



# Snapshot of Accomplishments Nigeria

October 2022 to September 2023

## ACTIVITY OBJECTIVES

1. Facilitate access to capital for health care businesses through a USAID Mission-selected bank.
2. Build capacity of healthcare businesses in business and financing management and enhance their ability to secure private capital.
3. Improve the capacity of private providers to deliver quality maternal, newborn, and child health (MNCH), including malaria and family planning (FP).
4. Improve private sector engagement within government-supported financing mechanisms.
5. Improve stewardship of the private sector.
6. Improve availability of quality commodities.
7. Strengthen data management and reporting for the private sector.

## GEOGRAPHIC FOCUS AREAS

Federal Capital Territory (FCT) and Ebonyi States

## HEALTH AREAS

Family Planning; Maternal, Newborn, and Child Health

## TECHNICAL AREAS

Financing; Supply, Market Intelligence; Stewardship

## REPORTING PERIOD

October 2022 to September 2023

# Select Accomplishments

## Completed Landscaping Review of Quality Assurance and Quality Improvement Tools, Methods, and Materials

In its first year of implementation, FHM Engage sought to develop a better understanding of quality standards for maternal newborn health (MNH), child health (CH), and family planning (FP), in Ebonyi state and the FCT's private health sector. To date, FHM Engage has completed a quality-of-care landscape assessment which centered on reviewing quality assurance/quality improvement (QA/QI) standards, tools, post training materials, and on-the-job support materials. During the exercise, FHM Engage identified and mapped out the root causes of quality-of-care constraints. In addition, FHM Engage identified and joined relevant technical working groups and implementing partners involved in facility quality improvement activities to serve as coordination platforms for future quality-of-care interventions targeting the private sector. The project also collated the various quality of care (QoC) policies, guidelines and plans being utilized in-country and identified quality improvement quality assurance models and tools.



PREGNANT WOMEN PARTICIPATE IN A FOCUS GROUP DISCUSSION IN ABUJA DURING THE QUALITY-OF-CARE ASSESSMENT. CREDIT: FHM ENGAGE.

The low coverage of (demand-side) health financing is a major bottleneck to improving health outcomes. FHM Engage completed a health financing landscape in Ebonyi state and the FCT to diagnose the demand-side financing constraints faced by the private sector in the delivery of maternal and child health and family planning services and products in Ebonyi state and the Federal Capital Territory (FCT). Further, FHM Engage identified the economic barriers faced by consumers in accessing services in the three markets and evaluated how existing public financing mechanisms were addressing the demand-side financing constraints, alongside how the mechanisms incentivized the private sector providers to improve the delivery of the health services. The recommendations from the report are summarized below.

SUMMARY RANKING OF PROPOSED INTERVENTIONS BY SELECTION CRITERIA (1: no/low, 2: moderate, 3: high)

#	Intervention	Incentive	Feasibility	Impact
1	Include FP, MNH, and CH services and products in health insurance benefits package and update operational guideline.	3	1	3
2	Authorize community pharmacies (CPs) and patent and proprietary medicine vendors (PPMVs) to be providers under health insurance schemes	3	1	3
3	Establish the Drug Revolving Fund	3	3	3
4	Strengthen private health facilities capacity to deliver FP, MNH, and CH under health insurance schemes and BHCPF (Basic Health Care Provision Fund)	3	1	3

5	Strengthen EBSHIA (Ebonyi State Health Insurance Agency) and FHS (FCT Health Insurance Scheme) staff capacity to engage private sector	3	1	2
6	Raise awareness of financing schemes among beneficiaries and private providers	3	1	2
7	Explore ways of making FP commodities more available and at a cheaper price for private providers	2	2	2

**Incentives:** Who will gain, or lose, from interventions, how this might happen, and how it might be avoided, if feasible and desirable, are critical to minimize the political and social risks. **Feasibility:** Resources *technical, physical, strategy and personal and cultural* **Impact:** Improvements in market performance but more importantly impact at the health level.

## Defined Areas of Market Underperformance in Family Planning and Maternal Newborn Health to Co-Create Solutions with Local Stakeholders

FHM Engage conducted a series of market description analyses, gathering comprehensive information on supply, demand, and consumer uptake of FP, MNH, and CH products and services in Ebonyi and FCT. The root causes of market underperformance for all three health areas include poor stewardship of the private sector, inadequate access to business capital, weak private sector data management, weak regulation of the private sector, multiple taxation and socio-cultural norms affecting health seeking behavior. The findings of the market descriptions were applied to the co-creation of Nigeria’s market strategy with local market actors from the public and private sectors, to expand equitable access to quality, affordable FP, CH, and MNH services and products for underserved women and children in target states. The market strategy will guide the FHM Engage project’s entry into the FP, MNH, and CH markets, outlining the people to be targeted, products/services to be offered, through what providers, in what place and the approach to scale. When implemented in full, the market strategy will lead to increased access to quality FP, CH and MNH services and contribute to an improvement in maternal, newborn and child health outcomes in the target states. The diagram below highlights the market entry points developed by FHM Engage and local market actors to steer the FP, CH and MNH markets in both Ebonyi state and the FCT towards effective performance.

MARKET ENTRY POINTS FOR INCREASING ACCESS TO FP, CH & MNH SERVICES/PRODUCTS IN EBONYI STATE AND THE FCT (a conclusion of FHM Engage’s market description work and pathway to impact)

Market	People	Product/Services	Provider	Place	Approach to Scale
 <b>Family planning</b>	All women (mostly married women)	<ul style="list-style-type: none"> <li>Implants</li> <li>Injectables</li> <li>+ Others</li> </ul>	<ul style="list-style-type: none"> <li>Community Pharmacy</li> <li>PPMVs</li> <li>Private facilities</li> </ul>	<ul style="list-style-type: none"> <li>Rural</li> <li>peri-urban</li> <li>Urban slums</li> </ul>	<ul style="list-style-type: none"> <li>Implement task shifting, task sharing policy</li> </ul>
 <b>Child Health</b>	Children born to families within the lower and lowest income levels with little or no educational background	<ul style="list-style-type: none"> <li>Malaria testing and treatment</li> <li>Diarrhea treatment</li> <li>Acute respiratory infection treatment</li> </ul>	<ul style="list-style-type: none"> <li>Community Pharmacy</li> <li>PPMVs</li> </ul>	<ul style="list-style-type: none"> <li>Rural</li> <li>peri-urban</li> <li>Urban slums</li> </ul>	<ul style="list-style-type: none"> <li>Implement an ICCM model</li> </ul>
 <b>Maternal Health</b>	Younger pregnant women within the lowest and lower income level	<ul style="list-style-type: none"> <li>BEmONC</li> <li>CEmONC</li> <li>Referral</li> <li>PNC</li> <li>PPFP + Counseling</li> </ul>	<ul style="list-style-type: none"> <li>Private primary facilities</li> <li>Private secondary facilities</li> <li>Public facilities for referral</li> </ul>	<ul style="list-style-type: none"> <li>Rural</li> <li>peri-urban</li> <li>Urban slums</li> </ul>	<ul style="list-style-type: none"> <li>Implement a hub and spoke system</li> </ul>

In the past year, FHM Engage has initiated engagements with local market actors like the Federal Ministry of Health, professional associations and other private sector networks on private sector data sharing and use. In August 2023, FHM Engage facilitated a data consultative workshop of public and private sector market actors who developed priority solutions to improve private sector data visibility in Nigeria. The challenges identified by stakeholders include: weak private sector data collection, management, and use, poor communication between public and private institutions and a weak culture of private sector data sharing. In FY24, FHM Engage will implement the solutions identified by the market actors including strengthening data sharing from the private sector and improving site level reporting.



PARTICIPANTS WORK TOGETHER AT THE PUBLIC-PRIVATE DIALOGUE ON PRIVATE DATA SHARING AND USE IN AUGUST 2023 IN ABUJA. CREDIT: FHM ENGAGE.

*Cover photo: FHM Engage Nigeria's Chief of Party, Mariya Saleh (fourth from right), leads discussions between the FHM Engage team and officials from the FCT Health and Human Services Secretariat during a meeting to validate findings from the market descriptions for FCT, June 2023. Credit: FHM Engage.*

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