

Financial Impacts of Accessing Paediatric Emergency Services at the University of Port Harcourt Teaching Hospital

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BACKGROUND

The economic burden of seeking emergency care could be catastrophic and leave low income households at risk of being impoverished. This situation negates the basic philosophy behind current health system reforms that is aimed at entrenching health equity, social justice, universal access and social health protection for all. This study assessed the cost, economic impact and payment modalities for paediatric emergencies in a tertiary hospital in Nigeria.

METHODS

Across sectional survey with pre-tested structured questionnaires administered to 158 caregivers that were recruited by convenience sampling was utilised. Verifiable information on various health expenditures during index hospital visit as well as respondents' socio-economic status were collected. Indices for Socio-economic status, catastrophic health expenditure and risk of impoverishment were used to evaluate the economic impact of the current emergency. Appropriate descriptive and inferential analysis were undertaken using SPSS (version 20) statistical software.

RESULT

Majority (45.6%) of the 158 children were aged 1 – 5years, with girls accounting for 52.5% of the population. The commonest paediatric emergencies were bronchopneumonia 21.5%, diarrhoea disease 20.9% and malaria 14.6%. The mean household earnings from all sources was N101 854 (95%CI: 84965.7, 125,446.4) while the mean monthly household subsistence was N63 028.5 (95%CI: 54 852.7, 74 200.1). Mean healthcare expenditure per emergency episode was N17 545.4 (95%CI: 16 058.7, 19 690.8) with major contributors being the cost of admission and drugs. Payment at the point of access was almost universal (98.7%). Financial impact of index emergency episode could force 41.8% of household into catastrophic healthcare expenditure or leave 52.5% with the risk of being impoverished.

CONCLUSION

The cost of accessing paediatric emergencies put a high proportion of uninsured households at risk of being impoverished. We recommend the intensification of efforts at scaling up of the social insurance scheme to cover all household as a means of assuring social health protection for all.

KEYWORD

Cost; Paediatric emergencies; UPTH; Rivers State; Nigeria.

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