COMMUNIQUE FROM THE CIVIL SOCIETY SUMMIT ON THE 2024 FEDERAL HEALTH BUDGET

The Right To Health Cluster of civil society organizations anchored by the Centre for Social Justice held a civil society summit on the implementation of the 2024 health budget on the 13th of February 2024 at De Silver Green Luxury Hotel, Abuja. Participation was drawn from the Centre for Social Justice, cluster members across the 7 focal states of the project, key government agencies and the media. The Lead Director of the Centre for Social Justice, Barr Eze Onyekpere welcomed everyone to the summit and gave the rationale for the summit. He noted that the dwindling resources of government is a reason why stakeholders must demand for transparency and accountability in the implementation of the health budget. He noted that while the advocacy for more money to health will be continued, stakeholders must also demand that more healthcare be delivered from the available resources. He noted that strategies must de deployed to increase the absorptive capacities of the health MDAs and put an end to the incidence of high unspent funds despite declining health indicators.

The National Health Insurance Authority represented by Joy Egharevba and Ukoh Eberechi presented a paper on the “Mandatory Health Insurance Under the NHIA ACT: What Next? The paper highlighted the major highlights of the NHIA Act 2022 to include clearly defined roles and relations between stakeholders; provision for mandatory health insurance; provision for the Vulnerable Group Fund; modifications to the composition of the Governing Council; and recognition of the State Social Health Insurance Agencies. The presentation listed the implementation activities after presidential assent of the NHIA Act 2022 to include gazetting of the Act; management trainings on the Act; step down trainings on the Act to members of staff in the headquarters and in the states; sensitization engagements with various stakeholders; and inauguration of internal committees. The presentation listed the next steps to be taken by the NHIA to ensure increased uptake of health insurance to include advocacy visit to the Secretary to the Government of the Federation on secularization of compulsory health insurance to private and public formal sector; advocacy visit to the Nigerian Governors Forum; interaction with community leaders, religious leaders, associations of artisans and craft men for enrolment to the informal sector; strengthening collaboration with the State Social Health Insurance Agencies; post secularization visit to Agencies to make health insurance a pre-requisite for issuance and renewals of drivers licenses and international passports and bidding for contracts and political appointments. The presentation was followed by a question-and-answer session.

The Ministerial Oversight Committee of the Basic Health Care Provision Fund (BHCPF) represented by Dr Atteh Rhoda and Zara A Aji presented a paper on “The Implementation of the Basic Health Care Provision Fund: Utilization, Releases, Determination of Beneficiaries and Portal for Transparency and Accountability”. The paper highlighted the gateways for allocation of the BHCPF to include National Health Insurance Authority (48.75%), National Primary Health Care Development Agency (48.75%), National Emergency Medical Treatment Committee (5%), National Centre for Disease Control (1.25%). The presentation gave a breakdown of the implementation activities of the BHCPF from 2014 when it was birthed till date. The presentation highlighted the criteria for disbursement of the BHCPF, as well as the amount released to the BHCPF and the amount disbursed by the BHCPF to the various gateways. The number of health facilities accredited to receive funds in each of the 36 states and Federal Capital Territory was stated. Transparency and accountability measures of the BHCPF as well as the challenges and next steps were also highlighted. The presentation was followed by a question-and-answer session.

The Federal Ministry of Health represented by Idris Galadima also made a presentation on the implementation of the 2024 federal health budget.

At the end of the summit, the following recommendations were made:

1. The immediate funding and take-off of the Vulnerable Group Fund should be done. A huge percentage of Nigerians are poor and vulnerable and cannot be left out of health insurance coverage. The NHIA should liase with other MDAs of the federal government to achieve this.
2. A definite and clear roadmap for actualizing the compulsory health insurance should be developed and implemented. The compulsory nature of health insurance should not only be in the books, but should also be put into practice.
3. Increased advocacy and awareness creation on health insurance should be done.
4. The NHIA should strengthen monitoring and evaluation activities as it concerns health insurance service delivery to enrollees/beneficiaries at the health facilities.
5. The Nigerian Governors’ Forum, traditional and religious leaders should be further engaged to promote & support sensitization programmes and activities on health insurance at the sub-national Level.
6. The Federal Ministry of Health should deploy adequate steps to ensure that it fully utilizes the funds released to it for the delivery of healthcare services in Nigeria. The practice of returning huge unspent funds does not speak well of the ministry, hence this practice must not repeat itself in the utilization of the 2024 health budget. Procurement and other policy reforms that would fast track procurement processes should be done. This will increase the absorptive capacity for funds utilization and enhance efficiency and service delivery.
7. The allocation of only 4.64% of the total budget size to the federal ministry of health falls short of the 15% target of the Abuja Declaration. Civil society organizations should support the federal ministry of health to advocate for an increase in the share of the budget dedicate to healthcare.
8. The ministry of health and all her departments and agencies should increase the level of transparency and accountability through enhanced oversight supervision of her projects.
9. The Ministerial Oversight Committee of the BHCPF should devise technological methods (electronic fund tracking mechanisms) to enhance transparency and accountability of the disbursed funds.
10. Well-meaning individuals and corporate organizations should be encouraged to contribute to the BHCPF to achieve its objectives and goals.