Strengthening the capacity of governments to constructively engage the private sector in providing essential health-care services

The Sixty-third World Health Assembly,

Having considered the report on strengthening the capacity of governments to constructively engage the private sector in providing essential health-care services;

Recognizing the variety of private providers, from faith-based and other nongovernmental non-profit organizations and individual health-care entrepreneurs, both formal and informal, to private for-profit firms and corporations, and the evidence that they play a significant and growing role in health-care delivery across the world;

Noting that governments across the world are faced with the challenge of constructive engagement with the complex range of health-care providers, in ways that vary considerably according to context;

Noting that the cost and quality of the care provided and the effect on health and social outcomes may vary considerably and that there are serious reasons for concern in environments where regulation is poor or absent, yet as a whole the documentation and evidence base in this regard is weak;

Recognizing that governments that have the institutional capacity to govern the broad range of health-care providers can play a constructive role in providing essential health services;

Concerned about evidence that in many countries effective engagement, oversight and regulation of the various private health-care providers may be constrained by imperfect strategic intelligence, limited financial influence and weak institutional capacity;

Aware that building trust and constructive policy dialogue are vital for successful engagement, oversight and regulation;

1 See document A63/25 Add.1 for the financial and administrative implications for the Secretariat of this resolution.

2 Document A63/25.
Noting that the renewal of primary health care provides a policy framework in which to set benchmarks for strengthened government capacity for constructive engagement with, and oversight of, both public and private health-care providers,

1. **URGES** Member States:

   (1) to gather, by means that include improved information systems and stronger policy dialogue processes, the strategic intelligence required for: objectively assessing the positive and negative aspects of health-care delivery by private not-for-profit and private for-profit providers; identifying appropriate strategies for productive engagement; and developing regulatory frameworks that ensure universal access with social protection and the reorientation of service delivery towards people-centred primary care;

   (2) to map and assess, as appropriate, the capacity and the performance of the government departments and other bodies concerned with oversight and regulation of both public and private health-care provision, including: professional councils; institutional purchasers of health services, such as public funders and state health insurance agencies, and accreditation bodies;

   (3) to investigate the potential contribution to the regulation of health-care provision of non-health-sector governmental and nongovernmental entities, including health-consumer protection agencies and patient groups, and, as appropriate, set up mechanisms to maximize the value of those contributions;

   (4) to build and strengthen for the long term the institutional capacity of these regulatory bodies, through adequate and sustained funding, staffing, and support;

   (5) to pursue opportunities for intercountry exchange of experience with different strategies for engagement, oversight and regulation of the full range of health-care providers;

2. **REQUESTS** the Director-General:

   (1) to provide technical assistance to Member States, upon request, in their efforts to strengthen the capacity of health ministries and other regulatory agencies in order to improve engagement with, and oversight and regulation of, the full range of public and private health-care providers;

   (2) to convene technical consultations, support the research agenda set by Member States and facilitate intercountry exchange of experience in order to obtain better shared understanding and documentation of the consequences, positive and negative, of the growing diversity of health-care providers, ensuring that particular attention is given to contexts of poor regulation and to consequences in terms of health, health equity, and health systems development;

   (3) also to convene technical consultations, support the research agenda set by Member States and facilitate intercountry exchange of experience in order to obtain a better shared understanding of the potential of various strategies to build up the institutional capacity for regulation, oversight and harnessing entrepreneurial dynamism and sound cooperation among various types of health-care providers;
(4) to report to the Sixty-fifth World Health Assembly, through the Executive Board, on the progress made with the implementation of this resolution.

Eighth plenary meeting, 21 May 2010
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