

**ARISE TRAIN-THE-TRAINER WORKSHOP.
WORKSHOP FOCUS: LABORATORY SKILLS.**

11TH-13TH SEPTEMBER, 2019

AT

REIZ INTERCONTINENTAL HOTEL, ABUJA,
NIGERIA.

STRUCTURE OF HEALTHCARE IN NIGERIA AND NEW BORN SCREENING

AN HISTORICAL PERSPECTIVE

OVERVIEW OF STRUCTURE OF HEALTHCARE IN
NIGERIA AND NEW BORN SCREENING
AN HISTORICAL PERSPECTIVE

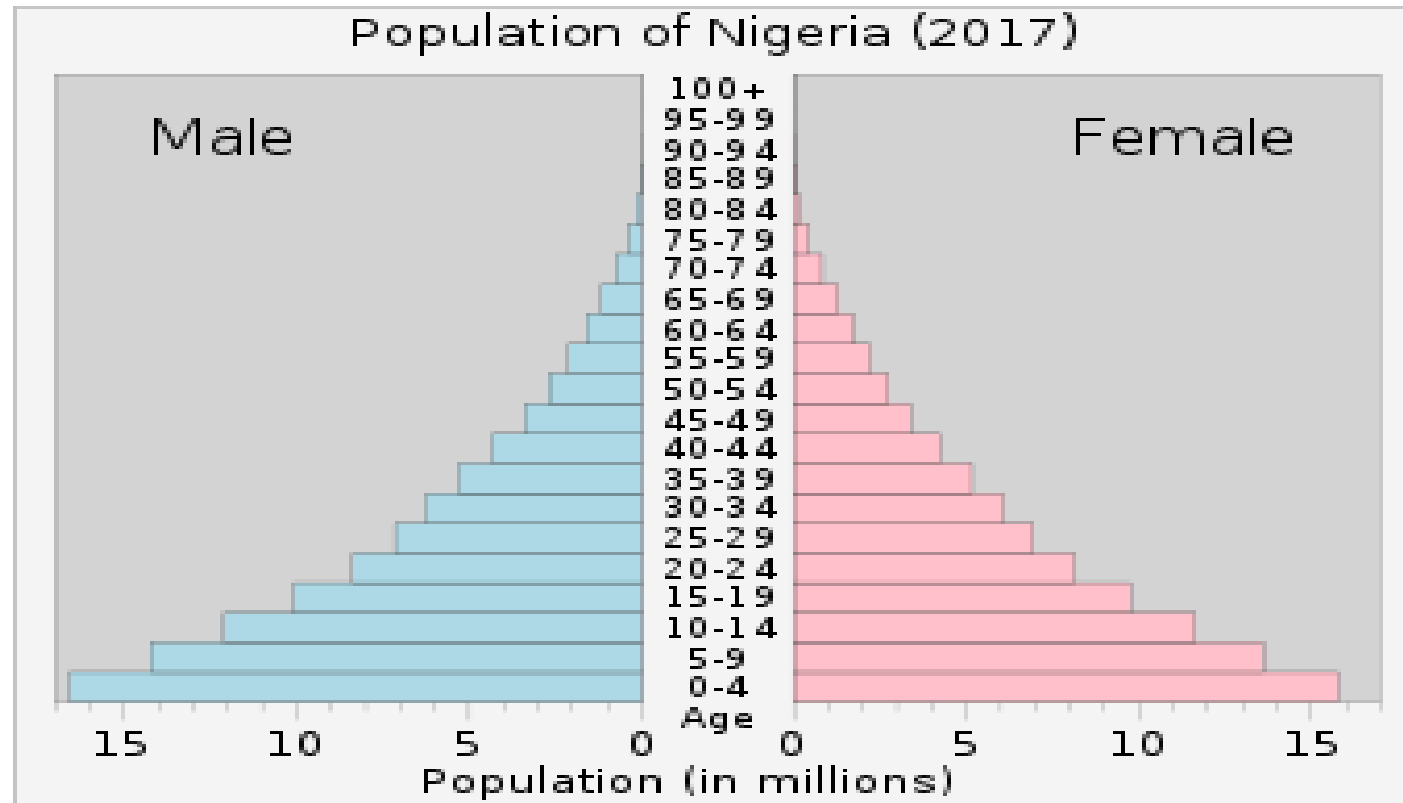
Presenter;

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KADUNA STATE MINISTRY OF HEALTH
DEPARTMENT OF MEDICAL SERVICES

Outline

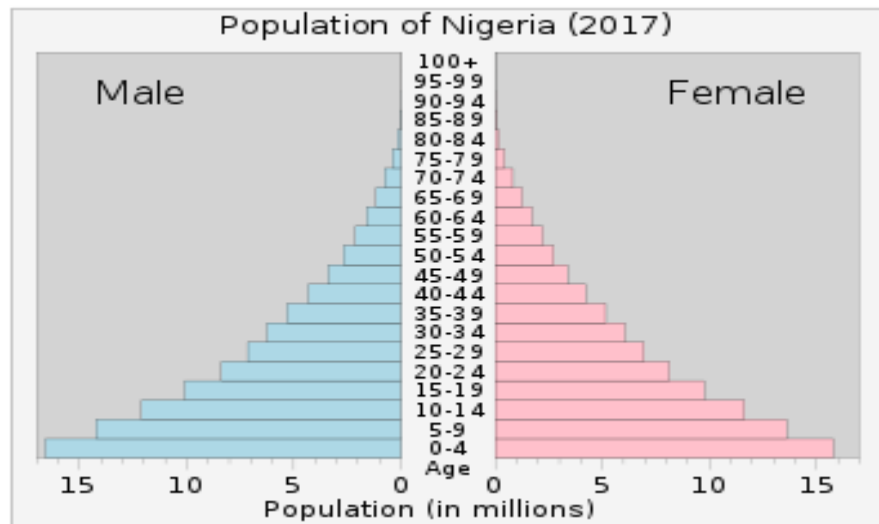
- ▶ Introduction
- ▶ Levels of Health Care Deliveries
- ▶ Healthcare financing
- ▶ Health Management Information system (HMIS)
- ▶ New-born screening
- ▶ Challenges
- ▶ Conclusion

Nigerian population pyramid-2017

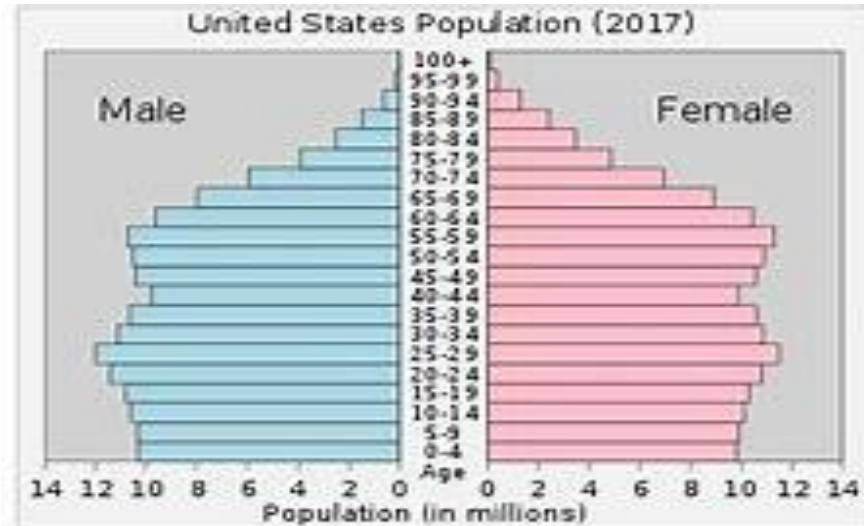


Human resource and population

NIGERIA

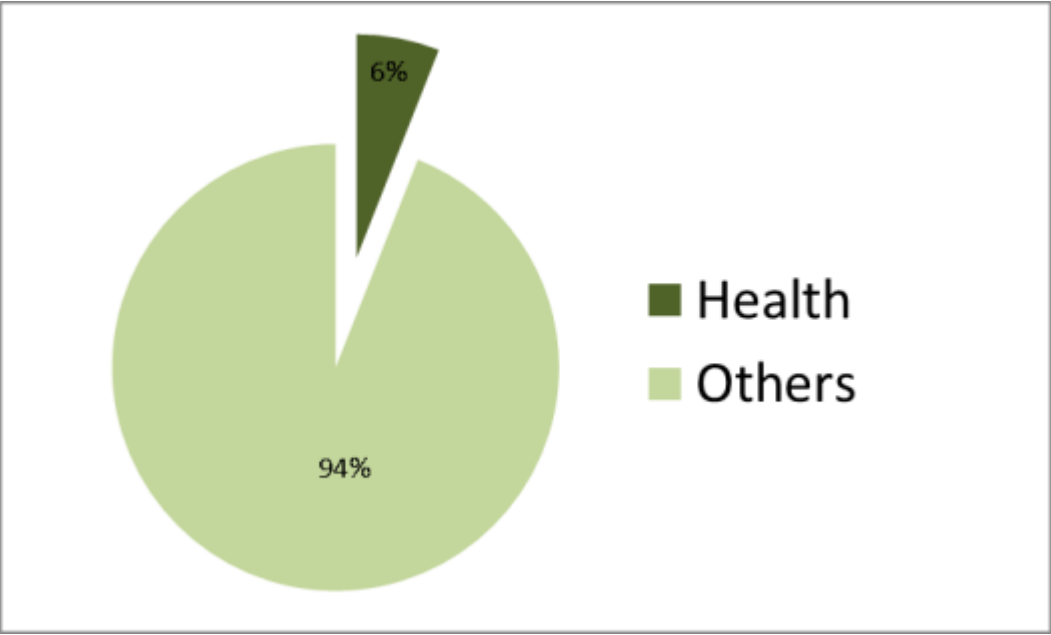


USA



Introduction.....2018 budget

► Budget for 2018



Introduction

- ▶ Nigeria is the 7th most populated country .
- ▶ Estimated to have 200.96 million people according to the world population review-2019
- ▶ Has 36 states + the FCT
- ▶ 774 Local Government Areas
- ▶ Has numerous disease burdens
- ▶ Life expectancy for males and females are 53.7% and 55.4% respectively

Introduction

- ▶ 68.5% of the population have access to clean
- ▶ Literacy rate is estimated at 59.6% but varies from one region of the country to another.
- ▶ The country has over 250 ethnic groups and more than 500 languages
- ▶ Over 50% of the population are youths

Levels of care

There are three main levels of Health care in addition to the Private sector.

- I. **Primary Healthcare Centres:** The first level of contact of individuals, families and communities with the national health system. Health education, preventive, prenatal, emergency and basic health care services for remote rural areas. (Alma Ata Declaration of 1978).
- II. **Secondary Health Facilities:** Serves as referral centres for cases requiring more advanced care
- III. **Tertiary Health Institutions:** More complex cases are referred for specialized care.
- IV. **The private sector and FBO**

Levels of care

Administration

Federal Government

State Government

Local Government

Private Sector and
FBO

Service delivery

Tertiary Health
Institutions

Secondary Health
Facilities

Primary Health Care
Centres

Private Sector and
FBO

Responsible MDAs

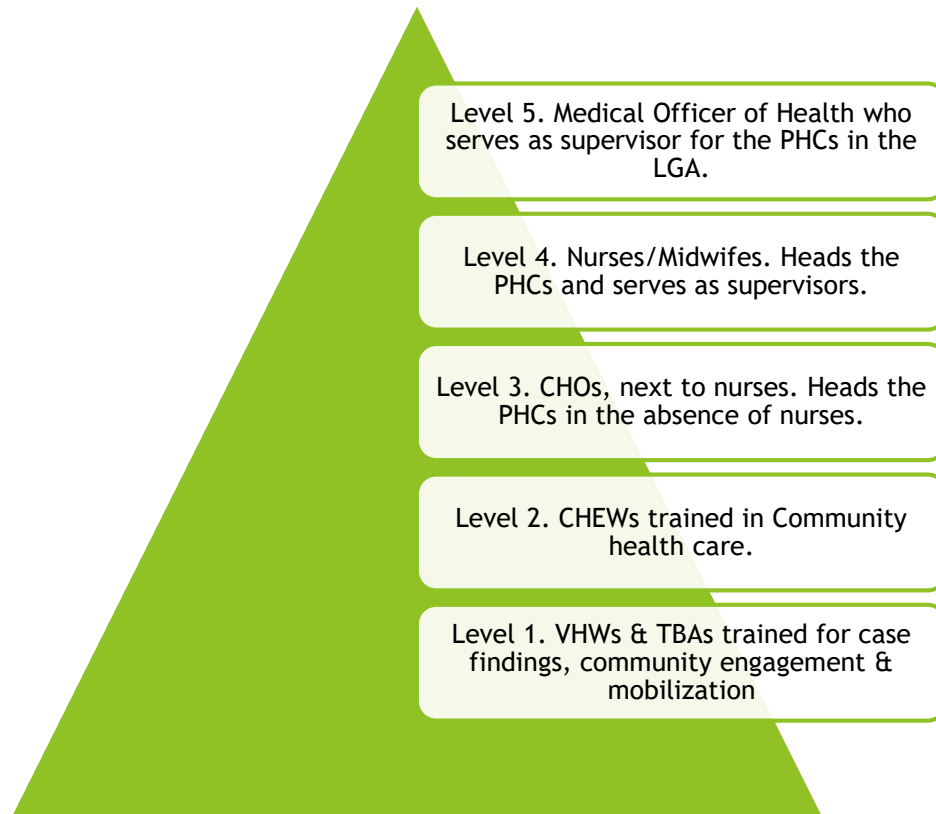
Federal Ministry of
Health FMOH

States Ministries of
Health and FCT

Local Government
Councils

Private services
providers and FBO

Levels of care at rural areas



Disease burden

- ▶ Malaria
 - ▶ Diarrhoea and vomiting
 - ▶ **Maternal and child health**
 - ▶ HIV
 - ▶ Respiratory infections
 - ▶ TB
 - ▶ Protein energy malnutrition
 - ▶ Cancer
 - ▶ Stroke
- ▶ Nigeria has the highest rate of Sickle Cell (Disease) in the world which kills many children in a year. Yet there is little or NO attention to SC.
 - ▶ Attention is currently on the six child killer diseases, namely polio, measles, diphtheria, whooping cough, tuberculosis and yellow fever.

Healthcare financing

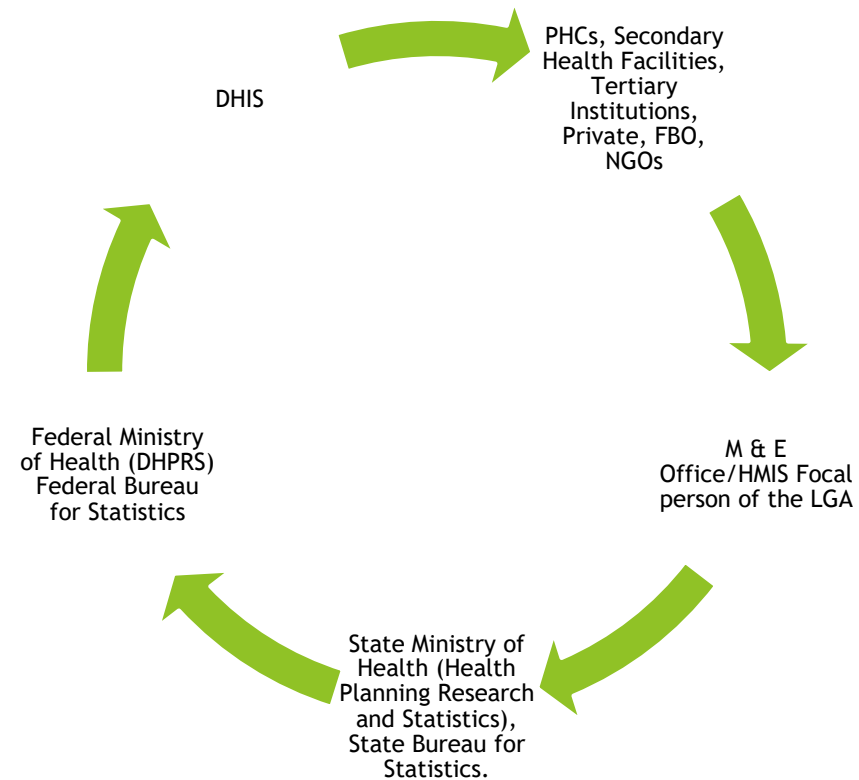
1. Nigeria is ranked 177 out of 191 countries when it comes to Healthcare needs.
2. The health system consist of Orthodox, Alternative and Traditional methods.
3. All operate alongside each other.
4. In all cases, it is mainly out of pocket expenditure

Healthcare financing

The Nigerian Health care is basically financed by a combination of the following;

- ▶ **Out of pocket expenditure**
- ▶ Donors
- ▶ Tax and other sources of revenue
- ▶ National Health Insurance Scheme (NHIS) which currently covers the formal sector, mainly Federal Civil Servants has a coverage of 88%

National Health Management Information System (NHMIS)



New-born screening

NEWBORN SCREENING

REPUBLIC ACT 9288



A public health program aimed at the early identification of infants who are affected by certain genetic/metabolic/infectious conditions.

PHOTO OREGONMOD.COM

NBS

- ▶ In most developed countries, NBS is routine and has resulted in reducing SCD mortality rate from 16% to 1%.
- ▶ In developing Countries, NBS is yet to be established
- ▶ Blacks are the ones mostly affected by common genetic disorders

NBS in Nigeria

- ▶ Has the highest prevalence rate of SCD in the World
- ▶ There are many case studies carried out but none aim at long term interventions and treatment
- ▶ Mortality rate associated with SCD in Nigeria has remained high despite the use of some interventions to manage crisis
- ▶ There is no data base to use in comparing treatment and treatment outcomes



NBS....where in Nigeria?

- ▶ Zankli Medical Centre?
- ▶ Kafanchan?
- ▶ Katsina?
- ▶ ????

Kafanchan Story

(Sir Patrick Ibrahim Yakowa Memorial Hospital)

- ▶ The facility is a 250 bed capacity Hospital
- ▶ A staff on her own started the **SCD Clinic** in 2008 with 8 regular patients
- ▶ By 2009, the number had increase to 28
- ▶ The Clinic was formerly inaugurated on the19/06/2010
- ▶ Currently Has a total of 2009 Clients with SCD. The oldest is 55 years old.

NBS

- ▶ Kafanchan was logging samples to Zanklin for analysis
- ▶ The IEF Machine was donated December, 2011 (APHL, PelkinElmer & others) and the analysis of the first batch of samples was on 2nd may, 2012.
- ▶ A total of 252 new-born were screened, then.....**the reagents were exhausted.**

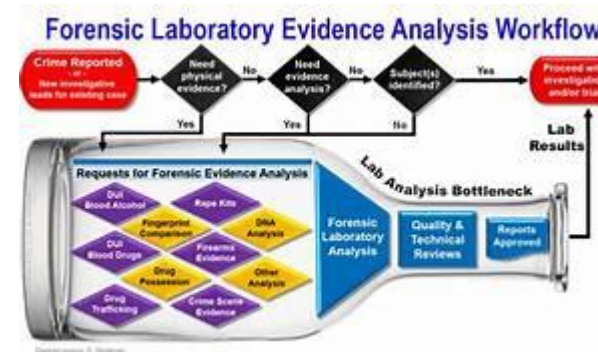
Do we need NBS?

YES

- ▶ NBS is needed in Nigeria
- ▶ There is need for direct Government involvement
- ▶ SCD is commonest genetic disorder in the Country and may seek to include other genetic and metabolic disorder with time.
- ▶ Over 70% of the disorders are treatable with possible cure

Bottle necks or Challenges

- ▶ Knowledge gap
- ▶ Non availability of reagents
- ▶ Expired gel
- ▶ Lack of alternative source of power
- ▶ Staff attrition
- ▶ Political will
- ▶ Competing interests



Conclusion



Thank you!