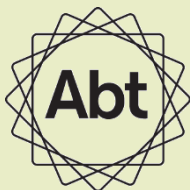


# A Decade in Review: What Have We Learned from Private Health Sector Assessments?

Sara Sulzbach  
Abt Associates, Inc.

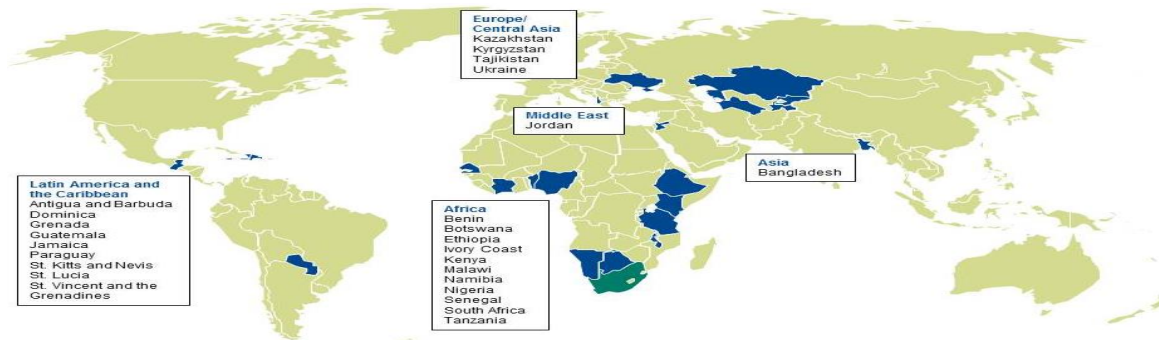
April 2, 2014



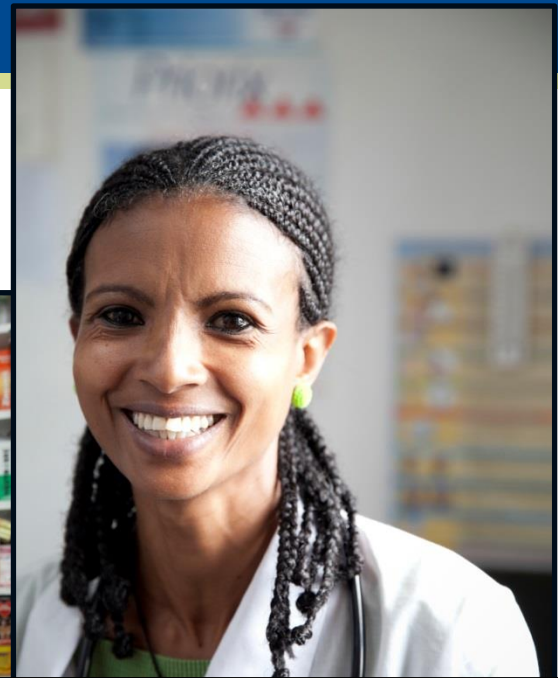
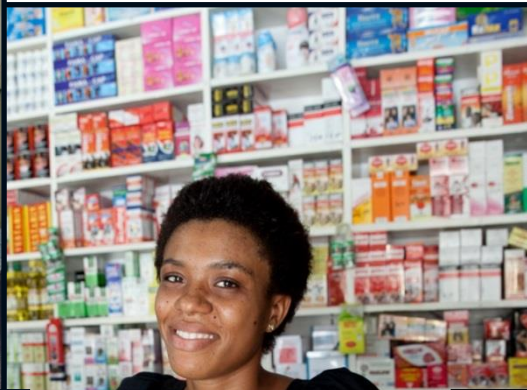
**SHOPS is funded by the U.S. Agency for International Development.**  
**Abt Associates leads the project in collaboration with**  
Banyan Global  
Jhpiego  
Marie Stopes International  
Monitor Group  
O'Hanlon Health Consulting

# Presentation overview

- What is a private health sector assessment (PSA)?
- Rationale for conducting assessments
- SHOPS approach
- Review findings from 25 assessments



# The private health sector is diverse



and includes for and not-for-profit entities



# Private health sector assessments defined



*A private health sector assessment systematically explores the contributions and role of the private health sector to one or more health areas.*

# Reasons for conducting private health sector assessments

- To better understand the size and scope of the private health sector
- To inform a donor-funded private sector program
- To identify and mobilize untapped private sector resources
- To identify obstacles to increased private sector engagement and facilitate public-private dialogue for change
- To increase efficiency in health system



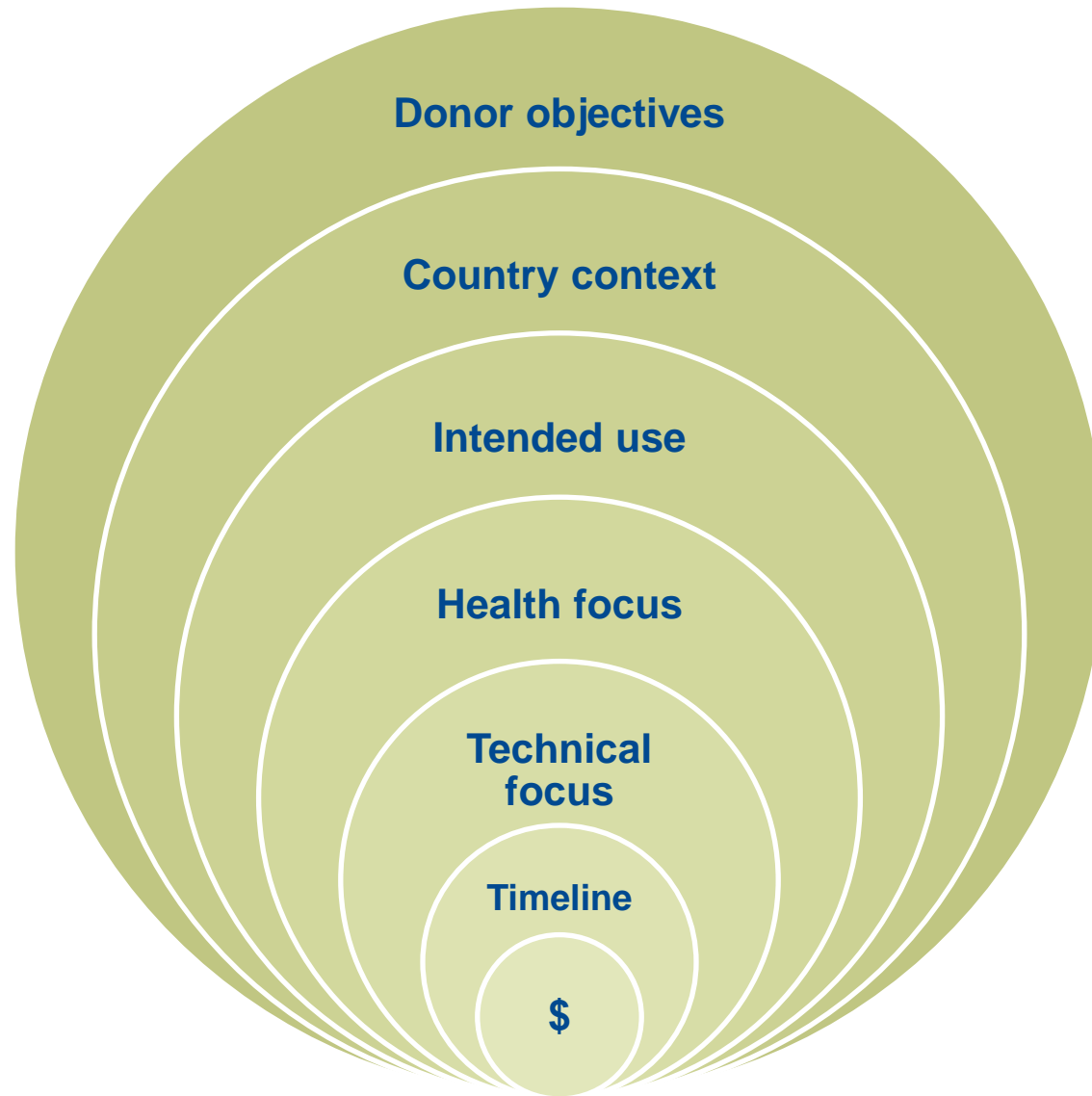
# SHOPS assessment approach

- **Analyze** publicly available data sources with focus on private sector
- **Collect** primary data through stakeholder interviews
- **Consolidate findings** and **propose recommendations** to facilitate private sector role
- Report **provides “snapshot”** of information on the private sector at given point in time
- **Starting point** for ongoing dialogue, discussion and action

# Review of findings from 25 assessments



# Several factors shape an assessment



# No two assessments are exactly alike

**Objectives** ➤ identify who is the private sector...mobilize private resources in preparation for donor transition

**Scope** ➤ Contraceptive security...Private sector role in health sector

**Geographic scale** ➤ Small country...select regions of larger country...nationwide

**Stakeholder engagement** ➤ Minimal role...involvement in all phases

**Key informants** ➤ 35...180 interviews

**Budget** ➤ \$50k...\$350k

**Team** ➤ 3...6 members

# 25 USAID-funded assessments 2005-2014



# Increasing demand for assessments

## **PSP-*One* Project 2004-2009**

E&E Region  
Guatemala  
Jordan  
Kazakhstan  
Kenya  
Kyrgyzstan  
Nigeria  
Senegal  
Tajikistan  
Ukraine

## **SHOPS Project 2009-Present**

Antigua and  
Barbuda  
Bangladesh  
Benin  
Botswana  
Dominica  
Ethiopia  
Grenada  
Ivory Coast  
Jamaica  
Malawi  
Namibia  
Nigeria  
Paraguay  
South Africa  
St Kitts and Nevis  
St Lucia  
St Vincent and  
the Grenadines  
Tanzania  
West Africa  
Region

# Common findings emerging across assessments

## Irrespective of

- Geographic region or country
- Health focus
- Scope of assessment



# Private health sector is larger than expected

## Includes

- Facilities
- Health personnel
- Expenditure

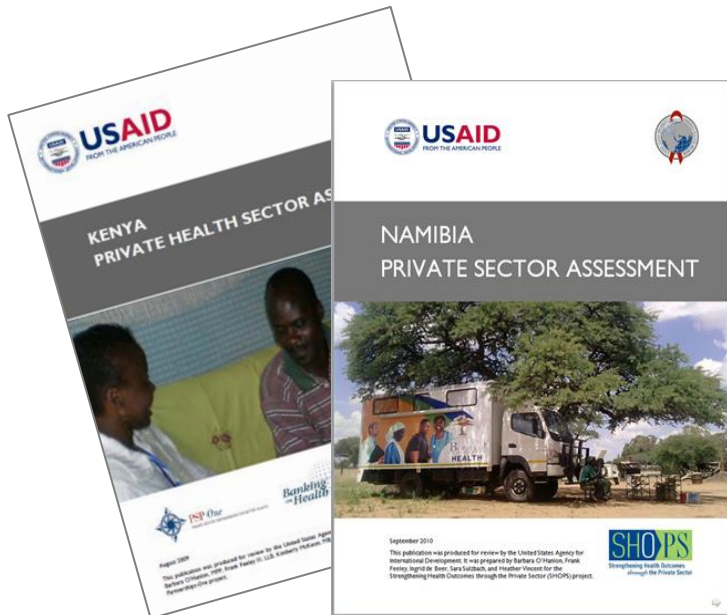
In **Kenya**, the private sector owns and manages significant proportion of health infrastructure

- 2 out of 3 health facilities
- 1 out of 2 hospitals and nursing homes

In **Namibia**, 47% of health workforce practices in the private sector

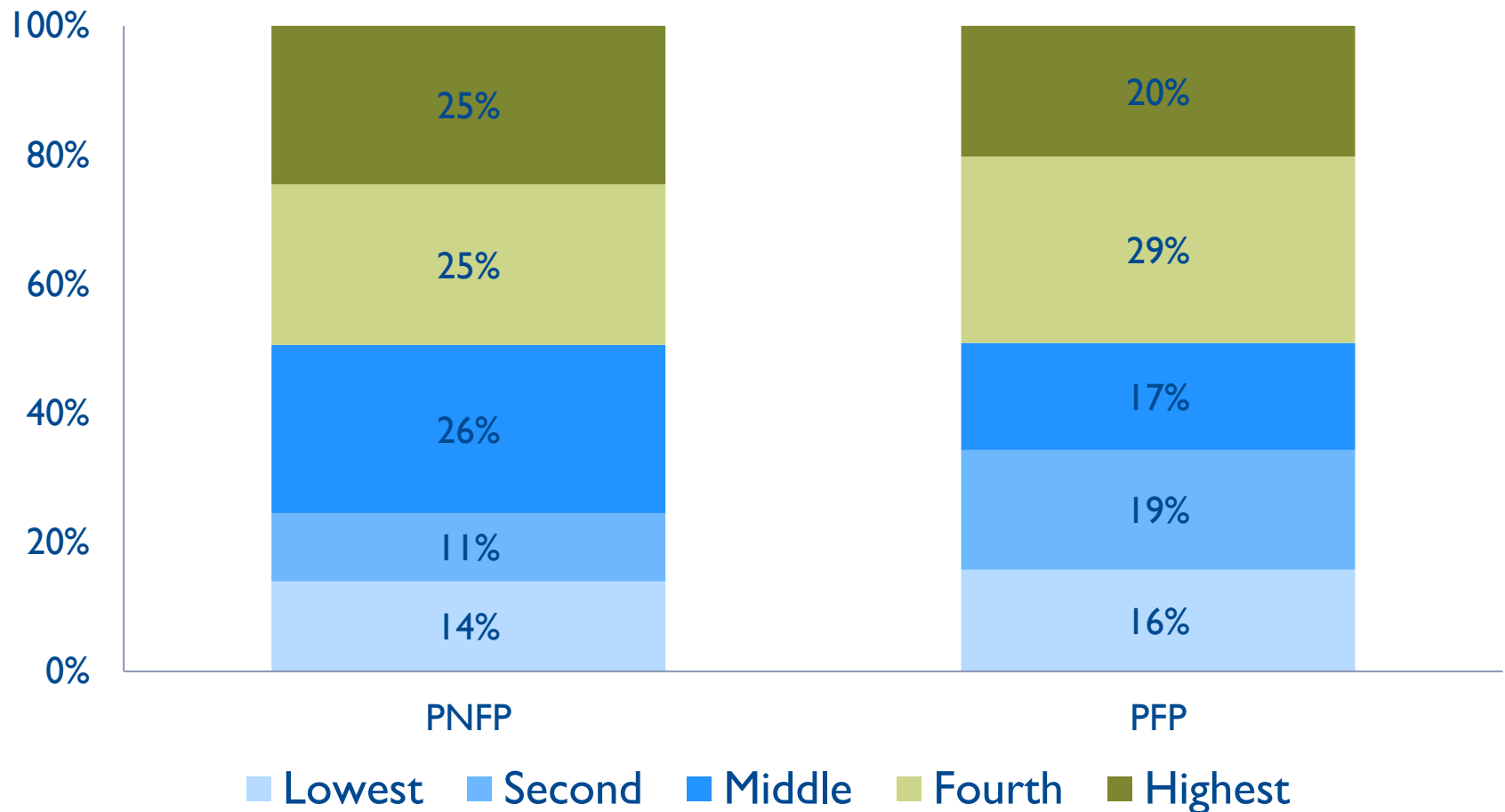
- 72% of all physicians
- 90% of all pharmacists
- 70% of all social workers

In **St. Kitts and Nevis**, nearly 50% of medical visits occur in the private health sector.



# Private providers serve a broad clientele – including the poor

## Treatment of Childhood Diarrhea in the Private Sector in Tanzania, 2010



# Limited public-private interaction in health sector

- Lack of trust
- Misunderstanding
- Little opportunity for dialogue or coordination

PSAs often provide this opportunity





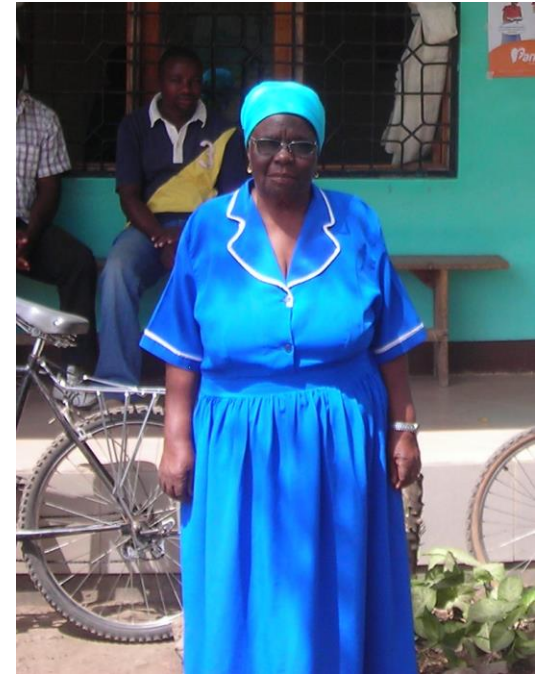
# Policy framework not optimal

In many countries, the policy environment

- Does not recognize the private sector
- Limits private provision of services
- Creates barriers to entry



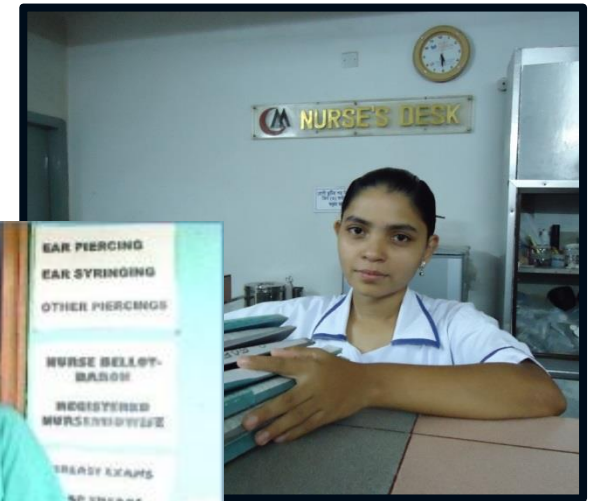
**Prinmat Tanzania**  
PRIVATE NURSES MIDWIVES ASSOCIATION



# Private providers willing to provide priority health services

Opportunity must be supported by policies and market conditions

- Must be legally allowed to provide the service or product
- Must be compensated
- Prefer to be consulted on policies or decisions that affect them



# Private health sector is innovating

- Reaching remote areas
- Developing new products
- Launching new financing mechanisms
- Using technology



# Feedback from partners and participants

“The 2009 PSA was an eye opener... government officials were surprised at the scope of the private sector and the variety of actors.”

*Private sector stakeholder in Kenya*

# Feedback from partners and participants



“For Tanzania’s health goals to be achieved, ‘business as usual’ will not be enough. We hope that the assessment and companion report will be the match stick that ignites innovation in the health sector”.

*Dr. Khama Rogo, IFC  
Health in Africa initiative*

# Where to find assessment reports



## SHOPS Project website

<http://www.shopsproject.org/about/what/assessments>

## WB/IFC Private Health Policy Toolkit

<https://www.wbginvestmentclimate.org/toolkits/public-policy-toolkit/mod3step1sub5a.cfm>