Public-Private Dialogue

Toolkit for diagnosing challenges and identifying solutions









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Public-private dialogue steps

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INTRODUCTION

Private Sector Engagement

The World Health Organization, with the support of a WHO-led Advisory Group and Impact for Health (IHI), recently released a strategy on how to engage the private sector in mixed health systems. It focuses on six governance behaviors needed to drive

the public and private sector together to address UHC, and, more recently, the COVID-19 crisis. When the pandemic hit, the importance of effective integration of the private health care delivery sector became increasingly clear.



Figure 1: Six governance behaviours to engage private sector in mixed health systems

Co-Creation

Recognizing the importance of practical, in-country implementation of this new strategy we aimed to engage in country-led, country-driven learning about private sector engagement in the COVID-19 response. WHO and IHI joined forces with the Joint Learning Network (JLN) to facilitate dialogue, learning and knowledge products with the contributors listed. These participants identified public-private dialogue as a priority area to respond to COVID-19. We used the PPD experience from Myanmar as a case study to work through how to operationalize PPD in their country contexts.

Myanmar Case Study

When COVID-19 hit Myanmar, the private sector provided financial support and repurposed health facilities. Despite good intentions, these initiatives were fragmented, resulting in uncoordinated donations. The Ministry of Health and Sports decided to refocus the existing national public-private dialogue to the pandemic response. Over a period of five weeks the public and private partners had a series of intense rapid meetings where they co-developed a public-private partnership action plan for COVID-19 response.



STEP 1

STEP 2

STEP :

STEP 4

STEP

PRE-PUBLIC-PRIVATE DIALOGUE:

Lack of understanding



CHALLENGES

Lack of knowledge regarding where the **private** sector has the potential to provide support to national health systems.

Negative perception of private sector by the public health sector

GOVERNANCE BEHAVIOUR

Build Understanding: Collect and analyze data to align priorities for action and build a shared understanding of the need for improved health governance.

SOLUTIONS

Conduct a **needs and landscape assessment** to identify gaps and areas of potential support from the private sector. This will inform strategy for private sector engagement.

Government should **raise awareness** on the benefits of private sector engagement models to build support for dialogue and collaboration with the private sector.



Myanmar Academy of Medical Science (MAMS) in partnership with Ministry of Health and Sports hosted a national private-public symposium. The goal was to formally engage the public and private partners in a dialogue to promote effective collaboration between the two sectors in order to maximize benefits and optimize the available resources from both sectors.

STEP 5 STEP 6

STEP 1Build Foundation

Identify a balance of key public and private partners, establish an "honest broker" role, and select a platform on which to operate.



CHALLENGES

Lack of history of working together makes it difficult to initiate public-private dialogue (PPD). Private and public sector representatives do not have a platform to meet regularly.

Lack of balanced representation (over or under representation) of the health sectors.

The PPD is monopolized by a small group of extremely powerful stakeholders that are often in control of key resources and have crucial influence on the government and dialogue process.

GOVERNANCE BEHAVIOUR

Foster Relations: Build and sustain partnerships and coalitions by ensuring regular communication that fosters trust and builds working relationships.

ACTIONABLE SOLUTIONS

Use data to "depoliticize" discussions and to help build trust.

Select an appropriate **platform** to house the PPD (in some cases, the PPD will have to create a new one).

A core group of champions will emerge organically.

Encourage them early on to become the core leadership group.

Perspectives from managers at local levels should be incorporated in the national PPD initiative; they are closest to the communities and know the demands of their populations.



A landscape analysis was carried out to identify the appropriate stakeholders to involve in the PPD process. MAMS played the role of an honest broker throughout the PPD process since they have legitimacy and are respected by both the public and private sectors.

STEP 2 Set Rules

Reach an agreement on how to work together by instituting rules that embody values. Establish mechanisms to resolve conflict.



CHALLENGES

Lack of training and knowledge to allow for the proper implementation of PPD.

Lack of trust within government, and between public and private stakeholders

Not all partners can participate equally; there is a **potential of "free riders"** (don't contribute) or elite capture (dominated by a few individuals).

GOVERNANCE BEHAVIOUR

Enable Stakeholders: Ensure formal tools for implementation, including powers, incentives and sanctions. Set the rules by defining what each health actor must do, how they must do it, and for whom.

ACTIONABLE SOLUTIONS

Allow the core **leadership group** to lead the process of **define the "rules"**— not one sector or individual.

Sensitize the leadership (both private and public) before implementing the strategy.

Training, knowledge acquisition and skill building of PPD partners to allow for the proper implementation of the PPD.

Host a learning event to understand what went well/what didn't.

Joint decision-making throughout the PPD process.



The PPD partners defined the joint planning exercise's purpose and agreed on how to work together. The group committed to open and transparent communication, assurance to attend all the meetings, and to share data to inform evidence-based planning. Meeting minutes were circulated to ensure transparency and accountability.

STEP 3

Formalize Process

Create formal structures e.g. secretariat and establish systems and processes e.g. meeting agendas. Mobilize resources to run the PPD.



CHALLENGES

In emergency situations such as COVID-19, the private sector has shown interest in supporting the national response but this requires coordination.

Failure to focus and implement the PPD process.

GOVERNANCE BEHAVIOUR

Align Structures: Ensure alignment between policy objectives and organizational structure and culture. Agree upon an optimal structure to avoid overlap between sectors and ensure that communication channels are established.

ACTIONABLE SOLUTIONS

Mobilize resources (funds and in-kind) early in the process to establish a PPD structure.

Secure **resources** from all PPD partners – it is a strong measure of a partner's commitment to the process.

The private sector should organize into a manageable number of representative associations that can advocate for their constituents.

Create a formal structure to **support participation** and foster cooperation, together with skills and resources to manage the day-to-day operations of a PPD.



The GFF provided the backbone secretariat structure to run the dayto-day business of the PPD. They also served as technical experts and shared information on promising approaches in public-private sector partnerships as well as successful PPD initiatives.

STEP 4Set Direction

Develop an action plan that defines success and agree on how you will measure it. Create a system to collect data to monitor progress.



CHALLENGES

Competing priorities

between the private and public sectors.

Lack of data sharing

between public and private sectors.

Competition among private partners to gain Ministry of Health's attention.

GOVERNANCE BEHAVIOUR

Nurture Trust: Develop transformative accountability agendas that are grounded in diagnosis and dialogue.



ACTIONABLE SOLUTIONS

Pause and take time to **build consensus** on the definition of success – the shared vision will unite, propel, and sustain the PPD process.

Private sector should set aside one's individual business identity to reduce competition and professional jealousy.

Have a core leadership group from public, private, and civil society groups who "own" and "drive" the PPD process forward.



Over a period of 5 weeks three technical working groups were created to focus on COVID-19 clinical testing, treatment, and procurement of supplies. The PPD partners were involved in a series of intense rapid meetings and informal "side" conversations where they developed an action plan based on the shared vision of success.

STEP 5

Orchestrate Partners

Manage partners' commitment, hold them accountable, build their capacity and engage them continuously.



CHALLENGES

Uncoordinated structures lead to duplication of effort and gaps in support.

GOVERNANCE BEHAVIOUR

Deliver Strategy: Formulate strategic policy direction by designing interventions that harness the private sector for universal health coverage. Agree on direction and articulate roles and responsibilities.

ACTIONABLE SOLUTIONS

Maintain a **strict** and **regular** meeting schedule to review progress (using data) and to hold all partners accountable to their commitments.

Government should invest in building ministry staff's **competencies** and **skills** to facilitate effective PPD initiatives.



Public and private partners produced a COVID-19 response action plan that was presented to the health minister and to the director of the National COVID-19 Emergency Response Team. A working group (including both public and private stakeholders) will implement a workplan to increase access to affordable testing and may eventually move to PPD Step Six "Decide".

PRE-PPD STEP 1 STEP 2 STEP 3 STEP 4 STEP 5 STEP 6

STEP 6Decide Future

Decide on whether to disband the PPD, sustain and refocus the PPD's purpose, or to institutionalize the PPD



SOLUTIONS

Disbanding a PPD process is not a sign of failure – instead, it may open new opportunities for collaboration.

More information

Placeholder text