Public–private partnership scenario in the health care system of Pakistan
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ABSTRACT Public–private partnerships (PPP) in basic health services delivery aim to improve service provision, such as better coverage, quality and infrastructure of health care, as well as raising the demand for health by the community. This paper outlines some examples of public–private partnerships in Pakistan and examines barriers to further development of such initiatives. We argue that to meet the challenges of globalization and achievement of the Millennium Development Goals, Pakistan needs to improve the health status of its society by promoting and practising PPP in providing health care services.

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Background

The concept of co-operation between public and private provision of health care was instituted in Pakistan in national health policy in 1960 and started as a model of corporate social responsibility to serve the nation’s health needs. Public–private partnerships (PPP), as they are now called, are a health sector reform to create long-term, task-oriented and formal relationships among the public and private sectors in sharing their core competency and resources, including some degree of joint decision-making and innovative interaction to provide sustainable improvements in the provision and enhanced utilization of health care services and also to address emerging health challenges for the benefit of society. A core set of objectives of PPP in basic health services delivery relate to improving service provision, such as coverage, quality and infrastructure, as well as raising the demand for health by the community.

The 1973 Constitution of Pakistan, Article 38(d), guarantees that the State shall provide the basic necessities of life, including the provision of health care. Yet, the apparent priority given national security over human development means that the government seems unable to fulfil its constitutional promise to bring reforms to the health sector of Pakistan. The provision of basic health services in Pakistan is inadequate and is a major obstacle to human development.

Pakistan is facing a double burden of disease. Not only is the country failing to overcome infectious diseases such as poliomyelitis that others have tackled, but it is also facing the challenge of chronic noncommunicable diseases. As far as health indicators are concerned the infant and maternal mortality rates for Pakistan are very high compared even with other developing countries, at around 100 per 1000 live births and 340 per 100,000 live births respectively.

Barriers to public–private partnership

Privatization policies in Pakistan remain largely unexamined and insensitive to the need for basic health services that are accessible, available, affordable and of acceptable quality. This could be due mainly to downsizing of social capital and inadequate financial resources or to disparities in power and lack of trust between the public and private sectors that inhibits collaboration at the policy and operational level in provision of health care in Pakistan. As a result, the health sector in Pakistan is far from developing a consistent form of interaction between the public and private sectors, and suffers from a persisting political polarization along 3 major, intersecting faultlines—bureaucrats, technocrats and the military—that have been evident in Pakistan since the partition of the Indian subcontinent in 1947. This in turn is reflected in a high burden of disease, lack of health care staff, staff absenteeism and poor access to health facilities for patients [1].

According to the Pakistan National Health Policy 2001, primary health care in Pakistan is currently functioning mainly in the private sector through contracting out of health services, which means handing over of un- and under-utilized government health facilities, such as basic health units, rural health centres and hospitals to the private sector. This is supposed to provide support for awareness raising and the management of clinical and nonclinical services in the community [2]. This was implemented through a rural support programme.

Examples of public–private partnership

The goals of PPP are to create a financially sustainable system, capacity reform and management reform in the public–private sector which may lead to increased health care delivery and utilization, preventing unintended outcomes of private sector growth in health, control health care costs and create improvements in the health status of society, thus facilitating socioeconomic development. In Pakistan there are some examples of successful public–private collaborations in health care provision:

- a mobile doctors programme run by a tobacco company since 1980 in the tobacco cultivation areas and at their
factories as a part of their corporate social responsibility strategy (Pakistan Tobacco Company, 2005);

- the national programmes for malaria, tuberculosis and HIV/AIDS control implemented through a collaboration of government and private health care providers, including the Ministry of Health and the GreenStar Network, the Asia Foundation and HealthNet International; the World Health Organization (WHO), United Nations Development Programme and World Bank support all providers in the services; the Ministry of Finance, Government of Pakistan, subsidizes the insecticide-treated bednets.

- a public sector mother and child hospital in Shikarpur district in Sindh province whose management is handed over to a private practitioner;

- the Health and Nutrition Development Society (HANDS), an NGO in partnership with Sindh government to provide primary health care services at basic health units in Karachi;

- the Aga Khan University Karachi, Pakistan, a private sector partnership with Sindh Government to provide primary health care services in rural and urban slum communities for disease surveillance, vaccines and drug trials;

- Heartfile, an NGO in partnership with government, the International Vaccine Institute (South Korea), WHO, Save the Children and UNICEF, is the supporting agency in a policy development initiative to control noncommunicable diseases;

- a Ministry of Population Welfare and United States Agency for International Development partnership established a social marketing programme from the GreenStar Network in Pakistan to enhance contraceptive use;

- a private company that educates young mothers about healthy baby-care practices and teaches 5–9-year-old children about basic hygiene habits using these activities in the company's marketing strategy (Procter and Gamble) [4].

## Challenges

PPP are considered to be a successful model of health reform in the health sector of other countries [5–7]. So the challenge ahead is for Pakistan to facilitate the implementation of various components of health sector programmes, including establishing norms, tackling morality and accountability issues, building a legislative framework, defining operational strategies, as well as safeguarding the Consumer Protection Act to safeguard the interest of consumers. The issues we are facing to facilitate implementation of partnerships in providing and encouraging utilization of health care services include a lack of appropriate monitoring and reporting mechanisms, a lack of clarity in policies and low efficiency of the private sector in taking care of the poorest sectors of society.

The research in the field of establishing effectiveness of PPP in providing and raising demand of health care services in the community in Pakistan is limited to rare cases. Furthermore the data to promote health sector reform in Pakistan are unavailable or unpublished. PPP is a multidisciplinary and multi-sectoral approach, which needs significant institutional development, monitoring and evaluations systems.

The government of Pakistan is committed to achieving the Millennium Development Goals for eradicating poverty, providing health and education facilities, ensuring gender equality and combating HIV by 2015 in partnership with the World Health Organization and the World Bank. To meet the challenges of globalization and achieving a prosperous Pakistan in the 21st century we need to promote and practise PPP in providing health care services to improve the health status of our society.

## References