NIGERIA UHC FORUM POSITION PAPER ON

NIGERIA HEALTH SECTOR RENEWAL INVESTMENT PROGRAM



A PUBLICATION OF THE NIGERIA UHC FORUM

^{1.0} BACKGROUND

The Nigeria Universal Health Coverage (UHC) Forum (hereinafter referred to as the Forum) is a coalition of diverse civil society organisations (CSOs) committed to shaping Nigeria's healthcare landscape. The Forum was established to mobilize health policy advocates, the media, and the political class towards charting a narrative-changing course of action that will accord health the appropriate political attention and set Nigeria on the path to UHC.

Sequel to the fruitful engagement with the Honourable Coordinating Minister of Health and Social Welfare, Dr Ali Pate, where the new health sector development blueprint was discussed, the Forum convened to analyze, contribute insights, and advocate for comprehensive reforms within the Nigeria Health Sector Renewal Investment Programme (NHSRIP). By leveraging collective expertise and experiences, the Forum aims to ensure that Nigeria's Health Sector Development Blueprint addresses pertinent health challenges to catalyze tangible improvements in health outcomes in Nigeria.

This position paper is an aftermath of the digest of the nascent health policy thrusts aimed at supporting and promoting accountability and shared ownership of the emerging health policy agenda. The Forum's observations, recommendations and conclusion are discussed below.

2.0 Observation

The NHSRIP aims to save lives, reduce physical and financial pain, and produce health for all Nigerians. The Blueprint aims to achieve major health outcomes, including Disability Adjustment Live Years (DALY) improvement, lives saved, reduced out-of-pocket payments (OOP), metrics for producing health, and equity. The NHSRIP delineate the reform agenda around four (4) key thematic areas, namely: (i) effective governance; (ii) improvement in population health outcomes; (iii) unlocking the health sector value chain; and (iv) bolstering health sector security. The Forum evaluated the policy document to identify strengths, weaknesses, and potential for transformative change within Nigeria's healthcare landscape. The following observations were made across the thematic areas.

2.1 **Effective Governance**

A major aspect of this pillar is to strengthen oversight and effective implementation of the National Health Act, of 2014. Despite the germane provisions in the extant legal framework, some sections of the Act are not being implemented. For instance, Section 2 (d) of the NHA, 2014, which provides for an annual comprehensive population health report submitted to the President, is important. The resolutions from the National Council on Health (NCH) align with the NHSRIP, which was considered to have a cohesive appraisal of the blueprint. Some of the essential factors identified to ensure effective implementation of the Effective Governance pillar of the blueprint include addressing human resources for health and obligations of healthcare personnel, use of data for decision-making, health-seeking behaviour, multisectoral engagement, performance monitoring, etc.

2.2 **Population Health Outcomes**

The adverse effect of unplanned population growth is evident as it affects health outcomes (e.g., high maternal and child mortality rates), insecurity, climate change and poverty rates, among others. Working with Nigeria's estimated population will not be effective with the growing population, high fertility rate (5.3) and limited resources. There is a need for a scientific census and adequate investment in population issues.

Also, it is important to address the sub-optimal political support for the implementation of relevant population-related policies and laws and sociocultural barriers. Constitutional issues like revenue allocation being determined by population size are considered an incentive for overpopulation.

2.3 Unlocking Value Chains

Having identified the poor health indices and outcomes, low funding, and absence of domestic capacity in key health supplies and consumables, there is a need to consider the potential for the participation of the private sector in addressing issues around value chains. Also, clear stakeholders mapping is needed along the value chains. This is because most of the value chain issues are not domiciled within the Ministry of Health alone; there is a need for the engagement of other MDAs, such as the Ministry of Trade and Investment, the Ministry of Labour etc. Potential opportunities in-country and in the diaspora should be harnessed, to create an enabling environment for health technologies.

2.4 Health Security

The NHSRIP paid attention to the pillars of health security (prevention, preparedness, response). However, the blueprint did not address the recovery component of health security. Including the recovery component in the NHSRIP is essential because it sometimes requires special programming because of its economic impact. Also, climate resilience, though mentioned at the initial sections of the blueprint, was not broken down in the latter sections of the document. This is critical as it is strongly linked to health security issues.

3.0 RECOMMENDATIONS

The Nigeria UHC Forum presents actionable recommendations pivotal to strengthening the NHSRIP. Leveraging diverse expertise, the Forum offers pragmatic insights and a strategic guidance for successful policy implementation. The key recommendations across the thematic areas are expressed below

3.1 Effective Governance

3.1.1 Strengthen Oversight and Effective Implementation of the National Health Act 2014 and other Policy/Legal Frameworks

- The Hon. Coordinating Minister of Health and Social Welfare is advised to set up a ministerial committee saddled with the responsibility of appraising the level of implementation of all health-related legal frameworks and policies and putting mechanisms in place for accelerated and effective implementation and enforcement.
- Fast track the implementation of certificate of standards and provision of state of health report by the minister as provided for in the National Health Act, 2014 among others.
- Ensure the health leadership fulfils the commitment to institutionalize the Nigerian Diaspora Health knowledge and skills repatriation program as a way to convert brain drain to brain gain both at the federal and state levels, and to include the program in the revised National Strategic Health Development Plan (NSHDP)II.
- Support the development of a National Health Workforce Production Investment Master Plan and Charter, to leverage synergized and aligned public-private investment in sustainable national health workforce production.
- Advocate to subnational political leaders to reduce casualization (Casual employment of trained health workers for several years without regularization) in the health sector to reduce the HRH gap and motivate health workers.
- Ensure accountability platforms using evidence from national health research and information system leveraging digitalization and data-backed decision-making.
- Ensure accountability from health establishments and technologies. Ensure accountability of leadership of each institution across all pillars of Government.

3.1.2 Increase Accountability to and Participation of Relevant Stakeholders and Nigerian Citizens

- The National Orientation Agency should reorientate Nigerians on health-seeking behaviour and demonstrate effective partnerships and collaboration with MDAs and CSOs.
- Ensure the implementation of the Health Promotion Charter by the FMOH and all relevant MDAs, prioritizing the use of Nigerian languages.
- Ensure quarterly interface of the various directorates of the FMOH with the body of CSOs to compare work plans and expenditures. This will increase the effectiveness of spending and align spending with strategic priorities to meet desired health outcomes and optimize culture and talent and drive performance-based culture within government MDAs
- Develop a tracker to measure the implementation of the resolutions from the National Council on Health

3.1.3 Strengthen Regulatory Capacity to Foster the Highest Standards of Service Provision

 CSOs should hold quarterly accountability meetings and interface with the professional regulatory bodies to deliver their mandates on ensuring high quality of care - Medical and Dental Council of Nigeria (MDCN), Pharmaceutical Council of Nigeria (PCN), Medical Laboratory Council of Nigeria (MLSCN), Nursing and Midwifery Council of Nigeria, Radiographers Council of Nigeria, Community Health Practitioners Registration Board of Nigeria (CHPRBN) etc. • Develop trackers and tools to track key health indicators to monitor performance

3.2 Population Health Outcomes

- Media advocacy and community engagement for health education and promotion should be strengthened. The sub-national actors should take responsibility for translating relevant information into local languages.
- There should be increased investment in population research.
- Birth and death registration should be made compulsory at all levels.
- There should be regular maternal and child health accountability and audit.
- There should be adequate engagement of relevant MDAs e.g. NOA, Ministry of Education, Environment, etc
- A national census should be conducted to guide policy decisions
- There should be citizen involvement in the budget process.
- Relevant policies should be developed and implemented, e.g. FP Blueprint, and National Population Policy for Sustainable Development
- Develop policy on Home-based care and advocate for its implementation at the sub-national levels – Retired health workers can provide the pool of HRH.
- Innovative ways for resource mobilization should be considered. Also, there should be increased budgetary allocation and other investments in population issues, e.g., the incorporation of a budget line for family planning and immunization at all levels of governance.

3.3 Unlocking Value Chain

- Leverage effective labour migration policies through bilateral agreements, in recognition of the critical issue of brain drain. This aims to stem the tide of healthcare professionals leaving the country while attracting talent to address Nigeria's human resources deficit in the health sector.
- Harness Nigeria's diaspora space for backward integration and technology transfer. This strategic utilization of the diaspora community can foster innovation, knowledge sharing, and technological advancements within the healthcare sector.
- Embrace and expand ICT infrastructure and solutions which can significantly enhance healthcare access, efficiency, and quality, particularly in remote or underserved areas.
- Create an enabling environment and ensure policy consistency within the healthcare system includes reforms in cadastral records/laws to streamline resource allocation and facilitate infrastructure development for a more effective healthcare delivery system.
- Stakeholders' engagement: By identifying and aligning diverse stakeholders (governmental bodies, NGOs, private sectors, and community organizations), the NHSRIP can harness the complete value chain. This collaboration will foster synergy among stakeholders, optimizing resources, expertise, and initiatives for comprehensive healthcare transformation.

3.4 Health Security

- Incorporate recovery into the health security component by embedding lessons from outbreaks as a critical health security component and focusing on the socioeconomic effects of health security events, targeting affected communities and persons.
- Develop a climate resilience/surveillance program that also connects with the broad health security surveillance, particularly as this will affect early warning, disease modelling, and preparedness planning.
- Expand the scope of response capacity to include CSO engagement in the overall response and governance of health security at national and subnational levels. This includes embedding CSOs within TWGs for the design of health security interventions, implementation, and results monitoring
- Embed CSOs across the pillars of health security through a mix of activities that propel results such as advocacy, capacity assessment of the CSOs inclusion, effective budget appraisal for health security, training and capacity building, participating in results generation, surveillance data, quality monitoring etc.

3.5 Cross-Cutting

- The Hon. Coordinating Minister of Health and Social Welfare is advised to set up an inter-ministerial committee on innovative financing to chart a course of action towards mobilizing additional resources for health through innovative financing mechanisms
- Identify specific actions to reduce wastage in the health sector, especially wastage associated with inefficient human resources management, low absorptive capacity, and technical and allocative inefficiencies.
- The Federal Ministry of Health led by the Hon. Coordinating Minister of Health and Social Welfare is advised to formally recognise the Nigeria UHC Forum as a coalition of non-state actors that will take the lead on advocacy and accountability towards the successful implementation of the compact on NHSRIP and sign a Memorandum of Understanding with the Forum to that effect.

4.0 CONCLUSION

The NHSRIP highlights the blueprint for building a resilient and inclusive healthcare system, focusing on strategic shifts and priority initiatives to accelerate progress towards UHC and to improve health outcomes across the country. The Nigeria UHC Forum also recognizes the Sector-Wide Approach (SWAp) as a veritable enabler for improving the overall health sector performance. However, its applicability should not be limited to the BHCPF but the entire health sector.

The Nigeria UHC Forum is committed to supporting the implementation of the four-point agenda for health sector reform through effective collaboration with the Ministry of Health and Social Welfare and its agencies to translate the above recommendations into results, thereby transforming the Nigerian health landscape.

