

## Implications of Measuring the Progress towards Financial Risk Protection Using Varied Survey Instruments: A Case Study of Ghana

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**Abstract :** Given the urgency and consensus for countries to move towards Universal Health Coverage (UHC), health financing systems need to be accurately and consistently monitored to provide valuable data to inform policy and practice. Most of the indicators for monitoring UHC, particularly catastrophe and impoverishment, are established based on the impact of out-of-pocket health payments (OOPHP) on households' living standards, collected through varied household surveys. These surveys, however, vary substantially in survey methods such as the length of the recall period or the number of items included in the survey questionnaire or the framing of questions, potentially influencing the level of OOPHP. Using different survey instruments can provide inaccurate, inconsistent, erroneous and misleading estimates of UHC, subsequently influencing wrong policy decisions. Using data from a household budget survey conducted by the Navrongo Health Research Center in Ghana from May 2017 to December 2018, this study intends to explore the potential implications of using surveys with varied levels of disaggregation of OOPHP data on estimates of financial risk protection. The household budget survey, structured around food and non-food expenditure, compared three OOPHP measuring instruments: Version I (existing questions used to measure OOPHP in household budget surveys), Version II (new questions developed through benchmarking the existing Classification of the Individual Consumption by Purpose (COICOP) OOPHP questions in household surveys) and Version III (existing questions used to measure OOPHP in health surveys integrated into household budget surveys- for this, the demographic and health surveillance (DHS) health survey was used). Version I, II and III contained 11, 44, and 56 health items, respectively. However, the choice of recall periods was held constant across versions. The sample size for Version I, II and III were 930, 1032 and 1068 households, respectively. Financial risk protection will be measured based on the catastrophic and impoverishment methodologies using STATA 15 and Adept Software for each version. It is expected that findings from this study will present valuable contributions to the repository of knowledge on standardizing survey instruments to obtain estimates of financial risk protection that are valid and consistent.

**Keywords :** Ghana, household budget surveys, measuring financial risk protection, out-of-pocket health payments, survey instruments, universal health coverage

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