

Chapter 26

Linking Primary Healthcare Policies With Health System for Improved Health Outcomes in Nigeria: Issues, Controversies, Problems, and Solutions

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ABSTRACT

Quality healthcare is a fundamental right of all citizens of any nation. In Nigeria, there are disparities in terms of quality of healthcare provided to different groups in the rural and urban areas. It is this desire to ensure access to potential patients and the existence of a quality healthcare system in Nigeria that necessitates primary healthcare policy. The purpose of this chapter, therefore, is to investigate how primary healthcare policies affect health system performance and health outcomes in Nigeria. The chapter adopted qualitative research approach. Secondary data were collected from secondary sources, such as textbooks, journal articles, newspapers, WHO reports, government records, and internet. Content and secondary data analysis methods were adopted to analyze, interpret, and answer the research questions. Findings show that health outcomes remain poor because of weak health system as infant and maternal mortality are still high and universal access coverage still low. The chapter concludes that a strong health system would improve health outcomes.

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INTRODUCTION

The centrality of health to national development and poverty reduction is self-evident, as improving health status and increasing life expectancy contribute to long term economic development. However, the legitimacy of any national health system depends on how best it serves the interest of the poorest and most vulnerable people, for which improvements in their health status gear towards the realization of poverty reduction goals.

Overtime, we have seen a growing commitment by Nigerian policymakers to address gaps in the health care system, including a strong focus on primary health care-the frontline of health. People turn to the primary healthcare system in their communities both to stay healthy and to get care when they fall sick. From primary health care providers, they seek prevention of disease, management of chronic conditions, access to treatment of various ailments and conditions. However, poor health outcomes persist throughout the country. No one appreciates more than we do that building a high-performing health care system, which is accessible to all in Nigeria is a great challenge.

The purpose of the chapter is to interrogate how primary healthcare policies and health systems affect health outcomes. Specifically, the chapter attempts to interrogate how primary health care policies can be linked with health system to improve health outcomes in Nigeria.

BACKGROUND

When Nigeria gained its independence in 1960, healthcare was not among the first thing government officials thought about. They focused more on the medicine that cured rather than prevented illnesses. However, in 1975, National Basic Health Services Scheme (NBHSS) was created, where primary health-care served as the basis for the whole area. It was meant to provide medical training and healthcare facilities, although it neglected the use of new technology and community cooperation.

Following Alma Ata declaration of 1978, the Federal Government of Nigeria launched the Primary Health Care plan (PHC) in the National Health Policy of 1988 as the cornerstone of the Nigerian health system as part of efforts to improve equity in access and utilization of basic health services (Chiejina, 2014). Its objectives included among others improvement in the collection and monitoring of health data and ensuring availability of essential drugs in all areas of the country.

Another effort of evolving and sustaining community-oriented health system, which was led by late Professor Olukoye Ransome-Kuti occurred between the year 1986 and 1992. It witnessed the development of model primary health care in fifty-two (52) Local Government Areas (Abimbola, 2012). The third attempt to make PHC accessible to the grassroots was heralded by the establishment of the National Primary Healthcare Development Agency (NPHCDA) in the year 1992 (Abimbola, 2012). NPHCDA is a federal government agency with policy and over-sight roles on Primary Health Care (PHC) implementation at the state and local government levels in Nigeria. The major drawback is that a federal agency has no binding constitutional role to implement programs or policies at the state and local government levels. The government must be willing to cooperate or nothing happens and cooperation often has to come with financial commitment, which for every government are highly contested grounds (Abimbola, 2012). Another initiative of NPHCDA was the creation of Ward or Village Development Committees (WDCs and VDCs). They were designed to strengthen local communities in the hope that they can advocate for

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