



**Maternal Newborn Child Adolescent Health and Ageing Department**

**Health Governance and Systems Department - UHC and Health Systems Law Team**

# **Strengthening quality of care for mothers, newborns & children by engaging the private sector meeting**

**1 -2 February 2022**



Quality, Equity, Dignity  
A Network for Improving Quality of Care  
for Maternal, Newborn and Child Health

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## Background

During the last decade, many low and middle income countries (LMIC) have witnessed a rapidly growing private sector engaged in delivering essential health services. An analysis of 70 countries showed that the private health sector is responsible for providing over one-third of maternal health services (1). Across LMICs, the private health sector accounts for a 44% mean market share among users of antenatal care and a 40% mean market share for delivery care (2). With an increasing proportion of mothers and newborns accessing care in the private sector, countries will not be able to achieve the Sustainable Development Goals (SDG) through actions in public sector service delivery alone; hence, strengthening the engagement of the private sector is becoming more important in the development and SDGs context, including delivery of quality services for maternal, newborn and child care (MNCH) (3). However, to date many challenges undermine this work, including poor governance, weak knowledge and limited experience about the how the public and private sectors can work together to achieve a national health goals.

The issue of private sector engagement to deliver quality MNCH services was raised by the countries of the Network for Improving Quality of Care for Maternal, Newborn and Child Health (the Network)<sup>1</sup> during their last meeting in Ethiopia, in March 2019. The Network countries highlighted that delivery of quality health services needs to be a focus across the whole health system and by all health care providers. They emphasized the importance of partnership between governments, the private sector and civil society to attain health related goals and Universal Health Coverage (UHC). As a result, the Network countries requested the WHO to explore ways of working with private sector and assist countries to address this gap.

In response, the WHO MCA-based Network secretariat, supported by a project focused technical advisory group (2019-2021) composed of representatives of Network countries, researchers, implementers and experts in the area of private sector service delivery and MNCH, initiated an exploratory work on how to enhance the private sector engagement to deliver quality maternal and newborn health services with an aim of accelerating the achievement of SDGs. As part of this exploration, the MCA embarked in a process of reviewing and synthesizing evidence and experience from implementation, while engaging with three Network countries that were willing to explore the role of private sector in MNH service delivery.

Under the leadership of the Ministries of Health, three QoC Network countries; Ghana, Nigeria and Bangladesh; established focused working groups (as part of existing coordination structures on QoC and private sector) and using the guidance and tools developed by MCA, conducted situational analysis on the private sector's involvement in delivering QoC for maternal and newborn health. Despite the challenges created by the COVID-19 Pandemic, the three countries managed to finalise their situation analysis and conduct multi-stakeholder policy dialogues during the period 2020-2021. The policy dialogue process elaborated strategies and recommendations for a more inclusive environment for all actors within the health system.

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<sup>1</sup> The Network for Improving Quality of Care for Maternal, Newborn and Child Health (the Network) is a broad-based partnership of committed governments, implementation partners and funding agencies working to deliver the vision that 'every pregnant woman and newborn receives good quality care' - care that is safe, effective, timely, efficient, equitable, people-centered and integrated throughout pregnancy, childbirth and the postnatal period. This vision is underpinned by the core values of quality, equity and dignity.

Concurrently to the above exploratory country implementation process, by the end of 2020, the WHO issued the strategy report of WHO Advisory Group on the Governance of the Private Sector for Universal Health Coverage on [Engaging the private health service delivery sector through governance in mixed health systems](#) which provides strategic directions for governance behaviors needed to pivot the private sector service delivery in support of UHC. The Strategy calls for WHO to support Member States to strengthen governance of mixed health systems and assure alignment of the private sector for UHC, to promote equity, access, quality and financial protection for the population. The process initiated by MCA with the countries fed into this broader WHO process.

Finally, in April 2021 the WHO Strategic and Technical Advisory Group of Experts (STAGE) for Maternal, Newborn, Child and Adolescent Health and Nutrition; recognizing the recommendations of WHO strategy on private sector engagement; acknowledging that the COVID-19 Pandemic has clearly demonstrated that the private in health has a role to play in delivering essential health services; and, after reviewing the progress made by the MCA-based Network secretariat along with countries in their exploration efforts; recommended MCA to continue to develop the knowledge-base, tools and approaches to support Governments and other stakeholders to engage with the private sector for MNCH and accelerate the achievement of health SDGs (4).

It is in this context that MCA strengthen its work, and updated the tools and approaches for country policy dialogue on private sector engagement to deliver quality MNCH. The update reflected the feedback from the implementation experience of the three countries, the WHO strategic directions on governance of private sector, and the results of literature review on the role of the private sector to deliver quality MNH services.

## Objectives of the meeting

The aim of the meeting was to share WHO guidance and tools and build awareness on how to include and optimize engagement of the private sector to improve the quality of maternal, newborn and child health care. More specifically the meeting aimed to:

- Familiarize participants on the WHO strategy “Engaging the private health service delivery sector through governance in mixed health systems”
- Share country experiences on progress made in engaging private sector in delivering quality MNCH services
- Provide an update on approaches and tools developed for engaging private sector in delivering quality maternal, newborn and child health (MNCH) services
- Discuss next steps, including need for WHO support in engaging private sector in delivering quality MNCH services

# Day 1: Country learnings and current challenges in engaging the private sector in delivery MNCH services

## Objectives day 1

- Familiarize participants with the WHO private sector strategy and governance behaviors
- Share country learnings and experience on progress made in engaging the private sector for MNCH services
- Get an overview of the current status and challenges in engaging private sector in MNCH service delivery at country level

The meeting opened with reflections from country representatives, regions and partners on the relevance of the engagement of the private sector in health for delivering quality MNCH services in LMIC. The speakers highlighted the engagement with all partners in health system, public and private, as crucial to achieving national targets, SDG goals and UHC. Partners shared their experience with supporting the engagement of private sector activities over the last decade and the main challenges faced. Speakers identified quality of services as an issue across the board; public and private health providers need to work collaboratively and in a standardized manner to implement and scale up QoC for MNCH service delivery across all health sector.

## Engaging the private health service delivery sector through governance in health systems: Key concepts and rationale, WHO's strategy and Country connector

*Mr David Clarke, Unit Coordinator, UHC and Health Systems Law System's Governance and Policy Unit, WHO Geneva*

The presentation emphasized the importance of engaging the private sector in health and the massive role it plays in health care service delivery and shared the WHO strategy *Engaging the private health service delivery sector through governance in mixed health systems*. The strategy focusses on the need to strengthen governance behaviors of the government to ensure the private sector is overseen, regulated and adequately involved in health service delivery. The presenter also introduced the [Country Connector for private sector in health](#) which is a platform for sharing experiences across countries, resources, tools and guidance needed for stronger governance. The Country Connector helps coordinate efforts of multiple actors to deliver essential services, and help with efforts to rebuild resilient health systems.

## Delivering MNCH services for SDGs: Why engaging with private sector?

*Dr Blerta Maliqi, Policy Strategy and Programmes, Department of Maternal, Newborn and Child and Adolescent Health and Ageing, WHO Geneva*

The engagement of the private sector in delivering quality MNCH services was highlighted in this session as key for reaching SDG goals and national targets for MNCH. The presenter outlined the approach adopted by the WHO Department of Maternal, Newborn and Child and Adolescent Health and Ageing to explore private sector engagement for MNCH. This approach included a review of the literature to fill research gaps on the provision of MNCH services by private health providers. Starting with three countries: Bangladesh, Ghana and Nigeria, a study was initiated by the department in 2020 to explore mechanisms for the engagement of private sector in the provision of quality maternal and newborn health

services. The presenter described the country implementation process and shared the initial findings from this implementation which paved the way for further countries and informed the new WHO guidance and tools.

### Country learnings and experiences from the policy dialogue and implementation

This session aimed to share progress, experience and lessons learned from countries that already commenced the work to involve the private sector in MNCH QoC. Presenters gave an overview of the process they went through, initial findings from the situational analysis, key challenges and overall implementation experience.

#### **Ghana's learnings and experiences from the policy dialogue and implementation**

*Selina Dussey, Quality Management Unit, Ministry of Health, Ghana; Dr Padi Ayertey, CEO Elimmas Health Accra - Member, Society of Private Medical and Dental Practitioners*

As highlighted by the speakers from Ghana, the main challenges for engaging the private sector in delivery quality MNCH services in Ghana were:

- Communication and capacity building for PSE
- Legislative instruments to support PSE mandates
- Revision of health insurance tariffs for the private sector
- Alignment of structures
- Stakeholder engagement

Following the Multistakeholder policy dialogue, Ghana developed the following recommendations to take forward to the Ministry of Health:

- Revision of the private sector policy
- Undertake a broad stakeholder engagement to amend current policies and acts
- Develop guidelines for the implementation and dissemination of the revised private sector policy
- Development of Legislative Instrument to support the private sector mandates and define their operational framework
- Upward review of insurance claim tariffs for private services
- Build private sector engagement strategy and capacity
- Develop clear roles/governance moving forward

#### **Nigeria's learnings and experiences from the policy dialogue and implementation**

*Dr Kennedy Abiahu, National Quality of Care Focal Person, Federal Ministry of Health, Nigeria*

The main challenges that were identified in the situational analysis that hamper the effective engagement of the private sector in QoC MNCH initiatives in Nigeria are:

- Poor implementation and dissemination of several policies, guidelines and standards on private sector engagement
- Weak regulatory mechanisms result in high fragmentation
- Poor monitoring and accreditation functions
- Limited capacity of Government to effectively engage private sector to deliver quality services

- Private sector is not well defined or aligned in a synergistic manner and not fully engaged in the development of health policies & strategies
- Enforcement and implementation of regulatory mechanisms to effectively monitor private sector.
- High overhead cost of delivering quality services by private sector provider

The recommendations developed for the Federal Ministry of Health, Nigeria include:

- Strengthen Government capacity to regulate and oversee private sector
- Establish mechanism for continuous public-private dialogue and engagement
- Involve Private sector and stakeholders as members of the coordinating platforms (TWG of RMNCAEH+N)
- Involve private sector associations members in monitoring and supervision of their members
- Strengthening of regulatory laws to support regulatory agencies fulfill their mandate
- Development of financial instruments (loans, guarantees) to private healthcare providers to enable them scale-up private practice and deliver quality services

### Status and challenges of engaging private sector in MNCH service delivery

The objective of this session was to get an overview of the current status and challenges in engaging private sector in MNCH service delivery. This session was organized in working groups; country teams were grouped as following:

- **Group 1:** Bangladesh, Nigeria, India
- **Group 2:** Côte d’Ivoire, Ethiopia, Sierra Leone
- **Group 3:** Malawi, United Republic of Tanzania, Uganda
- **Group 4:** Ghana, Pakistan

### Key findings from the working groups discussions

Policies and strategies supporting engagement of private sector in health service delivery for MNCH	
<b>Most countries</b>	Private sector service delivery included within national (and in some cases, sub national) health policies/strategies
<b>Some countries</b>	PPP policies (health and other sectors), to attract private sector investment UHC schemes include the private sector national/state insurance, MNCH benefit programs (address equity, reduce financial access barriers)  <i>but it is unclear how active the private sector is within these schemes</i>

## Initiatives and steps already been taken in engaging private sector for MNCH services.

<b>Most countries</b>	Development of national/state guidelines, SOPs to operationalize health policies and MNCH packages
	COVID 19 may have revitalized public private engagement and private sector organization
<b>Some countries</b>	Service agreements with a subset of private providers such as FBOs (these may include in kind and financial assistance)
	Development of essential benefits packages (inclusive of MNCH) private sector associations engaged/consulted
	Investment in national health information systems, including data capture and reporting from the private sector (e.g., using DHIS2, master facilities lists, provision of forms/registers)
	Greater private sector organization and more structured public private engagement platforms (TWGs, summits, etc.) some specific to MNCH, others broader
	An array of partner supported initiatives related to MNCH and QoC that include the private sector, mainly at sub national and facility level all countries
	Engagement of the private sector in public health programs, including access to training and commodities (EPI, FP, malaria mentioned)
	Recognition of “deficits” in public health sector as policy motivation to engage the private sector

## Main challenges in engaging private sector in MNCH service delivery

<b>Most countries</b>	The breadth and diversity of the private sector (the public sector is structured; the private sector is not, with the exception of FBO networks)
	Cost and quality in the private sector not regulated (unclear if high OOP is justifiable or opportunistic)
	Private sector data and reporting deficits including for vital events
	Dual practice (doctors, nurses, pharmacists, etc.) which creates adverse practices across public and private sectors (enticement of patients, absenteeism, etc.)
<b>Some countries</b>	MoH oversight, coordination and regulatory roles and functions are unclear and weak
	Regulatory frameworks are not well developed, aligned and/or implemented most countries, this issue is broader than the private sector in many contexts
	Policies, guidelines, SOPs relatively new or not well disseminated leading to patchwork implementation a particular challenge in devolved settings, this issue is broader than the private sector in many contexts
	Patchwork MNCH provision in the private sector not PHC focused, not comprehensive, erratic patient pathways

## Day 2: WHO guidance for engaging the private sector in health and discussions on next steps

### Objectives day 2

- Provide an update on WHO guidance and tools developed for engaging the private sector in delivering quality maternal, newborn and child health (MNCH) services
- Discuss next steps and plan implementation process
- Identify need for technical assistance by WHO and partners

### Orientation on WHO guidance and approaches for engaging private sector in health to deliver quality MNCH services and care

*Dr Mikael Ostergren, WHO consultant*

In this session, participants got insights to a proposed approach and tools for engaging the private sector in delivering quality MNCH services. Based on the implementation experience from Ghana and Nigeria, WHO guidance and tools that were developed to assist Ministries of Health to effectively engage the private sector were introduced in this session. These tools consist of a workbook, worksheets, case studies, on line training courses – to be adapted to each country context and needs.

### Planning for implementation

The objectives of this session are to make suggestions for next steps in engaging private sector in MNCH service delivery and identify need for technical assistance at country level. The below is only a summary and some suggestions that were made in the break-out session - each country made their specific recommendations for next steps, which are annexed/link to documents.

### Next steps in engaging private sector in delivering quality MNCH services

The following actions were identified across the working groups as required to initiate and/or open up the country dialogue on engaging with private sector in health to deliver quality services:

#### 1. Advocacy, alignment and engagement:

- Explore existing opportunities for engagement of key stakeholders in the development and implementation process
- Conduct stakeholder mapping and analysis of interest to ensure their engagement and alignment
- Engage in high level advocacy with key stakeholders
- Engage partners for buy-in and initiate discussions
- Conduct country orientation w/shops to stimulate discussion and interest on engaging PS in delivering quality MNCH services
- Establish a Technical Working Group with representation from private sector and other key stakeholders that will champion and steer the work under the leadership of MoH.

## **2. Operationalizing the implementation:**

- Conduct or update situational analysis
  - Map existing private sector in health initiatives and experiences.
  - Identify what works or doesn't in the current situation.
  - Identify priority areas that require action.
- Conduct policy dialogue and facilitate consensus building
  - Disseminate and discuss findings from the situational analysis
  - Develop recommendations, actions and a clear implementation plan
- Strengthen Ministry of Health and key stakeholders capacity and technical capacity to engage and implement recommendations

## **3. Implement actions and recommendations. Examples identifies by the working groups:**

- Support the private sector in the adoption and adaptation of national guidelines and policies for service delivery
- Engage the private sector in the revision of guidelines, current strategies and policies briefs etc.
- Involve the private sector in implementation workplans at district level
- Standardize health service delivery process across the public and private healthcare providers
- Enhance reporting by private sector facilities
- Develop country-specific tools, guidance, policy briefs on engaging the private sector in quality MNCH services
- Revisit regulatory framework and accreditation standards, and other mechanisms that allow for standardized service delivery.

**The working groups identified potential partners** to be involved in the process (public and private actors, implementation partners, professional entities, funding agencies etc)

- Private sector associations and bodies
- Professional associations
- Development and implementation partners (USAID, FCDO, UN, BMGF, Jhpiego, World Bank etc.)
- Corporate organizations (ex: banks)
- Civil society organizations (CSOs)
- Health maintenance organizations (HMOs)
- Faith based organizations (FBOs)
- Investment partners
- Quality control organizations
- Research institutions/Academia
- Private insurers
- Private training institutions
- Media (awareness creation)
- Non-governmental organizations (NGOs)

The working groups also identified **areas for technical assistance** needed from WHO and other partners

- Financial and technical assistance to the Ministry of Health to support the development of strategic documents, policy briefs, country-specific guidelines for implementation across sectors
- Revise current policies and strategies to reflect the role and delivery by private providers– and update as needed
- Organize orientation workshops and build capacity for the use of the tools and guidance
- Advocacy and resource mobilization for private sector engagement
- Mapping of stakeholders and synthesizing available evidence on private sector engagement at the country level
- Support of partners in designing projects to implement this initiative
- Support data collection, accountability, learning and harmonization at national level

## Next steps and way forward

The meeting agreed that the engagement of the private sector in delivering quality MNCH services was crucial and the effort to engage *now* is timely given growing action needed to improve quality care for MNCH to reach SDG goals by 2030. The current COVID-19 pandemic has also provided an opportunity to revitalize public private engagement and private sector organizations. Building on these opportunities, country teams and leadership are invited to discuss jointly on how to concretely implement and advance this agenda. Under the leadership of Ministry of Health, the health sector, public and private, should work collaboratively work to reach national targets. The private sector in health, who in many LMICs is providing an increasing share of essential health services, should engage and be part of the accountability for delivering quality of services.

Maternal, newborn and child health services provide a good starting point for countries that would like to concretize the engagement and collaboration.

The meeting provided a venue for sharing country experiences, progress and challenges faced and initiated discussions across countries, regions and partners on how to take this work forward. The WHO guidance and tools, as well as other tools and approaches developed by partners in the field, will be useful in shaping and charting the way forward. The meeting clearly said that the process needs to be country-led, and the recommended tools should be adapted to respond to each country context.

Moving forward, the Ministries of Health should spearhead the process and, the private sector engagement for MNCH should be incorporated within the process of development and implementation of the national health plans and strategies.

Continuous advocacy, leveraging of existing partnerships, dissemination and adaptation of the guidelines and tools, initiation of discussions at high level is highly encouraged, so that countries can build on national capacity, available knowledge and ongoing QoC efforts to make sure every mother, newborn and children receives good quality care, with dignity and respect – with minimal out of pocket costs.

## Annex 1: Meeting Agenda Day 1: 1 February 2022

Time	Session	Presenter/Facilitator
	<b>Opening</b>	
12.00 – 12.10	Welcome and introductions	Anshu Banerjee Director WHO/MCA
12.10 -12.25	Why do we have this meeting?	Countries, Regions and Partners
12.25 - 12.30	Objectives of the meeting and overview of agenda	Anshu Banerjee Director WHO/MCA
	<b>Session 1: Why engaging with Private Sector in health to deliver health care services?</b>	
12.30 – 12.50	Engaging the private health service delivery sector through governance in health systems: Key concepts and rationale, WHO’s strategy and Country connector	David Clarke Team Leader WHO/HGS
12.50 - 13.05	Delivering MNCH services for SDGs: Why engaging with private sector	Blerta Maliqi
13.05 - 13.15	Q&A	David Clarke and Blerta Maliqi
	<b>Session 2: Learning from experience: What have countries learned during their policy dialogue and implementation?</b>	
13.15 – 13.30	Ghana’s experiences in developing and implementing policy dialogue to stimulate engagement of the private sector in health in delivering quality MNCH services	Dr Ernest Konadu Asiedu Quality Management Unit, Ministry of Health, Ghana  Dr Padi Ayertey CEO, Elimmas Health-Accra; Member, Society of Private Medical and Dental Practitioners

13.30-13.45	Nigeria's experiences in developing and implementing policy dialogue to stimulate engagement of the private sector in health in delivering quality MNCH services	Dr Kennedy Abiahu Federal Ministry of Health Nigeria
13.45 -14.00	Q&A	Blerta Maliqi
14.00 – 14.15	Break	
	<b>Session 3: Status and challenges of engaging private sector in MNCH service delivery</b>	
14.15 -14.20	Orientation on the breakout session I	Mikael Ostergren WHO consultant
14.20 – 15.30	<p><b>Break-out session I:</b></p> <ul style="list-style-type: none"> <li>• Are there policies/strategies supporting engagement of private sector in health service delivery, incl for MNCH, in your country?</li> <li>• Which initiatives/steps, if any, have already been taken in engaging private sector for MNCH services?</li> <li>• What do you see as the main challenges in engaging private sector in MNCH service delivery?</li> </ul> <p>4 break-out groups:</p> <ol style="list-style-type: none"> <li>1. Bangladesh, Nigeria, India</li> <li>2. Côte d'Ivoire, Ethiopia, Sierra Leone</li> <li>3. Malawi, United Republic of Tanzania, Uganda</li> <li>4. Ghana, Pakistan</li> </ol>	<p>Facilitators:</p> <p>Group 1: Gabrielle Appelford &amp; Assumpta Muriithi</p> <p>Group 2: Anna Coccozza &amp; Tala Rammal</p> <p>Group 3: Martin Dohlsten &amp; Olive Cocoman</p> <p>Group 4: Mikael Ostergren &amp; Blerta Maliqi</p>

## Annex 2: Meeting Agenda Day 2: 2 February 2022

Time	Session	Presenter/Facilitator
	<b>Feedback</b>	
12.00 – 12.10	Recap of day 1	Blerita Maliqi
12.10 – 12.30	Short feedback from break-out session	Gabrielle Appleford
	<b>Session 4: Orientation on WHO guidance and approaches for engaging private sector in health to deliver quality MNCH services and care</b>	
12.30 – 13.00	Update on approaches and tools developed for engaging private sector in delivering quality maternal, newborn and child health (MNCH) services	Mikael Ostergren Gabrielle Appleford  WHO consultants
13:00 - 13:15	Discussion and Q&As	Blerita Maliqi
13.15 – 13.30	Break	
	<b>Session 5: Planning for implementation Next steps and technical support</b>	
13:30 - 13:35	Orientation on the breakout session II	Mikael Ostergren and Gabrielle Appleford
13.35 – 14.30	Break-out session II: <ul style="list-style-type: none"> <li>• What would be next steps in engaging private sector in delivering quality MNCH services?</li> <li>• Who are potential partners to be involved in the process (public and private actors, implementation partners, professional entities, funding agencies etc)?</li> <li>• What technical assistance is needed from WHO and other partners?</li> </ul>	Facilitators:  Mikael Ostergren  Gabrielle Appelford  Martin Dohlsten  Anna Cocozza
14.30 – 15.00	Short feedback from break-out session	Rapporteur from each group 5 min (building on the previous feedback)
	<b>Reflections and next steps</b>	
15.00 -15.20	Reflections from countries and partners	
15.20 – 15.30	Conclusions and next steps	Anshu Banerjee  David Clarke

## Annex 3: Resources and background materials

Name of Resource	Description of resource	Link
<b>Engaging the private health service delivery sector through governance in mixed health systems: strategy report</b>	This WHO strategy serves as a guide for WHO and Member States at various levels of engagement to promote a new way of doing business with the private sector. The proposed strategy builds upon WHO’s mandate and normative work on health systems strengthening, governance and financing. This strategy outlines six governance behaviors critical to private sector health service delivery governance.	English : <a href="https://www.who.int/publications/i/item/strategy-report-engaging-the-private-health-service-delivery-sector-through-governance-in-mixed-health-systems">https://www.who.int/publications/i/item/strategy-report-engaging-the-private-health-service-delivery-sector-through-governance-in-mixed-health-systems</a>  French: <a href="https://www.who.int/fr/publications/i/item/strategy-report-engaging-the-private-health-service-delivery-sector-through-governance-in-mixed-health-systems">https://www.who.int/fr/publications/i/item/strategy-report-engaging-the-private-health-service-delivery-sector-through-governance-in-mixed-health-systems</a>
<b>WHO Strengthening Private Sector Engagement for UHC</b>	Provides background information on WHO’s work on Strengthening Private Sector Engagement for UHC; with links to publications	<a href="https://www.who.int/activities/strengthening-private-sector-engagement-for-uhc">https://www.who.int/activities/strengthening-private-sector-engagement-for-uhc</a>
<b>Quality of Care Network's work on engaging the private sector for MNCH</b>	Provides background information and overview of Quality of Care Network project objectives, country learnings, policy dialogue process, resources and publications, partnerships	<a href="https://www.qualityofcarenetwork.org/private-sector/engaging-private-sector-quality-care-maternal-newborn-and-child-health">https://www.qualityofcarenetwork.org/private-sector/engaging-private-sector-quality-care-maternal-newborn-and-child-health</a>
<b>Quality of Care Network: Country learnings on engaging the private sector for MNH from Bangladesh, Ghana, and Nigeria</b>	Provides links to country profiles and learning on engaging the private sector for MNCH	<a href="https://www.qualityofcarenetwork.org/private-sector/engaging-private-sector-quality-care-maternal-newborn-and-child-health#country_learnings">https://www.qualityofcarenetwork.org/private-sector/engaging-private-sector-quality-care-maternal-newborn-and-child-health#country_learnings</a>
<b>Quality of Care Network Guide for policy dialogue</b>	The purpose of this guide is to assist countries in planning, organizing and facilitating a multi-stakeholder policy dialogue on private sector delivery of quality maternal and newborn health services. This guide provides a recommended approach for conducting multi-stakeholder policy dialogues.	<a href="https://www.qualityofcarenetwork.org/knowledge-library/guide-policy-dialogue-study-engaging-private-sector-delivering-quality-maternal">https://www.qualityofcarenetwork.org/knowledge-library/guide-policy-dialogue-study-engaging-private-sector-delivering-quality-maternal</a>

Name of Resource	Description of resource	Link
<b>Experiences of private sector quality care amongst mothers, newborns, and children in low- and middle-income countries: a systematic review</b>	This systematic review examined quantitative, qualitative, and mixed-methods studies on the provision of maternal, newborn, and child health (MNCH) care by private providers in low- and middle-income countries (LMICs). This manuscript focuses on experience of care, including respectful care, and satisfaction with care.	<a href="https://bmchealthservres.biomedcentral.com/articles/10.1186/s12913-021-06905-3">https://bmchealthservres.biomedcentral.com/articles/10.1186/s12913-021-06905-3</a>
<b>Private sector delivery of quality care for maternal, newborn and child health in low-income and middle-income countries: a mixed-methods systematic review protocol</b>	This protocol details the intended methodological and analytical approaches, based on the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) reporting guideline for protocols to examine private sector implementation of quality care for maternal, newborn and child health (MNCH) and the impact of this care.	<a href="https://bmjopen.bmj.com/content/10/2/e033141">https://bmjopen.bmj.com/content/10/2/e033141</a>
<b>Private sector delivery of maternal and newborn health care in low-income and middle-income countries: a scoping review protocol</b>	This scoping review protocol aims to map and conceptualize interventions that were explicitly designed and implemented by formal private health sector providers to deliver MNH care in mixed health systems.	<a href="https://bmjopen.bmj.com/content/11/12/e055600.full">https://bmjopen.bmj.com/content/11/12/e055600.full</a>