

DETERMINANTS OF CHILD AND MATERNAL HEALTH STATUS AND DEMAND FOR HEALTH CARE SERVICES IN NIGERIA

POLICY BRIEF

A.I Adeoti and O. A Awoniyi

Key findings

- ▶ Improving mother's educational status, reducing food prices and residing in the urban sector are important factors for improving demand for health input such as immunization.
- ▶ Demand for place of delivery with skilled staff increases when the women are employed and have high literacy level while long distance to the place of delivery decreases demand.
- ▶ Child being male and increase in the age of children increases their probability of being immunized.
- ▶ The use of health input, education and living in the urban sector improves maternal health
- ▶ Being employed also improves health status of mothers in both sectors

Context

In spite of improvement in the country's economic growth, Nigeria suffers from high levels of poverty and it is widespread particularly in rural areas. The Nigerian Human Development Index (HDI) of 0.511 ranks 158th among 182 countries in 2008 which places Nigeria in the low human development category (UNDP, 2009). This reveals low human capital development with severe deprivation in health, education and access to improved water source among others. The health indicators in Nigeria are therefore poor and worrisome. Although the percentage of government health expenditure has increased, it has not resulted in acceptable health indicators thus increasing the need to explore the causal factors and proffer solutions. Only 23 percent received all immunization and 38 percent were attended to by skilled workers at child birth.

A comparative analysis of health status of children and mothers in 2003 and 2008 has presented in figures one and two shows that the percentage of children who are wasted has increased from 11% to 15% while the percentage of mothers who are overweight has also increased from 21-23%

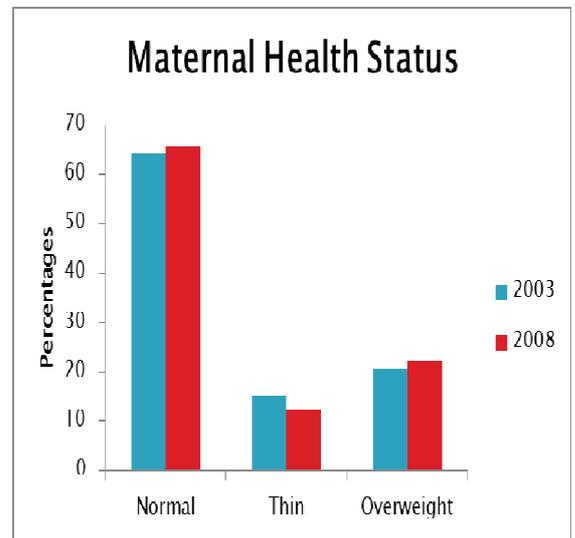
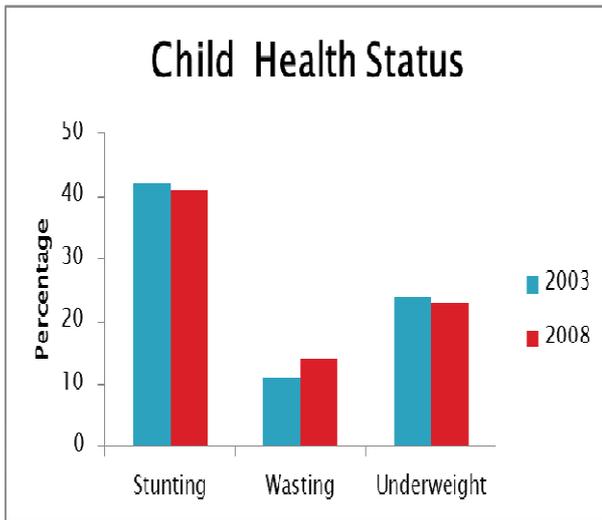


Figure One: Child Health Status

Figure two: Maternal Health Status

Source: DHS Report,2008

Critical policy questions which the authors attempted to provide answers to are: What are the main determining factors influencing the health status of children and mothers in Nigeria? What factors are responsible for the demand for health care services (HS) in Nigeria? In view of the high poverty rate in the country, does poverty affect health status? What public policies can enhance the health of children and mothers?

Methodology

The study used secondary data comprising mainly of the DHS 2008 data collected by Macro International. The data on food prices are from the National Bureau of Statistics, Abuja and rainfall data are from the National Meteorological Centre. The health production function for children and mothers in Nigeria were estimated controlling for the endogeneity of health inputs. The factors that influence the demand for child immunization and use of skilled medical personnel at birth were identified alongside with the health status of children and mothers respectively.

Key findings

From the result of the health demand function and the control function the following result was inferred

- ▶ Improved mother’s educational status, reduced food prices and residing in the urban sector are important for improving demand for health input such as immunization.
- ▶ Demand for place of delivery with skilled staff improves when the women are employed and have high literacy level while longer distance to the demand for place of delivery with skilled staff decreases as distance to the hospital increases.
- ▶ Child being male and increase in the age of children increases their probability of being immunized.
- ▶ The use of health input, education and living in the urban sector improves maternal health

- ▶ Being employed also improves health status of mothers in both sectors

Conclusion

The demands for health inputs are critical to improve the health status of children and mothers and therefore improving access to health inputs is critical. Availability of health infrastructure at close distances is also important. The educational status of women is the most important factor to improving access thus emphasizing the need for female education to be pursued rigorously. Besides the use of health inputs, education and economic empowerment of women will improve child and maternal health status.

Policy Implications

Unemployment especially among females needs to be addressed as its increase would continue to reduce the demand for health care facilities and increase child and maternity rate in Nigeria.

An increase in educational status would help the Government to achieve the MDG on health as households would be sensitized on the importance of immunization and choice of health care service delivery on their health status.

The distance to health care services especially among households in the rural areas inhibits their access to health care services. This might be one of the factors that make them fare worse than households in the urban sector

Recommendations

- ▶ Government should sensitize not only mothers but also head of schools and religious leaders. Efforts should be made to immunize children in schools and worship centres in addition to clinics and hospitals. This will not only increase the coverage area but ensure complete immunization. This is particularly important for the poor in rural areas.
- ▶ Mother's education irrespective of poverty status increases the demand for immunization and health centres with skilled personnel and also positively impacts on child and maternal health. The girl child education must continue to be vigorously pursued.
- ▶ Female economic empowerment is essential to improved child health. The demand for non-health inputs will depend largely on the income of the mother. Skill acquisition is a viable pathway to the labour market. Also, the effect of food prices on the demand for improved health care can also be ameliorated with better work opportunities.
- ▶ Health care facilities should be available at distances not far from residents to encourage its use. There is need for the inclusion of incentives to skilled health personnel to motivate them to work in rural areas. Such incentives include provision of modern health facilities and rural allowance in their pay package.
- ▶ Social protection programmes should be extended to poor families and their children. Example a meal per day in public schools, conditional cash transfer etc
- ▶ The enlightenment on gender issues needs to be intensified so that the health status of female children is not compromised.
- ▶ Greater attention should be paid to the supply and demand of health inputs in the rural areas.