# Improving malaria funding by strengthening awareness and coverage of the state health insurance scheme among women of reproductive age in Nigeria

Chinazo Ujuju,<sup>1</sup> Veronica Momoh,<sup>1</sup> Dawit Getachew,<sup>1</sup> Isaac Muonanu,<sup>1</sup> Lola Mabogunje<sup>1</sup> and Kolawole Maxwell.<sup>1</sup> <sup>1</sup>Malaria Consortium Nigeria

#### Introduction

Malaria remains a public health challenge globally with 228 million cases reported in 2018, of which Nigeria contributed 25 percent.<sup>[1]</sup> In Nigeria, where malaria accounts for 60 percent of outpatient visits and 30 percent of hospital admissions, households currently bear 78 percent of healthcare costs.<sup>[2]</sup> The Basic Health Care Provision Fund was created in 2014 and adopted in 2018 to remove the financial barrier of accessing primary healthcare for the poor and vulnerable.<sup>[3]</sup> Given that 50 percent of the funds will be disbursed through the health insurance scheme, scaling up state health insurance schemes (SHIS) is perceived as a potential means of achieving universal health coverage, by reducing out-of-pocket (OOP) expenditure and providing financial risk protection to the poor. This study explores sources of funding for malaria services, which are crucial to elimination and control efforts.

#### Methods

- We conducted a cross-sectional omnibus survey among 1,877 women of reproductive age (15–49 years) in five northern Nigerian states: Jigawa, Kaduna, Kano, Katsina and Yobe.
- We selected respondents at the household level using a multi-stage random sampling technique.
- We descriptively analysed demographic data and sources of healthcare funding.

#### Results

- Forty-three percent of respondents were within the 21–30 age range; 41 percent were 31–49 years old, while 16 percent were below 21.
- About 23 percent were educated to tertiary level; 42 percent were educated to secondary level; 11 percent had no formal education; and 33 percent were unemployed.
- Seventy percent would like government to increase funding for healthcare.
- Awareness and coverage of the SHIS were found to be low: only 41 percent of respondents were aware of the SHIS and 22 percent currently claim cover. Awareness and coverage were higher in urban and semi-urban areas than rural ones.
- Twenty-nine percent of respondents would be willing to pay slightly higher taxes for healthcare, while 20 percent would be unable to contribute because of their financial status.
- Our findings also revealed that 11 percent of respondents confirmed that their household skips meals to save money, and 20 percent of these savings are used to pay children's hospital bills.

### Conclusion

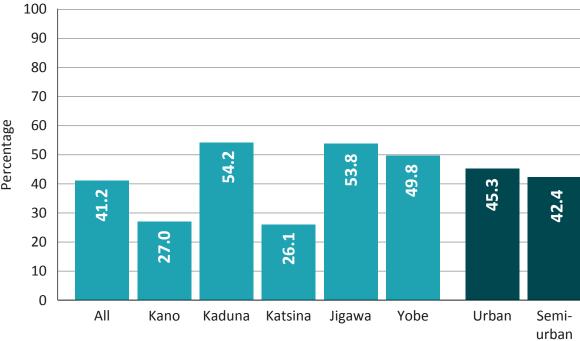
Although the Basic Health Care Provision Fund has been adopted in Nigeria, awareness and coverage of the SHIS remain low. Effective public promotion of the SHIS and its benefits could boost enrolment and coverage, reduce OOP expenditure for malaria and provide financial risk protection for the poor.

#### References

- 1. World Health Organization. World malaria report 2019. Geneva: WHO; 2019.
- : Technical report, April 2019. Nigeria: FMoH; 2019. . Federal Ministry of Health. National health accounts 2017
- 3. Hafez R. Nigeria health financing system assessment. Health, nutrition and population discussion paper. Washington, DC: World Bank; 2018.

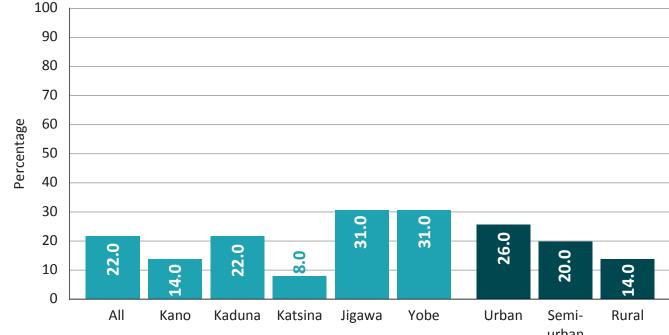


#### **Supplementary visuals**

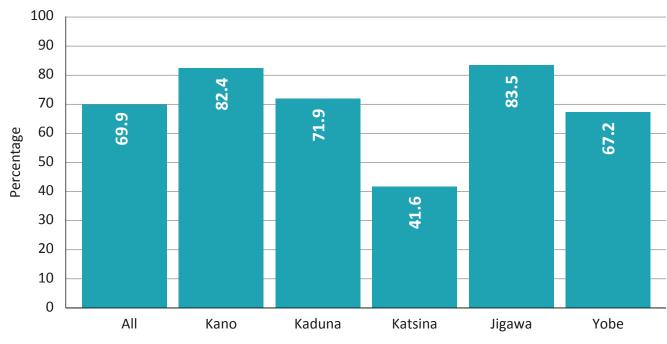


#### Figure 1: Awareness of state health insurance scheme by state and area type

## Figure 2: Coverage of state health insurance scheme by state and area type







#### Acknowledgements

The findings, interpretations and conclusions in this poster are entirely those of the authors and do not represent the views of the programme donor.

# The Nigerian state health insurance scheme could improve access to affordable malaria healthcare among

vulnerable communities

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