Cost of Major Mental Illnesses to the Public Health Service Provider in case of Emanuel Hospital, Ethiopia

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4th AfHEA international Conference – 2016

Outline

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Introduction

• Enhancing the well-being of individuals and communities,
• Essential component of economic productivity and well-being,
• To complement the information gap on the cost of major mental illnesses to the public health service provider,

Materials and Methods

• Hospital based cross-sectional study conducted
• Prevalence based bottom-up costing approach
• Estimate cost from medical records of patients diagnosed to have schizophrenia and bipolar disorders
• Records were selected by systematic random sampling method

Objective:
• To estimate the economic cost of major mental illnesses and cost determinants to the public health service provider.
Results and Discussion

• The mean age of the patients was 33 years - most economically active and productive part of the society
• 55.4% of the patients were dwellers of Addis Ababa
• The hospital incurred cost with mean 1,204 ETB for providing health care and related services
• There was statistically significant difference of hospital outpatient cost among residence area of the patients

Results....

• 78% of the variation in the hospital cost is determined by the type of the mental health service
• The average drugs cost per patient for providing emergency health service was 32 ETB and 225 ETB to provide emergency health service
• The average drugs cost per patient for providing inpatient health services was 220 ETB and 23,016 ETB to provide inpatient health service - admission of patients incur more other costs (accommodation costs) than medication costs
Results....

• The average drugs cost per patient for providing outpatient health services was 500 ETB and 618 ETB to provide outpatient health service

Conclusion and Recommendations

• Type of the mental health service and residence area of the patients determines cost to the service provider since service type and distance from the hospital determines utilization of the mental health service,

• Providing inpatient mental health service is more costly than outpatient and emergency mental health services
Conclusion....

• Mental health service should be expanded to all parts of the country and integrated to the primary health care level
• Practice of drug budget allocation for mental health service should be changed which is 20 ETB per bed per day
• The hospital should practice re-allocation of existing resources (budget) among the hospital’s departments based on the cost they are bearing in order too improve it’s allocative efficiency

THANK YOU!!!