

# MOMENTUM

Private Healthcare Delivery



Vaccinations in Lesotho. Copyright Jhpiego



## PRIVATE SECTOR ENGAGEMENT TO BOOST REACH OF IMMUNIZATION PROGRAMS

An Introduction to key issues

### PURPOSE

This brief **introduces key issues on private sector engagement (PSE)** for immunization service delivery in the context of COVID-19 vaccine rollout. It is part of broader work by [MOMENTUM Private Healthcare Delivery \(MPHD\)](#) to distill the evidence and outline the potential for PSE to increase the uptake of immunization in low- and middle-income countries (LMICs), where immunization resources are constrained.

This brief **focuses on service delivery** by the private sector, the role of both non-profit (such as non-government and faith-based organizations) and for-profit entities in helping to establish new vaccination sites, staff, and other support to vaccination services. We aim to introduce readers to some key issues, indicate how MOMENTUM is synthesizing the rapidly expanding evidence, and invite partners to join a future learning agenda.

## PRIVATE SECTOR ENGAGEMENT IS CRITICAL TO COVID-19 VACCINE ROLLOUT

The COVID-19 pandemic has stretched many health systems, leading to calls for a [‘whole-of-government’ and ‘whole-of-society’ response](#) across both public and private sectors. Early in 2021, MOMENTUM and partners [called on governments for strengthened engagement of all stakeholders](#) – public and private alike - to support national efforts to rollout COVID-19 vaccines (1). This response to the pandemic was seen more broadly in private provider actions for testing, contact tracing, health information systems, isolation, treatment, and maintaining essential health services.

Non-government health providers (non-profit and for-profit) are now playing an important role in the delivery of COVID-19 vaccines. For example, in March 2021, the Government of India revised policy to enable accredited private health sector facilities to provide COVID-19 vaccines; a response to address the slow vaccine roll out by expanding access (2). MOMENTUM has been collecting evidence on PSE for immunization services prior to the pandemic and synthesizing early experiences from COVID-19 vaccinations in LMICs. These efforts demonstrate where PSE can add value to ongoing efforts, identify some risks to manage, and highlight the importance of actively learning from COVID-19 vaccination efforts to inform the future strengthening of immunization programs.

## PRIVATE SECTOR ENGAGEMENT IN IMMUNIZATION PRIOR TO THE PANDEMIC

Over the past ten years, there have been **two global reviews** (3, 4) of published evidence, resulting in a [World Health Organization guidance document](#) in 2017 (5). In low- and middle-income settings, private sector facilities, including both for-profit and nonprofit (often faith-based) agencies, vary hugely in their capacity and willingness to provide immunization services. In some **fragile and conflict affected settings**, private (NGOs/FBOs) providers often provide the bulk of public sector services whereas in other countries with more **mature mixed health systems** such as India and Indonesia, there may be less overlap with public and private sectors operating independently to serve different market segments. In some countries, the private sector has a **limited role** due to strict government controls or existing national commitments to provide essential health services free of cost through the public sector alone.

**Specific local experiences** show potential for engagement. In one state in Nigeria, formal public-private partnerships enabled private facilities to offer free immunization services boosting their share of immunization provision to 21% (6). In Afghanistan infant vaccination coverage was higher in villages where public-private partnerships were active (7). A local health audit in Kenya found 34% of for-profit facilities provided immunization, compared to 80% of non-profit or faith-based facilities (8); but elsewhere in that country a network of provider-owned franchised health clinics was associated with relatively higher immunization uptake on analysis of Demographic and Health Survey data (9).

## HARNESSING BENEFITS AND MANAGING RISKS

When harnessing these private sector resources, **carefully defining the terms of engagement** is important to ensure they add efficiency, and respect important principles of quality, equity, and financial protection. Many countries will require policy change to enable inclusion of the private sector (sites and health workers) in planning and supply chains so they can access government-approved vaccines at subsidized prices. It is important to note that even if the private sector receives vaccine supplies for free, they have other costs that still need to be covered. Inclusion in service delivery plans and information systems will mean that their efforts avoid duplicating government services and are properly accounted for. Ensuring quality entails inclusion of

private providers in approved training, and application of consistent standards for cold chain equipment, maintenance, vaccine schedules, safe storage, handling, and reporting of adverse events.

Past evidence shows that **PSE comes with specific risks and challenges**. Planning may be hampered by outdated or incomplete information on private sector facilities and staff. Services may be constrained by policy or regulations that do not license non-government vaccinators, or provide them access to subsidies or supplies. Many are wary of the potential for inequity if profit motives lead to vaccination fees or increase cost to the client. Specific financial or other support needs to be better understood as well as how to ensure appropriate balance between preventive care and specialized clinical care. Safety and quality monitoring can be hampered if private facilities are not listed or not integrated into health information systems.

The responsibility for providing routine immunization services is traditionally a government function; some governments, particularly in LMICs, may lack experience or be hesitant in engaging with the private sector and not equipped to manage the processes. Many of these risks can be managed through early engagement, adequate governance and regulation frameworks, and high-quality training and supervision. Further work is also needed to learn from past evidence and to document current experiences in ensuring PSE truly enhances immunization program reach. The key considerations emerging from the literature can act as a checklist guiding managers seeking to optimize PSE for immunization service delivery.

## APPLICATION TO FUTURE STRENGTHENING OF IMMUNIZATION PROGRAMS

MOMENTUM is collating emerging promising practices, including direct contracting out of essential services, carefully constructed pay-for-performance schemes, franchising of primary health care services, supply chain integration, and integration with health, nutrition, water, sanitation and hygiene programs. We also aim to better describe the differing typologies of public and private mix that have evolved in various settings, so future PSE can be more tailored. Evidence prior to the COVID-19 pandemic is helpful, and we expect more to emerge as programs undertake the massive increase in vaccination called for in late 2021.

What is missing from the current evidence base is documentation of how private sector actors can truly expand access to vaccination at scale, and the mechanisms of engagement that best catalyze radical change. PSE concepts such as the Total Market Approach will require us to deeply examine these complex dynamics and identify motivations and incentives for private sector providers to engage in vaccination. These insights will be useful as we work to develop multi-sectoral coalitions to support long-term immunization program strengthening, end the current pandemic, and build back better.

It is of great importance that amidst the fast-paced surge in COVID-19 vaccination in LMICs we document where and how new private sector partners are being enlisted in the immunization effort, so as to assess what this could mean for future immunization program strengthening.

## NEXT STEPS IN A LEARNING AGENDA

USAID's MOMENTUM Private Healthcare Delivery project, alongside other partners in the MOMENTUM suite of awards, is partnering with global immunization actors, such as the World Health Organization's Universal Health Coverage team (10) and UNICEF, to advance this agenda. More specifically, work is being done across the MOMENTUM suite of awards in selected countries to focus technical assistance in applying PSE principles to expand the reach, efficiency and capacity of ongoing COVID-19 vaccination efforts, and strengthen routine immunization programs.

MOMENTUM will leverage its implementing partners' history of support to national immunization programs. They can apply past experiences in supporting life-course vaccination, such as for adolescents. They can also bring lessons from rolling out COVID-19 vaccine with multiple partners including and beyond USAID.

MOMENTUM, in partnership with countries and partners, is currently:

- exploring application and adaptation of existing WHO guidance (5) and evidence to support the initial scale-up of COVID-19 vaccine delivery and uptake of COVID-19 vaccines; and
- seeking program partners to help learn from existing efforts to engage with the private sector so we can apply this to future strengthening of immunization programs.

New partnerships for PSE in immunization have potential benefits well beyond COVID-19 vaccination. They can show how to scale-up new platforms for vaccination throughout the life-course and find new ways to reach under-immunized communities with all vaccines, as envisaged in the [Immunization Agenda 2030](#).

## CONTACT

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