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ECONOMIC ASPECT AND MEDICAL EFFECTIVNESS OF PUBLIC HEALTH IN NIGERIA AND IN UKRAINE

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The main task of the healthcare system and government in particular is development and implement of a preventive measures set with the main aims: reducing exposure of the risk factors and promotion of the positive factors that determine health, including the socio-economic, socio-biological, ecological and health organization. Otherwise it should be noted that medical and organizational factors have a direct relationship with the economic development of the country, which explains the relevance of the chosen topic.

Nigeria's healthcare system is still a labor-intensive handicraft industry. Rapidly growing demand on medical services and more complicated health care provision than in the past.

Objective. Comparative analysis of main indexes of public health in Nigeria, Ukraine and average world indexes and their relations with economic aspects.

The results: Analysis of the World Bank's public health data is one more evidence that shows us how horrible current state of public health in Nigeria. In 2015 Nigeria was 4th in top-5 countries with the highest maternal mortality (814 cases per 100 000 live births). For compare in Ukraine this rate was 24 cases and average world rate – 216 cases. Also Nigeria was in top-10 countries with the highest infant mortality rate with 69 cases per 1 000 live births and under-five mortality rate with 109 cases per 1 000 live births (in Ukraine infant/under-five mortality rate is 8 / 9 cases and average world rate – 32 / 43 cases;). The second largest number of people newly infected with HIV/AIDS in the world (250 000 people in 2015 vs. 160 000 people in 1990) and situation become worse: in 1990 every 71st citizen was infected with HIV and in 2015 this indicator already – every 32^{nd} citizen and 24th position in the incidence of

tuberculosis list in the world (322 per 100 000 population). Prevalence of TB in Ukraine is 91 cases, average world indicator – 142 cases.

Analysis of the main problems of Nigeria's healthcare system showed that all the problems related with improvement of healthcare system can be divided into organizational (lack of consumer awareness, or participation or pervasive corruption, or absence of integrated system for disease prevention, surveillance and treatment) and economic problems related with scarcity of labor, financial and material resources (among them poor human resources, management, remuneration and motivation; lack of basic infrastructure and equipment; lack of fair and sustainable health care financing, very low governments spending on health and high out-of-pocket expenditure on health at the low living standard).

Results of up-to-date information analysis (2014) about healthcare expenditures shows that it is only 119\$ per capita in Nigeria, whereas 203\$ in Ukraine and 1061\$ as world average. Additionally, in Nigeria only 25.1% of total expenditures is covered by government, 71.7% by private sector (95.7% of them is out-of-pocket health expenditure). In the same time this is only 0.9% of GDP and it is well-known fact that for normal functioning of healthcare system specific weight of healthcare expenditures should be not less than 10% of GDP.

For Ukraine total expenditures (private (out-of-pocket)/public(GDP)) ratio is next: 46.2%(93.9%)/50.8%(3.6%). Also Nigeria's healthcare is supported by external sources of financing. In 2014 the share of these resources was 6.7% of total expenditures while 0.6% in Ukraine and 0.2% as an average in the world.

Thus very low governments spending on health and lack of government regulation from one side and high out-of-pocket expenditure on health at the low living standard from another are the main economic reasons of demonstrated earlier medical ineffectiveness.

In other words, one of the key factors of sustainable development of Nigeria's health system should be development and economic growth and, as a consequence, the availability of resources for investment into the health system.