

# Assessing costs of SBI in Latin America

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# Overview

- Why a costs study
- Current study
- Method (costs identification, measurement, valuation)
- Some preliminary results
- Conclusion

# Why a costs study

- Scarce information regarding the **exact costs** associated with SBI (Bray et al, 2012).
- In publications, costs of SBI sessions range between **~\$3** per session (Zarkin et al, 2003) and **~\$90** per session (Neighbors et al, 2010).
- Costs information is highly relevant for policy makers, to decide whether a policy can be adopted in their country/municipality.

# Why a costs study

- Papers assessing costs of SBI typically look at **patient costs** (i.e., costs related to the actual delivery of the SBI session, such as costs of materials).
- **Programme costs** should also be included (Johns et al, 2003)
  - > costs which take place before the SBI session (trainings, community actions)
  - > overhead costs (building costs, electricity, heating).
- Generally, no publications on costs of SBI in Latin America.

# Aim of our study

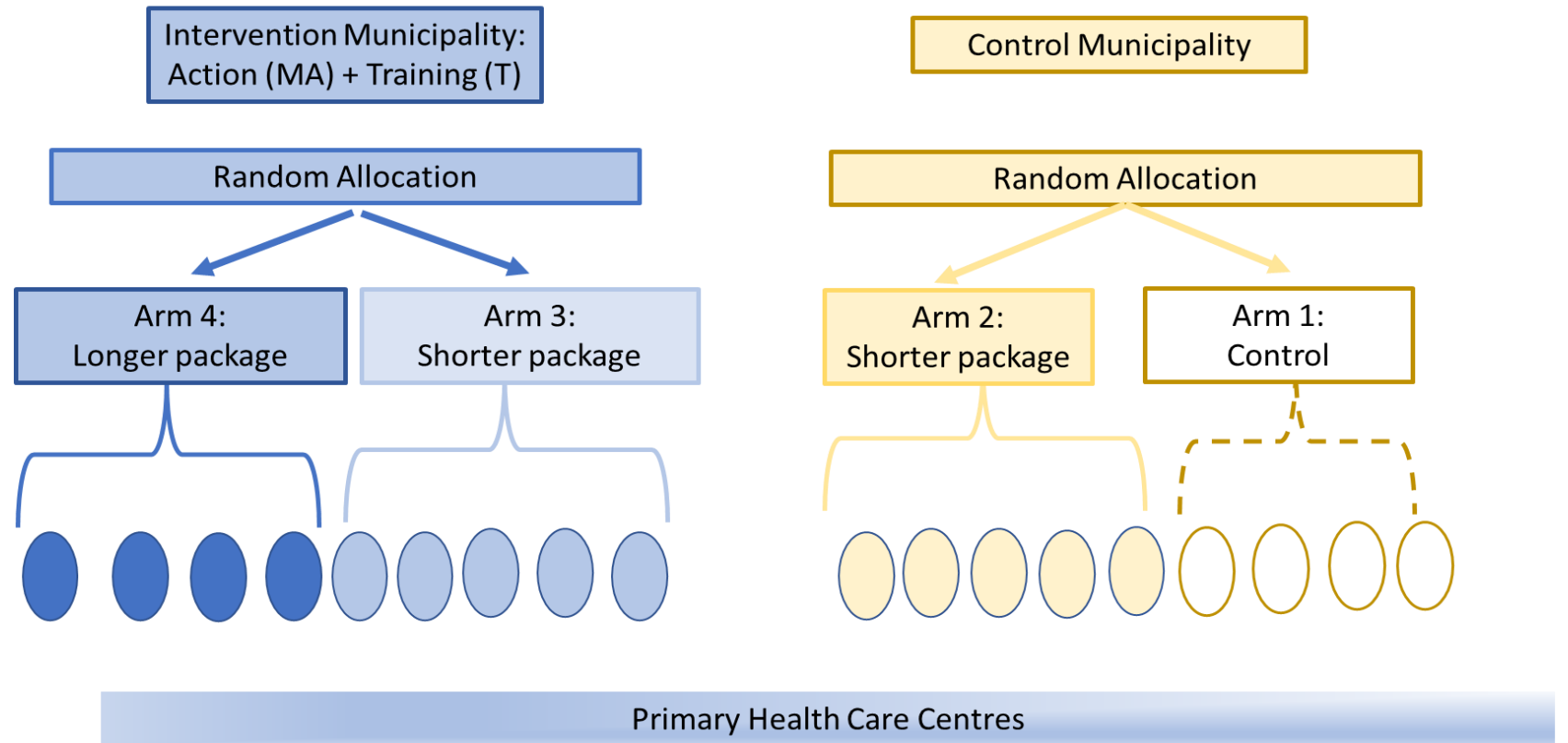
To assess the costs to **set-up** and **implement** a SBI program in three Latin American countries, taking into account both **patient and programme costs**.

-> Results will be used as a component of the SCALA economic evaluation (Return of Investment).

# SCALA study

Four intervention scenarios:

1. simple clinical package without training
2. simple clinical package with training
3. simple clinical package with training and community support
4. complex clinical package with training and community support



# Method

- Ministry of Health perspective, rather than societal perspective
- > Full social costs of the intervention (e.g., productivity loss) are not taken into account.
- > Research costs are not included.

Three main tasks in a costs study:

- costs identification
- costs measuring
- costs valuation

# Costs identification

- through discussions with the local research teams

Activity	Time (#hours)	Costs
<b>CAB meetings, Trainings, User Panels</b>	<ul style="list-style-type: none"> <li>• preparing the agenda</li> <li>• contacting participants</li> <li>• arranging the venue</li> <li>• traveling</li> <li>• participating in the meeting</li> </ul>	<ul style="list-style-type: none"> <li>• renting venue</li> <li>• food &amp; refreshments</li> <li>• materials</li> <li>• transportation</li> </ul>
<b>Tailoring materials</b>	<ul style="list-style-type: none"> <li>• summarizing input and feedback from user panel and CAB members</li> <li>• adaptation of materials</li> </ul>	<ul style="list-style-type: none"> <li>• printing materials</li> </ul>
<b>Community actions</b>	<ul style="list-style-type: none"> <li>• conceptualization of community actions</li> <li>• preparation of community actions</li> </ul>	<ul style="list-style-type: none"> <li>• producing communication campaign materials</li> <li>• printing communication campaign materials</li> <li>• disseminating communication campaign materials</li> <li>• transport</li> </ul>
<b>Implementation</b>	<ul style="list-style-type: none"> <li>• contacting the PHCCs administration with regard to implementation related questions</li> <li>• duration of SBI session</li> </ul>	<ul style="list-style-type: none"> <li>• printing tally sheets and intervention materials</li> <li>• transporting tally sheets and intervention materials</li> </ul>



# Costs measuring

- Through questionnaires.
- For repeated activities (e.g., CAB meetings, user panels, trainings), **unit costs** are determined.

Three categories of respondents:

- local research teams
- PHCC managers (~60)
- Participating health care providers (~450)

# Cost measuring

- Local research teams
  - > report time and costs of **setting-up** the intervention (e.g., training, CAB meeting) and **implementing** the programme (e.g., printing materials)
- PHCC managers
  - > report average providers' **salaries**, **overhead** costs, other implementation costs
- Health care providers
  - > report how much **time** they spent on an average screening

# Cost valuation

- Initially valuated in the local currency of each country.
- Will be transformed in international dollars, to allow comparability.

# Some preliminary results\*

Activity	Colombia	Peru
<b>1 CAB meeting</b>	20 hours preparation (2 members)  ~43\$ venue rent 110\$ food & refreshments 8\$ materials 30\$ transport	26 hours preparation (3 members)  75\$ food & refreshments 23\$ materials 90\$ transport
<b>1 User Panel</b>	20 hours preparation (3 members)  30\$ food & refreshment 8\$ materials 15\$ transport	18 hours preparation (3 members)  30\$ food & refreshment 36\$ materials 45\$ transport
<b>Tailoring materials (in the previous 3 months)</b>	6 hours (1 member)	20 hours (3 members)  15\$ printing materials

\*presented in US dollars

# Conclusion

- Important to distinguish between research-related costs and intervention implementation-related costs.
- Correct cost identification is crucial and should be adapted to the local circumstances, not just previous literature.
- Different respondents are needed to identify and measure costs (e.g., PHCC finance workers to assess overheads).
- Transportation is a more substantial cost in Peru, compared to Colombia.