

Priya Balasubramaniam

Health Policy and Systems Research Contribution Highlights

Through her implementation research, active public outreach and sustained policy engagement with regional and states governments, across South and Southeast Asia. Dr. Balasubramaniam has played a central role in advocating role of technology social innovation and urban environments in shaping policy and building capacity in pluralistic health systems

My journey: Healthcare systems are interlinked with other equally complex systems in society. Personal values and culture, political rivalries and agendas, scientific developments, academic competition are often seen independently of each other, but in fact often contribute ripples and knock-on effects throughout society and its nested systems. The inherent messiness of country health systems has enabled me explore this space as a health practitioner, researcher and entrepreneur -allowing me to interact with diverse stakeholders involved in tackling health care challenges in unique ways: through innovation, evidence creation, bold policies and advocacy. My approach to health systems field building has been influenced along these lines. Some of my work and focus areas are along the following lines:

One, Public health policy implementation through a health system lens. There is no one blueprint for strong health systems – in a post COVID world, the public will become increasingly responsible for co-creating the healthcare landscape they want or believe in. This will mean we as health system stakeholders will have to rethink our own roles in healthcare consumption, advocacy, financing, access and delivery –in my position as Senior Public Health Scientist at the Public Health Foundation of India, I was Secretariat director for the Universal Health Coverage Initiative (www.uhcindia.org), one of India’s seminal health policy exercises on health governance and systems reform coordinating diverse multidisciplinary teams across eight terms of reference in one of the biggest baseline evidence gathering exercises in the country and co-authored the Government of India’s High Level Expert Group recommendations on universal health coverage as part of the country’s 12th Five Year Plan.

Two, encouraging locally driven evidence and innovations in the global south. Policy processes increasingly operate from global to local scales (i.e. within and between global health hubs and national health systems) and involve a range of partners – in government, funding agencies and civil society with diverse agendas who interpret, appropriate and encounter policies differently. This had led the need to create more equal and synergistic relationships in global health and development bringing together health system actors in the global south. As an entrepreneur director of the Centre for Sustainable Health Innovations, I co-founded the first of its kind “Innovations for [Universal Health Coverage Partnership](http://www.uhcinnovations.com)” (www.uhcinnovations.com) with Amref Health Africa and the Institute of Development Studies, Sussex to initiate south-south dialogues around leveraging the transformational potential of low-cost technological innovations and new models of healthcare in progressing UHC in low- and middle-income countries in Asia and Africa. I co-led a series of mentorship conclaves in 2018-2019 held in India, Vietnam and Rwanda The conclave brought together technology innovators, investors, government officials and public and private sector health

service providers to consider practical strategies for transforming health care delivery in Asia and Africa

Three, Moving the needle on new kinds of learning. Health systems are dynamic and unpredictable. We need to acknowledge new disruptors to old orders and models that include role of non-state actors, digital technologies, and low-cost innovations that are empowering communities and changing and how we research, learn and generate evidence. This requires new research approaches and new type of research questions that are open to experimentation, innovation and viewing the role of researchers as potential enablers of change. The role of health diplomacy amidst geopolitical shifts, the resilience of communities to withstand health shocks and new universal health system models will all be part of new dialogues with new actors.

In my work around the private health sector as a coordinating member of the Private Sector Thematic Working group at HSG, [From June to November 2020](#), I co-led a series of six virtual consultations were held that convened over three hundred participants including company CEO's and senior executives of national and transnational health sector companies, not-for-profit organisations, senior government officials, elected officials from a number of countries, and officials in bilateral and multi-lateral development agencies to identify and learn from innovative collaborations between governments and the private sector in response to COVID-19 and their lessons for health systems resilience. The consultations explored new kinds of partnership between the private health sector and the state that have been established before and during the COVID-19 pandemic. These concern provision of health services, improved access to diagnostics, AI-based telemedicine, technology-based supply chains, digital surveillance and tracking and private equity funds to scale last miles gaps through technological innovations. The consultations demonstrated the feasibility and demand for a [Platform for Mutual Learning, Research and Engagement](#) of Mixed Health Systems to support more effective contribution of the private sector to national strategies for universal health coverage.

As part of the PSIH TWG I also contributed to the Private Sector HSR2018 Satellite Session Engaging Private Providers in Low and Middle Income Countries Strengthening Quality of Care and Effective Regulation with an organized session on New Private and [Digital Health Technologies in Health System Capacity Building](#).

And finally to advocate for the transformative potential for digital technologies to be accompanied by regulation and thoughtful application to ensure the immediate needs of the poorest and most marginalised communities are met. Spearheaded projects around health services delivery that includes a partnership with the [Consortia of Affordable Technologies](#) (CamTech) a partnership with Harvard University and Massachusetts General Hospital to incubate and support early-stage affordable health system technologies for LMICs to improve reproductive, maternal, newborn, and child health outcomes in in Asia and Africa and the Grand Challenges Grant winner, the Biodiaspora Partnership that tracks and models infectious and vector borne disease through human movement patterns.

[Blogs and Media Articles](#)

- [A Voice From the Front Line: Reaching out of the box to engage private non-state healthcare actors in LMICs to combat COVID-19](#) on 2 June, 2020
- [Public and Private Partnerships in Fragile and Conflict Affected Settings](#) on 5 November 2020
- [Small pharmacies to private GPs: India must engage informal economies in fighting coronavirus](#)
- [Mobilising informal healthcare providers in India may help its response to covid-19](#) on 24 June in BMJ.
- Finding Opportunities in a Crisis: re-imagining health governance in a post Covid-19 world. Ali, Ibrahim; Balasubramaniam, Priya; Berland, Alex; MacVane Phipps, Fiona. International Journal of Health Governance, Editorial ijhg-10-2020-0119
- [COVID-19 management lessons for India from across the world](#). Published on: Aug 20, 2020
- [Reinventing health systems in fragile states: the role of the private sector](#), October 2019

SELECT PRESENTATIONS & INVITED TALKS

- **Bogeyman or Blessing? - Implications of Artificial Intelligence in delivering health to all.** Sixth Global Symposium on Health Systems Research Re-imagining health systems for better health and social justice. Dubai Virtual Conference 2020-21
- **Harnessing Urban Private Enterprise for Equitable Public Service Delivery.** 15th International Conference on Urban Health, Managing Urbanisation for Health: A Priority for All Nations, Kampala, Uganda 2018.
- **McQuality and HealthBucks – What can fast-food franchises teach us about health service delivery and quality of care? Lessons from disruptive innovators in public and private sectors.** Fifth Global Symposium on Health Systems Research Advancing health systems for all in the SDG era Liverpool, UK – October, 2018
- International Society for Urban Health. **Malaria management as a bellwether for efficient urban governance: findings from a western Indian megacity & Municipal Governance at the heart of healthy cities Public health service delivery in three Megapolises.** (Plenary) 14th International Conference on Urban Health (ICUH), Health Equity: The New Urban Agenda and Sustainable Development Goals, Coimbra, Portugal, September 2017
- International Health Economics Association, , **Innovating for Scaling for Impact- Low Cost Health Technologies that stimulate innovations at scale,** iHEA Congress: Revolutions in the Economics of Health Systems Boston, June 2017
- Power and Accountability Conclave, Institute of Development Studies, Bristol, Sussex, **Urban Health Governance and changing provider dynamics. Lessons from 3 countries.** July 2117
- Special Talk, Tsao Foundation, Singapore. **Universal Health Coverage & Innovation , Learning from Country Health Systems,** April 2017
- Session Chair, **Scaling up Infectious and Chronic Disease Surveillance- New platforms for health systems innovation.** L.V. Prasad Eye Institute. Hyderabad India. August 2015,
- **Building Health Systems Capacities in LMIC's – a country perspective.** ESSEC Asia-Pacific Conference of Health Sector Innovations, Singapore. June 2015,