



# Sources for sick child care in *Haiti*

*One in a series of analyses by SHOPS Plus*

July 2018





## Purpose of this analysis

- Understand whether and where Haitian 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**

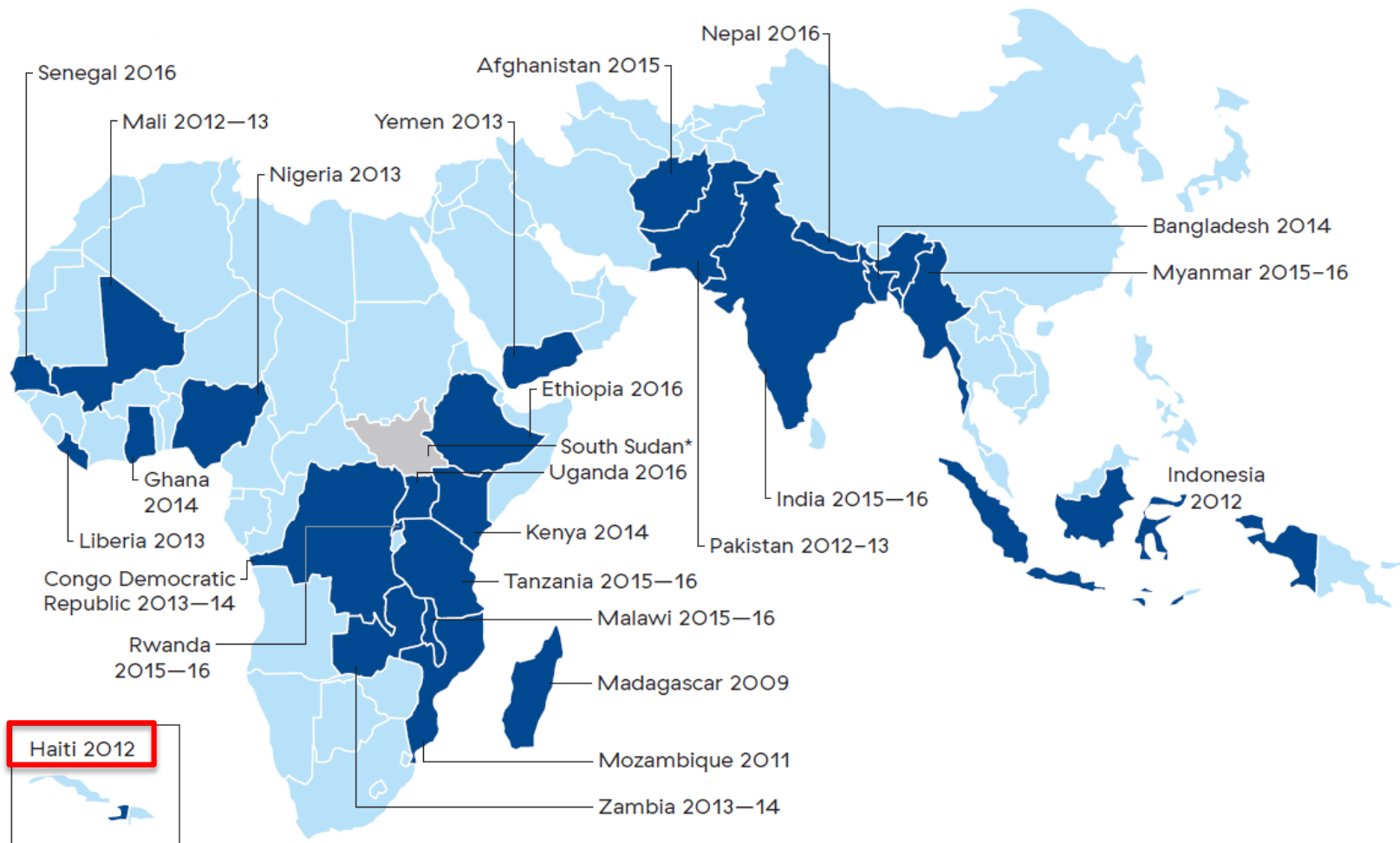


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# Demographic and Health Survey (DHS) data analyzed from 24 priority countries

## USAID priority countries analyzed using Demographic and Health Survey data



\*No DHS data are available for South Sudan.



# Haiti 2012 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 Haiti 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) Across USAID priority countries
  - c) Wealth quintile: poorest and wealthiest Haitians



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

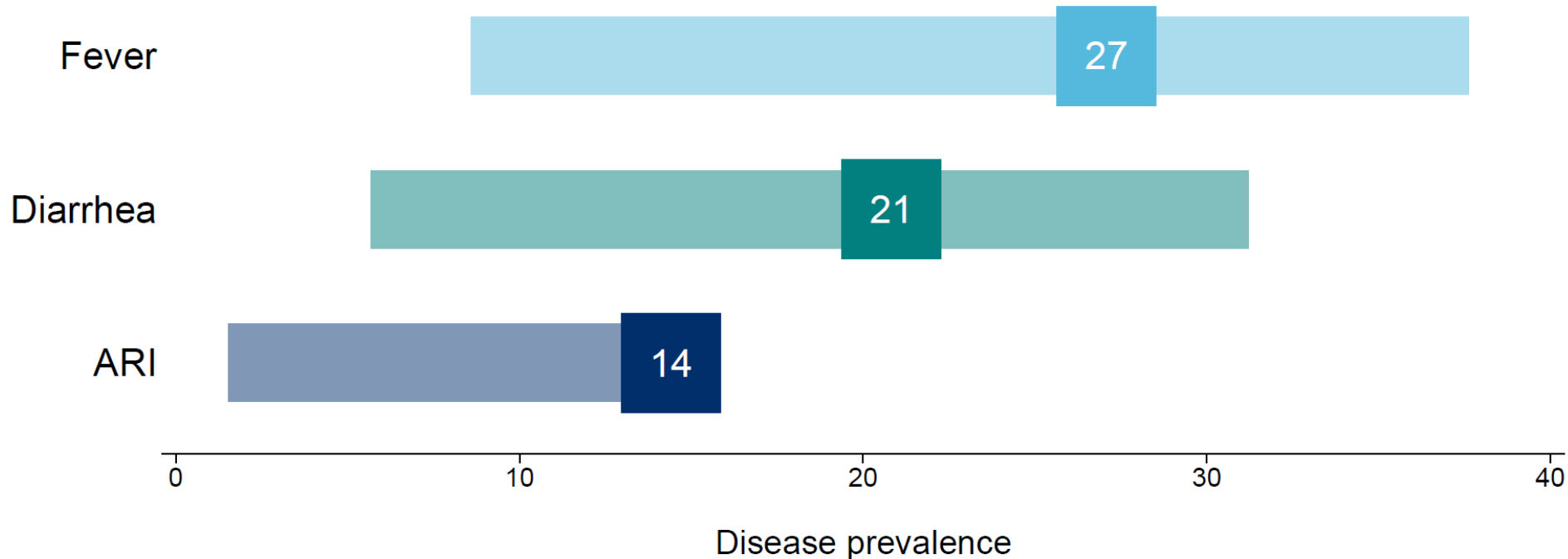




# Haiti's illness prevalence is relatively high compared to in many other USAID priority countries

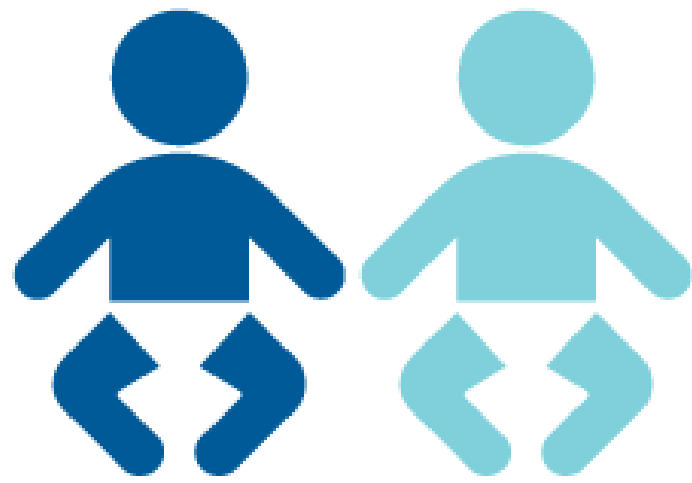
Bars show **range** across USAID priority countries; squares show **Haiti**

## Illness prevalence: Haiti and USAID priority countries





**Nearly 1 out of 2 children in Haiti experienced fever, ARI symptoms, and/or diarrhea in the last 2 weeks.**





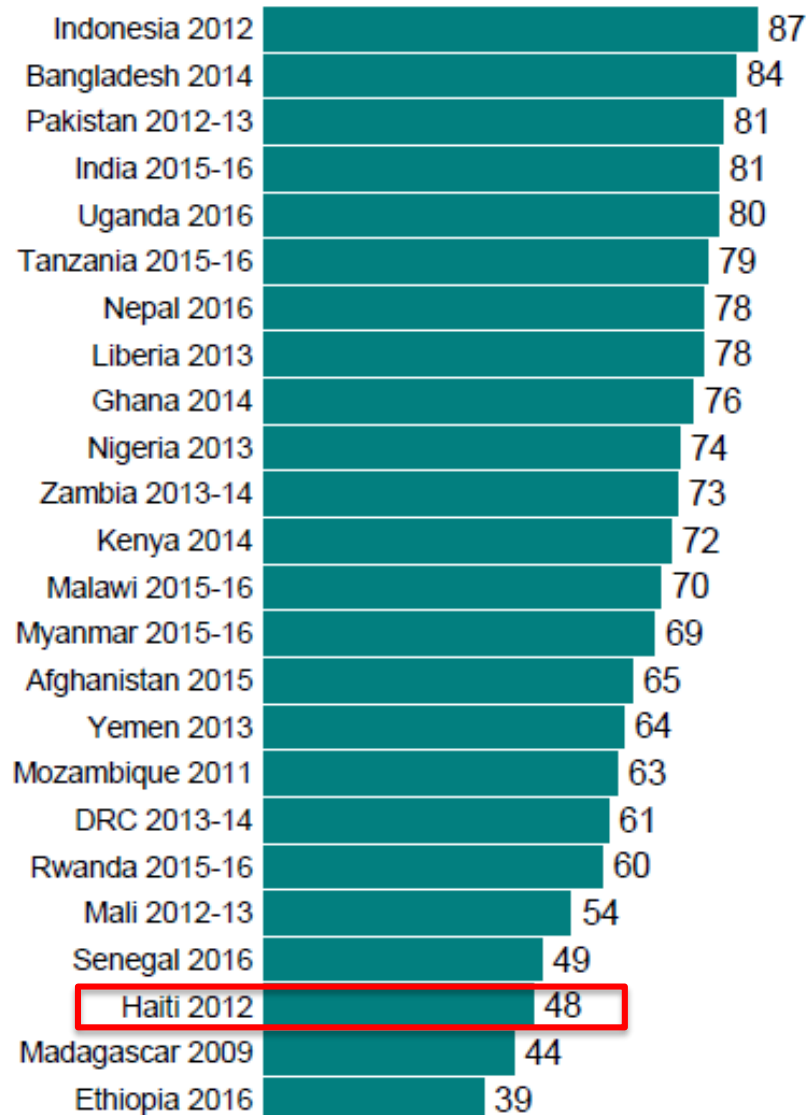


How frequently is out-of-home  
care sought for Haitian  
children with these illnesses?





## Haiti has one of the lowest care-seeking levels among USAID priority countries



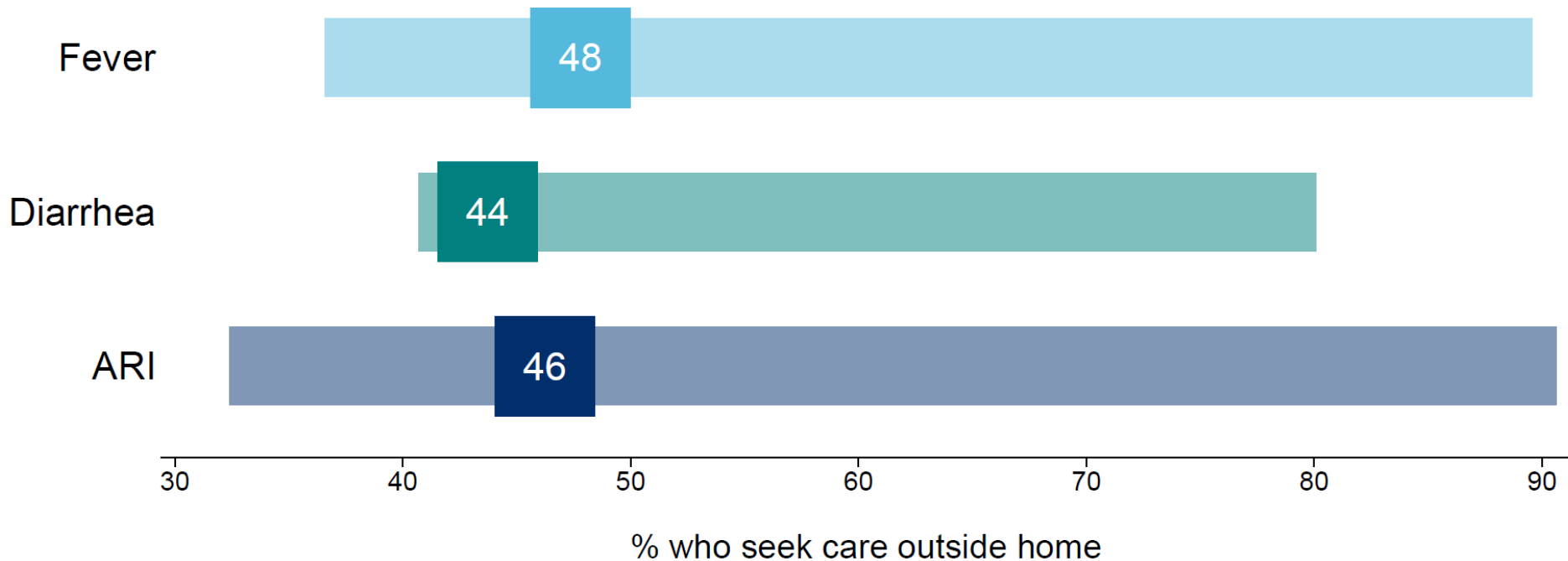
% of caregivers who seek treatment for children with any of the three illnesses in each of the 24 USAID priority countries analyzed



# Across illnesses, Haiti has a low care-seeking level compared to most USAID priority countries

Bars show **range** across USAID priority countries; squares show **Haiti**.

## Caregivers who seek care outside the home: Haiti and USAID priority countries





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

Public, private, other



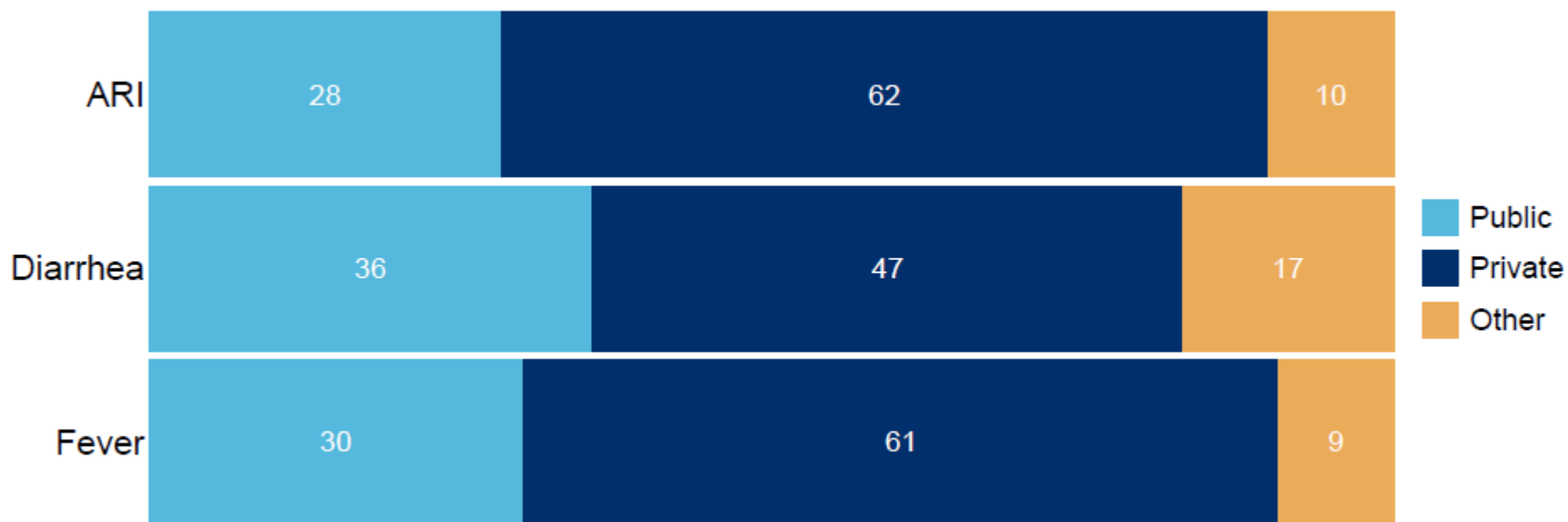


## Sources of care

Public sector	Private sector	Other
<ul style="list-style-type: none"><li>· Hospitals</li><li>· Health centers</li></ul>	<ul style="list-style-type: none"><li>· Private clinics, hospitals, health centers, doctors, and nurses</li><li>· Nongovernmental organizations</li><li>· Pharmacies, shops, and mobile merchants</li></ul>	<ul style="list-style-type: none"><li>· Traditional healers</li><li>· Friends and relatives</li></ul>



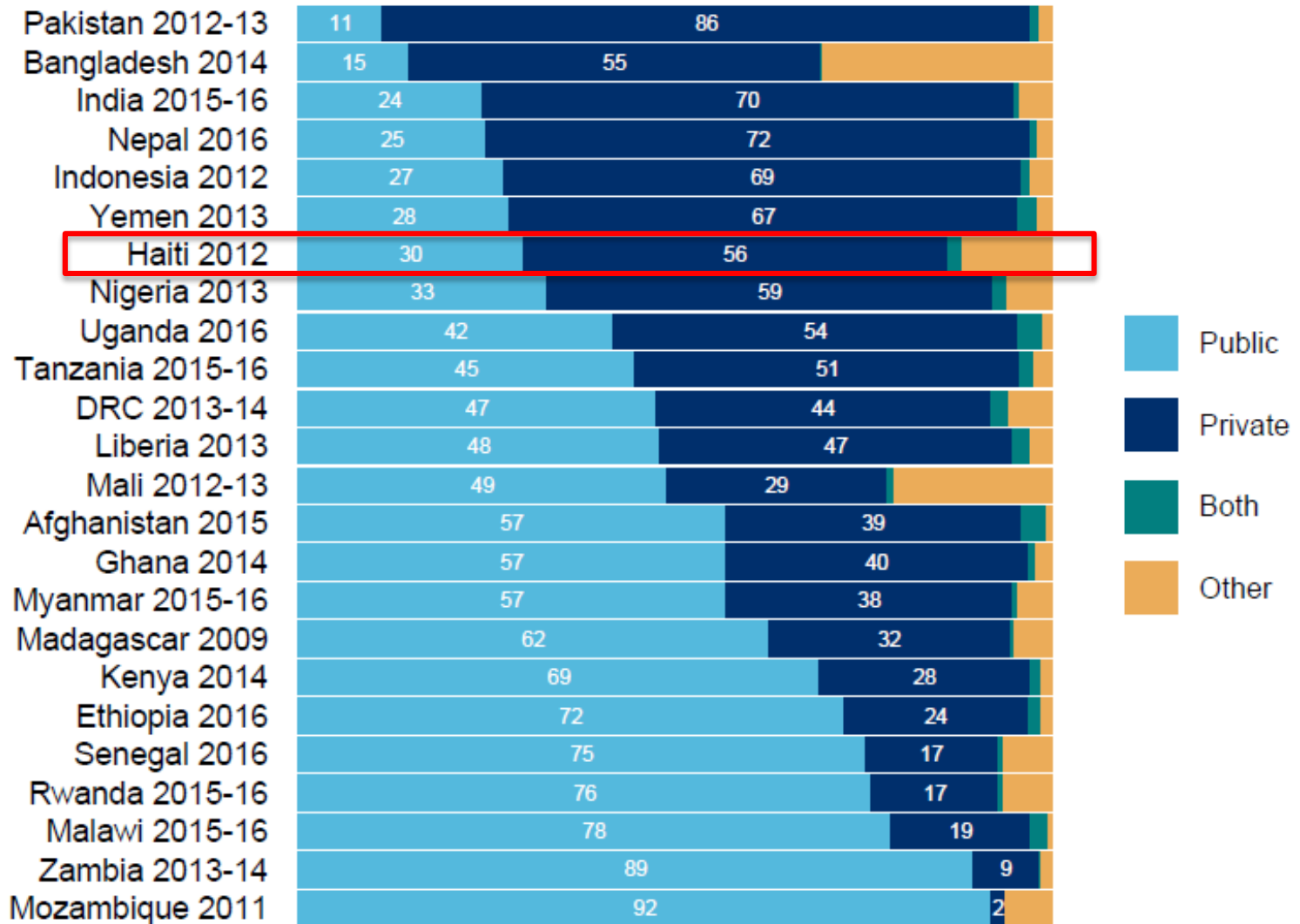
## Care-seeking source patterns in Haiti vary somewhat by illness



Source among Haitians who seek sick child care outside the home



# Haiti's **private** sector is dominant compared to in other USAID priority countries





Among caregivers who seek sick child care outside the home, **56%** seek treatment or advice from private sector sources and **30%** from public sector sources. An additional **12%** use other sources.



■ Public source    ■ Private source    ■ Both    ■ Other





# Sources of care: Clinical versus non-clinical





## Sources of care: Clinical and non-clinical

	<b>Public sector</b>	<b>Private sector</b>
<b>Clinical</b>	<ul style="list-style-type: none"><li>· Hospitals</li><li>· Health centers</li></ul>	<ul style="list-style-type: none"><li>· Private clinics, hospitals, health centers, doctors, and nurses</li><li>· Nongovernmental organizations</li></ul>
<b>Non-clinical</b>	<ul style="list-style-type: none"><li>· Not specified in DHS</li></ul>	<ul style="list-style-type: none"><li>· Pharmacies, shops, and mobile merchants</li></ul>



# Most **private sector** clients use **clinical** sources

Public sector:

100%



Non-clinical

0%



Private sector:

87%



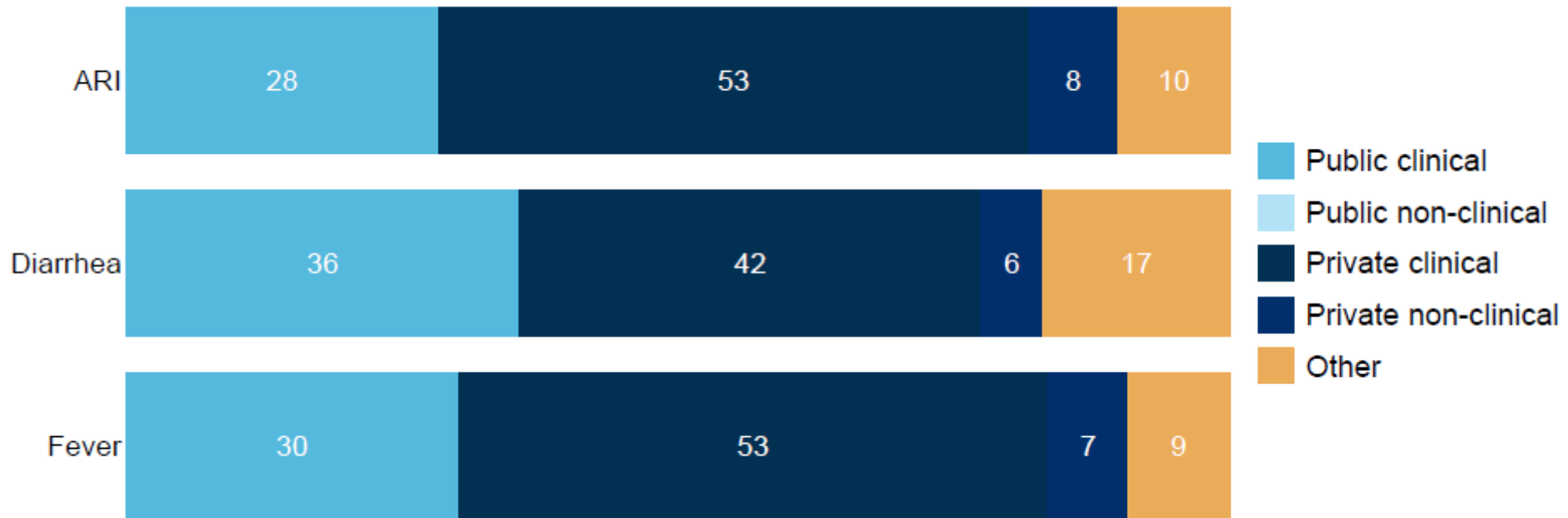
Non-clinical

13%





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



Source among Haitians who seek sick child care outside the home



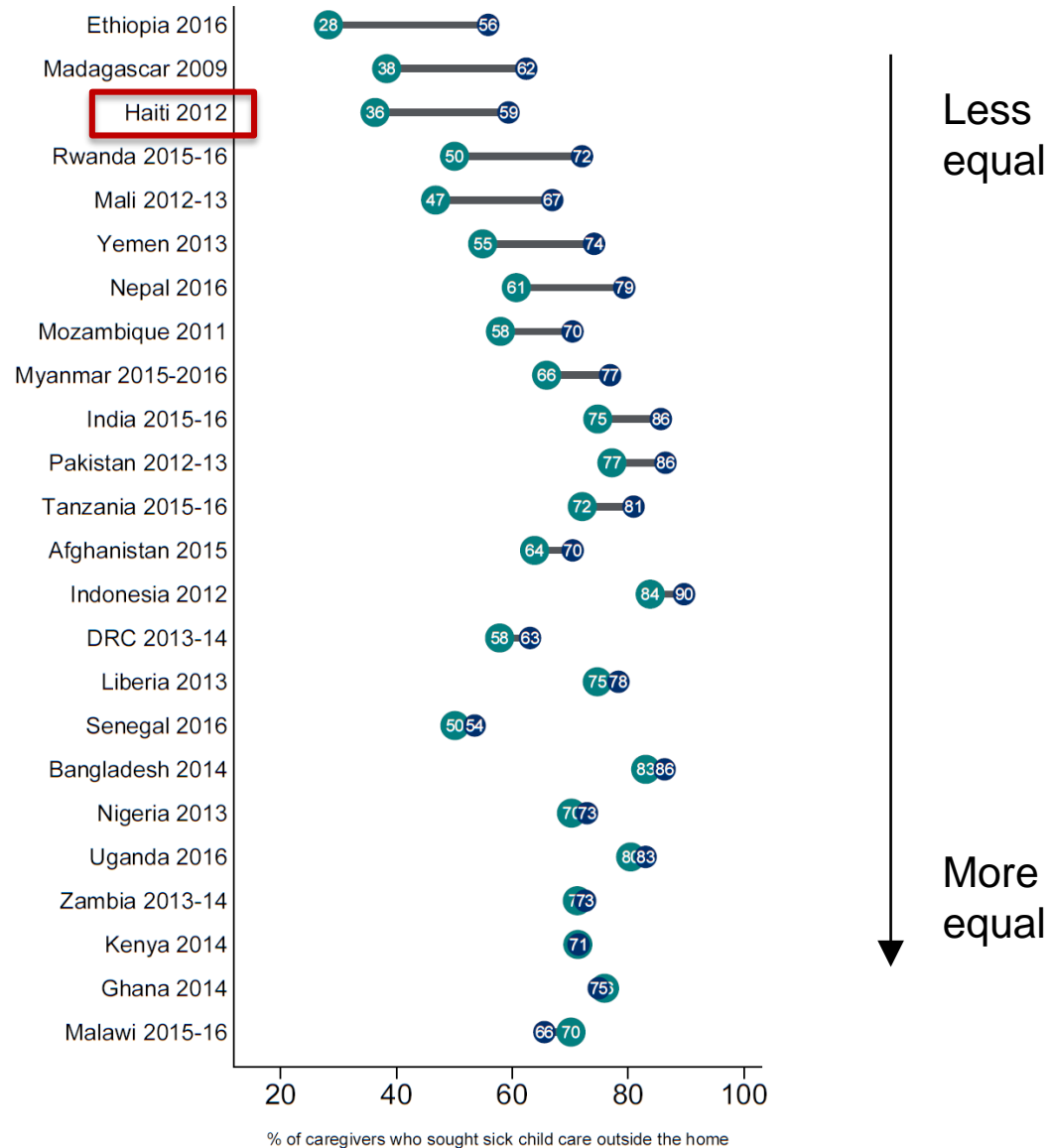
How do patterns of care-seeking vary between the poorest and wealthiest Haitians?





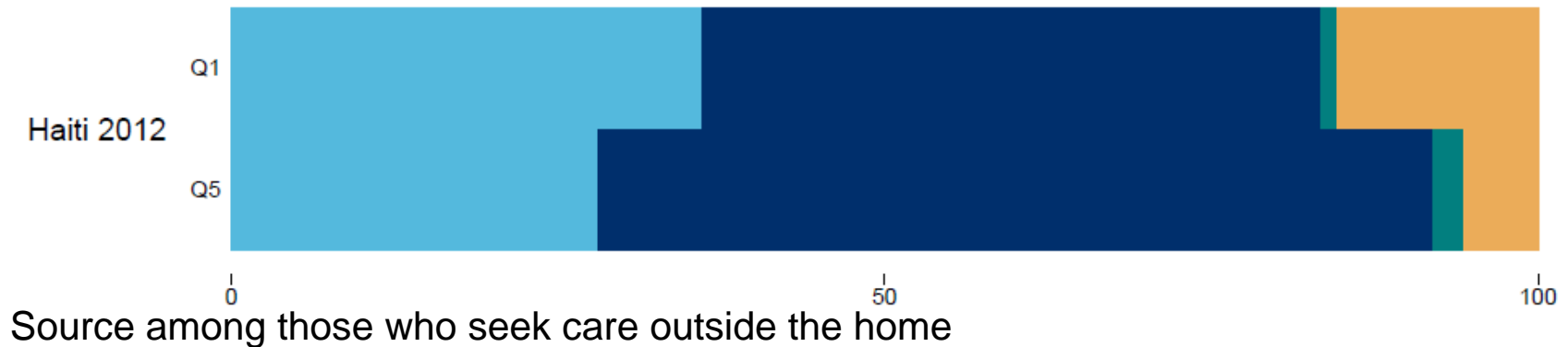
# Haiti has a large socioeconomic disparity in care-seeking levels

● Wealthiest  
● Poorest





# Private sector is dominant for **both poorer and wealthier** Haitians



Q1 = poorest  
Q5 = wealthiest

Public Private Both Other

In Haiti, the **private** sector is dominant:

- 47% of poorest and 64% of wealthiest caregivers use private sector

**Public** sector use is less common, particularly among the wealthiest:

- 36% of poorest and 28% of wealthiest caregivers use public sector

An additional 15% of the poorest families rely on **other sources** of care



# Summary

- Nearly **1 out of 2** children experienced a treatable illness in the past two weeks
- **48%** of caregivers seek treatment outside the home
  - **36%** of poorest seek care
  - **59%** of wealthiest seek care
- **Private sector** is dominant
  - The private sector is the primary source of care (56%); in addition, 30% use public sector sources, and 12% use other sources
- Substantial differences in sources used by income level
  - **47%** of poorest and **64%** of wealthiest use private sources
  - **36%** of poorest and **28%** of wealthiest caregivers use the public sector
- Clinical vs. non-clinical sources
  - Private sector: **87%** used clinical sources; **13%** used non-clinical sources
  - Public sector: **100%** report using clinical sources





## Acknowledgements

These analyses were produced by:

- Sarah E.K. Bradley, Lauren Rosapep, Tess Shiras, SHOPS Plus

Thank you to:

- Cathy Clarence, Saiqa Panjsheri, Anthony Leegwater, Jennifer Mino-Mirowitz (Abt Associates)
- Malia Boggs, William Weiss, Kerry Ross, Nefra Faltas (USAID)

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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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