

Summary of the proposals submitted under the BHSRC Grant

Primary Healthcare Innovations

- Institute of Public Health, Bangalore
- ISB, Hyderabad

Overview. While strategizing for the future, an in-depth understanding of the lessons learnt from primary care innovations, programs, policies, and reforms is useful to inform decisions, is a must. This research seeks to identify reforms in primary care in India over the last 3 decades and critically analyze them using a systems lens to understand what worked and why. It also aims to describe each of these reforms, develop a taxonomy for the models to deliver primary care and critically analyze implementation of the reforms to identify lessons and strategies for the future.

Rationale and objectives

- Identification of policies and programs that have had a sustained effect on the delivery of primary care services is a first step in understanding the impact of these reforms over time.
- Critically analyzing reforms can give important insights for the future. It enables an assessment of the impact of the reform on the health system and health outcomes. It also gives insight into how these were implemented or not and why the changes did or did not occur using a systems lens.
- The development of a taxonomy that identifies elements of primary care delivery and the model of delivery will enable comparisons between programs and with other countries. This is essential to draw meaningful conclusions for future directions.
- A taxonomy and the lessons learned from a systematic study of primary care reforms with due attention to the context and larger influencing factors (systems thinking) is useful to policymakers as they devise reforms for universal health coverage and strengthening primary care.

Research design: A mixed methods approach, using both qualitative and quantitative methods for primary data and secondary data collection and analysis. A thorough, systematic and detailed review of literature will be undertaken to identify primary care reforms and programs that have been implemented with significant impacts. At 16 sites that would be a total of 80 interviews will be conducted for primary research.

Data collection teams will visit the selected sites to collect data by observation, in-depth interviews, *Quantitative data* collection and *Document review* - All relevant documents such as objectives of the program, reports or publications related to the program will be collected. Also, policies related to health that may have impacted the program will be collected.

Output

The outputs from the study will serve to understand primary care delivery in India. The systematic documentation and identification of a taxonomy will be a contribution to the existing literature.