

Improving Health Improves Economic Well-being

One company's experience

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Overview

FROM A MACRO POLICY PERSPECTIVE, governments, economists and organizations working in international development have recognized that investments in education, health care, nutrition, infrastructure, transportation and other sectors of development contribute to economic growth. At an individual level, access to improved healthcare services and educational opportunities provides new options and opportunities to improve livelihoods and economic status. While these conclusions seem intuitive, finding a direct correlation

between health interventions and economic outcomes remains largely elusive.

In part, this gap of knowledge may be due to a lack of appropriate metrics, complexity and costs of measuring relationships between health and economic growth, or because economic indicators fall outside the stated purpose of a particular program. Hence, organizations that may attempt to assess the broader economic impact of their programs are largely left with anecdotal evidence.

Abbott Fund is a private foundation founded in 1951 by Abbott, a global health care company. The Fund's mission is to create healthier global communities by supporting four major program areas: global AIDS care, access to health care, science



Mother and child are cared for at a rural health facility in the Mbeya region of Tanzania that receives Abbott Fund support.

and medical innovation, and community vitality. Programs have ranged from health care worker training and infrastructure modernization to support of community-based organizations, creation of referral networks and specific interventions to reverse trends in malnutrition and maternal and infant mortality. The HIV/AIDS-related programs concentrate on improving accessibility and quality of HIV testing, counseling and treatment services to patients.

These programs, whether in urban or rural settings, were conceived with a high degree of local community input and based on assessments of community needs. Program-related measures were created and tracked in alignment with the health objectives of the programs. In many of the communities, there has been tangible evidence that health improvements have created an enabling environment for individuals to return to work, seek employment, care for their families and for children to return or remain in school. The improvements have been noted at every level, from the individual up through national health systems.

One of our greater program investments has been in modernizing the health systems of Tanzania. This paper will provide an overview of the Tanzania program and examine its perceived economic benefits as well as propose how economic impact could be better captured in the future.

Health needs in Tanzania

TANZANIA HAS APPROXIMATELY 38 million residents. According to most recent World Bank estimates, Tanzania has a GNI of \$12.4 billion, and GNI per capita of \$340. In the past decade, expenditures on health as percentage of GDP have been low, rising to about four percent. Health infrastructure was largely neglected due to lack of available funds.

HIV/AIDS is the leading cause of death among adults 15-59, with a recorded prevalence of seven percent (Tanzania National AIDS Control Programme). Infectious diseases, many avoidable, account for most premature deaths and up to one half of all deaths occur among adults in the productive years of life, between 15 and 54. With more than 80 percent of its workforce employed in agriculture, forestry or fishing, industry has been persistently affected by health factors resulting in low productivity and incomes. There currently is only about one doctor per 25-30,000 Tanzanian residents.

Abbott Fund and the Government of Tanzania formed a public private partnership in 2001 to modernize the country's health system and expand access to HIV testing and treatment services. This partnership has coincided with an influx of global HIV donor funds and the implementation of a national HIV/AIDS treatment program. With outdated infrastructure geared towards emergency inpatient services, and a crippling



Tanzanian Minister of Health David Mwakyusa (left) and Abbott Chairman and CEO Miles D. White (right) dedicate a modernized laboratory at Mt. Meru Hospital in Tanzania to fight HIV/AIDS.

lack of trained health care professionals, the country faced many challenges.

"When we first began our discussions with Abbott Fund, I am sure we regarded each other with a certain amount of distrust," said Anna Abdallah, former Minister of Health, United Republic of Tanzania. "They were wondering if Tanzania was a worthwhile investment and we were apprehensive about entrusting such an important part of our health system to a group that works very differently than we do. But more than five years later, the results speak for themselves."

Strengthening Tanzania's health systems

THE FIRST PHASE of the Tanzania program centered at Muhimbili National Hospital, the country's leading teaching and reference hospital, with the understanding that changes in Muhimbili would trickle down to the rest of the system.

Physical changes at Muhimbili included the building and equipping of a modern three-story outpatient clinic at Muhimbili, which provides health care services to all patients, reducing stigma for those seeking HIV treatment. The hospital's laboratory has been modernized, allowing patients to get test results on the same day, rather than coming back days or weeks later to receive a diagnosis. One of the most extensive hospital IT systems in East Africa has been installed at Muhimbili to track health history, referrals, test results and drug prescriptions, and hospital staff have been trained to operate the system.

"For the first time, we have the systems in place so we easily locate records, track the progress of our patients, access their laboratory tests and know what medications they are taking. This has made a tremendous difference in our work environment as well as the patient's care and experience at the hospital," said Professor Leonard Lema, Chief Executive Officer, Muhimbili National Hospital. "On an administrative level, it helps us to maximize the valuable hours of each of our doctors and nurses. We are also able to be more effective managers because of rapid access to financial, human resource and supply records."

In addition to Muhimbili Hospital, the Tanzania program has extended to more than 90 hospitals, clinics and rural health facilities across the country. This includes both training and physical renovations at more than half of the country's regional hospitals. These 90 sites are now offering voluntary counseling and testing services for HIV, allowing testing to reach some rural areas for the first time. More than 150,000 patients have now accessed testing services at the improved facilities, and today about one in three people enrolled in the government's national HIV treatment program are receiving services at a facility that has benefited from Abbott Fund improvements.

Training of healthcare professionals has been integral to the scale up of programs across the country. To date, more than 10,000 health care professionals and community health workers have been trained through this partnership.

In 2007, Abbott Fund and Ministry of Health recognized that outdated laboratories around the country remained a key impediment in improving patient health. In response, Abbott Fund has committed to modernizing the laboratories of all 23 regional hospitals across Tanzania. The first phase of this program began in 2008, with the renovation of four rural and urban hospital laboratories.

Economic benefits

THE PROGRAM HAS NOTED a number of anecdotal reports about the economic impact of these health system improvements. Executive directors at several hospitals, including Muhimbili, have reported that improved working conditions have enhanced staff morale and productivity. They believe that upgraded facilities, training, and updated tools will positively impact staff retention at their institutions.

"We believe that the recent changes at Muhimbili will result not only in better care for the patients, but in greater staff retention," said Dr. Deodatus Mtasiwa, Chief Medical Officer, Ministry of Health & Social Welfare, United Republic of Tanzania. "At the Ministry of Health, we have done our part by improving the incentives scheme. The Abbott Fund has contributed by creating a work environment where the staff wants to come to work and feels better able to do their jobs."

Based on feedback from patients and health workers, the availability of health care services and same-day tests results and prescriptions saves them multiple return trips and lost wages. In rural and semi-urban centers, access to testing and medical services where people live and work appears to be a stabilizing factor within communities, reducing the time and expenses required for individuals to travel great distances to receive medical services. As a result of medical treatment and services, it is presumed that many people living with HIV are returning to work and able to lead productive lives and support their families.

One impact that can be measured is that strengthened hospital management practices at Muhimbili Hospital increased hospital-generated revenues by more than 50 percent in the first two years of the program. The hospital is now focusing on continued operational improvements to its modernized central pathology laboratory that will attract referrals and external research funding.

Last, the work that has been done encourages other funders to invest in Tanzanian health. Those who contribute training or goods are met with a working system that can handle the influx.

"When the Elizabeth Glaser Pediatric AIDS Foundation embarked upon an ambitious HIV care and treatment program in Tanzania, we learned that there were already systems in place in several health facilities that would allow us to reach more of the people we wanted to serve more quickly," said Anja Giphart, Country Director for EGPAF in Tanzania. "Abbott Fund support already had improved the facilities where we

would be working, providing an excellent foundation for us. This was extremely encouraging for our work in Tanzania."

Discussion

IT IS EVIDENT that economic and health improvements appear to be inextricably linked, although not easily quantified. Abbott Fund's programs have gone beyond their original health-related goals, and have helped to create an enabling environment for economic growth. These programs have been a catalyst that attracted resources of other private sector organizations, facilitated in retention of valuable health care workers and contributed to a more productive and healthier workforce.

In order to have a more comprehensive understanding of the economic impact of these programs, it would be interesting to document the following indicators:

- Number of jobs created by programs
- Number of people trained that resulted in employment
- Number of trained healthcare workers who stay in their home countries rather than seek employment abroad
- Number of people on medical treatment returning to the workforce
- Productive work hours gained as a result of efficiencies in health system.

While there are many economic impacts that can be transformational at the individual and family levels, many cannot be easily measured. For example, there is a tremendous qualitative household benefit for a mother who is able to care for her entire family rather than concentrating on a sick child or a spouse. Likewise, a child who is able to stay in school versus dropping out to support the family will have better livelihood options in the future as a result of an education. People living with HIV who have to travel a day each way to a hospital suddenly gain a productive day of work when they no longer have to keep returning to get test results.

Measuring economic impact goes well beyond current program resources of individual donors or private sector actors. This is a much larger enterprise requiring the expertise of academia, health economists and international development organizations to create new models to capture the economic multiplier effect. Capturing these economic benefits may encourage the governments of developing countries to invest in their own health care systems if it contributes to a growing, healthy economy. It would also help guide policy makers to best target health care spending that may also multiply the economic impact of their resource allocations. The data could also help governments attract public and private funds, by showing the potential impact from investing in a healthy work force. 🍀

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Sources

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