











Royal Tropical Institute
KIT Development Policy & Practice

How the Regulation Interprets in Local Level for Good Governance in Chinese Health System? A Comparative Study of three Regulations in China

Xiaohua Ying¹, Yingyao Chen¹, Xu Qian¹, Hong Jiang¹, Maitrayee Mukhopadhyay²

1. School of Public Health, Fudan University (China). 2. Social Development and Gender Equity, Royal Tropical Institute (Netherlands).

Regulation interpretation, as key determinant on its effect, is influenced by governance which is one of the social structure determinants. This paper drawn from a wider research on stewardship and regulation in maternal health in Vietnam, India and China, analyses the advantages as also limitations of sub national level government interpreting and implementing national maternal health regulations in China. Three regulation cases were studies. For each case, 28 respondents including policy makers, administrators, physicians, users and other actors were interviewed.

Emergency Obstetric Care (EmOC)

Subnational regulation

To improve EmOC services quality

Grievance Redressal (GR)

National regulation

To guide GR processes in hospitals and to protect both provider and patient rights

Prenatal Diagnosis (PD)

National regulation

To ensure the safety and effective use of prenatal diagnostic technologies through high technology approval

All the regulations primarily regulated the provider-side through the dominant command control approach, and were interpreted at each administrative level.

- The EmOC regulation, which developed with local high political and administrative will, was well interpreted in each district level on how to set up robust consultation and referral system.
- ➤ The GR regulation was interpreted concurrently with other regulations as a guideline of a part of health care quality by provincial government.
- ➤ The PD regulation as locally adapted increased access to screening but not to prenatal diagnosis; risk averse screening institutions transferred these to patients causing avoidable anxiety to users; this in turn lowered service quality.

These indicated that local government played key roles in adapting regulations to suit the specific context which in turn influenced the effect of the regulation.

This paper is a part of a research project, "Health System Stewardship and Regulation in Vietnam, India and China" (HESVIC, Project ID: 222970) was a three-year research project (2009-12) implemented under the European Commission Seventh Framework Programme (FP7). The goal of the project was to support policy decisions in the application and extension of principles of accessibility, affordability, equity, and quality coverage of maternal health care in the three countries. The HESVIC research was conducted by a consortium of six partners in Asia and Europe.