

The Birth of I-Kelahiran – Sabah's experience

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Abstract

Though over the years, Sabah has recorded an increase of childbirth with better healthcare indicators, improving maternal and childcare has always been a major challenge. Therefore, with the aim of addressing the current issues of birthing discrepancy, delayed reporting of high risk pregnancy and maximum immunization coverage within the state of Sabah, "I-Kelahiran": Inovasi Kelahiran: was developed in June 2012. This computerised birthing system acts not only as an online storehouse of information, it also traces data and generates reports to reduce enormous duplication, save cost and time, as well as eliminating delays and confusion on management of health information. The system also helps to overcome the issue of collecting data from rural health personnel, particularly with the extreme geographical terrain in Sabah. This paper discusses how I-Kelahiran, a health information system was developed under the Sabah Health Department and shares its experiences in implementation. The experience and feedback from this system will help to build a full-fledged system capable of handling childbirth data at the higher level in Borneo.

Keywords: healthcare, maternal and childcare, health information system, Borneo

Abbreviations: Inovasi Kelahiran (I-Kelahiran)

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Introduction

Malaysia is a Southeast Asian country with thirteen states, consisting of two different geographical regions that are divided by the South China Sea. The rapidly growing economy has made a major impact, resulting in some commentators referring to it as the "Asian Dragon" with a total population of 28,401,00 and a Gross national income per capita of 16,530 Intl. US\$ (World Bank, 2013). Healthcare in Malaysia has undergone some radical transformations. The earliest pre-colonial medical cases were confined mostly to those traditional remedies that are evident today in Chinese, Malay, Indian and other ethnic groups. However, with the birth of colonialism, more modern and westernized medical practices were slowly introduced to the country. The total expenditure on health per capita (Intl \$, 2011): 616, and total expenditure on health as % of GDP (2011) is about 3.8% (World Health Organization, 2012a).

At present, Malaysia's healthcare system is divided into two sectors—the public sector and the private sector whereby the government places importance on the expansion and development of health care, putting 5% of the government social sector development budget into public