**Breaking the Myths of Private Providers in Nigeria Healthcare Market: The Experience of Nigeria State Health Investment Project (NSHIP) in Mainstreaming Private Sector Contribution in Enhancing Access to Health Services**

Muhammad Mashin1, 2

Fanen Verunumbi1, 3

Binta A. Ismail1, 4

Muhammed Abubakar Muhammed1, 5

Ismail N. Salihu1, 6

Michael C. Ajuluchuku1, 6

Jamila Hammanga1, 7

1National Primary Health Care Development Agency (NPHCDA)Annex 2, #11 Queen Elizabeth Street, Off Yakubu Gowon Crescent, Asokoro, FCT-Abuja

2Principal Planning Officer (PPO) and Technical Officer (TO), NSHIP

3Health Economist Consultant

4Deputy Director (DD) and National Project Coordinator (NPC), NSHIP

5Assistant Director (AD) and Deputy National Project Coordinator (DNPC), NSHIP

6Senior Medical Officer (SMO) and Technical Officer (TO), NSHIP

7Senior Community Development Officer (SCDO) and Technical Officer, Communication (TO), NSHIP

**Abstract**

**Introduction**

Health services provision/utilization involves the distribution of available competitive resources within the health care market/system: human, capital and material. There are several players in the Nigeria healthcare market: public, private-for-profit, private-for-nonprofit, non-governmental organizations (NGOs) and traditional providers. The general perception is that private-for-profit providers allocate resources based on the patients’ ability to pay and service fees are usually beyond what the average patients could afford partially because they carter for all expenditure with little or no support from government. Although, public health facilities in Nigeria accounted for over 70%, private providers still play important roles in making health services accessible to the populace. However, most government interventions have always excluded private providers on the basis of public goods characteristics. Few interventions that included private providers through public-private-partnership (PPP) treated them with special conditions and are not, in most cases, compelled to public M&E framework. The Nigeria State Health Investment Project (NSHIP) has mainstreamed the expertise of private providers through “Urban PBF” using same conditions/requirements for both public and private providers in terms of selection, documentation, reporting and supervisions. This paper therefore assessed the potentials of private-for-profit providers in patients’ focused health service provision in Nigeria under NSHIP Model.

**Methods and Material**

The study used mixed research method through which primary and secondary data sources were collected and analyzed. The data were collected from the project portal and sampled private providers from two project States for in-depth interview: Adamawa and Nasarawa.

**Results**

The result revealed that the private providers under the project are competing favourably with public providers and complying with requirements of the project. All private providers are now reporting to national data instances and are also receiving supervisory visits from responsible public institutions. More so, the paper found that private-for-profit providers fit well into the cost containment principles of the project. It was also found that private-for-profit providers have instituted community involvement within their health facility management as well as service provision priorities.

**Conclusion and Recommendations**

The study concluded that mainstreaming of private-for-profit providers has great potentials in making health services available to the populace and that they could fulfill public interest when exposed to same opportunities with public providers. This will also bring about health services maximization, increased coverage and robust data availability for informed national decision. Further study may be needed to assess service provision efficiency between public and private providers under the NSHIP.