

## Field Guide Outline

*A narrative field guide is generally structured as follows. Based on the specific scope of the assessment, it can be tailored toward specific health areas (HIV, family planning, etc.) or specific considerations related to the private health sector (policy environment, health financing, service delivery, etc.).*

### I. Background sociodemographic and descriptive information

The first section serves as the basis for the assessment's introductory chapters. It should provide a brief overview of the country so that the team has a strong understanding of the governance structure, where people live, what they do, and how much income they have. Key information in this section includes:

- Government administrative structure including breakdown between central, regional, and local governments
- Total population, including rate of population growth and population density
- Male-female split
- Urban-rural split
- General age distribution
- Per capita gross domestic product, including trends in GDP growth
- Major employment sectors in the economy
- Income, poverty, and economic inequality measures
- Education and literacy levels

### II. Health sector background

This section provides the basis for the assessment's health sector landscape and governance sections. It should list the major players in the public sector, private sector, and donor community; describe their size, roles, responsibilities, and general location; and define how the different actors interact with each other. There are four main parts to this section:

- Description of key actors in the public sector, including the Ministry of Health, regional or local health offices, publicly-owned health facilities, and any other country-specific regulatory agencies.

- Description of key actors in the private health sector, including umbrella organizations, private medical associations, private medical facilities, and private medical training institutes (if applicable). Depending on the scope, this can focus exclusively on the nonprofit/faith-based sector, the private commercial sector, or both.
- Description of major bilateral and multilateral partners and their health-specific programs.
- Short summary descriptions of key government legislation, policies, strategic plans, and health-sector programs that regulate and/or promote the private health sector.

*Key policy documents will vary based on the scope of the assessment. In general, be sure to include any public-private partnership laws and regulations, general health sector strategic plans, and any specific strategic plans for health system areas of interest (human resources, service delivery, supply chain, etc.).*

### III. Health indicators and use of the private sector

The third section serves as the foundation for the rest of the report and can easily be tailored to fit the specific scope of your assessment. Using the most current data, the assessment team should try to paint an accurate picture of the current private health sector and the challenges and opportunities facing it. Synthesizing the information presented throughout the field guide, the team should use each subsection to identify what it already knows, what it needs to verify, and what it still needs to discover during the field work stage. Depending on the scope of the assessment, important subsections include:

- **Key health indicators:** Using information gathered during the desk review, this section should discuss trends in key health areas (e.g. HIV, malaria, family planning, maternal and child health). World Bank and World Health Organization databases can provide statistics on disease prevalence and incidence rates for your specific country.
- **Service delivery:** The service delivery section uses information gleaned from Service Provision Assessments, Demographic and Health Surveys, AIDS Indicator Surveys, and other reports to describe what kind of health services are offered in the private sector and where people generally access care. Depending on the robustness of the DHS datasets, secondary analysis can reveal whether patients go to the public, private nonprofit, or private commercial health sectors for key health services (i.e., HIV testing, antenatal care, treatment of diarrhea, treatment of fever or cough, family planning services, and attended birth). This provides useful insights into **demand** for these services. Analysis of the Demographic and Health Survey data can reveal the wealth

distribution of patients using the private health sector and any urban-rural differences in patient access. Looking at multiple Demographic and Health Survey reports can reveal whether the private health sector is growing, shrinking, or stable. A review of health care workers should also be included, specifically the number and geographic split of trained health professionals working in the private sector. If there is a surplus or shortage, it should identify possible causes that the team can investigate during the field work phase. Some assessments have also explored the role of private medical training institutes.

- **Health financing:** The health financing section has three goals. First, it should use national health accounts data to identify trends regarding who is the ultimate financing source, who is determining how funds are spent (financing agent), and where and how the money is ultimately being used. Second, it should describe the public sector's role in financing private health facilities, including any public health insurance programs, contracting-out programs, or service level agreements. Third, it should identify and describe private sources of health financing, including private insurance companies and microinsurance programs.
- **Supply chain:** The ability of the private sector supply chain to adequately provide quality pharmaceuticals and health commodities should be explored.
- **Other issues:** Other key issues facing the private sector include the current status of any existing public-private partnerships for health, the ability of private health facilities to access finance and capital, and the private sector's role in the country's health information management system. Depending on the scope of the assessment, the team might want to create more detailed subsections for each of these fields or simply work a discussion of these issues into the other sections.

#### IV. Strategic Plan for Field Work

The final section of the field guide should identify the priorities for the field work stage. For each of the subsections included in Section III, the team should identify how they intend to validate any unverified information or fill any existing gaps in their data. It is important to identify who will be responsible for each action point and what potential sources the team should target (e.g., key stakeholder, government database, gray literature). This step is necessary to effectively plan the local stakeholder interviews and to ensure that the team makes the most efficient use of its time in the country.