



Equity in Maternal and Child Health Care Financing in Rural China: The Role of the Government and Civil Society

Introduction

The 1994 fiscal reform in China recentralized government revenues without correspondingly recentralizing spending responsibilities, resulting in a major vertical imbalance in central and local fiscal revenues and responsibilities. As a result, lower level governments, especially county governments, account for the bulk of expenditures on maternal and child health (MCH) care.



At the same time, the large differences in the level of economic development across the country have resulted in wide horizontal disparities in the revenue capacity for MCH between different counties and regions. The unequal local revenue capacity further contributed to the serious disparities in MCH outcomes between different parts of the country. Therefore, how to mobilize the resources to better finance local MCH care has become one of the top concerns in the policy agenda at both the central and local level.

Aim

This research aims to improve the national MCH outcomes in China and to reduce inequalities in it among different regions through promoting an adequate and effective system of public health financing.

Objective

- Analyze the inter-relationships among the central and local governments as well as the civil society in shaping the current situation of MCH care financing and outcomes;
- Analyze the possible ways of re-shaping the relationship among different interest groups at the local level so as to improve the local capacity of MCH care financing;
- Analyze the feasible contribution of the central government to local MCH financing in the less-developed communities, where local revenues cannot sufficiently finance an adequate level of MCH care.

Key Questions

- What has been the system and process of MCH financing in China after the fiscal decentralization?
- What are the common and different interests of the various interest groups in MCH financing?
- What would the most feasible ways

be to expand the scope of the common interests of the various interest groups in MCH financing?

- How significant could the role of the central government be in terms of reducing the inequality of MCH care financing capacity and MCH outcomes?

Model

- Triangle Interests Models (TRIM), in which the interests of the three parties, the local government, the local MCH care providers, and the MCH care consumers, will be analyzed.
- Tetragonal Interests Models (TEIM), in which the interests of the four parties, the central government, the local government, the local MCH care providers, and the MCH care consumers, will be analyzed.

Theory

This research will employ two perspectives and two theories.

- Human Development Perspective
- Governance Perspective
- Agency Theory
- Game Theory

Methodology

- Select two counties to fit in the two models, the TRIM and the TEIM models.
- Collect necessary statistical data in these two counties with regard to MCH care financing and outcomes.

- Conduct in-depth interviews with central and local government officials, medical doctors, and local users of MCH care services.

State of the Work

In the two ongoing research projects of MCH, of which one is funded by Save the Children (UK), and the other by UNICEF and Chinese MOF, a lot of data has already been collected in three provinces in China, Jiangsu, Anhui, and Yunnan. These provinces each represent the most developed, the medium developed, and the least developed areas in China, respectively, and have employed different models of MCH financing. They can serve as a good starting point to analyze the questions raised in this research, and to provide ideal examples to fit the TRIM and TEIM models.

The Researcher



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