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Subject: Re: DHS-8-PGSSC-OOP-Template  
Posted by [Jordan Pyda](#) on Fri, 15 Mar 2019 19:28:03 GMT  
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I worked as surgical care coordinator at a high volume surgical hospital in rural Haiti which served the rural poor. This was in the summer of 2010 and for 13 months between 2012-2013. One of the lasting impressions from that time as an administrative and clinical volunteer, was the incredibly thin financial margin that separated patients between a state of well being or health and severe illness and more frequently death. We saw many patients with traumatic injuries but also very simple, easily treatable conditions such as inguinal hernias. After a few months of the same heart wrenching scenes, I started to talk to patients and families more about their costs. I interviewed about 16 patients who received elective inguinal hernia repairs at our hospital and calculated that on average patients paid 140-160USD for all the out of pocket costs combined. Now while this may seem trivial at first, but this hospital was providing fee free care. FREE care. And yet a simple elective hernia repair cost 150USD when average per capita income was/is still 700-800 USD. There were numerous individual patients who I literally had to hike out to bring for their surgical appointment and the stories were all too similar- can't hire anyone to look after my kids or family, can't hire someone to toil the plot of land, can't leave my other source of income (madame sarah), can't afford the trip...

The proportion of patients who incur impoverishing expenditure for surgery is 58%, 55% or so of those costs are catastrophic.. means families are completely ruined.

This data is very limited, and our understanding of these horrible situations is so incomplete. If we could collect this kind of data on a systematic basis and in organized manner we would have the concrete arguments to direct investments into surgical care recognizing how vitally important it is to the socio-economic viability of people, families, communities, and nations - and yes our world.

Out of pocket health expenditures for surgical care is an absolute imperative for data collection- please, strongly urge USAID to consider inclusion in the DHS.

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