

## Piloting a Malaria Public-Private Mix Model in Cambodia

In 1996, PATH began working in Cambodia to strengthen linkages between the private and public health sectors in an effort to improve health outcomes. Our public-private mix (PPM) model has been implemented in the context of a broad range of pressing health concerns, including tuberculosis, reproductive health, and immunization. Building on our experience, the National Center for Parasitology, Entomology, and Malaria Control (CNM) of the Cambodian Ministry of Health requested PATH to develop, test, and document a malaria PPM model in two operational districts (OD)—Ou Chrov in Bantheay Meanchey province and Sotnikum in Siem Reap province. Through the PPM model, PATH establishes linkages between the public and private sectors to strengthen malaria diagnosis, referral, and treatment.

### Building partnerships

Identifying the right partners is vital to building a sustainable PPM model. Under the strategic guidance of national-level authorities and policies, local ownership of the initiative is crucial to ensuring momentum and effectiveness. PATH's partnership with the Provincial Health Departments and OD administrative



offices encourages Cambodia's public sector to engage constructively with the private sector. PATH also partners with the Pharmacist Association of Cambodia to encourage participation by private providers and pave the way for future expansion.

To develop partnerships between public- and private- sector providers, regularly scheduled

meetings between these two stakeholders take place at participating health centers. Discussion often centers on the collaborative process, the benefits experienced by clients, as well as challenges providers face while implementing the model and potential solutions. Through these PPM meetings, a foundation of trust and a dynamic of mutual support is built.

### Improving capacity of the private sector

The vast majority of private providers of malaria services in the two pilot sites are informal or unregistered. To strengthen the private sector as a whole, the pilot PPM activities reach out to all private providers to enhance their skills about malaria diagnosis, treatment, and referral. More than 250 private providers participated in workshops facilitated by PATH and partners, focused on reinforcing key messages and familiarizing private providers with various project tools such as pocket cards, job aids, referral slips, and reporting forms.

### PATH's approach: the PPM model

Private providers in Cambodia play a major role in the provision of health information, services, and products. Nearly 70 percent of Cambodians first seek health care outside of the public sector, making private providers a critical component of effective public health planning.

Malaria causes a substantial disease burden in Cambodia, representing one of the top ten causes of mortality across all age groups. Although access to malaria diagnosis and treatment is widely available in the public sector, most Cambodians receive care for malaria-like symptoms from private or informal health care providers. However, the quality of these services is often inconsistent. Treatment without proper diagnosis, as well as the use of improper drugs and drug regimens, is not only of concern for individual clients, but is likely contributing to the malaria drug resistance currently emerging in Cambodia. This setback in treating the disease also potentially threatens advances in malaria control on a global scale.

A public-private mix (PPM) approach is an effective way to leverage the capacity of the private sector to support public-sector goals and objectives. The PPM model focuses on establishing key partnerships to strengthen the capacity of public-, private-, and civil-society actors, engaging public and private health care providers to improve the quality, cost, and accessibility of health services in Cambodia.

PATH has established routine supportive supervision by which all private providers are regularly visited by a trained PPM supervisor. The visits are an opportunity to discuss challenges in a one-on-one forum, provide on-the-job guidance, and identify future program needs. It is also a chance to collect monitoring information and engage with providers who have not joined the initial workshop. With new knowledge, tools, and support, private providers are able to improve their diagnostic, referral, and prescribing behaviors, and more effectively engage with the public sector.

### Establishing linkages

Acknowledging that some malaria cases are better managed within the public sector, PATH established a referral system that enables private providers to serve their clients better. If a private provider is unable to perform a diagnostic test;



does not have the appropriate drugs for treatment; or has a client less than five years of age, pregnant, or with suspected recurrent or severe malaria, they are encouraged to use the specially designed referral slips to funnel clients into public health facilities for further evaluation and treatment.

The PPM model also establishes linkages between the sectors in the reporting of malaria cases. It

is assumed that a significant number of malaria clients are being served by the private sector, but data from these providers are not routinely included in national surveillance activities. To close this information gap, PATH adapted reporting tools and systems to allow data to be collected from private-sector providers participating in the PPM initiative. As this process is scaled up, this will enable public health authorities to make more informed decisions regarding malaria response in Cambodia.

### A step forward

Preliminary results of the pilot PPM model point to the growing success of an effective malaria diagnosis and referral system. The private sector has reported increased efficiency in diagnosis and referrals, and the public sector has begun to consistently receive malaria cases through the referral system. In the pilot sites, close to 300 suspected malaria cases were referred from private-sector facilities between June and October 2010.

The establishment of a malaria PPM model is a tremendous step forward in controlling one of Cambodia's most deadly diseases. Results from the pilot sites indicate that the malaria PPM model could be scaled up throughout Cambodia to further increase access to appropriate malaria diagnosis and treatment services. Lessons learned from this pilot project, along with the tools that PATH has developed for its implementation, will provide invaluable input to the development and implementation of national efforts to engage the private sector in malaria control. This newfound knowledge has the potential to inform similar initiatives in the region and globally.



### Key messages of the malaria PPM model

- Malaria should always be diagnosed by rapid test or slide before treatment is provided.
- It is illegal to sell artesunate monotherapies to treat malaria.
- Only government-recommended drugs should be used to treat malaria.
- All malaria patients should be counseled on the importance of completing the drug regimen and on key prevention messages.
- All children under five, pregnant women, and people with severe or recurrent malaria should be referred to the nearest public health facility.
- Good record keeping will allow better understanding of patients' needs and problems.

PATH is an international nonprofit organization that creates sustainable, culturally relevant solutions, enabling communities worldwide to break longstanding cycles of poor health. By collaborating with diverse public- and private-sector partners, PATH helps provide appropriate health technologies and vital strategies that change the way people think and act. PATH's work improves global health and well-being.



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