

CIHDG042: Health Systems in a Global Context

[View Online](#)

-
1.
WHO | Chapter 3.
 2.
Black, N., Gruen, R.: Understanding health services. Open University Press, Maidenhead (2005).
 3.
Deaton, A.: Escaping Death in the Tropics. In: The great escape: health, wealth, and the origins of inequality. Princeton University Press, Princeton (2013).
 4.
De Savigny, D.: Chapter 1 & 2. In: Systems thinking for health systems strengthening. pp. 27–47. Alliance for Health Policy and Systems Research, Geneva (2009).
 5.
Figueras, J., McKee, M.: Health systems, health, wealth and societal well-being: assessing the case for investing in health systems. Open University Press, Maidenhead (2012).
 6.
Kruk, M.E., Freedman, L.P.: Assessing health system performance in developing countries: A review of the literature. Health Policy. 85, 263–276 (2008).
<https://doi.org/10.1016/j.healthpol.2007.09.003>.

7.

Shyama Kuruvilla: Success factors for reducing maternal and child mortality. Bulletin of the World Health Organization. 92, (2014). <https://doi.org/doi: 10.2471/BLT.14.138131>.

8.

Mills, A., Ranson, K.: Chapter 12: the design of health systems. In: Merson, M.H., Black, R.E., and Mills, A. (eds) Global health: diseases, programs, systems, and policies. Jones & Bartlett Learning, Burlington, MA (2012).

9.

Sen, A.: Mortality as an Indicator of Economic Success and Failure. The Economic Journal. 108, 1-25 (1998). <https://doi.org/10.1111/1468-0297.00270>.

10.

STARFIELD, B., SHI, L., MACINKO, J.: Contribution of Primary Care to Health Systems and Health. The Milbank Quarterly. 83, 457-502 (2005). <https://doi.org/10.1111/j.1468-0009.2005.00409.x>.

11.

Szreter, S.: The importance of social intervention in Britain's mortality decline c. 1850-1914: a re-interpretation of the role of public health. In: Health and disease: a reader. pp. 191-199. Open University Press, Buckingham (1995).

12.

Van Olmen et al., J.: Analysing health systems dynamics. A framework. ITG PRESS PRINS LEOPOLD INSTITUUT TROPISCHE GENEESKUNDE (2011).

13.

World Health Organization: The world health report 2000: Health systems : improving performance. World Health Organization, Geneva (2000).

14.

Lerberghe, W. van, World Health Organization: The world health report 2008: primary health care, now more than ever. World Health Organization, Geneva (2008).

15.

Global Health Expenditure Atlas. World Health Organization, Geneva.

16.

Health System Assessment Approach: A How-To Manual,
<http://healthsystemassessment.org/health-system-assessment-approach-a-how-to-manual/>, (2012).

17.

Alma-Ata Declaration on Primary Health Care,
http://www.who.int/publications/almaata_declaration_en.pdf, (1978).

18.

Tendler, J.: Chapter 2: Preventive health: the case of the unskilled meritocracy. In: Good government in the tropics. Johns Hopkins University Press, Baltimore (1997).

19.

Kuruvilla, S., Schweitzer, J., Bishai, D., Chowdhury, S., Caramani, D., Frost, L., Cortez, R., Daelmans, B., de Francisco, A., Adam, T., Cohen, R., Alfonso, Y.N., Franz-Vasdeki, J., Saadat, S., Pratt, B.A., Eugster, B., Bandali, S., Venkatachalam, P., Hinton, R., Murray, J., Arscott-Mills, S., Axelson, H., Maliqi, B., Sarker, I., Lakshminarayanan, R., Jacobs, T., Jacks, S., Mason, E., Ghaffar, A., Mays, N., Presern, C., Bustreo, F.: Success factors for reducing maternal and child mortality. Bulletin of the World Health Organization. 92, 533-544 (2014). <https://doi.org/10.2471/BLT.14.138131>.

20.

Alma-Ata Declaration on Primary Health Care,

http://www.who.int/publications/almaata_declaration_en.pdf, (1978).

21.

Walsh, J.A., Warren, K.S.: Selective Primary Health Care. *New England Journal of Medicine*. 301, 967-974 (1979). <https://doi.org/10.1056/NEJM197911013011804>.

22.

Rifkin, S.B., Walt, G.: Why health improves: Defining the issues concerning 'comprehensive primary health care' and 'selective primary health care'. *Social Science & Medicine*. 23, 559-566 (1986). [https://doi.org/10.1016/0277-9536\(86\)90149-8](https://doi.org/10.1016/0277-9536(86)90149-8).

23.

Financing health services in developing countries : an agenda for reform,
<http://documents.worldbank.org/curated/en/468091468137379607/Financing-health-services-in-developing-countries-an-agenda-for-reform>.

24.

Janovsky, Katja: The challenge of implementation : district health systems for primary health care, <http://apps.who.int/iris/handle/10665/62369>, (1988).

25.

World Bank: World development report 1993: investing in health. Oxford University Press for the World Bank, New York (1993).

26.

Russell, S., Gilson, L.: User Fee Policies to Promote Health Service Access for the Poor: A Wolf in Sheep's Clothing? *International Journal of Health Services*. 27, 359-379 (1997).

27.

The world health report 2000 - Health systems: improving performance,
<http://www.who.int/whr/2000/en/>, (2000).

28.

Macroeconomics and Health: investing in Health for economic development. Report of the Commission on Macro-economics and Health,
<http://www1.worldbank.org/publicsector/pe/PEAMMarch2005/CMHReport.pdf>, (2001).

29.

Pritchett, Lant: World Development Report 2004 : making services work for poor people,
<https://openknowledge.worldbank.org/handle/10986/5986>, (2003).

30.

People's Health Movement, Medact, Global Equity Gauge Alliance: Chapter B1: Health care systems and approaches to health care. In: Global health watch 2005-2006: an alternative world health report. Zed, London (2005).

31.

Commission on Social Determinants of Health: Closing the gap in a generation: health equity through action on the social determinants of health,
http://www.who.int/social_determinants/thecommission/finalreport/en/, (2008).

32.

Lerberghe, W. van, World Health Organization: Chapter 3: Primary care: putting people first. In: The world health report 2008: primary health care, now more than ever. World Health Organization, Geneva (2008).

33.

Etienne, C., Asamoah-Baah, A., Evans, D.B., World Health Organization: Executive summary. In: The world health report: health systems financing : the path to universal coverage. World Health Organization, Geneva (2010).

34.

Balabanova, D., McKee, M., Mills, A.: 'Good health at low cost' 25 years on: what makes a

successful health system? London School of Hygiene & Tropical Medicine, London (2011).

35.

Universal Health Coverage: A commitment to close the gap,
<http://www.savethechildren.org.uk/resources/online-library/universal-health-coverage-commitment-close-gap>, (2013).

36.

Bossert, T.: Analyzing the decentralization of health systems in developing countries: decision space, innovation and performance. *Social Science & Medicine*. 47, 1513–1527 (1998). [https://doi.org/10.1016/S0277-9536\(98\)00234-2](https://doi.org/10.1016/S0277-9536(98)00234-2).

37.

Collins, C., Green, A.: Decentralization and Primary Health Care: Some Negative Implications in Developing Countries. *International Journal of Health Services*. 24, 459–476 (1994).

38.

Saltman et al., R.: Decentralization in health care. Open University Press (2007).

39.

Gonzalez, C.L.: Mass Campaigns and General Health Services,
http://apps.who.int/iris/bitstream/10665/40470/1/WHO_PHP_29.pdf, (1965).

40.

LaFond, A., Save the Children Fund (Great Britain): Sustaining primary health care. Earthscan, London (1995).

41.

Lele et al., U.: Health system capacities in developing countries and global health

initiatives on communicable diseases,
<http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.461.9789&rep=rep1&type=pdf>, (2005).

42.

Global Health Partnerships: assessing country consequences,
<http://www.who.int/healthsystems/gf16.pdf>, (2005).

43.

Mills, Anne: Mass campaigns versus general health services: what have we learnt in 40 years about vertical versus horizontal approaches? World Health Organization. Bulletin of the World Health Organization. 83, 315–6.

44.

Ooms, G., Van Damme, W., Baker, B.K., Zeitz, P., Schrecker, T.: The 'diagonal' approach to Global Fund financing: a cure for the broader malaise of health systems? Globalization and Health. 4, (2008). <https://doi.org/10.1186/1744-8603-4-6>.

45.

Rohde, J., Cousens, S., Chopra, M., Tangcharoensathien, V., Black, R., Bhutta, Z.A., Lawn, J.E.: 30 years after Alma-Ata: has primary health care worked in countries? The Lancet. 372, 950–961 (2008). [https://doi.org/10.1016/S0140-6736\(08\)61405-1](https://doi.org/10.1016/S0140-6736(08)61405-1).

46.

Stillman, K., Bennett, S.: Systemwide Effects of the Global Fund: Interim Findings from Three Country Studies, http://pdf.usaid.gov/pdf_docs/Pnadf196.pdf, (2005).

47.

Swanson, R.C., Mosley, H., Sanders, D., Egilman, D., De Maeseneer, J., Chowdhury, M., Lanata, C.F., Dearden, K., Bryant, M.: Call for global health-systems impact assessments. The Lancet. 374, 433–435 (2009). [https://doi.org/10.1016/S0140-6736\(09\)61212-5](https://doi.org/10.1016/S0140-6736(09)61212-5).

48.

Unger, J.-P., De Paepe, P., Green, A.: A code of best practice for disease control programmes to avoid damaging health care services in developing countries. *The International Journal of Health Planning and Management*. 18, S27-S39 (2003). <https://doi.org/10.1002/hpm.723>.

49.

Unger, J.-P., d'Alessandro, U., Paepe, P.D., Green, A.: Can malaria be controlled where basic health services are not used? *Tropical Medicine and International Health*. 11, 314-322 (2006). <https://doi.org/10.1111/j.1365-3156.2006.01576.x>.

50.

An assessment of interactions between global health initiatives and country health systems. *The Lancet*. 373, 2137-2169 (2009). [https://doi.org/10.1016/S0140-6736\(09\)60919-3](https://doi.org/10.1016/S0140-6736(09)60919-3).

51.

Yu, D., Souteyrand, Y., Banda, M.A., Kaufman, J., Perriens, J.H.: Investment in HIV/AIDS programs: Does it help strengthen health systems in developing countries? *Globalization and Health*. 4, (2008). <https://doi.org/10.1186/1744-8603-4-8>.

52.

Basilico, M., Weigel, J., Motto, A. eds: *Health for all? Competing theories and geopolitics*. In: *Reimagining global health: an introduction*. University of California Press, Berkeley (2013).

53.

Greene, J.: Colonial medicine and its legacies. In: Farmer, P., Kim, J.Y., Kleinman, A., and Basilico, M. (eds) *Reimagining global health: an introduction*. University of California Press, Berkeley (2013).

54.

Primary Health Care Series,

<http://www.thelancet.com/series/alma-ata-rebirth-and-revision>, (2008).

55.

Porter, R.: The greatest benefit to mankind: a medical history of humanity from antiquity to the present. FontanaPress, London (1999).

56.

Savedoff, W.D., de Ferranti, D., Smith, A.L., Fan, V.: Political and economic aspects of the transition to universal health coverage. The Lancet. 380, 924–932 (2012).
[https://doi.org/10.1016/S0140-6736\(12\)61083-6](https://doi.org/10.1016/S0140-6736(12)61083-6).

57.

papers in the Lancet themed issue on Universal Health Care. 380, (2012).

58.

Freedman, L.P., UN Millennium Project 2005: Who's got the power?: Transforming health systems for women and children, Task Force on Child Health and Maternal Health. Earthscan, London, UK (2005).

59.

Savedoff, W.D., de Ferranti, D., Smith, A.L., Fan, V.: Political and economic aspects of the transition to universal health coverage. The Lancet. 380, 924–932 (2012).
[https://doi.org/10.1016/S0140-6736\(12\)61083-6](https://doi.org/10.1016/S0140-6736(12)61083-6).

60.

Masiye, F., Chitah, B.M., McIntyre, D.: From targeted exemptions to user fee abolition in health care: Experience from rural Zambia. Social Science & Medicine. 71, 743–750 (2010).
<https://doi.org/10.1016/j.socscimed.2010.04.029>.

61.

Mylene Lagarde: The impact of user fees on health service utilization in low- and

middle-income countries: how strong is the evidence? Bulletin of the World Health Organization. 86, (2008). <https://doi.org/10.2471/BLT.07.049197>.

62.

Fan, V.: The Health Financing Transition: A Conceptual Framework and Empirical Evidence | Results for Development Institute, <http://www.resultsfordevelopment.org/knowledge-center/health-financing-transition-conceptual-framework-and-empirical-evidence>, (2012).

63.

Garrett, L., Chowdhury, A.M.R., Pablos-Méndez, A.: All for universal health coverage. The Lancet. 374, 1294–1299 (2009). [https://doi.org/10.1016/S0140-6736\(09\)61503-8](https://doi.org/10.1016/S0140-6736(09)61503-8).

64.

Gilson, L., Kalyalya, D., Kuchler, F., Lake, S., Oranga, H., Ouendo, M.: Strategies for promoting equity: experience with community financing in three African countries. Health Policy. 58, 37–67 (2001). [https://doi.org/10.1016/S0168-8510\(01\)00153-1](https://doi.org/10.1016/S0168-8510(01)00153-1).

65.

Gottret, P., Schieber, G.: Health financing revisited: a practitioner's guide, <https://openknowledge.worldbank.org/handle/10986/7094>, (2006).

66.

Laurrell, A.C., Zepeda, E., Mussot, L.: Eliminating economic barriers in health care: The Mexico City government's experience. In: Commercialization of health care: global and local dynamics and policy responses. pp. 216–233. Palgrave Macmillan, Basingstoke (2005).

67.

McIntyre, D., Thiede, M., Dahlgren, G., Whitehead, M.: What are the economic consequences for households of illness and of paying for health care in low- and middle-income country contexts? Social Science & Medicine. 62, 858–865 (2006). <https://doi.org/10.1016/j.socscimed.2005.07.001>.

68.

Diane McIntyre: Beyond fragmentation and towards universal coverage: insights from Ghana, South Africa and the United Republic of Tanzania. *Bulletin of the World Health Organization*. 86, (2008). <https://doi.org/10.2471/BLT.08.053413>.

69.

McIntyre, D.: WHR 2000 to WHR 2010: what progress in health care financing? *Health Policy and Planning*. 25, 349–351 (2010). <https://doi.org/10.1093/heapol/czq033>.

70.

McIntyre, D., Kutzin, J.: Guidance on conducting a situation analysis of health financing for universal health coverage Version 1.0, http://www.jointlearningnetwork.org/uploads/files/resources/Guidance_on_conducting_a_situation_analysis_of_health_financing_for_universal_health_coverage.pdf, (2014).

71.

Normand, C., Thomas, S.: Health Care Financing and the Health System. In: *International Encyclopedia of Public Health*. pp. 160–174. Elsevier (2008). <https://doi.org/10.1016/B978-012373960-5.00167-2>.

72.

Palmer, N., Mueller, D.H., Gilson, L., Mills, A., Haines, A.: Health financing to promote access in low income settings—how much do we know? *The Lancet*. 364, 1365–1370 (2004). [https://doi.org/10.1016/S0140-6736\(04\)17195-X](https://doi.org/10.1016/S0140-6736(04)17195-X).

73.

The Lancet. 380, (2012).

74.

Tangcharoensathien, V., Patcharanarumol, W., Ir, P., Aljunid, S.M., Mukti, A.G., Akkhavong, K., Banzon, E., Huong, D.B., Thabrany, H., Mills, A.: Health-financing reforms in southeast

Asia: challenges in achieving universal coverage. *The Lancet*. 377, 863–873 (2011).
[https://doi.org/10.1016/S0140-6736\(10\)61890-9](https://doi.org/10.1016/S0140-6736(10)61890-9).

75.

van Doorslaer, E., O'Donnell, O., Rannan-Eliya, R.P., Somanathan, A., Adhikari, S.R., Garg, C.C., Harbianto, D., Herrin, A.N., Huq, M.N., Ibragimova, S., Karan, A., Ng, C.W., Pande, B.R., Racelis, R., Tao, S., Tin, K., Tisayaticom, K., Trisnantoro, L., Vasavid, C., Zhao, Y.: Effect of payments for health care on poverty estimates in 11 countries in Asia: an analysis of household survey data. *The Lancet*. 368, 1357–1364 (2006).
[https://doi.org/10.1016/S0140-6736\(06\)69560-3](https://doi.org/10.1016/S0140-6736(06)69560-3).

76.

Wagstaff, A.: Social health insurance reexamined, Policy, Research working paper ; no. WPS 4111,
<http://documents.worldbank.org/curated/en/914391468178446567/Social-health-insurance-reexamined>, (2007).

77.

Wagstaff, A.: Measuring financial protection in health,
http://www.who.int/pmnch/topics/economics/032008_wbprwp_4554/en/, (2008).

78.

Wagstaff, A.: Social Health Insurance vs. Tax-Financed Health Systems--Evidence from the OECD, <https://ideas.repec.org/p/wbk/wbrwps/4821.html>, (2009).

79.

Whitehead, M., Dahlgren, G., Evans, T.: Equity and health sector reforms: can low-income countries escape the medical poverty trap? *The Lancet*. 358, 833–836 (2001).
[https://doi.org/10.1016/S0140-6736\(01\)05975-X](https://doi.org/10.1016/S0140-6736(01)05975-X).

80.

WHO: World Health Report: Health systems financing: the path to universal coverage,
<http://www.who.int/whr/2010/en/>, (2010).

81.

Global Health Expenditure Atlas, <http://www.who.int/health-accounts/atlas2014.pdf>, (2014).

82.

Xu et al., K.: Protecting Households From Catastrophic Health Spending. *Health Affairs*. 26, 972–83 (2007).

83.

Robinson, S., Williams, I., Dickinson, H., Freeman, T., Rumbold, B.: Priority-setting and rationing in healthcare: Evidence from the English experience. *Social Science & Medicine*. 75, 2386–2393 (2012). <https://doi.org/10.1016/j.socscimed.2012.09.014>.

84.

Glassman, A.: Priority-Setting in Health: Building Institutions for Smarter Public Spending. IDEAS Working Paper Series from RePEc. (2012).

85.

Victora, C.G., Wagstaff, A., Schellenberg, J.A., Gwatkin, D., Claeson, M., Habicht, J.-P.: Applying an equity lens to child health and mortality: more of the same is not enough. *The Lancet*. 362, 233–241 (2003). [https://doi.org/10.1016/S0140-6736\(03\)13917-7](https://doi.org/10.1016/S0140-6736(03)13917-7).

86.

Scott, V., Stern, R., Sanders, D., Reagon, G., Mathews, V.: Research to action to address inequities: the experience of the Cape Town Equity Gauge. *International Journal for Equity in Health*. 7, (2008). <https://doi.org/10.1186/1475-9276-7-6>.

87.

Sanders, D., Chopra, M.: Key Challenges to Achieving Health for All in an Inequitable Society: The Case of South Africa. *American Journal of Public Health*. 96, 73–78 (2006). <https://doi.org/10.2105/AJPH.2005.062679>.

88.

Hadorn, D.C.: Setting Health Care Priorities in Oregon. *JAMA*. 265, (1991).

89.

Bodenheimer, T.: The Oregon Health Plan — Lessons for the Nation Part 1. *New England Journal of Medicine*. 337, 651–656 (1997). <https://doi.org/10.1056/NEJM199708283370923>.

90.

Bodenheimer, T.: The Oregon Health Plan — Lessons for the Nation Part 2. *New England Journal of Medicine*. 337, 720–723 (1997). <https://doi.org/10.1056/NEJM199709043371021>.

91.

Allen, H.: The Oregon Health Insurance Experiment: When Limited Policy Resources Provide Research Opportunities. *Journal of Health Politics, Policy and Law*. 38, 1183–1192 (2013). <https://doi.org/10.1215/03616878-2373244>.

92.

Saultz, J.W.: Defining Basic Health Benefits: Lessons Learned From the Oregon Health Plan. *Fam Med*. 40, 433–437 (2008).

93.

Youngkong, S., Teerawattananon, Y., Tantivess, S., Baltussen, R.: Multi-criteria decision analysis for setting priorities on HIV/AIDS interventions in Thailand. *Health Research Policy and Systems*. 10, (2012). <https://doi.org/10.1186/1478-4505-10-6>.

94.

Walker, S., Palmer, S., Sculpher, M.: The role of NICE technology appraisal in NHS rationing. *British Medical Bulletin*. 81–82, 51–64 (2007). <https://doi.org/10.1093/bmb/ldm007>.

95.

Ensor, T.: Overcoming barriers to health service access: influencing the demand side. *Health Policy and Planning*. 19, 69–79 (2004). <https://doi.org/10.1093/heapol/czh009>.

96.

Murray, S.F., Hunter, B.M., Bisht, R., Ensor, T., Bick, D.: Effects of demand-side financing on utilisation, experiences and outcomes of maternity care in low- and middle-income countries: a systematic review. *BMC Pregnancy and Childbirth*. 14, (2014). <https://doi.org/10.1186/1471-2393-14-30>.

97.

Peters, D.H., Garg, A., Bloom, G., Walker, D.G., Brieger, W.R., Hafizur Rahman, M.: Poverty and Access to Health Care in Developing Countries. *Annals of the New York Academy of Sciences*. 1136, 161–171 (2008). <https://doi.org/10.1196/annals.1425.011>.

98.

World Bank: Conditional Cash Transfers: Reducing Present and Future Poverty, <https://openknowledge.worldbank.org/handle/10986/2597>, (2009).

99.

World Bank: World Development Report 2004: Making Services Work for Poor People, <https://openknowledge.worldbank.org/handle/10986/5986>, (2004).

100.

Bassani, D.G., Arora, P., Wazny, K., Gaffey, M.F., Lenters, L., Bhutta, Z.A.: Financial incentives and coverage of child health interventions: a systematic review and meta-analysis. *BMC Public Health*. 13, (2013). <https://doi.org/10.1186/1471-2458-13-S3-S30>.

101.

Black, N., Gruen, R.: The need and demand for health care. In: *Understanding health*

services. Open University Press, Maidenhead (2005).

102.

Black, N., Gruen, R.: The relationship between need and use. In: Understanding health services. Open University Press, Maidenhead (2005).

103.

DOWDING, K., JOHN, P.: VOICE AND CHOICE IN HEALTH CARE IN ENGLAND: UNDERSTANDING CITIZEN RESPONSES TO DISSATISFACTION. Public Administration. 89, 1403-1418 (2011). <https://doi.org/10.1111/j.1467-9299.2011.01960.x>.

104.

Gupta, I., Joe, W., Rudra, S.: Demand side financing in health: how far can it address the issue of low utilization in developing countries, <http://www.who.int/healthsystems/topics/financing/healthreport/27DSF.pdf>, (2012).

105.

International Poverty Centre: Cash transfers: lessons from Africa and Latin America. Brasilia, International Poverty Centre, <http://www.ipc-undp.org/pub/IPCPovertyInFocus15.pdf>, (2008).

106.

Lagarde, M., Haines, A., Palmer, N.: Conditional Cash Transfers for Improving Uptake of Health Interventions in Low- and Middle-Income Countries. JAMA. 298, (2007). <https://doi.org/10.1001/jama.298.16.1900>.

107.

Molyneux, M.: Mothers at the service of the New Poverty Agenda. In: Gender and social policy in a global context: uncovering the gendered structure of 'the social'. Palgrave Macmillan, Basingstoke (2006).

108.

Molyneux, M., Thomson, M.: CCT Programmes and Women's Empowerment in Peru, Bolivia and Ecuador | Policy and research from CARE Insights, <http://insights.careinternational.org.uk/publications/cct-programmes-and-womens-empowerment-in-peru-bolivia-and-ecuador>, (2012).

109.

Standing, H.: Understanding the 'demand side' in service delivery: definitions, frameworks and tools from the health sector, <http://hdrc.dfid.gov.uk/wp-content/uploads/2012/10/Understanding-the-demand-side-in-service-delivery.pdf>, (2004).

110.

UNDG: MDG Insights: Conditional cash transfers – a global perspective, http://www.unicef.org/socialpolicy/files/Conditional_Cash_Transfers_A_Global_Perspective.pdf, (2010).

111.

Harvey, S.A.: Are skilled birth attendants really skilled? A measurement method, some disturbing results and a potential way forward. Bulletin of the World Health Organization. 85, (2007). <https://doi.org/10.2471/BLT.06.038455>.

112.

Leigh, B., Mwale, T.G., Lazaro, D., Lunguzi, J.: Emergency obstetric care: How do we stand in Malawi? International Journal of Gynecology & Obstetrics. 101, 107–111 (2008). <https://doi.org/10.1016/j.ijgo.2008.01.012>.

113.

Boucar, M., Franco, L.M., Sabou et al., D.: Sustaining Better Maternal and Newborn Care and Quality Improvement in Niger: Challenges and Successes USAID Health Care Improvement Project-Research and Evaluation Report, <http://www.urc-chs.com/resources/sustaining-better-maternal-and-newborn-care-and-quality-improvement-niger-challenges-and>, (2015).

114.

BOUCHET, B.: The Zambia Quality Assurance Program: successes and challenges. *International Journal for Quality in Health Care*. 14, 89–095 (2002).

115.

Colbourn, T., Nambiar, B., Costello, A.: MaiKhanda - Final evaluation report. The impact of quality improvement at health facilities and community mobilisation by women's groups on birth outcomes: an effectiveness study in three districts of Malawi, <http://www.health.org.uk/sites/health/files/MaiKhandaFinalEvaluationReport.pdf>, (2013).

116.

Marshall, M., Pronovost, P., Dixon-Woods, M.: Promotion of improvement as a science. *The Lancet*. 381, 419–421 (2013). [https://doi.org/10.1016/S0140-6736\(12\)61850-9](https://doi.org/10.1016/S0140-6736(12)61850-9).

117.

McCoy, D., McPake, B., Mwapasa, V.: The double burden of human resource and HIV crises: a case study of Malawi. *Human Resources for Health*. 6, (2008). <https://doi.org/10.1186/1478-4491-6-16>.

118.

Mueller, D.H., Lungu, D., Acharya, A., Palmer, N.: Constraints to Implementing the Essential Health Package in Malawi. *PLoS ONE*. 6, (2011). <https://doi.org/10.1371/journal.pone.0020741>.

119.

Sustained Improvement? Findings From an Independent Case Study of the Jönköping Quality Program. *Quality Management in Health Care*. 16, 68–83 (2007).

120.

Perla, R.J., Provost, L.P., Murray, S.K.: The run chart: a simple analytical tool for learning from variation in healthcare processes. *BMJ Quality & Safety*. 20, 46–51 (2011). <https://doi.org/10.1136/bmjqs.2009.037895>.

121.

Republic of Malawi Ministry of Health: Road Map for Accelerating the reduction of Maternal and Neonatal Morbidity and Mortality in Malawi,
<http://www.healthynewbornnetwork.org/hnn-content/uploads/Malawi-Roadmap-for-Reducing-MN-mortality-2012.pdf>.

122.

Republic of Malawi Ministry of Health: Health Sector Strategic Plan 2011-2016. Moving towards equity and quality,
http://www.nationalplanningcycles.org/sites/default/files/country_docs/Malawi/2_malawi_hssp_2011_-2016_final_document_1.pdf.

123.

Santos, C., Diante, D., Baptista, A., Matediane, E., Bique, C., Bailey, P.: Improving emergency obstetric care in Mozambique: The story of Sofala. *International Journal of Gynecology & Obstetrics*. 94, 190–201 (2006). <https://doi.org/10.1016/j.ijgo.2006.05.024>.

124.

Schouten, L.M.T., Hulscher, M.E.J.L., Everdingen, J.J.E. v., Huijsman, R., Grol, R.P.T.M.: Evidence for the impact of quality improvement collaboratives: systematic review. *BMJ*. 336, 1491–1494 (2008). <https://doi.org/10.1136/bmj.39570.749884.BE>.

125.

Campbell, C., Scott, K.: Retreat from Alma Ata? The WHO's report on Task Shifting to community health workers for AIDS care in poor countries. *Global Public Health*. 6, 125–138 (2011). <https://doi.org/10.1080/17441690903334232>.

126.

Chen, L., Evans, T., Anand, S., Boufford, J.I., Brown, H., Chowdhury, M., Cueto, M., Dare, L., Dussault, G., Elzinga, G., Fee, E., Habte, D., Hanvoravongchai, P., Jacobs, M., Kurowski, C., Michael, S., Pablos-Mendez, A., Sewankambo, N., Solimano, G., Stilwell, B., de Waal, A., Wibulpolprasert, S.: Human resources for health: overcoming the crisis. *The Lancet*. 364, 1984–1990 (2004). [https://doi.org/10.1016/S0140-6736\(04\)17482-5](https://doi.org/10.1016/S0140-6736(04)17482-5).

127.

Campbell et al., J.: A Universal Truth: No Health Without a Workforce, <http://www.who.int/workforcealliance/knowledge/resources/hrhreport2013/en/>, (2014).

128.

McPake, B.: Why do health labour market forces matter? Bulletin of the World Health Organization. 91, (2013). <https://doi.org/10.2471/BLT.13.118794>.

129.

Mussa, A.H.: Vertical funding, non-governmental organizations, and health system strengthening: perspectives of public sector health workers in Mozambique. Human Resources for Health. 11, (2013). <https://doi.org/10.1186/1478-4491-11-26>.

130.

Soucat et al., A.: The Labor Market for Health Workers in Africa: A New Look at the Crisis, <https://openknowledge.worldbank.org/bitstream/handle/10986/13824/82557.pdf?sequence=5>, (2013).

131.

World Health Organization: The World Health Report 2006 - working together for health, <http://www.who.int/whr/2006/en/>, (2006).

132.

Health workforce, http://www.who.int/topics/health_workforce/en/.

133.

Aiken, L.H.: U.S. Nurse Labor Market Dynamics Are Key to Global Nurse Sufficiency. Health Services Research. 42, (2007). <https://doi.org/10.1111/j.1475-6773.2007.00714.x>.

134.

Anand, S., Bärnighausen, T.: Human resources and health outcomes: cross-country econometric study. *The Lancet*. 364, 1603–1609 (2004).
[https://doi.org/10.1016/S0140-6736\(04\)17313-3](https://doi.org/10.1016/S0140-6736(04)17313-3).

135.

Bach, S.: Going Global? The Regulation of Nurse Migration in the UK. *British Journal of Industrial Relations*. 45, 383–403 (2007).
<https://doi.org/10.1111/j.1467-8543.2007.00619.x>.

136.

Buchan, J.: Challenges for WHO code on international recruitment. *BMJ*. 340, c1486–c1486 (2010). <https://doi.org/10.1136/bmj.c1486>.

137.

Buchan, J.: Does a code make a difference – assessing the English code of practice on international recruitment. *Human Resources for Health*. 7, (2009).
<https://doi.org/10.1186/1478-4491-7-33>.

138.

Bueno de Mesquita, J., Gordon, M.: The international migration of health workers: a human rights perspective,
<http://www.equinetafrica.org/sites/default/files/uploads/documents/BUehres.pdf>, (2005).

139.

James Campbell: Human resources for health and universal health coverage: fostering equity and effective coverage. *Bulletin of the World Health Organization*. 91, (2013).
<https://doi.org/10.2471/BLT.13.118729>.

140.

Clemens, M.: Do Visas Kill? Health Effects of African Health Professional Emigration - Working Paper 114 | Center For Global Development,
<http://www.cgdev.org/publication/do-visas-kill-health-effects-african-health-professional-emigration-working-paper-114>, (2007).

141.

Department of Health: Code of practice for the international recruitment of healthcare professionals,
http://webarchive.nationalarchives.gov.uk/20130107105354/http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4097730, (2004).

142.

Eastwood, J., Conroy, R., Naicker, S., West, P., Tutt, R., Plange-Rhule, J.: Loss of health professionals from sub-Saharan Africa: the pivotal role of the UK. *The Lancet*. 365, 1893–1900 (2005). [https://doi.org/10.1016/S0140-6736\(05\)66623-8](https://doi.org/10.1016/S0140-6736(05)66623-8).

143.

Global Health Workforce Alliance, <http://www.who.int/workforcealliance/en/>.

144.

Amy Hagopian: The migration of physicians from sub-Saharan Africa to the United States of America: measures of the African brain drain. *Human Resources for Health*. 2, (2004). <https://doi.org/10.1186/1478-4491-2-17>.

145.

Kanchanachitra, C., Lindelow, M., Johnston, T., Hanvoravongchai, P., Lorenzo, F.M., Huong, N.L., Wilopo, S.A., dela Rosa, J.F.: Human resources for health in southeast Asia: shortages, distributional challenges, and international trade in health services. *The Lancet*. 377, 769–781 (2011). [https://doi.org/10.1016/S0140-6736\(10\)62035-1](https://doi.org/10.1016/S0140-6736(10)62035-1).

146.

Kollar, E., Buyx, A.: Ethics and policy of medical brain drain: a review. *Swiss Medical Weekly*. <https://doi.org/10.4414/smww.2013.13845>.

147.

Little, L., Buchan, J.: Nursing self-sufficiency / sustainability in the global context,

http://www.intlnursemigration.org/wp-content/uploads/2014/10/SelfSufficiency_EURO.pdf, (2007).

148.

Mackey, T.K., Liang, B.A.: Rebalancing brain drain: Exploring resource reallocation to address health worker migration and promote global health. *Health Policy*. 107, 66–73 (2012). <https://doi.org/10.1016/j.healthpol.2012.04.006>.

149.

Mackintosh, M., Mensah, K., Henry, L., Rowson, M.: Aid, restitution and international fiscal redistribution in health care: implications of health professionals' migration. *Journal of International Development*. 18, 757–770 (2006). <https://doi.org/10.1002/jid.1312>.

150.

Marchal, B., Kegels, G.: Health workforce imbalances in times of globalization: brain drain or professional mobility? *The International Journal of Health Planning and Management*. 18, S89–S101 (2003). <https://doi.org/10.1002/hpm.720>.

151.

Mensah, K., Mackintosh, M., Henry, L.: The 'skills drain' of health professionals from developing countries: a framework for policy formulation, <http://www.medact.org/wp-content/uploads/2014/03/2.-the-skills-drain-of-health-professionals.pdf>, (2005).

152.

Mills, E.J., Kanter, S., Hagopian, A., Bansback, N., Nachega, J., Alberton, M., Au-Yeung, C.G., Mtambo, A., Bourgeault, I.L., Luboga, S., Hogg, R.S., Ford, N.: The financial cost of doctors emigrating from sub-Saharan Africa: human capital analysis. *BMJ*. 343, d7031–d7031 (2011). <https://doi.org/10.1136/bmj.d7031>.

153.

OECD: The looming crisis in the health workforce: how can OECD countries respond?, http://www.who.int/hrh/migration/looming_crisis_health_workforce.pdf, (2008).

154.

OECD/WHO: International migration of health workers: improving international cooperation to address the global health workforce crisis.,
http://www.who.int/hrh/resources/oecd-who_policy_brief_en.pdf, (2010).

155.

Plotnikova, E.V.: Cross-border mobility of health professionals: Contesting patients' right to health. *Social Science & Medicine*. 74, 20-27 (2012).
<https://doi.org/10.1016/j.socscimed.2011.02.012>.

156.

Amani Siyam: Monitoring the implementation of the WHO Global Code of Practice on the International Recruitment of Health Personnel. *Bulletin of the World Health Organization*. 91, (2013). <https://doi.org/10.2471/BLT.13.118778>.

157.

Taylor, A.L., Dhillon, I.: The WHO Global Code of Practice on the International Recruitment of Health Personnel: The Evolution of Global Health Diplomacy. *Global Health Governance*. 5, 1-24 (2011).

158.

WHO: WHO code of practice on the international recruitment of health personnel.,
<http://www.who.int/hrh/migration/code/practice/en/>, (2010).

159.

Young, R., Noble, J., Mahon, A., Maxted, M., Grant, J., Sibbald, B.: Evaluation of international recruitment of health professionals in England. *Journal of Health Services Research & Policy*. 15, 195-203 (2010). <https://doi.org/10.1258/jhsrp.2010.009068>.

160.

Callaghan, M., Ford, N., Schneider, H.: A systematic review of task- shifting for HIV

treatment and care in Africa. *Human Resources for Health*. 8, (2010).
<https://doi.org/10.1186/1478-4491-8-8>.

161.

Chandhiok, N., Joglekar, N., Shrotri, A., Choudhury, P., Chaudhury, N., Singh, S.: Task-shifting challenges for provision of skilled birth attendance: a qualitative exploration. *International Health*. 7, 195–203 (2015). <https://doi.org/10.1093/inthealth/ihu048>.

162.

Dovlo, D.: Using mid-level cadres as substitutes for internationally mobile health professionals in Africa. A desk review. *Human Resources for Health*. 2, (2004).
<https://doi.org/10.1186/1478-4491-2-7>.

163.

Fulton, B.D., Scheffler, R.M., Sparkes, S.P., Auh, E.Y., Vujicic, M., Soucat, A.: Health workforce skill mix and task shifting in low income countries: a review of recent evidence. *Human Resources for Health*. 9, (2011). <https://doi.org/10.1186/1478-4491-9-1>.

164.

Gilmore, B., McAuliffe, E.: Effectiveness of community health workers delivering preventive interventions for maternal and child health in low- and middle-income countries: a systematic review. *BMC Public Health*. 13, (2013).
<https://doi.org/10.1186/1471-2458-13-847>.

165.

Zohra S Lassi: Quality of care provided by mid-level health workers: systematic review and meta-analysis. *Bulletin of the World Health Organization*. 91, (2013).
<https://doi.org/10.2471/BLT.13.118786>.

166.

Lehmann, U., Sanders, D.: Community Health Workers: what do we know about them? The state of evidence on programmes, activities, costs and impact on health outcomes of using community health workers,
http://www.who.int/hrh/documents/community_health_workers.pdf, (2007).

167.

Lehmann, U.: Mid-level Health Workers. The state of the evidence on programmes, activities, costs and impact on health outcomes A literature review, http://www.who.int/workforcealliance/knowledge/resources/mlp_review/en/, (2008).

168.

Lipp, A.: Lay Health Workers in Primary and Community Health Care for Maternal and Child Health and the Management of Infectious Diseases: A Review Synopsis. *Public Health Nursing*. 28, 243–245 (2011). <https://doi.org/10.1111/j.1525-1446.2011.00950.x>.

169.

McPake, B., Mensah, K.: Task shifting in health care in resource-poor countries. *The Lancet*. 372, 870–871 (2008). [https://doi.org/10.1016/S0140-6736\(08\)61375-6](https://doi.org/10.1016/S0140-6736(08)61375-6).

170.

Mullan, F., Frehywot, S.: Non-physician clinicians in 47 sub-Saharan African countries. *The Lancet*. 370, 2158–2163 (2007). [https://doi.org/10.1016/S0140-6736\(07\)60785-5](https://doi.org/10.1016/S0140-6736(07)60785-5).

171.

Perry, H.B., Zulliger, R., Rogers, M.M.: Community Health Workers in Low-, Middle-, and High-Income Countries: An Overview of Their History, Recent Evolution, and Current Effectiveness. *Annual Review of Public Health*. 35, 399–421 (2014). <https://doi.org/10.1146/annurev-publhealth-032013-182354>.

172.

Samb, B., Celletti, F., Holloway, J., Van Damme, W., De Cock, K.M., Dybul, M.: Rapid Expansion of the Health Workforce in Response to the HIV Epidemic. *New England Journal of Medicine*. 357, 2510–2514 (2007). <https://doi.org/10.1056/NEJMs071889>.

173.

Schneider, H., Hlophe, H., van Rensburg, D.: Community health workers and the response

to HIV/AIDS in South Africa: tensions and prospects. *Health Policy and Planning*. 23, 179–187 (2008). <https://doi.org/10.1093/heapol/czn006>.

174.

Kate Tulenko: Community health workers for universal health-care coverage: from fragmentation to synergy. *Bulletin of the World Health Organization*. 91, (2013). <https://doi.org/10.2471/BLT.13.118745>.

175.

UNFPA: The State of the World's Midwifery, <http://www.unfpa.org/publications/state-worlds-midwifery-2011>, (2011).

176.

Campbell, C., Cornish, F.: How Can Community Health Programmes Build Enabling Environments for Transformative Communication? Experiences from India and South Africa. *AIDS and Behavior*. 16, 847–857 (2012). <https://doi.org/10.1007/s10461-011-9966-2>.

177.

Perry, H.B., Zulliger, R., Rogers, M.M.: Community Health Workers in Low-, Middle-, and High-Income Countries: An Overview of Their History, Recent Evolution, and Current Effectiveness. *Annual Review of Public Health*. 35, 399–421 (2014). <https://doi.org/10.1146/annurev-publhealth-032013-182354>.

178.

Yip, W., Hsiao, W.: Harnessing the privatisation of China's fragmented health-care delivery. *The Lancet*. 384, 805–818 (2014). [https://doi.org/10.1016/S0140-6736\(14\)61120-X](https://doi.org/10.1016/S0140-6736(14)61120-X).

179.

Anand, P., Higginson, M.: Health and health care: markets, ethics and inequality. In: *Economics and economic change*. Prentice Hall Financial Times, Harlow (2006).

180.

Basu, S., Andrews, J., Kishore, S., Panjabi, R., Stuckler, D.: Comparative Performance of Private and Public Healthcare Systems in Low- and Middle-Income Countries: A Systematic Review. *PLoS Medicine*. 9, (2012). <https://doi.org/10.1371/journal.pmed.1001244>.

181.

Berendes, S., Heywood, P., Oliver, S., Garner, P.: Quality of Private and Public Ambulatory Health Care in Low and Middle Income Countries: Systematic Review of Comparative Studies. *PLoS Medicine*. 8, (2011). <https://doi.org/10.1371/journal.pmed.1000433>.

182.

Berlan, D., Shiffman, J.: Holding health providers in developing countries accountable to consumers: a synthesis of relevant scholarship. *Health Policy and Planning*. 27, 271–280 (2012). <https://doi.org/10.1093/heapol/czr036>.

183.

Bloom, G., Henson, S., Peters, D.H.: Innovation in regulation of rapidly changing health markets. *Globalization and Health*. 10, (2014). <https://doi.org/10.1186/1744-8603-10-53>.

184.

Boone, P., Zhan, Z.: Lowering child mortality in poor countries: the power of knowledgeable parents. (2006).

185.

Das et al., J.: The quality of medical advice in low-income countries. Policy Research Working Paper 4501, <https://openknowledge.worldbank.org/bitstream/handle/10986/6393/wps4501.pdf?sequence=1>, (2008).

186.

Dong, L., Christensen, T., Painter, M.: Health Care Reform in China: An Analysis of Development Trends and Lack of Implementation. *International Public Management*

Journal. 17, 493–514 (2014). <https://doi.org/10.1080/10967494.2014.958802>.

187.

Equitap (Equity in Asia-Pacific Health Systems) research project,
<http://www.equitap.org/index.html>.

188.

Gilson, L., Kalyalya, D., Kuchler, F., Lake, S., Oranga, H., Ouendo, M.: Strategies for promoting equity: experience with community financing in three African countries. *Health Policy*. 58, 37–67 (2001). [https://doi.org/10.1016/S0168-8510\(01\)00153-1](https://doi.org/10.1016/S0168-8510(01)00153-1).

189.

Gruber, J., Sekhon, J.S.: Fundamental health care reform for the United States. *Significance*. 7, 122–127 (2010). <https://doi.org/10.1111/j.1740-9713.2010.00439.x>.

190.

Gwatkin, D.R.: Are free government health services the best way to reach to poor?,
<http://documents.worldbank.org/curated/en/321281468782345856/Are-free-government-health-services-the-best-way-to-reach-to-poor>, (2004).

191.

Hanson, K., Gilson, L., Goodman, C., Mills, A., Smith, R., Feachem, R., Feachem, N.S., Koehlmoos, T.P., Kinlaw, H.: Is Private Health Care the Answer to the Health Problems of the World's Poor? *PLoS Medicine*. 5, (2008). <https://doi.org/10.1371/journal.pmed.0050233>.

192.

Harding, A., Center for Global Development: Partnerships with the Private Sector in Health
| Center For Global Development,
<http://www.cgdev.org/publication/partnerships-private-sector-health>, (2009).

193.

International Finance Corporation: Healthy Partnerships : How Governments Can Engage the Private Sector to Improve Health in Africa, <https://openknowledge.worldbank.org/handle/10986/2304>, (2011).

194.

Knowles, S., Owen, P.D.: Which Institutions are Good for Your Health? The Deep Determinants of Comparative Cross-country Health Status. *Journal of Development Studies*. 46, 701–723 (2010). <https://doi.org/10.1080/00220380903428399>.

195.

Lagarde, M., Palmer, N.: The impact of contracting out on health outcomes and use of health services in low and middle-income countries. In: *Cochrane Database of Systematic Reviews*. John Wiley & Sons, Ltd, Chichester, UK (1996). <https://doi.org/10.1002/14651858.CD008133>.

196.

Lagomarsino, G., Nachuk, S., Kundra, S.: Public stewardship of private providers in mixed health systems: synthesis report from the Rockefeller Foundation-sponsored initiative on the role of the private sector in health systems., <https://www.r4d.org/wp-content/uploads/Public-Stewardship-of-Private-Providers-in-Mixed-Health-Systems.pdf>, (2009).

197.

Laurrell, A.-C., Zepeda, E., Mussot, L.: Eliminating economic barriers for the poor in health care: the Mexico City government experience. In: *Commercialization of health care: global and local dynamics and policy responses*. Palgrave Macmillan, Basingstoke (2005).

198.

Leonard, D.K.: 'Pockets' of effective agencies in weak governance states: Where are they likely and why does it matter? *Public Administration and Development*. 30, 91–101 (2010). <https://doi.org/10.1002/pad.565>.

199.

Leonard, D.K., Bloom, G., Hanson, K., O'Farrell, J., Spicer, N.: *Institutional Solutions to the*

Asymmetric Information Problem in Health and Development Services for the Poor. *World Development*. 48, 71–87 (2013). <https://doi.org/10.1016/j.worlddev.2013.04.003>.

200.

Loevinsohn, B., Harding, A.: Buying results? Contracting for health service delivery in developing countries. *The Lancet*. 366, 676–681 (2005). [https://doi.org/10.1016/S0140-6736\(05\)67140-1](https://doi.org/10.1016/S0140-6736(05)67140-1).

201.

Leon, D.A., Walt, G.: Do health care systems contribute to inequalities? In: *Poverty, Inequality, and Health*. pp. 175–193. Oxford University Press (2000). <https://doi.org/10.1093/acprof:oso/9780192631961.003.0009>.

202.

Mackintosh, M., Tibandebage, P.: Inclusion by Design? Rethinking Health Care Market Regulation in the Tanzanian Context. *Journal of Development Studies*. 39, 1–20 (2002). <https://doi.org/10.1080/713601263>.

203.

Mackintosh, M., Koivusalo, M.: Health Systems and Commercialization: In Search of Good Sense | Publications | UNRISD, [http://www.unrisd.org/80256B3C005BCCF9/\(httpPublications\)/32A160C292F57BBEC1256ED10049F965](http://www.unrisd.org/80256B3C005BCCF9/(httpPublications)/32A160C292F57BBEC1256ED10049F965), (2004).

204.

Mackintosh, M., Koivusalo, M., United Nations Research Institute for Social Development: Commercialization of health care: global and local dynamics and policy responses. Palgrave Macmillan, Basingstoke (2005).

205.

Masiye, F., Chitah, B.M., McIntyre, D.: From targeted exemptions to user fee abolition in health care: Experience from rural Zambia. *Social Science & Medicine*. 71, 743–750 (2010). <https://doi.org/10.1016/j.socscimed.2010.04.029>.

206.

McIntyre, D., Thiede, M., Dahlgren, G., Whitehead, M.: What are the economic consequences for households of illness and of paying for health care in low- and middle-income country contexts? *Social Science & Medicine*. 62, 858–865 (2006). <https://doi.org/10.1016/j.socscimed.2005.07.001>.

207.

McIntyre, D.: Beyond fragmentation and towards universal coverage: insights from Ghana, South Africa and the United Republic of Tanzania. *Bulletin of the World Health Organization*. 86, (2008). <https://doi.org/10.2471/BLT.08.053413>.

208.

McKinsey: Health care in Africa: A vital role for the private sector - McKinsey on Society, <http://mckinseyonsociety.com/the-business-of-health-in-africa/>, (2008).

209.

Oxfam: Blind optimism: challenging the myths about private health care in poor countries., <https://www.oxfam.org/en/research/blind-optimism>.

210.

Palmer, N.: Contracting out health services in fragile states. *BMJ*. 332, 718–721 (2006). <https://doi.org/10.1136/bmj.332.7543.718>.

211.

Patouillard, E., Goodman, C.A., Hanson, K.G., Mills, A.J.: Can working with the private for-profit sector improve utilization of quality health services by the poor? A systematic review of the literature. *International Journal for Equity in Health*. 6, (2007). <https://doi.org/10.1186/1475-9276-6-17>.

212.

Harding, A., Preker, A.S. eds: Private participation in health services. The World Bank,

Washington, DC (2003).

213.

Rockefeller Foundation: Catalyzing Change: The System Reform Costs of Universal Health Coverage,
http://www.issuelab.org/resource/catalyzing_change_the_system_reform_costs_of_universal_health_coverage, (2010).

214.

Savedoff, W.D., de Ferranti, D., Smith, A.L., Fan, V.: Political and economic aspects of the transition to universal health coverage. *The Lancet*. 380, 924–932 (2012).
[https://doi.org/10.1016/S0140-6736\(12\)61083-6](https://doi.org/10.1016/S0140-6736(12)61083-6).

215.

Shah, N.M., Brieger, W.R., Peters, D.H.: Can interventions improve health services from informal private providers in low and middle-income countries? A comprehensive review of the literature. *Health Policy and Planning*. 26, 275–287 (2011).
<https://doi.org/10.1093/heapol/czq074>.

216.

Tibandebage, P., Mackintosh, M., Kida, T.: The public-private interface in public services reforms: analysis and illustrative evidence from the Tanzanian health sector. IKD Working Paper No. 66,
<http://www.open.ac.uk/ikd/sites/www.open.ac.uk.ikd/files/files/working-papers/ikd-working-paper-66.pdf>, (2013).

217.

van Doorslaer, E., O'Donnell, O., Rannan-Eliya, R.P., Somanathan, A., Adhikari, S.R., Garg, C.C., Harbianto, D., Herrin, A.N., Huq, M.N., Ibragimova, S., Karan, A., Ng, C.W., Pande, B.R., Racelis, R., Tao, S., Tin, K., Tisayaticom, K., Trisnantoro, L., Vasavid, C., Zhao, Y.: Effect of payments for health care on poverty estimates in 11 countries in Asia: an analysis of household survey data. *The Lancet*. 368, 1357–1364 (2006).
[https://doi.org/10.1016/S0140-6736\(06\)69560-3](https://doi.org/10.1016/S0140-6736(06)69560-3).

218.

Waitzkin, H., Jasso-Aguilar, R., Iriart, C.: Privatization of Health Services in Less Developed Countries: An Empirical Response to the Proposals of the World Bank and Wharton School. *International Journal of Health Services*. 37, 205–227 (2007).
<https://doi.org/10.2190/A1U4-7612-5052-6053>.

219.

Wang, C., Rao, K., Wu, S., Liu, Q.: Health Care in China. *Chest*. 143, 524–531 (2013).
<https://doi.org/10.1378/chest.12-1839>.

220.

WHO: Health systems financing: the path to universal coverage,
<http://www.who.int/whr/2010/en/>, (2010).