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HS4TB FACT SHEET

Collaborative on Contracting Organizations for Health-Related Services

BACKGROUND

Government-led contracting for health services is where the government contracts with nongovernmental organizations (NGOs)/civil society organizations (CSOs) and the for-profit private sector using the country's procurement system and domestic funds. This mechanism allows the use of complementary skill sets from the public and private sectors. It can support the optimization of available resources, especially in mixed health systems in low- and middle-income countries where health systems can be under-resourced or fragmented. However, governments in some low- and low-middle-income countries are focused almost exclusively on the direct implementation of health activities by public sector staffing. For such countries, contracting is a new way of conceptualizing the role of government in health sector stewardship and understanding these possibilities is challenging without exposure to other health systems that are already implementing such approaches.

HS4TB SUPPORT TO COUNTRIES IN ESTABLISHING CONTRACTING

In partnership with the Joint Learning Network (JLN), USAID's Health Systems for Tuberculosis (HS4TB) project facilitates a [Collaborative on Contracting Organizations for Health-](#)

[Related Services](#) for practical peer learning on government-led contracting. With contracting an essential tool in mixed (public plus private) health systems, the goal of this initiative is to equip participating countries with the knowledge and skills to take steps towards establishing, improving, or expanding contracting for health-related services, including TB. The focus is on contracting with NGOs/CSOs and the for-profit private sector for specific, selected services, using a country's own procurement system and domestic funds, to increase health system efficiency and effectiveness. Contracting of TB services is used as an example but with lessons that are broadly applicable across the health sector.

The collaborative consists of 40 public sector leaders and managers from the following countries: Bangladesh, Botswana, Ethiopia, Ghana, Kenya, Liberia, India (Tamil Nadu State), Malaysia, Nigeria, Philippines, Uganda, and South Africa. This group of frontline practitioners bring their insights to improve their national strategies through the workshops described above.

The year-long program consists of seven workshops: one virtual launch meeting; five virtual workshops to progress the work; and a mid-point in-person workshop. We explore specific topics or topic groupings on: 1) political will, governance, and making the case for contracting; and 2) legal and regulatory environment for contracting. Development partner support is a sub-theme of both topics. We discuss practical actions needed to create the enabling environment for contracting TB- and other health-related services. There is no single pathway that countries ought to follow to establish health services contracting. Refer to the collaborative's webpage for more information: <https://jointlearningnetwork.org/what-we-do/provider-payment/a-collaborative-on-contracting-organizations-for-health-related-services/>.

HS4TB PROJECT

USAID's HS4TB project supports high TB burden countries with financing and governance strategies, tools, and approaches to achieve TB elimination goals. Led by Management Sciences for Health (MSH), HS4TB ensures both that TB care and prevention approaches have a strong underpinning in health system concepts, and that health system approaches are directly tied to improved TB outcomes. The result is a more directed and measurable approach to TB and health systems work. HS4TB supports policy reforms for increased and improved domestic contracting of TB services, greater domestic financing, and more efficient use of resources, while building in-country financial and managerial skills and leadership.

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