Lessons and options for universal health coverage with special reference to privatisation policies in health care: the case of Australia and Ghana

Beth Cook  
Beth.Cook@newcastle.edu.au

and

Janet Dzator  
Janet.Dzator@newcastle.edu.au

University of Newcastle, NSW 2308, Australia

Abstract

In the aftermath of the economic crisis of the 1970s neoliberal policies including the pursuit of balanced or surplus budgets, deregulation, and privatisation, were actively promoted and enforced by international organisations such as the IMF, World Bank and the OECD. There has been an international trend toward increased private sector delivery of health services, fuelled by rising health costs associated with expensive technology, the labour intensive nature of health care, population ageing and growing dependency ratios.

This paper investigates health policy changes in Australia and Ghana, comparing transformations in financing and delivery arrangements designed to modify coverage, efficiency and utilisation. Adopting a broad political economy approach we examine specific mechanisms and institutional processes, along with economic justifications and political strategies employed to alter the public/private balance in the mixed economy approach to health provision. Policy impacts will be assessed using data sources including policy statements, annual reports of government departments, contracts with private providers, and health statistics including: Living Standard Surveys, and Demographic and Health Surveys from Ghana, and Australian National Health Surveys

Many studies have examined the effect of health policies on access, coverage and consumer behaviour, but rarely include case studies from both developed and developing countries. The significance of this North-South comparative approach is that it illuminates differences and similarities in the formulation and impact of health policies in countries with significant differences in social and economic development, providing opportunities for policy learning and transfer.