

Healthy Partnerships



**How Governments Can
Engage the Private Sector
to Improve Health in Africa**

The Power of Two

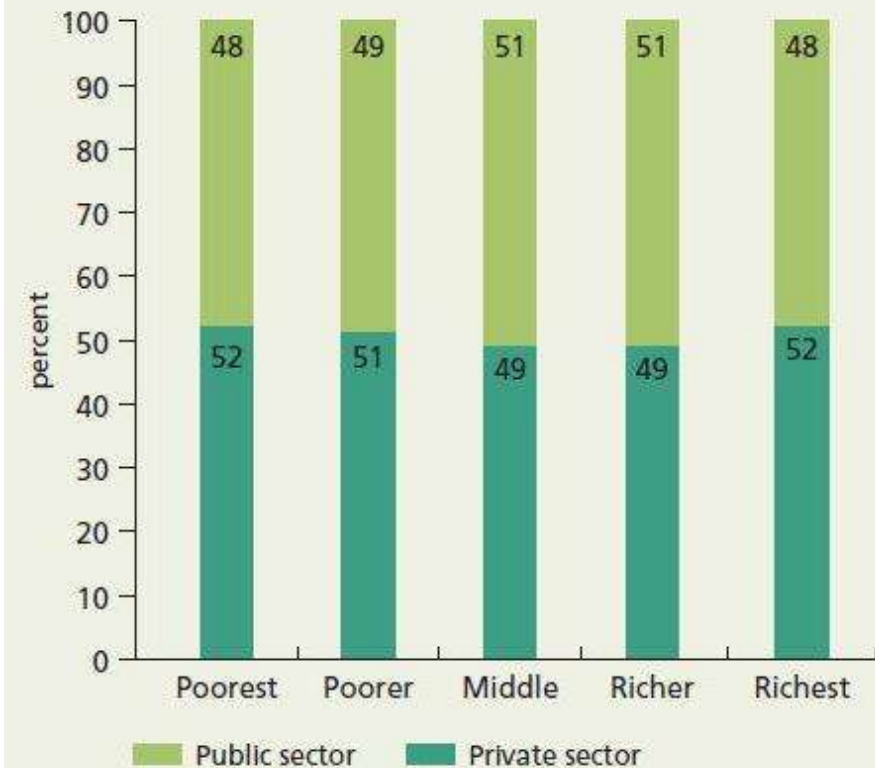
- Seeing with two eyes
 - Seeing the full health sector, with its public and private components
- Working with two hands
 - Both partners in the health sector, public and private, need to work together



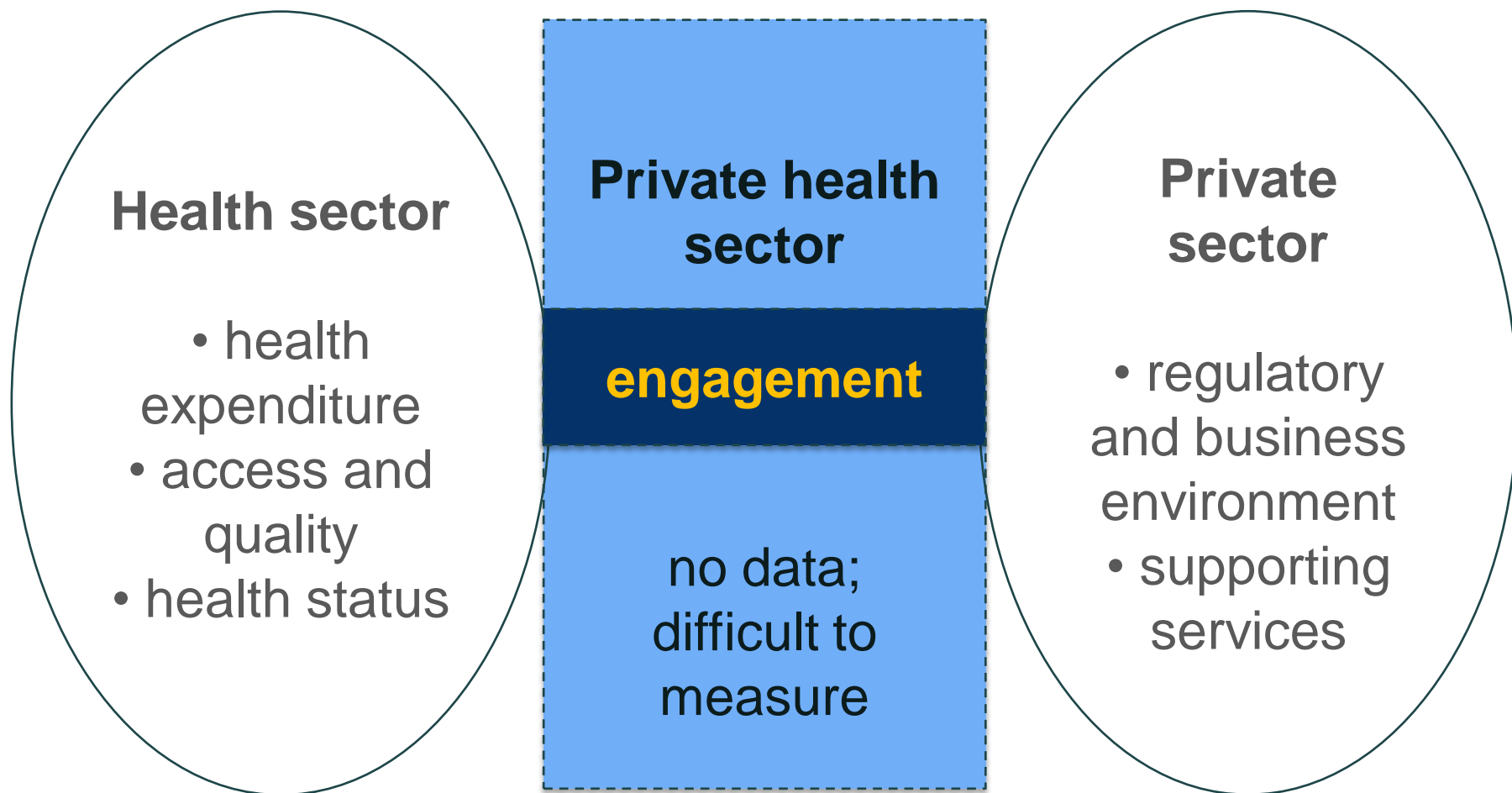
Starting point: 3 observations

1. Health systems improvements are urgent
2. Private sector: half of all services
3. Operating environment: constraint to improved contributions by private sector

Source of Health Care by Wealth Quintile for Households in Sub-Saharan Africa



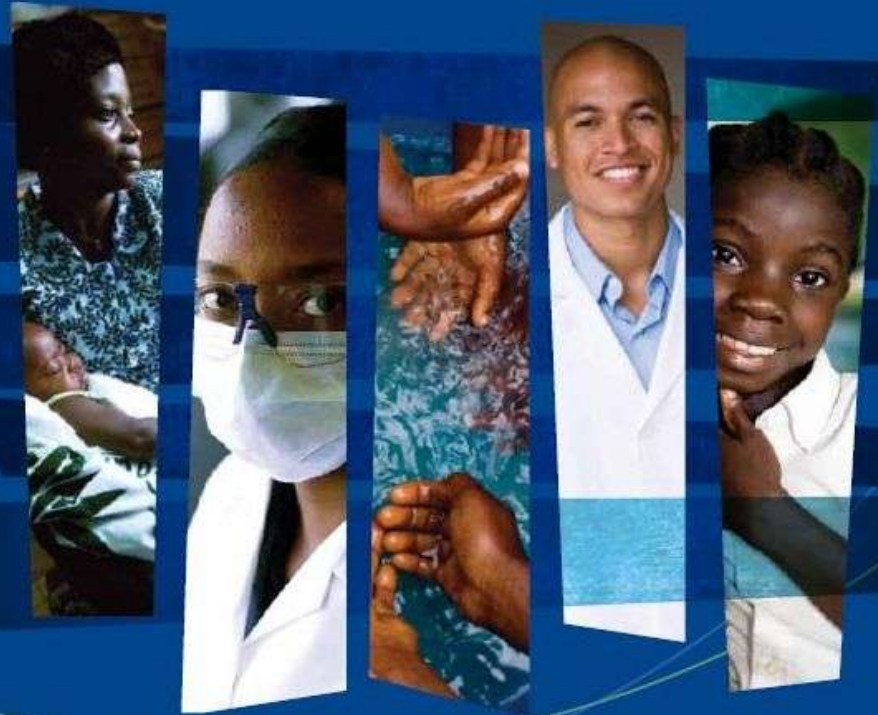
What's an operating environment?



- Systematic assessment of engagement
- In-depth interviews in 45 countries
- Good examples of what works well
- Informing and motivating reform

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Waiting for utopia vs. practical change now?



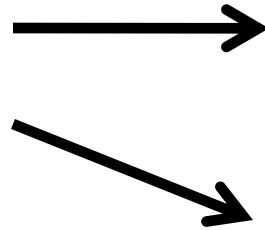
What constitutes engagement? 5 elements.

1. Policy & dialogue
2. Information exchange
3. Regulation
4. Financing
5. Public provision of services

1. Policy and dialogue: low implementation

Out of **45** countries ...

39 countries have
a policy toward the
private health sector



12 countries
implement policy

27 countries
do **NOT** implement

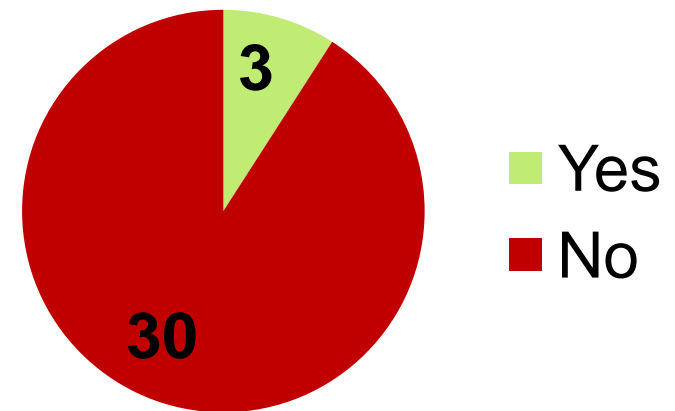
30 countries have weak dialogue or none at all

2. Information exchange: too low

- **33** countries require private facilities to provide information



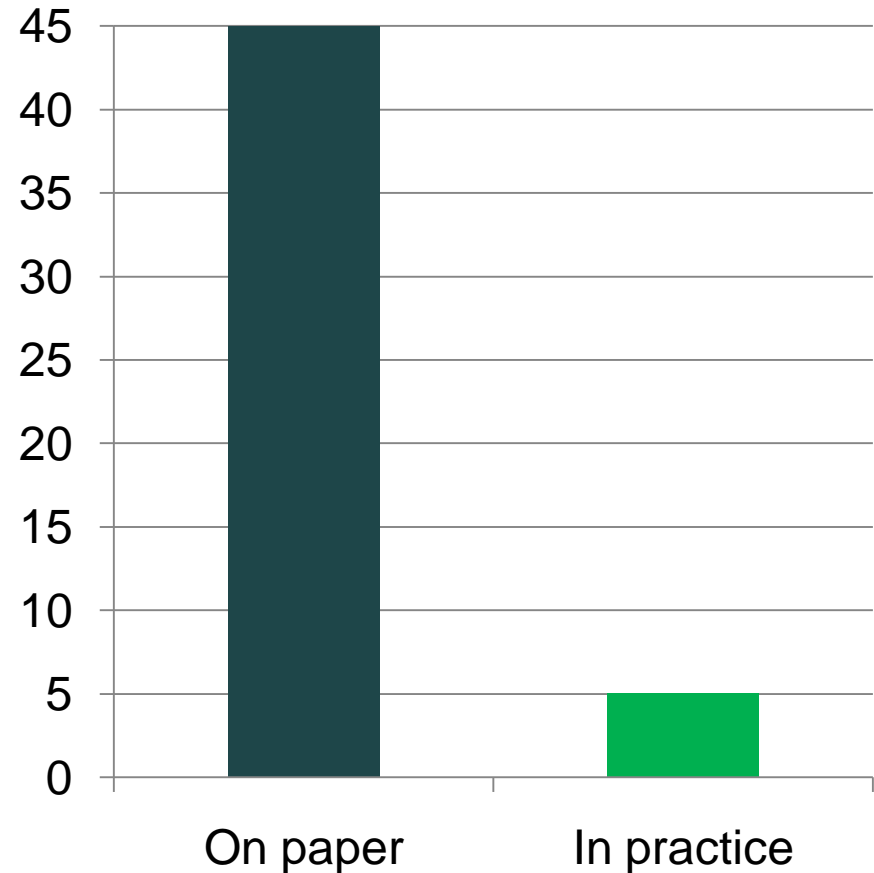
Information reaches the ministry



3. Regulation: lack of prioritization

■ Comprehensive registry of private facilities in only **6** countries

Quality inspections



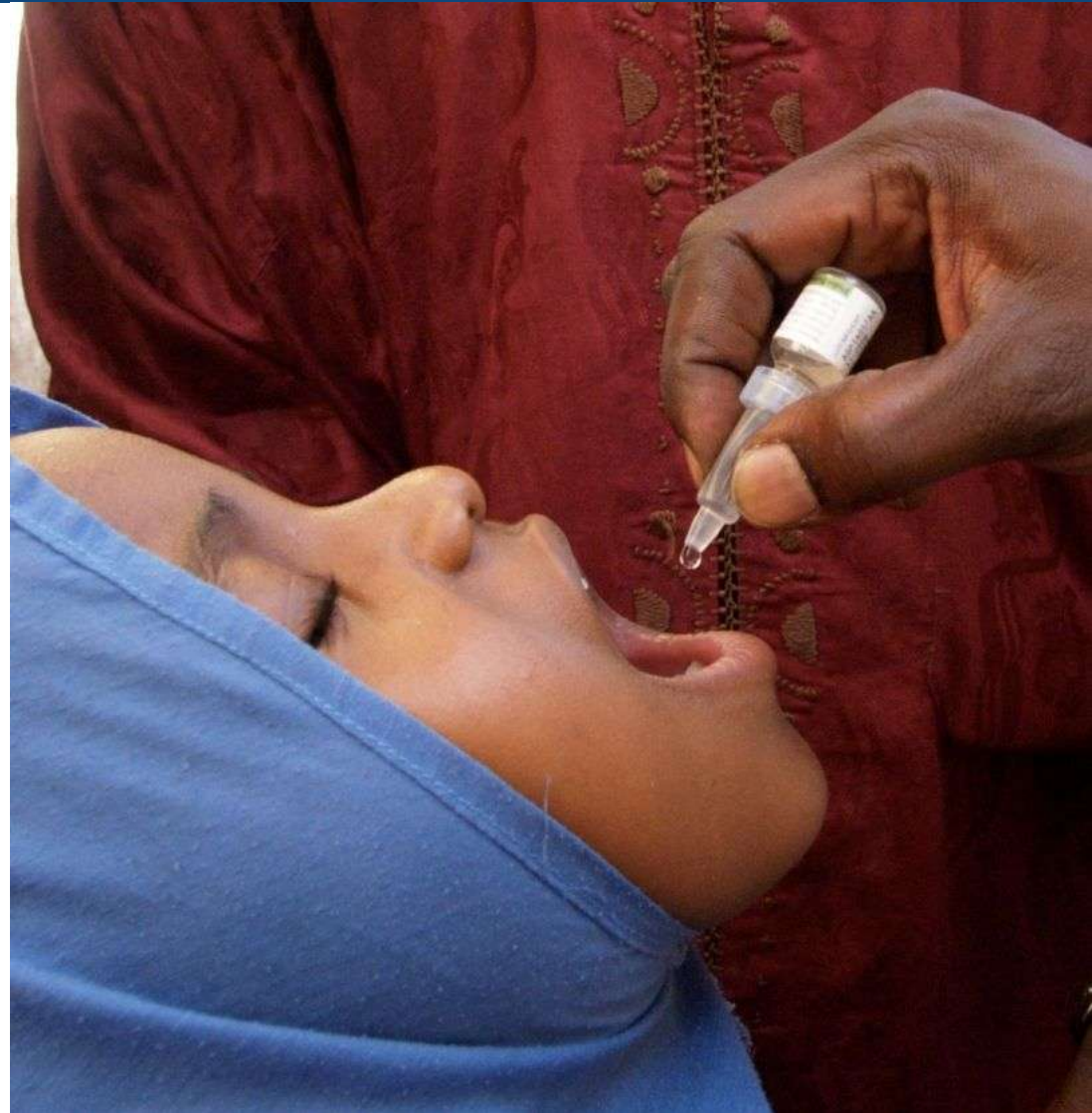
4. Financing: a key instrument

- In **18** countries, contracts with private providers
- In **16** countries, financial incentives
- Technically, politically difficult
- Expansion of insurance – a **“game changer”**



5. Public provision of services: frequent

- Inclusion in public health programs (e.g. ARVs, immunization)
- Inclusion at times conditional on compliance



Engagement scores across the region

Country	P&D (10)	Inf. Ex. (8)	Reg. (13)	Fin. (6)	PPS (2)
Burundi	3	2	5	4	1
Kenya	9	5	7	2	2
Rwanda	8	6	7	6	2
Tanzania	8	5	7	2	2
Burkina Faso	8	6	8	2	1
Nigeria	8	5	8	2	2
Chad	3	2	4	0	1
DRC	2	2	5	1	1
Mauritius	8	8	11	4	1
South Africa	9	5	13	3	2

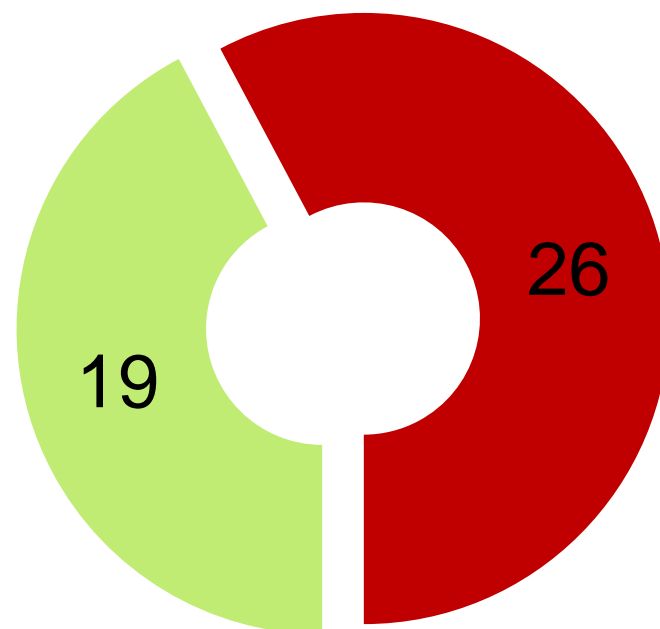
Private health sector has to step up

Government needs a counterpart to engage with

- Credible
- Capable
- Representative

Private health sector organization

■ Organized ■ Not organized



Key findings of the Report

- Concrete steps are not being taken
 - On paper, things are good. In practice, they are not
 - In effect, half of the population is abandoned
 - Regulations are inconsistent with current practices and the capacity to enforce
- Good instances of engagement in interventions and disease programs are not enough
 - Engagement must be systematic and deliberate
- The organization of the private sector matters

What is next?

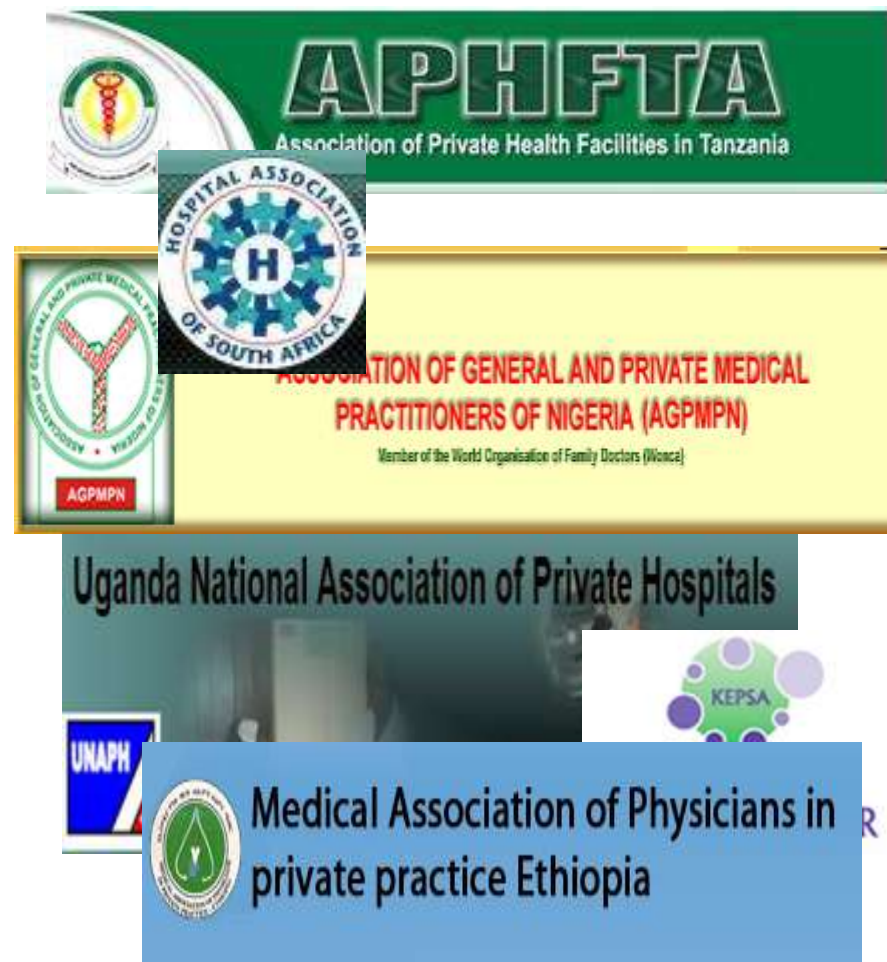


Recommendations: governments

- Government must lead
- Quick wins
 - Establish effective dialogue
 - Know who is doing what
- Start now
 - Review policies and practices
 - Focus on implementation
 - Expand insurance
 - Support quality enhancements

Recommendations: Private Health Sector

- Organize;
then, seek dialogue
- Encourage members to
 - Formalize
 - Join provider networks
 - Build capacity in clinical practice
and in business management



Recommendations: Donors, third-parties

- Support engagement and take active role, if requested
- Include private sector in country support programs
- Align programs with priorities coming out of dialogue

Resources ready to use right now

- In addition to ongoing work, toolkit is ready for use
 - Concrete guidance on engagement, private sector assessment, and capacity building
- All publications are online for your use and distribution
 - Also in-depth country studies and further analytical work

■ www.wbginvestmentclimate.org/health

The Power of Two

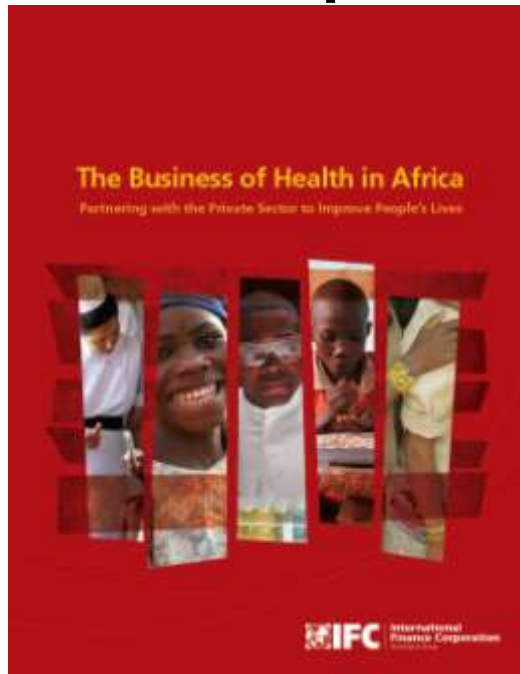


Additional slides



Context of Health in Africa initiative

2007 Report



- Policy, Analysis, Investment
- Addressing private sector constraints
 - Operating environment
 - Access to finance
 - Risk pooling or insurance
 - Human resources

'Health in Africa' – working with partners

Component	Aim	Activities			
Analysis	Improve our collective understanding				
Policy	Assist governments – and private sector	<p><u>Active in:</u> Kenya, Ghana, Mali, Nigeria, Tanzania, Uganda, Congo, Burkina Faso, South Sudan</p>			
Investment	Improve access to capital	<table border="0"> <tr> <td data-bbox="1006 903 1238 1189"> <p><u>Funds</u></p>  <p>US\$110m fund</p>  <p>€47.5m fund</p> </td> <td data-bbox="1290 903 1445 1189"> <p><u>Banks</u></p> <p>Nigeria Tanzania Ghana Kenya Uganda</p> </td> <td data-bbox="1561 903 1773 1146"> <p><u>Direct</u></p>   </td> </tr> </table>	<p><u>Funds</u></p>  <p>US\$110m fund</p>  <p>€47.5m fund</p>	<p><u>Banks</u></p> <p>Nigeria Tanzania Ghana Kenya Uganda</p>	<p><u>Direct</u></p>  
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