



REPORT OF THE NIGERIAN CIVIL SOCIETY ENGAGEMENT MECHANISM [CSEM] COUNTRY ADVOCACY MEETING FOR THE 2019 UNITED NATIONS HIGH-LEVEL MEETING ON UNIVERSAL HEALTH COVERAGE (UHC)

UHC Country Advocacy Meeting in Nigeria

Venue: UN House, Abuja, Nigeria

Day/Date: Tuesday 31st July, 2019 (from 8.30am to 4.45pm)

INTRODUCTION AND BACKGROUND:

Universal Health Coverage (UHC) is a global priority, important to the achievement of Sustainable development goals (SDGs), especially in low-and-middle income countries. UHC is defined as ensuring all people have access to the needed key promotive, preventive, curative and rehabilitative health services of good quality at an affordable cost without the risk of financial hardship linked to paying for healthcare services. According to World Health Organization (WHO), at least half of the world's population still does not have full coverage of essential healthcare services. Furthermore, about 100 million of the world's population is still being pushed into extreme poverty (defined as living on 1.90 USD or less a day) because they have to pay for healthcare services. About 12% of the world's population (Over 800 million people) spends at least 10% of their household budget on healthcare services, which is capable of pushing them into poverty.

PURPOSE: The purpose of the Country Advocacy Meeting [CAM] was to create a space for civil society and stakeholders to discuss domestic priorities for UHC and how to leverage the HLM on UHC to address key challenges in ensuring that we 'leave no one behind' in Nigeria.

OBJECTIVES:

1. To provide information about UHC, UNGA and HLM on UHC with an emphasis on its importance at the country level.
2. To present UHC2030 Key "Asks" and CSEM Priority Actions.
3. To discuss the key gaps and priorities to 'leave no one behind'.

4. To explore priority issues and actions for UHC, building on community-led evidence
5. To provide civil society with a national level platform to advocate for an effective UN HLM that results in ambitious national commitments to advance UHC.
6. To mobilize political leadership for high-level government representation and concrete commitments at the HLM, and influence the overall outcome of the UN HLM on UHC; and
7. To improve awareness of the Health civil society on the HLM, UHC2030 and CSEM for improved UHC policy development and implementation including accountability mechanisms.

JUSTIFICATION:

Nigeria's health indices have remained unbelievably poor and frightening over the years with antenatal coverage below 65%, skilled birth attendant below 42% and poor service delivery at our Primary Health Care (PHC) facilities. Impoverishing Out-of-Pocket expenses by households remains the major source of health expenditure, rising from 64.6% in 2003 to 76% in 2017, as a percentage of Total Health Expenditure (THE). Since the National Health Insurance Scheme (NHIS) was set up in 2005, less than 5% of the population has been covered by any form of health insurance. Nigeria still lags behind in ensuring health equity.

In consideration of all the above indices and the need to institutionalize UHC as an intrinsic element towards the achievement of Sustainable Development Goals (SDGs), especially SDG3; the CAM becomes an imperative, justifiable and urgent.

DETAILS DESCRIPTION OF ACTIVITIES:

1. **Registration** of all 34 participants.
2. **Introductory presentation** of Objectives and Expected Outcomes of the meeting by Dr. Uzodinma Adirieje, National Coordinator, NUHCAG.
3. **Goodwill Messages by;**
 - **Ministry of Budget & National Planning:**
He appreciated NUHCAG, IFRC, WHO and UNAID for efforts, referred to CSO involvement as a paradigm shift in health care access in Nigeria and assured of government emphasis on UHC.
"As a government, collectively we commit to ensure everyone in Nigeria has access to health care." - **Mr. A. B. Sa'adu**
 - **WHO country representative:**
He thanked all those involved in CAM, and emphasized that access to quality health is a right. Though the government is primarily responsible for providing care, the government cannot do it alone, hence the need for CSOs to support and also hold government accountable.
"We cannot achieve UHC if everyone in the family cannot access health care services." - **Dr. Clement Peter.**
 - **Afrihealth Optonet Association:**

“The efforts to achieve UHC should prioritise reviving and strengthening public health systems to provide health services to all who need them and protect populations from impoverishing health care costs” - Dr Uzodinma Adirieje

- **NRCS:**

“Universal health coverage cannot be achieved and sustained without increasing the awareness of the general public, especially, with the heightened security situation in certain part of the country.” - Dr. Ibrahim Juma Ibrahim

- 4 **Presentation by Mr. Sherry Joseph** of IFRC about Mission, Objectives and Activities of **UHC2030 and CSEM.**
- 5 **Presentation by Dr Moses Ongom** of WHO on UNGA, HLM on UHC, implication of CAM, role of CSOs and country data on UHC.
- 6 **Comments, Questions and Answer Session:** Participants contributed to the subjects/discussions and also sought/required clarifications from the presenters - Dr. Adirieje, Mr. Sherry and Dr. Moses
- 7 **The six key 'Asks'** for HLM on UHC were adopted after exhaustive deliberation anchored by **Ms Hauwa Abbas** and **Mrs. Yetunde Orungbamade.**
- 8 Participants broke into 5 groups to provide answers to a particular section of the **National UHC questionnaires and additional questions.**
- 9 **Brain Storming session:** Anchored by **Mrs. Lizzy Igbine** and **Mrs. Loretta Ahuokpeme.** Participants discussed how to use UHC2030 and CSEM to advocate to the government and other stakeholders in Nigeria. The civil society participants at this session also unanimously agreed on the following (7) commitments:
 - i. Resolved to respectfully request Nigeria’s President, **His Excellency Muhammadu Buhari**, GCFR to personally attend the UN HLM on UHC holding in New York on 23rd September 2019 and to personally present Nigeria’s commitments to UHC2030;
 - ii. Adopted the global UHC2030 ‘Key Asks’ that were already adopted by the UN; AND hereby request the Federal Government of Nigeria to:
 - iii. Ensure Political Leadership Beyond Health by committing to achieve UHC for healthy lives and wellbeing for all ages as a social contract; as well as build strengthened health system that communities and Nigerians trust by upholding quality of care;
 - iv. Leave No One Behind by providing equitable access to quality healthcare service to all people in Nigeria, with financial protection;
 - v. Increase Public Financing for Health to provide the necessary financial protection that supports healthcare-seeking behaviours;
 - vi. Improve involvement of CSOs and citizens for transparency and accountability at all levels by establishing multi-stakeholders mechanisms in engaging the whole of society for a healthier world; and
 - vii. Invest heavily and continuously in Health workers, including community health workers.

The NUHCAG, Nigeria Civil society and CSOs commit to collaborate with Government in achieving actions, transparency and accountability towards achieving UNC2030; and to:

1. Hold regular periodic national and subnational UHC stakeholders consultations/meetings;
2. Organize and facilitate/support periodic expanded stakeholders reviews of Nigeria's UHC achievements and challenges; and
3. Collectively continue to strategise towards achieving the UHC2030 targets in Nigeria.

Closing remarks were given by Dr. Ibrahim and Dr. Adirieje on behalf of the NRCS and AFRIHEALTH respectively, while **Mr. Ahmad Rufai Abubakar** gave the vote of thanks on behalf of NUHCAG.

IMPLEMENTATION PLAN/METHODOLOGY:

NUHCAG shall identify and synergise with key uHC stakeholders and CSOs in Nigeria using advocacy, mobilization,, partnerships/collaborations, evidence-generation, capacity development and monitoring; in order to achieve the objects and targets of UHC2030 in Nigeria.

RESULTS/OUTPUTS/OUTCOMES:

1. Completed country level UHC needs assessment (Questionnaire)
2. Articulated UHC2030 'Key Asks' for Nigeria was prepared for presentation to the CSEM Secretariat;
3. CSOs and stakeholders understood the CSEM Priority Action;
4. Official CSOs UHC commitment recommendations for government were agreed upon;
5. Participants committed themselves to continuous dialogue with, and support for civil society national consultations on 'Achieving the UHC' in Nigeria within the next 12 months and on annual thereafter basis towards 2030;
6. CSOs were sensitized about their roles in the forthcoming UN HLM on UHC and achievement of the objectives of UHC2030;
7. Civil Society unanimously agreed to work with the Federal Government and Stakeholders to achieve the objects of UNC in Nigeria;
8. Nigerian Government assured of its commitment to support the CAM and achievement of UHC2030 targets in Nigeria;
9. It's agreed that civil society/NUHCAG representatives should be included in Governments' official delegations to the UN HLM on UHC; and
10. Official CSOs UHC commitment recommendations for government.

ACHIEVEMENTS:

1. At short notice, 22 leading CSOs and CSO networks/coalitions were mobilized from all regions of the country by Afrihealth Optonet Association with the support of the CSEM, UNAIDS, WHO and IFRC/NRCS to organize the Nigeria CAM following the initial non-inclusion of Nigeria in CSEM plan for CAM;

2. Nigerian CSOs spoke with one voice in demanding that the Federal Government of Nigeria (FGN) should make realistic commitments at the HLM based on our country level needs
3. Country specific challenges, data and information were reviewed and deliberated upon.
4. The six global UHC2030 key 'Asks' were adopted.
5. Country specific civil society Plan of Action (PoA) was developed and adopted.
6. Civil Society committed its members/NUHCAG to support, work with and hold FGN accountable to their commitments after the HLM (e.g. using Voluntary National Reviews (VNRs) as a review of progress towards Nigeria's UHC commitments)

PLAN OF ACTIONS (POA)

Nigeria UHC CAM Meeting 2019				
Plan of Action (POA)				
S/No	Key Action Points	Responsible Person(s)/Group/ Organisation(s)	Timeline	Comment
1	Ensure CSO is included in the representation at the UN HLM	Dr. Uzodinma Adirieje/NUHCAG Abuja based members	August	
2	Engage with the FMOH and Foreign affairs to gather information concerning the country's preparation towards the forthcoming HLM on UHC	UN/Dr. Uzodinma Adirieje/NUHCAG Abuja based members	August	UN to raise the topic during the UN pre-general assembly meeting
3	Identify with other CSOs advocating for UHC for a harmonised and more coordinated advocacy, to speak with one voice	Dr. Uzodinma Adirieje/NUHCAG Abuja based members	August wk 1	
4	Present the adopted communique to the identified stakeholders and push for the President to lead Nigeria delegation to HLM, and personally present Nigeria's commitment on UHC (Ministries of Finance, Foreign Affairs, Budget and Planning, Health, Chief of Staff, NHIS, NPHCDA, ALGON, Governor's Forum, National Council on Health, National Council on Planning, Secretaries to the Federal and State Government)	Dr. Uzodinma Adirieje/NUHCAG	August	NUHCAG to ensure state inclusion

5	Request that the 7 commitments of CSOs are inputted into the National commitment on UHC	Dr. Uzodinma Adirieje/NUHCAG Abuja based members	August	This should also be cascaded to the state level
6	Continuously engage with Governments, MDAs, UN, partners, multilateral agencies and stakeholders to organize civil society national consultations on 'Achieving the UHC' in Nigeria within the next 12 months and on annual basis towards 2030	Dr. Uzodinma Adirieje/NUHCAG/Afrihealth Optonet Association	Ongoing	

CONCLUSIONS:

A successful CAM was held at UN house in Abuja on 30 July, 2019.

Huge work to be done towards UCH2030 in Nigeria was identified and solution recommended.

NEXT STEPS:

- Activate our post CAM plans.
- Need to quickly commence targeted advocacy towards achieving our aim towards HLM.
- Plan for active regional and state level advocacy.
- Plan for a National UHC consultation.

ACKNOWLEDGEMENTS

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