

Sustaining health security in Oyo State towards 2050

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Abstract

Introduction: Oyo State with 33 Local Government Areas and 351 wards operates a three-tier healthcare delivery system. There are challenges associated with changes in population, climate and environment, social security among others as we move towards 2050. There is a need to highlight the structure of healthcare in the State, review current challenges and propose mechanisms to ensure health security for Oyo State before 2050.

Methods: A review of the structure, activities and interventions involved in healthcare delivery in Oyo State was undertaken with a comprehensive analysis of current challenges and future steps to be taken to ensure health security in Oyo State.

Results: Oyo State has over 2,000 healthcare facilities distributed across the three tiers of healthcare for a population of over 8 million citizens. There have been recent structural and functional developments to strengthen facilities and policies and improve healthcare delivery in the State. Notable steps were advanced to ensure health security in the State by the year 2050.

Conclusion: The goal in Oyo State is the dictum - Health is Wealth, as a healthy workforce is a productive work force. The vision and mission for healthcare delivery are beyond the year 2050. Hence, a multi-sectoral approach to healthcare delivery including but not limited to capacity building, reduction in maternal/infant mortality, a productive and encouraged medical workforce and a private sector involvement will be pivotal towards health security by 2050.

Keywords: Health security; Oyo State; universal coverage

Abstrait

Introduction : L'État d'Oyo, qui regroupe 33 communes et 351 quartiers, gère un système de prestation de soins de santé à trois niveaux. Il y a des défis liés à l'évolution de la population, du climat et de l'environnement, de la sécurité sociale, entre

autres, à l'horizon 2050. Il est nécessaire de mettre en évidence la structure des soins de santé dans l'État, de passer en revue les défis actuels et de proposer des mécanismes pour assurer la sécurité sanitaire de l'État d'Oyo avant 2050.

Méthodes : Un examen de la structure, des activités et des interventions en matière de prestation de soins de santé dans l'État d'Oyo a été entrepris avec une analyse complète des défis actuels et des mesures à prendre pour assurer la sécurité sanitaire dans l'État d'Oyo.

Résultats : L'État d'Oyo compte plus de 2 000 établissements de soins de santé répartis sur les trois niveaux de soins de santé pour une population de plus de 8 millions de citoyens. Des évolutions structurelles et fonctionnelles ont récemment eu lieu pour renforcer les infrastructures et les politiques et améliorer les prestations de soins de santé dans l'État. Des mesures notables ont été avancées pour assurer la sécurité sanitaire de l'État d'ici 2050.

Conclusion : L'objectif dans l'État d'Oyo est la diction : la santé, c'est la richesse, car une main-d'œuvre en bonne santé est une main-d'œuvre productive. La vision et la mission de la prestation des soins de santé vont au-delà de l'année 2050. Ainsi, une approche multisectorielle de la prestation des soins de santé, comprenant notamment le renforcement des capacités, la réduction de la mortalité maternelle et infantile, une main-d'œuvre médicale productive et encouragée et une implication du secteur privé servira de pivot pour la sécurité sanitaire d'ici 2050.

Mots clés : La sécurité sanitaire ; État d'Oyo ; soin santé primaire ; soin de santé secondaire ; soin de santé tertiaire

Introduction

Oyo State was created in 1976 from the old Western State. The State is bisected into four equal parts by latitude 8°N and longitude 40°E and occupies a land area of 28,454 square kilometers. The State is projected to have a population of 8,236,335 in 2019 [1]. The State is bounded in the north by Kwara State, in the south by Ogun State, in the east by Osun State and in the west by the Republic of Benin. The international boundary with the Republic of Benin provides a unique opportunity for cross-border trading.

The State has 33 Local Government Areas (LGAs) made up of 351 wards. Most of the inhabitants of the State are farmers, petty-traders and artisans with a smaller proportion being civil servants. Like other States of the Federation, it has three senatorial districts, namely: Oyo North, which consists of 13 LGAs, Oyo Central consisting of 11 LGAs and Oyo South with of 9 LGAs. The State has 32 members in the State House of Assembly, 14 members in the Federal House of Representatives and three senators at the National Assembly.

The structure of healthcare in Oyo State

The State operates a three-tier health care delivery system comprising primary, secondary and tertiary health care through facilities that are spread across the urban and rural areas of the State. As of 2018, there are a total of 2,086 health facilities in the state including 1,413 private clinics and hospitals, 622 government owned Primary Health Center (PHCs) 56 secondary health facilities and five tertiary health centers in the state. The tertiary health centers are the University College Hospital, Ibadan; Adeoyo Maternity Teaching Hospital, Ibadan; Ladoke Akintola University of Technology Teaching Hospital, Ogbomoso; Jericho Specialist Hospital and Bowen University Teaching Hospital, Ogbomoso.

The structure of the Ministry of Health

The Ministry of Health oversees all health-related issues and matters in the State. The administration and management of the Ministry is guided by some working policy thrusts, objectives and strategies. It is on these guiding principles that the Ministry is structured into departments and specialized units. The units include: The State Hospitals' Management Board, which is charged with the daily administration of secondary health care facilities in the State; the Ladoke Akintola University of Technology Teaching Hospital – the only state-owned teaching hospital; and Oyo State Health Insurance Agency, which was established

to provide a safety net for individual spending on health thus reducing out-of-pocket expenditure in our communities, especially among vulnerable groups. The other units are: the Oyo State Primary Health Care Board, which was established for effective and efficient coordination of manpower, funding and infrastructure for qualitative service delivery at the grass root level; Oyo State College of Nursing & Midwifery – the State's training institution for the nursing profession; and Oyo State College of Health Sciences and Technology – the

training institution for middle level health care professionals.

The activities of the Ministry are anchored on the vision and mission statements in line with its objectives. The vision of the Ministry is to improve the health status and socio-economic advancement of individuals and families in the State using preventive, promotive, curative and rehabilitative approaches. Her mission is to provide people-oriented broad based purposeful and sustainable health care delivery system with a fundamental structure in functions and performance of health systems; involving all stakeholders to deliver efficient, affordable, accessible, effective and equitable care services to the people.

The objectives of the Ministry of Health includes: to ensure that people obtain the health services they need without suffering financial hardship when paying for them; to provide robust and performing Primary Health Care system that is adequately staffed and funded; to reduce infant and perinatal mortality and morbidity through community and facility based health care interventions; to ensure maintenance and upgrade of secondary care centers and teaching hospitals; to roll in Public-Private-Partnership for essential services and development of capital projects in the hospitals; and to strengthen emergency preparedness and rapid response health intervention activities.

Current situation and interventions

There has been establishments of units and programs to improve the healthcare delivery in the State. The Oyo State Health Insurance Agency was established by an act of law in March 2017 to bring healthcare closer to the people and improve the feasibility of universal health coverage [2]. In view of the realization of the huge role that funding has on improving the health of the populace, the Oyo State Healthcare Endowment Fund was established in 2017 with a mission to raise funds and infrastructural support for capital projects and initiatives. The State Cancer Control Plan was rolled out in April 2018 to reduce the scourge of cancer while emphasizing prevention and early detection through screening of the most prevalent cancers in the State. This policy has been replicated and implemented in all the 33 LGAs and the 38 LCDAs.

In terms of infrastructural development, Primary Health Care (PHC) centers were established between 2011 and 2016 in 27 wards that hitherto lacked such facilities. Prototype maternal and pediatric centers were constructed at Jericho

Specialist Hospital, Jericho Nursing Home, State Hospital Saki and Olodo-Monatan in Ibadan to bring healthcare for two very important groups in the population closer to the people. The Oyo State emergency ambulance services was inaugurated in March 2013.

The State is also in collaboration with development partners and this has culminated in a 43% reduction in the case-incidence of malaria (hospital-based data) and a reduction of HIV prevalence from 3% in 2010 to 0.9% in 2018. The Saving One-Million Lives (SOML) project, which involves specific health interventions for individuals and targeted at reducing maternal- and pediatric-morbidity and mortality was implemented across the State. Similar partnerships are utilized in the Global Fund support for HIV/AIDS, tuberculosis and malaria.

In collaboration with partners in the Federal Government of Nigeria and the World Bank, the Accelerating Nutrition Result in Nigeria (ANRiN) project has been commenced with the aim of improving nutrition in childhood as well as reduction in childhood morbidity and mortality.

More recently, the State has commenced the policy initiative of using the provision of the Basic Health Care Fund from the Consolidated Fund of the Federation to fund activities and social health insurance scheme. Another avenue for funding has led to the expansion of Public Private Partnership (PPP) initiatives in pharmaceutical services from 19 hospitals to cover 36 secondary health facilities in the State as well as other service areas.

The Oyo State Primary Healthcare Board was established by an act of law to coordinate the activities and expansion of PHC services across the entire state such that every ward will have a PHC facility [3].

In recognition of the role of education and training of healthcare professionals, the schools of nursing and midwifery have been upgraded to the Oyo State College of Nursing and Midwifery [4] while the school of hygiene was upgraded to the Oyo State College of Health Sciences and Technology [5]. A School of Basic Midwifery was established at Kisi as a campus of the Oyo State College of Nursing and Midwifery. Similarly, the Okeho campus of the Oyo State College of Health Sciences and Technology was established to improve the availability and retention of middle-level health manpower.

Private health facilities are important in the State as they largely operate as secondary health facilities. There have been instances of people

operating illegal health centers hence a law to amend the Hospitals (Private) Registration Law, 1946 was passed by the State House of Assembly and assented to on 1 July 2017. The Task Force on monitoring and supervision of private health facilities in the State was also invigorated to improve their activities.

The Ladoké Akintola University of Technology Teaching Hospital commenced operations in May 2011. The facility now has accreditation for the training of medical students, house officers and resident doctors from the Medical and Dental Council of Nigeria, the National Post-Graduate Medical College on Nigeria and West African College of Surgeons/West African College of Physicians.

The State has adopted a multi-sectoral approach to healthcare delivery, which includes enhancing capacity building, reduction in maternal/infant mortality, a productive and encouraged medical workforce and a private sector involvement as evidenced by better status report of health in Oyo State [6]. The State in the recent report had the following indices: under-five mortality rate of 73/1000 (National = 120/1000); maternal mortality rate of 148/100,000 (National = 576/100,000); contraceptive prevalence of 45% (National = 13.4%); and skilled birth attendance of 79.8% (National = 43%) [6].

Future steps in health security for the State

- There is need to ensure provision of adequate health manpower to service facilities in both urban and rural areas and properly equipped facilities to ensure minimum standard of health care delivery. This will be made possible through expansion of training facilities and retention strategies for healthcare professionals while ensuring that funding for the health sector continues to improve.
- There is a need to integrate Information, Communication and Technology (ICT) into the health care system for effective health care service.
- The establishment of Oyo State Private Hospitals Registration, Regulation and Monitoring Agency will help in harnessing the huge resources available in the private sector for healthcare delivery in the State. There is a need to ensure health training institutions maintain current and full accreditation.
- Universal health coverage will be a major requirement for health security in Oyo State by 2050 and this will be achieved by expanding health insurance coverage and empowering the

Oyo State Primary Health Care Board for effective service coordination.

- In terms of provision of acute care services, there should be rejuvenation and expansion of Oyo State Ambulance Service to all the three Senatorial zones of the State.
- With an aging population, the State will need to establish a fully functional Cardiovascular Centre, planned for the Ring Road State Hospital in Ibadan. Similarly, in reinforcing preventive health and surveillance, early detection and prevention of epidemics, there should be zonal public health laboratories all over the State.

Conclusion

The goal in Oyo State is the dictum - Health is Wealth, as a healthy workforce is a productive work force. The vision and mission for healthcare delivery are beyond the year 2050. Hence, a multi-sectoral approach to healthcare delivery including but not limited to capacity building, reduction in maternal/infant mortality, a productive and encouraged medical workforce and a private sector involvement will be pivotal towards health security by 2050.

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