



# OSUN STATE HEALTH PROFILE





## **Overview**

#### **CAPITAL**

Osogbo

#### **POPULATION**

**3,423,535** (2006 Census)

#### **LOCAL GOVERNMENT AREAS**

30 LGAs

#### **MAIN ETHNIC GROUPS**

ljesa, Oyo, Ife and Igbomina

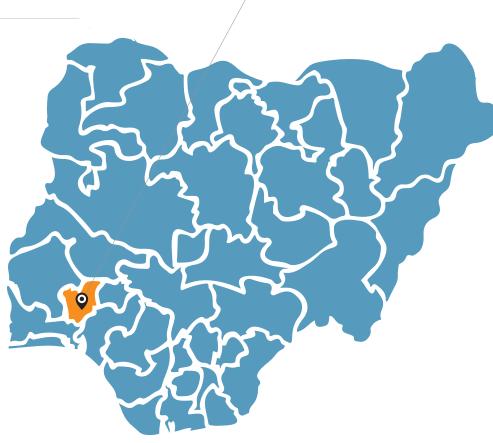
#### **MAIN OCCUPATIONS**

Predominantly farming and trading

#### **MAIN LANGUAGES**

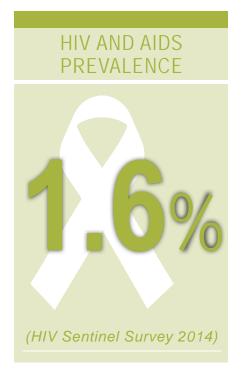
Yoruba

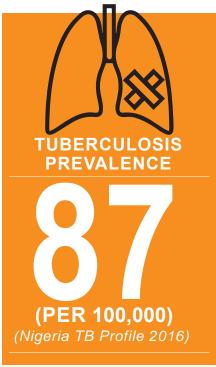


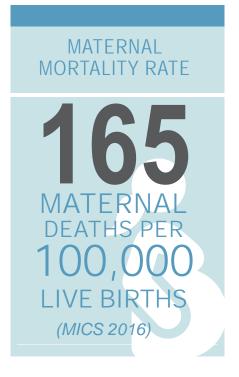




# Osun State Health Indices







INFANT MORTALITY RATE

78
INFANT
DEATHS PER
1,000
LIVE BIRTHS

(MICS 2016)

UNDER 5 MORTALITY RATE

78
UNDER 5
DEATHS PER
1,000
LIVE BIRTHS

(MICS 2016)

NEONATAL MORTALITY RATE

101
NEONATAL
DEATHS PER
1,000
LIVE BIRTHS





# Key Stakeholders

Hospital Management Board (HMB)

Responsible for the execution of health policies approved by the state government.

2

State Primary Health Care Development Board (SPHCB)

Ensure standards in selection of public health care primary facilities and provide support for coverage of vulnerable groups in the Osun Health Insurance Scheme

3

State Ministry of Health (SMoH)

Responsible for the formulation of health care policy for the state and establishment of health care facilities, its maintenance and expansion

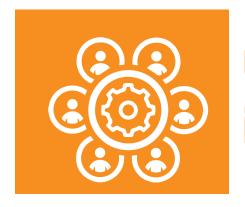
### THE USAID/HFG PROJECT IN OSUN STATE

#### **KICKED OFF AUGUST 2017**

With stakeholder mapping and engagement followed by an inauguration of a Domestic Resource Mobilization Technical Working Group (DRMTWG) for MNCH.



The HFG mandate for Osun state is to improve the financing, management, and delivery of sustainable pro-poor reproductive, maternal, neonatal and child health (RMNCH) services.



# USAID/HFG in Osun State

### HEALTH BUDGET ALLOCATION

Budget for health was at its highest in 2013; NGN 4.7 billion (\$1,299,167.89) and has been declining with NGN 2.4 billion (\$671,421,022.30), NGN 2.281 billion (\$630,511,054.70), NGN1.31 billion (\$36,210,849.70) and NGN929 million (\$2,567929.72) for the years 2014, 2015, 2016, 2017.

### HEALTH STRUCTURES AND SERVICES

Presence of functional primary, secondary and tertiary health care

OSUN HEALTH INSURANCE SCHEME AND PRIMARY HEALTH CARE UNDER ONE ROOF (PHCUOR) were established.



#### INTERVENTION AREAS







## **Approach**



## STAKEHOLDER ENGAGEMENT

At the project initiation phase, key stakeholders in the health sector as well as government officials with good understanding of state dynamics were mapped and engaged.



## MULTISECTORAL COLLABORATION

a Resource Mobilization Technical
Working Group was created
to strategically support health
financing and mobilize resources.
Members of the RMTWG were
drawn from several Ministries,
Departments, Agencies,
Civil Society Organizations,
Implementing Partners and Private
sector entities with clear-cut terms
of references for operation.



## CAPACITY BUILDING AND SENSITIZATION

TWG and HCF staff were engaged and mentored for the purpose of providing strengthened oversight to the health sector.



## DIAGNOSTIC EVIDENCE FOR ACTION

Conducted four surveys and assessments; Fiscal Space Analysis (FSA), Public Expenditure Report (PER), House Hold Survey (HHS) and Governance and Economy. The reports were used to sensitise and generate evidence for improved budgetary allocation, release and private sector involvement.



## **Achievements**

- The Health Care Financing (HCF) Unit in the Department for Planning Research and Statistics (DPRS) of the State Ministry of Health (SMoH) was established as a result of USAID/HFG Osun's support and numerous advocacies.
- The Health Care Executive Secretary, management team, Financing desk officer and support officer at the Osun Health Insurance Scheme (OHIS) were appointed as a result of HFG Osun's advocacies and support.
- A total of 22 trainings, meetings, workshops and sensitization activities were accomplished in Osun state.
- The USAID/ HFG established a Technical Working Group (TWG) on RMNCH and has recorded outstanding success in mobilizing support from political stakeholders.
- The findings of the FSA, PER, Political Governance indepth, HHS assessments were instrumental during advocacies to make a case for improved budgetary allocation and releases, realisation of the SHIS and private sector involvement.
- Health financing diagnostics
   (Fiscal Space Analysis, Public
   Expenditure Review and) to
   generate evidence for improved
   budgetary allocation, release
   and private sector involvement.



with success in mobilizing support from political stakeholders.



MEETINGS AND WORKSHOPS
AND SENSITIZATION ACTIVITIES ACCOMPLISHED



IMPROVED BUDGETARY
ALLOCATION

with findings from the FSA, PER, Political Governance and HHS assessments conducted



## **Challenges**



Lack of a state
health policy that
will serve as a
general plan of
action used to
guide desired
health outcomes
and serve as
a fundamental
guideline to help
make decisions



Majority of the health infrastructures are dilapidated



Inadequate
health care
commodities
like essential
drug vaccines
and other
consumables



High out
of pocket
spending on
health and too
high per capital
cost of health
care



Poor health
seeking behaviour
by the populate
primarily as a
result of religious
beliefs, use
of traditional
African Medicine
and patient's
perception of
the reality of an
ailment



Inequities in distribution of health resources and access to services



Poor monitoring and evaluation mechanism in the health sector



Poor attitudes of Human Resource for Health



## Legacy



An institutionalized Health Care Financing Unit in Health Planning



Osun Health Insurance Scheme



A functional Health Care Financing Technical Working Group

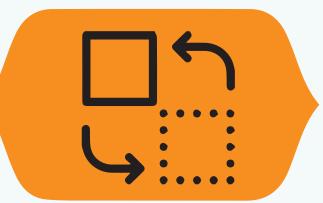


Human Resource in Health Care Financing



# Recommendations

To ensure sustainability of health financing in Osun state, a follow-on program is recommended.



Project timeline/schedule should be made longer to allow a more effective implementation process.



There is a strong need for continuous advocacy to the government to reform the heath structure and services.





# **Sustainability Initiative**

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The Technical
Working Group
will sustain
the state's
health financing
initiative



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