



Curating Existing Stewardship Tools for Family Planning and Maternal, Newborn, and Child Health with the Market Development Approach

A technical briefing note

September 2022 / Daniela Gutierrez and Sarbani Chakraborty

Introduction

There is a growing understanding of why markets for family planning (FP) and maternal, newborn, and child health (MNCH) products and services fail to operate in alignment with national goals, such as the increased use of modern contraceptives and increases in institutional deliveries, and how an enabling environment can be influenced to create that alignment.

Creating and sustaining an enabling environment for FP, MNCH, and other health products and services is referred to as “stewardship.” Under USAID’s Frontier Health Markets (FHM) Engage, and consistent with the market development approach (MDA), stewardship is viewed in functional terms, focusing on “*what is done*,” “*what should be done*,” and “*who should do it*” to ensure that a health market performs well to achieve a country’s stated national health goals (see Box I).

Box I. What is Stewardship?

Under MDA, the stewardship function will be carried out by multiple market actors (both public and private). Important stewardship functions include: (i) formulating a strategic vision for the health system and specific market systems; (ii) collecting, analyzing, and disseminating information about health-related products and services; (iii) regulating the activities of ‘care-seekers’ (health consumers) and ‘care-providers’ (healthcare service providers and product suppliers) in ways which safeguard population health but also enables appropriate market development and growth; (iv) financing to shape / support the activities of market actors; and (v) mobilizing market actors through the creation / maintenance of platforms for inclusive policy dialogue.

As stewardship is concerned with the operation and performance of the market, stewardship functions are often performed by state authorities, which have the formal mandate to ensure markets work well on behalf of the population. However, such functions can also be performed by multiple different actors, including public market actors representing the wide and diverse range of government actors at national and regional levels; private market actors comprised of agencies, councils, and professional / industry associations; and civil society groups representing key segments of FP consumers such as youth, pregnant women, and mothers.

Globally, important work has been done recently – including under the World Health Organization (WHO) – to define who and how stewardship should be done to have a maximum, country-level impact. Here, we combine these various concepts to create one set of stewardship functions under the MDA.

Stewardship functions to create healthy FP/MNCH markets

In 2020, the WHO convened an experts group – called the Advisory Group on the Governance of the Private Sector – to set the norms and behaviors that would motivate country governments to invest in appropriate resources to strengthen governance of the private health sector to deliver on the promise of universal health care.¹ Effective governance, as the report states, will require changes in behaviors for both the WHO and country governments in order for them to learn how to steward a mixed health system comprised of multiple stakeholder groups.

1. **Align Structures:** Government takes the required actions to align public and private structures, processes, and institutional architecture.
2. **Build Understanding:** Government facilitates information-gathering and sharing about all elements of service provision in the health system.
3. **Foster Relations:** Government establishes mechanisms that allow all the relevant stakeholders to participate in policymaking and planning.
4. **Enable Stakeholders:** Government authorizes and incentivizes health system stakeholders to align their activities and further leverage their capacities for national health goals.
5. **Nurture Trust:** Government leads the establishment of transparent, accountable, and inclusive institutions at all levels to build trust.
6. **Deliver Strategy:** Government establishes the priorities, principles, and values for the health system and works out how to translate these priorities, principles, and values into practice (inclusive health plans/strategies).

In general, the WHO's governance work focuses on what has been referred to as '*high-level governance*' referring to 'how are policy-level decisions made' and 'stewardship of a mixed health system.' In contrast, FHM Engage works on '*low-level governance*.' Low-level governance is concerned with aligning the incentives, capacities, and accountability structures among diverse market actors to address the underperformance of key market functions so that the FP market operates in a manner that improves FP outcomes.

Low-level governance involves several stewardship functions² that map directly to market systems in the market development approach (see MDA Brief #2). These functions include:

¹ Strategy Report: Engaging the private health service delivery sector through governance in mixed health systems. Geneva: World Health Organization; 2020. Licence: CC BY-NC-SA 3.0 IGO.

² Salamon, Lester M. The Tools of Government: A Guide to New Governance. University Press. 14 March 2002.

- **Function 1. Co-creating a shared vision** of a well-performing FP market that aligns the market actors’ – public, private, and consumers – roles, responsibilities, and actions.³ The market vision should be aligned and support the government’s overarching private sector objective (grow, harness, convert, or restrict). It is important to note that a government can have different private sector engagement strategies for different markets.⁴
- **Function 2. Collecting, analyzing, and disseminating market intelligence** about health-related products and services to influence market actors’ incentives and behaviors.⁵ This function also includes using this data to diagnose the FP market’s core market operations and market systems performance and to monitor performance and hold market actors accountable through performance data.
- **Function 3. Regulating** activities of ‘care-seekers’ (health consumers) and ‘care-providers’⁶ (service providers and product suppliers) through inclusive processes to design and implement policy and regulations directly shaping FP markets.
- **Function 4. Ensuring financing** that supports / shapes ‘care-seekers’ and ‘care-providers’ activities.⁷ Financing can include public financing mechanisms (i.e., contracting, insurance, others) as well as private financing (i.e., capital and debt).
- **Function 5. Mobilizing and consulting market actors** through the creation / maintenance of platforms for inclusive policy dialogue and the collective implementation of market strategies to deliver FP and MNCH services and products.^{8,9}

For market facilitators and market actors to advance stewardship, there is a need not just to define the functions but also to outline the tools and techniques to carry out the work. FHM Engage reviewed existing stewardship tools from the WHO’s Country Connector on Private Sector in Health (CCPSH) Tool Repository.¹⁰ The CCPSH Tool Repository is an online repository that collects available tools, practical guidance, and training on how to effectively engage with the private sector in health. FHM Engage also scanned for tools from other initiatives applying MDA – many of which were in the Tool Repository.

³ World Health Organization. 2020. Strategy Report: Engaging the private health service delivery sector through governance in mixed health systems. Geneva: World Health Organization.

⁴ Harding, A., Precker, A. Private Participation in Health. 2003.

⁵ Mangone, E, and Romorini, S. 2021. *Private Sector Engagement in National Health Management Information Systems: Barriers, Strategies, and Global Case Studies*. Rockville, MD: Sustaining Health Outcomes through the Private Sector Plus Project, Abt Associates Inc.

⁶ Riley, P, Callahan, S, and Dalious, M. 2017. *Regulation of Drug Shops and Pharmacies Relevant to Family Planning: A Scan of 32 Developing Countries*. Bethesda, MD: Sustaining Health Outcomes through the Private Sector Plus Project, Abt Associates Inc.

⁷ Estévez, I, Ladha, H. 2022. Unlocking Finance for the Private Health Sector. Brief. Rockville, MD: Sustaining Health Outcomes through the Private Sector Plus Project, Abt Associates.

⁸ Bossert T, Hsiao W, Barrera M, Alarcon L, Leo M, Casares C. Transformation of ministries of health in the era of health reform: the case of Colombia. *Health Policy Plan*. 1998; 13, 59-77.

⁹ Lagomarsino, Gina, Stefan Nachuk, and Sapna Singh Kundra. 2009. *Public stewardship of private providers in mixed health systems: Synthesis report from the Rockefeller Foundation—sponsored initiative on the role of the private sector in health systems*. Washington, DC: Results for Development Institute.

¹⁰ World Health Organization. 2021. Country Connector on Private Sector in Health. Available at: <https://www.ccpsh.org/tool-repository>

To curate the tools, FHM Engage:

1. Defined the types of tools relevant to each of the stewardship functions;
2. Identified tools using the keyword, topic, and health area search functions available in the online Tool Repository; and
3. Reviewed and selected tools relevant to the MDA and FP/MNCH health markets approach.

The objectives of a curated 'tools' list are many:

- Direct market actors to tools and approaches that will support them to perform their market stewardships roles;
- Allow market actors to explore what other countries have done and/or what tools they have used to carry out a specific stewardship functions to shape FP and MNCH markets;
- Accelerate country learning based on other country experiences when developing and implementing appropriate policies and processes to engage the private sector and strengthen market performance; and
- Build global knowledge on tools as countries apply, adapt, and/or create tools and approaches to strengthen stewardship functions.

The list below is by no means exhaustive; indeed, FHM Engage selected the tools and approaches that *are most relevant and adaptable to MDA*. Over the course of the project, FHM Engage will continue to update the list as well as add its own tools designed to strengthen different aspects of market stewardship.

Existing tools to perform stewardship functions to improve performance of FP/MNCH markets¹¹




Stewardship Functions	Types of Tools	Curated Tools from Country Connector
<p>Function 1. Co-create a shared vision of a well-performing FP market that aligns market actors' roles, responsibilities, and actions</p>	<p>Tools that support governments and other non-state actors to design strategies and approaches for engaging the private sector in the health system.</p>	<ul style="list-style-type: none"> ▪ Private Health Policy Toolkit for Africa: The tools presented in this report help readers design strategies and approaches for engaging the private sector in a health system. ▪ Assessment to Action: A Guide to Conducting Private Health Sector Assessments: A guide to conducting private health sector assessments in developing countries. By providing key data on the size, scope, and activities of the private sector, these assessments help stakeholders develop strategies, make decisions, and design programs that will maximize private sector contributions to health and facilitate greater public-private cooperation in health. ▪ Total Market Approach: TMA is a lens or process for developing strategies that increase access to priority health products and services. TMA collects and analyzes data to develop strategies to leverage the comparative advantages of public, non-profit, and private commercial sources of health goods to increase access to and sustainability of priority health products and services. ▪ Shaping Equitable Market Access: SEMA aims to shift the power of market stewardship to countries by supporting country-led strategies through locally based operations by (i) strengthening market data (see below), (ii) building collaborative market strategy platforms, and (iii) coordinating market actor's activities and financing.
<p>Function 2. Collect, analyze, and disseminate market intelligence about health-related products and services</p>	<p>Tools that support strengthening data and information systems related to the whole health</p>	<ul style="list-style-type: none"> ▪ Private Sector Counts: Uses Demographic and Health Survey (DHS) data to illuminate the important contribution of the

¹¹ Majority of tools are curated from the WHO's Country Connector on Private Sector in Health - Tool Repository (<https://www.ccpsh.org/tool-repository>) and other projects applying MDA.

	<p>system, including the private sector. Tools to strengthen consumer and supplier information.</p>	<p>public and private sectors to sick childcare and FP service delivery.</p> <ul style="list-style-type: none"> ▪ Family Planning Market Analyzer: Combines data from DHS and FP2020's projections of modern contraceptive prevalence (mCPR) to allow users to explore potential scenarios for a total market approach. ▪ SEMA: One of SEMA's core activities is to strengthen market data analysis and resources by investing in, aggregating, analyzing, and sharing market data to assess market shortcomings, build a holistic view of user demand, and inform market strategies. ▪ Provider Mapping Software: A software for a web platform for storing and browsing information on private providers.
<p>Function 3. Regulate the activities of 'care-seekers' and 'care-providers' to shape FP / MNCH markets</p>	<p>Tools developed to accredit private health services. Approaches to establish public private collaboration and partnerships that include accountability mechanisms.</p>	<ul style="list-style-type: none"> ▪ SafeCare Standards: A standardized accreditation and quality improvement approach organized into 13 categories of management, clinical, clinical support, and ancillary aspects of health services. They are meant to be applied in low-resource settings across most provider types, from small health shops to large district hospitals. ▪ Guidance on Designing Healthcare External Evaluation Programmes including accreditation: Provides guidance for countries, agencies, and other groups in the process of setting up new health or social care external evaluation organizations or programs. ▪ Engagement Factors Self-assessment Tool: Tool intended to assess strengths and weaknesses related to the capacities, relationships, and interactions between public and private sector partners entering or implementing a public-private engagement, including accountability. ▪ Joint Health Inspection Checklist (JHIC): JHIC is a tool for facility inspection along with a scoring system with warnings and sanctions resulting from the score. Both public and private facilities are inspected and scored. Facilities are given time to improve performance or are closed if they lack an appropriate license / score.

<p>Function 4. Ensure financing that supports / shapes ‘care-seekers’ and ‘care-providers’ activities</p>	<p>Tools and approaches that support governments and other non-state actors to better understand and manage markets for health products. This includes tools on market shaping and market segmentation. Contracting tools.</p>	<ul style="list-style-type: none"> ▪ Market Segmentation Primer: Uses market segmentation to increase FP market efficiency and equity, and to expand access to and affordability of modern contraception (Related: The Value of Segmentation: Market Research Among Private Maternity Providers in India) ▪ Healthy Markets for Global Health-A Market Shaping Primer: A primer that examines the definition and approach to market shaping, and offers a simple, five-step framework that captures common elements and characteristics underpinning the numerous interventions explored. ▪ Shaping Health Services and Systems: Webinar series looking at the necessary building blocks for affordable, sustainable healthcare systems.
<p>Function 5. Mobilizing and consulting market actors through the creation / maintenance of platforms</p>	<p>Tools for Public-Private Dialogue (PPD) Platforms. Tools aimed at supporting governments and other non-state actors to effectively engage with the private sector in their stewardship role over the health system as whole.</p>	<ul style="list-style-type: none"> ▪ The PPD Handbook-A Toolkit for Business Environment Reformers: Practical guidance and advice to stakeholders who want to build and maintain PPD. ▪ State of Play - Public-Private Dialogue: A how-to guide that captures the evolution of PPD and the challenges faced by practitioners. ▪ Engaging the Private Sector in PHC to Achieve UHC: A practical manual that contains step-by-step guidance along with real-world examples and case studies to help facilitate public-private sector engagement around primary health care (PHC).

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Frontier Health Markets (FHM) Engage works to improve the market environment for greater private sector participation in the delivery of health products and services and to improve equal access to and uptake of high-quality consumer driven health products, services, and information. FHM Engage is implemented by four core consortium partners: Chemonics International (prime and co-technical lead), Results for Development (co-technical lead), Pathfinder International, and Zenysis Technologies, and a host of Network Implementation Partners (NIPs).

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