

Universal health coverage and health security in the Eastern Mediterranean Region: engaging the private health sector



WHAT IS PRIVATE SECTOR ENGAGEMENT?

In health service delivery, private sector engagement (PSE) is defined as “the meaningful inclusion of private providers for service delivery in mixed health systems”.¹ PSE can cover collaborations in the provision of health services, pharmaceutical and medical products, financial products, health workforce capacity building, information technology, infrastructure, and support services.

Challenges facing PSE in the Region

Informational

Lack of data on the size, distribution, types of services and performance of the private health sector: reliable and accurate data are essential for planning PSE and informing evidence-based decision making.

Governance

The main barriers against effective regulation are:

Political constraints, including the influence of lobbyists on national regulatory bodies and personnel;

Administrative constraints, including the costs of establishing and maintaining strong monitoring systems; and

Data-related constraints, including the impact of information gaps on regulation. Lack of information limits the ability of regulatory systems to respond to emerging threats and improve existing regulations.²

Coordination

Coordination is hampered when:

- there is no mechanism for knowledge transfer between the public and private health sectors, as is the case in most countries in the Region;
- top-down and one-way communication limits the value and effectiveness of communication efforts; and
- there is a lack of trust between the public and private sectors, compounded by unequal power dynamics.



The need for PSE in the Region

A recent assessment in the Region, estimated that the private health sector provided



53%

of inpatient services



66%

of outpatient services .³

Given its significant and growing role in health care provision, and the influence of different engagement modalities on

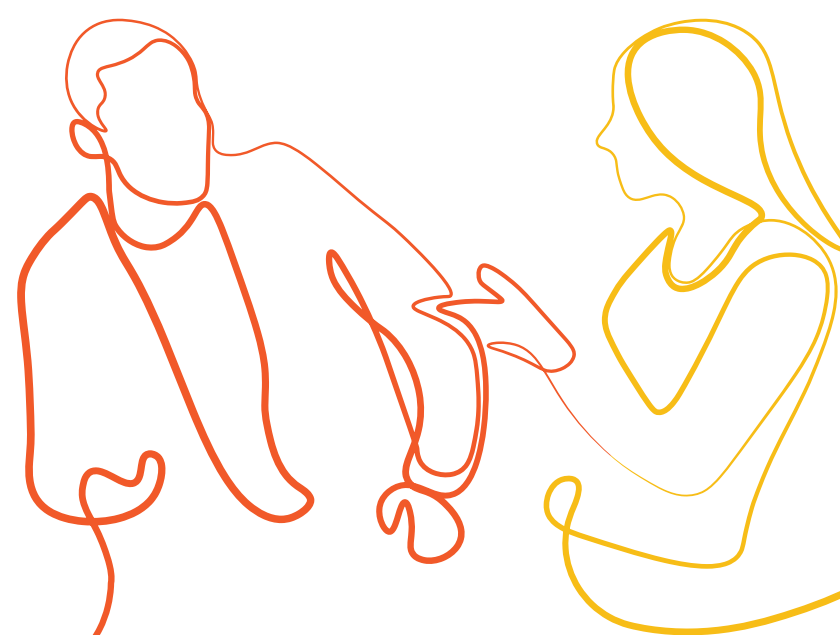
access, equity, quality and the efficiency of health services, PHS engagement is increasingly seen as an essential tool in achieving global health goals.³⁻⁶



WHO Regional Office for the Eastern Mediterranean (EMRO) efforts to scale up effective PSE

In 2018, the regional resolution EM/RC65/R.3 endorsed a framework for action on effective engagement with the private health sector for universal health coverage.^{7,8} Though the endorsement of the resolution and framework represented a significant milestone towards effective PSE in the Region, concerns were raised about the distinction between objectives, strategies, and tools during the operationalization stage of the framework. The framework also fell short in addressing different private sector actors, and did not clearly acknowledge the sector as a partner that is filling gaps in service provision.

Accordingly, EMRO adopted a four-pillared approach to PSE in which all domains run parallel. The pillars are **Assess, Govern, Engage and Learn.**



A

Assess

Conducting an assessment of the scale and contribution of the private sector to health care services is the first step towards effective engagement. Through assessment, identifying gaps and opportunities becomes possible, and reaching a common understanding of the situation becomes plausible.

B

Govern

Based on assessment findings, national governance strategies and frameworks for the private health sector and PSE need to be developed or revisited, along with their respective regulatory measures. The success and sustainability of PSE largely depend on this pillar. It requires building the capacity and expertise of regulatory staff to manage concerned actors according to the policies set, and strong political support.

Engage

C

Engaging the private sector entails moving from *ad hoc* interactions to systematic collaboration. This requires clear communication channels and equally empowered stakeholders who can work towards a common goal through formal and informal channels.

The engagement domains outlined by the International Finance Corporation are as follows: ⁹

- 1. Policy and Dialogue:** level of dialogue between the state and non-state actors in policy discussions
- 2. Information Exchange:** flow of information between both health sectors
- 3. Regulation:** design and implementation of a robust regulatory framework for the private health sector
- 4. Financing:** funding of, and purchasing arrangements from private providers
- 5. Public Provision of Services:** the direct provision of health services by the public sector can either complement or compete with the private sector depending on the environment the allocation creates.

Steps for engaging the private health sector

Public-Private Dialogue (PPD)

- To share ideas, discuss areas of concern, coordinate and build relationships.
- Ensuring unbiased representation of private sector actors is key to the success of PPD.

Collaborate

Both sectors may collaborate in low-risk activities to establish trust and lay the foundations for further involvement. Such collaboration could be in the areas of information sharing, designing policies, or coordination in implementing small-scale activities.

Partner

Formal long-term contractual engagement may then take place through public-private partnerships (PPPs) to address gaps in the health system.

Public-private partnerships are formal, long-term contractual arrangements in which the public sector contracts the private sector to provide a public service, including but not limited to: research and development (R&D); clinical and non-clinical services.¹⁰

D

PSE is a dynamic process that requires continuous tailoring to address emerging needs, and changing markets and political situations. It is important to establish a positive feedback mechanism between sectors, constantly revisiting the engagement modalities and refining them in a way that ensures activities align with the vision of the health system.

PSE considerations

Key considerations when planning PSE in service provision include:

- 1. Strengthening the public sector:** the private sector is meant to complement rather than replace the public sector. Countries cannot afford for their entire population to seek services at private facilities once PPPs are in place. It is imperative governments invest in quality services and infrastructure at public facilities to enable them to compete with private providers.
- 2. Acknowledging the differences:** the private sector has different operational models and mandates. Unlike the public sector, the private sector is interested in personalized care and is accountable to its shareholders. The private sector is also autonomous, heterogeneous, and needs to be encouraged to collaborate with governments.
- 3. Forward thinking:** despite the immediate benefits that come with programmatic interventions, it is advisable to follow a horizontal approach to engagement, thus avoiding the difficult-to-undo repercussions of more fragmented approaches.
- 4. Creating an enabling eco-system:** enablers for PSE include organizing the private health sector into representative associations to facilitate dialogue and coordination, creating a platform for communication and information exchange, resource mobilization to sustain PSE efforts and incentivization modalities, unifying private health sector governing institutions to harmonize processes and regulations, and avoiding long bureaucratic procedures that hinder investments.
- 5. Service delivery levers:** multiple levers can help in the efficient engagement of the private health sector in service provision. They include a viable and rational Priority Benefits Package, mobilizing private insurers to develop complementary service packages, rapid processing of claims and timely payment of private health sector dues, and coordination with development partners to support PSE in the provision of services in underserved areas.
- 6. Learn from similar contexts:** EMR countries are at different stages when it comes to PSE. It is important to be mindful of these differences when considering the replication of regional experiences.
- 7. Leveraging the opportunities presented by COVID:** the challenges posed by the pandemic have foregrounded the importance of community and stakeholder engagement in containing public health threats, reducing the strain on the public sector, and effective risk communication. Engaging the private health sector for health security could be a gateway to further collaboration.

Conclusion

Acknowledging the need for collaboration with the private health sector in terms of delivering universal health coverage and health security is the first step towards effective PSE. Multiple opportunities for effective collaboration exist in the Region, including: the existence of political will; donor interest and some institutional capacities, frameworks, and laws for inter-sectoral partnerships.

EMRO will continue to support Member States in their efforts to secure health for all, by all through streamlining PSE across the three strategic priorities of vision 2023: expanding universal health coverage; addressing health emergencies, and promoting healthier populations.¹³



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