

ABSTRACT

Myanmar has committed to the progress towards the Universal Health Coverage (UHC) with its core concept of universal access to health services and protection of financial hardship. Access barriers including high out-of-pocket (OOP) payments are the major challenges to achieve the aspirational goal (UHC). High OOP payments play the dominant role in financing health and are the precursors for the catastrophic health spending for the poor.

This study presents the quantitative investigation of out-of-pocket payments including informal payments for Caesarean deliveries among the post-partum women attending a tertiary hospital and a township hospital in Yangon region. The objectives of this study are to determine the amount and categories of OOP payments and informal payments, to estimate OOP and informal payments and to describe the proportion of informal payment regards to OOP payments. Using consecutive sampling technique, exit interviews with 66 discharged patients and their attendants were conducted.

Various categories of OOP payments are reported during antenatal period, during hospitalization and at time of the discharge from hospitals. The average OOP payment was $107,427 \pm 54,038$ kyats (89 US\$) in the tertiary hospital and $153,041 \pm 64,077$ kyats (127 US\$) in the township hospital. The difference in the average amount of OOP payments between the hospitals is statistically significant at a 95% confidence interval (p value = 0.001). In this study, donations, envelope payments, tips, treat and gifts are regarded as categories of the informal payments. The average informal payment is $25,717 \pm 14,472$ kyats (21 US\$) in the tertiary hospital and $79,907 \pm 46,828$ kyats (66 US\$) in the township hospital. The difference in the average informal payment is statistically significant at a 95% confidence interval (p value = 0.001).

Based on the findings, this study highlights that requirement for appropriate health financing system i.e. prepayment system for patients and promotion of the services more equitably.