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Health Sector Corruption and Access to Healthcare in Africa

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Corruption, the abuse of public power for private gain can take different forms in the health system, the most direct and immediate of which is bribery. It plays an important role in determining access to healthcare.


Corruption affects the composition of public expenditures which in turn can adversely affect health sectors through reduced funding allocation. The most corrupt countries allocate fewer public resources to the health sector, which provides less rent-seeking opportunities for officials and the government than other components of public expenditure (physical capital, housing, etc.).

The level of corruption also affects the choice of governments on how to spend resources allocated to the health sector. In a corrupt environment, authorities are more likely to prioritize the construction of hospitals and the purchase of expensive, high-tech equipment because of the rents associated with these types of investments that are subject to lucrative contracts. This choice is made at the expense of primary health care programmes such as immunization and family planning.

Corruption can discourage the use of public health facilities, impose restrictions on the consumption of health services, reduce immunization rates and delay the vaccination of newborns. It reduces citizens' satisfaction with health services, erodes trust in the public component of the health system and increases waiting times in health centres.

When people's trust in the health system is undermined, this can lead to underutilization of health services or increase the likelihood that they will not seek care or complete their medical treatment. It may also lead them to resort to other types of treatment and self-medication which may be harmful to their health.

Inadequate supervision by regulatory bodies, laxity, and insufficient controls due to corruption can lead to absenteeism of health workers in public facilities. In this case, health workers are paid but do not show up for work. This is another form of corruption that affects staffing in the public health service. Public health staff prefer to spend more time on private sector activities at the expense of the public hospital. This slows down the normal functioning of health services and creates a congestion effect.



Corruption can result in the use of public facilities for private purposes, the practice of medical professions by unqualified and under-qualified personnel. It can also lead to the marketing of fake or poor-quality medicines on the market and a shortage of medicines available in public facilities, due to theft and diversion to private pharmacies, all of which are detrimental to health.

The relationship between patients and health professionals presents a risk of corruption due to information asymmetry and a demand for health services that is largely inelastic. This can create abuses in the sector: different actors (government regulator, the payer, the provider, the suppliers of drugs and equipment, and patients) may take advantage of their privileged position for personal gain. For example, the discretionary power of health professionals to decide which medicines and in what quantities are needed can increase these risks of abuse.

The health sector is particularly vulnerable to corruption in the drug sector. As a result, countries are regularly subject to significant trafficking in pharmaceuticals. The fact that information is highly asymmetric between consumers and producers means that the patient cannot check the quality of medicines in advance and must rely on information provided either by the medicine producer or by health service providers.

Corruption affects the quality of health services, increases costs and reduces the volume of health care, thereby limiting access to health care for patients, especially the poorest. For example, informal payments by patients contribute to higher costs of care. In doing so, less affluent citizens may not obtain basic health services because of their inability to pay, thereby exacerbating health inequalities. Countries with poor control of corruption tend to have low Universal Health Service coverage (Figure 1). In Philippines, corruption reduces the immunization rates, delays the vaccination of newborns, discourages the use of public health clinics, reduces satisfaction of households with public health services, and increases waiting time at health clinics. In Turkey, corruption track with increases in infant mortality in the long-run. In Uganda bribery is associated with worse health care for the briber, thus undermining the goal of increased access to health care.

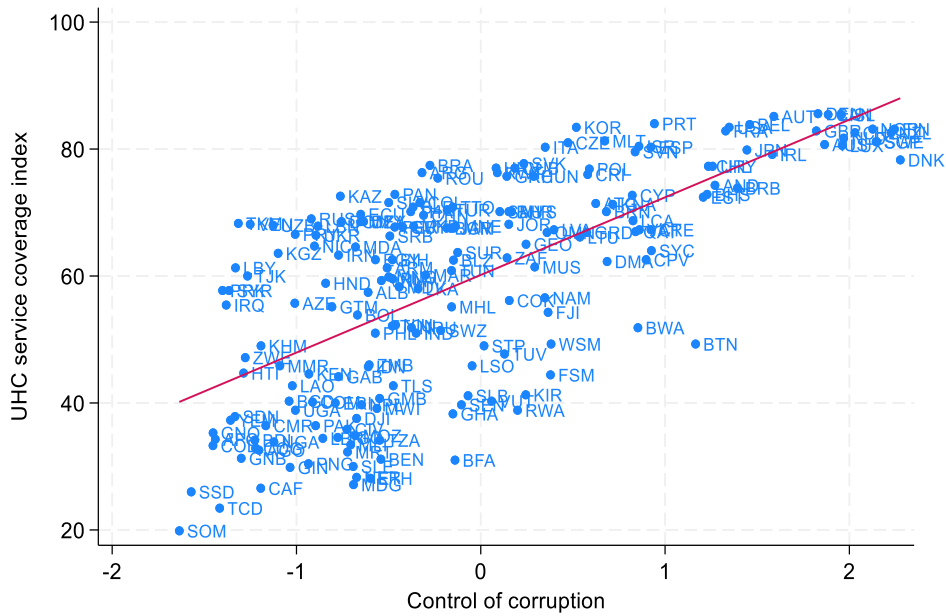


Figure 1

As part of our Irish Research Council funded project “Corruption, Gender and Sustainable Development”, we used Afrobarometer Survey data on people’s experiences of access to medical care in 34 African countries over the period 2019-2022 to examine whether a corrupt healthcare system has consequences for the population’s ability to access care, whether they themselves can or will pay bribes to access care. As shown in Figure 2, a lower incidence of medical corruption is correlated with a higher level of access to medical care.

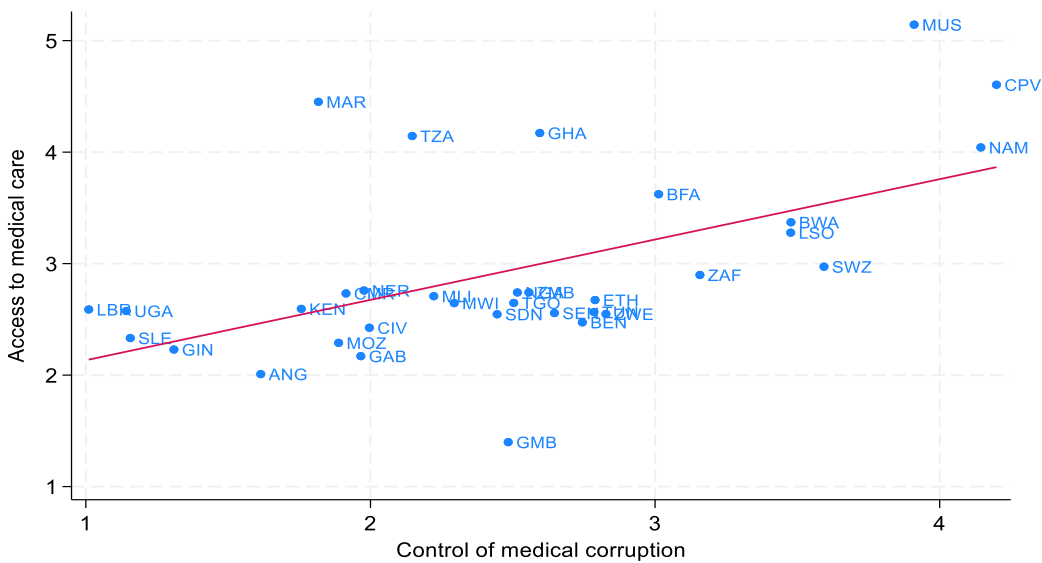



Figure 2



Further findings show that:

- respondents living in sub-national regions in which corruption in the health sector is more common are more likely to report that they have had to go without medical care for themselves or their family regularly or lack access entirely;
- corruption in other aspects of the public administration is not significantly associated with access to health care, suggesting that when it comes to access to improving access to healthcare, fighting medical corruption is of primary importance;
- the regional incidence of medical corruption predicts more difficulty in terms of obtaining the care that they needed for those who have accessed medical care;
- the estimated marginal effects for women are if anything somewhat smaller, probably due to specific government programs for women and children in the health sector in many African countries and international programmes from NGOs and other international development actors;
- medical corruption not only restricts access to medical care, but also degrades the quality of the service for those able to access the system.

Our findings add to the existing literature that has shown how corruption is a serious threat to sustainable development, thus rejecting the notion of corruption as “grease in the wheels” in favour of the “sands in the wheels” hypothesis. They add further weight to the case for devoting substantial resources to health sector-specific anti-corruption efforts. Government and non-governmental organization who wish to foster health capital development through access to medical care have common cause with anti-corruption advocates and practitioners.

You can find links to the full paper and all of COGS's work at the DCU ARC Website: <https://www.dcu.ie/arc>
Social Media: [@DCU_ARC](#)



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