The Private Health Sector Program (PHSP) is a five-year project (2009–2014) funded by the President’s Emergency Plan for AIDS Relief (PEPFAR) by USAID and implemented by Abt Associates. The goal of PHSP is to enable Ethiopia’s Federal Ministry of Health and the Regional Health Bureaus to effectively partner with private health providers to deliver public health services, while improving the quality and affordability of these services.

Overview
PHSP is designed to achieve results by:
• Establishing a supportive policy environment for the private health sector
• Enhancing both geographic and financial access to packages of essential health services through the private sector
• Making sustainable improvements in the quality of services
• Increasing demand for quality services by informed, proactive consumer populations

Operating in five regions (Amhara; Harari; Oromia; Southern Nations, Nationalities and Peoples; and Tigray) and in two cities (Addis Ababa and Dire Dawa), PHSP interventions focus on increasing access to an integrated package of key public health services, including:
• Diagnosis and treatment of tuberculosis (TB)
• Comprehensive HIV care (pre-antiretroviral therapy (ART); ART; HIV counseling and testing (HCT); mobile HCT; and prevention of mother-to-child transmission (PMTCT))
• Family planning
• Diagnosis and treatment of malaria
• Treatment of sexually transmitted infections

PHSP has made significant impact in key intervention areas such as TB diagnosis. Ten percent of TB cases detected nationally are from PHSP-supported sites.

Cross-cutting project interventions include policy support; strengthening capacity in the laboratory, pharmacy, and health communications sectors; business and financial management training for clinic owners and managers; and monitoring and evaluation.

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These activities enhance government oversight of health service provision in the private sector, strengthen public-private referral mechanisms, strengthen the financial sustainability of private sector facilities, and improve client awareness. PHSP currently works with 327 private facilities.

**Selected MNCH and Family Planning Accomplishments**

**PMTCT Services**

In collaboration with the Regional Health Bureaus and private health facilities, PHSP increased the number of private facilities providing PMTCT services to a total of 13 in 2012 and to 91 in 2013. This represents a significant increase in client access to PMTCT services, contributing to the government's national PMTCT acceleration plan.

PHSP provided private facilities with the national PMTCT implementation guidelines and strategies, which focus on provision of HCT at antenatal care clinics and/or in the labor ward and on provision of antiretroviral drugs at the antenatal care clinic and during labor and delivery. All PMTCT sites enroll HIV-positive mothers for pre-ART care, which includes chronic care follow-up for mothers not eligible for Highly Active ART Therapy (HAART). PHSP transports specimens from PMTCT sites to PHSP-supported and equipped labs. Through regular mentoring of facility staff, PHSP provides technical assistance to ensure quality of services and provides close monitoring of the lost-to-follow-up cases with support from community nurses.

**Family Planning**

To deliver an integrated service package, PHSP developed a family planning implementation strategy combining family planning with other PHSP-supported public health services, particularly TB Directly Observed Treatment Short-course (DOTS) and HIV care. PHSP helps build the clinical capacity of providers to provide long-acting family planning methods.

PHSP initiated family planning services in 109 of the project's supported private health facilities. The process includes building consensus, ensuring that memorandums of understanding have been signed between the Regional Health Bureaus and the facilities, and strengthening clinical capacity to provide long-acting family planning in particular. PHSP works closely with the Regional Health Bureaus and the Pharmaceutical Funds and Supply Agency to build a system for a supply chain of family planning commodities earmarked for the private health sector to avoid stock-outs and help ensure sustainability of family planning supplies.