

INTERNATIONAL CONGRESS ON GLOBAL HEALTHCARE

May 12, 2021 | Webinar

Cost of treating maternal complications and associated factors in Mekelle general hospital, northern Ethiopia**Teamir Abadi Tadesse and Anagaw Derseh Mebratie***Health Bureau Health Care Financing Reform Case Team, Tigray Regional Health Bureau, Mekelle, Ethiopia*

Background: The government of Ethiopia introduced an exemption policy that guarantees free maternal healthcare services from public providers. This policy aims to ensure financial protection and enhance utilization of services especially for low-income people. However, patients in most cases incur health expenditure when seeking health care. This paper aims to assess direct and indirect medical costs of treating maternal complications and associated factors at a public hospital in Northern Ethiopia.

Methods: An institution-based cross-sectional study design was carried on 267 mothers with complications. A multivariate linear regression model at 5% level of significance was used to analyze factors driving the outcome.

Findings: The median cost was more than seven times the monthly minimum wage, and this may cause severe financial consequences for the poor. Direct medical costs accounted for the major share (68%) of total cost, and this was mainly driven by lack of diagnostic services at public facilities and paying for private providers. Expenditure for treatment of maternal complications is positively associated with income, absence from work, travel time to the facility and being diagnosed at a private facility.

Conclusion: The overall evidence in this study poses a concern about the context in which fee exemption reforms are being implemented.

Biography

Teamir Abadi has completed her Masters at the age of 27 years old from Addis Ababa University and school of public health. She is the expert of health care financing in Tigray regional Health Bureau. She has published one journal on Risk Management and Healthcare policy.

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