

Abstract

Background

Public private partnership and intergraded services would be the future strategies for maintaining equitable and accessible health services in most of the countries. Purpose of this study was to determine the private sector contribution and to describe the public-private partnership in immunization service provision in Sri Lanka. Methods A community based cross sectional descriptive study was conducted using a pre-tested interviewer administered structured questionnaire. This was done in Colombo Municipal Council area using modified WHO 30 cluster-methodology with improved precision. The total number of households in the sample was 553.

Results

Out of 553 households studied, 104 (19%) used the private sector exclusively for childhood immunization and 99[17.9%] received shared care from private and public sectors. Main reasons given for using private sector by these mixed users were availability of non-EPI vaccines [11.7%] and combined vaccines [6.1%] and efficiency of services [10.7%]. Public sector users were more satisfied regarding competency of vaccinator [78.9%] and quality of vaccines received [68.4%], compared to private sector users[50% and 44.2% respectively]. Fifty seven [54.82%] private sector users, compared to 320 [91.4%] public sector users, received the service of public health field workers. Private sector providers have shared the government issued immunization records for recording immunization data among majority of [64.6%] mix users. Conclusions and impact In the capital of Sri Lanka where the private sector contribution to childhood immunization is believed to be highest, the partnership and shared care is not up to satisfactory level. People who are using private sector for immunization services are deprived of some of the other essential services provided by field health workers. This understanding is essential to improve not only the quality of immunization service care provision, but also for other public health services.