

## Contractual relationships of social entrepreneurs in the healthcare sector in Kazakhstan

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**Abstract.** The purpose of this study was to study of features and evaluate the contractual relations of social entrepreneurship entities working in the field of healthcare in Kazakhstan to cover their contribution to improving the quality of medical services, as well as their accessibility to the population. The study employed the following methods of cognition: system approach, comparative legal method, and hermeneutic method. The study considered the legislation of the Republic of Kazakhstan in the field of social entrepreneurship and healthcare, the basis of their contractual cooperation. It was found that regulations prescribe certain measures of state support for individual entrepreneurs and organisations engaged in social entrepreneurship. These include tax incentives to encourage employment initiatives, priority rights to take part in public procurement, and the possibility of receiving grants and microcredits. However, it should be emphasised that these measures are fragmented and informal, which in general does not contribute to the structural and systemic development of social entrepreneurship. Regarding contractual relations, it was found that the basis of social entrepreneurs' involvement in state social contracts is through contracts for the provision of services or goods, as well as the conclusion of outsourcing contracts. The study analysed cases of social entrepreneurship in Kazakhstan, their specific features and problems. The study concluded that social entrepreneurship in Kazakhstan is a modern economic trend, despite the presence of relevant legislation, it faces a range of problems that hinder its development. The practical significance of this study is to provide an in-depth understanding of the structure and effectiveness of social entrepreneurs' interaction in this field and highlight concrete practical aspects that contribute to the development and optimisation of social entrepreneurship in healthcare in the Kazakh economic environment

**Keywords:** non-profit organisations; collective projects; public problems; business support; crowdfunding

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## Introduction

World experience demonstrates the growing relevance of social entrepreneurship development, characterised by the focus not on profit, but on the improvement of public welfare. In times of crisis, the need to mobilise all available resources increases, and entrepreneurial activity becomes a key factor in maintaining socio-economic sustainability. In the Republic of Kazakhstan, social entrepreneurship is a relatively new and developing phenomenon in the economy. The rapid development of the market economy has had a negative impact on the solution of social problems. Income inequality remains a significant issue in Kazakhstan, with a marked disparity in the proportion of the population earning below the subsistence level between urban and rural areas (Ryskaliyev *et al.*, 2019). In the reporting period, the share of people with incomes below the minimum living standard in rural areas was 6.6%, exceeding the urban rate of 3.6% by 3 percentage points (Bureau of National Statistics, 2023a). Despite improvements in healthcare infrastructure, economic pressures have left some groups, such as low-income families and those in remote regions, without affordable or nearby medical facilities (Health Advocacy Coalition, 2023).

It should be emphasised that such dynamics are observed not only in Kazakhstan, but also in many other countries, including developed states. In these contexts, social entrepreneurship has become an effective tool for addressing a variety of social challenges in society, and Kazakhstan is no exception. In Kazakhstan, social entrepreneurs in the healthcare sector are expanding access to healthcare services and supporting the creation and modernisation of medical infrastructure.

Currently, social entrepreneurship in Kazakhstan is just beginning to develop, but already faces substantial obstacles, such as limited access to funding, incomplete legislation, low levels of public awareness and insufficient entrepreneurial competence among organisers of this type of projects. Understanding contractual relationships in this area allows for the identification of best practices, the development of effective strategies for cooperation between the state and social entrepreneurs, and the promotion of improved health and public welfare (Saebi *et al.*, 2019).

B. Bimbetova *et al.* (2023) cover the concept of social entrepreneurship and its importance in promoting the realisation of social change. The research analyses global experience, explores case studies of successful social entrepreneurial projects and their impact on society, with a special focus on the aspects of financing social entrepreneurial initiatives and strengthening cooperation between state and non-state sector bodies. The authors, analysing global experience, do not provide working financial models used to support social entrepreneurial initiatives, including grants, social investments, microfinancing, and other forms of financing. S.T. Okutayeva (2023) considers the concept of social entrepreneurship. Furthermore, the author's research is aimed at analysing the current state of development of social entrepreneurship in the Republic of Kazakhstan, identifying relevant issues that hinder its current development, and the researcher offers her own concept for solving these problems.

S.T. Okutayeva *et al.* (2021) investigate the establishment and development of social entrepreneurship in Kazakhstan, focusing on its definition and how it differs from non-profit organisations. The authors identify the various challenges that hinder the growth of social entrepreneurship

in the country, such as the absence of a comprehensive legal framework, limited access to financing, and high taxation levels. Through an examination of global experiences and the operational obstacles encountered by social entrepreneurs worldwide, the authors aim to offer workable answers that are appropriate for Kazakhstan's situation. F. Karagusov (2021) briefly summarises the current understanding of key concepts such as social economy and social enterprise in different modern legal systems. The author also analyses the first steps taken in Kazakhstan in the development of legal foundations of social entrepreneurship and their contractual cooperation. The researcher substantiates the expediency of introducing amendments to the Civil Code of the Republic of Kazakhstan (1994) to create a new legal status (apart from commercial and non-commercial organisations) for the subjects of social entrepreneurship, as well as to regulate special legal forms for the implementation of social entrepreneurship. Furthermore, the author does not identify a range of other regulations that will need to be changed for social entrepreneurs to implement their activities.

The purpose of this study was to analyse and evaluate the contractual relationships that exist between social entrepreneurship entities focused on healthcare in Kazakhstan, as well as to identify their contribution to improving the quality of healthcare services and to cover measures that contribute to improving access to healthcare for the population.

## Materials and methods

Agreements, contracts and contractual relations between social entrepreneurs and medical institutions or state bodies in the field of health care of Kazakhstan became the subject of the study. The study included an analysis of the content, legal framework, financial aspects and practical impact of such contracts on the quality and availability of medical services, as well as their role in the modernization of the health care system in Kazakhstan. The study of the topic contractual relations of social entrepreneurs in the sphere of healthcare Kazakhstan used a variety of materials, including statistical data from official data of the state and international metric sites, materials of international and regional research organisations specialising in social and healthcare: Federal Statistical Office (Destatis) (2021), Bureau of National Statistics (2023a; 2023b), The Register of Social Entrepreneurs (2024). The following legislative acts were studied: Civil Code of the Republic of Kazakhstan (1994), Companies (Audit, Investigations and Community Enterprise) Act (2004), Community Interest Company Regulations (2005), The Code of the Republic of Kazakhstan No. 375-V "Entrepreneur Code of the Republic of Kazakhstan" (2015), Code of the Republic of Kazakhstan No. 360-VI "On the Health of the People and the Health Care System" (2020), Order of the Minister of Healthcare of the Republic of Kazakhstan No. KR DSM-230/2020 "On Approval of the Rules for the Organisation and Conduct of Internal and External Quality Reviews of Health Services (care)" (2020), Order of the Acting Minister of Health of the Republic of Kazakhstan No. KR DSM-170/2020 "On the Approval of Tariffs for Medical Services Provided as Part of the Guaranteed Scope of Free Medical Care and in the System of Compulsory Social Medical Insurance" (2020), Law of the Republic of Kazakhstan "On Changes and Amendments to Some Legislative acts of the Republic of Kazakhstan on

Issues of Entrepreneurship, Social Entrepreneurship, and Compulsory Social Health Insurance” (2021), Law of the Republic of Kazakhstan “On Amendments and Additions to Certain Legislative Acts of the Republic of Kazakhstan on Administrative Reform in the Republic of Kazakhstan” (2023), Order of the Minister of National Economy of the Republic of Kazakhstan “On Approval of the Rules for Supporting Social Entrepreneurship Development Initiatives by State Bodies, National Holdings, National Development Institutes and Other Organisations” (2023), Law of the Republic of Kazakhstan “On Compulsory Social Health Insurance” (2023).

The present study used the systematic approach, through which a comprehensive investigation of legislative acts and regulations governing contractual relations in the field of healthcare and social entrepreneurship in Kazakhstan was carried out. Various types of contracts between social entrepreneurs and medical organisations were analysed, such as contracts for the provision of medical services, supply of equipment. The role of social entrepreneurs in improving the quality of healthcare services and access to healthcare for the population was explored. The systemic method helped to consider the topic in its comprehensiveness and to identify the interrelationships between different aspects, which contributes to a more profound understanding of the problem under study and the development of more effective strategies and recommendations.

Comparing and contrasting the opinions of different scholars on this issue and conducting relevant research helped to identify fundamental differences and similarities in the legislation regulating social entrepreneurship and contractual relations in different countries. The hermeneutic method was used to investigate laws and sub-legislative acts related to the problem of contractual relations of social entrepreneurs in the field of healthcare. This method helped to expand the understanding of the context in which social entrepreneurship develops, particularly as it relates to healthcare, and to understand the interpretation and perception of contractual relationships by different actors in this field. The hermeneutic method contributed to an in-depth analysis and interpretation of meanings, which enriched the research context and led to more comprehensive conclusions.

The comparative legal method was employed in the study to evaluate and contrast the legal frameworks governing social entrepreneurship in healthcare across different countries, with a focus on identifying best practices and applicable models for Kazakhstan. The study identified particular legislative components that could improve the efficacy of Kazakhstan’s own policies by examining the contractual arrangements, legal frameworks, and regulatory strategies in areas where social entrepreneurship is well-established. This method enabled the researchers to assess the strengths and weaknesses of Kazakhstan’s current legal environment for social entrepreneurship by drawing comparisons with successful frameworks abroad, providing insights into how these foreign policies could be adapted to meet local needs in the healthcare sector.

## Results

According to the Law of the Republic of Kazakhstan “On Changes and Amendments to Some Legislative acts of the Republic of Kazakhstan on Issues of Entrepreneurship, Social Entrepreneurship, and Compulsory Social Health Insurance” (2021), social entrepreneurship is defined as entrepreneurial activity, the purpose of which is to solve social problems of citizens and society. Private entrepreneurs and legal entities, except for large entrepreneurs who are included in the register of social entrepreneurs, are recognised as persons engaged in social entrepreneurship. The Register of Social Entrepreneurs (2024) is an electronic database containing information on individuals and legal entities engaged in social entrepreneurship.

Social entrepreneurship stands out from the general practice of entrepreneurship in that, apart from carrying out profitable operations, it also fulfils a social mission aimed at solving or mitigating various social problems in society. These problems may include employment of low-income groups such as people with disabilities, parents raising disabled children, mothers of many children, as well as issues related to education, medical care, employment of pensioners. Table 1 summarises the criteria that characterise social entrepreneurship and make it different from traditional business.

**Table 1.** Criteria for social entrepreneurship

Social entrepreneurship	Focus on solving or reducing a particular tangible social problem
Ability to break even and maintain financial stability	Absence of the need for permanent external funding
Innovativeness	The use of innovative methods and approaches to address long-standing social problems
Mode of entrepreneurship	The quality of a social entrepreneur, which lies in their ability to identify untapped market opportunities, mobilise resources, and develop innovative solutions that contribute to long-term positive impact on society as a whole
Replicability	Expansion of the operations of a social organisation and transferring its expertise or model to increase its social impact

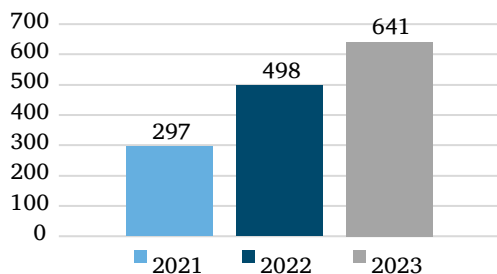
**Source:** compiled by the authors of this study based on Order of the Minister of National Economy of the Republic of Kazakhstan No. 130 (2023)

Economic growth increases social welfare, but it is also often accompanied by an increase in social problems due to rising social inequality, particularly in terms of income distribution and access to basic services. Data from the Bureau of National Statistics (2023a) shows that the income gap between urban and rural populations remains substantial,

with rural areas experiencing a higher percentage of people living below the subsistence level. This disparity highlights ongoing challenges in rural regions, where limited access to employment, healthcare, and educational opportunities restricts economic mobility. Therewith, private enterprise, which is essentially profit-oriented, sometimes pays less

attention to social aspects. In such cases, solving social problems may not pay off economically (Ineza, 2021). On the other hand, the state, being obliged to redistribute its limited resources to meet the most urgent social needs, is not always capable of supporting all socially important areas, given its limited funds.

In the Republic of Kazakhstan, 293 projects are planned to be implemented, of which 17 cover the social sphere, 56 are related to healthcare and 81 to education (Bureau of National Statistics, 2023b). Figure 1 provides statistics on the number of registered social entrepreneurs in Kazakhstan, from which one can conclude that every year the number of entrepreneurs oriented towards social cooperation is growing. Cooperation between business and public authorities has a substantial impact on economic growth and the promotion of innovation, such relationships are fostered through social entrepreneurship mechanisms.



**Figure 1.** Growth dynamics of the total number of registered entrepreneurs in 2021-2023

**Source:** Bureau of National Statistics (2023b)

For comparison, in Kyrgyzstan, social entrepreneurship is gaining momentum as a means to address social challenges and promote inclusive economic development. Although specific data on the total number of social enterprises in 2023 is limited, the sector's growth is evident. For example, in November 2023, around 300 women entrepreneurs from across Kyrgyzstan gathered at the Women's Entrepreneurship EXPO 2023 satellite event in Bishkek, underscoring the nation's commitment to gender equality and economic empowerment (UN Women, 2024.). Social enterprises in Kyrgyzstan span sectors such as social care, education, and retail, focusing on improving community welfare and supporting vulnerable populations. The government's "Development Program of the Kyrgyz Republic for 2018-2040" further emphasises social entrepreneurship's role in achieving sustainable development goals, fostering an environment that supports socio-economic progress (Buxton *et al.*, 2018). In the United Kingdom social enterprises play a significant role in the economy. As of 2023, there are approximately 131,000 social enterprises in the UK, contributing £78 billion to the economy and employing 2.3 million individuals (Social Enterprise UK, 2024).

Social entrepreneurship in healthcare in Kazakhstan is a type of entrepreneurial activity focused on solving social problems and improving the availability and quality of medical services. This approach combines commercial and social objectives, where profit is combined with public benefit. In Kazakhstan, social entrepreneurship in healthcare is becoming increasingly relevant in the context of changes in the global economy, lower prices for export goods and limited budgetary resources (Carayannis *et al.*, 2020). Social

entrepreneurs in this field can provide innovative healthcare services, collaborate with government healthcare programmes, and provide better access to healthcare. An essential aspect of social entrepreneurship in healthcare in Kazakhstan is the sustainability of funding and the ability to self-sustainability. These kinds of entrepreneurs and organisations in this field are not only looking for profit, but also for long-term financial stability, which enables them to effectively address social problems.

However, social entrepreneurship is a fairly new area of activity for the Republic of Kazakhstan and faces a range of issues (Otar *et al.*, 2024). It is necessary to emphasise the importance of the role of the state in the development of social entrepreneurship. In developed countries, the state promotes improvement of the economic environment by creating favourable conditions for entrepreneurs, attracting investment, and supporting start-ups and innovation, which brings considerable benefits for both business and philanthropy and charity (Soogwan, 2020; Kadakure & Twum-Darko, 2024). However, Kazakhstan lacks the infrastructure to foster social entrepreneurship. Credit resources are expensive, and the legislative framework is underdeveloped. Access to credit resources is challenging, particularly because financial institutions prioritise factors such as revenue and collateral availability, which many small businesses struggle to meet. Additionally, businesses focused on innovative products face significant barriers, as creditors view these ventures as high-risk, further limiting their access to external financing (Krupina *et al.*, 2021). There is a lack of understanding of the essence of social entrepreneurship on the part of the government and business in the country. There are legislative and administrative obstacles to promoting this idea. Legislative obstacles for social entrepreneurship in Kazakhstan arise from fragmented constitutional and administrative norms that lack uniformity and fail to meet the specific needs of social enterprises. This inconsistency complicates legal support and protection, making it challenging for social entrepreneurs to operate effectively within the current legal framework (Zhumadilov & Maishekina, 2023). There is also a lack of a coordinating structure regulating social entrepreneurship and insufficient financial resources to support social initiatives of entrepreneurs. There are no available tools for the social entrepreneur, collateral is required everywhere or there is a very high interest rate (TSnik, 2023).

In Kazakhstan, the definition of social entrepreneurship is formally established in Paragraph 6-1 of the Entrepreneur Code of the Republic of Kazakhstan No. 375-V (2015). This section outlines the criteria and characteristics that differentiate social enterprises from traditional business entities, focusing on their commitment to addressing social issues alongside generating revenue. The inclusion of this definition in the Entrepreneur Code marked a foundational step for recognising social enterprises within the Kazakh legal framework. This paragraph was the base for the following Law of the Republic of Kazakhstan No. 52-VII "On Introducing Amendments and Additions to Some Legislative Acts of the Republic of Kazakhstan on Issues of Entrepreneurship, Social Entrepreneurship and Compulsory Social Health Insurance" (2021). This law defines social entrepreneurship, outlines eligibility for state support, and establishes the inclusion of social enterprises in public health initiatives, but the framework remains limited in scope.

In the United Kingdom, social entrepreneurship is primarily supported through the legal structure known as the Community Interest Company (CIC). The foundational legislation for CICs is the Companies (Audit, Investigations and Community Enterprise) Act (2004), which introduced this unique form of company designed for social enterprises. It allowed them to operate as legally recognised entities dedicated to community benefit. CICs are subject to specific regulatory that are detailed in the Community Interest Company Regulations (2005) and oversight by the CIC Regulator. They must meet criteria demonstrating their commitment to social purposes, including the “asset lock” provision, which ensures profits are reinvested in social projects rather than distributed as dividends.

The differences in legal support reflect broader approaches to social entrepreneurship. Kazakhstan’s framework is still evolving, aiming to integrate social entrepreneurship within its legal and economic systems, but it lacks the specificity and support mechanisms found in the UK. Without specialised entities or detailed guidelines for operations and funding, Kazakh social enterprises face obstacles in gaining financial and legal stability. In contrast, the UK model supports social enterprises through structured legislative tools, such as the CIC status, which provides both legitimacy and distinct legal benefits. These differences suggest that Kazakhstan could benefit from adopting certain aspects of the UK model to enhance legal consistency and operational support for social enterprises dedicated to social change.

With the epidemic situation caused by coronavirus infection in the country, there is a need to strengthen the radiological diagnosis of lung lesions. In response to this, new radiology diagnostic centres such as Shipager, Invivo, and Orchun Medikal were established (Callegari & Feder, 2021). They were launched to maximise coverage of chest CT scans for patients with suspected or already confirmed coronavirus infection. Another area of development has been the partnership between the state and private organisations to expand the network of primary medical and social care for the population.

Kazakhstan already has similar medical organisations in cities such as Karaganda, Astana, and Almaty. The question is how private organisations interact with the government in the healthcare sector now. There are two main methods of social entrepreneurship in healthcare in the Republic of Kazakhstan: institutional and contractual. As defined in the Code of the Republic of Kazakhstan No. 360-VI “On the Health of the People and the Health Care System” (2020), contract social entrepreneurship is the most common in the healthcare sector. It includes the provision of healthcare services by private partners under public contracting. In this model, the private sector provides healthcare services using its own logistical resources such as buildings and equipment. Thus, social entrepreneurship in healthcare in Kazakhstan is based on contractual relations between the state and private medical organisations, where the latter provide the services required to meet the needs of the population using their own resources.

Another form of social entrepreneurship is outsourcing contracts, which are concluded between public healthcare institutions and social entrepreneurs to perform various services such as security, cleaning, laundry, catering. For medical organisations to take part in public procurement, it is necessary to follow the established standards and conditions, including the mandatory use of proven information systems

in the field of medicine. In terms of financial aspects, medical organisations involved in this partnership are obliged to submit reports and statistics to the supervisory authorities at a higher level (Order of the Minister of Healthcare of the Republic of Kazakhstan No. KR DSM-230/2020, 2020). Payment for services under the public procurement is made according to the state tariff. Here, however, is where the main disagreement in this partnership arises.

To ensure the quality of healthcare services provided, the state, through the Ministry of Healthcare and healthcare departments, implements various measures, such as signing agreements on the achievement of targets according to state strategic documents and developing evaluation criteria based on internal indicators (Order of the Minister of Healthcare of the Republic of Kazakhstan No. KR DSM-230/2020, 2020). However, the contradiction is that in most cases such actions lead to the imposition of disciplinary measures, including penalties on medical organisations, rather than to the achievement of the set goals and improvement of the quality of medical services. In 2019, Kazakhstan’s Social Health Insurance Fund (SHIF) imposed penalties totalling 6.8 billion tenge on medical organisations for various violations of healthcare standards (Pharmaceutical Review of Kazakhstan, 2020). Specific cases included fines for poor-quality services, failure to meet established medical protocols, and deficiencies in patient care. For instance, medical facilities were cited for inadequate sterilisation practices, incomplete medical documentation, and delays in patient treatment, all of which compromised the quality of care. Admittedly, these issues can be addressed by increasing the number of examination rooms and hiring more medical staff. However, the main problem here is the underfunding of organisations involved in public-private partnerships. When entering into a social enterprise programme, the business entity is always looking to make a profit. However, government tariffs are low and do not consider the needs of services, quality, staff training, and population, and the fact that people interested in the outcome and activities are unlikely to pay extra for comfort and services (Order of the Acting Minister..., 2020; Law of the Republic of Kazakhstan No. 52-VII, 2021). In comparison, countries with more established healthcare systems, such as Germany, allocate higher funds per capita for healthcare services. Germany’s healthcare expenditure is approximately 12.9% of its GDP, reflecting a higher investment in medical services, staff training, and infrastructure (Federal Statistical Office (Destatis), 2021). This substantial funding allows for better compensation of healthcare providers, leading to improved service quality and patient satisfaction. The economic entity achieves its goals, and the only way is to reduce costs. As a result, the population suffers and stays dissatisfied, the state becomes frustrated, and the private partners struggle to survive.

There are 5 projects in the healthcare sector with contract periods from 2021 to 2024. These projects include leasing equipment such as magnetic resonance imaging (MRI), computed tomography (CT), construction and operation of a medical outpatient clinic with the possibility of more patient visits, and leasing of a canteen of a state-owned enterprise in the Regional Clinical Hospital with major repairs and replacement of technical equipment. The total state obligations on these projects amount to 1.8 billion tenge (Additional KZT1.8bn..., 2019). The introduction of the public (municipal) procurement of social services into the system

of social services in Kazakhstan and the consolidation of the relevant legislative mechanisms are aimed at organising interaction between the various participants involved in the provision of social services (including government agencies, private social enterprises, non-governmental organisations, and individual entrepreneurs) (Law of the Republic of Kazakhstan No. 223-VII, 2023). The operation of the public (municipal) procurement of social services is carried out within the framework of contracting, as after the selection of service providers, agreements are concluded with legal entities, individual entrepreneurs, and individuals who provide goods, works, and services, thus ensuring the satisfaction of the needs of the population in the social sphere (Law of the Republic of Kazakhstan No. 106-VIII, 2024). These agreements, being the basis for conclusion, create social ties between the state on the one hand and corporate entities, private entrepreneurs providing public (municipal) services in the social sphere, on the other hand, and are based on the principles of coordination or subordination.

The public (municipal) procurement of social services, which establishes the main criteria of quality and volume of provision of state (municipal) services in the sphere of social services and proposes general conditions for the performance of future property obligations, is aimed at organising and regulating the interaction between the competent authorities and potential providers of services in the social sphere (Law of the Republic of Kazakhstan No. 106-VIII, 2024). Consequently, the actions of competent authorities to place a public (municipal) procurement of social services are regarded as a unilateral legal act aimed at establishing preliminary (organisational) relations related to the provision of social services to individuals.

To enhance the effectiveness of social entrepreneurship in Kazakhstan's healthcare sector, specific legislative improvements are necessary to establish a supportive framework for social entrepreneurs. First, creating a specialised legal status for social enterprises would provide these organisations with rights and obligations aligned with their unique social missions. According to the Entrepreneur Code of the Republic of Kazakhstan No. 375-V (2015), specifically Paragraph 6-1, social entrepreneurship is formally recognised, and the criteria distinguishing it from traditional business are outlined. This foundational legal status was expanded with the Law of the Republic of Kazakhstan No. 52-VII "On Introducing Amendments and Additions to Some Legislative Acts of the Republic of Kazakhstan on Issues of Entrepreneurship, Social Entrepreneurship, and Compulsory Social Health Insurance" (2021). However, the current framework remains limited in scope. Additionally, enhancing financial support mechanisms is essential to help social enterprises overcome funding challenges. While some relief is provided by current tax advantages, Kazakhstan does not have the comprehensive financial provisions found in more developed systems, such as in Germany (Federal Statistical Office (Destatis), 2021). More financial stability and sustainability in the provision of healthcare services could be promoted by increasing the availability of microcredit or providing low-interest loans, especially for those servicing rural areas.

Another essential reform is the standardisation of contractual processes to improve the procurement system for social entrepreneurs. At present, public procurement tariffs of ten fall below sustainable levels, creating financial pressures that may lower service quality and diminish patient satisfac-

tion. As per the Code of the Republic of Kazakhstan No. 360-VI (2020), contract-based social entrepreneurship is predominant in healthcare. This code emphasises that private partners deliver healthcare services under public contracts, though the financial terms frequently fail to cover the true cost of high-quality care. In addition, the Order of the Acting Minister of Health of the Republic of Kazakhstan No. KR DSM-170/2020 (2020), which approves tariffs for medical services provided as part of the guaranteed scope of free medical care and compulsory social health insurance, indicates that current tariffs only cover basic services, neglecting necessary customer care and additional quality considerations. Establishing an independent regulatory body would also provide essential oversight, ensuring contractual consistency and mediating conflicts, as noted by S.T. Okutayeva *et al.* (2021). Such a body could enhance the operational stability of social enterprises and ensure fair treatment within the sector.

## Discussion

Contractual relations of social entrepreneurs in the healthcare sector in Kazakhstan have been in the centre of attention, as they represent a vital aspect of modern approaches to the provision of healthcare services and quality healthcare. One of the main findings of this study is that cooperation between the state and social entrepreneurs in healthcare forms an integral part of the modern model of healthcare delivery. The state acts as a customer, and social entrepreneurs act as executors, providing certain medical services, goods, and equipment. Such cooperation allows the government to ensure the availability and quality of medical services, and social entrepreneurs to develop their business and bring innovations to the healthcare sector.

S. Tišma *et al.* (2022) analyse the development of social entrepreneurship in Croatia, focusing on how it addresses growing global challenges through sustainable models. The authors explore key definitions and principles of social entrepreneurship, linking them to recent trends and concrete case studies that highlight the unique context in which Croatian social enterprises operate. The findings indicate that social entrepreneurship in Croatia is supported by a clear legal framework, which has contributed to a steady increase in the number and diversity of social enterprises. Additionally, the researchers emphasise that while progress has been made, further policy measures are necessary to bolster the sector. The results of this study can significantly inform legislative efforts in Kazakhstan by providing insights into the successful integration of social entrepreneurship within a supportive legal framework. Kazakhstan can find best practices and possible legal gaps in its own legislation by looking at Croatia's approach, especially when it comes to draughting specific rules that cater to the demands of social enterprises. The scholars underscore the importance of aligning public policies with the unique characteristics of social entrepreneurship, which could guide Kazakhstan in refining its legal framework to better support the growth and sustainability of social enterprises, ultimately enhancing their impact on social welfare and economic development.

Y. Chandra *et al.* (2021) show how social entrepreneurship works in the UK. Social business cooperates with healthcare workers as well as the healthcare department, business, and government. Furthermore, social entrepreneurship fulfils a wide range of tasks in the healthcare sector, such as coordinating the provision of healthcare services or lobbying

for healthcare policy reforms (Petersone *et al.*, 2020). The authors found eight major roles that social entrepreneurs have in healthcare service delivery, namely: executive policy maker, service coordinator, industry observer and regulator, performance monitor, lead service provider, service or process innovator, policy lobbyist, and institutional integrator. In their study, the authors emphasise that the main document that social entrepreneurs use in their activities is the contract. Notably, the findings of the present study also demonstrated that social entrepreneurs take on numerous tasks related to providing the population with quality healthcare services, but the difference is that this industry is new in Kazakhstan, and currently, the insufficient regulatory framework, public awareness, and other issues that have been described in this paper do not allow businesses to lobby for new reforms that regulate the relations of social entrepreneurs. Regarding contracts used in the Republic of Kazakhstan, the study also found that contracts are the basis of contractual relations in this area.

S. Khalid *et al.* (2022) raise important questions about the impact of social entrepreneurs on gender and health, while pointing out the lack of research on these issues. Gender-responsive programmes incorporate good healthcare practices and methods to address gender and cultural dynamics and provide resources and services that are responsive to the needs of the population. An interesting fact is that most of the organisations involved define themselves as non-governmental organisations (NGOs) and depend heavily on conventional funding. Whilst fewer organisations (6 out of 21) are adopting market-based and for-profit methods in their operations, representing a missed opportunity to realise the potential of social entrepreneurship as an innovative approach to healthcare financing. Consequently, structural levels of the healthcare system can support new or start-up organisations by providing financial and non-financial incentives such as subsidies, tax breaks, contracting, media support, and involvement in sustainable public procurement and other forms of support (Dyomin, 2023). Comparing with the findings of the present study, it can be noted that in the Republic of Kazakhstan the support of social entrepreneurs by the state is underdeveloped, despite the fact that, as it has already been indicated, the legislation provides financial incentives for social business, but in practice these issues are unregulated and contradictory. The similarity is that social entrepreneurs in the Republic of Kazakhstan take part in public procurement.

F. Koehne *et al.* (2022) carried out a study comparing various aspects of 12 social entrepreneurs' activities. These entrepreneurs come from diverse cultural and national backgrounds, including foreign and national entrepreneurs, as well as indigenous and non-indigenous populations. Their main objective is to improve the economic conditions of indigenous peoples living in rural Ecuador. The authors concluded that the concept of entering into an agreement/contract does not exist in these regions, and therefore it is quite difficult for social entrepreneurs who work in these areas, especially foreign ones, to conduct contractual relations. The authors conclude that despite the difficulties of such cooperation in all social spheres, including healthcare, there is a positive result. It is necessary to agree with the authors' study since it emphasises the importance of social entrepreneurs adapting to a variety of contexts, especially in places where traditional notions of contracts are not applicable. It

also points to the importance of social entrepreneurship as a means of improving the living conditions of local communities, even in the absence of formal legal relationships (Nazarova *et al.*, 2024). The present study shows that Kazakhstan is on the way to improving the direction of social entrepreneurship and has much more success among other countries that have also taken a course on social entrepreneurship.

To eliminate shortcomings and ensure more effective functioning of contractual relations in the healthcare sector in Kazakhstan, it is necessary to improve legislation, which includes clarifying and finalising normative acts, adapting them to modern problems and realities of the healthcare sector. It is also important to provide legal support and advocacy for social entrepreneurs. To develop the healthcare sector through cooperation with social entrepreneurs, it is also necessary to invest in infrastructure development, providing social entrepreneurs with the necessary resources and conditions to provide services.

## Conclusions

Social entrepreneurship is a modern trend in Kazakhstan's economy, but despite the existence of relevant legislation, it faces a range of issues that hinder its development. Contractual relations between social entrepreneurs and the state are formalised in the form of contracts and agreements that regulate the financial, organisational, and professional aspects of the provision of healthcare services. Public procurements for medical services have become a valuable tool to support social entrepreneurs, providing them with stable demand and financial sustainability. Furthermore, the issues of financing and cost of services are still a challenge for social entrepreneurs who seek to combine profitability with high quality and accessibility of healthcare services. The main challenge facing social entrepreneurs is funding. There are no tools available for the social entrepreneurs. Collateral is required everywhere, or interest rates are very high.

This situation occurs because of the low level of public awareness and insufficient understanding of the essence of this phenomenon on the part of regional authorities and entrepreneurs. Social entrepreneurs need support in the form of publicising their activities so that the public understands what social entrepreneurs do. That social entrepreneurship is not charity, but a business that solves social problems. Lack of necessary infrastructure and shortcomings in the legislative framework, which limits the full utilisation of the benefits provided by the law. Therefore, support for social entrepreneurship requires comprehensive support from both government agencies and non-governmental organisations. The study confirmed the potential for the development of social entrepreneurship in the Republic of Kazakhstan. Since contractual relationships of social entrepreneurs in the healthcare sector are understudied, there are potential areas for further research, such as exploring different models of contractual relationships between social entrepreneurs and healthcare authorities to identify the most effective and sustainable practices, as well as analysing how social entrepreneurs influence the improvement of accessibility and quality of healthcare in different regions of Kazakhstan.

A comparison between the legislation of the Republic of Kazakhstan and that of the United Kingdom reveals significant differences in the support structures and legal frameworks. Although Kazakhstan has made some beginning efforts to formalise social entrepreneurship, the available

support systems are still dispersed and have a narrow focus. In contrast, the UK has developed a robust framework specifically designed to foster social enterprises, most notably through the establishment of the CIC model that is granted both legal recognition and practical benefits, such as an “asset lock” provision to ensure reinvestment into social causes. This structured approach, combined with regulatory oversight, has enabled social enterprises in the UK to operate with greater financial sustainability and clearer legal protections. Kazakhstan may give its social entrepreneurs a more stable environment by implementing comparable policies, which would promote growth and increased involvement in industries like healthcare, where there is a pressing demand for easily accessible and reasonably priced services.

Future studies could examine the impact of legislative reforms on the growth and effectiveness of social enterprises

in healthcare, particularly in improving service quality and access. Comparative analyses with countries like Germany or South Korea could provide insights into successful models adaptable to Kazakhstan. Additionally, research on financial sustainability, public-private partnership efficacy, and regional disparities in healthcare access could support targeted policies for underserved populations. These studies would enrich the understanding of social entrepreneurship’s role in Kazakhstan, aiding policy development and strategic growth in this sector.

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## Conflict of interest

None.

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## Договірні відносини соціальних підприємців у сфері охорони здоров'я в Казахстані

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**Анотація.** Метою даного дослідження було вивчення особливостей та оцінка договірних відносин суб'єктів соціального підприємництва, що працюють у сфері охорони здоров'я в Казахстані, для висвітлення їхнього внеску в підвищення якості медичних послуг, а також їхньої доступності для населення. У дослідженні використовувалися такі методи пізнання: системний підхід, порівняльно-правовий метод, герменевтичний метод. У дослідженні розглянуто законодавство Республіки Казахстан у сфері соціального підприємництва та охорони здоров'я, основи їх договірної співпраці. Виявлено, що нормативно-правові акти передбачають певні заходи державної підтримки індивідуальних підприємців та організацій, які займаються соціальним підприємництвом. Це і податкові пільги для заохочення ініціатив у сфері зайнятості, і пріоритетне право на участь у державних закупівлях, і можливість отримання грантів та мікрокредитів. Однак слід підкреслити, що ці заходи є фрагментарними та неформалізованими, що в цілому не сприяє структурному та системному розвитку соціального підприємництва. Щодо договірних відносин, то було виявлено, що основою залучення соціальних підприємців до виконання державних соціальних замовлень є договори на надання послуг або товарів, а також укладання договорів аутсорсингу. У дослідженні проаналізовано кейси соціального підприємництва в Казахстані, їх особливості та проблеми. В результаті дослідження було зроблено висновок, що соціальне підприємництво в Казахстані є сучасним економічним трендом, який, незважаючи на наявність відповідного законодавства, стикається з низкою проблем, що перешкоджають його розвитку. Практична значущість дослідження полягає в поглибленому розумінні структури та ефективності взаємодії соціальних підприємців у цій сфері, а також у виділенні конкретних практичних аспектів, що сприяють розвитку та оптимізації соціального підприємництва в охороні здоров'я в казахстанському економічному середовищі

**Ключові слова:** неприбуткові організації; колективні проекти; суспільні проблеми; підтримка бізнесу; краудфандинг