

## **TUFH 2020** Abstracts

Title	UHC in non-government-controlled areas: Can purchasing from local providers be a sustainable and effective approach?
Туре	Oral Presentation Working with Underserved Populations towards Community Empowerment
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Southeast Myanmar has been contested since independence in 1947, with periods of waxing and waning conflict. In many areas, government health facilities have not been constructed; services provided by ethnic health organizations (EHOs). Although a ceasefire in 2012 brought greater stability, key health indicators lag behind national estimates. Central government sources of care remain untrusted by many communities. The paper examines results from the first year of the Strategic Purchasing Pilot (SPP). The model contracts EHO providers to deliver services for a capitated fee to a defined population. Method The mixed-methods study uses a variety of data sources concerning the efficacy of the project, including monitoring and evaluation of clinical quality, routine clinical and logistics records, a survey of 486 households describing care access and quality, and utilization. These are supplemented by 15 key informant interviews on barriers and facilitators to program implementation. Results Over 50% of respondents in the project areas have been displaced by conflict. It is estimated that over 60% are in poverty and another 20% vulnerable to slipping into poverty. Just 12% use the Myanmar language fluently. These aspects all point to the difficulty of government service provision. SPP result shows that utilization has increased, particularly for ANC and general illnesses, as have quality and data reporting. Conclusions Early results suggest that purchasing services and strengthening EHOs that already function as trusted providers in non-government-controlled areas is feasible. The SPP has enhanced cooperation between previously opposing factions of longstanding civil conflict.

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