

Impact evaluation of community-based health insurance in Senegal: an observational study using Covariate Balancing Propensity Score.

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Abstract

Since 2012, there is a growing political interest in Community-Based Health Insurance (CBHIs), through which the Senegalese government intends to extend health insurance coverage. The country is making significant efforts in addressing equity issues and the low enrolment rate by subsidizing insurance premiums. In this context, our paper evaluates the impact of CBHIs on health services utilization and direct payments, using the 2017 demographic and health survey. This analysis adopts an approach referred to as the covariate balancing propensity score which exploits the dual characteristics of the propensity score (balance and assignment probability). We perform robustness checks, including other propensity scores weighting and sensitivity analyses. Our results show that CBHI members are more likely to seek medical care and less likely to pay for it, but when they do, chances are they just pay partially unlike non-insured individuals. However, these positive findings should not eclipse the low enrolment rate, only 7% of the informal sector in 2017. Global health experts are legitimately questioning the role of CBHIs in the progress towards Universal Health Coverage because the core principals of these schemes, namely their voluntary nature, the community management and their small size, are also their main limitations. Eventually, they should evolve by scaling up and by adopting some professional management. To date, the country is not ready yet to switch from voluntary to compulsory enrolment but these results are encouraging enough to develop a less fragmented resources pooling in the upcoming years.

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