# **Nigeria**

# Country Focus Areas

- Support the Basic Health Care **Provision Fund** which has triggered an initial US\$150 million allocation of government resources and the alignment of external resources.
- Improve efficiency by defining and delivering a universal, free, sharpened package of services through performancebased approaches, including a focus on forgotten priorities such as chronic
- performance-based financing, basic health services in the fragile and conflict-affected North East regions.

# **RMNCAH-N** Core Indicators

Maternal mortality ratio: 576 per 100,000 live births

Neonatal mortality ratio: 37 per 1,000 live births

Under-five mortality ratio: 120 per 1,000 live births

Adolescent birth rate: 120 per 1,000 women

Percent of births <24 months after the preceding birth: 32.7%

Stunting among children under 5 years of age: **44%** 

Moderate to severe wasting among children under 5 years of age: 11%

### Health Financing Core Indicators

Health expenditure per capita financed from domestic sources: US\$10.33

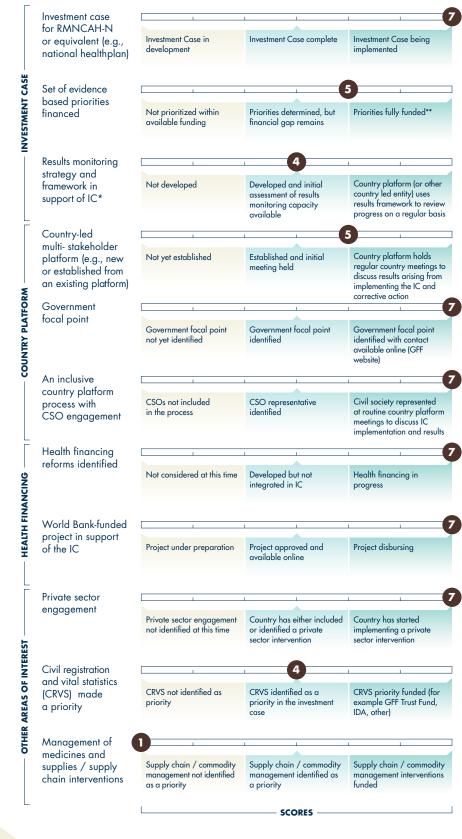
Ratio of government health expenditure to total government expenditures: 5.01%

Percent of current health expenditures on primary/outpatient health care:

Incidence of catastrophic and impoverishing health expenditures: 15.1% catastrophic 3.5% impoverishing

Nigeria has completed the initial phase of resource mapping for the IC. The World Bank is financing 3 health projects with GFF co-financing in Nigeria. These projects are currently in varying stages of implementation, two of them being at very early stages. As such, the resource mapping data is incomplete. Considerable attention has been given to mapping the financing from GAVI and the Global Fund. The main focus of the IC is the provision of the Basic Minimum Package of Health Services (BMPHS) for national scale-up as well as the delivery and strengthening of a national nutrition program. While there is currently a significant financing gap, once all World Bank project disbursements have commenced and all financiers to the investment case have been mapped, we expect the gap to reduce significantly.

# Monitoring the Country-Led Process



- \* Both included in the IC document or a separate document
- \*\* Meaning that funding was allocated, disbursed and released payment done
- \*\*\* ANC4 = four antenatal care visits

ART = antiretroviral therapy: ARV = antiretroviral: DTP3 = vaccination for Diphtheria. Tetanus, and Pertussis: ORS = oral rehydration solution: PMTCT = prevention of mother-to-child transmission; PNC = postnatal care.

malnutrition and adolescent health. ■ Reestablish, through

Resource Mapping

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