### CHAPTER 10

### MATERNAL HEALTH

This chapter presents findings on maternal health-antenatal care and delivery assistance. In line with the program to improve maternal health and to make maternal health care services more accessible, besides health centers in every subdistrict, ambulatory health services, auxiliary health centers (puskesmas pembantu), health posts (posyandu), and village delivery posts (polindes) have been established. In village delivery posts, antenatal care and delivery assistance are provided by trained traditional birth attendants under the supervision of a midwife.

### 10.1 Antenatal Care

Table 10.1.1 shows the percent distribution of live births in the five-year period prior to the survey by type of antenatal care received during pregnancy according to selected background characteristics. In Indonesia, antenatal care is defined as pregnancy-related health care provided by medical professionals (doctor, nurse, or midwife), excluding traditional birth attendants and friends. Although each live birth may have received antenatal care from multiple types of providers, in this report the evaluation of maternal health care for early detection of high-risk pregnancies is based on the most qualified provider. The place of antenatal care service, recorded in the survey, is the most frequently visited service.

Among 28,810 ever-married women age 15-49 interviewed in the survey, 13,170 were mothers who had a total of 16,217 live births in the five years preceding the survey. Eighty-nine percent of these births were to mothers who received antenatal care from a medical professional—79 percent were cared for by a nurse/midwife or an auxiliary nurse/midwife.

Antenatal coverage is slightly lower among births to mothers age 35 and older. Third or lower order births are more likely to receive antenatal care from medical professionals than higher order births. Births to mothers living in urban areas or in Java-Bali are more likely to receive antenatal care from medical professionals than other births. Ninety-two percent of live births in Java-Bali had antenatal care from medical professionals, compared with 88 percent in Outer Java-Bali I and 83 percent in Outer Java-Bali II.

There is a strong relationship between mother's education and antenatal care. Seventy-one percent of births to mothers with no education received antenatal care from medical professionals, compared with only 97 percent of children whose mothers had some secondary education. The corresponding proportions for children whose mothers had some primary education and who have completed primary school are 83 percent and 91 percent, respectively.

Mothers living in the urban areas and those having some secondary education are more likely to receive antenatal care from a doctor than other mothers. Although there is little variation in antenatal care coverage by medical professionals between regions, there are sharp differentials between urban and rural areas within regions.

Table 10.1.2 shows the provincial differentials in antenatal care coverage. Virtually all women in DKI Jakarta and DI Yogyakarta had antenatal care during pregnancy. Antenatal care coverage was 90 percent or higher in East Java, Bali, West Sumatra, South Sumatra, Lampung, West Nusa Tenggara, North Sulawesi, and East Kalimantan. On the other hand, antenatal coverage was less than 70 percent in Jambi and Maluku, where a large proportion of women received antenatal care from traditional birth attendants. It is interesting to note, however, that 28 percent of births in the five years preceding the survey in East Timor did not receive any antenatal care.

Table 10.1.1 Antenatal care: background characteristics

Percent distribution of live births in the five years preceding the survey by source of antenatal care during pregnancy, according to selected background characteristics, Indonesia 1997

			Source of an	ntenatal care 1					
Background characteristic	Doctor	Nurse/ Midwife	Auxiliary nurse/ Midwife	Tradi- tional birth attendant	Other	No one	Total	Number of births	
Mother's age at birth	1				,				
< 20	5.4	77.0	6.4	3.8	0.0	7.4	100.0	2,215	
20-24	10.1	72.9	8.6	2.6	0.1	5.8	100.0	4,647	
25-29	13.7	70.7	6.6	2.9	0.0	6.0	100.0	4,236	
30-34	10.7	69.9	7.3	3.3	0.1	8.7	100.0	3,111	
35+	10.6	65.3	7.5	4.8	0.1	11.7	100.0	2,007	
Birth order									
1	13.8	73.5	6.7	2.1	0.0	3.8	100.0	5,314	
2-3	10.9	72.2	7.4	2.8	0.1	6.6	100.0	6,581	
4-6	6.7	70.4	8.2	4.2	0.0	10.5	100.0	3,314	
7+	4.2	58.2	8.6	8.4	0.1	20.6	100.0	1,008	
Residence									
Urban	22.4	69.9	4.9	1.1	0.0	1.7	100.0	4,373	
Rural	6.2	71.9	8.3	4.0	0.1	9.4	100.0	11,844	
Region/Residence									
Java-Bali	11.1	75.8	4.9	2.3	0.0	6.0	100.0	9,188	
Urban	21.4	71.4	4.4	1.1	0.0	1.7	100.0	2,940	
Rural	6.3	77.8	5.1	2.9	0.0	7.9	100.0	6,247	
Outer Java-Bali I	9.3	68.4	10.2	3.7	0.0	8.3	100.0	4,821	
Urban	24.1	68.3	5.4	0.8	0.0	1.4	100.0	984	
Rural	5.5	68.5	11.4	4.5	0.0	10.1	100.0	3,837	
Outer Java-Bali II	11.3	59.6	11.8	5.9	0.3	11.1	100.0	2,207	
Urban <sup>1</sup>	25.7	63.9	6.9	1.4	0.0	2.1	100.0	448	
Rurai	7.6	58.5	13.0	7.1	0.4	13.4	100.0	1,759	
Mother's education									
No education	3.4	60.2	7.8	5.7	0.1	22.7	100.0	1,462	
Some primary	3.4	72.0	7.5	4.9	0.1	12.1	100.0	4,067	
Completed primary	5.8	76.1	9.1	3.5	0.0	5.5	100.0	5,262	
Some secondary+	22.6	69.3	5.5	1.0	0.0	1.5	100.0	5,425	
Total	10.6	71.4	7.4	3.2	0.1	7.4	100.0	16,217	

<sup>&</sup>lt;sup>1</sup> If the respondent mentioned more than one provider, only the *most* qualified was considered.

## 10.2 Place of Antenatal Care, Number of Antenatal Care Visits, and Stage of Pregnancy

Table 10.2.1 indicates that 52 percent of children were born to mothers who received antenatal care from government health services, of which health centers are the most often visited (39 percent).

Rural women are more likely to visit a public health facility for antenatal care, while urban women go to a private facility. The facility most often used by rural women is the health center, while urban women

use the services of a private midwife. Private services are more frequently utilized by better educated women than those with less education; the comparison is 54 percent for women with secondary or higher education and 19 percent for women with no education. Since village delivery posts (polindes) are available only in limited areas, they have limited utilization (2 percent)—less than 1 percent in the urban areas and 3 percent in the rural areas.

Table 10.1.2 Antenatal care: region and province

Percent distribution of live births in the five years preceding the survey by source of antenatal care during pregnancy, according to region and province, Indonesia 1997

			Source of ar	itenatal care 1				
Region and province	Doctor	Nurse/ Midwife	Auxiliary nurse/ Midwife	Tradi- tional birth attendant	Other	No one	Total	Number of births
Java-Bali	11.1	75.8	4.9	2.3	0.0	6.0	100.0	9,188
DKI Jakarta	27.5	66.0	5.9	0.3	0.0	0.4	100.0	572
West Java	7.1	73.4	5.6	5.1	0.0	8.7	100.0	3,351
Central Java	12.9	75.7	5.2	1.1	0.0	5.1	100.0	2,385
DI Yogyakarta	19.1	71.4	7.8	0.0	0.0	1.7	100.0	181
East Java	10.2	81.3	2.9	0.6	0.0	5.0	100.0	2,497
Bali	12.7	76.8	8.0	0.2	0.0	2.3	100.0	202
Outer Java-Bali I	9.3	68.4	10.2	3.7	0.0	8.3	100.0	4,821
Dista Aceh	6.3	61.8	17.1	1.5	0.0	13.4	100.0	354
North Sumatra	9.1	64.9	8.0	7.3	0.0	10.6	100.0	1,267
West Sumatra	14.4	71.5	7.8	3.0	0.0	3.3	100.0	385
South Sumatra	13.8	68.5	10.2	3.3	0.0	4.3	100.0	516
Lampung	4.5	78.1	11.6	2.2	0.0	3.6	100.0	544
West Nusa Tenggara	5.9	67.2	17.6	1.8	0.0	7.4	100.0	371
West Kalimantan	4.5	66.7	10.1	1.2	0.0	17.5	100.0	324
South Kalimantan	6.6	62.6	19.4	7.1	0.0	4.1	100.0	214
North Sulawesi	24.2	56.3	15.1	0,2	0.0	4.1	100.0	192
South Sulawesi	10.1	75.6	2.4	2.4	0.0	9.6	100.0	655
Outer Java-Bali II	11.3	59.6	11.8	5.9	0.3	11.1	100.0	2,207
Ríau	16.7	59.8	9.5	7.0	0.2	6.8	100.0	344
Jambi	6.9	46.4	16.0	14.2	0.0	16.5	100.0	247
Bengkulu	10.2	69.7	6.8	5.1	0.0	8.2	100.0	117
East Nusa Tenggara	5.1	67.6	12.7	3.5	1.5	9.5	100.0	367
East Timor	12.3	49.7	8.9	1.4	0.0	27.7	100.0	116
Central Kalimantan	5.3	52.8	24.6	6.3	0.0	10.9	100.0	153
East Kalimantan	23.5	66.5	6.0	0.7	0.0	3.4	100.0	223
Central Sulawesi	10.8	59.0	12.7	5.6	0.3	11.6	100.0	177
Southeast Sulawesi	10.9	69.6	8.7	6.8	0.0	4.0	100.0	117
Maluku	10.0	53.5	3.9	11.1	0.0	21.6	100.0	173
Irian Jaya	11.3	58.1	17.8	1.4	0.0	11.4	100.0	173
Total	10.6	71.4	7.4	3.2	0.1	7.4	100.0	16,217

<sup>&</sup>lt;sup>1</sup> If the respondent mentioned more than one provider, only the most qualified was considered.

Table 10.2.1 Place of antenatal care: background characteristics

Percent distribution of live births in the five years preceding the survey by place of antenatal care during pregnancy, according to selected background characteristics, Indonesia 1997

					Place	e of antenat	tal care						
		Gover	rnment			Priv	ate						
			Deliv-		_	Family							Number
Background characteristic	Hos- pital	Health center	ery post	Health post	Hos- pital	planning	Doctor	Mid- wife	TBA visit	Other	No one	Total	of births
Mother's age at birth	-												
< 20	2.7	44.7	1.4	8.2	1.2	2.0	1.9	27.1	2.0	1.3	7.4	100.0	
20-24	4.7	39.9	1.7	6.5	2.5	3.7	3.6	28.6	2.3	0.6	5.8	100.0	
25-29	5.0	37.1	2.8	6.0	4.3	3.3	4.8	28.0	2.6	0.3	6.0	100.0	
30-34	4.0	38.0	2.1	5.8	3.3	3.9	4.1	26.4	3.2	0.5	8.7	100.0	3,11
35+	3.6	38.8	1.9	5.5	2.8	2.7	4,4	23.9	4.2	0.5	11.7	100.0	
Birth order													
1	4.4	39.0	1.4	6.1	3.6	4.0	5.1	30.4	1.8	0.4	3.8	100.0	
2-3	4.5	39.7	2.5	6.4	3.5	3.5	4.1	26.3	2.2	0.7	6.6	100.0	
4-6	3.7	40.5	2.2	6.8	1.8	2.1	2.2	25.7	3.8	0.8	10.5	100.0	
7+	3.0	35.0	1.8	5.6	1.2	1.9	1.5	21.5	8.1	0.2	20.5	100.0	1,00
Residence													
Urban	6.1	27.2	0.1	2.1	8.9	6.7	9.0	36.9	0.5	0.7	1.7	100.0	
Rural	3.5	43.7	2.7	7.9	0.9	2.0	2.0	23.7	3.6	0.5	9.4	100.0	11,84
Region/Residence													
Java-bali	3.1	38.8	2.1	5.4	3.3	2.9	4.5	31.6	1.9	0.4	6.0	100.0	
Urban	4.6	26.1	0.1	1.5	8.7	5.4	8.6	41.7	0.5	1.0	1.7	100.0	
Rural	2.4	44.6	3.1	7.2	0.9	1.7	2.6	26.8	2.6	0.1	7.9	100.0	6,24
Outer Java-Bali I	5.3	37.6	2,2	6.3	2.6	4.5	2.9	26.2	3.5	0.6	8.3	100.0	
Urban	8.2	26.8	0.1	2.4	10.4	10.4	9.3	30.3	0.6	0.1	1.4	100.0	
Rural	4.5	40.4	2.7	7.2	0.6	3.0	1.3	25.1	4.2	0.8	10.1	100.0	
Outer Java-Bali II	6.5	45.4	1.3	10.3	2.5	2.2	3.4	11.4	4.5	1.2	11.1	100.0	2,20
Urban	11.2	35.4	0.1	5.5	6.7	6.9	11,2	20.0	0.9	0.0	2.1	100.0	
Rural	5.3	48.0	1.7	11.5	1.4	1.0	1.4	9.2	5.4	1.6	13.4	100.0	1,75
Level of education													
No education	1.3	37.4	3.5	10.1	0.4	1.1	2.0	15.6	5.1	0.8	22.7	100.0	
Some primary	2.7	43.9	2.6	8.1	1.0	1.5	1.0	22.3	3.9	0.8	12.1	100.0	4,06
Completed primary	3.3	43.8	2.1	6.8	1.3	2.3	1.5	29.6	3.2	0.6	5.5	100.0	
Some secondary +	7.0	32.0	1.2	3.5	6.9	6.2	8.8	31.8	0.8	0.3	1.5	100.0	
Total	4.2	39.3	2.0	6.3	3.0	3.3	3.9	27.2	2.7	0.6	7.4	100.0	16,21

Table 10.2.2 shows provincial variations in the utilization of health services for antenatal care. In DKI Jakarta, Bali, North Sumatra, West Sumatra, and Lampung, more than 50 percent of children were born to mothers who had antenatal care from private health facilities, among which private midwife's clinics were the most frequently visited.

The Indonesian maternal health program recommends that pregnant women have at least four antenatal care visits during pregnancy, according to the following schedule: one visit in the first trimester, one visit in the second trimester, and two visits in the third trimester. Table 10.3 shows that the median number of antenatal visits was 6.6, well above the recommended number. Sixty-nine percent of births were to mothers who had four or more antenatal care visits from a medical professional (Figure 10.1).

Table 10.2.2 Place of antenatal care: region and province

Percent distribution of live births in the five years preceding the survey by place of antenatal care during pregnancy, according to region and province, Indonesia 1997

	Place of antenatal care												
	-	Gover	nment			Priv	ate		<u></u>			=	
Dest	Hos-	YYaalah	Deliv-	TT141-		Family		) (i.d.	TD 4		No		Number of births
Region and province	pital	Health center	ery post	post	pital	planning clinic	Doctor	Mid- wife	TBA visit	Other	one	Total	
Java-Bali	3.1	38.8	2.1	5.4	3.3	2.9	4.5	31.6	1.9	0.4	6.0	100.0	9,188
DKI Jakarta	5.2	21.4	0.0	0.2	12.2	8.2	8.5	43.7	0.3	0.0	0.4	100.0	572
West Java	2.4	35.1	1.4	5.6	2.7	1.1	3.0	34.4	4.4	1.0	8.7	100.0	3,351
Central Java	5.7	41.8	1.0	5.5	1.0	4.1	5.8	29.7	0.4	0.0	5.1	100.0	2,385
DI Yogyakarta	4.0	49.3	0.2	0.2	2.4	5.1	6.4	30.7	0.0	0.0	1.7	100.0	181
East Java	1.2	44.1	5.0	6.8	4.7	2.8	3.8	25.7	0.7	0.1	5.0	100.0	2,497
Bali	2.9	36.2	0.0	2.0	0.5	1.7	9.4	45.0	0.2	0.0	2.3	100.0	202
Outer Java-Bali I	5.3	37.6	2.2	6.3	2.6	4.5	2.9	26.2	3.5	0.6	8.3	100.0	4,821
Dista Aceh	5.7	48.2	1.8	6.2	0.8	6.4	2.7	13.5	1.1	0.3	13.4	0.001	354
North Sumatra	4.8	18.1	3.6	2.9	1.4	8.7	2.5	39.4	6.7	1.2	10.6	100.0	1,267
West Sumatra	5.2	28.1	1.9	5.3	3.9	3.0	5.3	40.0	3.5	0.5	3.3	100.0	385
South Sumatra	4.1	39.5	2.2	5.0	2.1	4.6	4.7	29.5	3.7	0.4	4.3	100.0	516
Lampung	0.7	34.4	0.0	8.0	1.0	4.7	2.5	42.5	2.0	0.7	3.6	100.0	544
West Nusa Tenggara	2.5	57.2	4.0	18.8	1.5	0.5	1.5	4.1	2.4	0.2	7.4	100.0	371
West Kalimantan	2.7	48.5	4.9	10.4	2.0	3.5	1.4	7.4	1.0	0.5	17.5	100.0	324
South Kalimantan	2.6	57.4	0.2	7.5	0.2	1.2	4.4	17.9	3.6	0.7	4.3	100.0	214
North Sulawesi	12.0	54.5	1.2	8.5	4.8	3.2	4.6	6.7	0.2	0.1	4.1	100.0	192
South Sulawesi	12.6	49.0	0.0	2.5	8.0	8.0	2.0	12.8	2.3	0.4	9.6	100.0	655
Outer Java-Bali II	6.5	45.4	1.3	10.3	2.5	2.2	3.4	11.4	4.5	1.2	11.1	100.0	2,207
Riau	5.1	36.1	0.7	8.9	2.0	7.2	5.4	21.6	5.0	1.3	6.8	100.0	344
Jambi	4.0	38.4	0.1	2.4	0.8	3.3	4.1	16.4	13.5	0.4	16.5	100.0	247
Bengkulu	3.0	30.9	0.2	12.6	0.5	0.7	4.3	33.6	5.1	0.6	8.2	100.0	117
East Nusa Tenggara	5.5	52.1	2.4	18.4	2.0	2.4	0.7	3.1	1.5	2.2	9.5	100.0	367
East Timor	19.8	42.8	2.0	3.0	0.1	0.5	0.2	1.6	1.4	0.8	27.7	100.0	116
Central Kalimantan	4.3	54.6	1.4	1.6	1.2	0.8	0.5	19.8	3.3	1.7	10.9	100.0	153
East Kalimantan	8.0	53.0	0.0	6.6	8.5	1.0	7.1	12.1	0.3	0.0	3.4	100.0	223
Central Sulawesi	8.5	51.1	0.7	11.7	1.2	0.1	1.1	7.2	3.0	3.5	11.6	100.0	177
Southeast Sulawesi	6.3	43.4	8.0	29.7	2.5	0.0	1.3	5.3	6.2	0.6	4.0	100.0	117
Maluku	3.9	40.3	0.6	7.0	6.7	0.8	5.7	3.2	8.7	1.4	21.6	100.0	173
Irian Jaya	8.5	53.6	5.9	11.8	0.3	0.2	5.0	1.8	1.1	0.2	11.4	100.0	173
Total	4.2	39.3	2.0	6.3	3.0	3.3	3.9	27.2	2.7	0.6	7.4	100.0	16,217

Table 10.3 also shows that four in ten pregnant women started having an antenatal check, as recommended, in the first trimester, while more than half (52 percent) had their first antenatal care visit in the second and third trimester. Eleven percent of births were to mothers who had no professional antenatal care. The median number of months at the first antenatal care visit was 3.3 months, which means that half of the pregnant women had their first antenatal care earlier than 3.3 months of pregnancy.

<u>Table 10.3</u> Number of antenatal care visits and stage of pregnancy

Percent distribution of live births in the five years preceding the survey by number of antenatal care (ANC) visits, and by the stage of pregnancy at the time of the first visit, according to type of antenatal care, Indonesia 1997

Antenatal care indicator	Any antenatal care	Any ante- natal care from a medical professional
Number of ANC visits		
0	7.4	10.6
1	3.4	2.9
2-3	18.2	16.8
4-6	27.7	26.8
7 <b>-</b> 9	24.0	23.7
10+	18.7	18.6
Don't know/missing	0.7	0.6
Total	100.0	100.0
Median	6.6	6.6
Number of months pregrat time of first ANC visi		
No antenatal care	7.4	10.6
0-2 months	37.8	37.1
3-5 months	44.8	43.3
6+ months	9.6	8.6
Don't know/missing	0.4	0.4
Total	100.0	100.0
Median	3.3	3.3
Number of births	16,217	16,217

<sup>&</sup>lt;sup>1</sup> Medical professional includes doctor, nurse, and midwife.

### 10.3 Tetanus Toxoid Vaccination

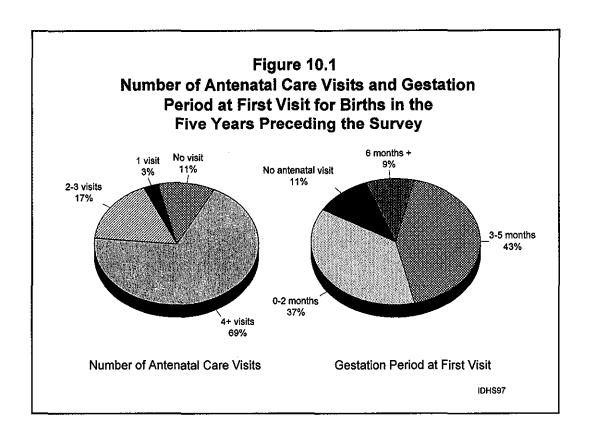
Immunization of pregnant women is a coordinated activity of the Expanded Program on Immunization (EPI) and the maternal and child health care (MCH) units in the Ministry of Health. which recommends that women receive two tetanus toxoid injections during the first pregnancy. Booster injections are given once during each subsequent pregnancy to maintain full protection. In recent years, tetanus toxoid immunization was also given to women before marriage, so that any pregnancy occurring within 3 years of their marriage would be protected against tetanus. Antenatal cards, on which tetanus toxoid immunizations are recorded, are distributed to every pregnant woman as a lifetime pregnancy and delivery history record keeper.

Among 16,217 live births in the five years preceding the survey, 53 percent were to mothers who received antenatal cards. Antenatal card coverage is higher in urban areas than in rural areas (62 percent compared with 50 percent). Women in Java-Bali are more likely to have an antenatal card than women in the Outer Islands of Java-Bali (58 percent compared with 45 and 53 percent). The percentage of mothers with antenatal cards is higher among those with higher education (Table 10.4.1).

Since the findings above show that antenatal cards were not widely distributed, tetanus toxoid immunization coverage cannot be estimated from vaccination cards alone. Respondents' recall

is used to supplement information on immunization status. As a result, the proportion of births that are fully protected against tetanus may be underestimated. In addition, some women may have received tetanus toxoid immunization before marriage or during a previous pregnancy, so they might not need another injection or a booster immunization. On the other hand, women may incorrectly report other types of injections as tetanus immunization, which will overestimate the level of immunization coverage. It is difficult to evaluate the extent to which each of these biases exist in the DHS data. Therefore, the information on tetanus immunization should be regarded as an approximate indicator of the level of coverage.

Overall, of births in the five years before the survey, 53 percent were to mothers who received two or more tetanus toxoid injections during pregnancy, 18 percent received one injection, and 26 percent received no injection. The coverage of tetanus toxoid injection tends to decrease as the mother's age and the birth order increase (Table 10.4.1). The percentage of births unprotected against tetanus neonatorum is substantially higher in rural areas (29 percent) than in urban areas (18 percent) and is higher in the Outer Java-Bali regions (32 and 28 percent) than in Java-Bali (23 percent). Tetanus toxoid injection coverage increases with mother's education. While 45 percent of births to mothers with no education and 37 percent of births to mothers with some primary education never receive any tetanus toxoid injection, the corresponding proportion for births to mothers with some secondary education is only 16 percent.



In the five years preceding the survey, the proportion of births for which an antenatal card was presented varied significantly by province, from 21 percent in North Sumatra to 75 percent or more in DI Yogyakarta and Bali. Tetanus immunization coverage also varies among provinces. While less than 10 percent of births in Bali and North Sulawesi were to mothers who did not receive a tetanus toxoid injection during pregnancy, more than 50 percent of births in North Sumatra were to unimmunized mothers (Table 10.4.2).

#### 10.4 Iron Pills

Anemia during pregnancy is still prevalent in Indonesia. Iron pills are distributed to women during their antenatal care visits to health care services. The maternal health program of the Indonesian Ministry of Health recommends that pregnant women take at least 90 iron pills during their pregnancy. In order to evaluate this program, in the 1997 IDHS, all women who gave birth during the five years before the survey were asked whether they had received iron pills during their last pregnancy and, if so, how many they had taken.

Of the 13,170 births in the five years preceding the survey, 24 percent of the mothers took 90 or more iron pills during pregnancy, while 17 percent took none (Table 10.5). Older mothers, mothers of higher order births, and less educated mothers are less likely to take iron pills during their pregnancy.

Iron pills are better distributed in urban areas and in Java-Bali, than in other areas. For 20 percent or more of recent births in rural areas and in Outer Java-Bali, women did not take any iron pills during their pregnancy, while mothers in urban areas and in Java-Bali region took at least 90 iron pills during pregnancy for more than 30 percent of births.

Table 10.4.1 Tetanus toxoid vaccinations: background characteristics

Percent distribution of live births in the five years preceding the survey by number of tetanus toxoid injections received by mothers during pregnancy, and percentage for which mothers could show antenatal cards, according to background characteristics, Indonesia 1997

	Nur	nber of teta	nus toxoid	injections			Percent
Background characteristic	None	One dose	Two doses or more	Don't know/ Missing	Total	Number of births	with antenatal card
Mark out and a State	<u> </u>						
Mother's age at birth	26.4	19.1	52.5	2.0	100.0	2.215	54.2
< 20						2,215	54.2
20-24	23.3	18.6	56.3	1.7	100.0	4,647	55.8
25-29	23.8	20.3	54.4	1.5	100.0	4,236	56.9
30-34	27.1	15.9	54.6	2.4	100.0	3,111	50.3
35+	36.2	17.4	43.6	2.9	100.0	2,007	43.5
Birth order							
1	21.4	19.1	58.0	1.6	100.0	5,314	59.9
2-3	23.3	18.8	55.7	2.2	100.0	6,581	56.1
4-6	32.3	18.0	47.7	1.9	100.0	3,314	44.3
7+	50.5	13.7	32.6	3.1	100.0	1,008	30.6
Residence							
Urban	17.8	18.9	61.6	1.7	100.0	4,373	61.9
Rural	29.3	18.2	50.4	2.1	100.0	11,844	50.2
Region/Residence							
Java-Bali	22.5	18.5	56.8	2.1	100.0	9,188	58.1
Urban	16.5	18.5	63.5	1.5	100.0	2,940	63.6
Rural	25.3	18.6	53.7	2.4	100.0	6,247	55.6
Outer Java-Bali I	32.3	18.5	47.4	1.8	100.0	4,821	44.5
Urban	22.3	18.3	56.9	2.5	100.0	984	56.1
Rural	34.9	18.5	44.9	1.7	100.0	3,837	41.6
Outer Java-Bali II	28.3	17.7	52.2	1.8	100.0	2,207	52.6
Urban	16.6	22.7	59.5	1.3	100.0	448	63.2
Rural	31.3	16.4	50.4	1.9	100.0	1,759	49.9
Mother's education							
No education	45.2	17.0	34.8	3.0	100.0	1,462	36.1
Some primary	37.2	17.0	43.5	2.1	100.0	4,067	43.1
Completed primary	23.0	17.2	57.2	1.8	100.0	5,262	55.3
Some secondary+	15.9	20.2	62.1	1.8	100.0	5,425	63.7
All births	26.2	18.4	53.4	2.0	100.0	16,217	53.3

While nine in ten mothers with no antenatal care and nine in ten mothers who receive antenatal care from a traditional birth attendant never get any iron pills during their pregnancy, only 8-11 percent of mothers who go to a government or a private health service facility for antenatal care get no iron pills during their pregnancy. Mothers who have their first antenatal visit in the first trimester are more likely to have taken 90 or more iron pills during their pregnancy than those who start antenatal care later.

Table 10.4.2 Tetanus toxoid vaccinations: region and province

Percent distribution of live births in the five years preceding the survey by number of tetanus toxoid injections received by mothers during pregnancy, and percentage for which mothers could show antenatal cards, according to region and province, Indonesia 1997

	Nun	nber of teta	nus toxoid	injections		•	Percent	
Region and province	None	One dose	Two doses or more	Don't know/ Missing	Total	Number of births	with antenatal card	
Java-Bali	22.5	18.5	56.8	2.1	100.0	9,188	58.1	
DKI Jakarta	18.8	17.7	61.2	2.3	100.0	572	67.7	
West Java	28.5	10.3	60.0	1.2	100.0	3,351	49.1	
Central Java	16.0	22.6	57.3	4.1	100.0	2,385	53.9	
DI Yogyakarta	10.6	31.5	57.2	0.7	100.0	181	75.0	
East Java	23.6	23.5	51.2	1.7	100.0	2,497	68.8	
Bali	7.3	36.1	55.2	1.5	100.0	202	81.7	
Outer Java-Bali I	32.3	18.5	47.4	1.8	100.0	4,821	44.5	
Dista Aceh	35.8	15.6	47.I	1.5	100.0	354	40.0	
North Sumatra	52.2	13.3	31.8	2.8	100.0	1,267	20.8	
West Sumatra	34.0	17.0	48.2	0.8	100.0	385	37.9	
South Sumatra	24.9	13.5	60.8	0.7	100.0	516	49.4	
Lampung	20.6	16.9	59.3	3.2	100.0	544	62.6	
West Nusa Tenggara	26.6	28.9	43.2	1.3	100.0	371	62.4	
West Kalimantan	30.2	16.2	52.1	1.6	100.0	324	49.4	
South Kalimantan	27.9	19.3	52.4	0.4	100.0	214	45.7	
North Sulawesi	8.8	28.4	62.0	0.5	100.0	192	69.8	
South Sulawesi	18.5	28.5	51.4	1.7	100.0	655	57.9	
Outer Java-Bali II	28.3	17.7	52.2	1.8	100.0	2,207	52.6	
Riau	39.2	18.4	40.6	1.9	100.0	344	44.2	
Jambi	37.0	14.9	42.6	5.5	100.0	247	40.3	
Bengkulu	26.9	15.5	57.1	0.5	100.0	117	52.7	
East Nusa Tenggara	17.2	14.3	67.5	1.0	100.0	367	61.0	
East Timor	44.4	14.8	40.6	0.4	100.0	116	41.6	
Central Kalimantan	35.8	22.8	40.5	0.8	100.0	153	38.3	
East Kalimantan	13.5	25.2	60.9	0.5	100.0	223	64.3	
Central Sulawesi	25.7	18.8	53.7	1.9	100.0	1 <b>77</b>	60.7	
Southeast Sulawesi	17.5	13.8	67.5	1.3	100.0	117	63.9	
Maluku	39.9	14.1	43.5	2.5	100.0	173	42.8	
Irian Jaya	19.7	21.1	57.9	2.0	100.0	173	66.8	
Total	26.2	18.4	53.4	2.0	100.0	16,217	53.3	

# 10.5 Place of Delivery

Despite the growing availability of village delivery posts (polindes), four in five births in Indonesia are still delivered at home, including 7 percent delivered in a midwife's home (an increase of 2 percentage points since 1994). Only 9 percent of births in the five years preceding the survey were delivered in a government health service facility (government hospitals, village delivery posts, and health centers) and 19 percent were delivered in private hospitals or clinics (including the 7 percent delivered in a midwife's home) (Figure 10.2).

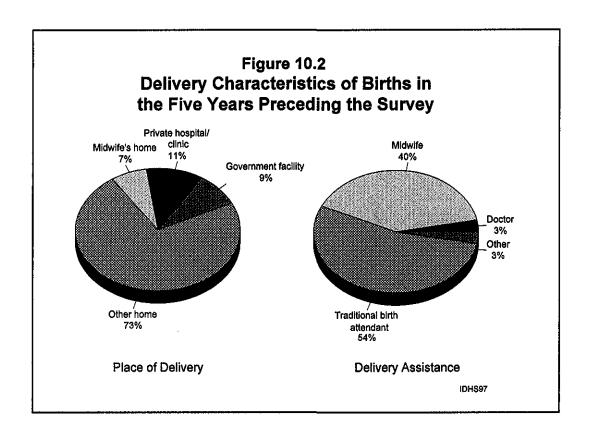
Table 10.5 Iron tablets taken during pregnancy

Percent distribution of women whose last birth occurred in the five years preceding the survey, by the number of iron tablets taken during the pregnancy, according to selected background characteristics, Indonesia 1997

		Numl	per of iron t	ablets take	during pro	egnancy			Number
Background characteristic	0	1-14	15-29	30-59	60-89	90+	Don't know	Total	of women
Mother's age at birth									
< 20	15.3	8.4	12.2	20.7	13.5	22.8	7.2	100.0	1,778
20-24	15.7	7.8	9.7	21.7	12.7	23.8	8.6	100.0	3,662
25-29	14.5	7.8	9.0	18.3	12.8	28.0	9.7	100.0	3,431
30-34	17.7	7.6	10.9	18.0	11.6	24.4	9.8	100.0	2,542
35+	24.3	7.4	8.3	19.6	12.0	20.5	7.9	100.0	1,758
Birth order									
1	11.4	7.3	9.6	21.4	13.2	28.7	8.4	100.0	4,197
2-3	15.4	7.4	9.5	19.4	12.8	25.7	9.7	100.0	5,491
4-6	22.3	9.2	11.2	18.6	12.1	17.8	8.8	100.0	2,689
7+	37.5	8.0	9.1	16.6	8.6	15.0	5.3	100.0	793
Residence									
Urban	8.3	6.2	8.8	19.4	12.4	34.0	11.0	100.0	3,602
Rural	20.1	8.4	10.3	19.8	12.6	20.8	8.0	100.0	9,568
Region/Residence									
Java-Bali	13.6	6.5	10.5	16.8	12.9	31.1	8.5	100.0	7,777
Urban	7.6	5.4	8.8	17.0	10.8	39.9	10.4	100.0	2,486
Rurat	16.4	7.0	11.2	16.7	13.9	27.0	7.7	100.0	5,291
Outer Java-Bali I	20.7	10.8	9.6	24.5	12.2	13.6	8.7	100.0	3,707
Urban	10.2	9.2	9.3	25.6	15.6	19.1	11.0	100.0	765
Rural	23.5	11.2	9.6	24.1	11.4	12.2	8.1	100.0	2,942
Outer Java-Bali II	23.4	7.2	7.7	22.3	11.5	17.3	10.5	100.0	1,685
Urban	8.7	5.9	6.8	22.7	16.5	24.5	15.0	100.0	350
Rural	27.3	7.6	8.0	22.2	10.1	15.4	9.3	100.0	1,335
Mother's education									
No education	37.1	9.1	10.2	14.3	8.1	14.1	7.1	100.0	1,150
Some primary	24.4	9.5	11.8	18.7	12.6	16.9	6.2	100.0	3,216
Completed primary	15.6	8.0	9.5	21.2	12.7	24.9	8.1	100.0	4,399
Some secondary+	7.4	6.0	8.8	20.3	13.5	32.2	11.9	100.0	4,406
Number of months pres	g-								
nant at first ANC visit									
No antenatal care	92.9	2.1	0.5	1.7	0.9	0.7	1.2	100.0	1,190
0-2	6.3	5.2	7.4	18.7	14.3	37.4	10.8	100.0	5,020
3-5	10.3	8.5	13.0	23.6	14.0	21.5	9.1	100.0	5,773
6+	16.5	21.0	14.7	23.4	9.5	8.0	6.8	100.0	1,140
MI									
Place of antenatal care		10.5	<i>a</i> ^	10.0	10.0	22.5		100.0	e = 0
Government hospital	9.0	10.5	7.3	18.9	10.8	33.7	9.9	100.0	553
Health center	8.6	9.2	11.5	23.4	12.7	25.2	9.3	100.0	5,234
Delivery post	9.4	10.3	11.4	24.9	14.9	23.5	5.5	0.001	278
Health post	11.1	6.5	15.4	23.6	14.8	23.2	5.4	100.0	854
Private hospital	7.7	4.1	6.5	20.7	8.3	38.8	13.9	100.0	379
Private FP clinic	10.3	5.6	6.6	21.0	9.7	32.7	14.0	100.0	438
Private doctor	8.0	2.3	7.9	10.3	14.8	41.4	15.3	100.0	549
Private midwife	10.2	8.5	10.6	20.2	16.2	25.0	9.4	100.0	3,669
TBA visit	91.3	2.1	0.6	1.8	0.1	2.0	2.2	100.0	324
Other No one	42.8	17.1	7.1	15.2	10.4	2.9	4.3	100.0	68
No one	95.3	2.4	0.4	1.0	0.3	0.1	0.4	100.0	821
Total	16.9	7.8	9.9	19.7	12.5	24.4	8.8	100.0	13,170

Note: Totals include 47 women with missing information as to number of months pregnant at first ANC visit and 7 women with no information on place of antenatal care (ANC).

TBA = Traditional birth attendant



Births to women in high-risk age groups—under 20 years or 35 years and over—are more likely to be delivered at a private home than births to women age 20-34. For women under age 20 the proportion is 83 percent, for those age 35 and over it is 78 percent, and for women age 20 to 34 it ranges from 67 to 72 percent. Higher order births are more frequently delivered at home—89 percent among seventh and higher order births compared with 65 percent among first order birth. This implies that a relatively large proportion of high-risk births are delivered at home (Table 10.6.1).

Births in rural areas are twice as likely to be delivered at home as those in urban areas (84 percent compared with 41 percent). Fifteen percent of births in urban areas are delivered in a midwife's home. The percentage of home deliveries in the Outer Java-Bali regions (76 and 82 percent) is higher than that in Java-Bali (69 percent). Deliveries in a midwife's home are very popular in urban Java-Bali (20 percent). Births to mothers who have no education are twice as likely to be delivered at home as births to mothers who have some secondary education (92 percent and 48 percent, respectively). The utilization of private hospitals or clinics for delivery is considerably higher in urban than in rural areas. It is also higher for first through third deliveries, and among births to mothers with some secondary education.

Significant variations are found in the place of delivery by province (Table 10.6.2). A majority of births (more than 60 percent) are delivered at home in all provinces except in DKI Jakarta (20 percent), DI Yogyakarta (43 percent), Bali (28 percent), and West Sumatra (51 percent). In DKI Jakarta, 80 percent of births occur in health facilities, among which 56 percent are delivered in private hospitals, clinics, or midwife's homes and 23 percent in government hospitals or health centers. Similarly, in DI Yogyakarta, Bali, and West Sumatra, more births are delivered in private facilities than in government facilities.

Table 10.6.1 Place of delivery: background characteristics

Percent distribution of live births in the five years preceding the survey by place of delivery, according to selected background characteristics, Indonesia 1997

				Pla	ce of deli	very					
		Home			overnme	nt		Private			
Background characteristic	Respond ent's	Other's	Mid- wife's	Hos- pital	Health center	Deliv- ery post	Hos- pital	Clinic	Other private	Total	Number of births
Mother's age at birth											
< 20	76.3	6.4	4.3	3.8	2.6	0.2	1.9	4.5	0.0	100.0	2,215
20-24	65.6	6.2	7.5	5.9	2.7	0.1	4.2	7.2	0.5	100.0	4,647
25-29	63.2	3.4	7.9	7.8	2.3	0.2	6.7	8.2	0.3	100.0	4,236
30-34	68.4	2.8	6.7	6.4	2.2	0.4	5.3	7.6	0.1	100.0	3,111
35+	75.8	2.3	4.8	6.1	1.3	0.5	3.8	5.3	0.0	100.0	2,007
Birth order											
1	58.3	6.4	8.3	8.3	3.1	0.2	6.1	8.9	0.3	100.0	5,314
2-3	67.6	3.8	7.2	6.2	2.1	0.2	5.5	7.1	0.3	100.0	6,581
4-6	79.8	3.0	4.2	4.0	1.7	0.3	2.1	4.7	0.1	100.0	3,314
7+	87.5	1.5	2.5	2.7	1.8	0.5	0.8	2.8	0.0	100.0	1,008
Residence											
Urban	35.3	5.2	14.8	11.8	3.9	0.3	13.4	14.9	0.4	100.0	4,373
Rural	80.3	4.0	3.7	4.2	1.7	0.2	1.5	4.0	0.2	100.0	11,844
Region/Residence											
Java-Bali	65.8	2.8	9.7	5.8	2.5	0.2	5.2	7.6	0.3	100.0	9,188
Urban	34.3	4.6	19.7	9.9	4.4	0.4	12.9	13.1	0.4	100.0	2,940
Rural	80.5	1.9	5.0	3.9	1.6	0.2	1.7	5.1	0.3	100.0	6,247
Outer Java-Bali I	69.4	6.5	3.5	6.3	2.4	0.4	4.2	7.1	0.2	100.0	4,821
Urban	35.0	6.3	4.9	13.9	2.9	0.0	16.0	20.5	0.4	100.0	984
Rural	78.3	6.6	3.2	4.3	2.2	0.5	1.2	3.6	0.1	100.0	3,837
Outer Java-Bali II	75.8	6.1	1.1	8.0	1.6	0.0	3.6	3.7	0.1	100.0	2,207
Urban	42.0	6.3	4.6	19.5	2.5	0.1	11.1	14.0	0.0	100.0	448
Rural	84.4	6.0	0.2	5.0	1.3	0.0	1.7	1.1	0.1	100.0	1,759
Mother's education											
No education	90.6	1.9	2.3	1.7	0.8	0.1	1.2	1.3	0.1	100.0	1,462
Some primary	84.9	3.8	3.6	2.6	1.9	0.1	0.9	2.1	0.2	100.0	4,067
Completed primary	75.8	4.4	5.7	4.1	2.2	0.3	1.7	5.5	0.3	100.0	5,262
Some secondary+	42.5	5.4	11.2	12.2	3.2	0.3	11.5	13.5	0.3	100.0	5,425
Number of antenatal care visits											
0	94.4	3.5	0.4	0.3	0.3	0.0	0.4	0.5	0.1	100.0	1,717
1-3	84.5	5.0	2.1	2.9	1.7	0.1	1.6	2.1	0.0	100.0	3,184
4+	59.7	4.3	9.0	8.1	2.8	0.3	6.3	9.2	0.3	100.0	11,214
Don't know/missing	62.9	3.6	1.8	2.9	2.7	0.0	4.4	20.7	0.9	100.0	91
Total	68.3	4.3	6.7	6.2	2.3	0.2	4.7	6.9	0.2	100.0	16,217

Table 10.6.2 Place of delivery: region and province

Percent distribution of live births in the five years preceding the survey by place of delivery, according to region and province, Indonesia 1997

				Pla	ice of deli	very					<del></del>
		Home		(	Governme	nt		Private		<u>-</u>	
Region and province	Respond- ent's	Other's	Mid- wife's	Hos- pital	Health center	Deliv- ery post	Hos- pital	Clinic	Other private	Total	Number of births
Java-Bali	65.8	2.8	9.7	5.8	2.5	0.2	5.2	7.6	0.3	100.0	9,188
DKI Jakarta	13.2	6.8	21.6	12.0	11.2	0.0	14.3	20.1	0.4	100.0	572
West Java	77.9	3.0	8.9	3.5	0.7	0.1	3.1	2.6	0.1	100.0	3,351
Central Java	71.1	1.9	5.9	5.3	2.1	0.0	4.3	9.0	0.2	100.0	2,485
DI Yogyakarta	41.9	0.7	17.9	14.2	4.6	0.0	7.5	13.3	0.0	100.0	181
East Java	61.3	2.5	9.3	6.5	2.6	0.7	6.6	9.7	0.7	100.0	2,497
Bali	26.1	2.0	31.6	16.8	8.4	0.2	4.7	9.6	0.6	100.0	202
Outer Java-Bali I	69.4	6.5	3.5	6.3	2.4	0.4	4.2	7.1	0.2	100.0	4,821
Dista Aceh	85.6	2.4	0.0	4.4	0.7	0.0	0.6	6.4	0.0	100.0	354
North Sumatra	70.2	7.6	1.3	4.6	1.7	0.6	3.9	10.1	0.0	100.0	1,267
West Sumatra	42.8	8.5	19.4	9.0	6.3	1.6	3.9	8.2	0.3	100.0	385
South Sumatra	65.5	5.7	5.2	5.0	0.5	0.3	4.2	13.4	0.1	100.0	516
Lampung	72.3	5.8	6.6	2.9	0.4	0.0	1.1	10.8	0.0	100.0	544
West Nusa Tenggara	75.7	9.0	0.5	6.3	4.2	0.4	2.2	0.5	1.0	100.0	371
West Kalimantan	79.1	4.3	0.4	6.2	1.8	0.0	3.1	5.0	0.1	100.0	324
South Kalimantan	81.8	7.6	0.9	6.3	0.4	0.0	2.0	1.0	0.0	100.0	214
North Sulawesi	68.8	3.5	0.5	10.6	5.0	0.4	6.2	4.9	0.2	100.0	192
South Sulawesi	63.3	7.0	1.5	11.4	4.4	0.0	11.5	0.7	0.1	100.0	655
Outer Java-Bali II	75.8	6.1	1.1	8.0	1.6	0.0	3.6	3.7	0.1	100.0	2,207
Riau	66.9	9.7	0.7	3.7	1.1	0.1	4.2	13.7	0.0	100.0	344
Jambi	77.8	6.1	0.8	2.6	3.6	0.0	1.5	7.5	0.1	100.0	247
Bengkulu	84.5	6.8	0.2	4.0	0.2	0.5	1.1	1.6	0.9	100.0	117
East Nusa Tenggara	82.5	2.8	0.1	8.4	1.6	0.0	3.2	1.1	0.1	100.0	367
East Timor	83.5	0.7	0.1	13.6	0.9	0.0	0.4	0.7	0.0	100.0	116
Central Kalimantan	81.0	12.9	0.2	5.0	0.2	0.0	0.5	0.3	0.0	100.0	153
East Kalimantan	54.2	7.2	7.9	15.7	1.8	0.0	9.9	3.2	0.0	100.0	223
Central Sulawesi	77.6	11.5	0.2	7.7	1.0	0.0	1.5	0.1	0.0	100.0	177
Southeast Sulawesi	91.0	3.4	0.2	3.4	0.4	0.0	1.6	0.0	0.0	100.0	117
Maluku	83.4	0.9	0.2	6.0	0.2	0.0	9.4	0.0	0.0	100.0	173
Irian Jaya	68.7	2.7	0.2	20.5	4.5	0.0	2.4	8.0	0.2	100.0	173
Total	68.3	4.3	6.7	6.2	2.3	0.2	4.7	6.9	0.2	100.0	16,217

# 10.6 Assistance during Delivery

In the survey, respondents were asked about all types of assistance attending the delivery. If more than one type of delivery attendant was recorded, only the least qualified delivery attendant was considered for tabulation, since they are usually the first choice to assist during delivery. Only complicated cases are referred to the more qualified attendant.

Forty-three percent of births in the five years before the survey were assisted by a doctor or a nurse/midwife, and 57 percent of births were assisted by non-medical staff—54 percent by a traditional birth attendant and 3 percent by a relative (Table 10.7.1 and Figure 10.2). Births to young mothers, high birth orders, those in rural areas, those to mothers with no education, and to mothers who receive no antenatal care are more likely to be assisted by non-medical staff than other births.

Table 10.7.1 Assistance during delivery: background characteristics

Percent distribution of live births in the five years preceding the survey by type of assistance during delivery, according to selected background characteristics, Indonesia 1997

		Α	ssistance du	ring delivery	,1			
			Traditional					Numbe
Background	_		birth					of
characteristic	Doctor	Midwife	attendant	Relative	Other	No one	Total	births
Mother's age at birth								
< 20	0.6	31.2	65.7	2.4	0.0	0.0	100.0	2,215
20-24	2.9	42.0	52.5	2.3	0.1	0.1	100.0	4,647
25-29	5.0	44.0	48.3	2.4	0.1	0.2	100.0	4,236
30-34	3.1	41.9	52.5	2.2	0.1	0.4	100.0	3,111
35+	3.4	33.6	58.7	3.5	0.0	0.8	100.0	2,007
Birth order								
1	4.6	46.5	47.1	1.7	0.1	0.1	100.0	5,314
2-3	3.3	41.4	52.6	2.3	0.0	0.1	100.0	6,581
4-6	1.5	31.1	63.8	3.0	0.1	0.6	100.0	3,314
7+	0.7	25.8	65.8	6.3	0.2	1.2	100.0	1,008
Residence								
Urban	7.9	68.5	23.1	0.4	0.0	0.1	100.0	4,373
Rural	1.5	29.5	65.3	3.2	0.1	0.3	100.0	11,844
Region/Residence								
Java-Bali	3.8	38.1	57.2	0.7	0.0	0.2	100.0	9,188
Urban	7.9	65.3	26.6	0.0	0.0	0.1	100.0	2,940
Rural	1.9	25.4	71.4	1.0	0.0	0.2	100.0	6,247
Outer Java-Bali I	2.7	45.9	48.1	3.0	0.1	0.3	100.0	4,821
Urban	9.1	76.0	14.3	0.7	0.0	0.0	100.0	984
Rural	1.1	38.1	56.7	3.5	0.1	0.4	100.0	3,837
Outer Java-Bali II	1.8	35.1	53.4	9.0	0.4	0.3	100.0	2,207
Urban	4.9	73.2	19.2	2.1	0.4	0.1	100.0	448
Rural	1.0	25.4	62.1	10.7	0.4	0.4	100.0	1,759
Mother's education								
No education	1.2	14.2	73.9	9.4	0.2	1.2	100.0	1,462
Some primary	0.9	22.0	73.8	2.8	0.1	0.4	100.0	4,067
Completed primary	1.5	34.7	62.0	1.6	0.1	0.1	100.0	5,262
Some secondary+	7.3	65.6	25.9	1.1	0.0	0.0	100.0	5,425
Number of antenatal								
care visits	0.4	<i>5</i> A	02.2	0.0	^ ^	• •	100.0	
0	0.4	5.9	83.3	9.0	0.3	1.0	100.0	1,717
1-3	1.0	25.8	69.3	3.7	0.0	0.3	100.0	3,184
4+	4.3	49.4	45.1	1.1	0.0	0.2	100.0	11,249
Don't know/missing	5.5	40.6	48.3	5.6	0.0	0.0	100.0	91
Total	3.2	40.0	54.0	2.5	0.1	0.3	100.0	16,217

<sup>&</sup>lt;sup>1</sup> If the respondent mentioned more than one attendant, only the *least* qualified attendant was considered (see text for explanation).

Traditional birth attendants still have a very important role in delivery assistance, especially in the rural areas (65 percent), in the Java-Bali region (57 percent), to mothers with no education or some primary education (74 percent), as well as to mothers with no antenatal care (83 percent).

The coverage of deliveries assisted by traditional birth attendants varies among provinces, from 9 percent in DKI Jakarta to 78 percent in West Nusa Tenggara (Table 10.7.2). Overall, 3 percent of births were assisted by relatives, which may have greater risk for the mother and baby, than those assisted by traditional birth attendants, because relatives generally have no training and are less experienced in assisting delivery than traditional birth attendants. Some provinces have a high prevalence of relative-assisted deliveries, e.g., East Nusa Tenggara (11 percent), Irian Jaya (26 percent), and East Timor (57 percent). The high prevalence of deliveries assisted by relatives in Irian Jaya and East Timor was also noted in past IDHS.

Table 10.7.2 Assistance during delivery: region and province

Percent distribution of live births in the five years preceding the survey by type of assistance during delivery, according to region and province, Indonesia 1997

		A	ssistance du	ring delivery	,1			
Region and			Traditional birth					Number of
province	Doctor	Midwife	attendant	Relative	Other	No one	Total	births
Java-Bali	3.8	38.1	57.2	0.7	0.0	0.2	100.0	9,188
DKI Jakarta	13.0	77.6	9.4	0.0	0.0	0.0	100.0	572
West Java	2.3	28.3	69.2	0.2	0.0	0.0	100.0	3,351
Central Java	4.2	33.1	61.3	0.7	0.0	0.8	100.0	2,385
DI Yogyakarta	3.2	57.8	39.0	0.0	0.0	0.0	100.0	181
East Java	3.4	43.0	52.5	1.1	0.0	0.0	100.0	2,497
Bali	3.5	74.1	16.4	5.8	0.1	0.0	100.0	202
Outer Java-Bali I	2.7	45.9	48.1	3.0	0.1	0.3	100.0	4,821
Dista Aceh	1.5	37.9	59.6	1.0	0.0	0.0	100.0	354
North Sumatra	4.2	57.7	30.9	6.0	0.2	1.0	100.0	1,267
West Sumatra	1.7	67.6	30.7	0.0	0.0	0.0	100.0	385
South Sumatra	3.9	50.4	44.9	0.8	0.0	0.0	100.0	516
Lampung	0.9	39.0	58.8	1.1	0.0	0.2	100.0	544
West Nusa Tenggara	0.8	19.8	78.4	0.9	0.0	0.1	100.0	371
West Kalimantan	1.9	35.0	59.8	3.3	0.0	0.0	100.0	324
South Kalimantan	3.1	37.3	59.5	0.0	0.0	0.0	100.0	214
North Sulawesi	2.1	43.6	53.4	1.0	0.0	0.0	100.0	192
South Sulawesi	3.2	40.1	50.7	5.6	0.0	0.4	100.0	655
Outer Java-Bali II	1.8	35.1	53.4	9.0	0.4	0.3	100.0	2,207
Riau	1.7	42.5	54.4	1.3	0.1	0.0	100.0	344
Jambi	1.8	34.5	63.4	0.3	0.0	0.0	100.0	247
Bengkulu	1.3	41.0	51.1	6.1	0.1	0.3	100.0	117
East Nusa Tenggara	0.6	25.9	62.1	10.5	0.4	0.5	100.0	367
East Timor	2.4	23.4	17.0	57.1	0.1	0.0	100.0	116
Central Kalimantan	0.3	37.9	58.4	2.7	0.7	0.0	100.0	153
East Kalimantan	6.6	56.2	33.7	2.9	0.2	0.4	100.0	223
Central Sulawesi	0.5	22.1	67.6	9.5	0.3	0.0	100.0	177
Southeast Sulawesi	1.9	23.4	70.9	3.3	0.0	0.4	100.0	117
Maluku	1.5	26.3	68.7	3.4	0.0	0.1	100.0	173
Irian Jaya	1.1	45.5	23.1	25.5	2.7	2.1	100.0	173
Total	3.2	40.0	54.0	2.5	0.1	0.3	100.0	16,217

<sup>&</sup>lt;sup>1</sup> If the respondent mentioned more than one attendant, only the *least* qualified attendant was considered (see text for explanation).

# 10.7 Delivery Characteristics

In Indonesia, caesarean sections generally are performed under certain medical indications and to terminate complicated deliveries. In this survey, only 4 percent of births were delivered by a caesarean section (Table 10.8.1). The percentage of caesarean section is higher among older women, lower birth orders, and mothers with some secondary education. In urban areas, 6 percent of births were delivered by a caesarean section, compared to 4 percent in rural areas. Deliveries in Java-Bali are more likely to be by a caesarean section than in Outer Java-Bali regions (5 percent compared with only 3 percent).

Table 10.8.1 Delivery characteristics: background characteristics

Among births in the five years preceding the survey, the percentage of deliveries by caesarean section, the percentage of premature births, and the percent distribution by birth weight and by the mother's estimate of baby's size at birth, according to background characteristics, Indonesia 1997

			Birth weight			Size of child at birth					
Background characteristic	Delivery by C-section	Pre- mature birth	Less than 2.5 kg	2.5 kg or more	Don't know/ Missing	Very small	Smaller than average	Average or larger	Don't know/ Missing	Total	Number of births
Mother's age at birt				,							
<20	2.6	4.7	11.9	88.1	43.3	1.9	17.2	78.4	2.6	100.0	2,215
20-24	4.1	3.6	7.5	92.5	37.0	1.6	12.2	83.8	2.4	100.0	4,647
25-29	4.3	2.3	7.1	92,9	34.2	1.1	10.7	86.2	2.0	100.0	4,236
30-34	5.2	2.0	7.5	92.5	38.5	2.1	11.7	83.0	3.2	100.0	3,111
35+	5.0	1.7	5.1	94.9	44.4	1.6	11.0	85.9	1.5	100.0	2,007
Birth order											
1	5.2	4.7	9.6	90.4	30.5	1.5	15.1	81.4	2.0	100.0	5,314
2-3	4.2	2.4	5.9	94.1	36.4	1.6	10.6	85.9	1.8	100.0	6,581
4-6	3.1	1.3	7.7	92.3	48.3	1.7	11.1	83.8	3.3	100.0	3,314
7+	3.6	1.1	8.0	92.0	60.6	1.7	11.3	82.8	4.2	100.0	1,008
Residence											
Urban	6.3	4.0	6.6	93.4	10.1	1.4	11.2	86.8	0.7	100.0	4,373
Rural	3.5	2.5	8.4	91.6	48.7	1.7	12.6	82.7	3.0	100.0	11,844
Region/Residence											
Java-Bali	5.1	3.5	7.9	92.1	33.4	1.7	13.8	82.0	2.5	100.0	9,188
Urban	5.9	4.5	6.6	93.4	8.5	1.5	11.2	86.7	0.6	100.0	2,940
Rural	4.7	3.1	8.8	91.2	45.0	1.8	15.0	79.8	3.4	100.0	6,247
Outer Java-Bali I	3.2	2.0	6.9	93.1	42.4	1.6	9.8	86.7	2.0	100.0	4,821
Urban	7.1	3.0	5.9	94.1	11.2	1.2	10.6	87.4	0.8	100.0	984
Rural	2.2	1.7	7.3	92.7	50.4	1.7	9.5	86.5	2.3	100.0	3,837
Outer Java-Bali II	3.3	2.3	8.8	91.2	49.9	1.3	11.3	85.0	2.4	100.0	2,207
Urban	7.7	3.6	7.3	92.7	18.3	0.9	12.5	86.0	0.7	100.0	448
Rural	2.1	1.9	9.5	90.5	58.0	1.5	11.0	84.8	2.8	100.0	1,759
Mother's education											
No education	1.9	1.2	11,4	88.6	68.6	1.7	12.6	80.9	4.7	100.0	1,462
Some primary	3.0	2.0	10.9	89.1	55.2	1.9	14.7	79.4	4.0	100.0	4.067
Completed primary	4.3	3.0	7.9	92.1	39.1	1.8	12.9	83.4	1.8	100.0	5,262
Some secondary+	5.9	3.9	5.8	94.2	16.8	1.2	9.5	88.4	0.9	100.0	5,425
Total	4.3	2.9	7.7	92.3	38.4	1.6	12.2	83.8	2.3	100.0	16,217

In some provinces, caesarean sections were more frequently performed than in others, i.e., 8 percent or more in DKI Jakarta, Central Java, and East Kalimantan, compared with less than 2 percent in West Kalimantan, East Timor, Central Kalimantan, and Maluku (Table 10.8.2).

Table 10.8.2 Delivery characteristics: region and province

Among births in the five years preceding the survey, the percentage of deliveries by caesarean section, the percentage of premature births, and the percent distribution by birth weight and by the mother's estimate of baby's size at birth, according to region and province, Indonesia 1997

			Birth weight		Size of child at birth			ı			
Region and province	Delivery by C-section	Pre- mature birth	Less than 2.5 kg	2.5 kg or more	Don't know/ Missing	Very small	Smaller than average	Average or larger	Don't know/ Missing	Total	Number of births
Java-Bali	5.1	3.5	7.9	92.1	33.4	1.7	13.8	82.0	2.5	100.0	9,188
DKI Jakarta	8.4	4.5	6.3	93.7	4.7	3.6	10.5	85.0	0.9	100.0	572
West Java	2.1	3.2	10.4	89.6	42.3	2.5	11.9	80.9	4.6	100.0	3,351
Central Java	9.3	2.7	6.5	93.5	24.4	0.7	14.6	82.1	2.6	100.0	2,385
DI Yogyakarta	4.2	2.8	4.9	95.1	15.6	0.7	5.8	93.1	0.4	100.0	181
East Java	4.3	4.4	7.1	92.9	39.2	1.2	17.2	81.3	0.3	100.0	2,497
Bali	6.7	4.2	8.0	92.0	19.2	1.4	9.2	88.1	1.3	100.0	202
Outer Java-Bali I	3.2	2.0	6.9	93.1	42.4	1.6	9.8	86.7	2.0	100.0	4,821
Dista Aceh	3.4	1.1	3.6	96.4	63.6	0.2	9.9	89.0	0.9	100.0	354
North Sumatra	2.9	1.0	3.7	96.3	45.6	0.9	6.6	89.2	3.3	100.0	1,267
West Sumatra	5.2	3.6	5.8	94.2	21.7	0.6	11.4	86.1	1.9	100.0	385
South Sumatra	4.4	2.9	8.3	91.7	34.7	1.6	11.5	86.1	0.8	100.0	516
Lampung	2.3	2.3	5.1	94.9	47.7	1.5	9.5	88.2	0.8	100.0	544
West Nusa Tenggara		2.2	7.7	92.3	34.5	1.4	11.0	85.4	2.3	100.0	371
West Kalimantan	1.7	1.5	10.7	89.3	48.4	1.4	11.0	86.9	0.7	100.0	324
South Kalimantan	2.5	1.9	7.1	92.9	36.9	2.3	7.2	83.1	7.5	100.0	214
North Sulawesi	2.9	3.0	7.0	93.0	48.2	3.7	10.0	86.1	0.2	100.0	192
South Sulawesi	4.0	2.0	12.3	87.7	40.4	3.6	13.0	82.1	1.3	100.0	655
Outer Java-Bali II	3.3	2.3	8.8	91.2	49.9	1.3	11.3	85.0	2.4	100.0	2,207
Riau	3.3	1.8	6.5	93.5	45.0	0.8	13.0	85.5	0.6	100.0	344
Jambi	2.3	1.7	4.5	95.5	54.1	0.6	11.0	88.3	0.1	100.0	247
Bengkulu	2.7	1.4	4.6	95.4	41.8	1.6	10.1	86.5	1.9	100.0	117
East Nusa Tenggara	2.3	2.3	13.1	86.9	54.9	0.9	11.8	85.7	1.6	100.0	367
East Timor	0.9	0.4	6.0	94.0	<i>79.5</i>	0.2	1.9	92.7	5.2	100.0	116
Central Kalimantan	1.7	2.2	10.8	89.2	49.8	2.1	9.1	85.2	3.5	100.0	153
East Kalimantan	10.1	4.9	8.5	91.5	22.2	2.8	17.6	79.5	0.1	100.0	223
Central Sulawesi	2.5	2.9	15.6	84.4	39.6	4.0	16.3	71.1	8.5	100.0	177
Southeast Sulawesi	2.3	2.1	6.6	93.4	59.7	0.4	10.5	85.2	3.8	100.0	117
Maluku	1.9	1.2	6.4	93.6	62.7	0.7	7.1	87.4	4.7	100.0	173
Irian Jaya	4.0	3.2	7.9	92.1	55.6	1.0	7.1	90.7	1.2	100.0	173
Total	4.3	2.9	7.7	92.3	38.4	1.6	12.2	83.8	2.3	100.0	16,217

According to respondents' reports, about 3 percent of births were delivered prematurely. This figure is relatively low in comparison to the actual percentage of low birth weight deliveries (8 percent) and the percentage of newborns reported as small by their mothers (14 percent).

Since most deliveries are attended by traditional birth attendants at home, birth weights were not reported for 38 percent of births in the 1997 IDHS. This proportion is five times higher in rural than in urban areas (48 percent and 10 percent, respectively). Among babies who were weighed at birth, 8 percent were under 2.5 kilograms (i.e., low birth weight). The prevalence of low birth weight is higher among children born to mothers less than 20 years than among those born to older mothers (12 percent compared with 8 percent or less). The prevalence of low birth weight fluctuates with birth order. It is high (10 percent) among first-born children, declines to 6 percent among second and third children, and increases again to 8 percent among fourth and higher order births.

The prevalence of low birth weight declines as mother's educational level increases; 11-12 percent among children born to mothers with no education or some primary education, compared with 8 percent or less among children born to mothers with complete primary or higher education.

There is a slight difference in the prevalence of births with low birth weight by area of residence—8 percent in rural areas and 7 percent in urban areas. In the Outer Java-Bali II region, 9 percent of births weighed less than 2.5 kilograms, compared with 8 percent in Java-Bali and 7 percent in Outer Java-Bali I region.

Survey respondents were asked their perception of the size of their newborns. Approximately 14 percent of births were perceived by their mothers as being either very small or smaller than average. Younger mothers and those with less education are more likely to report that their newborn is smaller than average (Table 10.8.1).

The prevalence of low birth weight ranges between 10 and 16 percent in 6 provinces, namely West Java, West Kalimantan, South Sulawesi, East Nusa Tenggara, Central Kalimantan, and Central Sulawesi (Table 10.8.2).

# 10.8 Complications of Delivery

To identify complications associated with delivery, respondents were asked about certain signs and symptoms that they had experienced to all live births during the five years prior to the survey. Table 10.9 shows that 26 percent of births were accompanied by complications at delivery. Prolonged labor was reported for 22 percent of births, excessive bleeding for 7 percent and, vaginal infection for 4 percent. Two percent of births were accompanied with maternal convulsions.

In general, delivery by a medical professional is more likely to be reported involving complications, in particular prolonged labor and excessive bleeding (Table 10.9 bottom panel). As expected, the prevalence of delivery complications is higher (35 percent) among deliveries with caesarian section, mostly due to prolonged labor (25 percent) and excessive bleeding (14 percent). Among deliveries resulting in neonatal deaths, 38 percent were accompanied with complications including prolonged labor (32 percent), excessive bleeding (13 percent), vaginal infection (13 percent), and maternal convulsions (4 percent).

There are negligible differences in the prevalence of delivery complications by respondents' type of residence.

Table 10.9 Complications of delivery

Percentage of live births in the five years preceding the survey for which respondents had complications associated with delivery, by type of complication, residence, and selected medical maternity care indicators, Indonesia 1997

	Type of complication							
Medical maternity care indicator	Prolonged labor	Excessive bleeding	Vaginal infection	Convulsions	None	Numbe of births		
		UR	BAN					
Antenatal care/ delivery assistance <sup>1</sup>								
Both ANC and DA	23.2	5.9	2.2	1.3	72.8	3,452		
ANC only	21.1	5.5	1.6	0.9	77.0	800		
DA only	(34.4)	(7.3)	(7.5)	(0.0)	(60.5)	17		
No ANC or DA	27.9	3.2	5.0	7.7	70.0	103		
Neonatal death	30.4	9.1	9.7	1.8	65.8	65		
Delivery by C-section	26.6	6.8	4.7	2.1	67.0	276		
Total	22.9	5.8	2.2	1.3	73.4	4,373		
·	<u> </u>	RU	RAL			··········		
Antenatal care/	<del></del>			_ <del></del>		·		
delivery assistance <sup>1</sup>								
Both ANC and DA	25.0	7.8	4.9	2.6	70.7	4,373		
ANC only	18.2	7.1	3.7	1.3	77.6	5,865		
DA only	33.2	19.2	7.0	8.1	51.6	125		
No ANC or DA	21.8	8.5	5.1	2.1	73.5	1,481		
Neonatal death	33.0	13.7	13.8	5.1	61.2	184		
Delivery by C-section	23.3	19.3	6.8	4.1	63.3	418		
Total	21.3	7. <b>7</b>	4.4	2.0	74.3	11,844		
		TO	TAL	<u> </u>				
Antenatal care/ delivery assistance <sup>1</sup>								
Both ANC and DA	24.2	7.0	3.7	2.0	71.6	7,825		
ANC only	18.6	6.9	3.4	1.3	77.6	6,665		
DA only	33.3	17.7	7.1	7.1	52.7	142		
No ANC or DA	22.2	8.2	5.1	2.5	73.3	1,584		
Neonatal death	32.4	12.5	12.7	4.3	62.4	249		
Delivery by C-section	24.6	14.4	6.0	3.4	64.8	695		
Total	21.8	7.2	3.8	1.8	74.1	16,217		

Note: Figures in parentheses are based on 25-49 unweighted cases.

Care provided by a doctor, nurse, or midwife.

ANC = Antenatal care

DA = Delivery assistance