

# 2018 Annual Report





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# PROFILE



## MISSION

Our mission is to ensure that Nigerians have the tools and knowledge to make informed decisions about their health. We seek to advocate for improved access to health services at the federal and state level, promoting transparency and health reform where needed. Nigeria Health Watch aims to achieve this mission through informed commentary, effective advocacy, education, health information dissemination and policy recommendation.



## VISION

Nigeria Health Watch is committed to working with stakeholders, through advocacy to realise its vision of a Nigeria where all people, irrespective of income have access to improved and affordable quality health care.



## VALUES

Our values are excellence, partnership, commitment and open-mindedness, as we work collectively to advocate for better access to health care for all Nigerians.

## CORE BELIEFS



Excellence



Partnership



Commitment



Open-minded

# BOARD OF TRUSTEES

**Dr. Olusola Aruna** is a Fellow of the United Kingdom Faculty of Public Health (FPH). Dr Aruna qualified as a doctor in 1984 from the University of Ife, Nigeria. She gained her Masters in Public Health (MPH) with distinction from the University of Leeds in 1996 as a British Chevening Scholar, and holds a Diploma in Child Health (DCH) from the Royal College of Physicians and Surgeons of Glasgow. Dr Aruna was appointed Consultant in Public Health Medicine in the UK National Health Service (NHS) in 2007, and has worked on the identification, assessment, analysis and use of data and other information for decision-making, including the control of communicable diseases. Her work has also involved providing expert evidence-based advice to politicians, donor agencies and Board Executives at different levels. Dr. Aruna supported the design, implementation and evaluation of surveillance systems in Nigeria as a Senior Technical Advisor on Surveillance to the Nigeria Centre for Disease Control, under the USAID funded MEASURE Evaluation Project. She is currently the country lead for Public Health England's (PHE) International Health Regulations (IHR) Strengthening Programme in Nigeria.



**Dr. Ike Anya** is a Partner at EpiAFRIC and manages all engagements in Western Europe. He was until recently a Consultant in Public Health Medicine, and Deputy Director of Public Health with the UK National Health

Service in London and an honorary lecturer in Public Health at Imperial College. A Fellow of the Faculty of Public Health, he has taught at the London School of Hygiene and Tropical Medicine (LSHTM), Imperial College, University College London, the University of the West of England and Bristol University. A lead partner for the General Medical Council, he is a member of the Black & Ethnic Minority Health and Epidemiology & Public Health Section Council's at the Royal Society of Medicine and member of the Advisory Committee for Medecins Du Monde's

Project: London.

He is a co-founder of the Abuja Literary Society, the Nigerian Public Health Foundation, and the Nigeria Health Watch. He is a TED Global Fellow and cofounder of TEDxEuston.



**Dr. Zainab Imam** obtained her medical degree from the University of Ibadan in Nigeria. This was followed by training at the University College Hospital in Ibadan. Dr Imam retrained as a General Adult Psychiatrist in the Ukiah endorsement in Rehabilitation and Subspecialty interests in Early Intervention in Psychosis and Perinatal Psychiatry. She has worked in Psychiatry for over 10 years and is currently a Consultant in Women's Mental Health at Sidra Medicine in Qatar. She is member of the Royal College of Psychiatrists and she holds one year Intermediate Certificate from the University of Plymouth in Psychodynamic Psychotherapy. Prior to moving to Qatar, Dr Imam was an Honorary University Fellow at Plymouth University Peninsula Schools of Medicine and Dentistry. She wa's also a Trustee and Director of Plymouth Centre for Faiths and Cultural Diversity. Dr Imam is a member of the Public Education Engagement Board of the Royal College of Psychiatrists, and is a Partner in Psychiatry-UK LLP, the only NHS and CQC approved provider of Tele-psychiatry services in the UK. She is a faculty member of a United Nation's Population Fund (UNFPA) supported joint MANSAG and IDP Diaspora Support Group, Trauma Counselling Training Program in Nigeria. Dr Imam is married to Ibrahim and they are blessed with four children.



**Dr. Chikwe Ihekweazu** is the Director General of the Nigeria Centre for Disease Control (NCDC), as well as Acting Director of the Regional Centre for Disease Control for West Africa. Dr Ihekweazu trained as an infectious disease epidemiologist and has over 20 years' experience working in senior public health and

leadership positions at the South African National Institute for Communicable Diseases (NICD), the UK's Health Protection Agency, and Germany's Robert Koch Institute (RKI). Dr Ihekweazu has led several short-term engagements for WHO, mainly in response to major infectious disease outbreaks around the world. He is a graduate of the College of Medicine, University of Nigeria and has a Masters in Public Health (MPH) from the Heinrich-Heine University, Dusseldorf, Germany. In 2003, he was awarded a Fellowship for the European Programme for Intervention Epidemiology Training (EPIET), completing his Public Health specialisation in the UK. He is widely published in medical peer review journals and is on the board of the NGOs: Public Health Foundation of Nigeria, Health Watch Foundation, Society for Family Health (SFH), Education as a Vaccine (EVA). He is on the Africa Policy Advisory Board of ONE and a TED Fellow, and co-founder of TEDxEuston. In between public service, he was a Managing Partner of EpiAFRIC – a health consultancy firm in Abuja.

# FOREWORD

**“THE SUPPORT THAT WE CONTINUE TO RECEIVE FROM ALL OUR PARTNERS, OUR READERS AND OUR MANY FRIENDS WHO STOP US AT EVENTS OR WRITE TO US TO TELL US HOW MUCH THEY APPRECIATE THE WORK THAT WE DO, HELPS TO KEEP US GOING WHEN WE FLAG.”**

2018 was again another incredibly busy year for all of us at Nigeria Health Watch. As we move into our fifth year, we continue to build on the relationships and networks that we have acquired to deliver work that fulfils our core mission of improving health in Nigeria by providing information, promoting accountability, sharing good practice and facilitating conversations that drive change.

Our reach and our reputation continue to grow, as evidenced by our increasing numbers of subscribers and followers on our social media channels; and by the organizations that have approached us to work with them as partners on various projects. We are becoming firmly established as a trusted source of information, and more importantly, people tell us that they are using the information we provide in their work, to change things for the better.

This became evident during the baseline survey that we conducted in 2018, which provided us with very useful valuable insights of how we and the work that we do are perceived and also challenged us on how we can strengthen what we do.

The results of the baseline survey and other conversations fed into the development of our first Strategic Development Plan. This sets out our direction of travel over the next five years towards building

a sustainable, effective and efficient organization, with a team that works well together to deliver a positive contribution to improving health in Nigeria.

The breadth of the work covered in this last year is testimony to how the team has grown and developed, and I would like to thank them for cheerfully delivering consistently, to the Nigeria Health Watch standards, in often challenging circumstances.

The support that we continue to receive from all our partners, our readers and our many friends who stop us at events or write to us to tell us how much they appreciate the work that we do, helps to keep us going when we flag. We are particularly grateful to the Bill & Melinda Gates Foundation, Christian Aid UK Nigeria for their continued support and commitment to our cause. It is my hope that this report helps to strengthen that support.



In 2019, we will continue to strive to justify your faith in us, as we work together to ensure that the health of every Nigerian is a priority, and thus improving the world's health indices.

**DR IKE ANYA**

# OVERVIEW

Greetings! 2018 turned out to be quite the year at Nigeria Health Watch, as this Annual Report will reveal. It was an incredibly important year for our growth and development as an organization. Besides growing the number of our events, broadening our online media reach, deepening our advocacy work, and strengthening our storytelling capacity, 2018 also saw us completing our first Strategic Development Plan. This plan will help guide the incredible vision that birthed Nigeria Health Watch for the next 5 years. With the huge support of our partners, we are working towards becoming a sustainable, well-led, responsive and innovative organization. These are exciting times for us!

We continue to build Nigerians' awareness of their health sector, and their recognition that the power to reform the sector lies in their hands, in their ability to hold their leaders accountable for good, transparent governance. We do this because it matters that Nigerians are able to access quality, affordable healthcare, and this can only happen when they have access to accurate information with which they can demand their rights as Nigerians.

Our policy dialogues zero in on particular health issues that are pertinent to everyday Nigerians. In 2018 we held dialogues on nutrition, looking at how partners in the space can consider home-grown alternatives to nourish Nigerian children who are battling with malnutrition. We also fostered a discussion around health insurance, learning from states who have begun to put in place their State Health Insurance Schemes (SHIS) and how this could be an incredibly important step for the country as it progresses towards Universal Health Coverage. UHC and the health financing schemes that are necessary to drive it are key issues for the Nigeria Health Watch CHAIN project, supported by Christian Aid UK Nigeria.

Our Health Watch Forum brought to the fore the need for men to be change agents in the family planning arena if the country is to meet up with the FP2020 goals. As a part of our Global Policy and Advocacy Project supported by the Bill & Melinda Gates Foundation (BMGF), the Forum brought together incredibly diverse perspectives, from family planning advocates to faith associations, to unpack ways in which men can and should be engaged in the country's family planning narrative.

Our flagship event, the Future of Health Conference, looked at the trend of Diaspora

returning to Nigeria to invest their knowledge and expertise, and what that could potentially do for the country's health sector. The day after, in partnership with the World Bank, we looked closely at the opportunities available for Diaspora to invest in Nigeria's health sector, the challenges that exist, and how both government and the private sector can work together to mitigate those challenges.

The importance of Universal Health Coverage and Nigeria's commitment to driving the process got a boost in 2018 with the Basic Health Care Provision Fund (BHCPF) being finally budgeted for in 2018. In partnership with the Federal Ministry of Health, Results for Development (R4D), and the USAID-funded Health Finance & Governance (HFG) Project, Nigeria Health Watch carried out a Strategic Communication for Universal Health Coverage (SCUHC) Survey in the three states where the BHCPF was being piloted, as well as in the Federal Capital Territory. This survey will form the basis for how the government formulates its communication strategy to Nigerians in the area of Universal Health Coverage.

Finally 2018 saw us begin another important conversation, this one around the need to prepare for, and prevent, epidemics. The #PreventEpidemicsNaija campaign has allowed us to highlight the incredible gap that exists in the country in the area of epidemic preparedness. The campaign is raising awareness on the need

for sustained funding for epidemic preparedness as well as the importance of the public understanding their own responsibilities when it comes to preventing epidemics from happening in the first place.

We are indebted to our incredible partners and our seasoned Board of Trustees for their continued support. To the amazing Nigeria Health Watch team that continues to make this dream work, I say a heart felt thank you, for another year that we all can be proud to share with the Nigerian health sector.

**'WE CONTINUE TO BUILD  
NIGERIANS' AWARENESS OF  
THEIR HEALTH SECTOR, AND  
THEIR RECOGNITION THAT  
THE POWER TO REFORM  
THE SECTOR LIES IN THEIR  
HANDS...'**



A handwritten signature in black ink that reads "Adaobi Ezeokoli". The signature is fluid and cursive, written in a professional style.

**ADAOBI N. EZEOKOLI**  
*Managing Director*

# PROJECTS

## Global Policy Advocacy Project

Increasing awareness, knowledge and engagement among Nigerians on health issues



## The CHAIN Project

Closing the Gap to Sustainable Health Access in Nigeria



## Resolve To Save Lives Project

Preventing epidemics through public awareness and advocacy for sustained funding to improve epidemic preparedness in Nigeria



# Global Policy Advocacy Project

## Awareness, Knowledge and Engagement on Health Issues

The Global Policy Advocacy Project funded by the Bill & Melinda Gates Foundation focuses its advocacy efforts on raising awareness, knowledge, and engagement among Nigerians on health issues in Nigeria with emphasis on primary health care, maternal, newborn and child health (MNCH), polio, routine immunization, nutrition and reproductive health and family planning. This project is both at federal and state levels with emphasis on Kano, Kaduna, Lagos, Borno and the FCT.

### Objectives

The objective of the project is to increase engagement around health issues in Nigeria, primarily on the above focus areas. In addition, the project aims to increase the use of evidence and policy analysis by decision makers in Nigeria public health sector when it comes to policy making and implementation.

### Goals for the Next Year

- Launch a new website
- Collaborate with other CSOs to increase advocacy efforts
- Push to leverage more strategic partnerships in order to grow audience reach
- Broaden our reach to target a younger audience
- Write an in-depth analysis on the primary healthcare system in Nigeria and produce a detailed report for a campaign to improve PHC governance in Nigeria

### Accomplishments



Produced more audio-visuals, blogs, infographics etc than ever before.



Increased editorial content by introducing Torchlight series (resulting in two blog pieces per week).

Designed at least one infographic for each piece.



Introduced *#NHWEEngage* on radio and social media



Increased engagement, knowledge, awareness of key focus areas on all platforms.



Recognised for online media excellence by Nigerian Healthcare Excellence Awards (NHEA).



Provided at least one relevant training opportunity to each staff member (linked to job focus area).



Generated revenue by providing communications support to several organisations (MedicAid, dPRC, etc.).



Introduced *WhatsApp*



Organised 6 health events

# The CHAIN Project

## Closing the Gap to Sustainable Health Access in Nigeria

The CHAIN project was specifically designed to focus on evidence generation for improved healthcare financing via assessments, informal opinion polls (online and in-person interviews) and advocacy to push for increased awareness and improved health access for the people of Benue State and Nigerians at large.



### Goals for the Next Year

- Drive community involvement in the state health insurance process using media.
- Provide technical support for Benue state officials where necessary to strengthen their capacity in actualizing the new state health insurance scheme.
- Provide learnings for Benue State Health officials from states optimally implementing the state health insurance bill.
- Connect key players working to build the Benue State Health Insurance Scheme (BSHIS) with NHW contacts who will provide necessary support.
- Collate summary of project scope and successes.

### Accomplishments



Community engagement and civil society organisations (CSO) collaboration in the state.



Training of 117 community members to understand and demand for Health Insurance in the state.



Participation in the public hearing for the Benue State Health Insurance bill.



Social media engagement.



'Willingness to Pay' survey



Advocacy videos

# Resolve To Save Lives Project

Preventing Epidemics through Public Awareness and Advocacy for Sustained Funding to Improve Epidemic Preparedness

The Resolve To Save Lives project utilises investigative solutions - journalism stories that focus on human angle stories to communicate infectious disease prevention, and consequences, if preventative action is not taken by communities in Nigeria.

Using the hashtag #PreventEpidemicsNaija, the project leverages social media and other above-the-line media (radio, print and TV) to disseminate information.

## Goals for the Next Year

The overall goal of the project is to advocate for increased funding for epidemic preparedness in the 2020 budget and beyond in order to ensure financial support for disease surveillance and preparedness

## Objectives

The project is focused on advocating for increased budgetary allocations as well as raise public and policymaker awareness and support for epidemic prevention.

The aim is to use sustained media advocacy to help create an environment that is conducive to drive allocation of federal funding toward epidemic preparedness.

Concisely, the objectives are:

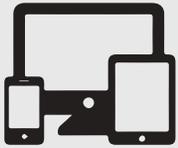
1. To build public awareness and support for epidemic prevention
2. To build understanding and support among policymakers



▲ **IN NUMBERS:** #PreventEpidemicsNaija  
SOCIAL MEDIA OVERVIEW: OCTOBER 2018 - JANUARY 2019



# ONLINE PRESENCE



## TOP 3 REFERRERS TO WEBSITE

1.



SEARCH  
ENGINES

2.



TWITTER

3.



FACEBOOK



in numbers  
*nigeriahealthwatch.com*



199

posts on website



44

Thought Leadership  
blogs



31

Torchlight Series

## MOST VIEWED BLOG PUBLISHED IN 2018

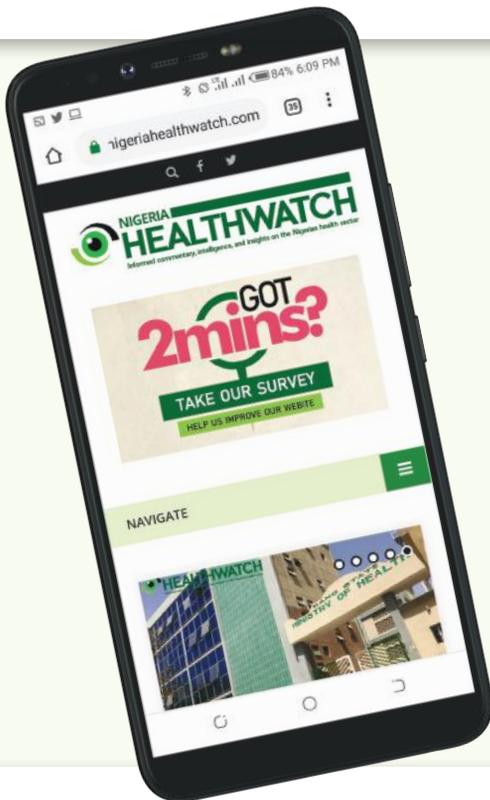
*'Gasping for Air: Doctor's  
Death Exposes Inherent  
Risks of Nigerian Public  
Hospitals'*



# Website Visitors



nigeriahealthwatch.com



52.6%

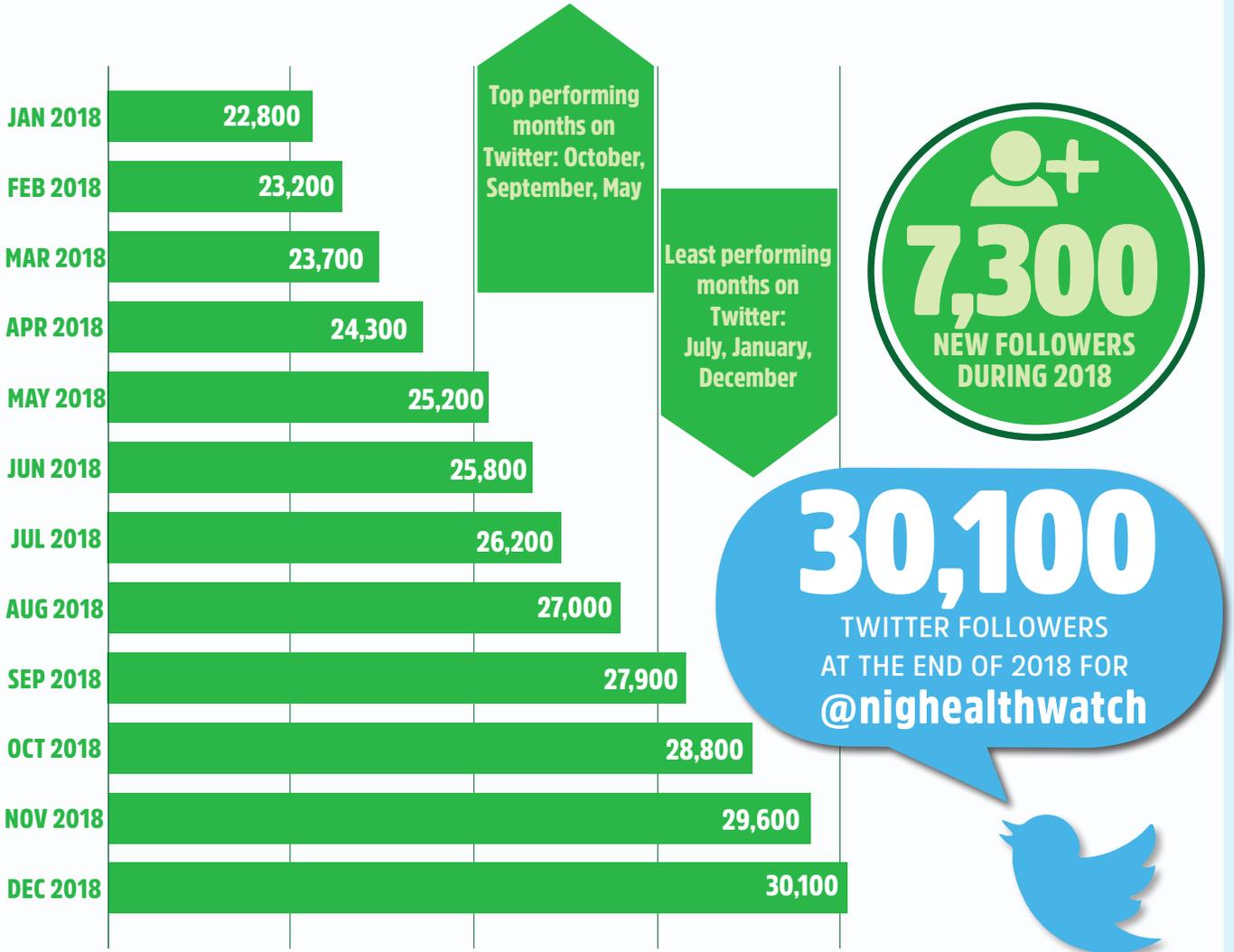
OF USERS WERE MALE



47.4%

OF USERS WERE FEMALE

# Twitter Followers



**18,456**  
@ MENTIONS  
IN 2018

**38,798**  
RETWEETS  
IN 2018

**48,189**  
LIKES  
IN 2018

## Facebook Followers in 2018



**7,309**  
NEW LIKES ON FACEBOOK  
AT THE END OF 2018

**48,210**  
FACEBOOK LIKES AT THE END OF 2018 FOR  
[www.facebook.com/NigeriaHealthWatch](http://www.facebook.com/NigeriaHealthWatch)



**7,402**  
NEW FOLLOWERS  
GAINED IN 2018

**48,313**



FACEBOOK FOLLOWERS AT THE END OF 2018 FOR  
[www.facebook.com/NigeriaHealthWatch](http://www.facebook.com/NigeriaHealthWatch)



### TOP 3 FACEBOOK VIDEOS PUBLISHED IN 2018

1.



*Exclusive Interview:  
Zainab Ahmed On  
Investment For Health*

**18,000** VIEWS

**203** SHARES

**13** COMMENTS

2.



*Money Or Culture:  
Why Do Nigerians  
Still Use Traditional  
Medicines?*

**13,000** VIEWS

**21** COMMENTS

3.

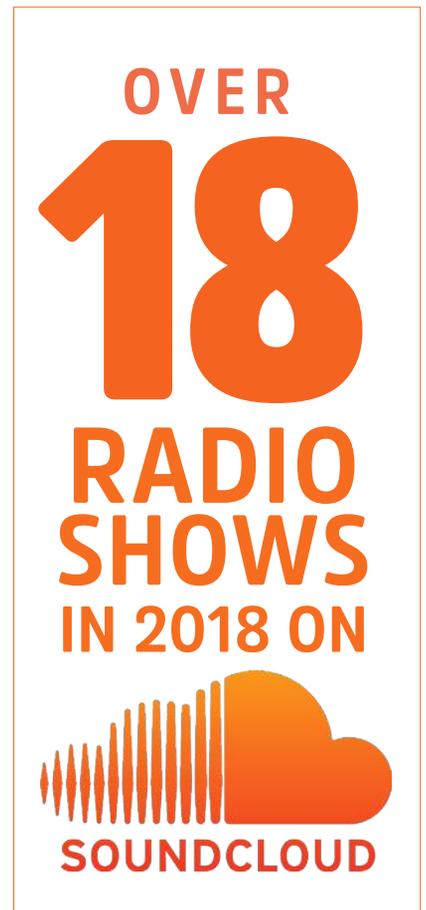


*#PreventEpidemicsNaija*

**12,000** VIEWS

**21** COMMENTS

## Followers on other Platforms



## Tweet Chats in 2018

	#NaijaMen4FP	April 2018
	#FeedNaijaPikin	October 2018
	#SupportImmunisation	June 2018
	#MCFSummit2018	December 2018
	#UHCDay2018	December 2018

Joined the #ImagineNigeria chat hosted by Gates in March 2018

## NHW Polls in 2018

	Immunisation	April 2018
	Drug Abuse	May 2018 (Highest Engagement)
	Nutrition	September 2018
	Polio	November 2018
	Family Planning	December 2018

**HASHTAG WITH THE MOST CONSISTENT INTERACTION IN 2018**

**#Health4AllNaija**

**NEW CAMPAIGNS IN 2018**

**#NaijaMen4FP**

**#Vote4HealthNaija**

**#NHWEngage**

**PLATFORM WITH THE LARGEST FOLLOWING IN 2018**

 **Twitter**

**PLATFORMS WITH THE MOST CONSISTENT FEEDBACK IN 2018**

 **Twitter**  
 **Facebook**

## TV stations featured on



» **Media Mentions and References by Numbers**

**2** Financial Times

**7** Solutions Journalism Network

**3** Others

All Africa

## Editorial Publications



**31**  
TORCHLIGHT  
SERIES



**50**  
TOP 10  
HEALTH NEWS



**44**  
THOUGHT  
LEADERSHIP



**42**  
JOBS



**27**  
PRESS  
RELEASES

## Infographics Published



**36**  
THOUGHT  
LEADERSHIP



**29**  
TORCHLIGHT  
BLOG

 YouTube

**TOP 3**

**YOUTUBE VIDEOS  
PUBLISHED IN 2018**

**1.**



*From Onitsha to  
Silicon Valley:  
The Story of Five  
Teen Innovators*

**1,375** VIEWS  
**6** COMMENTS

**2.**



*Exclusive Interview:  
3 Questions with  
Director General,  
WHO,  
Dr. Tedros Adhanom  
Ghebreyesus!*

**553** VIEWS

**3.**



*Celebrating  
Excellence:  
Dr. Olajide Idris*

**480** VIEWS



# EVENTS



HEALTH POLICY DIALOGUE  
Our Nutrition Crisis:  
Considering Local Alternatives

35  
ATTENDEES

27

HEALTH WATCH FORUM  
The Elephant in the Room:  
Men as Change Agents in the  
Family Planning Discourse

150  
ATTENDEES

18



UHC STAKEHOLDERS MEETING  
Strategic Communication for  
Universal Health Coverage

29  
ATTENDEES

19

POST-CONFERENCE WORKSHOP  
Financing Healthcare Investments  
in Nigeria – Role of the Diaspora

70  
ATTENDEES

19



JANUARY 2018

FEBRUARY 2018

MARCH 2018

APRIL 2018

MAY 2018

JUNE 2018

JULY 2018

AUGUST 2018

SEPTEMBER 2018

OCTOBER 2018

NOVEMBER 2018

DECEMBER 2018



15

35  
ATTENDEES

HEALTH POLICY DIALOGUE  
Universal Health Coverage



5

58  
ATTENDEES

HEALTH POLICY DIALOGUE  
Breakfast with Dr Jide Idris



18

422  
ATTENDEES

FUTURE OF HEALTH CONFERENCE  
The Diaspora as Nigeria's  
Brain Gain

6

19  
ATTENDEES

POWER MAPPING  
Preparing for Infectious  
Disease Outbreaks in Nigeria

February 27, 2018 | #FeedNaijaPikin

## Health Policy Dialogue

# Our Nutrition Crisis: Considering Local Alternatives

The task of reducing prevalence rates of malnutrition was what the Nigeria Health Watch policy dialogue on nutrition, 'Our Nutrition Crisis: Considering Local Alternatives' set out to achieve. Delegates put forward *agwa*, *eforiro*, *acha*, *ikire*, *yalo*, *anyara*, *bitter leaf* and *millet* etc. as highly nutritious local Nigerian foods that would help tackle malnutrition.

Faraja Chiwile (UNICEF), Dr. Ngozi Azodoh (Federal Ministry of Health), Dr. Samson Egbunu (Pro-Health International), Rev. Matthew Fanto (Peace Building and Trauma Healing Centre) and Beatrice Eluaka (CS-SUNN) were all in attendance and spoke at the dialogue.

The key issue of nutrition education and advocacy was recurrent among delegates. Adia Oro-Ghene (Catholic Relief Services), Faheed Zeeshan (Action Against Hunger) and Aisha Sani (nutrition advocate) added voices to the need to access nutrition advice that will enable dietary diversification and better access to actual healthier food items.

Nigerians were advised to be practical in identifying local foods that could serve as alternatives. The need to empower people to



*Advocates, partners and members of the media discuss the need to find local diet alternatives when it comes to Malnutrition in Nigeria.*

actually produce the food that will better their nutrition status was highlighted. Demonstration farms were put forward as enablers in this regard. A call was made to the media to keep the nutrition issue in the front burner in the midst of many other competing concerns. The consensus was that nutrition is 'a movement that goes beyond mere talk and advocacy.'

### 'Every Nigerian should engage in backyard farming'

REV. MATTHEW FANTO, Centre Manager, Peace Building and Trauma Healing Center, making a case for demonstration farms to curb malnutrition in communities

**"We need to provide food demonstrations to mothers and caregivers, showing them how to use food items like groundnuts, millet and soya beans to prepare nutritious meals."**

DR. NGOZI AZODOH, Head, Health Nutrition Emergency Response, Federal Ministry of Health, lending her voice to practical solutions to help tackle malnutrition

### 'Solving malnutrition in Nigeria is a movement'

DR FRANCIS AMINU, Dangote Foundation's Director of Health & Nutrition in his rallying call to Nigerians to play their role and move beyond rhetoric

March 15, 2018 | #UniversalHealthCoverage

## Health Policy Dialogue Universal Health Coverage

Universal Health Coverage, a critical tool for the development of any nation, was the focus of the 'Universal Health Coverage' health policy dialogue on March 15, 2018. Participants discussed the National Health Act (NHA), the Basic Health Care Provision Fund (BHCPF) and Universal Health Coverage (UHC) in Nigeria.

The round-table style discussion allowed policy makers from the federal and state governments, donor agencies, and civil society to provide clarity about the NHA position on the BHCPF, and how to hold government, religious and traditional rulers accountable towards achieving UHC.

In attendance at the policy dialogue were Dr Tanimola Akande, Chairman, ECWA Health Insurance Committee; Mr. Emmanuel Eze, Executive Secretary of Anambra State Health Insurance Agency; and Hon. Joseph Onah, Chairman, Benue State House Committee on Health. They provided perspectives on the BHCPF from legislative and executive arms of government as well as religious bodies. The dialogue amplified discussions and made demands for Universal Health Coverage in Nigeria.



*Robust conversations took place around what Nigeria needs to do to achieve Universal Health Coverage and how government on all levels should be held accountable at the UHC Policy Dialogue.*

**'There is no point establishing a health insurance scheme and making it voluntary. To ensure effectiveness, it must be made mandatory.'**

DR. OLUWOLE ODUTOLU,  
Senior Health Specialist  
at the World Bank

**'We need to work together to achieve Universal Health Coverage in Nigeria. We need to share challenges and best practices.'**

DR. ANNE ADAH-OGOHO  
of CAID Nigeria

**'Universal Health Coverage is not a sectoral issue. It cuts across other sectors. It is a nation-building issue. It is an economic issue.'**

VIVIANNE IHEKWEAZU,  
of Nigeria Health Watch

**'Universal Health Coverage is not about providing free healthcare services. It could be free for the vulnerable, but someone is paying for it.'**

DR TANIMOLA AKANDE,  
Chairman, ECWA Health

April 18, 2018 | #NaijaMen4FP

## Health Watch Forum

# The Elephant in the Room: Men as Change Agents in the Family Planning Discourse

Addressing the role of men in helping Nigeria meet its Family Planning (FP) 2020 commitments was the focus of the first Health Watch Forum for 2018 themed 'The Elephant in the Room: Men as Change Agents in the Family Planning Discourse' on April 18, 2018.

The two-session townhall-styled forum sought to inspire men to support their partners in seeking FP Services and encourage them to take responsibility for FP without depending on women. The speakers, panelists and delegates looked at the issue of family planning from the role of education to increase uptake of family planning services, the economics of family planning services and the religious dimension to family planning

Government, civil society, policymakers, advocates, faith leaders, and development partners agreed that despite technological advances, there was still a need to focus on men as strategic targets for family planning services. It was suggested that FP2020 should be used to increase gender balance when structuring family planning services, with men having a significantly increased role.

The call-for-action was for family planning to be pushed as a resource planning tool and



The Panelists (R-L) at the first session 'How Do We Accelerate Action to Meet Nigeria's FP2020 Commitments?': Dr Laz Ude Eze, Executive Director, Pink Oak Trust; Dr Diene Keita, Country Representative, United Nations Population Fund (UNFPA); Dr. Ifeanyi Nsofor (moderator); Effiom Nyong Effiom, Country Director, Marie Stopes International Nigeria and Sa'adatu Hashim, Amirah, Federation of Muslim Women Association in Nigeria (FOMWAN), Kano.



The panelists (R-L) at the second session - 'How Do We Engage Men to Support their Partners in Seeking FP Services?': Rev. Isaac Gbadero, of First Baptist Church, Zaria; Florida Uzoaru of Slide Safe; Dr Adebimpe Adebiji, Director Family Health, Federal Ministry of Health; Dr. Ejike Oji, Chairman, Association for the Advancement of Family Planning, (AAFP) and Mrs Charity Ibeawuchi, Senior Technical Advisor, Nigerian Urban Reproductive Health Initiative (NURHI)

positioned as the best way to reduce maternal and child mortality, as well as reducing high-risk births. The need to avoid ambiguities on sex education and family planning by religious leaders was emphasised. It was highlighted that financial consequences of not planning families had more value in conveying the family planning message to men. Without mincing words, beliefs have to change, existing clear gaps in knowledge in young and older adolescents needed to be bridged, empowerment for women is key and family sizes had to be controlled if progress was to be made on set targets.



**HASHTRACKING**  
#NaijaMen4FP  
APRIL 1 - 30, 2018

**4,769**  
POSTS

Number of tweets with the #NaijaMen4FP hashtag

**26,400,000**  
TIMELINE DELIVERIES

Total number of times that people saw posts containing the #NaijaMen4FP hashtag

**772**

**CONTRIBUTORS**  
Number of users who posted with the #NaijaMen4FP hashtag

**1,870,000**  
REACHED

Number of unique users who saw posts containing the #NaijaMen4FP hashtag

**2,360**  
NUMBER OF VIEWS FOR THE FACEBOOK VIDEO

**3,925**  
RETWEETS

**TWEET PARTICIPATION**

**507**  
ORIGINAL TWEETS

**337**  
@MESSAGE TWEETS

June 5, 2018

## Health Policy Dialogue

# Breakfast with Dr Jide Idris

In recognition of his exceptional record of service to the Lagos State health sector, Nigeria Health Watch organised a breakfast meeting in honour of Dr. Jide Idris. 'Breakfast with Dr. Jide Idris - Leading Health Sector Transformation in Lagos' was an opportunity for him to share insights and lessons learned over his years of service

Dr. Idris, the guest of honour, shared his passion, depth of knowledge, humour, achievements, successes, challenges and learning points in public service. Guests watched a mini-montage that curated his achievements and the viewpoints from some of his colleagues who had worked closely with him.

Dr Idris' 40-minute presentation prompted questions during the moderated discussion session that ranged from effective leadership to navigating politics of the state while trying to deliver results as well as sustainability.

Accolades came from many. NURHI's Dr. Mojisola Odeku revealed that she was one of Dr. Idris' champions. Niger State Commissioner for Health, Dr. Mustapha Jibril, was there specifically to "learn from a senior and experienced colleague." Dr. Paulin Basinga, Country Director of the Bill & Melinda Gates Foundation, said that he found it incredible how Dr. Idris was able to delegate to his team members in a way that allowed for efficiency and increased productivity.

Dr. Idris' example shows that building an effective health sector is a progressive venture that requires tenacity and dedication.



*Celebrating Lagos State Commissioner of Health, Dr. Jide Idris, who has successfully and effectively transformed the Lagos State health sector with his healthcare reforms and innovative partnerships with the private sector.*

### VERBATIM DR JIDE IDRIS

**"You can't do any meaningful work in the health sector without teamwork."**

**"Governance, vision and passion. If we do not have these three, then there's not much that can be done in the Nigerian health sector."**

**"Inter-sectoral collaborations have been key to handling the large and diverse population that resides in Lagos State."**

**"Our fixation on hospital care is not right. We seem to prepare our people to get sick and go to hospitals."**

**The right health-seeking behaviour must be encouraged through health promotion."**

July 19, 2018 | #Health4AllNaija

# UHC Stakeholders' Meeting Strategic Communication for Universal Health Coverage

In partnership with the Federal Ministry of Health (FMOH), USAID, Health Finance & Governance (HFG) and Results for Development (R4D), Nigeria Health Watch organised the Universal Health Coverage (UHC) Stakeholders' Meeting to address the need for explicit guidance on Strategic Communication for UHC in Nigeria.

The Meeting came on the back of a qualitative survey conducted by FMOH and partners in three states - Osun, Abia and Niger, as well as the Federal Capital Territory (FCT) - where the Basic Health Care Provision Fund (BHCPF) was piloted - to understand the views of various selected stakeholders about Universal Health Coverage.

The overall goal of the survey and the meeting was to develop a strategic communication document that will form the foundation for the government's efforts at communicating UHC across Nigeria.

Participants at the five-session meeting agreed that a unique messaging approach should be tailored towards every target audience. The participants from government and development partners, and the media acknowledged social media as a powerful tool in passing messaging across to some audiences. The Nigerian Governors Forum was identified as a good platform to push for UHC considering the role they played in the fight against polio and the need for stakeholders to seize the election period to demand from political parties their plans to help Nigeria achieve UHC.



How do we ensure every community understands what UHC is? Putting together Nigeria's communication strategy for Universal Health Coverage.

**'People must understand what Universal Health Coverage means so that they can demand for it. We need to know the economic importance of the UHC message.'**  
DR. SAMSON EZIKEAIYI  
UNFPA Nigeria

**'The media has been in the forefront of pushing health policies for better health in Nigeria. We developed a media network for Universal Health Coverage to push the agenda forward.'**  
MOJI MAKANJUOLA  
ISMPH

**'If we do not get our messaging right, we will spend the next 50 years without the needed results.'**  
DR. NNEKA ORJI,  
Federal Ministry of Health

## #Health4AllNaija HASHTRACKING July 19, 2018

**395**  
POSTS  
Number of tweets with the #Health4AllNaija hashtag

**1,788,383**  
TIMELINE DELIVERIES  
Total number of times that people saw posts containing the #Health4AllNaija hashtag

**84**  
CONTRIBUTORS  
Number of users who posted with the #Health4AllNaija hashtag

**327,810**  
USERS REACHED  
Number of unique users who saw posts containing the #Health4AllNaija hashtag

**310**  
VIEWS  
for the 2hrs 52mins  
Facebook video

**4**  
VIDEO INTERVIEWS  
shared on Facebook  
with 225 views

**BUZZ WORDS**  
(terms most frequently used with the hashtag)

Health | Strategic | Economic | Nigeria | Survey | UHC | Key | People

October 18, 2018 | #BrainGain4Naija

## Future of Health Conference

# The Diaspora as Nigeria's Brain Gain

The welfare of the Nigerian patient was the highlight of the 2018 Future of Health Conference, 'The Diaspora as Nigeria's Brain Gain'.

The objective of the Conference was to showcase the opportunities in Nigeria's health ecosystem to health professionals in Nigeria and the Diaspora and seek ways to leverage their specialist training to build networks that will strengthen the Nigerian health sector.

The 11-man speaker lineup had Dr. Olujimi Coker (Chief Medical Director, Lagoon Hospitals), Dr. Ukwuori-Gisela Kalu, Consultant Clinical Psychologist), Dr. Chumy Nwogu (CEO, Lakeshore Cancer Centre), Dr. Fatima Kyari (Consultant Ophthalmologist and Founder Centre for Community and Rural Eye Care) and Dr. Atinuke Uwajeh (Consultant Paediatrician, Pediatric Partners) for the first session with the sub-theme 'The Diaspora: Disrupting the Norm in Nigeria's Health Sector.'

The second session on 'Leveraging the Gain: Sustaining the Diasporan Health Sector Ecosystem,' had Olumide Okunola (Healthcare Program Manager, IFC, World Bank Group), Dr. Zainab Bagudu, (CEO, MedicAid Foundation and First Lady, Kebbi State), Temitayo Erogbogbo (Director of Advocacy, MSD for Mothers), Dr. Douglas Okor (Consultant Neurosurgeon,

Zitadel Medicals and Diagnostics), Dr. Olufemi Sunmonu (Co-Founder & Director, PurpleSource HealthCare) and Prof. Rotimi Jaiyesimi (Secretary, Medical Association of Nigerians Across Great Britain ) as speakers.

Speakers, Nigerian Diaspora healthcare professionals – some of whom had returned fully – shared insights and knowledge garnered from the experience of moving back home. They were emphatic that the move back home for Nigerian healthcare professionals in the Diaspora, was not for the fainthearted. Nonetheless, speaker after speaker stressed the underlying point: the Nigerian patient was worth it.

A working support system, particularly family support, was a key requirement for Diaspora returnees. In addition, 'head, heart and pocket' alignment, coupled with integrity, passion and patience were put forward as key must-haves of any intending returnee health professional.

A hostile business environment and the absence of a favourable ecosystem to support a start-up healthcare practice were identified as some of the challenges experienced by returnee healthcare professionals. Government inaction, access to quality health care, the high cost of healthcare were also outlined as barriers. But the great need to develop the Nigerian health system by improving standards in Nigeria's healthcare was viewed as a turn-on. If more incentives were needed, the opportunities to transfer skills and knowledge to resident health professionals, improve access to quality healthcare, introduce innovations and offer services that are not readily available in Nigeria were resounding.

### IN WORDS...

*"There is virtually no support for our elderly and that is a huge gap. Good reliable hospice care that we can take our aged parents to, is just not available."*

– Dr. Olujimi Coker

*"For me, coming back to Nigeria is about listening to our young people, motivating them and engaging with them on the innovations in the health sector."*

– Dr. Ukwuori-Gisela Kalu

*"It is impossible to explain the feeling that comes from sitting in front a patient and their family, caring deeply for them and providing a solution for them that they thought was impossible."*

– Dr. Chumy Nwogu

*"If we don't develop our own health system who will? The way we can do that is through passion, integrity and information. For me, that is my gain from the Diaspora."*

– Dr. Fatima Kyari

*"There are many challenges that make it difficult, but the Nigerian patient is worth it."*

– Dr. Atinuke Uwajeh

*"We need to figure out innovative ways to access funds just lying down for health care."*

– Dr. Olumide Okunola

*"Everybody is a nation builder...we all as human beings have an inherent need and desire to protect our own."*

– Dr. Zainab Bagudu

*"We must take that step in actually investing in the health system"*

– Mr. Temitayo Erogbogbo

*"Let's keep pushing for one reason only, that the Nigeria patient is worth it."*

– Dr. Douglas Okor

*"It is important to remember who you're doing it for."*

– Dr. Olufemi Sunmonu

*"Every Nigerian life is priceless. Nigerian patients deserve quality."*

– Prof. Rotimi Jaiyesimi

*The expertise of Nigerians in the Diaspora is very important*

– Dr. Badewa Williams

**422**  
ATTENDEES



**345**  
VIEWS

- as at October 25, 2018 -  
for the **3hrs 32mins 56secs**  
Facebook video



**390**  
VIEWS

- as at October 25, 2018 -  
for the **1 hour 39mins 40mins**  
Youtube video

**#BrainGain4Naija**  
**HASHTRACKING**

OCT. 1 – 25, 2018

**4,385**  
POSTS

Number of tweets with  
the #BrainGain4Naija hashtag

**26,896,733**  
TIMELINE DELIVERIES

Total number of times that  
people saw posts containing  
the  
#BrainGain4Naija hashtag

**836**  
CONTRIBUTORS

Number of users who posted  
with the  
#BrainGain4Naija hashtag

**2,680,660**  
REACHED

Number of unique users  
who saw posts containing the  
#BrainGain4Naija hashtag



*It's all about #BrainGain4Naija as Diaspora share their experiences and insights upon returning to Nigeria.*

October 19, 2018 | #BrainGain4Naija

## Post Future of Health Conference Workshop

# Financing Healthcare Investments in Nigeria – Role of the Diaspora

The ‘Financing Healthcare Investments in Nigeria – Role of the Diaspora’ workshop was organised in recognition that healthcare investments must have sponsors with business cases that are financially attractive to potential equity partners or lenders. It examined the role of Nigerian professionals in the Diaspora and how other interested parties could seek and develop bankable healthcare investments. The workshop provided an opportunity for potential investors to understand better, the issues that returning health workers, seeking to establish new facilities, face.

Four presentations – *Healthcare Incentives in the National Investment Policy* by Mr Adeshina Emmanuel, *Opportunities for Health Public-Private Partnerships in Existing Government-owned Facilities* by Engineer Chidi Izuwah, *Dimensioning the Market – Where are the Opportunities?* by Dr Folabi Ogunlesi, and *Health and social media – Use of Tech and Social Media Platforms in Healthcare* by Akua Gyekye – provided backdrops for the highly engaging 4-part workshop.

Participants were split into three groups to look at the opportunities for health PPPs

in existing government-owned facilities.

The groups made calls for private investors to set aside money for testing or create a testing ground) for healthcare ideas and solutions. Investors were urged to look at helping to modify and evaluate business cases.

It was also proposed that sourcing of healthcare commodities should be done in partnerships and there should be partnerships for education on the commercial aspects of healthcare business.

A case was made for mentorship to be provided for private healthcare providers by way of business planning and governance advice for medical practitioners seeking funding.

In the same vein, the government was urged to incentivise banks and development finance institutions to provide for the inclusion of transaction advisory costs into repayment plans.

Additionally, it was proposed that there should be established, a policy to incentivise pharmaceutical and medical equipment through tax reduction and reduced import duties. A call was also made for government to lift the ban on investment ownership of pharmaceutical establishments by non-pharmacists.

### TAKEAWAYS

At the end of the engaging five-hour session it was agreed that there is a need for government to take the lead in healthcare financing in order to create an enabling environment that the private sector can continue to support.

Health entrepreneurs were advised to make evidence-based business cases and seek more collaborations and assistance when necessary.

The key next steps for Diaspora professionals were outlined as policy, identifying opportunities, developing the business scale, funding/financing and building the business.

### QUOTED

**“Our aim is to ensure that everyone, both the rich and poor can confidently visit any PHC to access health care.”**

DR SENATOR ‘LANRE TEJUOSO,  
*Chairman Senate Committee on Health*

**“We still rarely invest in ideas without a cash flow. There needs to be evidence of growth. And there needs to be a team.”**

DR. OLA OREKURIN-BROWN,  
*Founder, Flying Doctors Nigeria,*

**“Doctors get carried away by the medical side of the business and lose sight of the business side of the business.”**

TOMIWA WILLIAMS,  
*Investment Officer, International Finance Corporation (IFC)*

**“Focus more of your competencies and focus on values.”**

MAINA SAHI,  
*Director Strategy, Education & Health, CDC Group*

**“You can get help for business plans from those who understand medicine and also understand what is being provided on a day-to-day basis.”**

Dr Kanyinsola Oyeyinka,  
*Healthcare Investment officer,  
Nigeria Sovereign Investment Authority*



**“THE RIGHT TIME TO INVEST IN NIGERIA IS NOW. IF YOU WANT TO WAIT, ONE DAY YOUR CHILDREN WILL ASK YOU, “WHAT WERE YOU DOING WHEN OTHERS WERE INVESTING IN NIGERIA?”**

**Mr Adeshina Emmanuel,**  
*Director of Investment Promotion  
- Nigeria Investment Promotion  
Commission*

**“EMOTIONS DO NOT GET FINANCED, WHAT GETS FINANCE IS A BANKABLE BUSINESS.”**

**Engineer Chidi Izuwah,**  
*Acting Director General/CEO,  
Infrastructure Concession  
Regulatory Commission*

**“IDEAS JUST DON’T WORK WITH FUNDING, YOU NEED TO PUT SOME STRUCTURE INTO THE IDEA.”**

**Dr Folabi Ogunlesi,**  
*CEO VESTA Healthcare & Honorary  
Consultant Physician Northwest  
London Hospitals*

**“CHANGING BEHAVIOUR WHEN IT COMES TO HEALTH IS SOMETHING THAT WE STILL NEED TO FOCUS ON WHEN WE ARE THINKING ABOUT OUR COUNTRY.”**

**Akua Gyekye,**  
*Public Policy Manager, Africa –  
Facebook*



*Financing healthcare investments took a centre stage as Diaspora dialogued with government and the private sector on the importance of partnerships and incentives for healthcare financing*

December 6, 2018 | #PreventEpidemicsNaija

## Power Mapping

# Preparing for Infectious Disease Outbreaks in Nigeria

The power mapping workshop was convened to deliberate with key stakeholders to identify people and organisations who could influence policies and efforts targeted towards increasing the level of epidemic preparedness in Nigeria. The conversation focused on four key areas:

- Funding for Epidemic preparedness at national, state and local government level.
- Adequate funding for the Nigeria Centre for Disease Control (NCDC) to prevent epidemics at the local levels.
- National Action Plan for Health Security (NAPHS)
- State level commitment to infectious disease prevention and response

Participants developed key messages for every identified target audience. Messengers who could carry these messages to the target audience were identified alongside key strategies to pass the messages. Some of the messages centred on:

- Budget allocation for epidemic preparedness - to strengthen the economy and protect Nigerians
- Health management at LGA level - to protect Nigeria and possibly prevent epidemics.
- Prevention - through advocacy and sensitization for awareness - as being more cost effective than outbreaks management

Federal and state legislatures, commissioners of health, political party leaders, private sector



stakeholders were the targets of the messages. For this, the media, CSOs, religious leaders, traditional leaders, celebrities, community leaders, professional bodies, etc. were identified as messengers. Health conferences, policy dialogues, advocacy meetings, were key highlight of the strategies put forward.

### Social Media Report

#### #PreventEpidemicsNaija HASHTRACKING

6th December, 2018

## 259

POSTS

Number of tweets with the #PreventEpidemicsNaija hashtag

## 1,501,686

TIMELINE DELIVERIES

Total number of times that people saw posts containing the #PreventEpidemicsNaija hashtag

## 54

CONTRIBUTORS

Number of users who posted with the #PreventEpidemicsNaija hashtag

## 211,871

USERS REACHED

Number of unique users who saw posts containing the #PreventEpidemicsNaija hashtag

## 200

Number of views - as at 7th January 2019 - for the 2hrs 18mins 05secs Facebook video

#### BUZZ WORDS

(terms most frequently used with the hashtag)



Disease | Wash | Health | Power | Public | National | Household

# ABBREVIATIONS AND ACRONYMS

<b>AFENET</b>	African Field Epidemiology Network
<b>Africa CDC</b>	Africa Centres for Disease Control and Prevention
<b>ASLM</b>	African Society for Laboratory Medicine
<b>BHCPF</b>	Basic Health Care Provision Fund
<b>BSHIS</b>	Benue State Health Insurance Scheme
<b>CHAIN</b>	Closing the Gap to Sustainable Health Access in Nigeria
<b>US CDC</b>	Centers for Disease Control and Prevention
<b>CSO</b>	Civil Society Organisations
<b>CS-SUNN</b>	Civil Society Scaling-Up Nutrition in Nigeria
<b>ECWA</b>	Evangelical Church Winning All
<b>FCT</b>	Federal Capital Territory
<b>FMoH</b>	Federal Ministry of Health
<b>FP</b>	Family Planning
<b>HFG</b>	Health Finance & Governance
<b>NAPHS</b>	National Action Plan for Health Security
<b>NHA</b>	National Health Act
<b>NCDC</b>	Nigeria Centre for Disease Control
<b>NHEA</b>	Nigerian Healthcare Excellence Awards
<b>NHW</b>	Nigeria Health Watch
<b>NURHI</b>	Nigerian Urban Reproductive Health Initiative
<b>PHC</b>	Primary Health Care
<b>R4D</b>	Results for Development
<b>WHO</b>	World Health Organisation
<b>UHC</b>	Universal Health Coverage
<b>UNICEF</b>	United Nations Children's Fund
<b>USAID</b>	United States Agency for International Development



 **NIGERIA HEALTHWATCH**

Informed commentary, intelligence, and insights on Nigerian health sector

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