FIRM-LEVEL PERSPECTIVES ON PUBLIC SECTOR ENGAGEMENT WITH PRIVATE HEALTHCARE PROVIDERS: SURVEY EVIDENCE FROM GHANA AND KENYA

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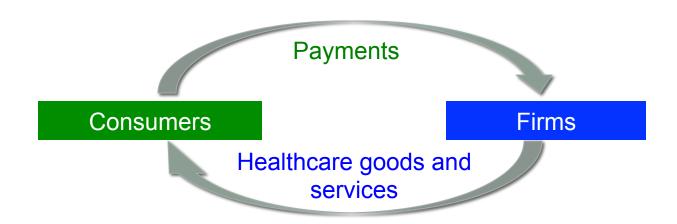
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Understanding the Nature of Engagement with the Private Health Sector is Critical

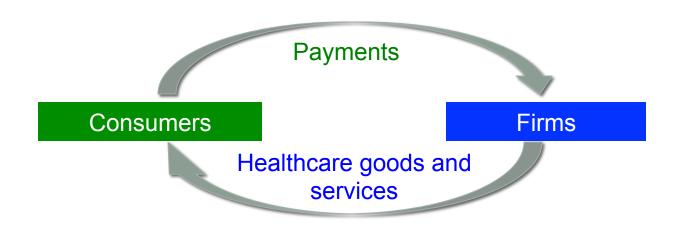
- How should Sub-Saharan African governments engage with the PHS to achieve health goals?
 - Private providers account for as much as 50 percent of health care provision, potentially compensating for limited government resources
 - However, the appropriate role for the PHS remains controversial
 - : Consumers may perceive higher quality or responsiveness in PHS. But also concerns that the PHS limits access for the poor
- Need to understand the types of engagement policies governments currently are conducting and the way in which such policies are realized in practice

Our findings suggest there is untapped potential for greater engagement with the private health sector in SSA

What aims do governments have in a market setting?



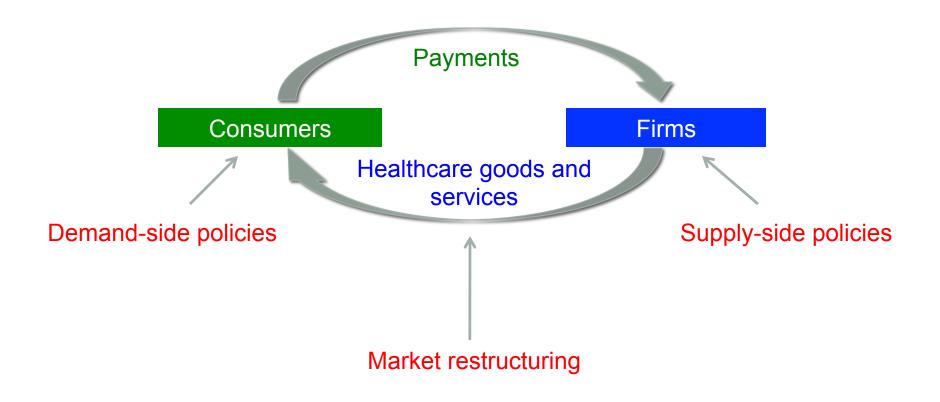
What aims do governments have in a market setting?



Two important roles for government

- Access and equity (especially for public goods)
- Quality

What policy options do governments typically have to achieve their aims?

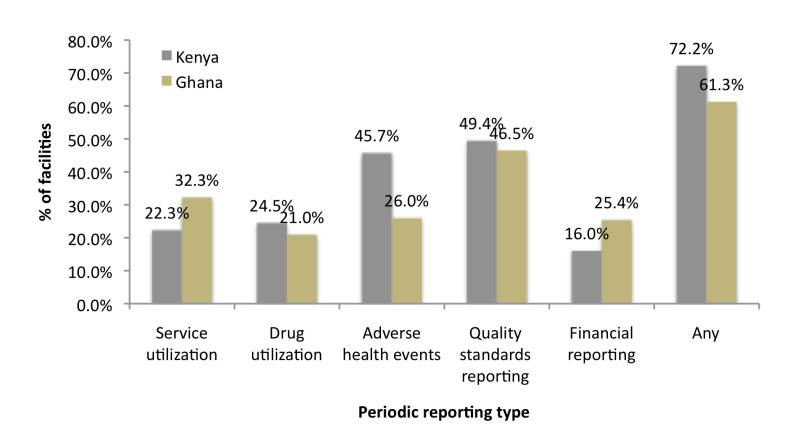


Study aim: examine a range of supplyside approaches 'on the ground' in SSA

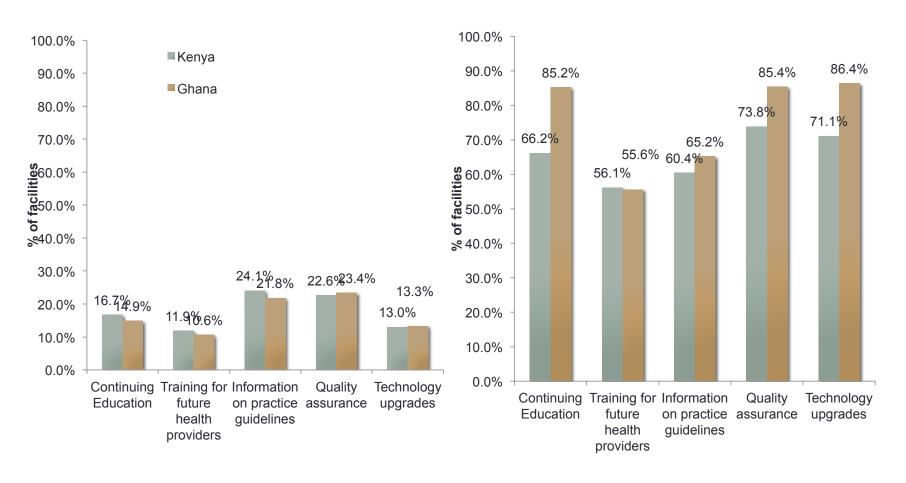
Information collection and dissemination

- Monitoring of provider activity
- Provision of information to private providers
- Developing capacity (inputs)
 - Technical assistance
 - Financial assistance/subsidies
- Influencing behavior (outputs)
 - Performance-based incentives
 - Subsidies/direct purchase of goods and services
 - Regulation

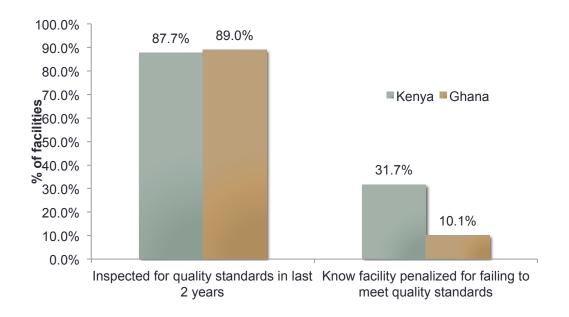
How much information flows from firms to governments?



What type of assistance do governments provide for capacity building?

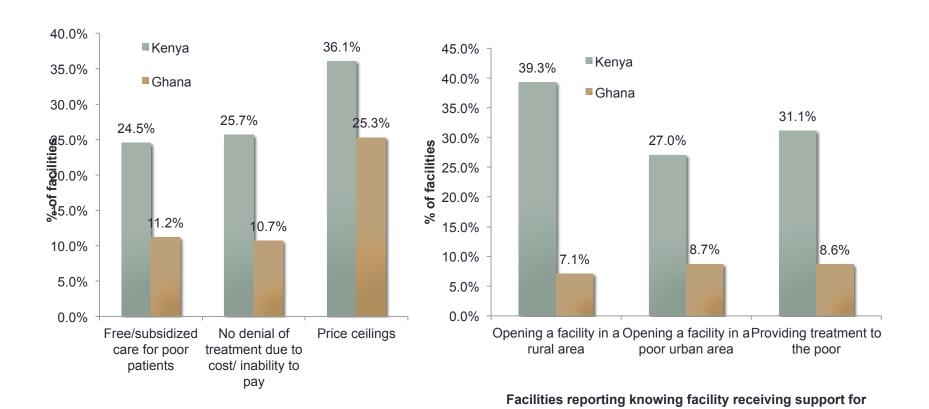


How do governments try to promote firm behavior that support quality standards?



Facilities reporting enforcement of quality-related regulation

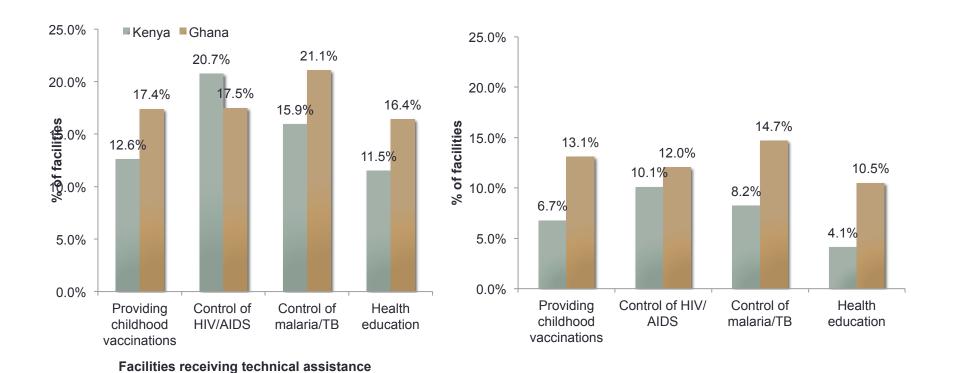
How do governments try to promote firm behavior that supports equity/access?



activities

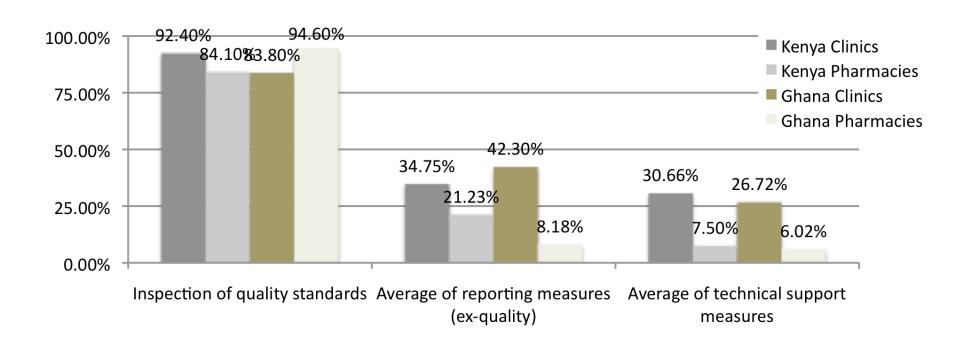
Facilities reporting regulations

Do governments support private firms' MDG-related activities?



Facilities receiving financial assistance

How does engagement vary across facility types: clinics vs pharmacies?



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Information from firms to government

9	Kenya			Ghana		
	Clinics	Pharmacies	All	Clinics	Pharmacies	All
Facilities with periodic reporting of:						
Service utilization	39.8%	8.6%	22.3%	58.2%	3.4%	32.3%
Drug utilization	22.9%	25.8%	24.5%	32.3%	8.2%	21.0%
Adverse health events	58.5%	35.8%	45.7%	42.6%	8.0%	26.0%
Quality standards reporting	55.9%	44.4%	49.4%	59.2%	32.2%	46.5%
Financial reporting	17.8%	14.7%	16.0%	36.1%	13.1%	25.4%
Any reporting	75.4%	69.7%	72.2%	72.7%	48.9%	61.3%

Support from government to firms

	Kenya			Ghana		
	Clinics	Pharmacies	All	Clinics	Pharmacies	All
Facilities offered technical support for:						
Continuing Education	6.8%	0.7%	3.4%	10.3%	0.0%	5.3%
Training for future health providers	3.4%	2.0%	2.6%	7.2%	0.0%	3.7%
Information on practice guidelines	7.7%	2.6%	4.8%	18.6%	0.0%	9.5%
Quality assurance	6.0%	1.3%	3.3%	18.6%	1.1%	10.1%
Technology upgrades	2.6%	0.7%	1.5%	13.4%	0.0%	6.9%

Summary

- Even limited data suggests considerable room to expand engagement both by implementing new policies and strengthening existing ones
- Based on reporting, governments are likely to have a very incomplete/inconsistent picture of the private health sector
- In practice, firms report government interaction that seems seem focused on "command-and-control" approaches to quality rather than fostering expansion and capacitybuilding, even if this promotes access and equity outcomes.
- Pharmacies report relative lack of government interaction, important given patterns of care-seeking in SSA