***Title of paper:*** Assessing Health Systems Readiness for Primary Health Care Financing: Lessons Learned from Kaduna and Niger State, Nigeria

***Name, institutional affiliation, phone number and e-mail address of presenting author:***

Rachel Neill (on behalf of Results for Development Institute (R4D)), +1 770 712 6782, rneill@r4d.org

***Names of co-authors:***

**Results for Development Institute (R4D):** Dr. Chris Atim, Tamara Chikhradze, Rachel Neill, Ezinne Ezekwem, Chloe Lanzara, Felix Obi, Oludare Bodunrin, Alexander Nzobiwu, Anam Abdulla, Jack Sullivan.

**University of Nigeria Nsukka:** Dr. Hyacinth Ichoku

A readiness assessment was conducted in Niger and Kaduna states, Nigeria to evaluate health system status against Universal Health Coverage (UHC) components, as they relate to states’ readiness to launch Primary Healthcare (PHC) centered financing initiatives.[[1]](#footnote-1) The objectives of the study were to: 1) assess the current state of health system; 2) highlight challenges and opportunities for health care financing reform initiatives; 3) present approaches towards the design and implementation of PHC focused financing reforms; and 4) map state stakeholders to assess the feasibility and acceptability of key aspects of UHC reform.

The assessment employed a mixed approach and relied on qualitative and quantitative methods. A combination of primary and secondary data was used. The quantitative component explored fiscal space for health and the qualitative one examined the health system from the perspective of its users and main actors at the federal, state, local government, and community levels.

The analytical framework was developed specifically for this study, drawing on the World Health Organization’s Comprehensive Health Systems Assessment Approach (Health Systems 20/20, 2012) and the WHO’s Health Financing Policy Objectives (Kutzin, 2008). It captured status of health systems, according to the six health systems building blocks and analyzed those findings against a series of criteria linked to financing functions of resource mobilization, pooling and purchasing. In addition, Management Sciences for Health’s Social Insurance Assessment Tool (MSH 2002) was adapted to capture the feasibility and acceptability of components of health financing reforms. A political economy and stakeholder analysis were also conducted to determine perceptions and stances on UHC reform and to map the roles and responsibilities of all stakeholders.

Findings and preliminary recommendations were validated with state stakeholders in a workshop setting, where they identified priority interventions for achieving states’ UHC goals.

The study produced findings that highlighted challenges and opportunities on both – demand and supply sides. These included gaps in service availability and readiness, service utilization trends, state funding allocations to the health sector, and fragmentation of pooling, purchasing, and data management arrangements.

The assessments developed evidence-based recommendations to improve the states’ capacity for implementing UHC reforms. For example, for Niger state it was recommended that the State reframe advocacy efforts and utilize a proof-of-concept to demonstrate better returns on investment for the health sector, while for Kaduna state it was advised that the State merge existing financing initiatives into the health insurance scheme to reduce pooling fragmentation.

1. *The assessment in Kaduna was conducted in collaboration with Health Systems Consult Limited* [↑](#footnote-ref-1)