**Out-of-Pocket Payments, Catastrophic Health Expenditure and Burden of Diseases in**

 **Nigeria: Lessons for the African Region**

 Chris. U. Kalu (M.Sc., Health Economics Student)

 Dept. of Health Administration & Management

 Faculty of Health Science & Technology

 College of Medicine,

 University of Nigeria, Enugu Campus

 E-mail: cu.kalu@unizik.edu.ng

 **ABSTRACT**

 **Background**

Over 90% of Nigerians pay out-of-pocket expenditure (OOPS) for healthcare and this is also evidence based by both WHO and World Bank statistics. Households who live below the $2.5 per day often do not use healthcare services when the need arises. OOPS health coping payment mechanisms are capable of making individual economic units incur catastrophic health expenditure and this can inflate the level of burden of diseases (BODs).

 **Objective/Aim**

The broad objective of the study is to examine the impact of OOPs payments on BODs in Nigeria. Specifically, it aims at showcasing the trends and profile of OOPs and BODs in Nigeria, with a view of providing policy lessons for the African region.

**Methodology**

Secondary data from World Bank Development Indicator (WDI, 2017) CD ROM and Nigerian Health Reports were utilized to assess the relationship between OOPs and BODs in Nigeria. The study approach is the desk literature review and trend analysis approach. This approach is suitable for the study mainly because of its relevance to achieving the objective/aim of the study. The scope of the study is from 1970-2018.

**Key Findings**

The findings from the study showed that as at today, OOPs represent about 43% of all health care expenditure and payments in Nigeria, compared to 37% from government and 25% from donor agencies. A result that corresponds to earlier results obtained. The implication is that OOPs is the major coping payments mechanism for BODs in Nigeria, Africa’s largest and the richest economy. However, the mechanism appears grossly inadequate in reducing BODs in Nigeria, leading to increasing burden of disease in Nigeria.

**Conclusion**

The policy implication of the finding is that it is high time health policy makers and planners in Nigeria and Africa in general should explore other health financing mechanisms towards realizing financial risk protection and for reducing BODs and achieving complete universal health coverage.

 **Key Words:** Out-of-pocket expenditure, catastrophic payments, burden of disease, Nigeria, Africa.

Being an Abstract of a paper submitted to African Health Economics and Policy Association (AFHEA), Fifth AFHEA Conference holding at Ghana, 11th -14th March, 2019. Broad Theme: Securing PHC for all: the foundation for making progress on UHC in Africa.