Private Sector Engagement Subgroup

Terms of Reference

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www.childhealthtaskforce.org

Through providing technical leadership and facilitating the development of standards, activities and products, the Private Sector Engagement (PSE) subgroup will advance private sector engagement for improved child health outcomes. The sub-group will define specific objectives, tasks and deliverables in relation to the broader Child Health Task Force (CHTF) TOR and will contribute to activities under the CHTF’s themes.

Goal and Vision

The PSE subgroup aims to increase recognition of the crucial role of the formal and informal private sector in the provision of information, products, and services in child health in low and middle-income countries. This will be achieved through advocacy and learning, with a focus on materially and tangibly contributing to the body of evidence to support existing interventions. By 2020, the PSE subgroup hopes to achieve global recognition of promising private sector approaches to improving child health.

Objectives

The PS subgroup objectives are aligned with the five CHTF themes: Advocacy, Coordination, Country Support, Learning and Knowledge Management.

Advocacy

Increase number of countries and partners that recognize and integrate the private sector as a delivery channel for equitable and quality child health services. Integration will be measured by:

- countries that are trying to ensure services provided in the private sector are captured through HMIS/DHIS2 and/or;
- commissioning standardized service delivery to private sector and/or;
- government regulation and quality assurance of private sector service delivery and/or;
- government stewardship of the private sector through the organization of a technical working group aimed at integrating the private sector in the health systems

Coordination

Coordinate subgroup members’ engagement and promote collaboration including cross-partner Technical Assistance to strengthen PS programs.
**Country support**

Support subgroup members and countries to strengthen PSE for improved child health outcomes.

**Learning**

Set a global learning agenda in order to determine best practices for implementing CH case-management through the private sector.

**Knowledge Management**

Support subgroup members to document and disseminate best practices on PSE to child health stakeholders at global level.

**Leadership**

The subgroup has two co-chairs, Catherine Clarence (SHOPS Plus/Abt Associates), and Zaeem Haq (Malaria Consortium).

SHOPS Plus is USAID’s flagship initiative in private sector health. The project seeks to harness the full potential of the private sector and catalyze public-private engagement to improve health outcomes in family planning, HIV, child health, and other health areas. SHOPS Plus supports the achievement of US government priorities, including ending preventable child and maternal deaths, an AIDS-free generation, and FP2020. SHOPS Plus improves the equity and quality of the total health system, accelerating progress toward universal health coverage.

Malaria Consortium is one of the world’s leading non-profit organizations specializing in the prevention, control and treatment of malaria and other communicable diseases among vulnerable populations. Malaria Consortium’s mission is to improve lives in Africa and Asia through sustainable, evidence-based programs that combat targeted diseases and promote child and maternal health. MC works with PS providers to strengthen service delivery and quality of care, with PS partners on health product innovation and market shaping, and with stakeholders along the supply chain to strengthen access to medicines and making markets work for the poor.

The roles of the co-chairs are as follows:

- Support the PSE subgroup so that it remains relevant to the overall global child health agenda and aligns with the “evolving” child health landscape and narrative under the Sustainable Development Goals
- Monitor and evaluate progress, regularly reviewing the PSE subgroup activities and progress towards achieving its objectives
- Provide the CHTF Steering Committee with up-to-date information on progress, challenges and possible solutions
- Set the agenda of the CH PSE subgroup in consultation with members
- Review resource mobilization for CH PSE subgroup activities

**Membership**

Membership is open to all actors with a vested interest in the private sector’s role in child health globally. This includes international development agencies, donors, academics, government representatives, private sector representatives, and non-governmental organizations. Each agency will be responsible for designating representatives to this CHTF subgroup and for covering their participation costs.
Meeting Schedule

The private sector subgroup will meet on a quarterly or monthly basis, depending on the need to discuss ongoing activities, via video/teleconference. Meeting agendas will be developed with input from the subgroup members, and the subgroup co-chairs will maintain communications with and report regularly to the CHTF secretariat.

Definitions

Private sector: includes private clinics and hospitals and those run by non-governmental and faith-based organizations, as well as non-clinical sources such as pharmacies, shops, and markets (Source: SHOPS Plus CH brief).

Broader private sector: includes private practitioners and health service providers (formal/informal) at the last mile, drug shops, vendors and retailers, private clinics, health centers and hospitals, and businesses with a stake in healthcare (such as pharmaceutical/vaccine manufacturers, suppliers and technology firms) or companies/corporations with an interest in protecting the health of their workforce and/or local communities.

Formal private sector: private nongovernmental and faith-based organizations clinics, hospitals, and doctors.

Informal private sector: drug shops, traditional healers, friends, and family members.

Service providers: Dealing in ‘western medicines’ (as opposed to herbs). Formal/informal based on registration status with national authorities. Excludes traditional/allopathic or alternative medicines.