



Sources for sick child care in *Uganda*

One in a series of analyses by SHOPS Plus

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Purpose of this analysis

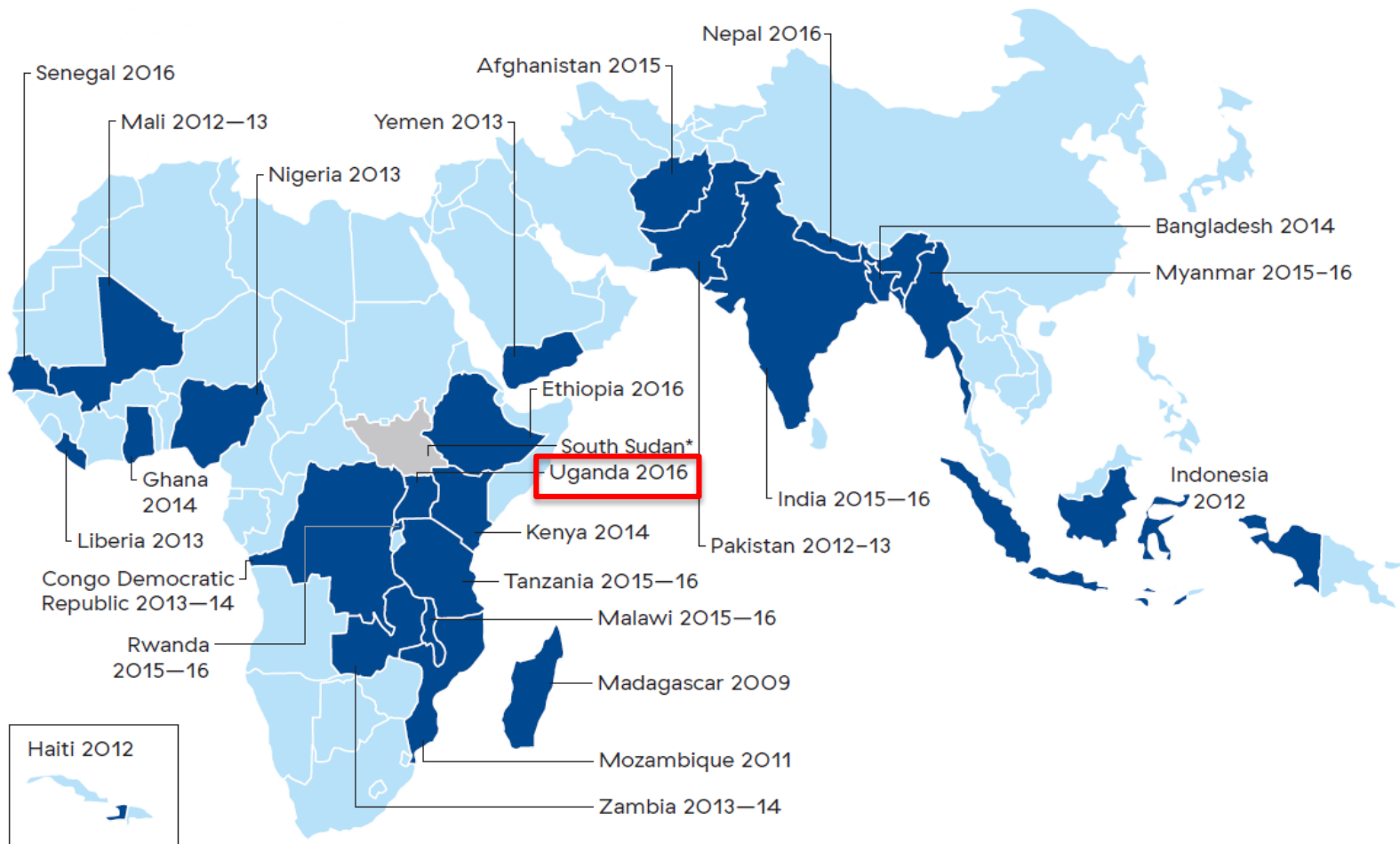
- Understand whether and where Ugandan caregivers seek advice and treatment for their sick children
- Examine differences in care-seeking patterns by illness and socioeconomic levels, and within public and private sectors
- Share data in a usable format
- **Inform policies and programs to prevent child deaths**





Demographic and Health Survey (DHS) data analyzed from 24 priority countries

USAID priority countries analyzed using Demographic and Health Survey data



*No DHS data are available for South Sudan.



Uganda 2016 DHS data: Interviews with mothers of young children

Mothers of children five years old or younger were asked:

- Whether their children had experienced fever, symptoms of acute respiratory infection (ARI), or diarrhea in the past two weeks
 - If yes, asked whether they had sought advice or treatment from any source
 - If yes, asked where they had sought advice or treatment





This analysis will tell you:

1. What percentage of children in Uganda experience fever, ARI symptoms, and/or diarrhea?
2. What percentage of caregivers seek advice or treatment outside the home for children with these illnesses?
3. Among those who seek out-of-home care, what are the sources?
 - a) Public, private, other
 - b) Clinical vs. non-clinical
4. How do patterns of care-seeking vary by:
 - a) Illness: fever, ARI, diarrhea
 - b) Countries within the East and Southern Africa region
 - c) Wealth quintile: poorest and wealthiest Ugandans



How frequently do children in
Uganda experience fever,
ARI symptoms, and/or
diarrhea?

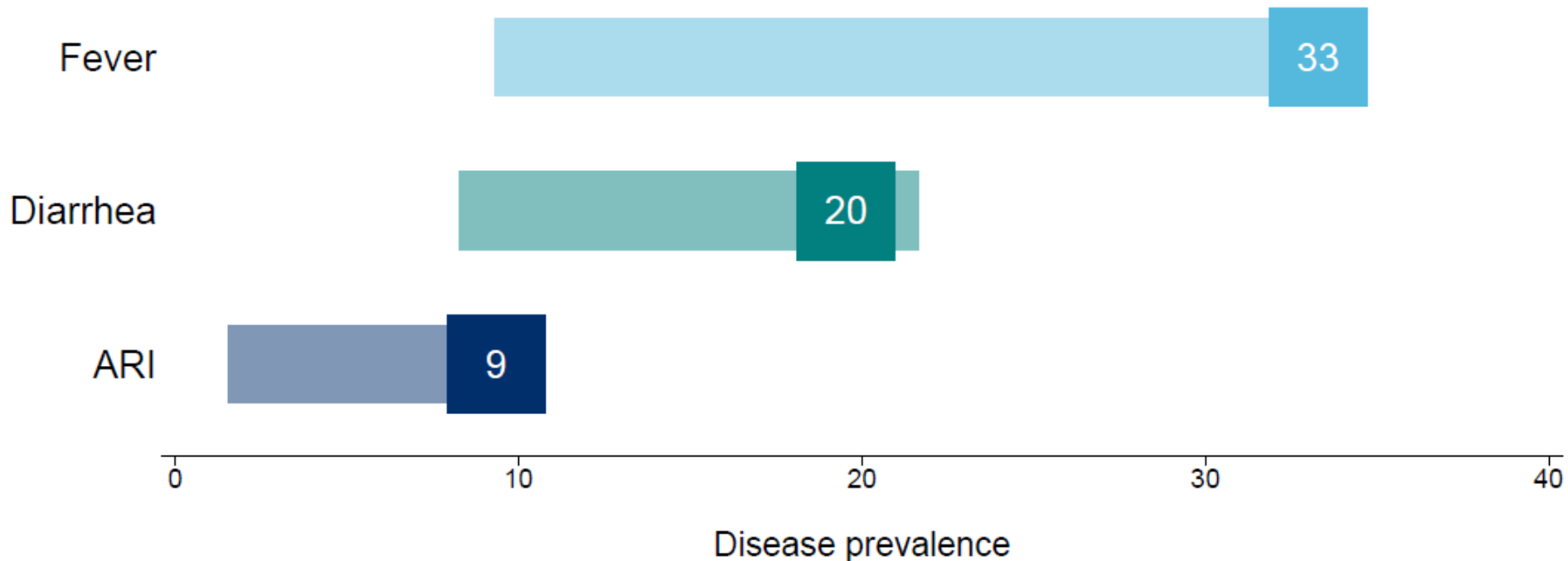




Uganda's childhood disease prevalence is among the highest in East and Southern Africa

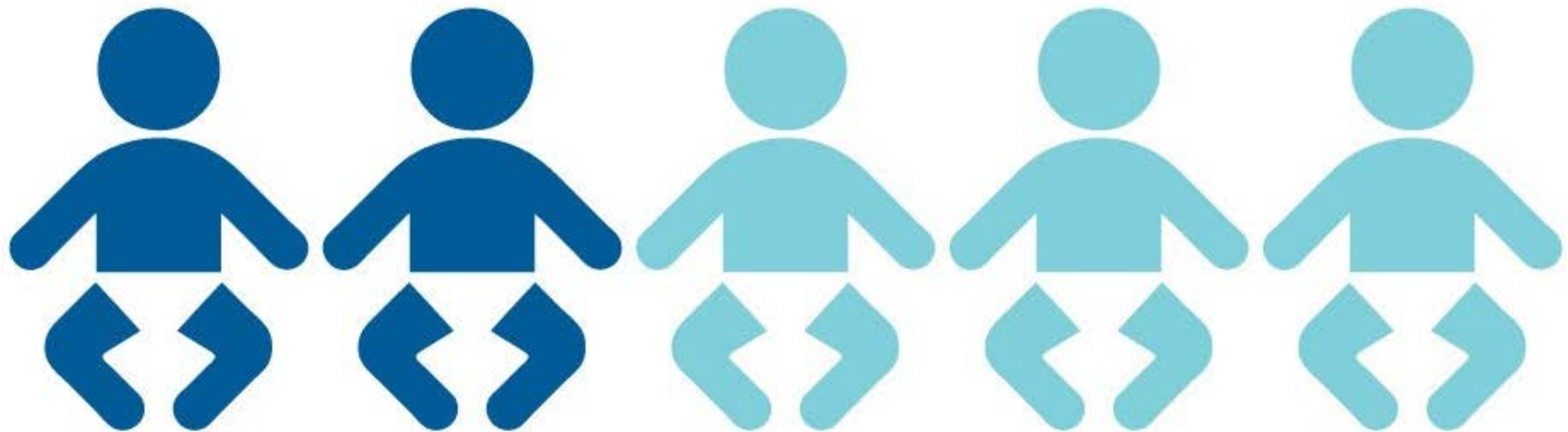
Bars show **range** across East and Southern African USAID priority countries; squares show **Uganda**

Illness prevalence: Uganda and East and Southern Africa





2 out of 5 children in Uganda experienced fever, ARI symptoms, and/or diarrhea in the last 2 weeks.



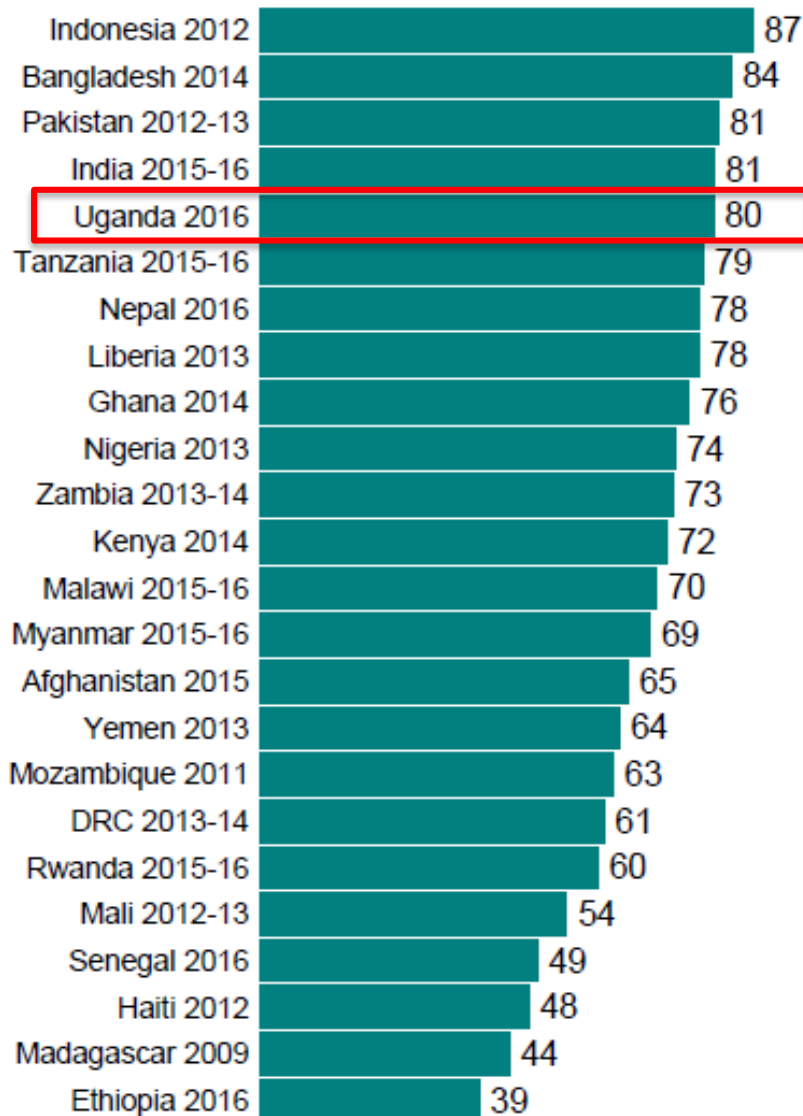


How frequently is out-of-home care sought for Ugandan children with these illnesses?





Uganda's care-seeking level is the highest in Africa



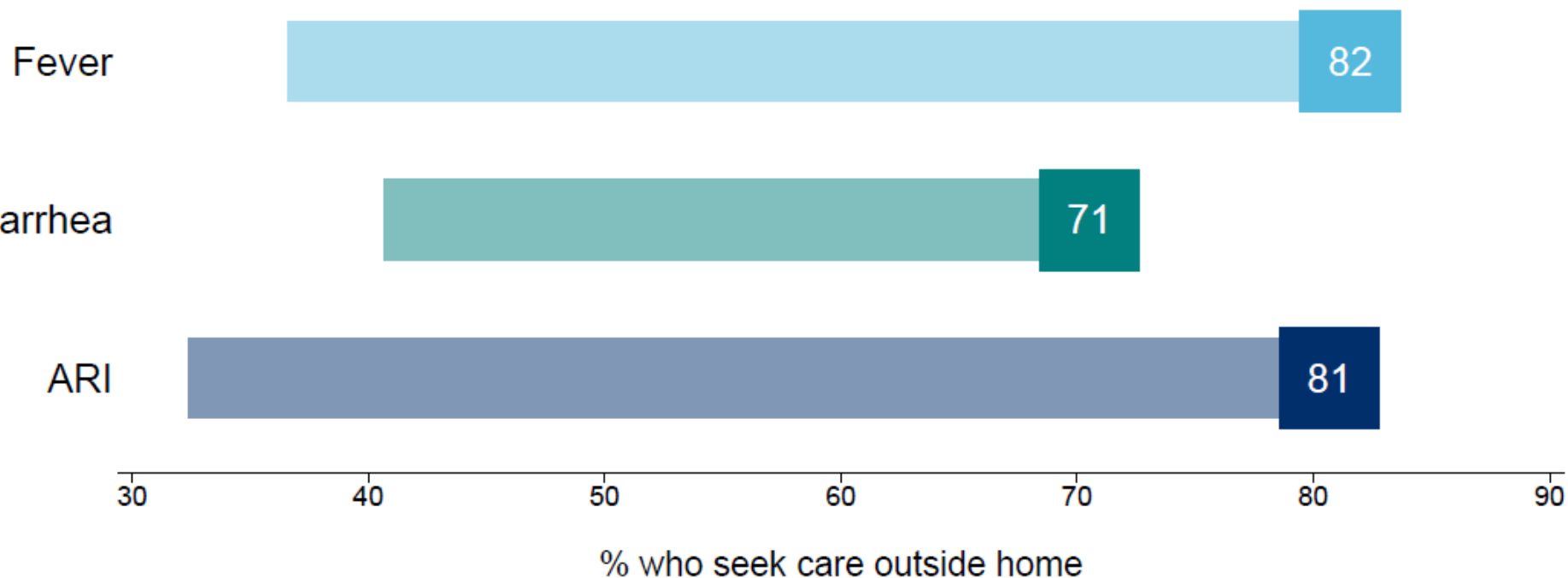
% of caregivers who seek treatment for children with any of the three illnesses in each of the 24 USAID priority countries analyzed



Uganda has **high** care-seeking levels compared to USAID priority countries in East and Southern Africa, across illnesses

*Bars show **range** across East and Southern African USAID priority countries; squares show **Uganda**.*

Caregivers who seek care outside the home: Uganda and East and Southern Africa





Among Ugandans who seek
out-of-home care, what are the
sources?

Public, private, other



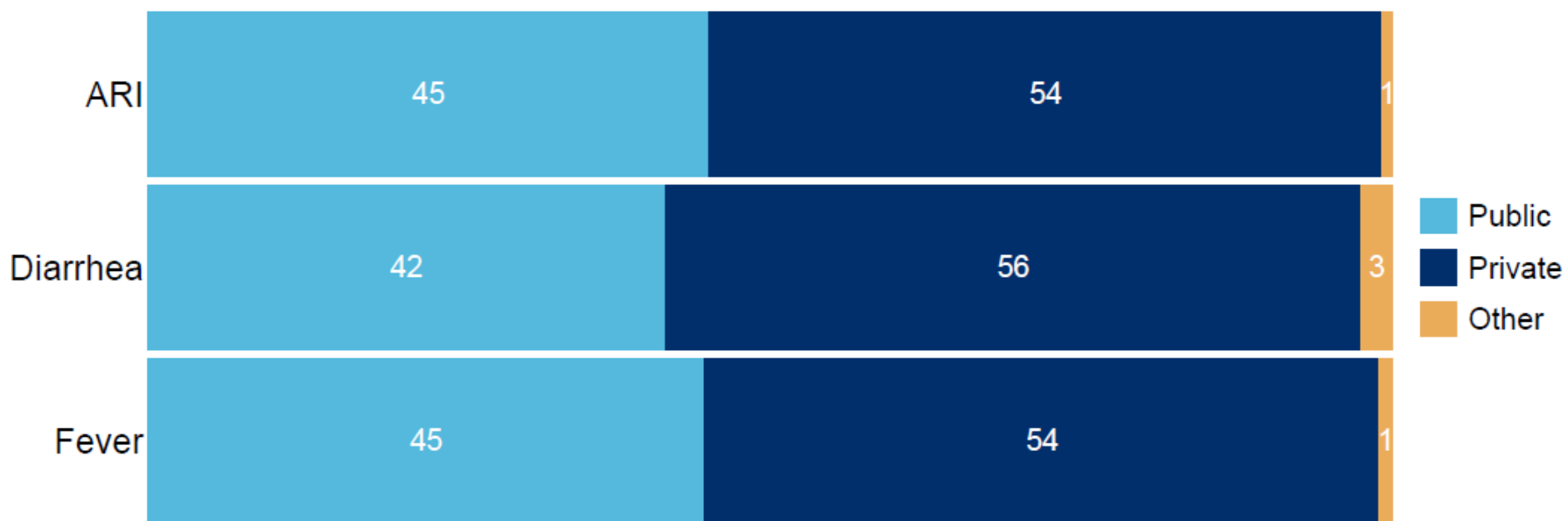


Sources of care

Public sector	Private sector	Other
<ul style="list-style-type: none">· Hospitals· Health centers· Outreach/mobile clinics· Community health workers· Village health teams	<ul style="list-style-type: none">· Private clinics, hospitals, mobile clinics, and doctors· Pharmacies, shops, markets, and itinerant drug sellers· Private field workers and private village health teams	<ul style="list-style-type: none">· Traditional practitioners



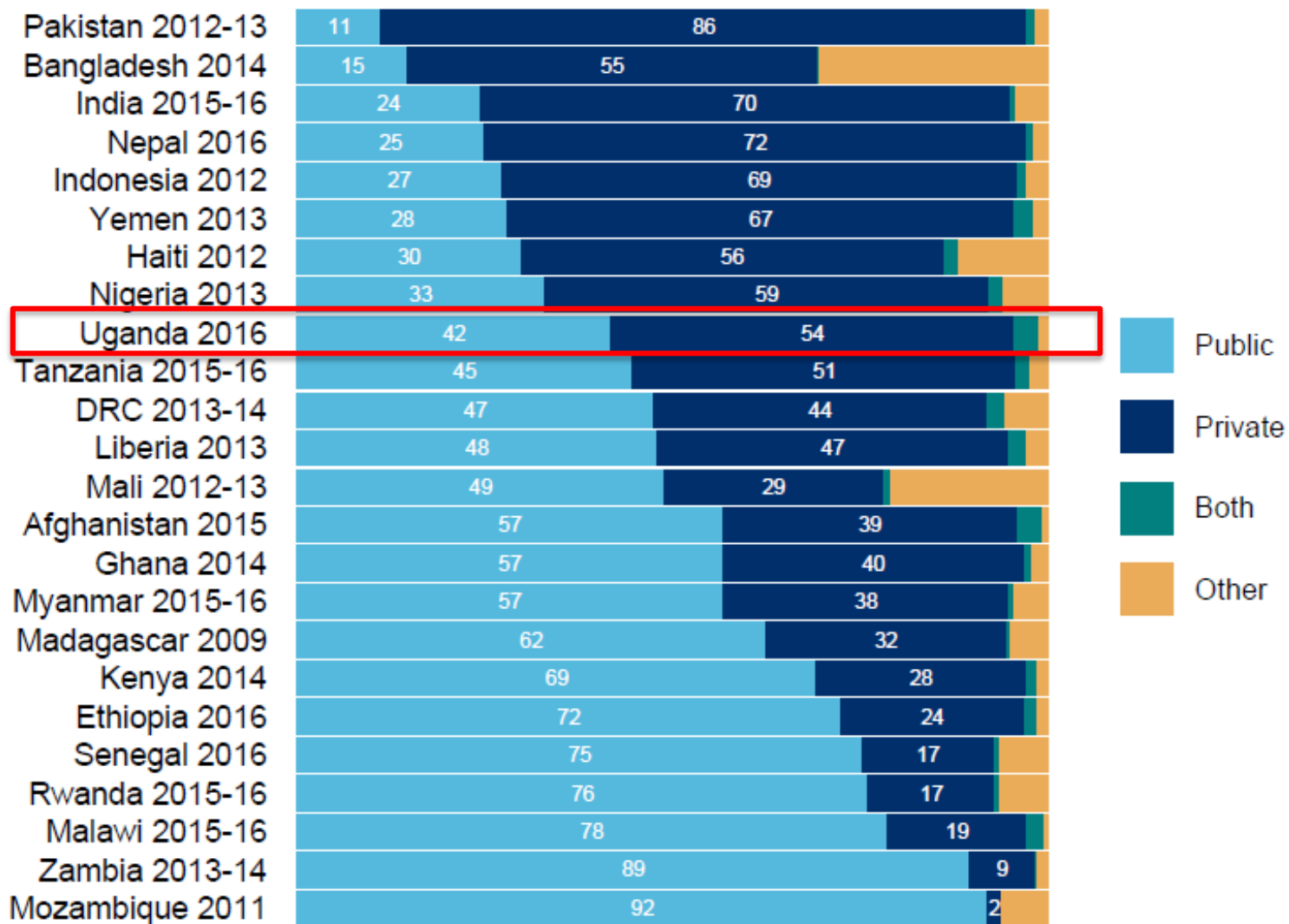
Across all three illnesses, the **private** sector is the **dominant** source of care in Uganda



Source among Ugandans who seek sick child care outside the home

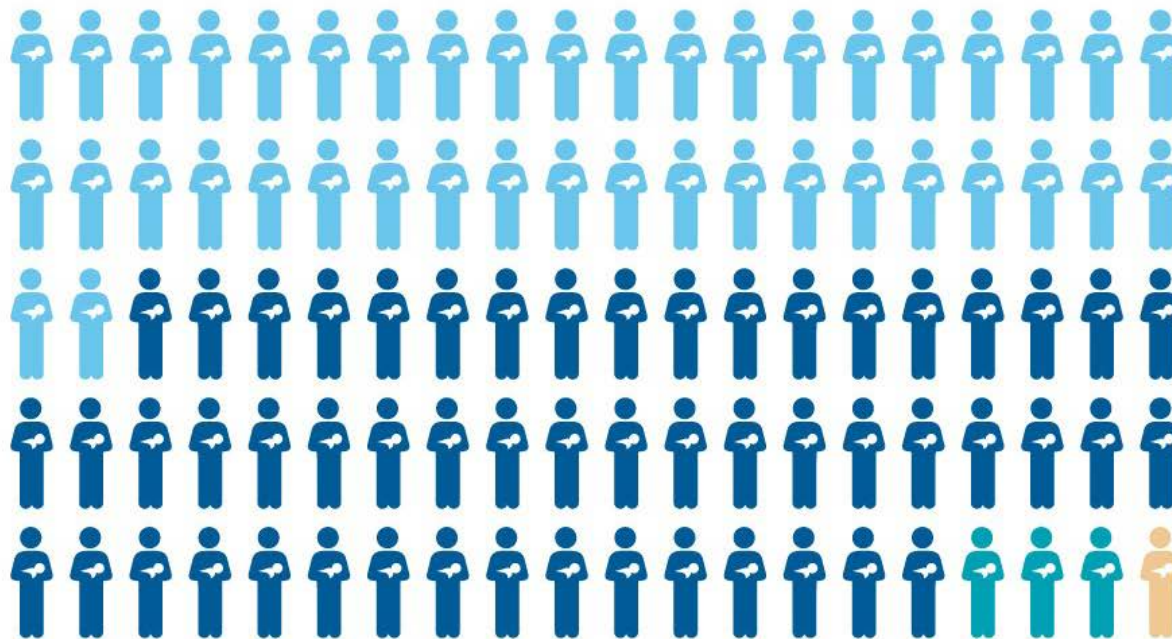


Uganda has the highest **private** sector use of priority countries in East and Southern Africa





Among caregivers who seek sick child care outside the home, **54%** seek treatment or advice from private sector sources and **42%** from public sector sources.



■ Public source ■ Private source ■ Both ■ Other



Sources of care: Clinical versus non-clinical





Sources of care: Clinical and non-clinical

	Public sector	Private sector
Clinical	<ul style="list-style-type: none">· Hospitals· Health centers· Outreach/mobile clinics	<ul style="list-style-type: none">· Private clinics, hospitals, doctors, and mobile clinics
Non-clinical	<ul style="list-style-type: none">· Community health workers· Village health teams (VHTs)	<ul style="list-style-type: none">· Pharmacies, shops, markets, and itinerant drug sellers· Private field workers· Private village health teams



Clinical care is dominant in the **public** sector;
Non-clinical is somewhat more common in the
private sector

Public sector:

99%



1%



Private sector:

73%



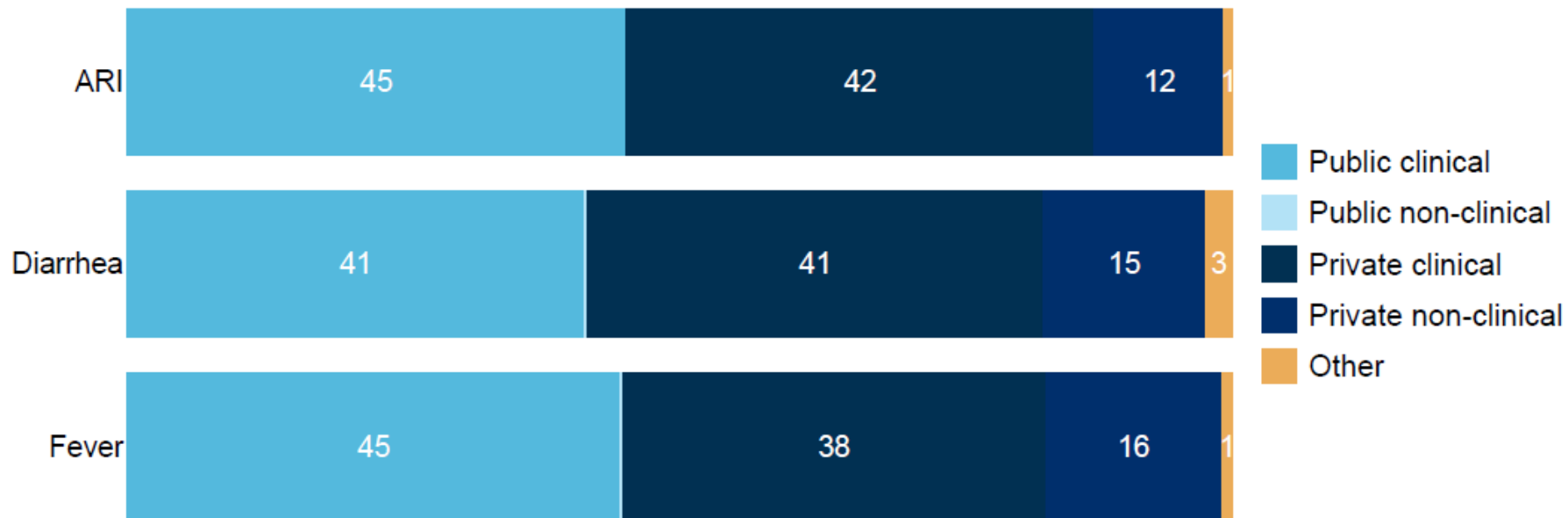
28%



Note: Use of private clinical sources and private non-clinical sources sums to 101%, as some private sector care seekers use both types of sources.



By illness: *Little variation* in clinical vs. non-clinical sources of care



Source among Ugandans who seek sick child care outside the home



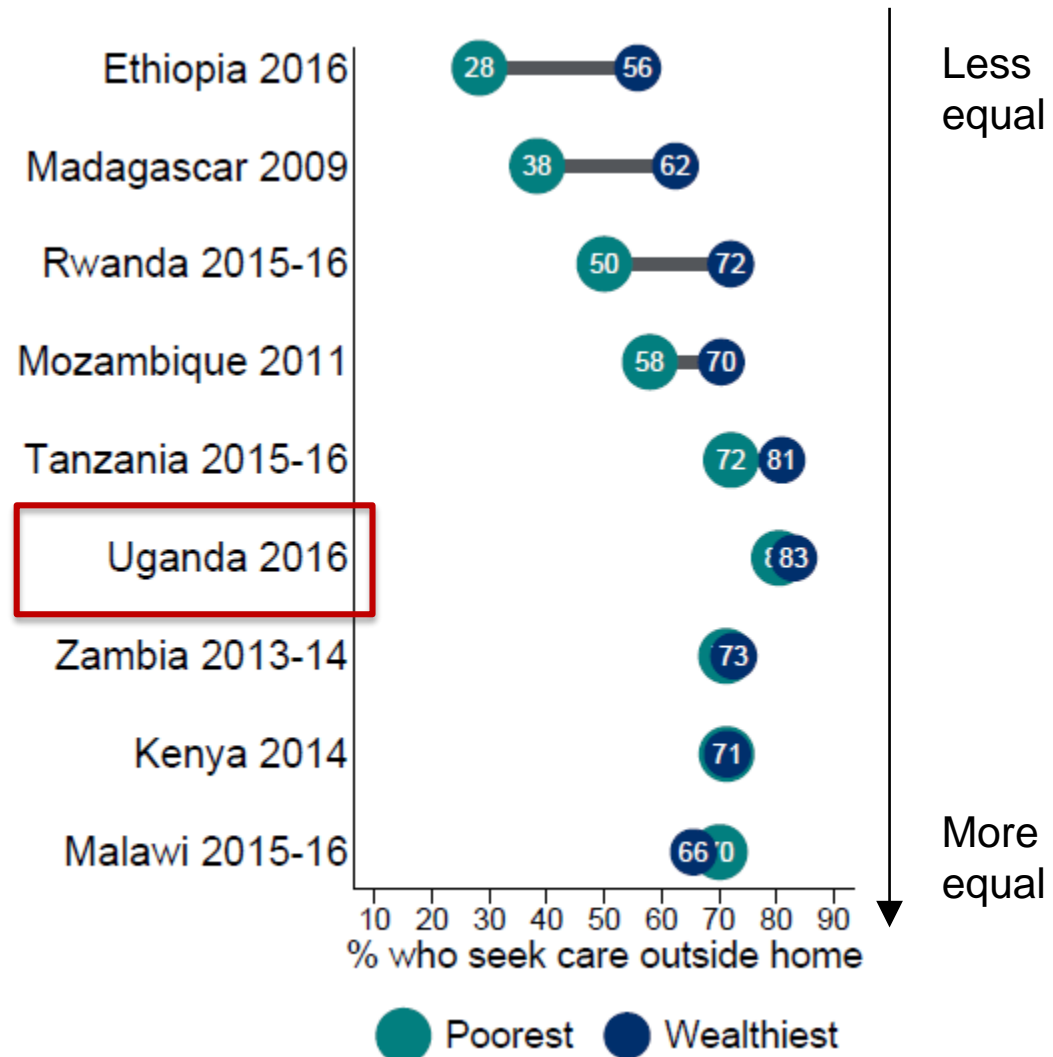
How do patterns of care-seeking vary between the poorest and wealthiest Ugandans?





Care-seeking levels are fairly **equal** among the poorest and wealthiest Ugandans

● Wealthiest
● Poorest





Public sector dominant for **poorest**; private sector dominant for **wealthiest** Ugandans



Source among those who seek care outside the home

Q1 = poorest

Q5 = wealthiest



Public



Private



Both



Other

In Uganda, the private sector is dominant for the wealthiest care-seekers:

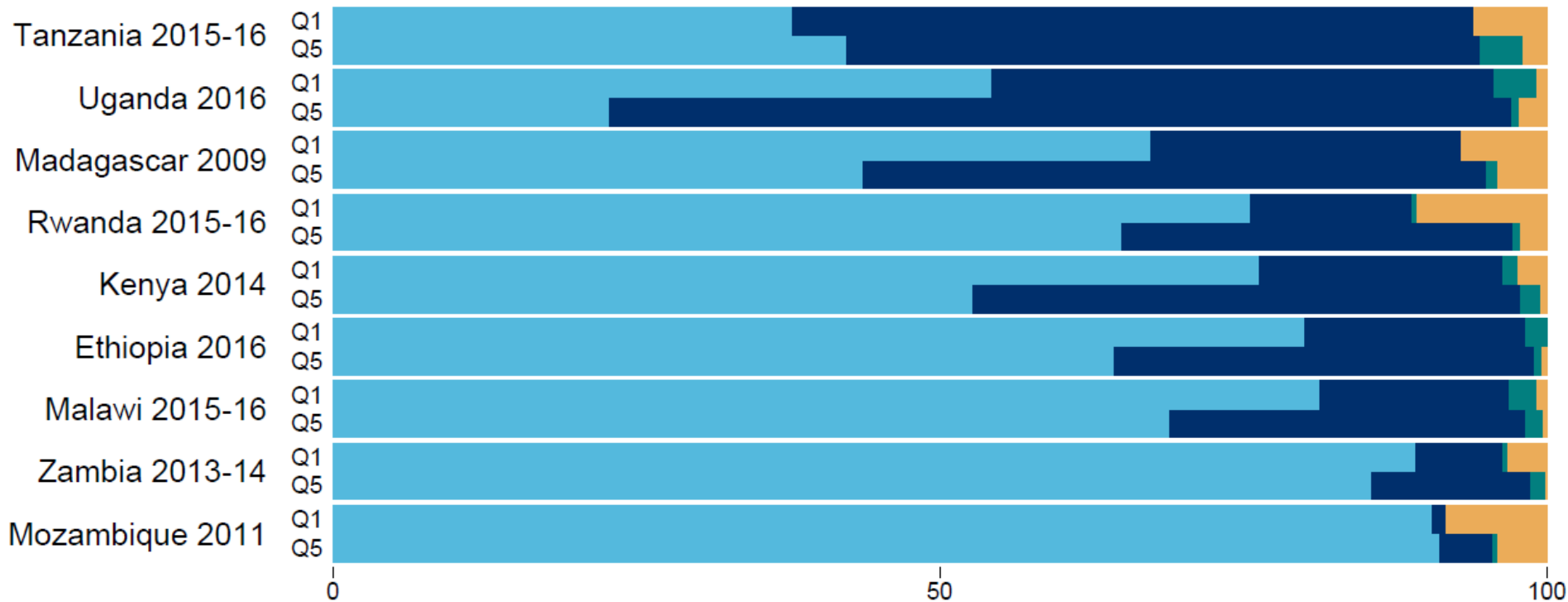
- 74% of wealthiest and 41% of poorest caregivers use the private sector

Public sector use is higher among the poorest Ugandans:

- 54% of poorest and 23% of wealthiest caregivers use the public sector



Use of the **private** sector is higher in **Uganda** across income levels than in most other countries in the region



Source among those who seek care outside the home

Q1 = poorest
Q5 = wealthiest

Public Private Both Other



Summary

- **2 out of 5** children had experienced a treatable illness in the past two weeks
- **80%** of caregivers seek treatment outside the home
 - **54%** use the private sector
 - **42%** use the public sector
- **Private sector** is dominant
 - Uganda has the **highest** level of private sector care-seeking compared to all other East and Southern African USAID priority countries
- Care-seeking sources vary across income levels
 - **41%** of poorest and **74%** of wealthiest use private sources
 - **23%** of wealthiest and **54%** of poorest caregivers use the public sector
- Clinical vs. non-clinical sources
 - Private sector: **73%** use clinical sources; **28%** use non-clinical sources
 - Public sector: **99%** use clinical sources; **1%** use non-clinical sources



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About SHOPS Plus

Sustaining Health Outcomes through the Private Sector (SHOPS) Plus is USAID's flagship initiative in private sector health. The project seeks to harness the full potential of the private sector and catalyze public-private engagement to improve health outcomes in family planning, HIV, child health, and other health areas. SHOPS Plus supports the achievement of U.S. government priorities, including preventing child and maternal deaths, an AIDS-free generation, and Family Planning 2020.



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