

Meeting Notes – 8th November 2025

Members present: Mercy K., Celia N., Cleanheart M., Bosire B., Simon S., Isho A., Marvin M., Henry M., Cynthia M.

People In Sub-Saharan Africa Rate Their Health And Health Care Among Lowest In World

Introduction

The study examines how **Sub-Saharan Africans perceive their health and healthcare systems**, revealing that the region has the **lowest global ratings** for well-being and satisfaction with health services. Despite heavy donor investment, especially in **HIV/AIDS programs**, many citizens remain **dissatisfied with healthcare access, quality and affordability**. The research aims to understand regional variations and the factors influencing these perceptions, including **age, education, income, religion and HIV prevalence**.

Methodology

- The study used data from the **2012 Gallup World Poll**, which covered **28 Sub-Saharan African countries** with about **1,000 adults per country** (and 2,000 in larger nations like Nigeria and South Africa).
- Data was collected through **face-to-face interviews in 58 local languages**, ensuring broad representation.
- Additional datasets included **World Bank Indicators, UNAIDS HIV data and Demographic and Health Surveys (DHS)**.
- The analysis involved **descriptive statistics, graphical analysis, and regression modeling** to explore relationships between **self-rated health, satisfaction with healthcare and socioeconomic variables**.

Key Findings

- **Low Ratings:** Sub-Saharan Africa recorded the **lowest satisfaction (42%)** with healthcare globally and among the **lowest personal well-being scores** (average Cantril ladder score 4.39).
- **Socioeconomic Disparities:** Health perceptions were poorer among the **elderly, less educated, and lower-income** groups. **Urban and wealthier populations** reported higher satisfaction.
- **Healthcare Access:** In some countries (e.g., Ghana, Somaliland, Sudan), **over half the population had never seen a medical professional**.
- **Private Sector Role:** In **12 out of 28 countries**, **private health spending** accounted for at least **half of total health expenditure**, underlining its importance where state systems are weak.
- **HIV Correlation:** Higher **HIV prevalence** was **positively correlated** with perceived **improvements in healthcare**, suggesting that **HIV aid programs (e.g., PEPFAR, Global Fund)** strengthened some health services.
- **Priorities Misaligned:** Despite poor health indicators, **healthcare ranked low** among citizens' top policy priorities—behind **jobs, agriculture, and anti-corruption efforts**.

- **Trust and Governance:** Many respondents expressed **skepticism about government performance**, believing leaders were **not doing enough** to improve or finance health systems.

Implications

- **Equity Gaps:** Disparities by **income, education, gender and location** call for **targeted interventions** to improve access for vulnerable groups.
- **Spillover Benefits:** Disease-specific programs, especially **HIV/AIDS initiatives**, can **positively affect broader health outcomes** when integrated with general health services.
- **Aid Effectiveness:** Donor funding should align with **local priorities and needs**, balancing disease-specific aid with **system-wide strengthening**.
- **Data and Evidence:** There is a **need for localized data** to guide policies, as national averages mask regional inequalities.

Call to action

The researchers urge **governments and health partners** to:

- **Strengthen community-level healthcare delivery** and **train health workers**.
- Enhance **transparency and accountability** in the use of health funds.
- **Expand health financing** mechanisms to improve affordability and access.
- Incorporate **citizen feedback** in health planning and evaluation to ensure responsiveness.

Future of Research

- Investigate **why perceptions differ** sharply across countries and income groups.
- Combine **self-reported data with clinical data** for more accurate assessment of health system performance.
- Examine how **trust in government** and **health-seeking behavior** interact to influence perceptions.
- Explore **intra-country disparities**—why HIV-related aid improves systems in some nations but not others.
- Assess **long-term sustainability** of donor-supported programs and their **spillover impact** on non-HIV services.

Blessings,

Mercy W. KURIA