

A Rapid Situational Analysis of the Private Health Sector in West Bengal, India/IDEAS 2015

Background

IDEAS, in collaboration with PHFI in India, is working towards a Data Informed Platform for Health in the state of West Bengal to strengthen the public sector's capacity for data based decision making. The platform will strengthen the synthesis and use of critical MNCH data from the public and private health sectors as well as from other non-health government departments. Formative research is currently underway by the IDEAS/PHFI team to explore the public sector data components. Another strand of the formative research (presented here) will seek insights into the private sector to understand its role and relevance in maternal, newborn and child health (MNCH) services and data sharing. The overarching research question for this study is: What is the nature, composition and role of the private health sector in MNCH services and related data sharing, in West Bengal

Objectives:

To conduct a rapid situational analysis of the private health sector in West Bengal with respect to:

1. Numbers and types of different types of facilities and their role in MNCH
2. Overview of partnerships of private for profit and not for profit with the public sector in MNCH
3. Estimates of institutional deliveries conducted in the different types of private facilities
4. Data sharing by different types of private facilities and motivation for data sharing

Methods

Objective	Information required	Type of data	Data source	Method of data collection	Timeline	Resources (human)
Obj 1: Numbers and types of different types of facilities and their role in MNCH	The number and types of private for-profit registered facilities that are delivering maternal and newborn health services in the 2 districts	Numbers (for facilities), and types/descriptions of services offered	Secondary data from the CMO's records. Some primary data from a few private sector facilities and key stakeholders	Review of list of registered facilities Key informant interviews	Reviews in July and August Interviews completed by end of August	Meenakshi with support from Impact partners, and some local coordination support from Dist Coordinators. Neil will visit for a week in August.
Obj 1 as above	Not for profit sector – composition and services offered	Names and Descriptions (some secondary and some primary data)	CMO's office staff and other district level public sector staff who deal with NGOs Some NGOs who are providing MNH services	Key informant interviews with identified CMO office staff and representatives of NGOs engaged in PPPs.	Interviews completed by end of August.	As above
Obj 2: Overview of partnerships of private for profit and not for profit with the public sector in MNCH	Existing PPPs in MNH – features of schemes and how are they working (in general)	Primary qualitative data; supplemented by a document review	Key stakeholders in the private sector, and a few public sector stakeholders; any relevant documents available in the CMO's office	Key Informant Interviews; document review	Document review in July; interviews during August	Meenakshi to obtain documents with some local logistical help from DCs; review

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						Interviews with help from Impact
Obj 3: Estimates of institutional deliveries conducted in the different types of private facilities	Estimates of the deliveries (and newborn/child health services) provided in the private sector – try to get disaggregated information – for profit, not for profit, informal	Percentages available from survey data like the AHS, supplemented by any other estimates obtained through stakeholders; also perceptions of stakeholders about the relative roles of different private sector facilities	AHS? Stakeholders in the public and private sectors	Secondary data review and KIIs	Desk review in July, interviews during August	Meenakshi to do desk review in July and also make a brief visit in July to Kolkata to gather essential information.
Obj 4: Data sharing by different types of private facilities and motivation for data sharing	Data sharing by the private sector, and motivation (or lack of) for this	Estimates of data sharing by different types of facilities (those in PPPs and those without); Perspectives of private facilities through interviews	Records in the CMO's office Private facility key informants	Review of records for the last one to 3 months KIIs	July and August	Meenakshi and Impact with some local logistical help from the DCs. Interviews by Meenakshi, Neil and Impact

Approximate number of Key Informant Interviews: 25-30

Stakeholder constituencies (for KII selection):

Private sector:

Non –governmental organisations, private facility key informants, professional association office bearers, public health academics and scholars in West Bengal

Public sector:

Officials dealing with records in the CMOs' office, officials dealing with NGOs and private facilities

Selection of key informants will be done very carefully in consultation with PHFI team in order to avoid any overlaps and misunderstandings. PHFI team is the key liaison with the state government for the DIPH process and permissions.

Analysis: qualitative, supported by a record review

Overall Timeline:

July – Desk reviews and preparatory work

August – Primary data collection

September – October – Analysis

End of November – Presentation of findings and a draft research brief ready

First quarter of 2016 – Development of draft publication based on the study