

# PRIVATE SECTOR HEALTHCARE: PROMISES VS. REALITY

Comparing common assumptions about private care with the available evidence.

| <b>Promise</b>   | <b>vs.</b> | <b>Reality</b>  |
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| The private sector provides value for money.             |            | Private providers extract profits, face higher financing costs than the public sector, and often charge patients overwhelmingly more than public providers without necessarily providing better care.   |
| Privatizing care conserves scarce government resources.  |            | The growth of the private sector has been highly dependent on a commitment of major resources from the Kenyan government, including to subsidize private care. Many people cannot afford to pay for healthcare at market prices, and private actors rely extensively on public money. |
| The private sector offers high quality care.             |            | The private sector offers wildly different quality of care to the “haves” and the “have nots.” Lower income areas are often dominated by low-cost, low-quality private services that can be unsafe, inadequate, or even illegal.  |
| Private actors fill gaps neglected by the public system. |            | Private care in Kenya is concentrated in the most profitable forms of care, and has spurned less commercially viable areas, patients, and services—including important preventative care like vaccinations, family planning, and maternal and child healthcare.                       |
| Private care improves access for all.                    |            | Cost is a major barrier to accessing care, and many are unable to access private care due to its high cost, while others are pushed into poverty to pay for it.   |