

# Out-of-pocket payments in HIV treatment in Tanzania: Evidence from ten sites

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# Background

- In 2007/08, 1.8-2.0 million adults and children aged 0-49 were living with HIV in Tanzania.
- Many HIV patients receive care and treatment funded by the government and donors such as PEPFAR and the Global Fund.
- While services are largely free, patients do incur expenses to access treatment, which could limit access for some population groups.
- This study quantified the costs that different patient groups incurred while receiving publicly funded HIV treatment in Tanzania.

# Methods

- A convenience sample of 10 health facilities across Tanzania.
- 50 randomly selected adult patients receiving HIV care and treatment in each of sites.
- The sample was restricted to:
  - patients enrolled in the HIV care and treatment program at the site during the interview,
  - aged 18 years of age or older,
  - and having at least one prior appointment at the clinic.

# Results

- Adult patients spent an average of \$32 (USD, 2008) per year on care and treatment.
- More than 70% of the spending is for travel expenses, followed by accommodation (12.6%).
- Patients living in rural areas pay on average 90% more per year than those living in urban ones.
- Urban males spent 97% more than urban females.

## Results (cont.)

- Total annual patient cost ranges between \$17.65 and \$36.68 for females and between \$35.00 and \$43.79 for males in urban and rural areas, respectively.
- The main driver of the patients' cost are travel costs.
- Females spent more time for the HIV services.
- The annual patients' opportunity cost of the total time spent for treatment is \$38.86 (June 2008); 5% of the annual national minimum wage.

# Results (cont.)

## TOTAL AVERAGE PATIENT COST, BY PLACE OF RESIDENCE AND GENDER (USD 2008)

Out-of-Pocket Patient Costs	Urban (n = 218)		Rural (n = 282)		Total (n = 500)	
	Male (n = 58)	Female (n = 160)	Male (n = 91)	Female (n = 191)	Male (n = 149)	Female (n = 351)
Travel cost	\$14.38	\$8.45	\$34.25	\$29.09	\$26.51	\$19.68
Accommodation cost	\$0.00	\$1.07	\$7.77	\$4.61	\$4.75	\$3.00
Drug cost	\$2.29	\$2.74	\$0.05	\$0.42	\$0.92	\$1.48
Informal cost	\$0.00	\$0.00	\$0.00	\$0.68	\$0.00	\$0.37
Other cost	\$18.24	\$3.81	\$1.72	\$1.87	\$8.15	\$2.76
<b>TOTAL COST</b>	<b>\$35.00</b>	<b>\$17.65</b>	<b>\$43.79</b>	<b>\$36.68</b>	<b>\$40.37</b>	<b>\$28.01</b>

## Results (cont.)

TOTAL AVERAGE PATIENT COST, BY PLACE OF RESIDENCE AND SES (USD 2008)

PQ Quintiles	Urban ( <i>n</i> = 218)	Rural ( <i>n</i> = 282)	Total ( <i>n</i> = 500)
Poorest	\$23.50	\$49.49	➔ \$43.07
Second poorest	\$21.53	\$38.36	\$30.82
Third poorest	\$12.73	\$35.92	\$28.97
Fourth poorest	\$15.78	\$34.10	\$23.68
Least poor	\$38.17	\$37.75	➔ \$31.89

# Results (cont.)

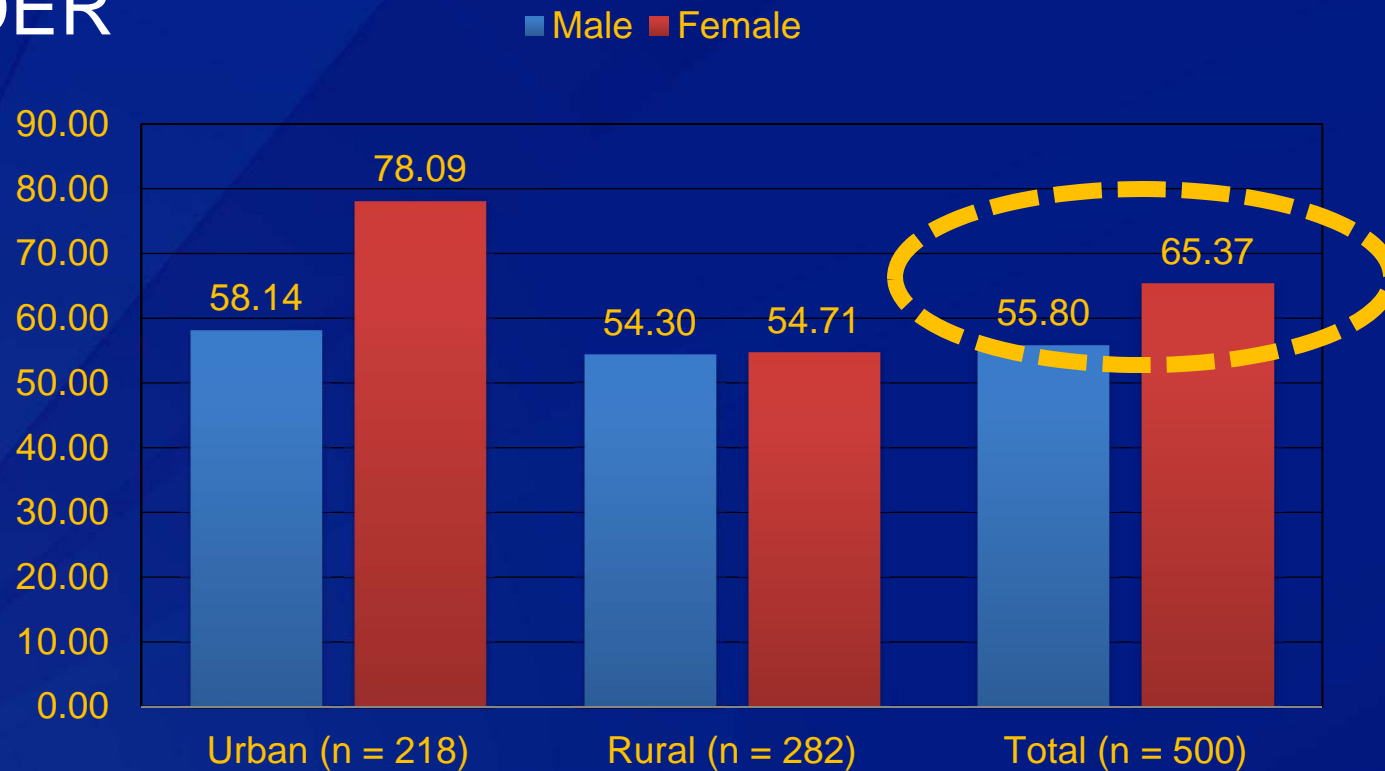
## PATIENTS TRANSPORTATION, BY PLACE OF RESIDENCE

Transportation	Urban ( <i>n</i> = 218)	Rural ( <i>n</i> = 282)	Total ( <i>n</i> = 500)
→ Bus	57.8%	74.1%	67.0%
Walk less than 1 hour	17.8%	5.0%	10.6%
Walk more than 1 hour	10.6%	9.9%	10.2%
Bicycle	11.5%	6.7%	8.8%
Car or motorbike/scooter	2.3%	1.1%	1.6%
Other	0.0%	3.2%	1.8%



# Results (cont.)

ANNUAL AVERAGE HOURS SPENT ON CLINIC VISITS, BY PLACE OF RESIDENCE AND GENDER



# Lessons Learnt

- Policy changes to focus on implementing strategies to offset out-of-pocket costs for patients from lower socio-economic groups may be beneficial (e.g., bringing services closer to patients, drug pick-up zones).
- Create awareness of service barriers.
- Improve the questionnaire.
- Identify those patients who actually do not show up because of high costs of transportation.

# Conclusions

- This study investigates the roles individuals play in financing HIV/AIDS treatment programs through out-of-pocket payments.
- Even though treatment is largely provided free, the findings give evidence for policy-makers for designing financial health protection mechanisms for patient burden.

Thank you