

# Leveraging the local private health sector to improve maternal health



**In many parts of the developing world, the majority of people seek health products and services from local private health providers. In Africa, approximately half the population seeks care from private providers, including the very poor. In India, most people who seek care outside their home turn to private providers.**

People tend to prefer receiving their care from the private sector for many reasons, including proximity to their home, flexible hours, perceived quality, a sense of personalized care, and sensitivity to local needs and customs. However, private healthcare can be unregulated, expensive, and of variable quality. It also often falls short in providing comprehensive maternal health services, such as labor and delivery.

Other local private businesses and entrepreneurs — including pharmacies and drug shops, transportation providers, community health workers and product distributors, also meet health needs.

Given the local private sector’s reach into many high-need communities — and its potential to offer more sustainable models of care — there is an opportunity to work with these providers and businesses to have a lasting impact on reducing maternal mortality.

Working in close collaboration with a diverse mix of partners, we operate like a living laboratory: designing and testing local health solutions for women that can achieve broad scale. As countries like India and Uganda begin to take on the worthy challenge of achieving universal health coverage, we believe the local private health sector should be an important part of the equation. We have a valuable opportunity to help governments integrate the large, diverse, and fragmented group of local private health providers into national health systems to help strengthen countries’ delivery of healthcare for all. The models we are testing — social franchising, accreditation, community accountability, and linking public and private care — have the potential to support governments’ ambitions to achieve universal health coverage, so that together we can ensure women receive affordable, quality care wherever they seek it.

## INDIA PARTNERSHIPS



### **Hindustan Latex and Family Planning Promotion Trust**

With Hindustan Latex and Family Planning Promotion Trust, we are adapting a sustainable franchise network of private hospitals and health workers to a new context so women in rural and peri-urban Rajasthan have better access to care throughout their pregnancy.



### **Jhpiego**

With Jhpiego, we are developing standards of quality care and helping private providers meet these standards through training, continuous quality improvement, and accreditation.



### **Pathfinder International & World Health Partners**

With Pathfinder International and World Health Partners, we are taking a total market approach to strengthen and link the public and private sectors. We are adapting a health franchise network to include maternal health, linking remote providers to higher level care through referral and telemedicine, and ensuring that quality supplies reach the last mile.

## UGANDA PARTNERSHIPS



### **Population Services International and PACE**

With Population Services International’s local affiliate (PACE) we are developing an “ecosystem” of care using private sector approaches to address all three delays that lead to maternal mortality. PACE and its partners are expanding a franchise network to offer labor and delivery services, linking communities with local transportation, training local drug shops and community health workers to distribute essential supplies and connect women to care, and supporting community insurance and savings schemes to make care more affordable.

**For more information and an update on progress, visit [www.msdfornthers.com](http://www.msdfornthers.com).**