



Nigerian National Health Conference

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Ensuring Effective, Qualitative, Affordable and Accessible Health Care for All Nigerians Beyond 2007

The Nigerian National Health Conference 2006 was well attended, with over 400 participants that represented health stakeholders from within and outside Nigeria, including The Presidency, National Assembly, State and Local Governments and their agencies, Federal and States Ministries of Health and other line Ministries, Policy makers, Community leaders, Traditional leaders, The United Nations System/WHO, Development Partners, Professional organizations, Civil Society Organizations (CSOs), Parastatals and institutions, Health care financiers, Health care providers, Facility owners, Nigerians in the Diaspora, Pharmaceutical manufacturers/suppliers and clients/patients.

CHALLENGES AND OBSTACLES TO HEALTH POLICY IMPLEMENTATION

Government's responsibility for health is shared between the three tiers of government without any clear legal division as to who does what.

Primary Health Care is much more effective than hospital-based care in preventing and treating 90% of health problems, and yet it has been allowed to collapse in most of Nigeria.

In 2000 the World Health Organization ranked the Nigerian health system in 187th place out of 191 countries evaluated.

According to UNDP, life expectancy in Nigeria has declined to 43 years (2006) from 47 in 1990. In contrast life expectancy in Malaysia, which attained nationhood at the same time as Nigeria, has now reached 70 years.

Over 50,000 Nigerian women die from child birth every year (equivalent to a plane carrying 140 people crashing every single day)

One in five Nigerian children will die before his/her 5th birthday. About a million Nigerian children die of preventable causes every year.

Only 18% of Nigerian children are fully immunized by their first birthday.

Malaria kills more Nigerians than any other disease, and yet less than 5% of the population uses insecticide treated nets that are proven to be effective in preventing malaria.

The Nigerian Government at all levels spends less than 5% of public expenditure on health, despite being signatory to the 2000 Abuja Declaration to increase this to 15%.

In 2004 the current civilian regime launched an ambitious programme of “Health Sector Reform”. This is designed to reform the national health system and thereby improve the health status of all Nigerians.

There is a draft National Health Bill before the National Assembly, which is yet to be passed. This defines the roles and responsibilities of tiers of government, establishes a fund for Primary Health Care, and sets out a minimum package of health for all citizens.

The Federal Government has increased its spending on health, and in 2006 the largest allocation of savings gained from debt relief was allocated to the health sector. A few State Governments have increased their allocations to health. Many have not.

The conference observed that the Nigerian health system is in a deplorable stage and the performance is very poor to the extent that some Nigerians seek for health care abroad;

The Nigerian Health System is dysfunctional and grossly under-funded with per capita expenditure of US\$9.44 on health (World Bank, 2005) as a result of which Nigeria still has one of the worst health indices in the world and sadly accounts for 10% of the world’s maternal deaths in child birth whereas the country represents 2% of the world population, as at year 2000;

The national health management information system is still weak and without an integrated system for disease surveillance, prevention and management;

Nigeria trains and develops human resources for health, but loses them to other sectors within the country and abroad due to relatively higher remuneration, welfare and motivation packages; in addition to the negative attitude of most Health workers which discourages access to health services and reflect their non-accountability to duties and funds/equipment committed to their care;

There is a loud disconnect between policy making process, research activities and ownership of research agenda by key stakeholders;

Road traffic accidents and violence are other challenges to the health system.

FOCUS AND AGENDA FOR NIGERIA HEALTH SECTOR FOR 2007 AND BEYOND

1. The conference commended the effort of the Federal Government in implementing comprehensive reforms in the Nigerian Health Sector particularly on enhancing stewardship role of government, improving access to qualitative and affordable health services and strengthening public private partnership in health care delivery.
2. National Assembly should pass the National Health Act before end of February 2007.
3. All political parties should commit themselves to implementing the provision of the National Health Act if voted into power.
4. Nigeria should increase her per capita spending in health from 9.44 USD to at least 34 USD as recommended by the World Health Organisation [WHO]. Towards this, all levels of governments, Federal, State and local should increase budgetary allocation to Health to at least 15% and publish such budget.
5. There is need to have in place a special system of social welfare focusing on providing safety nets and free medical services for the disadvantaged or vulnerable groups in Nigeria including pregnant women, children under 5 years of age, the aged and poor (persons living on less than US\$1.00 daily) should be instituted;
6. The National Health Insurance Scheme should expand coverage to more persons in the rural and urban centers; while incentives should be provided to promote not-for-profit and community-based insurance schemes; because despite the progress made, there is still much to be done especially by states and local governments.
7. Government at all levels should address social issues affecting health; these include poverty alleviation, women empowerment and education (particularly girl child education), employment and elimination of corruption.
8. Government should take steps to improve the motivation, training and retention of her health workforce.
9. Existing health facilities should be equipped and well-managed, rather than build new ones in the same or close locations;
10. Communities should institute processes that will require elected officers to account for their stewardship especially in the area of health care funding while communities also participate in community health insurance scheme.
11. Institutional framework should be created to feed the products of research institutes to the pharmaceutical companies and other potential consumers/clients, by inaugurating a committee consisting of all research and product control agencies;
12. Appropriate policy and legislative measures should be taken to control and manage road traffic accidents and other violence, to the barest minimum; while communities should institute processes that will require elected officers to account for their

stewardship especially in the area of health care funding while community also participate in community health insurance scheme.

CALL TO ACTION

In view of the above we would like to reiterate that we need to collectively take it upon ourselves to carry out the following actions individually and collectively, so as to ensure better health for all Nigerians beyond 2007. We have categorized here the following envisaged actions

(A) POLICY MAKERS

- Policy makers should ensure that policies are designed to respond to the deplorable health status of Nigerian with the view of reducing the disease burden in the country
- Members of the National Assembly follow up and ensure the passage of the National Health Act before end of February 2007.
- All levels of government should implement the Health Act

(B) CIVIL SOCIETY ORGANIZATIONS

- Should ensure continues advocacy towards increasing budgetary allocation to health by all governments to at least 15%
- Advocate to elected officers to account for their stewardship especially in the area of health care funding

(C) COMMUNITIES/INDIVIDUALS

- Individuals at community level should ensure that electoral candidates reflect health in the manifesto of their political parties
- Individuals at community levels should demand to know what health services should be provided to them by their leaders
- To participate in the health insurance scheme
- Individuals should live a healthy and positive live by promoting and sustaining their health and preventing themselves from preventable diseases

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