



CHAPTER I

INTRODUCTION

STATEMENT OF THE PROBLEMS

It is widely recognized that development is an integral process embodying both economic and social objectives. The importance of development process should be placed on ensuring a more equitable distribution of income and wealth for promoting both social justice and efficiency of production. In addition, efforts should be made to raise substantially the level of employment, to achieve a greater degree of income security, to expand and improve facilities for quality of life. So, the ultimate aim of development is the constant improvement of well being of the entire population on the basis of its full participation in the process of development and a fair distribution of the benefit. From this point, the government should be held morally responsible. Those moral responsibilities are usually attributed to individuals who commit public policies. However, it is generally recognized that some policies or actions considered moral in one situation or one point in time, may become totally immoral elsewhere.

Nowadays, we are in the business world and there are no exception for health services. Health service organizations that hope to survive and prosper will need to develop new skills such as changing the organization performance standards appropriate for the change of environment. They will also need to become involved in all aspects of the provision of health services with responsibility for management monitoring and maintaining quality while controlling budget, services, and promise. The private sector is more familiar with these elements and skills. Conceptually, they are in a better position to prosper within the new management system. However, familiarity with the management skill can also provide the unethical private sector with the opportunities to make inappropriate profit. On the other hand, the bureaucratic system which dominates the public sector can be an obstacle to change towards a more efficient management strategy. Unless the public sector understands the need to be more flexible, it is likely that they will contribute less and less to the change of health status or pattern of illnesses of the people as a whole. So, if these two sectors only scrutinize their own organization environment, they will perceive their own strength, weakness, opportunity, and threat in their contribution to the development of health services. Furthermore, it will be a challenge for health

development to organize an effective and sustainable forum for discussions between the public and the private sector in the development of all aspects of health policy process.

For health development, we know that improvement in health status of people cannot be achieved simply by expanding and developing health services, but can be attributed only as a result of national and international political will, the coordination efforts of the health sectors and relevant activities. Since health development both contribute to and result from social and economic development, health policies have to form a part of overall development policies, thus, reflecting social and economic goals of the public and private sectors. As a consequence, if a government wishes to promote health, it must take account of the health impact of a wide range of different activities and policies. These activities will be the responsibility of a large number of different organizations, many of them outside the health, both the public and the private sectors. So there is a need to promote the relationship between those organizations, to coordinate policies and activities. Ideally, the relationship between the public and the private sectors, for general activities, should be a supportive relationship for the attainment of

the development goals. But in the real situation, health sector included, tension and conflict always happen. This may be due to differences in their organizational cultures, philosophy, environments, and managerial styles.

Generally, the private sector's involvement is limited only to the operational level. There has been very little contribution at the policy level. For example, although there was a statement of the government about the policy on cooperating with the private sector in the Fifth National Health and Development plan (1982-1986), there was no policy guideline in any health sectors' plan towards achieving such a coordination. So, coordination between the public and the private sector at the policy level has only just been the statement of intention. However, there were some efforts to identify coordination problems and possible remedial strategies through various seminars. However, most of the problems in health and/or social development discussed in those seminars have been at the operation or local levels. This might be because of the participants in the seminar were unfamiliar with the concept of sustainable social development and considered policy as the untouchable thing.

Another government's attempt to develop a coordination mechanism between the public and the private health sectors late in the Fifth National Economic and Development Plan was the establishment of "The Joint Public and Private Health Consultative Committee". As it is today, this committee appears to be inappropriate in some ways. For example, its objectives have led to misunderstandings and misconceptions among the various parties within the partnership. That is government officials perceive that the JPPHC is a committee to serve the business community while the private expect the JPPHC to solve its problems. However, the JPPHC has the potential to become an effective coordinating body between the public and private sectors for the development of a comprehensive National Health Policy and activities depending on the commitments of the Secretariat and the principles of this Committee.

RATIONALE AND BACKGROUND OF THE STUDY

The rationale of this study is based on the concerns about the equitable and efficient provision of scarce and limited health resources: health manpower, health facilities, and health financing. The abilities of the public and/or the private sectors to produce effective health care efficiently and equitably depend on the balance between the sectors with respect to the types

of services to be provided, public and the private sources of finance, sharing of health manpower. All these elements are important aspects of the public-private mix in health system regardless of whether health services are public or private goods.

In the public sector, the Ministries represent the central public administration bodies. But for the health system, many agencies besides the Ministry of Public Health (MoPH) are responsible for provision of health services to the people. Therefore, the MoPH cannot be the only representation of central public health administration. Thus, the policy of the MoPH has not been equivalent to the National Health Policy. In the private sector there is no the central organization in the health system neither. The policy guiding the private health sectors is currently non-existent.

It is the purpose of this study to analyse the critical strategic issues facing the Joint Public and Private Health Consultative Committee (JPPHC) in promotion of the coordination between the public and the private health sector. However, this does not mean that the study aims to advocate the JPPHC as an effective model to guarantee any success of coordination. The study is particularly timely in the light of the current efforts to reorganize the JPPHC and to establish a

public-private coordinating division in the MoPH. So, some results of this study might be useful for the JPPHC and the MoPH in the development or modification of the concept and strategies of coordination for policy orientation towards health development.

Recently the Government issued a social security bill and health insurance system to foster equity of health care. The optimal coordination between the public and private sectors is crucial to attain an efficient provision of health services to those covered by the social security bill. The data from the present study may be formed a useful basis for the development of strategies and specific programs for the purpose.

RESEARCH QUESTION

PRIMARY QUESTION

What are the critical strategic issues for strengthening coordination between the public and the private sector towards policy orientation for health development?

SECONDARY QUESTION

1. On what basis should coordination between the public and the private sector for health development be established?

2. What are key factors which may foster or constrain coordination between the public and the private sector towards policy orientation for health development?

3. What are the present status, roles, and future perspective of the Joint Public and Private Health Consultative Committee towards policy orientation for health development?

OBJECTIVE

1. To identify the basis for coordination between the public and the private sector for health development.

2. To identify factors which may foster or constrain coordination between the public and the private sector towards policy orientation for health development.

3. To clarify the present status, roles, and future perspective of the Joint Public and Private Health Consultative Committee.

4. To identify the critical strategic issues for strengthening coordination between the public and the private sector towards policy orientation for health development.