

Tackling Millennium Development Goals (MDGs) 4 and 5: the National Health Insurance Scheme (NHIS) approach in Nigeria

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Abstract

Developing countries are devising various strategies and mechanisms to accelerate their speed towards the Millennium Development Goals (MDGs) by 2015. In Nigeria, different approaches have been used to address the tackling of health-related MDGs. One creative approach has been the implementation of the NHIS Maternal and Child Health (NHIS-MCH) Project. The project aims to speed up the achievement of MDGs 4 and 5 (reducing child mortality and improving maternal health) in the country. Little is known about the NHIS-MCH Project's design and health insurance coverage activities. Project planning and monitoring could be hampered by lack of technical and managerial skills of health insurance most especially at middle and local levels. Challenging debates continue to emanate on the project's sustainability.

Introduction

Low and middle-income countries are developing various strategies and mechanisms to accelerate their speed towards the Millennium Development Goals (MDGs) by 2015. In Nigeria, different approaches have been used to address the tackling of health-related MDGs. The national health insurance scheme (NHIS) has coordinated with Office of the Presidency on MDGs to implement the NHIS Maternal and Child Health (NHIS-MCH) Project since September 2008. The project aims to speed up the achievement of MDGs 4 and 5 (reducing child mortality and improving maternal health) in the country.

It has been 10 years since a World Report in The Lancet stated in 2001 that *Nigeria set to launch health insurance scheme*. The decade stand of NHIS has been reiterated to serve only 3.73% of the population in 2010. Yet, progressive approach in the NHIS has faced many

endogenous and exogenous challenges during the process of implementation.

The United Nations Secretary-General (Ban Ki-moon) visited the country between 22 and 24, May 2011. He lamented on everyday maternal and child mortality due to health-related complications, which have led the UN to launch the Global Strategy on Women's and Children's Health.³ Ban Ki-moon focused the discussion with leadership of Nigeria on reduction of maternal and child mortality in the country.³ He commended the effort of Government in supporting health initiatives for women and children.

Little is known about the NHIS-MCH Project's design and health insurance coverage activities. NHIS-MCH Project's goal is to tackle the reduction of high maternal and child (under five) morbidity and mortality indices in the country. The aim has been to accelerate the achievement of MDGs 4 and 5 by the year 2015. The project is funded from Debt Relief Gains through the Presidential MDGs Office. Phase one is funded with 5 billion Naira (about US\$ 33 million) while phase two is funded 4.25 billion Naira (about US\$ 28 million). The project is managed at state levels by State Implementation Committee (state officials and NHIS technical staff).

A total of 615,101 (98.9%) out of the projected 621,386 people has been covered in phase one in June, 2010. Phase two of the project covered a total of 236,097 (52%) out of the projected 452,296 people in June, 2010.⁴ It has been estimated that 3.6 million pregnant women and under-five children could benefit from the insurance project annually, if fully implemented nationwide.

NHIS-MCH Project has been implemented in phases. Both phases one and two have already been executed involving six states for each of the phases (a total of 12 states). Each Correspondence: Hengjin Dong, Centre for Health Policy and Management Studies, Zhejiang University School of Medicine, China. Tel. +86.571.88206098.

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State has 6 selected Local Government Areas (LGAs) given a total of 72 LGAs included in the two phases. Other 25 states will be incorporated in similar manner. It has been reported that the NHIS-MCH Project has led to increased enrolment and utilization of health care services, elimination of high *out-of-pocket* syndrome and improved motivation of staff in health facilities.⁴

Exit Strategy for the National Health Insurance Scheme-Millennium Development Goals Project

Considering the fact that MDGs funding is time-bound, the NHIS-MCH Project has been

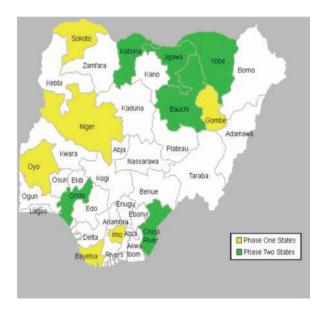


Figure 1. Map of Nigeria showing National Insurance Scheme-Maternal and Child Health/Millennium **Development Goals** Project benefitting States. (Source: National Health Insurance Scheme (NHIS) Head-Abujaquarters, Ñigeria).





designed to scale up Benefitting-states counterpart funding, as the MDG funding scales down by 2015 (Figure 1).⁴ However, the project requires strong political support and willingness by the various states to ensure the sustainability of the health insurance approach.

Challenges

Project planning and monitoring could be hampered by inadequate population and other baseline data. States and LGAs staff lacks technical and managerial skills of health insurance. Some insurers have poor technical capacity (human resource) to handle complex

health insurance issues. Weak information, education and communication could affect the effort towards mobilizing and sensitizing stakeholders. The debate remains whether the Nigerian government will continue to support the NHIS-MCH Project amid the recently launched community based social health insurance programme and also by end of the year, 2015.

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