

# Engaging the private sector to improve health and well-being: **success stories from the Eastern Mediterranean Region**

# SUCCESS STORY

## Addressing malnutrition by engaging the private sector in food fortification initiatives (FFIs)

All countries in the Region

**THE PROBLEM** The double burden of malnutrition is growing in the Region and governments are struggling to meet the United Nation's Sustainable Development Goals by 2030, including Sustainable Development Goal 2, zero hunger.

No country, in the Region or the world, is on course to meet all ten of the 2025 global nutrition targets.

**ACTION** The private sector plays a significant role in implementing FFIs in most countries in the Region. The implementation of wheat flour fortification programmes in most of these countries is led by Ministries of Health working in partnership with UN development agencies, international development agencies, donors, and the private sector (the milling industry). For two decades, WHO and UNICEF have worked in close collaboration with the International Council for Control of Iodine Deficiency

Disorders (ICCIDDs), other international agencies and the salt industry to support governments develop national salt iodization (SI) programmes. In 2008, UNICEF entered into a new partnership with the Global Alliance for Improved Nutrition (GAIN) to further support SI programmes in selected priority countries.

**TIME FRAME** 2001-2021

**MORE DETAILS** Some countries in the Region face challenges in implementing FFIs due to gaps in their regulatory framework, lack of financial resources, and weak monitoring and enforcement mechanisms.

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**HASHTAGS**

#FoodFortificationInitiatives  
#FFIs #WheatFlourFortification  
#WFF

**LINKS**

**to additional resources**

Enhancing nutrition specific interventions through public health policies and public-private partnerships in the Eastern Mediterranean Region: a desk review  
<https://f1000research.com/articles/10-17>

**RESULTS** A majority of countries in advanced nutrition transition have **achieved good coverage of WFF** (e.g., Kuwait: 100% coverage of fortification) and have reported improvement in health outcomes as a result of FFIs. SI initiatives have been implemented in all these countries, with the exception of the Kingdom of Saudi Arabia. SI programmes in the United Arab Emirates and Kuwait are progressing quickly towards **full coverage and the elimination of iodine deficiency disorders**. In other countries in the Region, **mandatory or voluntary measures on WFF and SI have been introduced**. Examples of successful WFF initiatives include Iran (result: 100% fortification) and Jordan (93% fortification).

Engaging the private sector to  
improve health and well-being:  
**success story from**

**Bahrain**



# SUCCESS STORY

## Leveraging private sector capacities in case management and testing for COVID-19

### Bahrain

#### THE PROBLEM

As the pandemic gathered steam in Bahrain, an increasing number of public sector hospitals were converted into isolation facilities for COVID-19. This threatened the continuity of care and maintenance of essential health services in the country.

In addition, the need for testing surpassed the capacity of public facilities, especially given the testing requirements for international travel.

#### ACTION

##### Case management

- The private health sector expanded the scope of its services to provide home visits and teleconsultation.
- Long-stay patients in some public health care facilities were transferred to private hospitals to ensure sufficient bed capacity for COVID-19 patients.
- Some private health care facilities were designated as isolation facilities.
- Hotels that were converted into isolation/quarantine facilities were staffed by private health care professionals with training and supervision from the National Health Regulatory Authority (NHRA).
- Designated COVID-19 walk-in clinics were made available for patients isolating at home who wanted to follow-up with a medical professional. One of the three designated clinics is operated by a private health provider, but services are provided free of charge to all COVID-19 patients, regardless of whether they visit a privately or publicly operated clinic.

##### Testing

- The private sector was contracted to provide testing for all incoming travelers at Bahrain International Airport.
- Nine private laboratories were licensed by the NHRA to conduct PCR and antibody testing.
- All private health providers are now equipped to provide preliminary screening and emergency services for people with COVID-19 symptoms who report to their facilities ahead of their referral to a designated isolation/treatment facility.
- Test kits were distributed to private health providers free of charge to broaden access to testing.
- Rapid antigen tests were made available at pharmacies across the country at subsidized prices.

#### TIME FRAME

2020-2021

#### MORE DETAILS

##### The NHRA was able to leverage private health sector resources by:

- suspending all nonemergency medical and surgical services and procedures at private facilities during peak waves of COVID-19 cases – when services resumed, the NHRA used telemedicine as much as possible and enforced infection prevention and control (IPC) measures to reduce transmission;
- allowing the private sector to conduct COVID-19 serology antibody tests to detect the presence of a previous infection with the virus;
- setting procedures to speed up importation of medical devices to avoid supply shortages;
- permitting the importation through both private and government channels of the rapid antigen tests for COVID-19/SARS that meet specified requirements; and
- establishing a rolling submission pathway to expedite and streamline the assessment and emergency use authorization of potential medicines for the treatment of COVID-19 while clinical trials are in progress. COVID-19 while clinical trials are in progress.

#### RESULTS

- **Essential health services** were **maintained**.
- Both COVID-19 and non-COVID patients received **high-quality care**.
- **Cross-infection** within hospitals was **avoided**.
- **Testing capacity** was **expanded** to meet the demand.

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#### HASHTAGS

#COVID19 #Testing  
#CaseManagement

#### LINKS

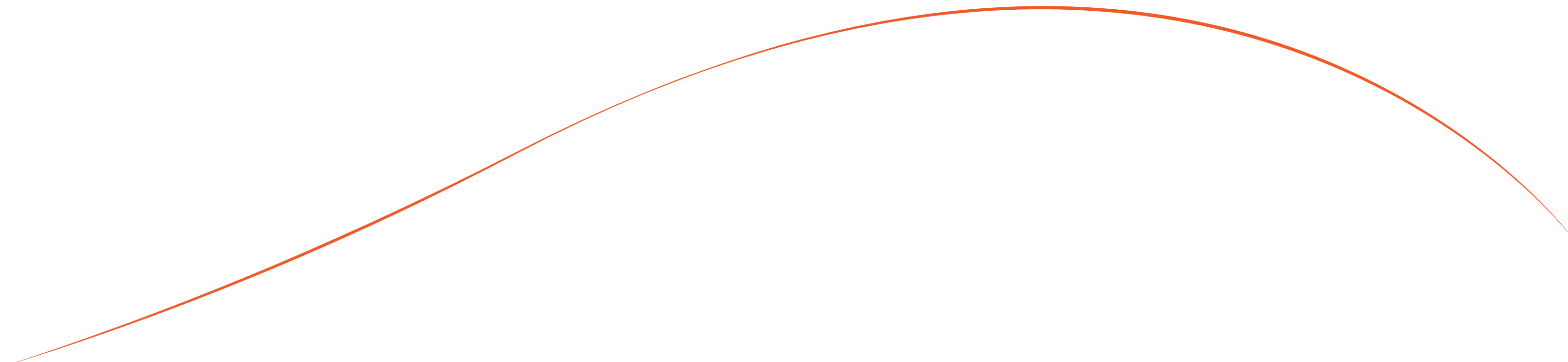
##### to additional resources

The NHRA circulars can be accessed on  
: <https://www.nhra.bh/Media/Announcement>



Engaging the private sector to  
improve health and well-being:  
**success stories from**

**Jordan**



# SUCCESS STORY

## Engaging the private sector in securing supplies for the COVID-19 response

Jordan

**THE PROBLEM** At the onset of the pandemic, the government of Jordan faced financial and logistical challenges in procuring and deploying tests, personal protective equipment (PPE) and pharmaceutical products. There were also difficulties in enforcing public health measures, including the use of masks and enhanced hand hygiene, due to supply shortages. In addition, the quarantine of repatriated Jordanians posed problems.

**ACTION**

- The Himmit Watan Fund was established in late March 2020 to mobilize resources donated by the private sector to support the health system in Jordan.
- Local companies producing infection, prevention and control (IPC) supplies donated facemasks and other items to the Ministry of Health.
- Pharmaceutical companies donated supplies and backed the launch of the first COVID-19 hotline (111) in coordination with the Ministry of Health.

- An emergency hotline dedicated to support people with disabilities was launched by a private telecommunication company.
- Professional syndicates seconded staff to help deliver essential health services.
- Telecommunication companies coordinated with the Ministry of Health on disseminating awareness messages through SMS.
- Hotels were contracted by the government to serve as quarantine centres.

**TIME FRAME** April 2020–2021

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### HASHTAGS

#COVID19 #supplies  
#logistics

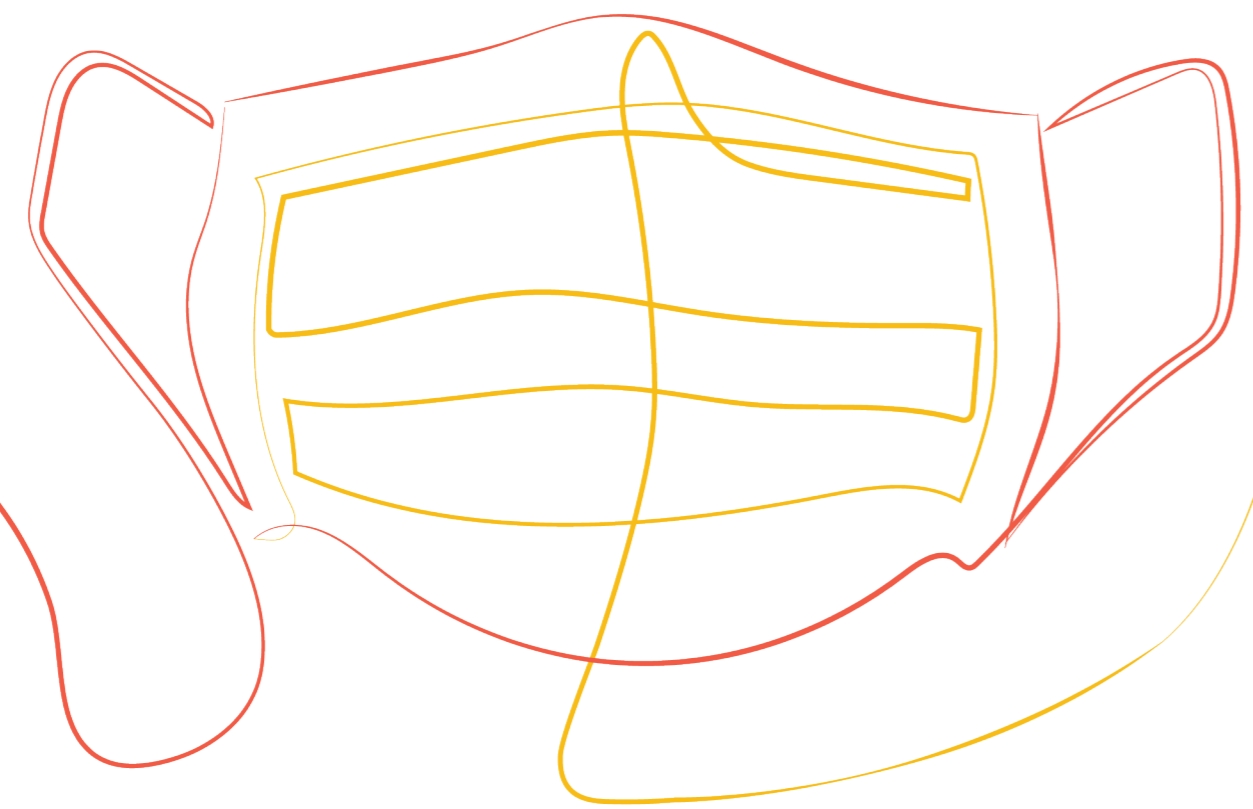
### LINKS

to additional resources

<https://www.southsouth-galaxy.org/wp-content/uploads/2020/05/Allin4Jordan-Report.pdf>

**RESULTS**

- The private sector contributed to the **speed, impact, and scale of the COVID-19 response.**
- The Himmit Watan Fund was set up in a very short time and quickly began funding health sector activities.
- Increased local production speedily **converted shortages** in hygiene supplies **into a surplus** that is now being exported to other countries.



# SUCCESS STORY

## Expanding national testing capacity for COVID-19

Jordan

**THE PROBLEM** At the outset of the COVID-19 pandemic, the government was keen to provide testing to limit the spread of the virus but the capacity of the Central Public Health Lab (CPHL) was insufficient to meet the nationwide demand for testing.

**ACTION**

- In 2020, the Government of Jordan increased the CPHL's testing capacity by approving 25 private sector labs to perform PCR tests. CPHL sends patients' samples to the approved labs which are closely monitored to ensure adherence to protocols.
- Between April 2020 and October 2020 people entering Jordan via one of its land borders were tested through two accredited private labs.
- The government has now partnered with a private lab to test all travelers to Jordan.

**TIME FRAME** April 2020–2021

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**HASHTAGS**

#COVID19 #Testing

**LINKS**

to additional resources

<https://moh.gov.jo/Pages/viewpage.aspx?pageID=479>

**RESULTS** Engaging the private sector helped in **increasing testing capacity, enabling the government to quickly identify and manage COVID-19 cases and improving outcomes.**

# SUCCESS STORY

## Expanding access to nicotine replacement therapy (NRT)

Jordan

**THE PROBLEM** According to the 2019 STEPwise approach to surveillance (STEPS) survey on the main risk factors for noncommunicable diseases (NCDs) conducted by the Ministry of Health in collaboration with WHO, 82% of Jordanian males were addicted to nicotine, one of the highest rates in the world. An estimated 50% of adult smokers in Jordan have tried to quit in the past 12 months, yet only a small percentage had access to tools that might help them do so.

Jordan's Ministry of Health maintained just five nicotine cessation clinics. Though nicotine replacement therapy (NRT) has been added to Jordan's Essential Medicine List, budgetary allocations for smoking cessation were insufficient to meet the high demand from smokers seeking to quit.

**ACTION** In late 2020, the Ministry of Health partnered with Access Initiative for Quitting Tobacco (AIQT), a joint initiative between WHO, the UN Interagency Task Force on NCD Prevention and Control and PATH, with support from the Coalition for Access to NCD Medicines and Products. The initiative is designed to assist countries deliver comprehensive tobacco cessation services. Several companies joined the initiative, including Johnson & Johnson, Allen Carr's Easyway, Amazon Web Services, Cipla, Facebook, WhatsApp, Google, Praekelt, and Soul Machines.

The Ministry of Health received its first ever donation of NRT from Johnson & Johnson through its partnership with AIQT. The donation, with an estimated retail value of almost US\$ 1 million, will help thousands of Jordanians and refugees quit smoking during the COVID-19 pandemic and beyond.

**TIME FRAME** 2020-2021

**MORE DETAILS** There was an attempt by the donor company to train pharmacists and promote the purchase of the company's products directly from the pharmacy. This was promoted as a component of the agreement through which the donation would go to cessation clinics for a certain period. For sustainability purposes a direct purchase from the pharmacy by the smoker should be planned for the next phase. A decision was made by the WHO Country Office not to engage directly with the company but through WHO Headquarters, and to always refer to the contractual agreement established between the company and WHO Headquarters. Clear rules and contractual framework are key to preventing industry interference/ conflicts of interest.

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### HASHTAGS

#NicotineReplacementTherapy  
#SmokingCessation

### LINKS

to additional resources

<https://www.who.int/news-room/feature-stories/detail/johnson-johnson-donates-nicotine-patches-to-help-thousands-of-jordanians-quit-tobacco-during-covid-19>

**RESULTS** Access to free NRT, combined with personal counselling and digital support, is mainly being directed to **help 5 400 frontline workers, patients with noncommunicable diseases, and refugees quit smoking.** The donated NRT has a three-year validity period, from June 2020, and **in addition to being used in the five pre-existing cessation clinics**, is being used to supply an additional 20 clinics which have been opened across the country.

The quantity of medication used in clinics, number of patients treated, and the success rates in stopping smoking are being monitored on a monthly basis. Information is shared with the WHO Regional Office for the Eastern Mediterranean and WHO Headquarters, and reported to donors.

Through the massive scale-up of tobacco cessation services, **Jordan was able to achieve the highest level for the "O" MPOWER measure in the WHO report on the global tobacco epidemic 2021**



# SUCCESS STORY

## Setting up a smoking cessation hotline

Jordan

**THE PROBLEM** According to the 2019 STEPS survey conducted by the Ministry of Health of Jordan in collaboration with WHO, 82% of Jordanian males were addicted to nicotine, one of the highest rates in the world. An estimated 50% of adult smokers in Jordan have tried to quit in the past 12 months, yet only a small percentage had access to tools that might help them do so.

Treatment of tobacco use and dependence is mandated in Article 14 of the WHO Framework Convention on Tobacco Control. The WHO recommends three types of treatments be included in any tobacco prevention effort: (i) tobacco cessation advice incorporated into primary health care services; (ii) easily accessible and free quit lines; and (iii) access to free or low-cost pharmacological therapy. Despite the high prevalence of smokers in the country and the demand for help and information about smoking cessation services in Jordan, no Smoking Quitline was available.

**ACTION** The Ministry of Health and the Ministry of Digital Economy and Entrepreneurship partnered with Crystel – a private company which provides helplines for different governmental sectors – to set up the National Smoking Quitline. The Quitline was launched in May 2020 providing smoking cessation services to all residents of Jordan.

**TIME FRAME** The hotline was launched in May 2021.

**MORE DETAILS** The private company was selected through a tender process and a contract drawn up between the company and the government. A transparent and fair competitive process, and a contract with clear rules, were key to preventing industry interference in government work and conflicts of interest.

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**HASHTAGS**

#Hotline  
#SmokingCessation

**LINKS**

to additional resources

<http://www.emro.who.int/jor/jordan-news/world-no-tobacco-day-2021-commit-to-quit.html>

**RESULTS** The National Smoking Quitline has **helped thousands of smokers since May 2020**. Its call agents were trained by WHO consultants, and monitoring and evaluation of the service is conducted on a regular basis.

# SUCCESS STORY

Increasing the availability and accessibility of mental health services in local communities

Jordan

**THE PROBLEM** Community mental health services, particularly those adopting multidisciplinary biopsychosocial models, are very limited in Jordan which has tended to rely on specialized, inpatient mental health services at the tertiary care level.

**ACTION** International Medical Corps (IMC), an international NGO, established a network of Community Mental Health Centres (CMHCs) within Ministry of Health clinics. There are currently 13 urban CMHCs (Amman, Salt/Balqaa, Zarqa, Mafraq, Irbid – including Ramtha –, Ajloun, Jarash, Karak, Tafeeleh, Ma'an, and Aqaba) spread across 11 governorates. IMC also operates two clinics in refugee camps.

They provide mental health and psychosocial services through a multidisciplinary team of psychiatrists, psychologists, mental health nurses, mental health case managers, and pharmacists, serving both the Jordanian and refugee populations.

**TIME FRAME** Since 2008–2009 the network has gradually expanded nationwide.

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## HASHTAGS

#MentalHealthIntegrationInPHC  
#CMHCs  
#MentalHealth

**RESULTS** The CMHCs have **improved the availability and accessibility of mental health services** in local communities, and **reduced the stigma** associated with stand-alone specialized mental health services like psychiatric hospitals. The CMHCs run by IMC have **complemented the Ministry of Health's existing services** which include four CMHCs located in Amman (Hashmi, Istishariya), Irbid (Princess Basma), and Karak.

# SUCCESS STORY

## Giving voice to mental health patients and their families

Jordan

**THE PROBLEM** WHO Disease Burden Estimates rank Jordan fourth in the Middle East for the burden of mental health conditions as measured by disability-adjusted life years (DALYs).

Despite the high prevalence of common mental, psychotic and behavioural disorders, there is limited representation and participation of mental health service users and their families in mental health strategic planning and decision-making.

**ACTION** To increase the active participation of patients and their families in mental health forums, Our Step Association was established under the patronage of HRH Princess Muna Al Hussien. The Association is currently:

- supporting and empowering the rights of people with mental health conditions through advocacy;
- combating the social stigma associated with mental health problems;

- promoting mental health at the community level; and facilitating the representation of mental health service users and their families in strategic national dialogues related to drafting key guidelines and policies.

**TIME FRAME** 2017–2018

**MORE DETAILS** Challenges still remain: there continues to be a great deal of stigma towards mental health conditions; funding for mental health activities is limited, and some in the professional community remain resistant to mental health service users sitting on national committees.

Several donors have supported the programme since its inception in 2010, including the Government of Kuwait, US BPRM and the Italian Agency for Development Cooperation.

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**HASHTAGS**

#MentalHealth #Representation  
#PatientCentricity  
#PatientEmpowerment  
#CaregiverSupport  
#CommunityEngagement

**LINKS**

to additional resources

Our step association. (2019, September 27). Retrieved from [https://www.mhinnovation.net/innovations/our-step-association?qt-content\\_innovation=2#qt-content\\_innovation](https://www.mhinnovation.net/innovations/our-step-association?qt-content_innovation=2#qt-content_innovation)

**RESULTS** Patients engaged in a joint collaboration with the WHO and NGOs in 2018 to promote mental health awareness at the community level. The awareness campaign targeted vulnerable women and men from both the Jordanian and refugee communities.

**The collaboration resulted in:**

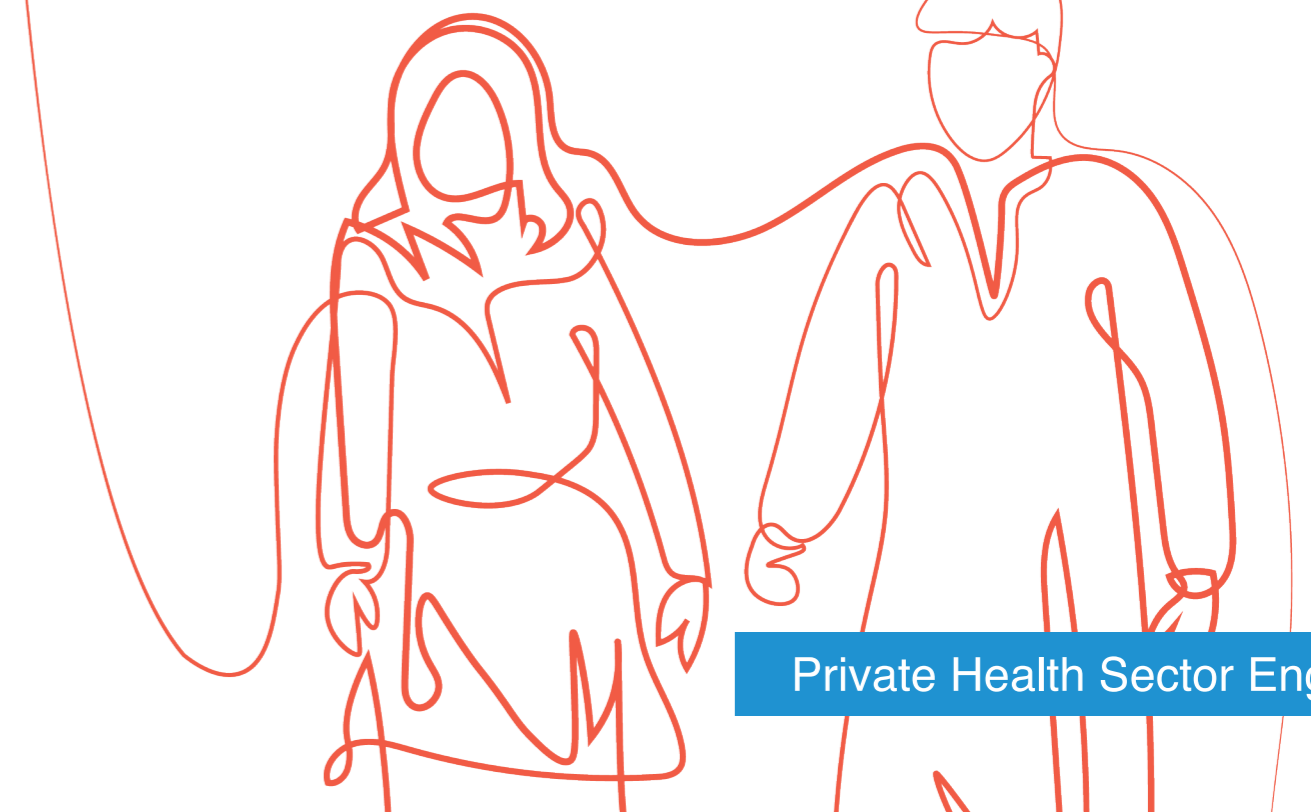
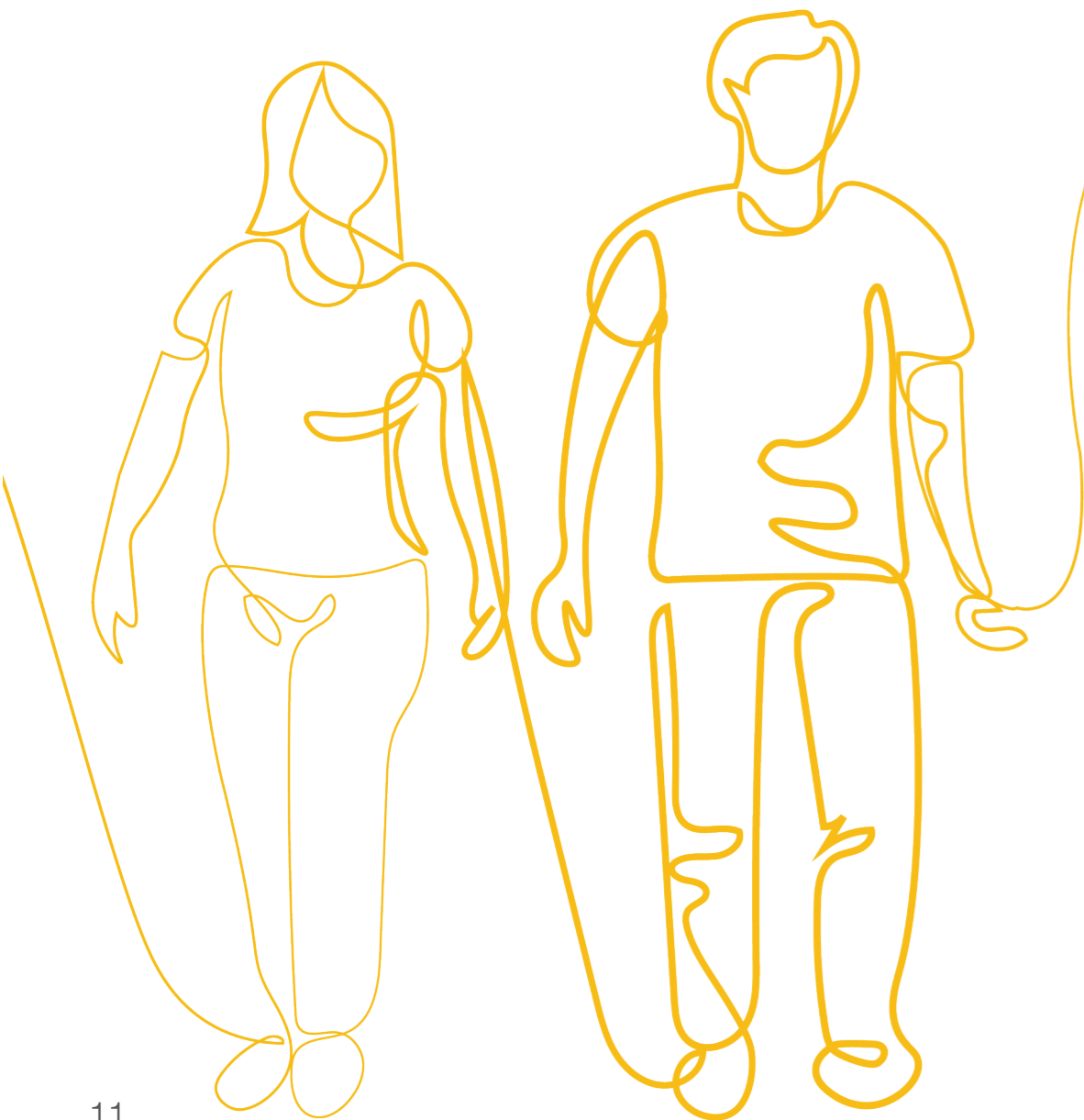
- the organization of **protection support groups** targeting youth (aged 18-24) and women;
- a two-week mental health **awareness campaign** on the occasion of World Mental Health Day (10 October 2018) and

the promotion of peer-to-peer initiatives for vulnerable youth in Zarqa;

- focus groups being set up among service users and their family members **identifying needs and gaps in mental health and psychosocial support** (MHPSS) services;

- the **piloting** of the **WHO Quality Rights study and the development of a Jordanian National Mental Health Action Plan for 2018-2021**; and

- **increased representation** of mental health service users on the National Mental Health Technical Committee. Currently, one service user representative also sits on the board of the Higher Council for the Rights of Persons with Disabilities. Between 2017 and 2018, 906 service users and family members enrolled for training in developing stress management skills and enhancing productivity for users of mental health services .



Private Health Sector Engagement

Engaging the private sector to  
improve health and well-being:  
**success stories from**

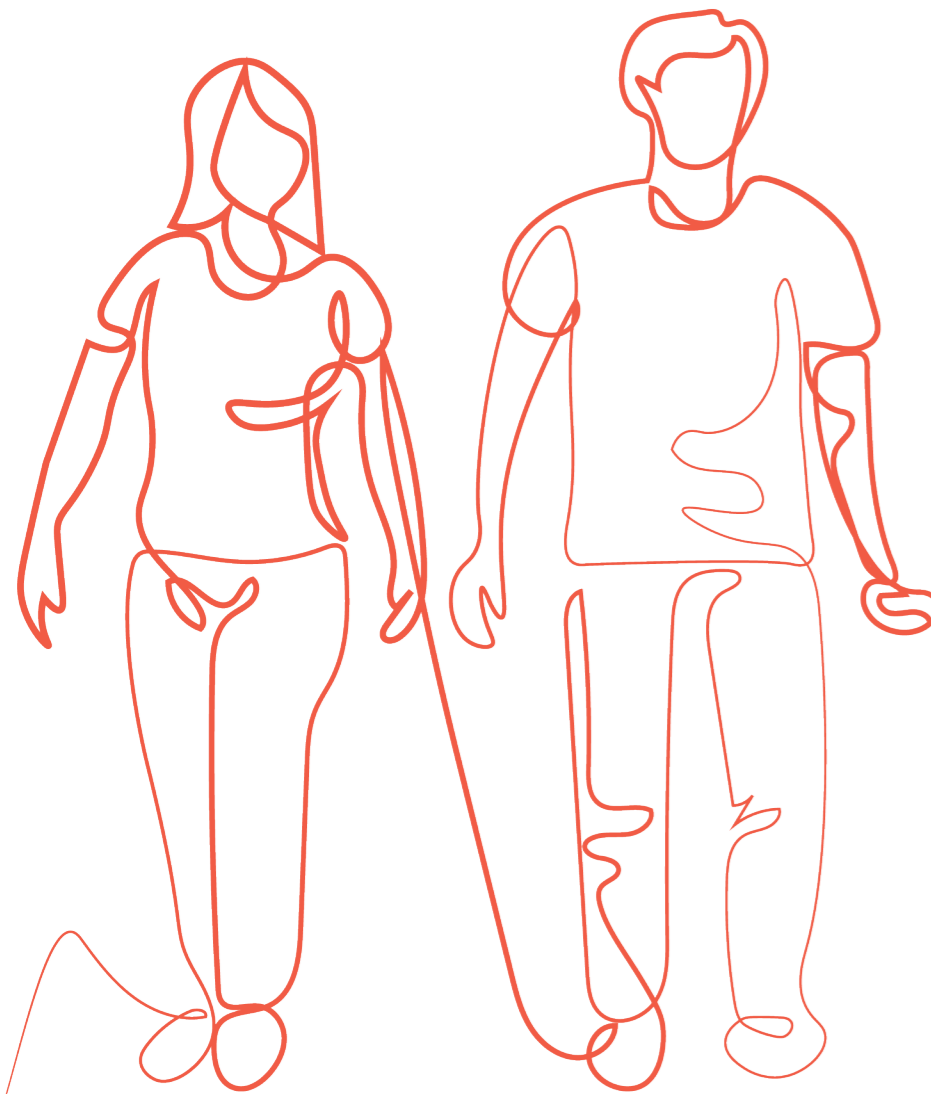
**Lebanon**



# SUCCESS STORY

## Expanding national testing capacity for COVID-19

### Lebanon



**THE PROBLEM** Lebanon's private sector provides more than 85% of health services, offering advanced technology and expertise across the country. Private medical laboratories are particularly developed, with RT PCR testing available in at least 50% of the 250 labs operating in the country which are members of the Lebanese Syndicate of Medical Laboratories.

Public sector, hospital-based labs, are much less developed. At the outset of the COVID-19 pandemic only two large public hospital labs had RT PCR testing capacity. There was an urgent need to rapidly increase safe RT PCR testing capacity at public hospitals given that the Ministry of Public Health's strategy was to use the public system as the first line of response to the COVID-19 outbreak.

In addition, Lebanon lacks a national central public health laboratory capable of guaranteeing the quality and safety controls necessary to deal with novel viruses such as severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)

**ACTION** **WHO acted to engage the private sector by:**

- conducting a detailed assessment of public and private laboratory capacity for COVID-19 RT PCR testing;
- establishing a national External Quality Assurance (EQA) system for RT PCR testing targeting private and public hospitals, and led by the reference public hospital;

- linking private and public labs to the national District Health Information Software 2 system of reporting at the Ministry of Public Health's central Epidemiology and Surveillance Unit (ESU); and
- establishing a reference lab for COVID-19 genomic sequencing at the private Lebanese American University, and supporting the procurement of reagents for the reference lab.

**TIME FRAME** June 2020–December 2020

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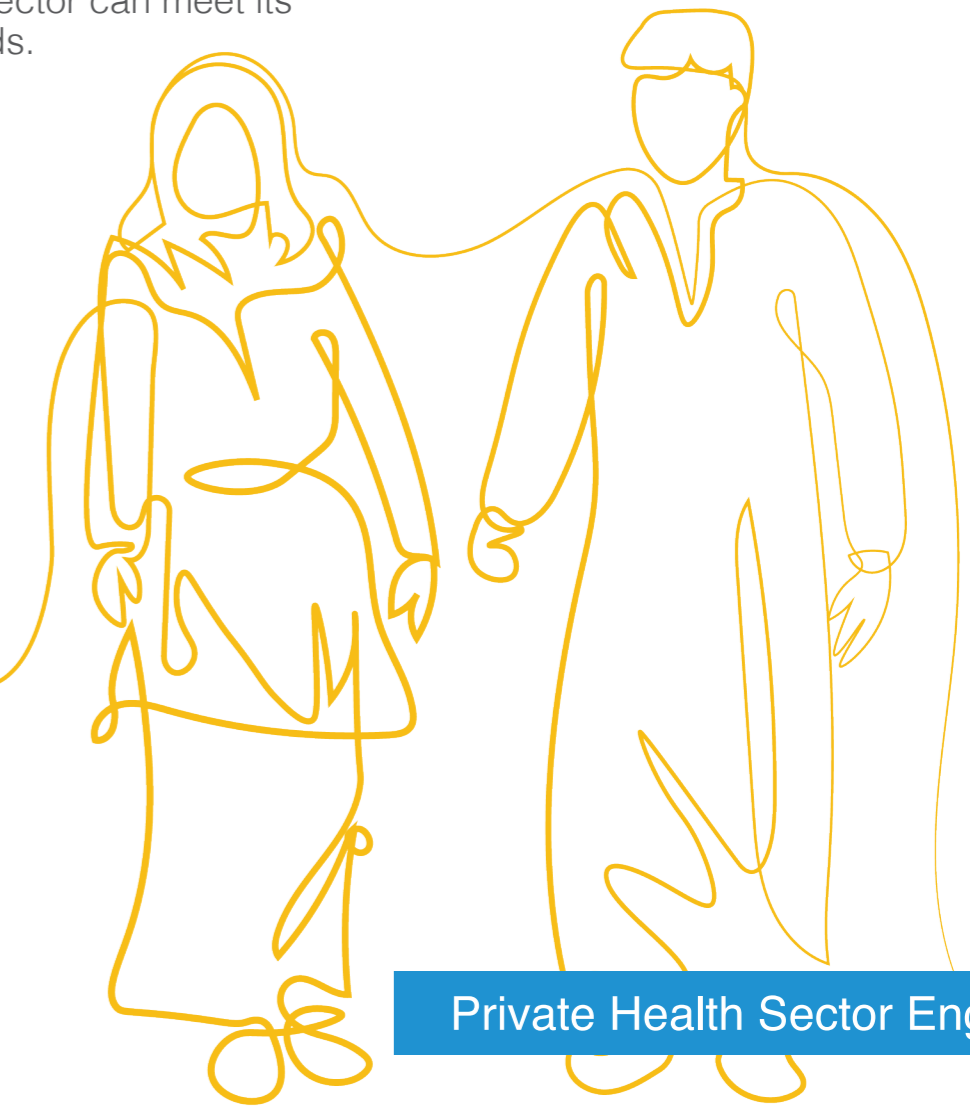
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**MORE DETAILS** Lebanon is facing an unprecedented socio-economic and financial crisis that is jeopardizing the sustainability of the health system and threatening the private health sector whose contribution in terms of expertise and know how is instrumental in ensuring that the public sector can meet its testing needs.

**HASHTAGS**  
#COVID19 #Testing

**RESULTS**

1. A total of **70 labs were assessed for safety and quality**, and improvement plans were shared with them individually.
2. Of the 28 labs already engaged in the EQA system, 26 have been **certified**.
3. Around **70% of labs performing RT PCR for COVID-19 report daily** to the Ministry of Public Health, providing the regular data flow necessary to estimate positivity rates and inform public health measures.
4. The genomic sequencing data regularly provided to the Ministry of Public Health has been instrumental in monitoring the epidemic and determining public health measures. **The data is shared through the global COVID-19 sequencing platform.**



Private Health Sector Engagement

# SUCCESS STORY

## Monitoring private mental health facilities to ensure respect of human rights of patients with mental disorders

### Lebanon

**THE PROBLEM**

- No authority oversees the human rights of patients with mental disorders in Lebanon, and there are no external reviews/inspections covering the respect of human rights in facilities providing mental health services.
- Patients with mental disorders are often unaware of their rights and excluded from decisions that affect their lives.
- While one of the strategic objectives of the National Mental Health Strategy for Lebanon (2015-2020), launched by the Ministry of Public Health, was to regularly monitor mental health facilities to ensure the protection of human rights, the data necessary to design a monitoring mechanism was missing.

**ACTION**

- A pilot project by the Ministry of Public Health's National Mental Health Programme (NMHP) and WHO Lebanon assessed respect for human rights in two private facilities providing inpatient mental health services. An improvement plan was then developed jointly with the facilities.
- The second phase of the project, planned to take place between 2018 and 2021, covers three additional mental health facilities. It includes a

baseline assessment and a post-improvement plan assessment, and capacity building workshops on the Convention on the Rights of Persons with Disabilities (CRPD), human rights concepts, and revisions to Lebanon's mental health law.

- WHO QualityRights standards and principles are being integrated into Lebanon's national accreditation standards for mental health.

**TIME FRAME** 2015–2021

**MORE DETAILS** The assessment used WHO QualityRights Tool Kit which establishes standards of care to be applied in a culturally and socially appropriate manner across five interrelated areas, each addressing an important human rights and quality issue:

1. Promoting inclusion and independent living in the community
2. Protecting against inhuman and degrading treatment, violence and abuse
3. Promoting legal capacity and enhancing autonomy
4. Promoting the highest attainable standard of physical and mental health
5. Promoting an adequate standard of living and ensuring that the environment is caring, supportive, comfortable, and stimulating

The lack of dedicated funding for periodic monitoring – both phases have so far been funded by donors – poses a challenge to the sustainability of the initiative, and the private nature of the mental health system in Lebanon presents difficulties in maintaining levels of motivation within facilities.

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### HASHTAGS

#MentalHealth # QualityRights  
#MonitoringAndEvaluation  
#ImprovementPlan

### LINKS

#### to additional resources

QualityRights Lebanon. (2018, May 11). Retrieved from [https://www.mhinnovation.net/innovations/qualityrights-lebanon?qt-content\\_innovation=2#qt-content\\_innovation](https://www.mhinnovation.net/innovations/qualityrights-lebanon?qt-content_innovation=2#qt-content_innovation)

**RESULTS** The pilot project's assessment of health care facilities **identified opportunities to make facilities more disability-friendly**, including capacity building among staff in terms of their knowledge of human rights and the CRPD.

Further evaluation will be conducted after the second phase of implementation (2018–2021) is complete.

Engaging the private sector to  
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**success story from**

# Occupied Palestinian Territories



# SUCCESS STORY

Engaging the private sector to deliver specialized services

Occupied Palestinian Territories

**THE PROBLEM** Many specialized services are unavailable at Ministry of Health facilities. They include heart procedures (open heart surgery, catheterization, and treatment of complex cases), some specialized surgeries, as well as hematology, and oncology treatments.

**ACTION** In 2002, a memorandum of understanding (MoU) was signed between the Ministry of Health and Augusta Victoria Hospital (AVH), a tertiary hospital owned by an NGO in East Jerusalem. The MoU covered the provision of oncology and kidney dialysis services to patients from the West Bank and Gaza, setting out objectives, services, prices, payment, and other contractual terms.

The agreement has since been updated three times. It contains provisions for formal letters between AVH and the Ministry of Health to be used to agree additional services not included in the MoU.

**TIME FRAME** July 2019-present

**MORE DETAILS** East Jerusalem hospitals provide high-quality specialized services and serve as major referral centers for Ministry of Health patients in need of services that are unavailable at Ministry of Health facilities.

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**HASHTAGS**

#Dialysis #Oncology #Cancer #EmergencySetting

**RESULTS** The agreement has **helped cancer patients access treatment**, especially in radiology services, that would otherwise be unavailable to them. Referrals from the Ministry of Health to AVH have also enabled the treatment of kidney dialysis patients.

**Referrals over the last two years:**

Duration	# kidney dialysis referrals	# oncology referrals
July–Dec 2019	188	9932
Jan–Dec 2020	382	11914
Jan–Jun 2021	177	7965





Engaging the private sector to  
improve health and well-being:  
**success stories from**

**Pakistan**



# SUCCESS STORY

## Public-private partnership (PPP) to promote mental health

### Pakistan

**THE PROBLEM**

- Mental disorders account for more than 4% of the total disease burden, with the mental health burden higher among women.
- It is estimated that 24 million people in Pakistan are in need of psychiatric assistance.
- According to WHO data, Pakistan has only 0.19 psychiatrists per 100 000 inhabitants, one of the lowest rates in the Eastern Mediterranean Region, and the world<sup>1</sup>.
- Only five out of 100 persons with a mental health condition needing attention receive treatment.
- There is strong evidence that approximately half of all mental disorders begin during childhood and adolescence.
- Teachers' knowledge and beliefs, and the stigma surrounding mental health, influence the way they perceive and respond to mental health crises among students.

**ACTION**

The President's Programme to Promote Mental Health of Pakistanis was launched. The programme, based on a public-private partnership (PPP), addresses the mental health of mothers, young children and adolescents. The main collaborator is the Human Development Research Foundation (HDRF), a not-for-profit trust.

The following interventions were made:

- A cognitive behavioural therapy based intervention (the Thinking Healthy Programme), provided at very low cost (estimated at \$1 USD per recipient) in primary and secondary care settings, was operationalized, with step-by-step instructions

for implementation by non-specialists such as community health workers.

- A self-help digital application for adolescent depression was employed to address the treatment gap in developmental disorders which can approach 100% in rural Pakistan. Given that 87% of households in Pakistan own a mobile phone, the potential for technological support for training and delivery is vast.

### RESULTS

**A pre-post evaluation of the programme indicated:**

- a significant **improvement in disability**;
- **reduction** in children's socio-emotional **difficulties** and stigmatizing experiences; and
- **greater empowerment** of families to seek services and community resources for children.

There was, however, **no change** in caregivers' well-being. To replicate this service more widely a social franchise model has been developed. Such integrated social, technological, and business innovations have the potential to be applied to other areas of health care in low-income countries.

**TIME FRAME** 2019

**MORE DETAILS**

HDRF frequently collaborates with the Government of Pakistan. Its research and service facilities are based in a rural area in Mandra, on the outskirts of Rawalpindi, and include the Mandra Research Centre and the Mandra Intellectual and Neurodevelopmental Disorders Centre.

HDRF focuses on:

- research in the health, education, social, and biological fields;
- developing training materials;
- workshops and seminars for human service organizations and the public; and
- the development of strategies to implement evidence-based intervention programmes.

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### HASHTAGS

#MentalHealth #Teachers  
#MobileApplication  
#DigitalHealth #CBT

### LINKS

to additional resources

[https://www.who.int/mental\\_health/maternal-child/thinking\\_healthy/en/](https://www.who.int/mental_health/maternal-child/thinking_healthy/en/)

Whitley S, Smith JD, Vaillancourt T. Promoting mental health literacy among educators: critical in school-based prevention and intervention. Can J Sch Psychol. 2013;28:56-70.  
<https://doi.org/10.1177/0829573512468852>

# SUCCESS STORY

Combatting malnutrition through breastfeeding awareness campaigns

Pakistan

**THE PROBLEM** The double burden of malnutrition is growing in the Region and governments are struggling to meet the United Nation's Sustainable Development Goals by 2030, including Sustainable Development Goal 2, zero hunger.

No country, in the Region or the world, is on course to meet all ten of the 2025 global nutrition targets.

**ACTION** In 2019, the Government of Pakistan, in collaboration with UNICEF and the private sector, launched a breastfeeding campaign which included disseminating infant and young child feeding (IYCF) messages through theatres, seminars, social media and television. The programme was funded through corporate social responsibility.

**TIME FRAME** 2019

**For further information, CONTACT...**

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**HASHTAGS**

#BreastFeeding  
#HealthPromotion  
#Communication

**LINKS**

to additional resources

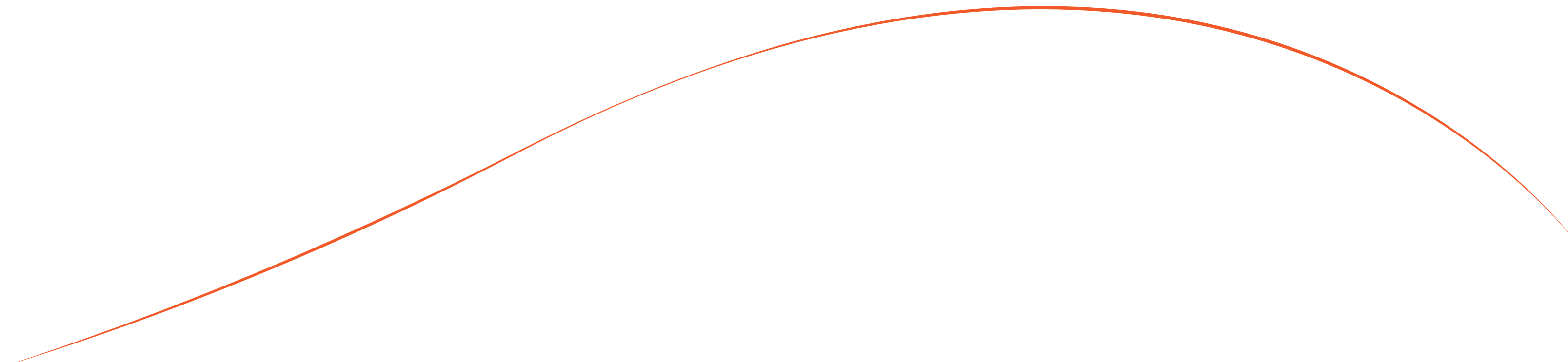
to additional resources  
Enhancing nutrition specific interventions through public health policies and public-private partnerships in the Eastern Mediterranean Region: a desk review

<https://f1000research.com/articles/10-17>

**RESULTS** Fifty million people were reached through the programme.

Engaging the private sector to  
improve health and well-being:  
**success stories from**

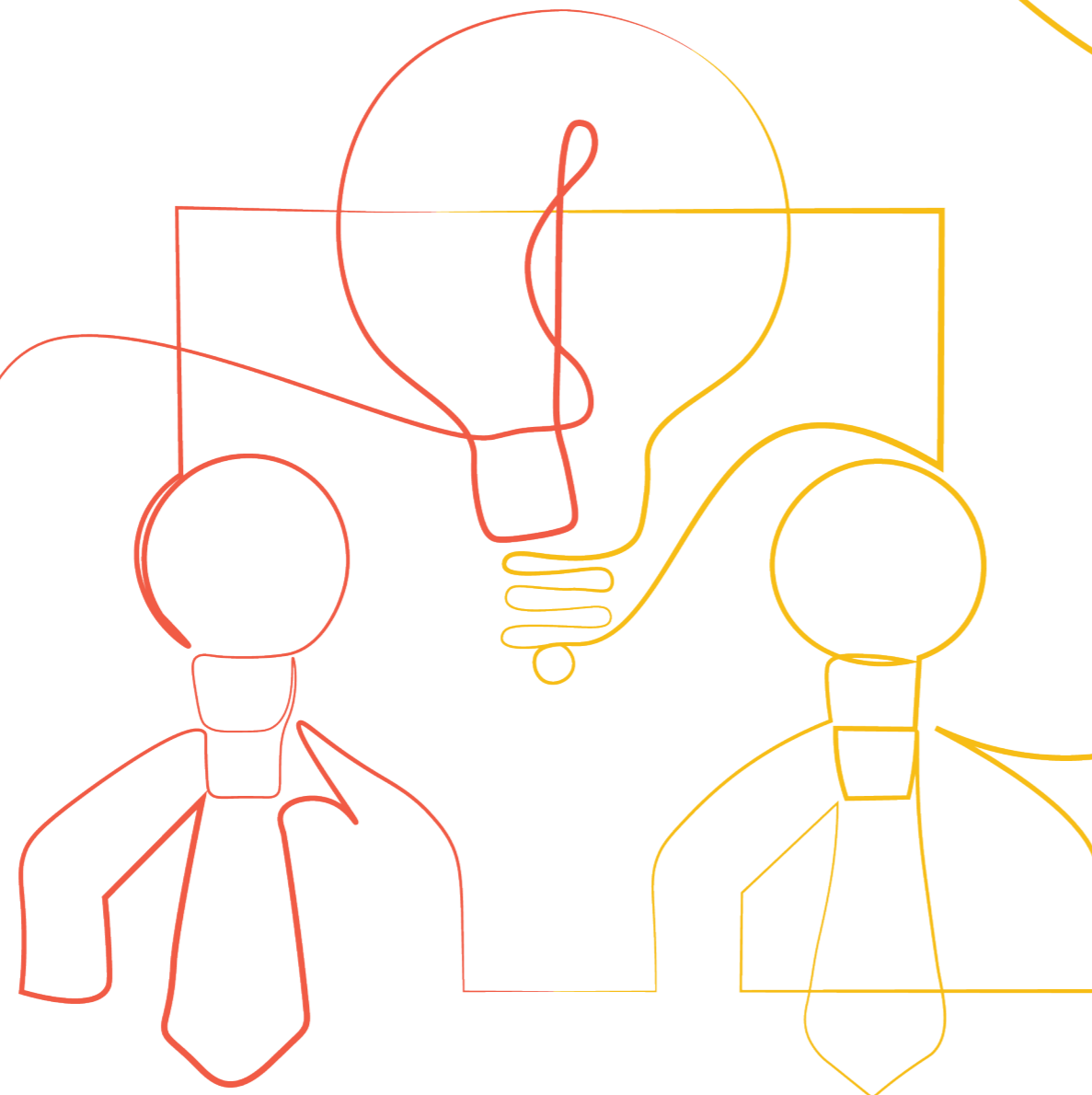
**Qatar**



# SUCCESS STORY

## Developing mental health attitudes and awareness measurement tool

Qatar



**THE PROBLEM**

- Low levels of mental health awareness
- High levels of stigma
- Lack of mechanisms to gauge mental health attitudes and awareness needed to inform future training and education programmes.

**ACTION**

- The Qatar Mental Health Attitudes and Awareness Index (QMHAAI) was developed to assess attitudes to, and awareness of, mental health.
- Intelligence Qatar, a private

research and marketing company, was commissioned to develop the QMHAAI survey, and conducted the survey questionnaire on behalf of the Ministry of Public Health.

**TIME FRAME** 2018-2022

**MORE DETAILS**

The National Health Strategy (2018–2022) states that 20% of mental health services in the country should be provided through primary care by 2020.

In the second wave of reporting, improvements in attitudes towards mental health and people with mental health conditions were recorded among people aged between 16 and 24. Higher levels of knowledge and awareness of mental health and mental illness were reported among non-Arab expatriates, females and respondents aged 16 to 24, compared to Qatari nationals, males and respondents aged 35 years and above.

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**HASHTAGS**

#Research #Assessments  
#Insights #Evidence  
#MentalHealth  
#AssessmentTool

**LINKS**

**to additional resources**

Developing Qatar's first mental health attitudes and awareness measure. (2020, January 27). Retrieved from [https://www.mhinnovation.net/innovations/developing-qatar%E2%80%99s-first-mental-health-attitudes-and-awareness-measure?qt-content\\_innovation=2#qt-content\\_innovation](https://www.mhinnovation.net/innovations/developing-qatar%E2%80%99s-first-mental-health-attitudes-and-awareness-measure?qt-content_innovation=2#qt-content_innovation)

**RESULTS**

- The QMHAAI Survey was conducted among 1 068 respondents to measure changes in attitudes and awareness and will be repeated every two years.

# SUCCESS STORY

## The private sector and health system strengthening

Qatar

**THE PROBLEM**

- Minimal collaboration between private sector providers.
- Lack of awareness of public-private partnerships (PPP) among stakeholders.
- Lack of business case justification in project management.
- Risks and responsibilities falling entirely on the private sector without a corresponding financial upside.

**ACTION**

The National Health Strategy (NHS 2018–2022) aims to increase the market share of the private sector in the health care industry by 25%

In 2018, the Ministry of Public Health specified 10 large projects to be implemented by the private sector through tendering processes. These processes will be supported, monitored and overseen by the Ministerial Group which is responsible for PPP and Local Business Development (LBD) policies.

**TIME FRAME** 2018-2022

**MORE DETAILS**

In 2020, His Highness Sheikh Tamim bin Hamad Al Thani, the Emir of Qatar, issued Law No. (12) for 2020 organizing the partnership between the public and private sectors. The new PPP Emiri Law increases investor competition and enhances its role in economic development.

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**HASHTAGS**

#HealthSystemStrengthening  
#PPP #HSS #HealthStrategy

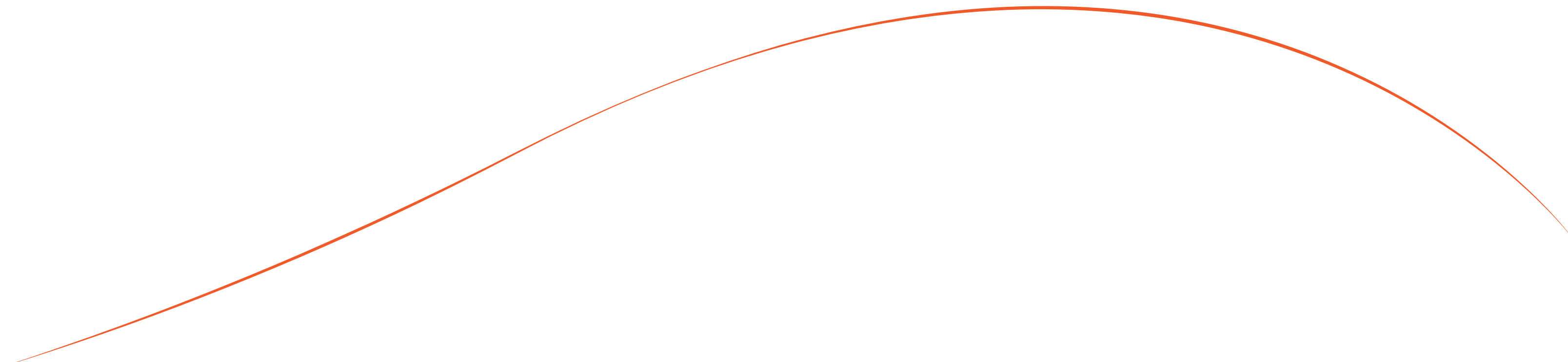


**RESULTS**

From 2016 to 2018 increased demand led to the opening of several new general and specialized hospitals in Qatar. **Two facilities, each with a capacity of 118 beds, were built**, one at Ras Laffan in the north, the second at Mesaieed in the south of Qatar. **The facilities serve as general community hospitals** offering emergency, inpatient, outpatient, surgical and diagnostic services, and have the potential to integrate primary care and occupational health clinics. The newly built hospitals may operate as PPPs in the future.

Engaging the private sector to  
improve health and well-being:  
**success story from**

**Sudan**



# SUCCESS STORY

Eliminating hunger by building local production capacity of ready-to-use therapeutic food (RTUF)

Sudan

**THE PROBLEM** The double burden of malnutrition is growing in the Region and governments are struggling to meet the United Nation's Sustainable Development Goals by 2030, including Sustainable Development Goal 2, zero hunger.

No country, in the Region or the world, is on course to meet all ten of the 2025 global nutrition targets.

**ACTION** In 2019, Sudan's Ministry of Health, in partnership with UNICEF, collaborated with local RTUF manufacturers to strengthen the RTUF supply chain in three Darfur states, and in the states of South Kordofan and Khartoum.

**TIME FRAME** 2019

**For further information, CONTACT...**

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**HASHTAGS**

#ReadyToUseTherapeuticFood  
#RTUF #EmergencySetting

**LINKS**

**to additional resources**

Enhancing nutrition specific interventions through public health policies and public-private partnerships in the Eastern Mediterranean Region: a desk review  
<https://f1000research.com/articles/10-17>

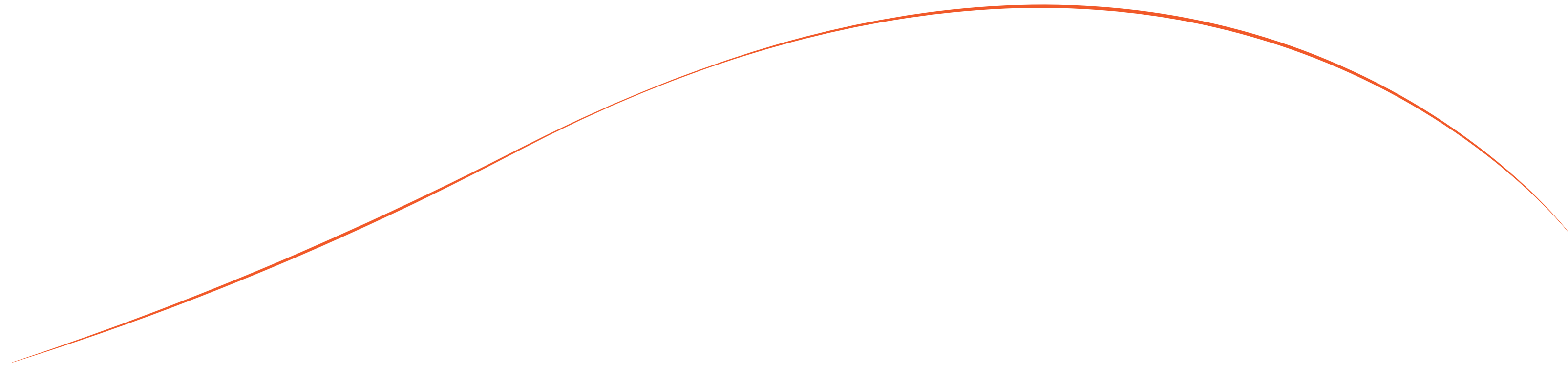


**RESULTS** The partnership resulted in **adequate RTUF reserves in the supply pipeline.**



Engaging the private sector to  
improve health and well-being:  
**success story from**

**Tunisia**



# SUCCESS STORY

Suicide: a multi-sectoral programme to prevent, assess and educate the public

Tunisia

## THE PROBLEM

The absence of data necessary to assess suicide trends in the country.

## ACTION

The Tunisian Suicide Prevention Project was launched in 2015 to better understand the causes of suicidal behaviour, and to define a prevention strategy to integrate within the national health strategy.

The project promotes a 'life course' approach to exploring suicide trajectories among young people. Since 2015 it has:

- developed a multi-sector strategy through a participatory approach;
- introduced training programmes for health professionals on screening and interventions for people deemed at risk, and developed training guides;

- entered into partnerships with organizations and groups including the Independent High Authority for Audiovisual Communication, the Institute of Press and Information Science, the Union of Journalists, and conducted training among media professionals as recommended by WHO;
- established a dedicated team in the Ministry of Health to oversee project initiatives and plan for the long term; and
- implemented an information system to collect reliable and up-to-date data on suicide in Tunisia and monitor self-harm data and trends to better inform suicide prevention initiatives.

## TIME FRAME

2015 - present

## MORE DETAILS

The challenges the programme has faced include:

- frequent changes in stakeholders due to political transition in Tunisia;
- coordination and administrative issues arising from the multi-sectoral nature of the programme; and
- the absence of dedicated human and financial resources.

## For further information, CONTACT...

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## HASHTAGS

#Research #Assessments  
#Insights #Evidence  
#MentalHealth  
#SuicidePrevention  
#CapacityBuilding #Awareness

## LINKS

### to additional resources

Suicide prevention in Tunisia. (2020, April 24). Retrieved from [https://www.mhinnovation.net/innovations/suicide-prevention-tunisia?qt-content\\_innovation=2#qt-content\\_innovation](https://www.mhinnovation.net/innovations/suicide-prevention-tunisia?qt-content_innovation=2#qt-content_innovation)

## RESULTS

In collaboration with different sectors:

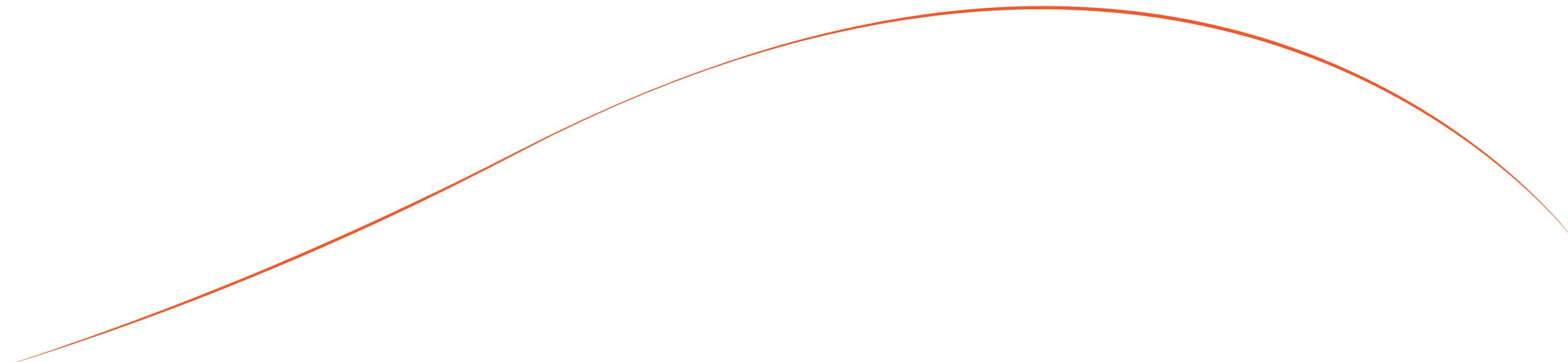
- **448 health professionals have been trained**, including 367 GPs, 41 psychologists, 21 nurses, nine psychiatrists, and 10 other health professionals. Additional training has been scheduled upon request.

- **Five training workshops for media professionals** were conducted in order to improve media coverage of suicides.

- A **bulletin** on the suicide rate in 2016 and 2017 in Tunisia was published **to raise awareness**.

Engaging the private sector to  
improve health and well-being:  
**success story from**

**Yemen**



# SUCCESS STORY

## The private sector and health system strengthening

Yemen

**THE PROBLEM** The private sector was restricted to service provision, with little or no involvement in planning, logistics, surveillance or other health system functions.

**ACTION** The private health sector was involved in a national health situation analysis which then informed the development of the National Health Strategy and Strategic Plan.

The Strategy aims to increase private investment in the health sector and ensure the provision of quality services.

**TIME FRAME** 2019–2025

**For further information, CONTACT...**

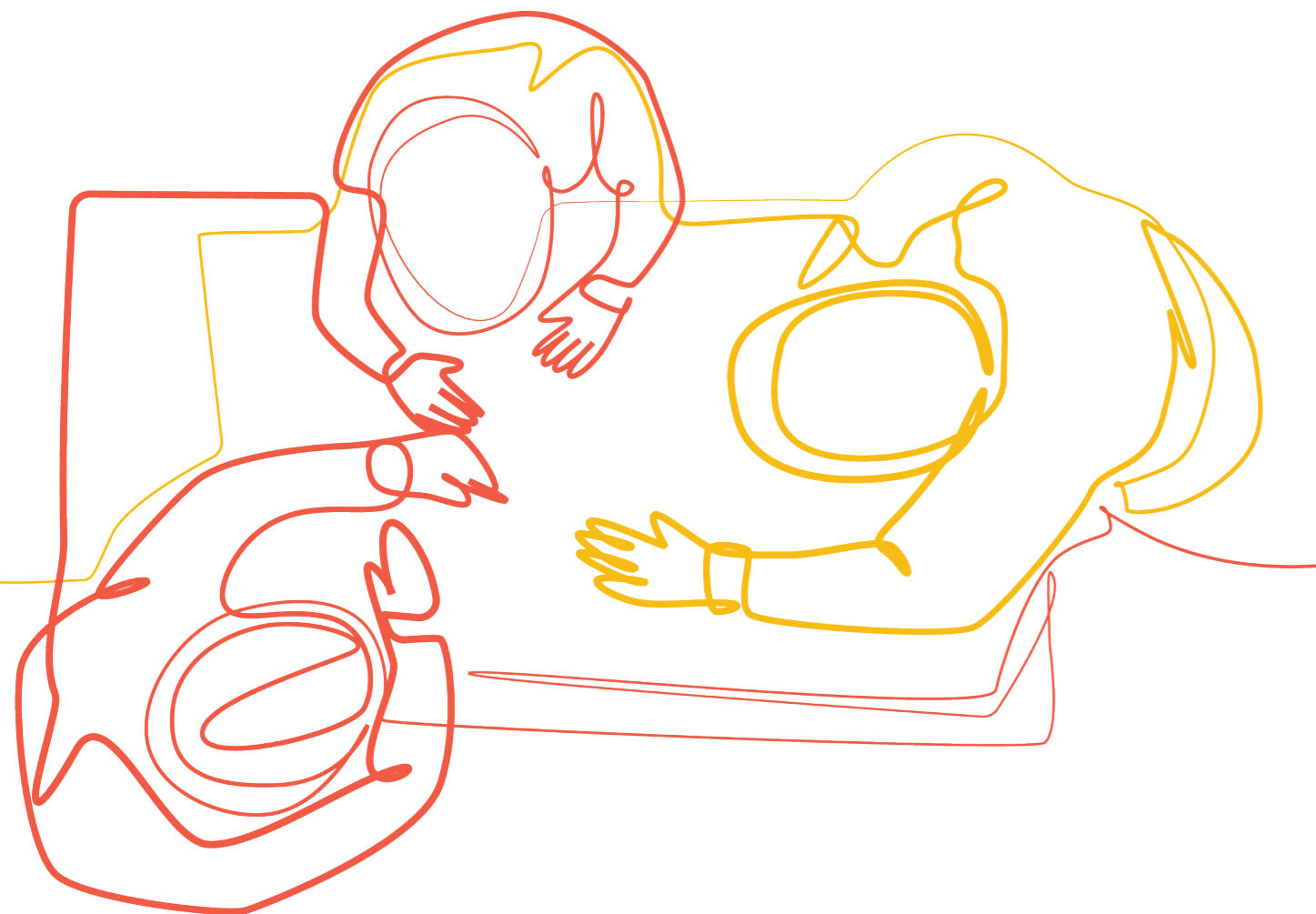
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**MORE DETAILS** Private sector contributions will be facilitated by:

- legislation that is flexible, and transparent;
- developing a comprehensive vision for partnership between the private and public health sectors;
- implementing a health insurance system for all citizens; and
- providing banking facilities and soft loans to health project investors.

**HASHTAGS**

#HealthSystemStrengthening  
#HSS #HealthStrategy



**RESULTS** The role of the private sector in phase 1 (2019–2020) of the Strategic Plan included:

- the provision of health services alongside the public health sector;
- the generation of increased tax revenues; and
- donations to health and charitable projects and programmes.

The role of the private sector in phase 2 (2021–2025) of the Strategic Plan includes:

- active participation in providing health services and investment;
- the creation of job opportunities across the health sector, and a concomitant reduction in government expenditure on public sector salaries;
- reducing the need to send complicated cases abroad by establishing hospitals where operations can be performed by foreign cadres; and
- helping to address shortfalls in medical specialties at public facilities.