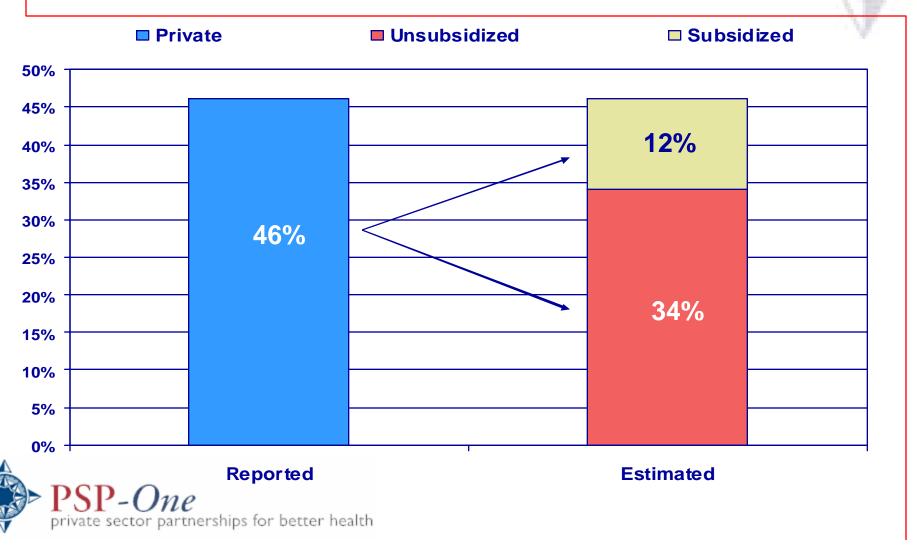


# Distribution of prices paid for injectables obtained from the private sector by wealth quintile

	Wealth Quintile						
	Lowest	Second	Middle	Fourth	Highest	Total	
	%	%	%	%	%	%	
Free	1	1	2	3	2	2	
Less than \$1.01	39	37	29	18	12	24	
Greater or equal to \$1.01	60	62	69	79	86	74	
Total percent	100	100	100	100	100	100	
N	350	539	689	793	817	3188	



#### Estimated use of subsidized / unsubsidized private sector



### Discussion

### Limitations

- Lack of data especially on incomes of providers
- Misclassification of source



### Discussion

- Need to be more careful in equating growth in the private sector with growth in financial sustainability
- Where source is categorized as public vs. private, information on prices can determine
  - Current size of unsubsidized services
  - Growth of unsubsidized services