Equity and Universal Coverage: A Trend Analysis of WHO Target Indicators in then Context of Nigerian Health System

\*Christopher Kalu, \*\*Dr. Charles C. Ezenduka: \*African Dept.of Health Adm& Mgt, UNEC, Nigeria, \*\*Dept. of Health Adm& Mgt, UNEC, Nigeria

Background

Improving and enhancing the performance or the overall functioning of the health system and achieving equitable access and affordability of healthcare services to all is a major effort towards universal coverage. The World Health Organization (WHO) proposed four target indicators for countries including Nigeria to use to measure progress towards achieving universal coverage (UC). They are: 1) Total health expenditure should be at least 4%-5% of the gross domestic product (GDP). 2) Out-of-pocket expenditure should not exceed 30-40% of total health expenditure. 3) Over 90% of the population is covered by pre-payment and risk pooling schemes; 4) close to 100% coverage of population with social assistance and safety programmes

Objective/Aim

The overall objective of the paper is to examine the relationship between equity and the attainment of universal coverage. Specifically, it aims at analyzing the Nigerian health system in relation to WHO target indicators for UC.

Methodology

The paper adopted the descriptive/trend analysis approach. This approach is suitable to the study mainly because of its relevance to achieving the objectives of the study. The scope of the study is from 2010-2018 and the data used in the analysis were sourced from the Nigerian health system records, documents and World Bank Development Indicator, (WDI, 2017).

Key Findings

The findings from the analysis revealed that out-of-pocket expenditure for health and poor service delivery are among the major contributors to the health inequity in the Nigerian health system. Moreover, the analysis showed that the Nigerian health system indicators is not in line with the WHO recommendations, resulting to low level of access to healthcare, rising health poverty, inequity, and low level of coverage among others.

Conclusion

This paper using WHO parameters for UC has once again shown the incidence of health inequities in the Nigerian health system. Inequities in access and use of healthcare services and coping with payments on treatment provide great obstacles to achieving UC in Nigeria and no doubt leads to low levels of financial risk protection, decrease affordability of service and general low levels of coverage with health services. There is need for Nigerian health system managers and administrators to draw lessons from countries (Ghana inclusive) that have achieved universal coverage.

Key Words: Equity, efficiency, universal coverage, WHO target indicators, Nigeria.