



UNIVERSITAS
GADJAH MADA

Sharing pembelajaran dari Global Symposium on Health System Research 2024

Yogyakarta, 18 Desember 2024

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LOCALLY ROOTED, GLOBALLY RESPECTED

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Kerangka

1. *Apa itu Global Symposium on Health Systems Research*
2. *Pembelajaran dari topik-topik yang dibahas*
3. *What's next?*

Apa itu Global Symposium on Health Systems Research



Health System Global: a membership only society that connects the health systems researchers, policymakers and practitioner communities and contributes to the attainment of better, health equity, and well-being

Thematic Working Group

- Climate resilient and sustainable health systems
- Fragile and conflict-affected setting
- Accountability and anti-corruption
- *The private sector in health*
- Community health workers
- Ethics and Justice
- Teaching and learning
- *Social Sciences Approach*
- *Translating evidence into action*

Capacity strengthening and knowledge exchange

- *Global symposium, regional network conference and webinar*
- *Publication: BMC Health Research Policy and Systems; Health Policy and Planning; BMJ Global Health*
- *Women mentorship*
- *Emerging Voices for Global Health*

Global Symposium' Theme

- 2010 (Montreux) *Science to Accelerate Universal Health Coverage*
- 2012 (Beijing) *Inclusion and Innovation Towards Universal Health Coverage*
- 2014 (Cape Town) *The science and practice of people-centered health systems*
- 2016 (Vancouver) *Resilient and responsive health systems for a changing world*
- 2018 (Liverpool) *Advancing Health Systems for All in the SDG Era*
- 2020 (Dubai – hybrid) *Re-imagining Health Systems for Better Health and Social Justice*
- 2022 (Bogota) *Health Systems Performance in the Political Agenda: Sharing lessons for current and future global challenges.*
- 2024 (Nagasaki) *Building just and sustainable health systems: centering people and protecting the planet*
- 2026 (Dubai)

Pembelajaran dari topik-topik bahasan

(Total sesi HSR: 167 sesi dalam 5 hari)

- Theme 1: Strengthening health systems for planetary health
 - Global health security: human and animal health
 - Climate change impact on health
 - Sustainable health system: hospital' carbon footprint
- Theme 2: Advancing justice, inclusion, and belonging in health systems, in times of peace and conflict
 - Sistem Kesehatan dalam setting situasi konflik dan rawan: displaced people, migrant people, limited state presence
 - People-centered, inklusif: no one is left behind; mainstreaming gender (termasuk marginalized gender) dan disability; representativeness dalam decision making
- Theme 3: Health governance, policy, and institutional frameworks for just and sustainable health systems
 - Urban PHC (*family-health team*)
 - Remote island (*research on telemedicine and drone-based pharmaceutical transport, education for healthcare providers and assisting medical institutions*)
 - Dekolonialisasi global health
- Theme 4: Knowledge for just health systems
 - Ekosistem untuk *health policy and system research : external-internal vs structured consultation*
 - *Thinking working politically:* pemanfaatan applied *Political economy analysis (PEA)*
 - *Evidence-to-Policy and Evidence-to-Action: Health impact assessment, HTA*

What's next

- Peneliti

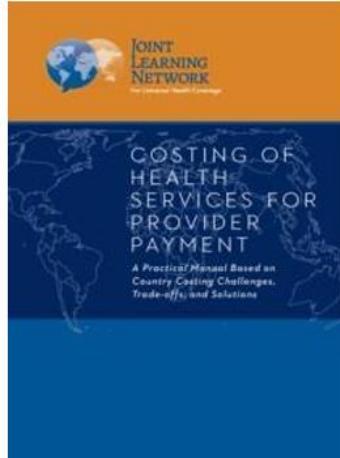
- Inkorporasi GEDSI dalam penelitian
- Pemanfaatan metode atau framework, e.g. lived experience (pendekatan fenomenologi, narrative inquiry, go-along tours, geospatial methods)
- Adaptasi tools untuk keperluan penelitian atau analisis (kuantitatif dan kualitatif), e.g. EquityTool, tools produced by JLN, EquiPAR, dll
- Pengembangan topik-topik baru yg relevan di global health *post 2030 agenda, health diplomacy, digital health, private sector, climate change, planetary health ...*

- Mahasiswa

- Magang dalam penelitian-penelitian yang dilakukan PKMK terkait topik tertentu
- Ide thesis

The following table provides the same information on the movement between national quintiles when using the EquityTool versus the original DHS wealth index:

EquityTool National Quintiles						
Original DHS National Quintiles	Quintile 1	Quintile 2	Quintile 3	Quintile 4	Quintile 5	Total
Quintile 1	17.40%	2.58%	0.03%	0.00%	0.00%	20%
Quintile 2	2.61%	13.79%	3.54%	0.06%	0.00%	20%
Quintile 3	0.00%	3.75%	12.78%	3.45%	0.01%	20%
Quintile 4	0.00%	0.03%	3.47%	14.05%	2.45%	20%
Quintile 5	0.00%	0.00%	0.05%	3.21%	16.72%	20%
Total	20.01%	20.15%	19.88%	20.78%	19.18%	100%



Person-Centered Maternity Care (PCMC)
13 Item Short Scale Guide
Scale developed by University of California, San Francisco, Institute for Global Health Sciences
University of California, Los Angeles, Jonathan and Karen Fielding School of Public Health
Institute for Management

OVERVIEW
Maternal mortality continues to be unacceptably high in low- and medium-HDI countries. To address this, maternal care needs to go beyond clinical components to also include respectful and dignified care. Person-centered maternity care (PCMC) is a key factor in achieving this. PCMC includes respectful and dignified care, person-centered communication, and low rates of facility birth. PCMC is associated with lower rates of maternal mortality, reduced complications, and low rates of facility birth. PCMC is associated with higher levels of respect and response to individual women and their families. PCMC is associated with higher levels of respect and response to individual women and their families. PCMC is associated with higher levels of respect and response to individual women and their families.

Sample population (Who can use this scale?)
Women who have recently given birth to a baby

Administrative context or How to use this scale?
All women must be consented before the scale is administered. Both the consent and scale should be administered in a private setting. The scale is intended for management decision-making in health facilities. This guide provides practical advice on how to administer the scale. The scale provides domain-specific insight in the areas of dignity, respect, communication, autonomy, and emotional support. The scale can be used to monitor the quality of care and to inform quality assessment and improvement efforts.

SCALE DEVELOPMENT
The shortened 13 item scale presented here is derived from the original 30-item scale developed by the Joint Learning Network for Patient Safety and the University of California, San Francisco, and the University of California, Los Angeles developed a 30-item scale to assess PCMC. Together, we have developed a shortened version of the scale to facilitate its use in management decision-making in health facilities. This guide provides practical advice on how to administer the scale. The scale provides domain-specific insight in the areas of dignity, respect, communication, autonomy, and emotional support. The scale can be used to monitor the quality of care and to inform quality assessment and improvement efforts.

VALIDATION
All women must be consented before the scale is administered. Both the consent and scale should be administered in a private setting. The scale is intended for management decision-making in health facilities. This guide provides practical advice on how to administer the scale. The scale provides domain-specific insight in the areas of dignity, respect, communication, autonomy, and emotional support. The scale can be used to monitor the quality of care and to inform quality assessment and improvement efforts.

SCALE DEVELOPMENT SITE
INDIA: 27 ITEMS
VALIDATED
KENYA: 30 ITEMS
VALIDATED
GHANA: 30 ITEMS
VALIDATED

Manfaat lain

Networking

Meet the funders

Meet the editors

Meet the policymakers

Terimakasih

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<https://www.kebijakankesehatanindonesia.net/>

Reportase The 8th Global Symposium on Health Systems Research 2024



Health Systems Global (HSG) adalah sebuah organisasi internasional yang berfokus pada penelitian dan pengembangan sistem kesehatan di seluruh dunia. Organisasi ini berperan sebagai wadah untuk memfasilitasi kolaborasi antara peneliti, pembuat kebijakan, praktisi, dan pemangku kepentingan lainnya yang terlibat dalam sistem kesehatan dan kebijakan kesehatan global. Tujuan utama HSG adalah untuk meningkatkan pemahaman dan praktik dalam penguatan sistem kesehatan agar dapat memberikan layanan kesehatan yang lebih baik, merata, dan berkelanjutan bagi semua orang. HSG menyelenggarakan simposium dua tahunan untuk memfasilitasi pertukaran pengetahuan dan pengalaman di bidang penelitian sistem kesehatan dan kebijakan.

Pada tahun 2024, tema simposium yang diusung oleh HSG adalah "Building just and sustainable health systems: centering people and protecting the planet". Perubahan iklim mempengaruhi kesehatan dan sistem kesehatan. Sistem kesehatan yang kuat sangat penting untuk mencapai kesehatan bagi semua orang, yang merupakan tujuan dari HSG dan tujuan kesehatan internasional, sebagaimana tecerminkan dalam Tujuan Pembangunan Berkelanjutan (*Sustainable Development Goals/SDGs*). Dengan landasan pemikiran ini, simposium tahun 2024 mengambil fokus pentingnya sistem kesehatan yang berfokus pada manusia, yang merespons perubahan global, dan berupaya melindungi lingkungan di masa depan.

Simak reportase kegiatan *HSR Global Symposium on Health System Research* 2024 pada link berikut

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