User Charges for Health Care
Progressive Reform or Regressive Social Policy?

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The Causes of 4.4 Million Childhood Deaths per Year in Africa

WHO: World Health Report 2005
Findings of the 1979 Study of User Charges by the Ontario Council of Health

- User charges decrease utilisation of health services, at least in the short term.
- The decrease is selective, and affects primarily the poor and the elderly.
- There is a rebound effect on total cost with displacement of care from less to more expensive categories of service.
- There is no information on the efficiency of collecting user charges.
- User charges do not reduce the unnecessary use of health services.
- Market models of supply and demand do not apply to health services; the service a patient receives is generally determined by the provider.
Health Care User Charges in Africa

- Community financing of peripheral health care services as one of the means to increase community ownership and governance (Alma-Ata Declaration for Primary Health Care 1978, Bamako Initiative of the African Health Ministers 1988).

- User charges as a health sector financing strategy in line with economic structural adjustment (World Bank Report: Financing Health Services in Developing Countries: An Agenda for Reform 1987).
Impact of the Introduction of Health Care User Charges on Health Service Utilisation in Ghana

- Outpatient attendance initially dropped by 50 percent in rural and urban areas. After some time it recovered in urban but not in rural areas.
- The share of health care utilisation by the 15-45 year age group increased, the main fall in utilisation was among the elderly.
- User charges were a major deterrent to seeking health care, a major cause of delay in seeking treatment, and a cause for Ghanaians to turn to traditional medicine and to self-medication.

Waddington and Enyimayew (1990); Asenso-Okyere et al (1998)
Social Profile of Surveyed Families

Senegal Survey (n=800)

Social Class

Ghana Survey (n=747)

Social Class

Burkina Survey (n=401)

Social Class
Proportion of Home and Health Centre Delivery
Why 242 children were not immunised

![Bar chart showing reasons for non-immunisation by social class.]

- **Social Class 1**:
  - Side effects: 1.00%
  - Not important: 7.00%
  - No money: 6.00%
  - No service: 3.00%

- **Social Class 2**:
  - Side effects: 2.00%
  - Not important: 4.00%
  - No money: 3.00%
  - No service: 1.00%

- **Social Class 3**:
  - Side effects: 3.00%
  - Not important: 2.00%
  - No money: 2.00%
  - No service: 1.00%

- **Social Class 4**:
  - Side effects: 1.00%
  - Not important: 5.00%
  - No money: 4.00%
  - No service: 2.00%

- **Social Class 5**:
  - Side effects: 0.00%
  - Not important: 1.00%
  - No money: 1.00%
  - No service: 0.00%
Thank You