



Nigerian National Health Conference

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Nigerian National Health Conference (NHC2006)

28-29 November 2006

Conference Communiqué

Participants at the Nigerian National Health Conference (NHC2006) held at Abuja Sheraton Hotel and Towers, 28-29 November 2006 identified a set of priorities to sustain the current reforms in the Nigerian Health Sector beyond 2007.

The goal of the conference is to develop a Health Agenda for Nigeria in the twenty-first (21st) Century and disseminate same to Stakeholders at all levels of Government, Private Sector, Development Partners and NGOs, nationally and internationally’.

His Excellency, Chief Olusegun Obasanjo, GCFR, President, Commander-in-chief of the Armed Forces of the Federal Republic of Nigeria, was represented by Obong Ufot Ekaete, CFR, Secretary to the Government of the Federation; who also read the President’s address to the conference.

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

The conference received a total of 21 papers in plenary and satellite sessions, which were further discussed in four sub thematic sessions namely: Stewardship; The Role of Health in National Development; Resources for Health; and Strengthening Health Services Delivery.

Based on the thematic and sub thematic issues presented, the conference

endorsed the following observations:

1. That the Federal Government is implementing comprehensive reforms in the Nigerian Health Sector particularly on enhancing stewardship role of government, improving access to qualitative and affordable health care delivery and strengthening public private partnership in health care delivery;
2. That Nigeria still has one of the worst health indices in the world and sadly accounts for 10% of the world maternal deaths in child birth whereas she represents 2% of the world population, as at year 2000;
3. That the Nigerian Health System is dysfunctional and grossly under-funded with per capita expenditure of US\$9.44 on health (World Bank, 2005)
4. That the national health management information system is still weak thus the country lacks an integrated system for disease surveillance, prevention and management;
5. Key social correlates of ill-health including hunger, poverty, illiteracy, lack of clean water, poor sanitation, poor housing, gender disparity and unemployment are still prevalent;
6. That the country's health sector trains and develops human resources, but loses them to other sectors within the country and abroad due to relative higher remuneration, welfare and motivation packages;
7. That negative attitude of most Health workers discourages access to health services, and reflects their non-accountability to their duties and funds/equipment committed to their care;
8. Road traffic accidents and violence have become major health problems;
9. That there is disconnect between policy making process, research activities, and ownership of research agenda by key stakeholders; and
10. That social health insurance scheme remains one of the most cost effective, efficient, equitable and sustainable means of financing health care.

Based on the aforementioned observations, the Conference endorsed the following resolutions and recommendations:

1. The Federal Government is hereby commended for initiating and leading the implementation of health sector reforms;
2. The National Assembly is implored to pass the National Health Bill without further delay, and definitely before the end of the present administration in May 2007;
3. 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;
4. Stakeholders in the health sector must ensure sustained advocacy to the Federal Executive Council, National Assembly, National Council on

- Health, States and Local governments, for the continued upgrading of infrastructural facilities in Nigeria;
5. Emphasis must be focused on health promotion and disease prevention at all levels of society;
 6. 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;
 7. Nigeria should aggressively promote and legitimize public-private partnership (PPP) in all aspects of the health sector in order to ensure sustainability, accountability and confidence building mechanism;
 8. Political parties should be constructively engaged to buy into the ongoing health sector reforms;
 9. 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];
 10. Existing health facilities should be equipped and well-managed, rather than build new ones in the same or close locations;
 11. 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;
 12. Training and retraining of health workers must be intensified as an integral component of health sector development;
 13. New competitive and performance-based systems of staff remuneration, welfare and compensation packages should be evolved for practitioners in both the private and public health sub-sectors;
 14. The media should play its constitutional role in empowering the public and civil society to hold leaders and health officials accountable, using established benchmarks;
 15. Appropriate policy and legislative measures should be taken to control and manage road traffic accidents and other violence, to the barest minimum;
 16. A team should be immediately set up to follow up on these recommendations and ensure that they are implemented to ensure Better Health for All Nigerians’.

Abuja, 29 November 2006