

INPLASY PROTOCOL

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None declared.

The role of private sector in global health: A Scoping Review Protocol

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Review question / Objective: The research question is: What role does the private sector play in global health? Our scoping review aims to: 1) provide a systematic overview of existing relevant research on private sector involved in global health activities; 2) identify the various types of roles that for-profit private sector play in global health; and 3) comprehensively summarize those roles and explore related research gaps in this research domain.

Background: Private sectors play an important role in global health in most of the world's health systems. Some critical services provided by private sectors in combating the COVID-19 pandemic significantly mitigated the negative consequences. Thus, it is necessary to conduct a scoping review to investigate the role of the private sector in global health comprehensively and systemically.

INPLASY registration number: This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 08 July 2022 and was last updated on 08 July 2022 (registration number INPLASY202270040).

INTRODUCTION

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the world's health systems. Some critical services provided by private sectors in combating the COVID-19 pandemic significantly mitigated the negative consequences. Thus, it is necessary to conduct a scoping review to investigate the role of the private sector in global health comprehensively and systemically.

Rationale: A Scoping Review of how the academia has identified private sector's roles in global health contributes to better global health-relevant decision-making for policymakers and better global health participation for private sector.

METHODS

Search strategy: From June 9 to June 18 2022, we conducted extensive literature retrieval with the assistance of an information specialist. Ten bibliographic databases, including EMBASE, PubMed, Web of Science, Cochrane Library, ProQuest ABI/Inform, Scopus, EBSCO, SSRN, and Science direct, were systematically searched to retrieve the potential literature. We also conducted an additional search of grey literature in Google scholar and WHO. To ensure that all relevant literature was captured, the search terms were a combination of keywords (global health and private sector). We took into account subject headings (such as MeSH in the PubMed database and Emtree in the Embase database), as well as the truncation and proximity operators available in the search database. It can thus broaden our search terms, allowing us to find any related literature. The language of the studies included was restricted to English. We only included studies published from 1st January 2000 to 31st May 2022. An example of the search conducted in PubMed is as follows: (((global health[MeSH Terms]) OR ((global n4 health[Title/Abstract]) OR (international n4 health[Title/Abstract]))) AND (((private sector*[Title/Abstract]) OR (private enterprise*[Title/Abstract])) OR (private sector*[MeSH Terms]))) AND English[Language] AND ("2000/01/01"[Date-Publication]: "2022/05/31"[Date - Publication]).

Eligibility criteria: Studies were included if they were:

- (1) primary studies relevant to our research topic (if review articles such as scoping review articles are potentially relevant, the primary papers mentioned and relevant should be screened and included);
- (2) commentary, editorial, conference paper, research reports, and review;
- (3) direct and indirect role of for-profit private sector (or institutions, including whether small informal institutions to large enterprises) on global health (illness or infectious diseases associated with humans) in national, regional or global levels.

Studies were removed if they were:

- (1) letters, meeting abstracts, media reports, content feeds, and policy documents;
- (2) articles do not focus on global health or study on a subnational level (e.g., county-, district, and/or province-level);
- (3) global health does not induce national or international consequences;
- (4) not related to human health consequences;
- (5) not obtained or downloaded.

Source of evidence screening and selection: After the removal of duplicate literature, a three-stage screening phase as follows will be completed by three members: (1) title screening based on the exclusion criteria; (2) abstract screening and (3) full-text screening based on the eligibility criteria. A pilot test with randomly selected 200 samples was conducted. The reviewers discussed discrepancies and modify the eligibility criteria and elaboration document. The screening only started when 75% agreement is achieved. The reasons for any exclusion following the full-text review will be recorded. The reviewers resolve disagreements through discussions throughout the selection process. A third reviewer makes the final decision if the two paired reviewers cannot resolve the disagreement.

Data management: Two reviewers will use the reference management software Endnote to select eligible literature independently. If there are any ambiguities

occur during the titles and abstracts screening, the full article will be read to make a decision regarding the inclusion of the article. If there is a disagreement between the two reviewers, a third reviewer makes the final decision. This process should be iterative to ensure all relevant studies will be included. A pilot test will be implemented to ensure consistency among reviewers. Search results and the study selection process will be reported in the final scoping review and presented in the PRISMA Extended Scoping Review (PRISMA-ScR) flow chart. After the entire process, all data are recorded and exported in the form of Excel.

Reporting results / Analysis of the evidence: A qualitative content analysis will be conducted to obtain data and evidence from the included literature. Specifically, we will summarize the types of private sectors, their locations, and the themes that represent the roles of for-profit private sector in global health.

Presentation of the results: Tables and figures will present the extracted data for each extraction category, followed by detailed descriptive analysis.

Language: English.

Country(ies) involved: China.

Keywords: global health; private sector; scoping review protocol.

Contributions of each author:

Author 1 - Qiwei He was the co-first author of the protocol who drafted the protocol and led and provided feedback for screenings and the development of the research question, search strategy, eligibility criteria and data extraction and presentation plans.

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Author 2 - Qisai Lu was the co-first author of the protocol who led the refinement and modification of the search strategy, eligibility criteria and protocol draft, led and conducted pilot tests and formal screening of search results against eligibility criteria.

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