

Chapter 6

Policy Value and Primary Healthcare Delivery in Rural Nigeria: Issues, Challenges, and Opportunities

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ABSTRACT

The health of a people is a major social capital to be prioritized and optimized for the growth and development of any country. Therefore, any government desirous of development should make healthcare delivery one of the cornerstones of its policy on development. In pursuance of these goals, the purpose of this chapter is to examine the dominant policy value, particularly the failure to faithfully implement government policies and achieve set goals. The method applied in the study is participant observatory method, using the basic need theory (BNT) as theoretical framework of analysis. The findings revealed that policy values frustrate the attainment of sustainable primary healthcare delivery in Nigeria. Challenges were highlighted such as improper monitoring and evaluation of policies, inadequate funding, program implementation, and lack of skilled professionals. The chapter concludes by suggesting opportunities to open primary healthcare delivery in the rural areas.

INTRODUCTION

The greatest asset of any nation is its citizens. The quality and quantity of the human resource of a nation is essential for its growth and development. There is a sense in which one can assert that a healthy nation is a wealthy nation. Good health among the population of any country is considered a pre-requisite for the society to develop

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in the positive direction. Achieving this goal of good health for all is not always an easy task. Though with the right policies, plans and programs aimed at achieving these goals a healthy nation could be achieved if particularly, such objective is pursued with utmost commitment, dedication and integrity by all stakeholders in the health sector (Osakede & Ijimakinde, 2014).

Africa in general and Nigeria in particular, have a population that can be leveraged on to bring about the much-needed socio-economic development in this region of the world. Nigeria with a population of over 170 million people, has the potential to be one of the most developed countries in the world. However, these potentials have not been properly harnessed, invested and translated into sustainable development due perhaps to the poor healthcare system that has seen many Nigerians die from preventable and treatable diseases and ailments like malaria, Lassa fever, Zika virus, Ebola, monkey pox, polio meningitis, HIV/AIDS, among others (Idris, 2014). Also, the rate of maternal and child mortality has taken a frightening dimension due to the absence of vaccines and drugs to control and treat these ailments and diseases when they occur.

The main objective of the study, therefore, is to examine the role of policy value in primary healthcare delivery in rural Nigeria. Other specific objectives include:

1. To examine the nature of primary healthcare services;
2. To investigate the effect of policy value on primary healthcare delivery in rural areas, and;
3. To examine challenges facing the use of public policy to achieve primary healthcare.

BACKGROUND

While successive governments have demonstrated knowledge of and intentions to tackle these healthcare issues, the government policy value or lack of it has inhibited any such intention to address. While annual budgets have given some attention to these concerns albeit insufficiently, the lack of policy integrity, corruption, failure to give adequate commitment to policy implementation and the parlous state of the economy, all combine to frustrate any positive move to make the health sector efficient and effective. These challenges are mostly felt in the rural areas where health facilities are either non-existent or ill equipped and far apart. The condition of rural dwellers is made worst by the fact that majority of them are living below the poverty line, thereby making them susceptible to attack from preventable diseases. Primary Health Care (PHC) that is targeted at this category of people, hardly meet their needs due to the incapacitation of local governments by inadequate resources.

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