

The impact of Performance-based Financing (PBF) on pregnant women's effective coverage with antenatal care (ANC) services in Malawi

Stephan Brenner
Institute of Public Health
Address: Im Neuenheimer Feld 130.3, 69120 Heidelberg
Phone: +49 (0)6221 56-35056
Email: stephan.brenner@uni-heidelberg.de

Universal Health Coverage (UHC) has been identified as a key objective of our times, having acquired global recognition as one of the targets of the Sustainable Development Goals. In the quest to achieve UHC, many low- and middle-income countries (LMICs) are making substantial investments to reform their health financing structures.

Performance-based financing (PBF) is a health financing approach to actively purchase high quality health service outputs. Different PBF designs are currently implemented in many Sub-Saharan countries to stimulate the quality of primary health care services provided by both public and private health facilities.

Crude population coverage is one of the key measures used in the UHC framework to determine the proportion of a target population using a given health service, regardless of the service quality received by a user. To further assess the proportion of a target population that actually uses health services that meet a certain quality standard or service effectiveness (i.e. those users actually receiving effective care), effective coverage is increasingly preferred over crude coverage.

Using data from a PBF impact evaluation study in Malawi, this project will assess the impact or effect of a PBF scheme on both the quality of care and effective coverage in respect to antenatal care (ANC) services. The design rests on a controlled before-and-after study (i.e. PBF intervention and no-PBF control sites, baseline, midline and endline data). A number of different datasets are available to estimate the quality of care from different perspectives (i.e. health facility inventories, observed ANC consultations, exit interviews of ANC users, clinical knowledge assessments of ANC providers). To estimate effective coverage, additional information on the ANC service use from household-based surveys can be used.

As part of this project, the medical student is expected to analyse the existing datasets relying on established conceptual frameworks and quality of care assessment approaches. The student will further analyse both crude and effective coverage of pregnant women with ANC services in the study population. In a final step, the student will develop the effect (causal relationship) model to estimate the overall PBF impact on the above outcome measures. The student will be supervised throughout this process. All data are already collected and available.

Cooperating partners:

Ministry of Health, Malawi

College of Medicine, Blantyre, Malawi

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