

# Sources for sick child care in Nigeria

*One in a series of analyses by SHOPS Plus*

June 2020





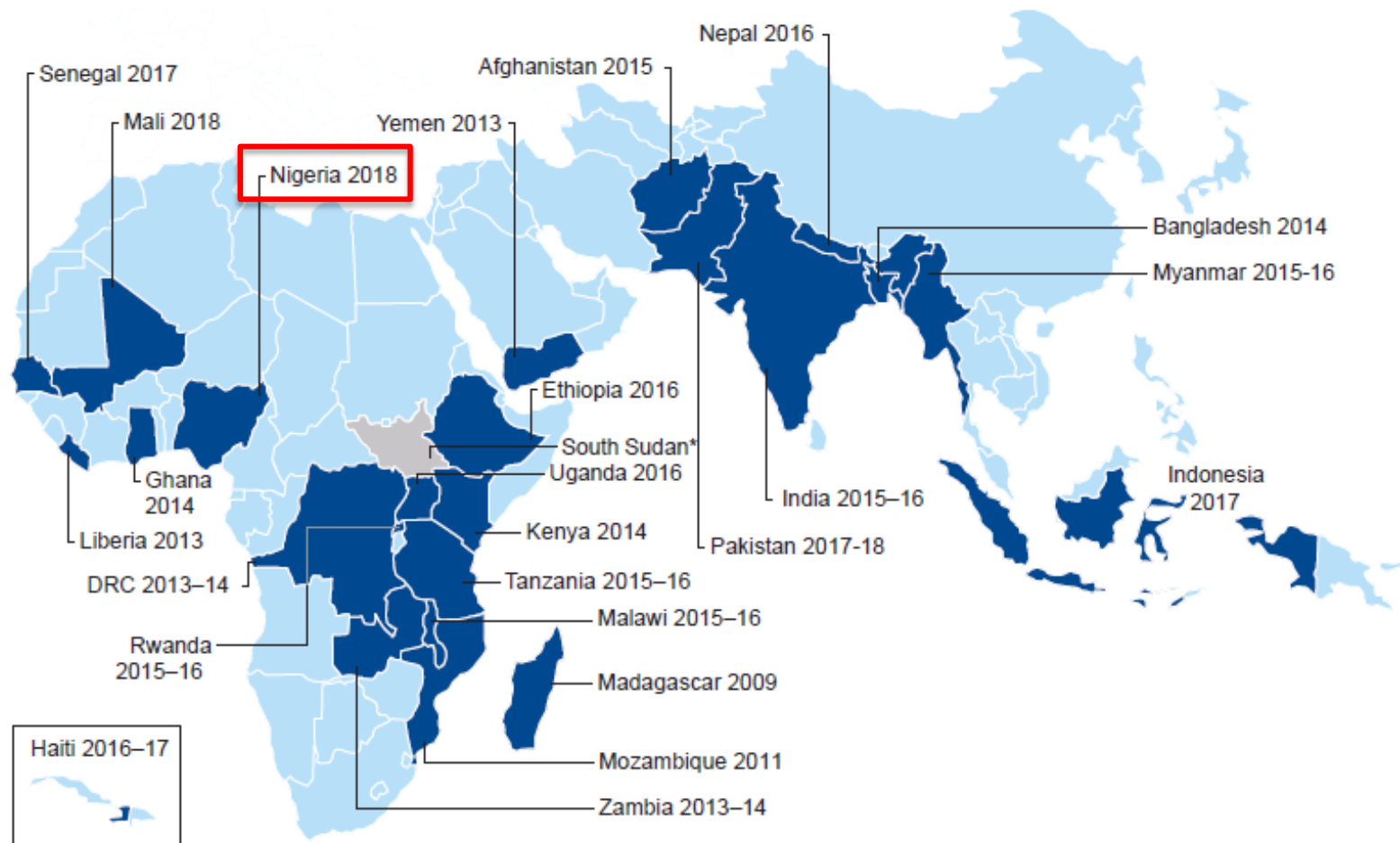
## Purpose of this analysis

- Understand whether and where Nigerian caregivers seek advice and treatment for their sick children
- Examine differences in care-seeking patterns by illness and socioeconomic levels, and within public and private sectors
- Share data in a usable format
- **Inform policies and programs to prevent child deaths**





# Demographic and Health Survey (DHS) data analyzed from 24 priority countries



\*No DHS data are available for South Sudan.



## Nigeria 2018 DHS data: Interviews with mothers of young children

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Mothers of children five years old or younger were asked:

- Whether their children had experienced fever, symptoms of acute respiratory infection (ARI), or diarrhea in the past two weeks
  - If yes, asked whether they had sought advice or treatment from any source
    - If yes, asked where they had sought advice or treatment



## This analysis will tell you:

1. What percentage of children in Nigeria experience fever, ARI symptoms, and/or diarrhea?
2. What percentage of caregivers seek advice or treatment outside the home for children with these illnesses?
3. Among those who seek out-of-home care, what are the sources?
  - a) Public, private, other
  - b) Clinical vs. non-clinical
4. How do patterns of care-seeking vary by:
  - a) Illness: fever, ARI, diarrhea
  - b) Countries within the West and Central Africa region
  - c) Wealth quintile: poorest and wealthiest Nigerians



How frequently do children in Nigeria experience fever, ARI symptoms, and/or diarrhea?

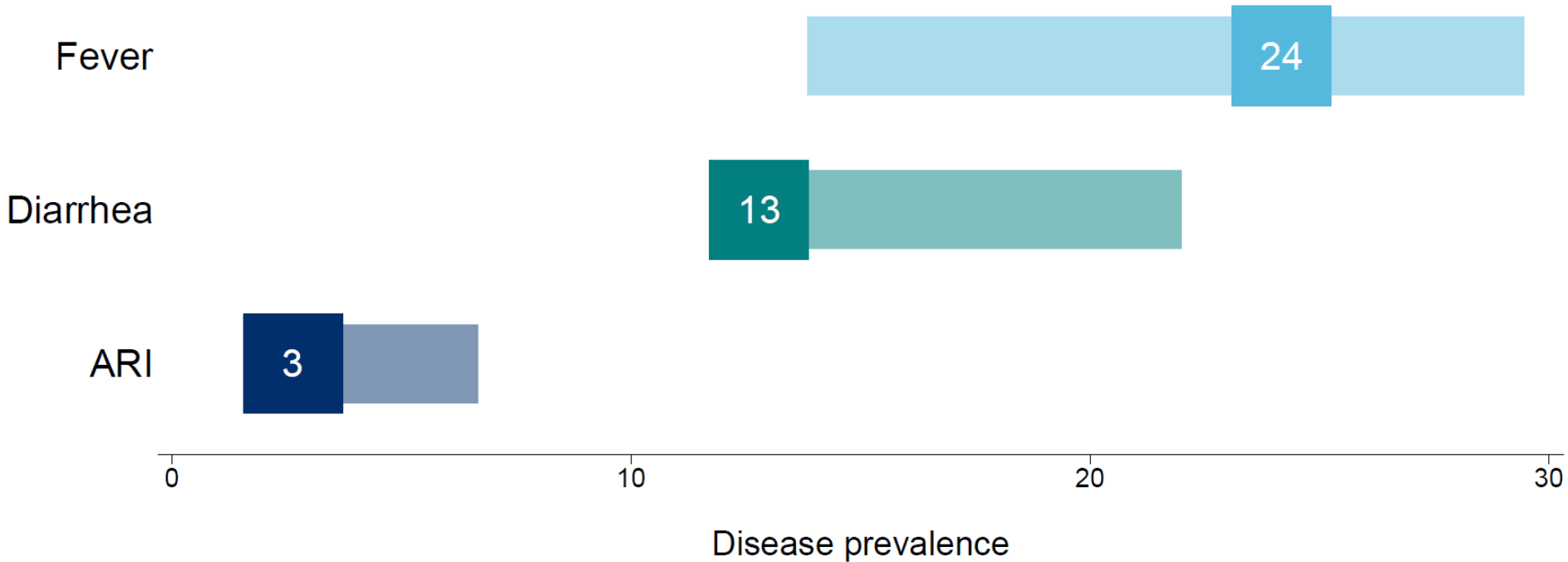




# Nigeria has a lower childhood disease prevalence for diarrhea and ARI compared to its neighbors

Bars show **range** across West and Central African USAID priority countries; squares show **Nigeria**

## Illness prevalence: Nigeria and West and Central Africa





**Nearly 1 out of 3 children in Nigeria experienced fever, ARI symptoms, and/or diarrhea in the last 2 weeks.**





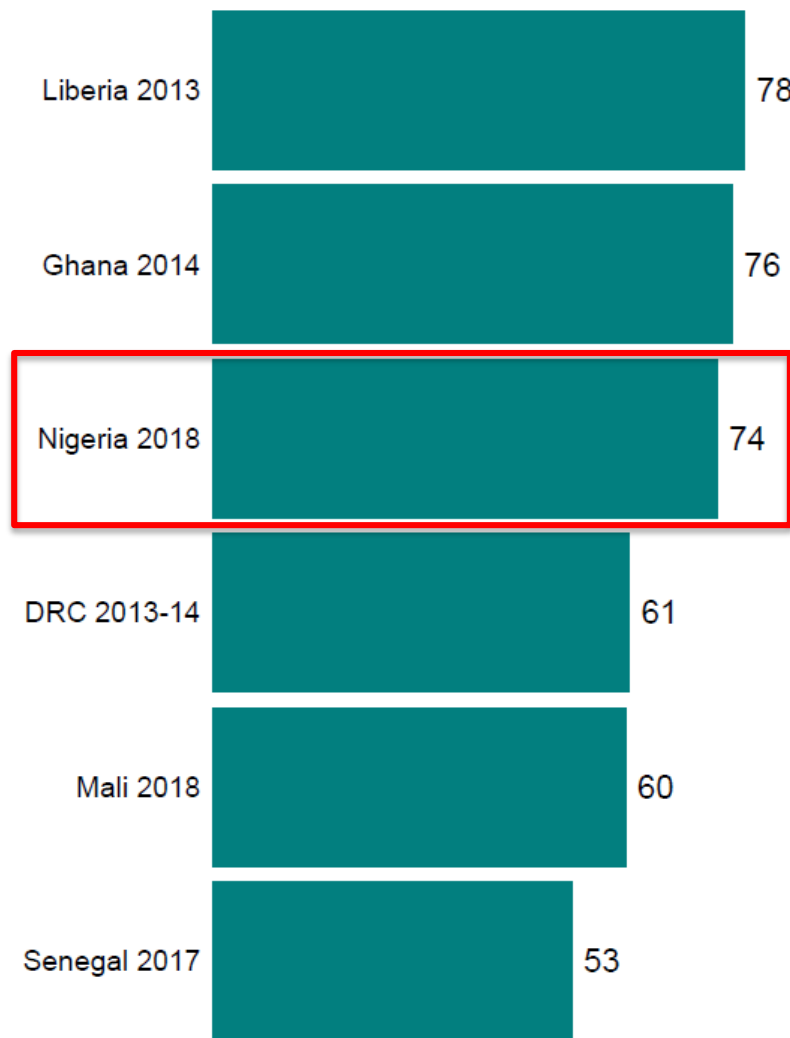


How frequently is out-of-home  
care sought for Nigerian  
children with these illnesses?





## Nigeria's care-seeking level is mid-range compared to its neighbors



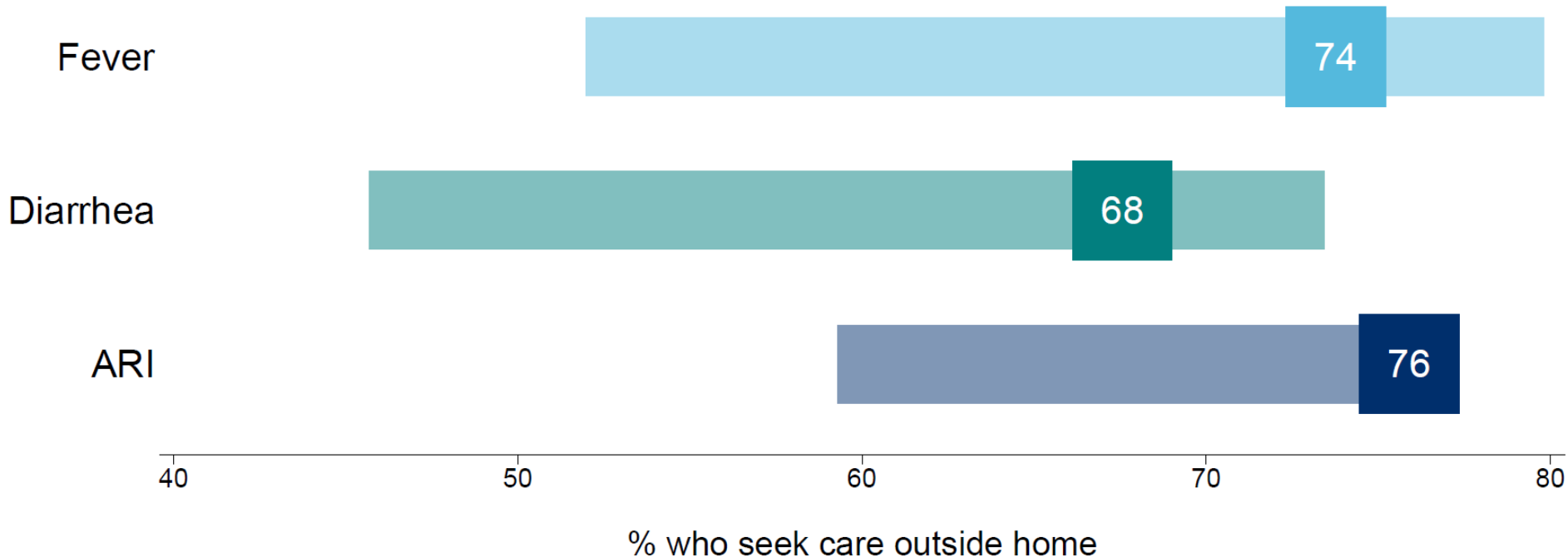
% of caregivers who seek treatment for children with any of the three illnesses in each of the West and Central USAID priority countries analyzed



# Nigeria has **higher** care-seeking levels compared to most USAID priority countries in West and Central Africa, across illnesses

Bars show **range** across West and Central African USAID priority countries; squares show **Nigeria**.

## Caregivers who seek care outside the home: Nigeria and West and Central Africa





Among Nigerians who seek  
out-of-home care, what are the  
sources?

Public, private, other



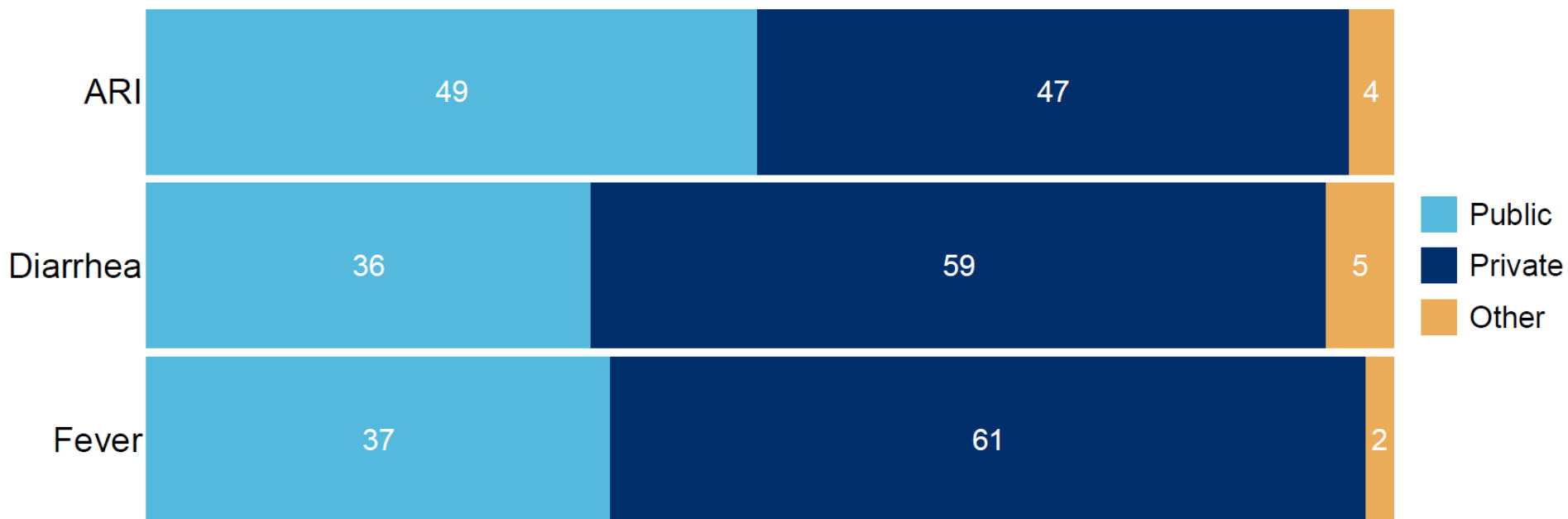


## Sources of care

Public sector	Private sector	Other
<ul style="list-style-type: none"><li>· Hospitals</li><li>· Health posts</li><li>· Health centers</li><li>· Mobile clinics</li><li>· Field workers</li></ul>	<ul style="list-style-type: none"><li>· Private clinics, hospitals, doctors, and mobile clinics</li><li>· Pharmacies, chemists, patent medicine sellers, shops, markets, itinerant drug sellers</li><li>· Community-oriented resource persons</li><li>· Private field workers</li></ul>	<ul style="list-style-type: none"><li>· Traditional practitioners</li></ul>



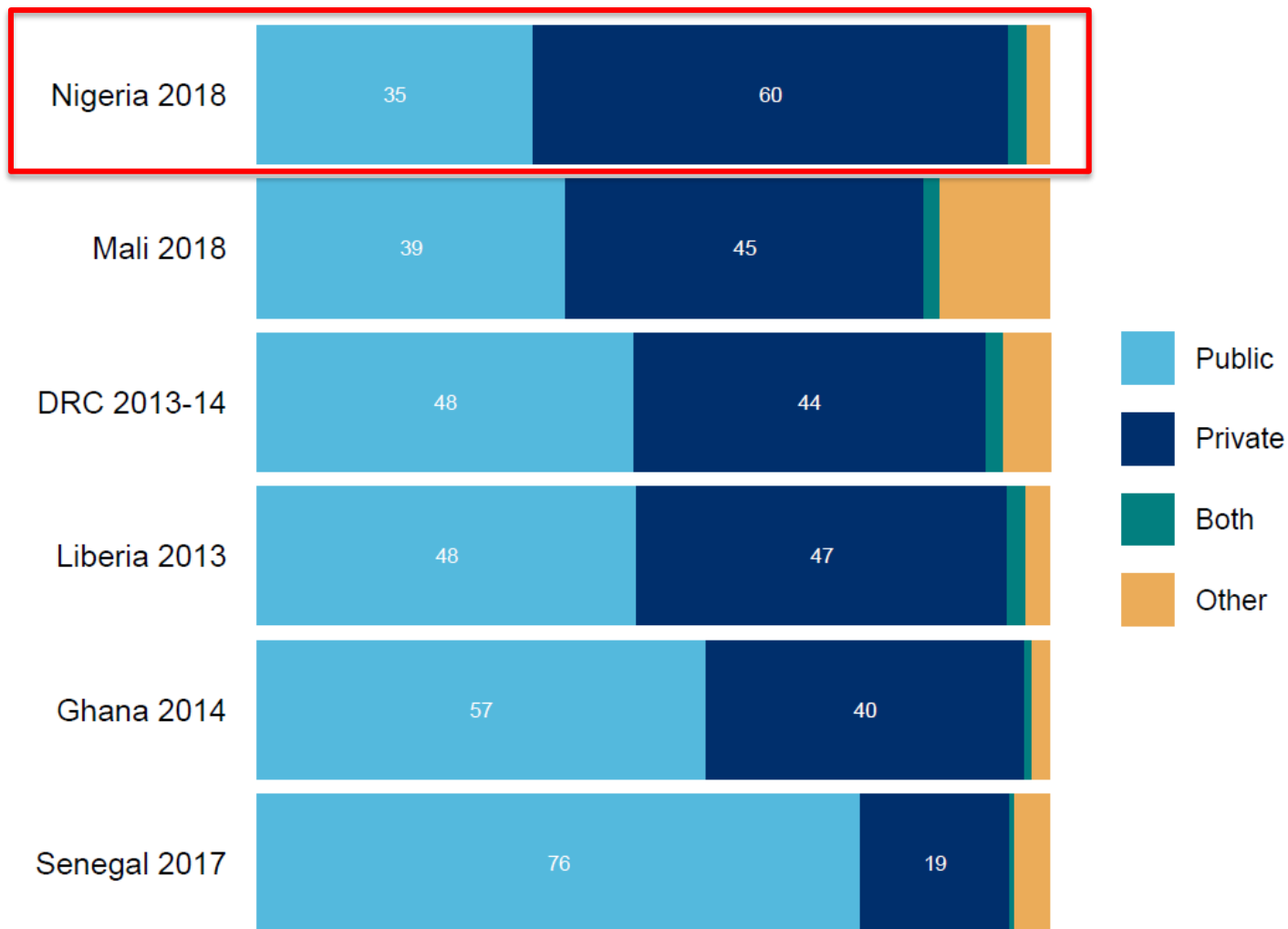
## The **private** sector is the primary source for diarrhea and fever



Source among Nigerians who seek sick child care outside the home

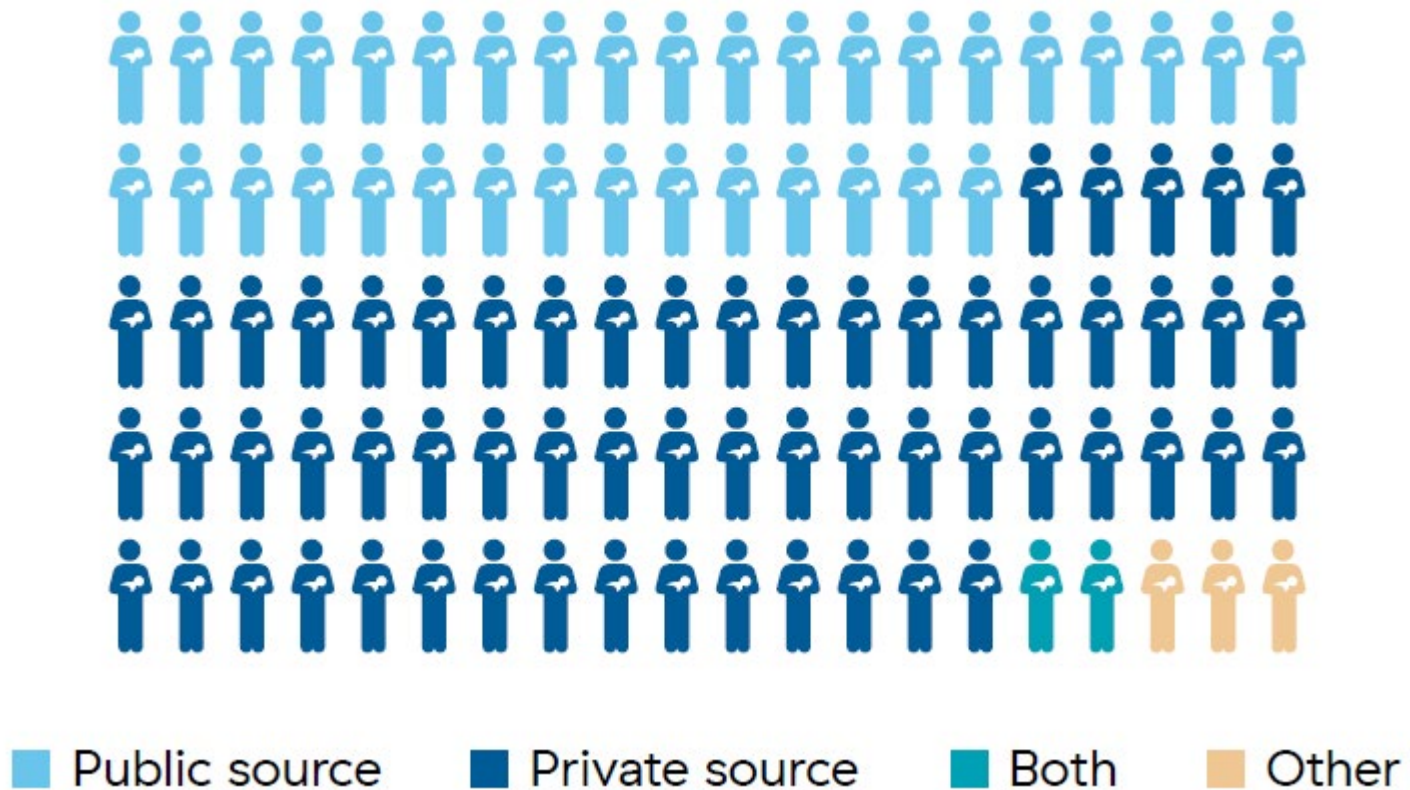


# Nigeria has the highest level of **private** sector use compared to its neighbors





Among caregivers who seek sick child care outside the home, **60%** seek treatment or advice from private sector sources and **35%** from public sector sources.







# Sources of care: Clinical versus non-clinical





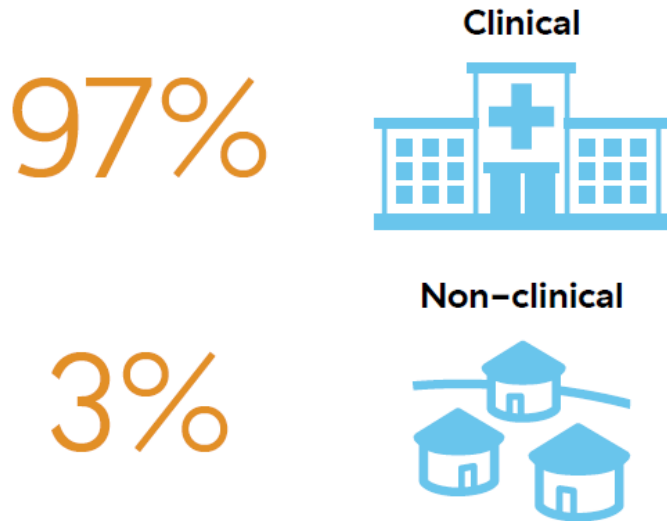
## Sources of care: Clinical and non-clinical

	<b>Public sector</b>	<b>Private sector</b>
<b>Clinical</b>	<ul style="list-style-type: none"><li>· Hospitals</li><li>· Health posts</li><li>· Health centers</li><li>· Mobile clinics</li></ul>	<ul style="list-style-type: none"><li>· Private clinics, hospitals, doctors, and mobile clinics</li></ul>
<b>Non-clinical</b>	<ul style="list-style-type: none"><li>· Field workers</li></ul>	<ul style="list-style-type: none"><li>· Pharmacies, chemists, patent medicine sellers, shops, markets, and itinerant drug sellers</li><li>· Community-oriented resource persons</li><li>· Private field workers</li></ul>

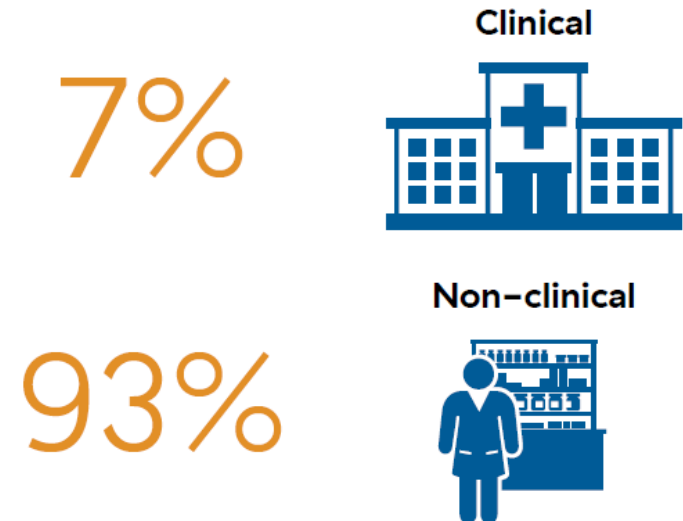


**Clinical** care is dominant in the **public** sector;  
**Non-clinical** care is dominant in the **private** sector

**Public sector:**

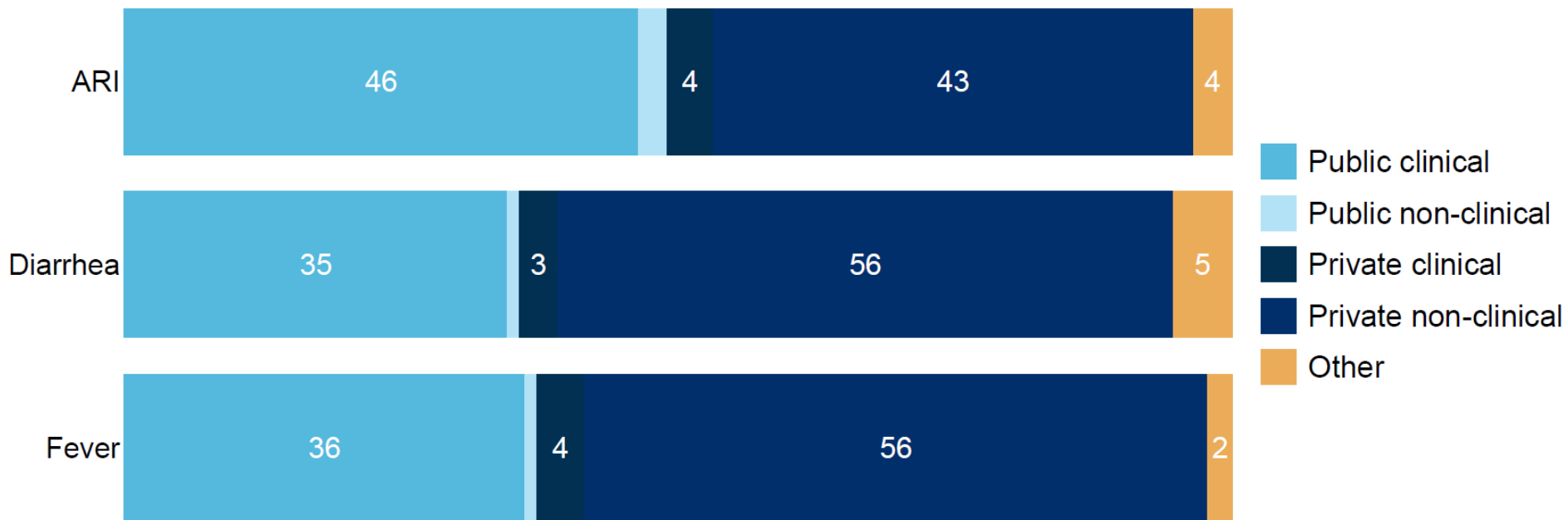


**Private sector:**





## By illness: *Little variation* in clinical vs. non-clinical sources of care



Source among Nigerians who seek sick child care outside the home



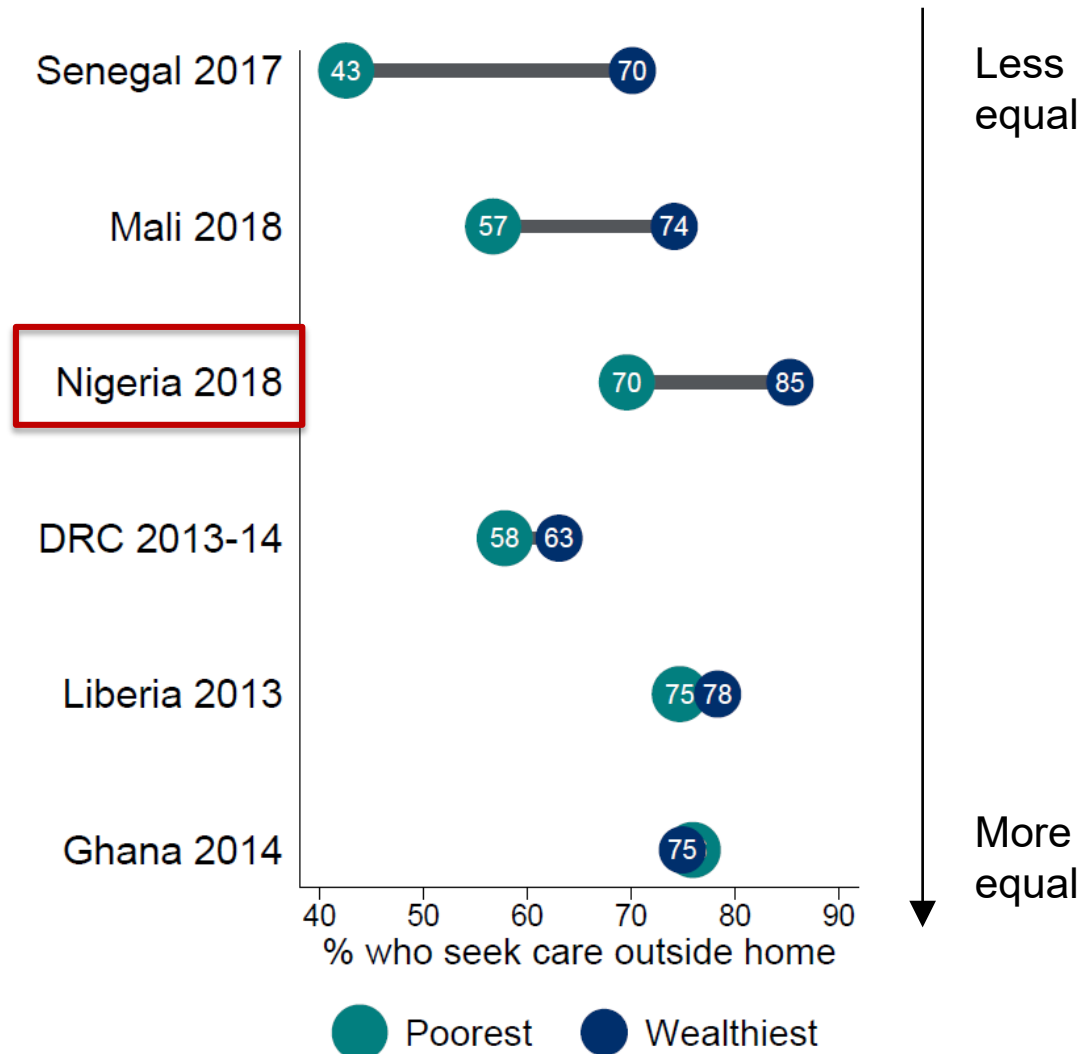
How do patterns of care-seeking vary between the poorest and wealthiest Nigerians?





# There is a relatively large socioeconomic care seeking disparity in Nigeria

- Wealthiest
- Poorest





# Private sector is dominant for **both poorer and wealthier** Nigerians



Source among those who seek care outside the home

Q1 = poorest

Q5 = wealthiest



Public



Private



Both



Other

In Nigeria, the private sector is dominant:

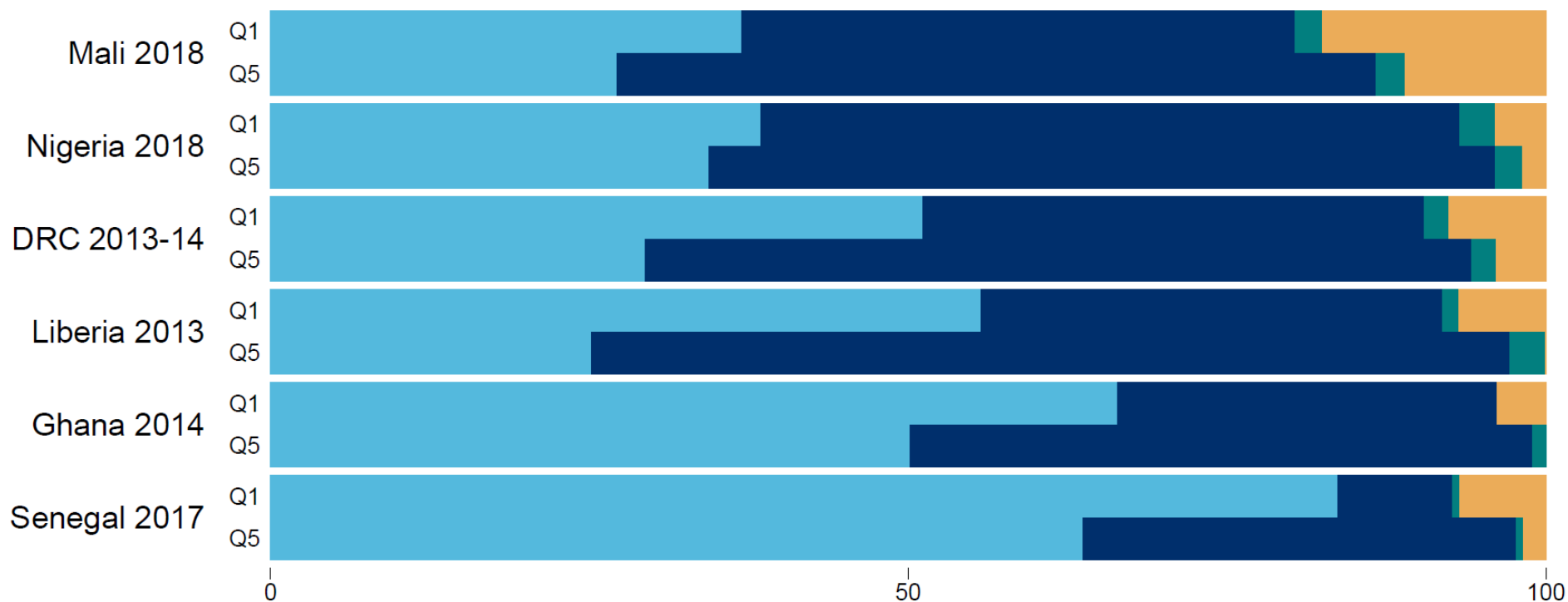
- 55% of poorest and 62% of wealthiest caregivers use private sector

Public sector use is less common, particularly among the poor:

- 38% of poorest and 34% of wealthiest caregivers use public sector



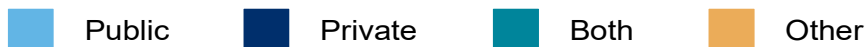
# In Nigeria, the **private** sector is dominant for both the poorest and wealthiest families



Source among those who seek care outside the home

Q1 = poorest

Q5 = wealthiest







# Summary

- **1 out of 3** children experienced a treatable illness in the past two weeks
- **74%** of caregivers seek treatment outside the home
  - **60%** use the private sector
  - **35%** use the public sector
- **Private sector** is dominant
  - Nigeria has the **highest** level of private sector care-seeking compared to all other West and Central African USAID priority countries
- The private sector is the primary source even for the poorest
  - **55%** of the poorest and **62%** of the wealthiest caregivers use the private sector
  - **38%** of the poorest and **34%** of the wealthiest use private sources
- Clinical vs. non-clinical sources
  - Private sector: **88%** used non-clinical sources
  - Public sector: **97%** used clinical sources



## Acknowledgements

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## About SHOPS Plus

Sustaining Health Outcomes through the Private Sector (SHOPS) Plus is USAID's flagship initiative in private sector health. The project seeks to harness the full potential of the private sector and catalyze public-private engagement to improve health outcomes in family planning, HIV, child health, and other health areas. SHOPS Plus supports the achievement of U.S. government priorities, including preventing child and maternal deaths, an AIDS-free generation, and Family Planning 2020.



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