# ABSTRACT

**Title: TREND OF CATASTROPHIC HEALTH EXPENDITURE AND THEIR IMPACT ON THE IMPOVERISHMENT OF MAURITANIAN HOUSEHOLDS BETWEEN 2008 AND 2014**

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# **Background:**

# Mauritania has expressed its commitment to achieving universal health coverage and the Sustainable Development Goals. Despite the stides made in improving the health status of the country, there is still room for improvement, as the gross mortality rate is still high at 10.9‰, compared to the birth rate of 32.3‰, and low life expectancy of 60.3 years. The health status of a country is key to monitoring progress towards universal health coverage (UHC) and the Sustainable Development Goals (SDGs), and improving financial protection. This study evaluates the status of financial protection in Mauritania.

# **Methods**

The data used are from Permanent Surveys on Household Living Conditions (EPCV) conducted in 2008 and 2014 to estimate incidence of catastrophic health expenditure and poverty using two standard methods: the WHO methodology (capcacity to pay) and Sustainable Development Goals (SDG) methodology..Following the WHO approach, a household incurs CHE if they use at least 40% of their capacity to pay to cover the out-of-pocket health spending. Following the SDG methodology, the CHE is defined by the proportion of the population which incurs substantial household health expenditure, relative to the total expenditure or household income between 10 % and 25 % threshold.

# **Results**

# At 10% threshold, it is observed that 12.4% of households experienced CHE in 2015 compared to According to the SDG approach, in 2008 and 2014, 10.8% and 11.2% of households respectively, incurred catastrophic expenses at a threshold of 10%. At the 25% threshold, catastrophic expenditure increased, irrespective of the area of residence, with higher incidences in rural areas, from 1.1% in 2008 to 5.7% in 2014, and from 1.4% in 2008 to 3.8% in 2014 in urban areas.

# According to the WHO approach, 4.9% of Mauritanian households incurred catastrophic expenditure in 2014, compared to 3.1% in 2008. Catastrophic expenditure incidence, from 2008 to 2014 follows the same trend as the results obtained with the SDG approach. Generally, the study findings show that irrespective of the poverty line, catastrophic expenditure increased the incidence and depth of poverty.

# **Conclusion**

At the end of this study, we are of the view that two main recommendations must be implemented without delay, in order to reduce the proportion of households facing catastrophic expenditure. In the short term, it is a question of putting in place a policy for controlling the costs of pharmaceutical products. In the medium term, the aim is to introduce health insurance coverage measures for the poor (16% of the population) and the informal sector.

# **Keywords**

Health financing, out-of-pocket payments, catastrophic expenditure, impoverishment, financial hardship