

Case for Engaging Family Physicians and the For-Profit Private Sector in Family Planning service delivery

Introduction

A Total Market Approach is widely recognized as a means of strengthening family planning markets and expanding access and provision of services. It allows multiple sectors public, non-profit, and for-profit private to flourish, resulting in diversification, better allocation of resources, and long-term sustainability. There is a growing recognition that, while the public sector bears the ultimate responsibility for health, governments must better harness the potential of the private sector to widen access to health services.¹ Given the large unmet demand, public sector delivery failures, and limited role of the private sector in the current landscape of FP service provision, there is a case for enabling the commercial private sector to play a more significant role in Pakistan.

Table 1: Strategies to improve the quality and coverage of private sector health services

Market-based	Contracting	Purchasing services from the private sector
	Financing	Financial incentives such as grants, subsidies and tax relief for private services and products
	Franchising and Social Marketing	Using commercial channels and communications approaches to market networks of service providers (franchises) or products (social marketing)
	Collaborating	Coordinating and creating alliances among private and public sector actors
Administrative	Regulating	Setting and enforcing standards for the private sector
	Training	Educating and supporting private sector providers
Public Empowerment	Informing	Educating consumers about healthy behaviors and the role of the private sector

Pakistan's Experience with Social Marketing and the Private Sector

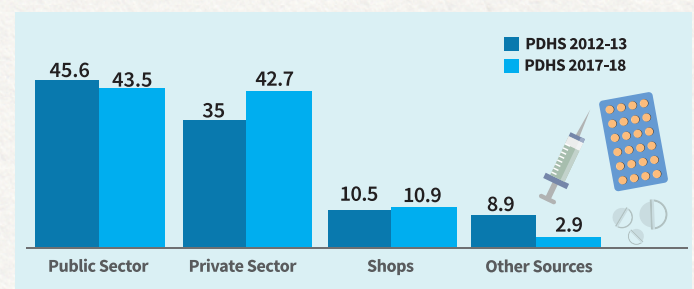
The impact of social marketing programs would be far greater in Pakistan if their product subsidies were targeted at the less wealthy consumers who need them most, leaving the urban, better-off customers to be served by the commercial private sector. In addition, if Intra Uterine Devices (IUDs) and injections could be sold to family physicians outside the franchised clinics supported by effective training programs, the payoff would be much higher in terms of increased contraceptive prevalence rate (CPR). Availability of provider dependent methods through private physicians would also attract more investment from pharmaceutical companies.

The Argument for Enabling the For-Profit Private Sector to Enhance Access to Family Planning in Pakistan in the Current Scenario

According to the Pakistan Demographic and Health Survey (PDHS) 2017-18, the total demand for family planning, i.e., the percentage of married women of reproductive age who express a desire to either prevent or delay childbirth, is 51.5%. However, only 34.2% are using any method of contraception, implying unmet need of over 17%. Over the years, private health facilities in Pakistan have increased their share of the healthcare market despite being more expensive. Unfortunately, many of these facilities do not offer family planning services at present. Figure 1 shows that in just five years, the private sector's share of modern contraceptive users has increased by almost 8 percentage points,

while the share of the public sector has decreased. If this trend continues, the private sector could eventually attain a bigger share of the family planning market than the public sector.

Figure 1: Percent distribution of modern contraceptive method users (15-49 years) in Pakistan by most recent source of method, 2012-13 and 2017-18



Source: Pakistan Demographic and Health Survey (PDHS) 2012-13 & 2017-2018

In this paper, we focus on family physicians—a large segment of health service providers—as one of the best bets to expand FP use in the country, mainly because they offer the following advantages:

- Available in very large in numbers across Pakistan
- Well qualified as MBBS doctors and trusted by patients
- Best suited to expand use of hormonal methods, the prevalence rates for which have been stagnating
- Male providers can motivate husbands and offer non-invasive hormonal methods
- Already have linkages with the pharmaceutical sector.

The Case for Provision of Family Planning Services through Family Physicians Supplied by Pharmaceutical Companies

While social franchising and social marketing have a strong footprint in Pakistan, and pharmacies have served as a channel to buy condoms and pills, there has not yet been a concerted effort to enable other private sector players such as family physicians to provide family planning services in a sustainable, for-profit model. This is a significant opportunity thus far, missed to leverage the existing health infrastructure to scale family planning services and at the same time improve maternal and child health (MCH) outcomes in Pakistan.

Perspective of Family Physicians

Given the penetration of family physicians across the country where they are prevalent in rural and urban areas and often the first point of delivery for healthcare services there is a case to be made for leveraging them in the provision of family planning. The potential efficacy of this channel is increased by the fact that 70% of family physicians in Pakistan are male. As such they can provide counseling and detailed information about FP to male household members, fulfilling a longstanding need in the country to directly engage men in family planning. Effective enabling of family physicians will require their training, a regular supply of long-acting contraceptives, promotional support and preferably also subsidies for customers who cannot pay the full price.

Perspective of Pharmaceutical Companies

To unlock family physicians as a channel for provision of FP services, they will have to be effectively linked with pharmaceutical companies. Without a reliable, predictable, and affordable supply of contraceptives, regular promotional support, and updated information, family physicians will fail to deliver the required outcomes. Representatives of pharmaceutical companies believe pharmaceutical companies will be willing to purchase contraceptives from the government if this option is available and sell them in their own brand names. They would also welcome marketing and regulatory support.

The Business Case

It is important to consider the financial benefits of providing FP services through family physicians along with the potential impact on contraceptive prevalence and sustainability in Pakistan.

The business case assumes that health departments at the federal or provincial level, including Health Care Commissions, will make provider-dependent methods, i.e., IUDs, implants, and injectables, available to family physicians through pharmaceutical partners, and will also finance other key aspects of support, such as training of physicians and medical representatives, market research, and demand generation activities. Since the government will sell the contraceptives, the commodity cost will be recoverable. Ultimate success will be achieved when the commercial sector is able to secure its own commodities, but this will require long-term planning and initial investment.

We also propose family physicians be provided refresher training in providing clinical and hormonal methods. The Health Care Commission can ensure that the quality standards are maintained. Not offering pills, condoms or emergency contraceptive pills will lead to an increase in sales from private sector pharmacies and shops. It will also contribute to a more favourable image of family physicians as providers of more specialized FP services.

Recommendations

We propose that a Total Market Approach Working Group (TMAWG) be set up to initiate the process of inducting private sector family physicians, supported by selected pharmaceutical concerns, in family planning service provision. The Group could be led by the MNHSRC at the federal level or the Department of Health at the provincial level, and include representatives of the Family Physicians Association, pharmaceutical partners as necessary.

The TMAWG would be responsible for steering the initiative and its core functions could include, among others, selection and training of participating private physicians and pharmaceutical concerns; facilitation of health authorities in contraceptive procurement; facilitation of appropriate contraceptive pricing policies; coordination of partners' marketing plans; commissioning of demand creation and necessary research activities; and progress monitoring.

References

1. World Health Organization., 2000. The world health report 2000 — Health systems: improving performance. Geneva: World Health Organization.