

Can patient navigation interventions be adapted for the worst-off in sub-Saharan Africa?

Evidence from the experts' perspective to help policy decision-making

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These interventions are based on 'navigators' who accompany vulnerable patients through all phases of care to overcome patient-level barriers to accessing care

1 Context

Financial exclusion

User fees have hampered the ability of the indigents to access care

Free care for the indigents

Action research begins in 2007 in Burkina Faso to identify and exempt indigents from user fees

But... exclusion is multidimensional

User fees exemptions have not increased the use of health services by the indigents

Is patient navigation a solution?

A scoping review* shows that there are no patient navigation interventions that target the indigents in low-income countries



2 Objective & Methods



how the actions identified in the literature for other vulnerable population might be **relevant and adapted to implement** for the indigents in sub-Saharan Africa?



22 semi-directive interviews with public health experts



qualitative data were analyzed using **Nvivo12** software and compared to the abilities to access care described in the **Levesque et al.'s (2013)** framework**

"Unlike what is often seen in some cases of pathologies, each indigent is a case. [...] this approach must be truly individualized, so as not to drown certain situations in others."

... to pay

- Ensure free care

- Individualise support through home visits
- Psychological support
- Distribute food to take medication
- Inform on the benefits of adherence and on the potential side effects of taking medication

... to engage

- Comprehensive and sustainable transport system
- Free transportation
- Personalised accompaniment
- Help to navigate within the center if necessary and promote a better reception

... to reach

... to seek

- Adapt mobilisation to different cultural groups
- Help with the administrative paperwork
- Act on gender issues

"I think the key is really: there's a person in front of another person who's going to take that person by the hand, and who's going to say: 'here we go!'"

"There is financial exclusion, but there is also social, cultural, political exclusion, and so on. So, acting on one of the dimensions is relevant, but often not sufficient."

4 Conclusion

- **Little has actually been done** for the indigents
- An **intersectoral, holistic action** is needed to take into account all their needs

- Patient navigation interventions are **highly relevant** for the indigents
- There is a need for **personalised follow-up** at each step of the care pathway

- Experts suggest actions to **act on each ability to access care** of the indigents
- It is crucial to **test these interventions** in order to act in favor of health equity and "leave no one behind"