

ON CALL

SYSTEM RESET

HEALTH & SOCIAL WELFARE UPDATE

A National Compact For **Health**

How Nigeria Is Aligning Presidential Authority, Traditional Institutions, Community Trust to Reset Its Health System

Reform In Action -
Managing Industrial Strain, Building Lasting Harmony

How NCDC is
Strengthening Nigeria's
Outbreak Preparedness

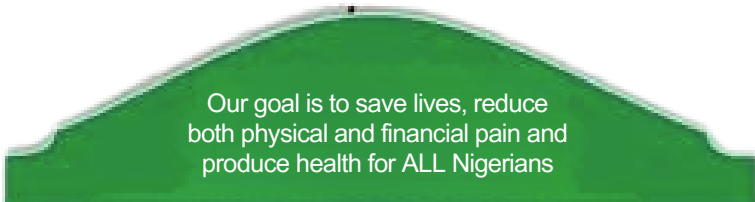
Nigeria Moves Closer
To Ending Mother-To-Child Transmission

Managing Industrial Strain, Building Lasting Harmony

REFORM SPOTLIGHT
HEALTH SECURITY

**From The Coordinating Minister
– Reform With Results**

HEALTH SECTOR STRATEGIC BLUEPRINT 2023-2027




Our goal is to save lives, reduce both physical and financial pain and produce health for ALL Nigerians


Outcomes we want to achieve include improvement in mortality and morbidity rates, drop in out-of-pocket expenditure by patients and reduction in difference in health outcomes between different income quartiles

 **Effective governance**

- Strengthen oversight and effective implementation of the National Health Act
- Increase accountability to and participation of relevant stakeholders and Nigerian citizens
- Strengthen regulatory capacity to foster the highest standards of service provision
- Improve cross-functional coordination & effective partnerships to drive delivery

 **Efficient, equitable and quality health system**

- Drive health promotion in a multi-sectoral way (incl. intersectionality with education, environment, WASH and Nutrition)
- Strengthen prevention through primary health care and community health care
- Improve quality of care and service delivery across public (secondary, tertiary and quaternary) and private health care providers
- Improve equity and affordability of quality care for patients, expand insurance.
- Revitalize the end-to-end (production to retention) healthcare workers pipeline

 **unlocking value chains**

- Promote clinical research and development
- Stimulate local promotion of health products
- Shape markets to ensure sustainable local demand
- Strengthen supply chain

 **Health Security**

- Improve the ability the ability to detect, prevent and respond to public health threats (eg. Cholera, Lassa)
- Build climate resiliency for the health system in collaboration with all other sectors

Data & Digitization: Digitize the health system & have data backed decision making

Financing: Increase effectiveness of spend and alignment of spend with strategic priorities

Culture & Talent within MDAs: Strengthen skills, capabilities & values and drive a performance-based culture within the FMoH

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Daju Kachollom S. mni
Permanent Secretary

Leading the Reset

The ongoing reset within Nigeria's health sector is anchored in structure, discipline and alignment with national priorities. Under the leadership of the current administration, health has been rightly positioned as a priority area for strengthening human capital and accelerating sustainable development. Our responsibility is to translate that priority into measurable system-wide impact.

The Federal Ministry of Health and Social Welfare continues to align implementation with the Health Sector Strategic Blueprint, ensuring that planning, budgeting, regulation and performance management operate within a coherent reform framework. Through the Sector Wide Approach, we are deepening coordination across federal and state levels, improving resource optimisation and reinforcing accountability across institutions.

Institutional stability remains central to this effort. Reform must be anchored in strong governance systems that outlast transitions. We are strengthening internal controls, enhancing financial oversight, tightening monitoring and evaluation processes, and institutionalising data driven decision making to ensure transparency and measurable outcomes.

This maiden edition of our newsletter reflects that same commitment to structured engagement and accountability. It serves as a platform to document progress, strengthen institutional memory and provide clear visibility into the work of the Ministry as reforms advance.

Our focus remains constant and clear: To save lives, reduce both physical and financial pain and improve health outcomes for all Nigerians. Every reform, partnership and policy intervention is guided by this mandate.

As we lead this reset, we do so with confidence in our systems, clarity in our direction and discipline in execution. The Federal Ministry of Health and Social Welfare remains steadfast in its duty to provide strategic leadership for a responsive, equitable and efficient health system that delivers lasting value to the Nigerian people.

System Reset

This maiden edition of On Call: Health & Social Welfare Update reflects a health sector that is being deliberately repositioned under the leadership of President Bola Ahmed Tinubu. The System Reset is not an aspiration — it is already underway, and it is delivering measurable change.

We are moving away from a fragmented, externally driven system to one that is coordinated, government-led, and accountable for results. Through the Sector-Wide Approach (SWAp), we now have a single national framework guiding priorities, investments, and implementation across the country. This is being executed through the Nigeria Health Sector Renewal Investment Initiative (NHSRII), which is translating reform into action across all states.

The results are beginning to take shape. Over 32.8 billion has been disbursed through the Basic Health Care Provision Fund to strengthen primary healthcare services. The Maternal and Newborn Mortality Reduction Innovation Initiative (MAMII) is driving targeted interventions in high-burden areas to reduce preventable deaths. Through the National Health Fellows programme, we are deploying reform capacity across all 774 local government areas to ensure that policies are not only designed but delivered.

FROM THE COORDINATING MINISTER - REFORM WITH RESULTS



We are also strengthening alignment through strategic Memoranda of Understanding with our partners, ensuring that all support is channelled within national priorities. At the same time, we are advancing a clear shift towards domestic resource mobil-

isation reducing dependence on external financing and building a more sustainable system.

This publication is part of that effort. It is designed to keep Nigerians informed, track progress, and reinforce accountability as we implement these reforms.

We know where we are coming from. We are clear about where we are. And we are focused on where we are going — a health system that works, is owned by Nigerians, and delivers for every citizen.

"We are building a health system that is nationally owned, coordinated in execution, and accountable for results."



We are building a health system that is nationally owned, coordinated in execution, and accountable for results

Welcome to the maiden edition of On Call

Stability Strengthens Service

From the Minister of State, By Dr. Iziak Adekunle Salako

At a defining moment for Nigeria's health sector, this publication reflects the ongoing System Reset under the Renewed Hope Agenda of President Bola Ahmed Tinubu. Across the country, reforms are reshaping how we deliver care, strengthen institutions and support the professionals who sustain our health system.

Central to this reset is sector stability and workforce engagement. In 2025 alone, more than 37,000 health workers were approved for employment, while nearly 70,000 received on-the-job training to strengthen skills across the system. By restoring budgetary funding to health regulatory bodies, we are reinforcing professional standards and safeguarding clinical quality.

Our broader objective is clear: to transform the challenge of health worker migration into an opportunity for "brain gain", through policies that support

retention, professional growth and global competitiveness.

At the same time, service delivery is expanding in measurable ways. Primary Health Care quality scores have risen from 42 percent to 67 percent, while annual utilisation has grown to 170.8 million visits. We have also strengthened specialised care through the operationalisation of Preventive Oncology Clinics in eight Federal Tertiary Hospitals, alongside the nationwide rollout of the HPV vaccine, which has already reached over 15 million girls.

Our commitment to social welfare remains equally strong. Through JIGIBOLA 2.0, over 1.5 million Nigerians have been screened for vision problems, with more than 1.4 million receiving free eyeglasses. The National Community Food Bank Programme is also helping address nutritional gaps as an important complement to clinical care.

represent a decisive shift from policy to impact as we build a resilient, citizen-centred health system for every Nigerian."

Beyond programmes and statistics, the real story is one of systems working better together. Through initiatives such as the Power for Health programme, which is solarising health facilities, and the Nigeria Digital in Health Initiative, which is building a unified national data architecture, we are laying the foundations for a more reliable and coordinated health system.

These reforms reflect our collective commitment to move from policy to impact, ensuring that quality healthcare becomes not a privilege but a guaranteed right for every Nigerian.

As the implementation of the Health Sector Renewal Investment Initiative continues, we remain focused on delivering results that improve lives, strengthen institutions and restore confidence in our health system.

"These initiatives



These initiatives represent a decisive shift from policy to impact as we build a resilient, citizen-centred health system for every Nigerian





A NATIONAL COMPACT FOR HEALTH

How Nigeria Is Aligning Presidential Authority, Traditional Institutions and Community Trust to Reset Its Health System

On February 17, 2026, Nigeria did more than convene a summit. It forged alignment.

The First National Traditional and Religious Leaders' Summit on Health, held at the State House Banquet Hall in Abuja, marked a structural shift in how health reform will be implemented across the country. Anchored in the Renewed Hope Agenda and the Nigeria Health Sector Renewal Investment Initiative, the gathering brought together political leadership, traditional rulers, religious authorities and development partners within a unified framework for action. This was not ceremony. It was architecture.

Presidential Leadership: Health at the Centre of National Renewal

President Bola Ahmed Tinubu set the national tone. "No health reform in Nigeria can succeed without you," he told traditional and religious leaders. "You are trusted voices bridging the government and the people, interpreting national policy and serving as moral anchors." By elevating the Summit to the

highest level of governance, the President reinforced a clear message: health is central to Nigeria's national renewal. Universal health coverage is not a sectoral aspiration. It is a national commitment.

He reaffirmed his administration's resolve to build "an inclusive, united and committed society to renew the hope of our people," situating health reform as a pillar of that renewal.

When political authority aligns openly with community leadership, reform gains both legitimacy and momentum.

The First Lady: Protecting Human Capital from the Start

In alignment with the commitments embedded in the Summit, the First Lady of the Federal Republic of Nigeria, Senator Oluremi Tinubu, launched the National Advocacy and Awareness Campaign for the National Community Food Bank Programme. Supported through a Trust Fund backed by private sector partners and credible Nigerians, the initiative brings immediate operational focus to the Summit's emphasis on nutrition and maternal-

child health, demonstrating coordinated governance across health, agriculture and finance.

Designed to address child malnutrition, the programme will operate through Primary Health Centres nationwide. Eligible families with children under six years old will be identified and registered. Caregivers will receive counselling and food vouchers redeemable for nutritious, locally grown foods at food banks established near health centres. Her appeal to traditional and religious leaders was clear: no eligible family must be left behind.

In this way, the Summit moved from declaration to delivery.



The Coordinating Minister: Structuring the Path to Sovereign Health Financing

The Coordinating Minister of Health and Social Welfare, Prof. Muhammad Ali Pate, positioned the Summit within a broader reform trajectory anchored in governance, accountability and sustainable financing.

Presenting the 2025 State of Health of the Nation Report, he emphasised that reform must be backed by systems Nigeria can sustain over time.

A major focus is the country's transition toward greater domestic financing of HIV, Tuberculosis and Malaria programmes under a five-year Memorandum of Understanding with the United States.

Under the agreement:

- About US \$2 billion will come from the United States.
- About US \$3 billion is expected from Nigerian federal and state governments.
- By 2030, Nigeria will assume a greater share of responsibility.

Nearly 60 percent of total financing is projected to be mobilised domestically.

"The health of Nigerians is the responsibility of Nigerians," he stated.

This transition is deliberate, not abrupt. It is designed to protect ongoing services while strengthening national ownership.

By aligning traditional and religious leaders with reform priorities, government is reinforcing the community trust necessary to sustain domestic financing and gradually reduce long-term dependency on foreign donors.

Sustainable funding depends on citizens using and believing in the system.

The Minister of State: From Reform to Ownership

The Minister of State for Health and Social Welfare, Dr. Iziq Adekunle Salako, framed the Summit as a turning point in implementation.

The objective, he noted, is to strengthen community engagement by amplifying the roles of traditional and religious leaders as accountability champions.

The ambition is clear: to move from health reform to community ownership.

Ownership means that Primary Health Centres are not only funded but locally monitored.

It means health insurance uptake encouraged by trusted voices. It means accountability strengthened at community level.

Recent increases in Basic Health Care Provision Fund allocations, from 300,000 to 600,000 quarterly per facility, reinforce the government's commitment to frontline service delivery. Community oversight ensures those resources translate into measurable outcomes.

Institutional Stewardship: Sustaining Reform Through Governance

Reform requires continuity.

The Permanent Secretary of the Federal Ministry of Health and Social Welfare, Daju Kachollom mni, underscored that aligning trusted community leaders with national health priorities strengthens transparency and deepens accountability across federal, state and local systems.

"When policy direction and community leadership are aligned," she noted, "implementation accelerates and sustainability becomes achievable."

Her perspective reflects the administrative backbone that



How Nigeria Is Aligning Presidential Authority, Traditional Institutions and Community Trust to Reset Its Health System



anchors reform beyond public events.

Traditional and Religious Leaders: From Commitment to Declaration

Nigeria's traditional rulers used the Summit to signal clear support for President Bola Ahmed Tinubu's health reform agenda, committing to mobilise communities, counter vaccine misinformation and strengthen primary healthcare delivery across their domains.

Their message was unified: reform must reach the grassroots.

His Imperial Majesty Adeyeye Enitan Ogunwusi emphasised the need for collaboration and collective responsibility in advancing healthcare reforms, urging leaders to align their influence with national priorities to improve outcomes for their people.

From the North-East, the Shehu of Borno, Abubakar EL-Kanemi, represented at the Summit, highlighted the authority traditional rulers hold within their communities. He stressed their capacity to influence health-seeking behaviour, address vaccine resistance rooted in misinformation or cultural misunderstanding, and ensure underserved populations, including border,

nomadic and insecure communities, are not excluded from essential services.

Beyond statements of support, traditional and religious leaders outlined concrete actions within their jurisdictions. They pledged to promote routine immunisation, strengthen maternal and child health services, combat misinformation, identify underserved communities, monitor local health interventions and safeguard the health rights of women, children and adolescents.

These commitments culminated in the endorsement of the Aso Rock Declaration on Health 2026, a formal compact integrating traditional and religious leadership into Nigeria's health governance framework.

Through the Declaration, leaders affirmed their support for immunisation, maternal and neonatal care, nutrition programmes, integration of faith-based facilities into local systems and the promotion of health insurance schemes to strengthen sustainable domestic financing.

In doing so, influence was converted into structure, and structure into shared responsibility.

A NATIONAL COMPACT FOR HEALTH

How Nigeria Is Aligning Presidential Authority, Traditional Institutions and Community Trust to Reset Its Health System

Global Endorsement of a Local Strategy

The World Health Organisation's Country Representative to Nigeria, Pavel Ursu, described Nigeria's engagement of traditional institutions as a model that reaches communities "where politicians and health workers often cannot."

The World Bank Country Director for Nigeria, Mathew Verghis, linked health reform to Nigeria's ambition of becoming a trillion-dollar economy. He emphasised that sustained investments in human capital, from pregnancy through early childhood, encompassing health, nutrition, sanitation, caregiving and early learning, are foundational to economic growth.

He affirmed the World Bank's commitment to partnering with Nigeria's government, people

and faith institutions to drive transformation at community level.

A Reset Anchored in Alignment

This Summit did not merely produce resolutions. It aligned presidential

authority, ministerial direction, administrative stewardship, traditional legitimacy, faith influence and international partnership within a shared reform compact.

It strengthened the pathway toward sustainable domestic financing.

It reinforced accountability at community level.

It positioned health not as policy rhetoric, but as a national priority.

The First National Traditional and Religious Leaders' Summit on Health signals a defining shift:

Health reform in Nigeria is no longer confined to institutions alone.

It is now anchored in the structures that shape everyday life.

And that alignment may prove to be the most consequential reform of all.



These commitments culminated in the endorsement of the Aso Rock Declaration on Health 2026, a formal compact integrating traditional and religious leadership into Nigeria's health governance framework.



ONE PLAN, ONE SYSTEM: THE SWAp RESET IN ACTION

- Muntaqa Umar-Sadiq
National Coordinator, SWAp

"The challenge was never a lack of effort; it was a lack of alignment. SWAp is how we move from parallel activity to a single system that delivers results."

Nigeria's health sector has never lacked effort. What it has lacked, until now, is alignment.

For years, progress was pursued through multiple channels, each addressing critical needs, but often without a single, unifying system. Programmes expanded. Financing increased. Partnerships deepened. Yet delivery remained uneven, and outcomes did not always reflect the scale of investment.

The constraint was not intent. It was structure.

A system designed to operate in parts cannot consistently deliver as a whole.

Why Reset Was Necessary

Fragmentation created real limitations. Planning cycles were not aligned. Financing flowed through parallel channels. Reporting systems overlapped without converging. At the state level, implementation often depended on how well these moving parts could be manually coordinated. This made accountability diffuse and delivery inconsistent.

It also made it difficult to answer a fundamental question: Are we collectively delivering measurable improvements in health outcomes at scale, or simply implementing activities in

parallel? The reset, therefore, was not about introducing new programmes. It was about organising the system to deliver.

Why SWAp, and Why Now

The Sector-Wide Approach (SWAp) is Nigeria's answer to that structural challenge.

Under the Renewed Hope

Agenda and the Ministry's 4-Point Agenda, the expectation is clear: reform must translate into results. That requires more than policy direction. It requires a system where planning, financing, and implementation are aligned by design.

SWAp introduces that discipline. It establishes:

- One Plan
- One Budgetary Framework
- One Results System
- One Coordinated Conversation

This is not a coordination platform layered on top of existing structures. It is a shift in how the system itself is organised. From multiple pathways to one.

What Has Changed

The difference is becoming visible in how the sector functions. Planning is now unified.

Priorities are defined within a single framework, reducing duplication and ensuring that investments are aligned from the outset. Financing is increasingly tied to results.

The challenge was never a lack of effort; it was a lack of alignment. SWAp is how we move from parallel activity to a single system that delivers results





The test of reform is not in policy documents; it is at the point of care: can the system consistently deliver for the people who need it most?

Through mechanisms such as Disbursement-Linked Indicators under programmes like HOPE-PHC, funding is no longer just allocated, it is earned through measurable progress.

Governance is more structured and transparent. Joint reviews, harmonised reporting, and clearer accountability lines are strengthening performance management across the system. States are at the centre of delivery. Implementation is increasingly state-led, with Annual Operational Plans (AOPs) serving as the anchor for aligning partner resources with local priorities. Service delivery is being organised as a pathway, not a set of inputs.

From primary care to referral systems, from community health workers to emergency transport, interventions are being aligned into end-to-end care delivery, particularly in priority areas such as maternal and neonatal health.

What is changing is not just coordination at the top, but how care is delivered at the frontline. Same patients. Same facilities. But increasingly, one coordinated pathway of care.

Early Reform Signals

Reforms of this scale are incremental, but early signals are clear.

There is greater coherence in sector dialogue.

Partners are aligning behind national priorities.

Programme duplication is reducing.

Performance conversations are becoming more structured and data-driven.

We are also seeing early improvements in how financing, service delivery, and accountability interact, particularly in programmes where performance-linked funding is being applied.

These are not final outcomes. But they are indicators that the system is beginning to function differently.

What This Means for Nigerians

Ultimately, system reform must be judged at the point of care. Because the test of reform is simple:

Can a pregnant woman be identified early, tracked through the system, and receive timely, quality care without financial or logistical barriers?

Can referrals happen when needed?

Can facilities deliver consistently? Can financing support care when it matters most?

A more aligned system increases the likelihood that the answer to these questions is yes.

It means fewer gaps between policy and practice.

Fewer missed connections in the care pathway.



Looking Ahead

The priority now is to consolidate and scale.

This includes:

- Deepening state-level implementation
- Strengthening data systems for real-time performance management
- Expanding alignment across all partners and financing streams
- Maintaining discipline in execution

Because alignment alone is not the goal.

Results are.

The transition from fragmentation to one system is already underway.

The task ahead is to ensure that this system delivers, consistently, measurably, and at scale.



Reform in Action

MANAGING INDUSTRIAL STRAIN, BUILDING LASTING HARMONY

Industrial tension in Nigeria's health sector does not erupt in isolation. It accumulates.

Across recent years, engagements with professional associations including the Nigerian Association of Resident Doctors (NARD), the Joint Health Sector Unions (JOHESU), and other allied health bodies have surfaced recurring concerns around remuneration frameworks, career progression pathways, welfare protections, and implementation timelines for negotiated agreements.

Each episode carried immediate implications for service delivery. But more importantly, each revealed structural questions about sustainability, fiscal realism, and institutional trust.

Under the Renewed Hope reform direction, industrial relations within the health sector are no longer being treated as episodic crises. They are being addressed


Industrial harmony in the health sector is foundational to national health security

as governance priorities.

From Escalation to Structured Engagement

The past year saw heightened industrial activity across multiple associations, with warning strikes, conciliation processes, and extended negotiations shaping the national conversation.

Rather than default to confrontation, the Federal Government adopted a structured engagement model:

- Activation of conciliation mechanisms
- Sustained dialogue with union leaderships
- Reactivation of Collective Bargaining Agreement platforms
- Technical review of salary adjustment proposals
- Alignment of financial commitments with budget cycles

This marked a deliberate shift from reactive settlement toward predictable institutional management.

Speaking on the government's approach, the Honourable Minister of State for Health and Social Welfare, Iziaq Adekunle Salako, emphasised: "Industrial harmony in the health sector is not optional. It is foundational to national health security. Our



Reform in Action

MANAGING INDUSTRIAL STRAIN, BUILDING LASTING HARMONY

commitment is to continuous engagement, fairness, and solutions that are fiscally sustainable and structurally sound.”

That framing is significant. It situates labour stability not as a labour issue alone, but as a health

security imperative.

Balancing Workforce Welfare and System Stability

Industrial disputes in healthcare are uniquely sensitive. They sit at the intersection of worker welfare and patient vulnerability.

Government engagement across associations has therefore focused on three core pillars:

1. Workforce Dignity

Affirming that no worker should face victimisation for lawful participation in industrial action and ensuring structured pathways for grievance redress.

2. Fiscal Sustainability

Embedding proposed salary adjustments and structural reforms within formal budgetary frameworks, including provisions within the 2026

Appropriation planning cycle.

3. Continuity of Care

Maintaining emergency and essential service safeguards during periods of negotiation to protect patients and preserve institutional stability.

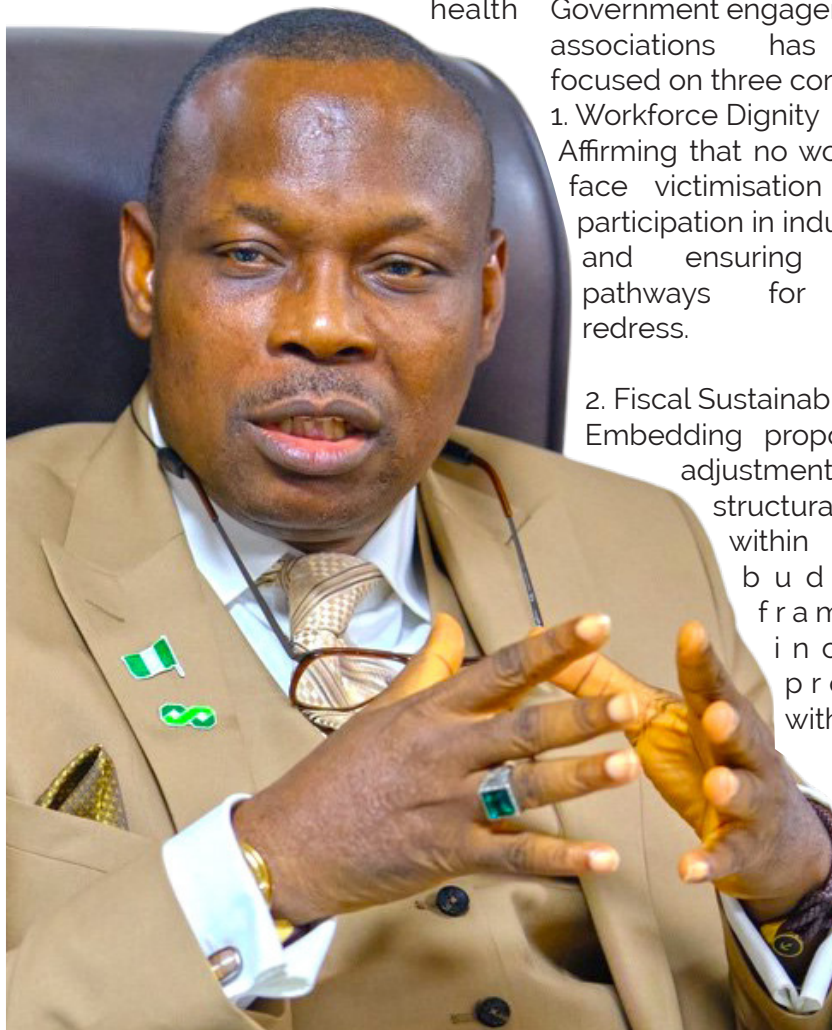
Dr. Salako further noted: “We recognise the sacrifices health workers make daily. Addressing legitimate concerns must go hand in hand with protecting service continuity for millions of Nigerians who depend on our public health institutions.”

Institutionalising Dialogue

A recurring challenge in past industrial cycles has been the episodic nature of engagement.

Reform Mechanisms Activated

- Conciliation and mediation platforms
- Reactivation of CBA negotiations
- Technical committee template for salary adjustments
- Budgetary alignment within 2026 Appropriation
- Non-victimisation assurances for health workers



System Reset

Agreements were reached, but implementation bottlenecks or fiscal constraints sometimes reignited tension.

The current reform approach seeks to break that cycle through:

- Technical committees to guide salary framework reviews
- Structured timelines for negotiation milestones
- Budget-backed commitments rather than ad-hoc concessions
- Regular interface with association leaderships

This evolution signals a maturing governance environment where disputes are anticipated, channelled, and resolved within defined institutional processes.

Reform Under Pressure

Reform is often measured in policy launches, infrastructure upgrades, and programme rollouts. Yet some of the most consequential reform work happens quietly in negotiation rooms. Industrial strain is a stress test. It reveals where communication falters, where fiscal assumptions require recalibration, and where trust must be rebuilt.

The sustained engagements with NARD, JOHESU, and other health professional bodies over the past year illustrate a system recalibrating itself in real time.

The objective is not the absence of disagreement. It is the presence of predictable mechanisms to resolve disagreement. That is the essence of system reset.

System Reset: Reform in Action

MANAGING INDUSTRIAL STRAIN, BUILDING LASTING HARMONY



When Infrastructure Meets Oversight In Abeokuta



A building can stand complete and still not serve a single patient.

In Abeokuta, Ogun State, a newly constructed office facility designated for the National Health Insurance Authority (NHIA) became the subject of public scrutiny after a social media video questioned why the structure was not operational. The response was immediate.

The Honourable Minister of State for Health and Social Welfare, Izaq Adekunle Salako, conducted an unscheduled inspection of the facility to verify its status and determine the cause of delay.

This was not ceremonial. It was diagnostic.

From Perception to Verification

Public concern centred on a simple question: If the building exists, why is it not in use?

The inspection established a critical clarification. The facility had not yet been formally handed over to the NHIA by the contractor. Without formal handover and remediation of identified deficiencies, operationalisation could not proceed.

Rather than defer responsibility,

the Minister issued a clear directive: The contractor must remedy all deficiencies and ensure readiness for occupation within one month.

Deadlines replaced ambiguity.

Infrastructure Is Policy

Health reform is often discussed in terms of insurance coverage expansion, financing mechanisms, and enrolment numbers. But those ambitions require functioning administrative infrastructure.

An NHIA office is not merely a physical space. It is a gateway for:

- Enrolment processing
- Provider accreditation coordination
- Claims management oversight
- Public interface for affordable health insurance access

When such facilities remain dormant, reform momentum slows.

Dr. Salako emphasised: "Critical health assets must not lie idle. Infrastructure must translate into service delivery, and we will ensure that public investments are fully utilised in the interest of Nigerians."

This framing connects bricks to benefits.

Oversight as a Reform Tool

The unscheduled nature of the inspection matters.

It signals a governance posture that prioritises:

- Real-time verification
- Field-level accountability
- Timely contractor compliance
- Active protection of public assets

Under the broader reform agenda, infrastructure delivery is no longer treated as complete at ribbon-cutting. Completion now means operational readiness.

That distinction is central to system reset.

Expanding Access Through Operational Discipline

The operationalisation of the Abeokuta NHIA office directly supports the national push to expand access to affordable health insurance coverage.

Ogun State residents stand to benefit from improved administrative efficiency, enhanced enrolment capacity, and stronger on-ground coordination once the facility becomes functional.

The Ministry has committed to monitoring compliance with the directive and ensuring that the stipulated one-month timeline is met.

In practical terms, this episode demonstrates something larger: Reform is not only about launching new initiatives.

It is about ensuring existing assets work.



REFORM SPOTLIGHT | HEALTH SECURITY

FROM EARLY SIGNALS TO SWIFT ACTION

How NCDC is Strengthening Nigeria's Outbreak Preparedness



NCDC and partner teams conducting infection prevention and control assessment at a health facility to strengthen outbreak preparedness and healthcare worker protection.

By Samantha Ikoli-Ilori

Head, Corporate Communications, Nigeria Centre for Disease Control and Prevention (NCDC)

In public health, the difference between containment and crisis often begins with a signal. A clinician notices unusual symptoms, a laboratory flags an unexpected result, a community health worker reports a cluster of unexplained illness. What follows depends on the strength of a country's surveillance and response system. Across Nigeria, the Nigeria

Centre for Disease Control and Prevention (NCDC) is strengthening systems to detect outbreaks early and coordinate rapid responses, protecting communities from epidemic-prone diseases.

This work has taken on renewed urgency as Nigeria confronts multiple infectious threats, including Lassa fever, meningitis, diphtheria, measles and yellow fever. In early 2026, more than 400 confirmed Lassa fever cases were recorded across several states, underscoring the need for strong preparedness

and coordinated outbreak response.

Alongside response activities, NCDC is strengthening preparedness by pre-positioning medical commodities, reinforcing clinical case management protocols, and building healthcare worker capacity to respond to epidemic-prone diseases.

At the centre of Nigeria's public health defence is a nationwide surveillance system that gathers and analyses signals from health facilities, laboratories and communities. These signals



Prevention, early detection, preparedness and rapid response are the foundation of health security. Strengthening surveillance, laboratory systems, case management, and infection prevention and control systems ensures Nigeria can detect threats early and protect both healthcare workers and communities

Dr. Jide Idris, Director-General, Nigeria Centre for Disease Control and Prevention (NCDC)

enable authorities to detect unusual patterns early and initiate investigation and response.

When outbreaks are confirmed, the Incident Management System is activated to coordinate response across federal and state levels. National Rapid Response Teams are deployed to affected areas to support case detection, laboratory testing, contact tracing, and infection prevention and control interventions.

Protecting healthcare workers remains critical. Targeted

Infection Prevention and Control (IPC) interventions support health facilities through assessments, mentoring and refresher training, strengthening triage procedures, isolation practices and adherence to safety protocols.

Nigeria's expanding national laboratory network further supports these efforts by enabling faster diagnosis of outbreak-prone diseases.

Together, strengthened surveillance, coordinated response,

and improved infection prevention practices reinforces Nigeria's capacity to detect outbreaks earlier, respond faster and protect both healthcare workers and communities.

Results Snapshot:

- Lassa fever response coordinated across 18 states and 69 LGAs as of 22 February 2026.
- National Rapid Response Teams deployed to seven high-impact states including Bauchi, Ondo, Edo, Taraba, Ebonyi, Benue and Plateau.
- Infection Prevention and Control (IPC) strengthened in health facilities by addressing gaps identified through assessments, providing technical support, and training healthcare workers.
- Strengthening National Laboratory Network capacity for early diagnosis of epidemic-prone diseases.
- Preparedness, readiness, and response strengthened nationwide through institutionalised clinical case management protocols and stockpiling of essential medical commodities, including laboratory reagents and PPE for healthcare workers.



Community sensitisation engagement conducted as part of outbreak response activities to strengthen awareness and prevention measures in affected communities.

SUPPLY READINESS AND PUBLIC CONFIDENCE IN FOCUS



and distribution coordination, Cold-chain and storage integrity and Emergency response protocols.

The Coordinating Minister of Health and Social Welfare, Prof. Muhammed Ali Pate, emphasised that isolated concerns must lead to systemic strengthening:

“Every life lost is one too many. Our responsibility is to ensure that essential commodities are available where and when they are needed. Where there are gaps, we close them. Where there are weaknesses, we strengthen them.”

This framing situates supply stabilisation not as damage control, but as reform discipline.

Vaccination and the Battle for Public Trust

Parallel to the anti-venom discourse, public attention turned to vaccination after statements from a prominent religious figure discouraged immunisation for children. Nigeria’s immunisation programme protects millions of children annually from preventable diseases. However, misinformation — especially when amplified by influential voices — can undermine hard-earned public confidence.

In recent weeks, two separate public conversations converged into one larger question:

Can the health system deliver lifesaving care reliably — and can Nigerians trust the information that guides their health decisions?

One discussion followed concerns about anti-venom availability after a tragic snakebite case in Abuja. Another emerged after a widely circulated sermon by a popular pastor advising parents against vaccinating their children.

Different triggers. Same underlying theme: system confidence.

Anti-Venom and Emergency Readiness

Snakebite envenoming remains a significant public health challenge in Nigeria, particularly in rural and peri-urban communities. Timely access to anti-venom is critical,

and gaps in supply anywhere in the system can rapidly become matters of life and death.

Recent public scrutiny surrounding a case at a federal facility in Abuja raised broader concerns about anti-venom distribution across Federal Tertiary Health Institutions.

While investigations clarified that the specific incident was more complex than initial reports suggested, the episode triggered a wider internal review of: Anti-venom stock monitoring across facilities, Procurement



Dr. Charles Nzelu, Director of Public Health, underscored the scientific position:

“Vaccines used in Nigeria undergo rigorous regulatory processes. They are safe, effective, and essential for protecting children and communities from preventable diseases. Decisions about immunisation must be guided by evidence, not fear.”

The issue here is not simply disagreement. It is the public health consequence of hesitation in environments where preventable diseases can resurface quickly.

Governance, Oversight, and Institutional Response

For the health system, these moments test more than logistics. They test coordination. The Permanent Secretary, Federal Ministry of Health and Social Welfare, Daju Kachollom S. mni, emphasised that rapid internal audits and cross-departmental reviews were initiated to verify anti-venom stock status nationwide and reinforce communication protocols with tertiary facilities. “Our mandate is to ensure that public health assets are not only procured but tracked, deployed,

and accounted for. Transparency and prompt verification are essential to maintaining public confidence.”

This administrative layer matters. It ensures that public concern leads to corrective action rather than speculation.

Connecting the Dots: Supply and Trust

At first glance, anti-venom logistics and vaccine misinformation appear unrelated. In reality, they intersect at one point:

Public trust in the health system. If lifesaving medicines appear unavailable, confidence erodes. If misinformation spreads unchecked, preventive care declines.

Both scenarios weaken outcomes.

Under the ongoing reform agenda, strengthening supply chain governance, enhancing surveillance of essential commodities, and intensifying risk communication strategies are part of a unified approach to health security.

Prof. Pate reinforced this

alignment: “Health security is not only about infrastructure and financing. It is about trust. Nigerians must be confident that when they seek care, the system is ready — and that the information guiding their decisions is accurate.”

Reform in Action

The recent anti-venom supply stabilisation review and renewed emphasis on vaccine advocacy illustrate a broader shift:

- From reactive clarification to proactive verification
- From isolated response to systemic strengthening
- From fragmented communication to coordinated public engagement

Reform is not measured only by new policies announced.

It is measured by how quickly the system responds when confidence is shaken.

Protecting lives requires commodities.

Protecting outcomes requires trust.

In a reform era, both must move together.



Vaccines are safe, effective, and essential. Public health decisions must be evidence-based

- Dr. Charles Nzelu, Director of Public Health



REFORM SPOTLIGHT – SERVICE DELIVERY UPDATE

EXPANDING SPECIALISED CARE WITHIN A UNIFIED NATIONAL HEALTH STRATEGY

Strengthening Diagnostics, Oncology and Cardiac Services Through Coordinated Governance and Investment

Until recently, many Nigerians requiring specialised diagnostics, cancer care or complex cardiac treatment faced limited domestic options, long travel distances and high out-of-pocket costs. That reality is now being structurally addressed.

As part of a coordinated federal reform agenda led by the Federal Ministry of Health and Social Welfare, specialised healthcare expansion is being implemented as an integrated national priority rather than a stand-alone investment.

At a signing ceremony held in Abuja, the Coordinating Minister of Health and Social Welfare, Professor Muhammad Ali Pate, alongside the Minister of Finance and Coordinating Minister of the Economy, Mr. Wale Edun, and the Honourable Minister of Budget and Economic Planning, Senator Abubakar Atiku Bagudu, formalised a healthcare expansion agreement between the International Finance Corporation, the Nigeria Sovereign Investment Authority and MedServe. The agreement will accelerate the nationwide rollout of affordable diagnostics, oncology and cardiology services.

The programme is designed to strengthen healthcare infrastructure while improving access to critical, life-saving services for Nigerians. In his remarks, the Coordinating Minister emphasised that strengthening advanced diagnostics, oncology and cardiac services is central to improving national health outcomes and building a resilient health system. "Our priority is clear: Nigerians should be able to access

life-saving specialised care without leaving the country or facing catastrophic costs. By strengthening diagnostic, cancer and cardiac services at scale, we are reinforcing the integrity of the entire referral system and improving outcomes across all levels of care."

He noted that the initiative represents structural reform rather than isolated capital deployment. It is designed to integrate specialised care expansion within the Government's broader health sector transformation architecture. The programme directly advances President Bola Ahmed Tinubu's Renewed Hope Agenda by strengthening human capital development and ensuring that health system improvements translate into measurable gains in productivity and national resilience.

Within the Ministry's 4-Point Agenda, the expansion aligns most strongly with the pillar on Improving Health Outcomes, while also contributing to Unlocking the Health Value Chain through strategic infrastructure development and service expansion. By increasing specialised capacity domestically, Nigeria reduces dependency on external treatment markets and retains critical health expenditure within its own economy.

The presence and leadership of the Minister of Finance further underscored the integration of health reform within national economic planning.

"Investing in specialised healthcare infrastructure is both a social and economic priority. By strengthening domestic capacity, we are reducing medical tourism, retaining capital within the country



and supporting a more resilient health system that contributes to long-term economic stability," Mr. Edun stated.

The Honourable Minister of Budget and Economic Planning emphasised sustainability and disciplined implementation.

"This expansion reflects structured planning and alignment with national development priorities. Strengthening specialised health services enhances Nigeria's human capital base and ensures that investments in health are sustainable, measurable and growth-oriented," Senator Bagudu added.

For Nigerians, the implications are immediate and practical. Expanded diagnostic centres enable earlier detection of serious illnesses. Strengthened oncology services increase access to comprehensive cancer treatment within the country. Advanced cardiac care facilities improve emergency response and management of complex heart conditions. Together, these improvements reduce treatment delays, lower financial strain on families and strengthen confidence in care delivered at home.

By aligning international financing with sovereign investment and coordinated federal leadership, the Federal Ministry of Health and Social Welfare is demonstrating that specialised healthcare expansion is not episodic investment. It is embedded within a deliberate, measurable national reform strategy designed to deliver equity, sustainability and long-term system resilience.

MEDIPOOL: A NEW NATIONAL STRATEGY TO LOWER THE COST OF MEDICINES



The Federal Government has taken a decisive step toward reducing the cost of medicines and strengthening Nigeria's health supply chain with the signing of a Memorandum of Understanding to operationalise Medipool as the country's National Group Purchasing Organisation (GPO).

Approved by the Federal Executive Council in 2025, Medipool is designed to aggregate demand for pharmaceuticals and medical supplies across public and private health facilities. In practical terms, this means government and participating institutions will purchase medicines in bulk, negotiate better prices, enforce quality standards, and reduce inefficiencies across the supply chain.

At the signing ceremony held in Abuja, the Coordinating Minister of Health and Social Welfare, Prof. Muhammad Ali Pate, described the initiative as a structural reform in how Nigeria procures essential

medicines.

"The operationalisation of Medipool represents a strategic shift in how Nigeria procures and delivers essential medicines. By pooling demand, strengthening local manufacturing, and improving supply chain transparency, we are lowering costs, expanding access, and building a more resilient health system that protects both the health and finances of Nigerians."

What a National GPO Means for Nigerians

A Group Purchasing Organisation works by combining purchasing power. Instead of hospitals and facilities buying medicines individually at varying prices, demand is consolidated. Larger volume purchasing improves negotiating strength, stabilises supply, and reduces price volatility.

For Nigerians, this translates into:

- Lower prices for essential medicines
- More consistent availability in public facilities

- Reduced stock-outs
- Stronger quality assurance
- Improved financial protection for households

By lowering procurement costs, Medipool also strengthens the sustainability of key national programmes such as the Basic Healthcare Provision Fund and supports broader efforts to unlock value within the healthcare value chain.

Aligning with National Reform Priorities

Medipool advances the Ministry's 4-Point Agenda, particularly the pillar on Unlocking the Health Value Chain, while also contributing to Improving Health Outcomes through better access to safe and affordable medicines. It supports the Presidential Initiative to Unlock the Healthcare Value Chain and aligns with the National Health Supply Chain Transformation Plan. By aggregating demand and prioritising quality assurance, the initiative also strengthens Nigeria's push



to increase local pharmaceutical manufacturing and reduce dependency on imports.

The ceremony brought together leadership across Nigeria's reform architecture, including the National Primary Health Care Development Agency, the Presidential Initiative for Unlocking the Healthcare Value Chain, and the Sector-Wide Approach Coordination Office, reflecting coordinated governance across institutions. Strengthening Governance and Patient Safety Complementing this reform,

the Federal Ministry of Health and Social Welfare has also established a National Taskforce for Clinical Governance and Patient Safety as part of the Nigeria Health Sector Renewal Investment Initiative.

The Taskforce is designed to strengthen clinical standards, accountability, and continuous improvement across public and private health facilities. Its focus is preventive and system-oriented, emphasising learning, capacity building and structured oversight rather than punitive action.

Together, these reforms signal a clear direction: improving affordability, strengthening supply chains, enhancing quality standards, and building a health system that delivers both better outcomes and stronger financial protection for Nigerians.

Medipool is therefore not simply a procurement mechanism. It is a structural intervention aimed at ensuring that essential medicines are affordable, available and safe — consistently and sustainably.

SCALING EARLY DETECTION: NATIONWIDE FREE CANCER SCREENING ADVANCES SYSTEM REFORM

Nigeria's cancer control strategy is shifting decisively toward early detection, coordinated accountability and financial protection as the Federal Government rolls out the 2026 Nationwide Free Cancer Screening and Capacity Building Programme across all six geopolitical zones.

The programme was first flagged off at the Federal Medical Centre, Idi-Aba, Abeokuta, followed by activations at Jos University Teaching Hospital for the North-Central zone and at Alex Ekwueme Federal University Teaching Hospital, Abakaliki, for the Southeast. In each zone, 1,000 Nigerians are receiving free screening for breast, cervical and prostate cancers, with treatment support provided for those



diagnosed. This structured rollout reflects President Bola Ahmed Tinubu's Renewed Hope Agenda and the Federal Ministry of Health and Social Welfare's commitment to strengthening health systems while protecting citizens from preventable deaths and catastrophic health expenditure. Speaking at the initial launch in Abeokuta, the Honourable Minister of State for Health and

Social Welfare, IziqAdekunle Salako, underscored the urgency of early detection.

"Breast, prostate and cervical cancers remain leading causes of cancer-related deaths in Nigeria largely because they are detected late. Regular screening is not optional — it is essential for survival. This intervention is about identifying disease early and ensuring that those who test positive receive appropriate treatment."

The programme targets over 6,000 beneficiaries nationwide during this phase, commemorating World Cancer Day 2026 while embedding screening within a broader reform framework.



From Awareness to System Strengthening

Launching the North-Central activation in Jos, the Permanent Secretary of the Federal Ministry of Health and Social Welfare, Daju Kachollom, mni, described the initiative as a coordinated national response to a growing public health burden.

"This is not just an event. It is a declaration that early detection, access to treatment and dignity in care must not be privileges."

Cancer accounts for nearly 10 million deaths globally each year. In Nigeria, breast, cervical and prostate cancers remain the most prevalent. Cervical cancer, though preventable, continues to claim lives due to late detection, while childhood cancer survival rates lag significantly behind global averages.

To address these gaps, the screening programme is embedded within ongoing cancer reforms that include:

- Establishment of Multidisciplinary Tumour Teams in federal tertiary institutions
- Enforcement of nationally approved treatment guidelines
- Rollout of NCCN-harmonised treatment protocols
- Implementation of the National Chemotherapy Safety Policy
- Expansion of palliative care services

Capacity-building for health-

care workers is being conducted alongside the screenings, focusing on treatment protocols, chemotherapy safety and pain management, with support from the American Cancer Society and other partners.

Reinforcing Compact Accountability and Financial Protection

At the Southeast activation in Ebonyi State, the Permanent Secretary emphasised that cancer control is inseparable from the broader Health Sector Renewal Investment Initiative being implemented through the Sector-Wide Approach framework.

In strategic discussions with the Executive Governor of Ebonyi State, Rt. Hon. Francis Ogonna Nwifuru, she highlighted the importance of aligning state-level commitments under the Health Sector Compact with national reform priorities. Strengthening primary and secondary care as the first points of contact remains essential to ensuring early diagnosis and appropriate referral.

The screening programme also aligns with broader financing reforms. The Ministry is advancing plans for a Cancer Intervention Fund under the National Cancer Control Plan, to be coordinated through NICRAT, alongside a Vulnerable Group Fund designed to cushion catastrophic health expenses.

These mechanisms complement the Basic Health Care Provision Fund and ongoing insurance expansion efforts, reinforcing the Government's strategy to reduce out-of-pocket expenditure while strengthening system resilience.

Moving Services Closer to the People

The nationwide rollout signals a deliberate shift from isolated awareness campaigns to coordinated cancer system strengthening. Screening is being paired with treatment support, financing reform, clinical governance improvements and sub-national accountability structures.

As the programme progresses across remaining geopolitical zones, it reflects a broader reform logic: early detection reduces mortality, lowers long-term treatment costs and protects national productivity.



By integrating screening, treatment protocols, workforce capacity-building and financial protection within a unified reform framework, the Federal Ministry of Health and Social Welfare is advancing a cancer control strategy that is preventive, structured and citizen-centred.

The 2026 Nationwide Free Cancer Screening and Capacity Building Programme is therefore more than a campaign. It is a systemic intervention — one that brings early diagnosis, coordinated care and financial protection closer to Nigerians across the country.



TWICE-YEARLY PROTECTION: NIGERIA ROLLS OUT LONG-ACTING HIV PREVENTION



By Dr. Adebobola Bashorun
Director & National Coordinator,
National AIDS, Viral Hepatitis and
STIs Control Programme (NASCP)

Nigeria's fight against HIV is entering a new phase, powered by science, innovation, and smarter prevention tools.

In March 2026, Nigeria received its first shipment of Lenacapavir (LEN) for Pre-Exposure Prophylaxis (PrEP), marking an important milestone in the country's effort to end HIV/AIDS as a public health threat by 2030.

For individuals who are HIV negative but at substantial risk of exposure, this innovation could be transformative. Unlike traditional oral PrEP, which requires a daily pill, Lenacapavir is a long-acting injectable administered just twice a year, offering sustained protection with far less frequent dosing.

Approved by the Federal Ministry of Health and Social Welfare and supported through the Global Fund, Lenacapavir expands Nigeria's HIV prevention toolkit and reflects the country's continued commitment to evidence-based policy and modern public health practice. Over the past decade, Nigeria has made important progress in reducing new HIV infections through expanded access to testing, treatment, and prevention services. Sustaining these gains, however, requires continuously improving the tools available to individuals and communities. Long-acting injectable PrEP represents that next step.

For many people at risk of HIV infection, daily medication can be difficult to maintain due to lifestyle constraints, stigma, or privacy concerns. A prevention option that requires just two injections per year offers a more convenient and discreet alternative, helping

more people protect themselves while improving adherence to prevention programmes.


To guide the safe and effective use of this innovation, the Federal Ministry of Health and Social Welfare has developed Rapid Advice on the Use of Lenacapavir, complementing the 2024 National Guidelines for HIV Prevention, Treatment and Care. The guidance reflects extensive review by national experts and stakeholders and incorporates emerging global evidence on

demand creation, human resource capacity, financing, and community engagement. Importantly, it also embraces emerging biomedical innovations, including Lenacapavir and Cabotegravir injectable PrEP, ensuring that individuals at risk of HIV have access to prevention options suited to their needs, preferences, and circumstances. Expanding the range of prevention choices within service delivery is expected to strengthen uptake and coverage nationwide.

While oral PrEP remains widely available and effective, long-acting injectable options provide an additional pathway to reach populations who may benefit from less frequent dosing and more discreet prevention methods. Preventing new HIV infections remains one of the most cost-effective strategies for sustaining the national HIV response. By expanding access to prevention tools such as Lenacapavir, Nigeria not only strengthens protection for vulnerable populations but also reduces the long-term treatment burden on the health system. As Nigeria continues to navigate evolving global health financing realities, investments in prevention innovations demonstrate the country's determination to safeguard the continuity of HIV services while strengthening national ownership of the HIV response.

Through sustained collaboration across government, partners, communities, and the private sector, Nigeria's HIV response continues to evolve ensuring that prevention services remain accessible, equitable, and responsive to the needs of those who need them most.

The introduction of Lenacapavir marks another step forward in Nigeria's journey toward ending HIV as a public health threat and ensuring that prevention keeps pace with science.



Innovation in prevention is essential to ending HIV as a public health threat by 2030

long-acting HIV prevention technologies.

The introduction of Lenacapavir is also aligned with Nigeria's National PrEP Implementation Plan (2025–2028), a strategic roadmap developed through collaboration between the Federal Ministry of Health and Social Welfare, NASCP, the National Agency for the Control of AIDS, NAFDAC, state health authorities, development partners, civil society organisations, the private sector, and community representatives.

The plan provides a comprehensive framework for expanding access to HIV prevention services across the country, addressing governance, service delivery, supply chains,

NIGERIA MOVES CLOSER TO ENDING MOTHER-TO-CHILD TRANSMISSION

By Adekemi A. Akhamiokhor

National AIDS, Viral Hepatitis and STIs Control Programme

Nigeria is making significant progress toward eliminating the transmission of HIV, syphilis, and hepatitis B from mothers to their babies, following a major expansion of testing during antenatal care services.

Through support from the Global Fund's GC7 Grant, the National AIDS, Viral Hepatitis and STIs Control Programme (NASCP) under the Federal Ministry of Health and Social Welfare has strengthened efforts to ensure that pregnant women across the country are tested early and linked to appropriate care.

Antenatal care visits provide a critical opportunity to detect infections that can be passed from mother to child during pregnancy, childbirth, or breastfeeding. By integrating routine testing for HIV, syphilis, and hepatitis B into these services, Nigeria is improving early detection and protecting both mothers and newborns.

To guide the effort, the country has developed a National Framework, Roadmap and Implementation Plan on Triple Elimination, providing a coordinated approach for integrating testing and prevention services into maternal and child health programmes nationwide. The results are already visible.

Testing among pregnant women has expanded rapidly over the past two years: HIV testing during antenatal care

2,811,844 women tested in 2023
6,353,841 women tested in 2025

Syphilis testing

1,511,936 women tested in 2023
5,347,348 women tested in 2025

Hepatitis B testing

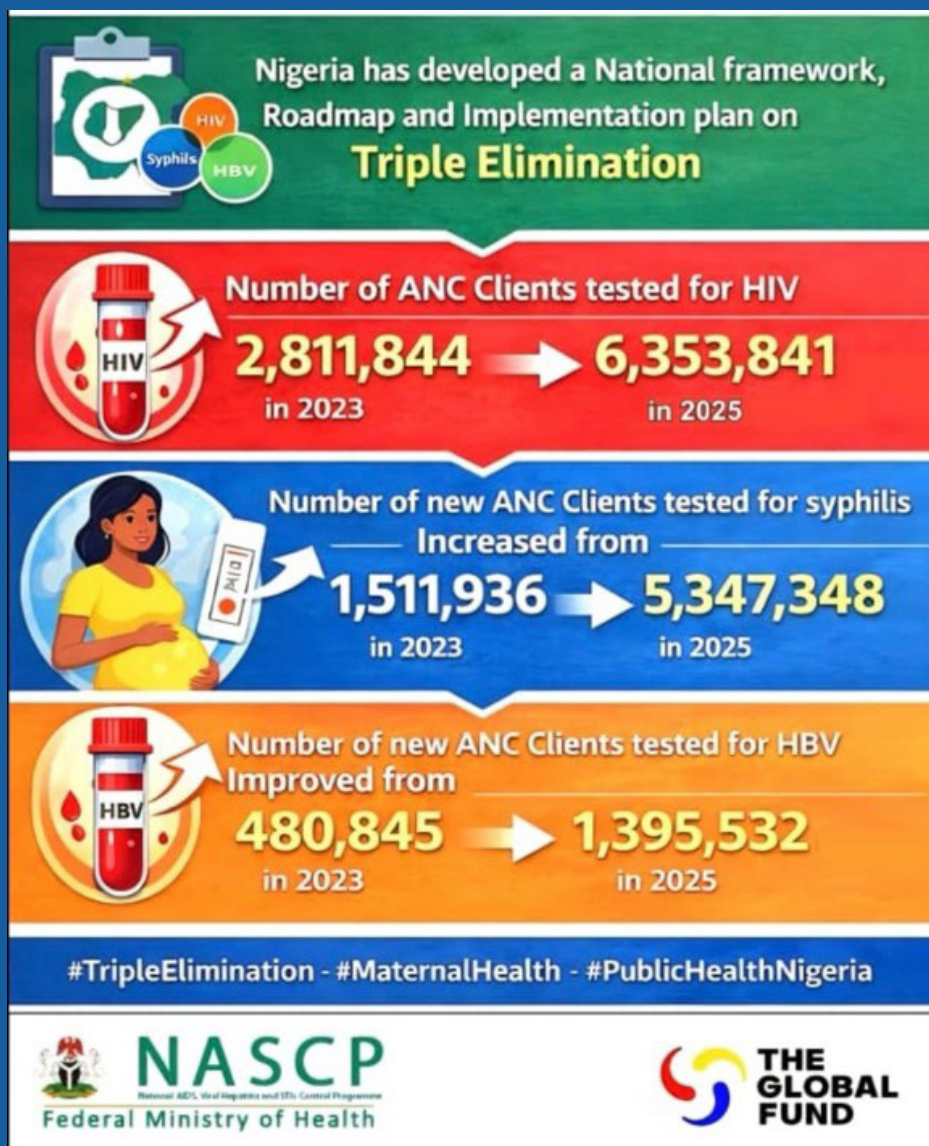
480,845 women tested in 2023
1,395,532 women tested in 2025

According to the Director and National Coordinator of NASCP, expanding maternal health services remains central to achieving elimination.

"Every pregnant woman deserves access to testing and

care that protects her and her baby. Through collaboration with partners and support from the Global Fund, Nigeria is expanding lifesaving maternal health services and making significant progress toward eliminating infections passed from mothers to children."

By strengthening testing and prevention services during pregnancy, Nigeria is moving closer to ensuring that more babies are born free of preventable infections and that families across the country have healthier starts to life.



RESTORING CLEAR SIGHT: HOW PRIMARY HEALTH CENTRES ARE EXPANDING ACCESS TO EYE CARE



By **Odubu Victory Omoriyekemwen**
NESHP

At a primary health centre in northern Nigeria, 52-year-old Aisha had slowly stopped reading the small print on medicine labels and market records. What she thought was failing eyesight turned out to be something far more common. Presbyopia, the age-related difficulty in reading small text, affects an estimated nine million Nigerians and remains one of the most widespread but easily correctable causes of visual impairment.

Today, Aisha reads clearly again after receiving a simple pair of reading glasses through the Presidential Effective Spectacle Coverage Initiative Nigeria (ESCIN), also known as JigiBola 2.0).

The initiative, approved by the President in September 2023 and launched the following month, aims to deliver five million pairs of reading glasses within four years, expanding access to basic eye care services through Nigeria's primary healthcare system. Implemented by the Federal Ministry of Health and Social Welfare's National Eye, Ear and Sensory Functions Health Programme (NESHP) in partnership with the Clinton Health Access Initiative (CHAI),

the programme integrates Primary Eye Care services into Primary Health Care facilities across participating states. Through this approach, trained frontline health workers can now provide presbyopia screening, dispense reading glasses, treat minor eye complaints, and refer complex cases to higher levels of care, bringing essential eye services closer to communities. Following an initial pilot in three states, large-scale implementation began in November 2024 with the training of thousands of primary healthcare workers and the deployment of diagnostic and treatment kits across selected facilities.

To support implementation, the National Primary Eye Care training manual was reviewed and standardized, strengthening

the capacity of health workers to deliver basic eye care services at the community level.

In its first year of scale-up, the programme has already reached millions of Nigerians, many of whom had never previously used spectacles.

For beneficiaries like Aisha, the impact is immediate and practical.

With clear vision restored, she can once again read medicine labels, keep track of market sales, and manage everyday tasks that had gradually become difficult.

To support accountability and performance monitoring, the initiative also introduced a digital reporting system with a centralized dashboard, enabling real-time tracking of services delivered across participating states.

Expansion to additional states is now underway, accelerating progress toward the national goal of providing five million pairs of reading glasses while strengthening Primary Health Care as the foundation for accessible and equitable health services.

As Nigeria continues to invest in PHC-driven health reforms, programmes like JigiBola 2.0 demonstrate how simple interventions delivered close to communities can significantly improve quality of life.





Modibbo Adama University Teaching Hospital, Yola

REFORM SPOTLIGHT | INSTITUTION IN FOCUS

At Modibbo Adama University Teaching Hospital in Adamawa State, a quiet but decisive transformation is underway, one that reflects the growing strength of Nigeria's tertiary healthcare system and its expanding capacity to deliver specialised care within the country.

Under the leadership of Chief Medical Director, Prof. Adamu Bakari, MAUTH operates as a 720-bed federal tertiary facility and a major referral hub for the North-East. The hospital provides comprehensive services across emergency care, specialised clinics and maternal health, while also serving as the teaching hospital for Modibbo Adama University.

Over the years, the institution has played a critical role in expanding access to specialised healthcare in a region historically underserved in advanced medical services, while also functioning as a teaching and research centre for the development of Nigeria's health workforce.

This evolution was brought into sharp focus in March 2026, when a multidisciplinary team at the hospital led by Prof.



Abubakar Auwal, successfully carried out the separation of a set of conjoined twins, Hassan and Hussain. The procedure, completed in approximately three hours, marked the sixth successful twin separation at the institution, reinforcing a trajectory that began in 2013. What was once a rare medical breakthrough has steadily become a demonstration of institutional capability, built on sustained investment in expertise, infrastructure and coordinated care.

The most recent case followed four months of structured clinical preparation, including

multidisciplinary planning, simulation and detailed case reviews. From surgeons and anaesthetists to paediatricians and critical care teams, the operation reflected a system working in sync, where precision, planning and collaboration converge to deliver outcomes once thought to be out of reach locally.

A key driver of this progress is the hospital's Centre of Excellence in Paediatric Surgery, established with support from the Tertiary Education Trust Fund (TETFund) and backed by an investment of approximately 3 billion.



The centre has strengthened MAUTH's capacity to manage complex surgical cases while also advancing training and research.

As a teaching hospital, MAUTH continues to integrate learning into service delivery. During the most recent procedure, the surgery was transmitted live within the facility, enabling trainees and medical personnel to observe in real time. In doing so, the institution reinforces a critical link between care and capacity building, ensuring that specialised skills are continuously developed and retained within the system.

Beyond clinical achievement, the case also highlights an important dimension of ongoing health sector reform: equitable access. Despite the high cost typically associated with such procedures, the surgery and

associated care were provided at no cost to the family. Referred from Taraba State after losing their mother at birth, the twins received comprehensive care from admission through recovery, demonstrating that access to advanced treatment is increasingly being shaped by need rather than financial capacity.

Their steady recovery in the days following surgery reflects not only clinical success but also the impact of a system that is becoming more responsive, more inclusive and more capable of meeting patients where they are.

MAUTH's progress aligns with national priorities to strengthen tertiary healthcare, expand in-country capacity for specialised services and reduce dependence on foreign medical referrals. By combining

infrastructure investment, workforce development and multidisciplinary care models, the institution exemplifies how reform is translating into real improvements in service delivery and patient outcomes. As one of Nigeria's federal tertiary institutions, MAUTH continues to demonstrate what is possible when systems, skills and strategic investment come together.

"At MAUTH, our commitment is to continuously expand the boundaries of what is possible within Nigeria's healthcare system. The successful separation of conjoined twins is not only a clinical achievement but a reflection of sustained investment in our people, our infrastructure and our systems."

We remain focused on delivering specialised, high-quality care while strengthening our role as a training institution for future healthcare professionals. Our goal is to ensure that patients can access advanced medical services within the country, without the need to seek care elsewhere.

We will continue to align our efforts with national health priorities to improve outcomes and expand access to care for all Nigerians."



Partnerships & Leadership

From Summit Halls to Health for All How Nigeria is helping shape Africa's next chapter in health

Policy conversations often begin in conference halls. But the real test of those conversations is whether they eventually change what happens in clinics, laboratories, and communities.

At the recent African Union Summit, health moved firmly into that space between policy and practice. Leaders from across the continent gathered not simply to discuss health challenges, but to confront a bigger question: how Africa can build health systems that are increasingly financed, staffed, and sustained from within the continent itself.

For Nigeria, this was not a new conversation. It was a familiar one.

Across the country, reforms already underway are focused on many of the same priorities highlighted at the Summit: expanding the health workforce, strengthening primary healthcare, improving domestic health financing, investing in disease surveillance, and building more resilient supply chains for medicines and vaccines.

In many ways, the Summit reflected a broader shift in thinking across Africa. The discussion is no longer only about addressing today's health needs. It is about ensuring that the systems designed to meet those needs are strong enough to withstand tomorrow's shocks.

A Continental Shift in Perspective

One of the most significant outcomes of the Summit was the growing consensus that Africa must take greater ownership of the health systems that protect its people.



This includes increasing domestic investment in health, strengthening national workforce pipelines, supporting local manufacturing of health commodities, and improving collaboration between countries on disease surveillance and emergency preparedness.

The conversations also emphasised the importance of community health systems that bring care closer to the people who need it most. For many African countries, including Nigeria, strengthening the link between national policy and frontline service delivery is central to building resilient health systems.

Nigeria's Role in a Shared Future

Nigeria's active engagement in these discussions reflects the country's growing role in shaping continental health priorities. With one of Africa's largest health systems and a rapidly evolving reform agenda, Nigeria is

uniquely positioned to contribute practical experience to regional conversations on health financing, workforce development, and service delivery.

Leadership in this context is not simply about influence. It is about demonstrating what is possible. It means translating strategy into functioning systems and ensuring that national reforms produce measurable improvements in people's lives.

Turning Commitments into Care

Ultimately, the value of continental commitments lies in what they mean for everyday people.

For Nigerians, the direction emerging from the African Union Summit aligns with a future where health services are closer, faster, and more reliable. It points toward stronger primary healthcare centres, better supported health workers, and supply systems that ensure essential medicines and vaccines are available when they



are needed. It also signals a health system that is better prepared for global health threats while remaining deeply rooted in local realities.

As Africa moves toward greater health sovereignty, Nigeria's experience offers an important reminder: meaningful change in health does not happen only through declarations. It happens through sustained reforms, strong institutions, and partnerships that turn shared ambitions into real improvements in care. From summit halls to community clinics, the work of building Africa's next chapter in health is already underway.



Africa's health future must increasingly be shaped, financed, and sustained by Africans themselves. Nigeria is committed to playing its part in building systems that protect our people and strengthen our continent

REWIRING GOVERNMENT FOR BETTER CARE

Why Public Service Reform Is Becoming a Health Reform Tool

When conversations about healthcare reform take place, they often focus on hospitals, medicines, or health workers. Yet some of the most important changes shaping how care reaches citizens happen far away from clinics.

They happen inside government systems.

That reality formed the centrepiece of a recent meeting between the Coordinating Minister of Health and Social Welfare, Prof. Muhammad Ali Pate, and Dasuki Ibrahim Arabi, Director-General of the Bureau of Public Service Reform (BPSR).

The discussion reflected a

growing recognition within government that improving health outcomes requires more than strong medical programmes. It also depends on the strength and efficiency of the public institutions responsible for delivering them.

When Governance Becomes a Health Issue

Policies that take too long to move from approval to implementation can delay improvements in healthcare delivery. Complex administrative procedures can slow procurement, staffing, and programme execution. Weak performance systems can obscure where progress is being made and where challenges remain.

Addressing these issues is precisely the mandate of the Bureau of Public Service Reform.

By strengthening collaboration between the health sector and the broader public service reform architecture, both institutions aim to ensure that government systems enable faster, more responsive service delivery.

"Delivering better health outcomes requires systems that are efficient, predictable, and transparent. Strengthening collaboration with the Bureau of Public Service Reform will help ensure that health policies move faster from approval to implementation."

— Prof. Muhammad Ali Pate
Coordinating Minister of Health & Social Welfare

CONTINUES ON PG 33

IN THE DRIVER'S SEAT

Nigeria redefines health partnerships in a changing global landscape



In global health, partnerships have long been part of the story. But the nature of those partnerships is changing. Across the world, governments are increasingly confronting a new reality: international health funding is shifting, priorities are evolving, and countries must build stronger systems that can stand on their own foundations. Nigeria is no exception.

During a recent meeting at the Federal Ministry of Health and Social Welfare, this changing landscape formed the backdrop of discussions between Nigeria's Minister of State for Health and Social Welfare, Dr. Iziq Adekunle Salako, and His Excellency Félix Costales Artieda, Ambassador of Spain to Nigeria, accompanied by officials from the Spanish Agency for International Development Cooperation.

The conversation was not simply about ongoing programmes. It was about the future of cooperation in a world where countries must increasingly take greater ownership of their health systems.

For Nigeria, that direction is already taking shape.

"We cannot depend on anyone else for the health of our citizens. Nigeria must take responsibility and remain firmly in the driver's seat for the future of our health system." - Dr Iziq Adekunle

Salako, Minister of State for Health and Social Welfare

The Minister's remarks captured a broader shift in thinking across the health sector. International partnerships remain valuable, but



Nigeria values long-standing partnerships such as the one we share with Spain. By cooperation with national priorities, we can strengthen institutions and ensure that collaboration delivers real health impact

— Daju Kachollom S. mni

their role is evolving. Rather than substituting domestic capacity, partnerships are increasingly expected to strengthen it.

This perspective is reflected in Nigeria's current reform agenda, including efforts to expand the health workforce, strengthen service delivery, and unlock the country's healthcare value chain. Collaboration with Spain provides one example of how this approach is unfolding in practice.

Discussions during the visit explored opportunities to revitalise an existing Memorandum of Understanding between both countries, particularly in areas such as technology transfer, pharmaceutical development, and strengthening health systems.

Spain's development cooperation programmes have also supported several global health initiatives in Nigeria, working with partners such as UNICEF and UNFPA on programmes ranging from polio eradication to the elimination of harmful practices such as female genital mutilation.

What distinguishes the next phase of such partnerships is a shared recognition that lasting progress depends on strong national systems.

This means investing in research institutions, strengthening regulatory agencies, supporting local manufacturing of health commodities, and ensuring that innovation translates into better care for communities.

As the dynamics of global health cooperation continue to evolve, Nigeria's approach is becoming clearer: partnerships will remain important, but leadership must remain local.

The driver's seat, after all, belongs to those responsible for the journey.

Why Public Service Reform Is Becoming a Health Reform Tool



CONTINUED FROM PG 31

Aligning Systems for Results

Discussions during the engagement focused on several areas where public service reform can directly support health sector performance.

These include simplifying service delivery processes, strengthening accountability frameworks, expanding digital governance and data-driven decision-making, and improving performance management systems across government institutions.

For the Bureau of Public Service Reform, the health sector represents a critical example of how administrative reforms can translate into tangible benefits for citizens.

Director-General Dasuki Ibrahim Arabi noted that strengthening

institutional performance across government is essential to sustaining national development gains.

"Public service reforms are ultimately about improving the everyday experience of citizens. When institutions work efficiently and transparently, sectors such as health can deliver services faster and more effectively."

— Dasuki Ibrahim Arabi
Director-General, Bureau of Public Service Reform.

Reform Beyond the Health Sector

The collaboration also reflects a broader government priority: building a modern public service capable of delivering results in a rapidly evolving policy environment.

From digital governance

systems to improved workforce management and stronger accountability frameworks, these reforms are designed to help institutions across government operate more efficiently and transparently.

For the health sector, this alignment matters deeply. A stronger public service helps ensure that policies translate into functioning programmes, resources reach the facilities that need them, and reforms move from strategy documents to real improvements in care.

In other words, improving healthcare delivery is not only about what happens in hospitals. It is also about how government works behind the scenes.

And increasingly, those systems are being rewired to deliver results faster for Nigerians.



CONFRONTING THE SILENT PANDEMIC

Nigeria, France deepen cooperation ahead of 2026 Global AMR Conference



Some of the most dangerous health threats do not arrive with dramatic headlines or sudden outbreaks. They emerge slowly, quietly reshaping the effectiveness of modern medicine.

Antimicrobial resistance, or AMR, is one of those threats.

Across the world, infections that were once easily treated with antibiotics are becoming harder and more expensive to cure. Health experts increasingly warn that without stronger action, drug-resistant infections could undermine decades of medical progress.

Nigeria is positioning itself at the centre of global efforts to confront this challenge.

During a recent meeting in Abuja, the Coordinating Minister of Health and Social Welfare, Prof. Muhammad Ali Pate, and the French Ambassador to Nigeria, Marc Fonbaustier, discussed

new opportunities to strengthen cooperation between both countries on health security, pharmaceutical development, and research collaboration.

Their discussions come at a pivotal moment as Nigeria prepares to host the 2026 Global Conference on Antimicrobial Resistance, an international gathering expected to bring together scientists, policymakers, and global health leaders to coordinate action against the growing threat of drug-resistant infections.

Science, Security, and Cooperation

While AMR is often discussed in laboratories and research circles, its consequences are deeply practical. When antibiotics lose their effectiveness, routine infections become harder to treat, surgeries become riskier, and healthcare costs rise significantly.

Addressing the problem requires coordinated action across countries, institutions, and sectors.

Collaboration between Nigeria and France is expected to focus on strengthening surveillance systems, promoting responsible use of antimicrobials, expanding research collaboration, and reinforcing regulatory systems that monitor the production and use of medicines.

"Strategic partnerships remain essential to the success of our health sector reforms. Collaboration with global partners such as France helps accelerate innovation, strengthen technical capacity, and prepare our systems to respond effectively to emerging health threats."

— Prof. Muhammad Ali Pate
Coordinating Minister of Health & Social Welfare

Nigeria, France deepen cooperation ahead of 2026 Global AMR Conference

Strengthening Systems at Home

The discussions also align with Nigeria's broader efforts to strengthen domestic pharmaceutical capacity and expand local manufacturing of essential health products.

Through initiatives such as the Presidential Initiative for Unlocking the Healthcare Value Chain, Nigeria is working to reduce dependency on imports, strengthen supply chains, and stimulate innovation within the country's health sector.

These efforts are particularly important in addressing challenges such as antimicrobial resistance, where access to quality medicines, strong regulatory oversight, and responsible use of antibiotics all play a critical role.

Nigeria as a Global Convening Hub

Nigeria's preparations to host the 2026 Global AMR Conference reflect the country's growing role in shaping international conversations on health security.

The conference is expected to provide a platform for countries to exchange research findings, coordinate policy responses, and accelerate global action against drug-resistant infections.

France has expressed strong interest in expanding technical cooperation with Nigeria in areas such as research partnerships, pharmaceutical innovation, and health security preparedness. Ambassador Fonbaustier noted

that deeper collaboration between both countries will open new opportunities for knowledge exchange and investment in areas that strengthen global health resilience.

A Shared Global Challenge

Antimicrobial resistance does not recognise borders. Addressing it requires coordinated international effort supported by strong national health systems.

Partnerships such as the one between Nigeria and France demonstrate how countries can work together to advance research, strengthen health security, and protect the effectiveness of medicines that millions of people rely on every day.

As preparations for the 2026 Global AMR Conference continue, Nigeria is positioning itself not only as a host, but as an active contributor to the global effort to safeguard the future of modern medicine.



BY THE NUMBERS

System Reset in Data



45 Million Visits

PHC Attendance Surge

↑ From 10 Million



21 Million Nigerians

Health Coverage Expanded

As at December 2025



20,000 Workers

Frontline Health Workforce Recruited



70,000 Workers

Health Workforce Retrained Nationwide



435+ PHCs

Primary Health Centres Revitalised



₦50 Billion

Approved for Arrears &
Professional Support



1,000 per Zone

Early Detection Rollout

Across 6 Geo-Political Zones



6.3M / 5.3M / 1.3M

HIV, Syphilis & Hepatitis B Testing

Among Pregnant Women



1,000 per Zone

Across 6 Geo-Political Zones



6.3M / 5.3M / 1.3M

HIV, Syphilis & Hepatitis B Testing

Among Pregnant Women

*More Nigerians are showing up.
More workers are on the frontlines.
More systems are delivering.*

A Mission to Save Mothers: A Conversation with Prof. Oladapo (Dapo) Afolabi

Behind every national reform effort are professionals translating policy into lifesaving action. In this edition of On the Frontline, we speak with Prof. Oladapo (Dapo) Afolabi, Programme Lead of the Maternal and Newborn Mortality Reduction Innovation Initiative



(MAMII). With decades of experience in reproductive, maternal, newborn, child and adolescent health, he has helped pioneer some of Nigeria's most impactful safe motherhood programmes, from the landmark Abiye initiative in Ondo State to the national strategy now driving efforts to reduce maternal deaths across the country.

Q: What inspired your work in maternal and child health?

Answer: My journey began at the state level, first as Special Adviser to the Governor and later as Commissioner for Health in Ondo State. During that time, I initiated and coordinated the Abiye Safe Motherhood Programme, designed to address the unacceptable levels of maternal and newborn mortality in the state.

The programme achieved a reduction in maternal mortality of more than 75 percent, surpassing the Millennium Development Goal targets and earning global recognition. That success

strengthened my conviction that innovative solutions could dramatically

change outcomes, and I have always looked forward to opportunities to scale such impact nationally.

Q: What maternal health gap was the MAMII programme designed to address?

Answer: Despite years of interventions, Nigeria has struggled to significantly reduce maternal mortality. Over a ten-year period, the figures fluctuated rather than declined meaningfully.

This highlighted the need for a more innovative and coordinated strategy. Under the Federal Ministry of Health and Social Welfare's Nigeria Health Sector Renewal Investment Initiative, the Maternal and Newborn Mortality Reduction Innovation Initiative (MAMII) was introduced as the country's strategy to decisively address these persistent challenges.

Q: What does a typical day coordinating implementation look like?

Our work focuses on the areas where maternal deaths are most concentrated. We identified 172 Local Government Areas across 33 states and developed context specific plans with each state. Implementation is driven by state task forces working with Local Government Primary Health Care Authorities and Ward Development Committees.

My role involves coordinating implementation, monitoring progress through the MAMII dashboard and RMNCAH scorecards, addressing challenges as they arise, and mobilising resources to ensure lifesaving services reach the women who need them most.



A Mission to Save Mothers: A Conversation with Prof. Oladapo (Dapo) Afolabi

Q: Can you share a memorable moment that reflects the programme's impact?

Answer: One moment that stayed with me involved a woman who arrived at a Comprehensive Emergency Obstetric and Newborn Care facility during labour under tragic circumstances. Her home had been destroyed by fire, her only child had died, and her husband was hospitalised with severe burns. When doctors determined she needed a caesarean section, she feared she could not afford it.

But the facility had been empowered to provide free lifesaving caesarean sections. She emotional reminder that these interventions are ultimately about saving lives.

Q: How have recent reforms

strengthened implementation?

Answer: MAMII is a clear example of the Sector-Wide Approach in action. It brings together federal, state and local governments alongside communities under one coordinated framework. It reflects one shared plan drawn from the national health sector blueprint, with unified reporting, budgeting and accountability. This level of alignment has strengthened coordination and improved the ability to deliver results on the ground.

Q: What does safe motherhood mean to you personally?

Answer: Safe motherhood is deeply personal to me. The loss of a mother or newborn creates a profound fracture within families and communities. It affects spouses, children, parents and extended relatives.

Safe motherhood is a calling beyond professional responsibility. It is my mission in life to save the lives of Nigerian women and children from needless death.

Preventing these tragedies is not just professional work for me. It is a calling and a responsibility that I approach with deep commitment and purpose.

Through initiatives like MAMII, Nigeria's health sector reforms are translating into coordinated action where it matters most, ensuring that more mothers survive childbirth and more newborns are given a healthy start in life.

HEALTHY LIVING CORNER

Dr. Uchechukwu NWOKU, National Coordinator National Cancer Control Programme

EARLY DETECTION SAVES LIVES: WHAT EVERY NIGERIAN SHOULD KNOW ABOUT CANCER SCREENING

Cancer is increasingly becoming a major public health concern in Nigeria. Each year, thousands of Nigerians are diagnosed with cancer, and sadly, many cases are detected at advanced stages when treatment becomes more difficult and survival chances are lower.

One of the biggest reasons for this late diagnosis is limited awareness of early warning signs and low uptake of preventive screening services. Yet, many cancers can be successfully treated when detected early. Early detection not only improves treatment outcomes

but also significantly increases survival rates.

Across the world and here in Nigeria, public health experts agree on one clear message: the earlier cancer is detected, the better the chances of successful treatment.

Know the Signs: Early Warning Symptoms

Cancer often begins with subtle symptoms that people may overlook or ignore. Paying attention to changes in the body and seeking medical advice early can make a critical difference.

Some warning signs that should

not be ignored include:

- Unusual lumps or swelling in any part of the body
- Unexplained weight loss
- Persistent cough or difficulty swallowing
- Changes in bowel or bladder habits
- Unusual bleeding or discharge
- Persistent fatigue or weakness

While these symptoms do not always mean cancer, it is important to seek medical evaluation if they persist. Early consultation with a healthcare professional can help identify potential health issues and ensure timely treatment if needed.

Preventive Screening: What Nigerians Should Know

Screening helps detect certain cancers before symptoms appear or at very early stages when treatment is most effective.

Some common screening approaches include:

• **Breast Cancer:**

Women are encouraged to be familiar with their breasts and report any unusual changes to a healthcare provider. Clinical breast examinations and mammography are important screening tools, particularly for women aged 40 and above or those at higher risk.

• **Cervical Cancer:** Cervical cancer is one of the most preventable cancers. Regular screening through Pap smear tests or HPV testing can detect precancerous changes early, allowing treatment before cancer develops.

• **Prostate Cancer:** Men, particularly from age 50 or earlier for those at higher risk, should discuss prostate cancer screening with a healthcare professional. This may include prostate-specific antigen (PSA) testing and clinical evaluation.

• **Colorectal Cancer:** Screening for colorectal cancer is recommended for adults beginning around age 50, depending on individual risk factors and availability of services.

Individuals should consult healthcare providers to determine the most appropriate screening schedule based on age, family history, and personal risk factors.



Reducing Cancer Risk

While not all cancers can be prevented, many risk factors are linked to lifestyle and environmental exposures. Nigerians can reduce their risk by taking simple but important steps:

- Avoid tobacco use and exposure to secondhand smoke
- Maintain a healthy diet rich in fruits and vegetables
- Engage in regular physical activity

consumption

- Maintain a healthy body weight
 - Get vaccinated against cancer-related infections such as HPV and Hepatitis B where recommended
- Adopting healthier lifestyles alongside regular health checks can significantly reduce cancer risk.

Act Early. Save Lives.

Cancer is not always preventable, but early detection gives people the best chance of successful treatment and recovery.

Nigerians are encouraged to pay attention to their bodies, seek medical advice when unusual symptoms appear, and take advantage of available screening services. Routine health checks and preventive screening can help detect cancer early, when treatment is most effective.

Early detection truly saves lives. Pull quote

"The most powerful tool against cancer is early detection. When found early, many cancers can be treated successfully." - Dr. Uchechukwu Nwokwu
National Coordinator, National Cancer Control Programme

Limit alcohol



Cancer is not always preventable, but early detection gives people the best chance of successful treatment and recovery

PHOTO NEWS

Key Engagement Highlights



PHOTO NEWS

Key Engagement Highlights





EXPLAINED

INSIDE NIGERIA'S HEALTH SYSTEM: What The 2025 State of Health Report Reveals

A citizen-friendly guide to what the report measures, why it matters, and what Nigerians should expect from ongoing health sector reforms. Every year, Nigeria publishes the State of Health of the Nation Report (SOHNR) to answer a simple but important question: How healthy are Nigerians, and how well is the health system working?

The 2025 report, which was formally presented to President Bola Ahmed Tinubu in February 2026, provides the latest national snapshot of health outcomes, service delivery and health system reforms across the country.

The report tracks progress across hospitals, primary healthcare centres, disease programmes and national health reforms. It provides policymakers, health workers and citizens with a clear picture of where the country is improving and where more work is needed.

What the Report Measures

The SOHNR examines two major areas: the health of Nigerians and the strength of the health system

that serves them.

1. The Health of Nigerians

The report looks at how people access care and the health outcomes across different groups.

One of the most striking developments in 2025 was the sharp increase in the use of Primary Health Care (PHC) services, which rose from 15.1 million visits in 2024 to over 170 million visits in 2025. This reflects renewed public confidence in frontline health facilities and



The report tracks progress across hospitals, primary healthcare centres, disease programmes and national health reforms

improvements in referral systems. Maternal and newborn care also improved significantly.

- 86.3% of births were attended by skilled health workers.
- Facility-based maternal deaths fell significantly between 2024 and 2025.
- Nearly 2,000 primary health centres now provide round-the-clock safe delivery services.

These gains were supported by stronger emergency obstetric care, improved availability of essential medicines, and nationwide adoption of the WHO Essential Newborn Care framework.

Child health indicators also showed progress.

- Over 2.1 million children received the third dose of the pentavalent vaccine, which protects against several life-threatening diseases.
- Large immunization campaigns reached more than 59 million children for measles-rubella and nearly 39 million children with the novel oral polio vaccine.
- Under-five deaths declined by 18% in 2025.

However, the report also highlights areas that still require urgent attention. Only 20% of children are fully immunized, and about 30% remain zero-dose, meaning they have not received any routine vaccines.

Efforts to tackle malaria and malnutrition also expanded. Seasonal malaria prevention reached nearly 30 million children, while the rollout of the R21 malaria vaccine began in Bayelsa and Kebbi States.

The report also highlights progress in adolescent and adult health.

- 16.7 million adolescent girls received the HPV vaccine, helping protect them against cervical cancer.
- HIV treatment coverage remained above 87%, with over 95% viral suppression among those on treatment.
- Mental health services

Inside Nigeria's Health System: What The 2025 State Of Health Report Reveals



are increasingly integrated into primary care, with thousands of health workers trained in screening and support.

2. The Strength of Nigeria's Health System

Beyond health outcomes, the report evaluates how the health system itself is evolving.

Reforms under the Nigeria Health Sector Renewal Investment Initiative (NHSRII) strengthened coordination across federal, state and local governments. Joint Annual Reviews were conducted in over 90% of states, helping align national and state priorities.

Health financing also expanded.

- National health insurance enrollment increased from 19.2 million to 21.7 million Nigerians.
- Additional funding was mobilized through federal budget allocations and reforms under the Basic Health Care Provision Fund (BHCPF).

The health workforce also grew stronger.

More than 70,000 frontline health workers received training, and the National Health Workforce Registry now covers all states and the Federal Capital Territory. Infrastructure and supply systems also improved.

New tertiary hospitals were commissioned, oxygen production capacity expanded,

“
For Nigerians, the message is clear: a stronger, more responsive health system is being built..”

and solar energy systems were introduced in several facilities to improve reliability of care.

In addition, investments in local pharmaceutical manufacturing and stronger regulation helped remove over 1 trillion worth of falsified and substandard medicines from circulation.

Why the Report Matters

The State of Health of the Nation Report is more than a collection of statistics. It serves as a national accountability tool, helping government and partners track progress toward Universal Health Coverage.

By measuring performance across services, workforce, financing and infrastructure,

the report helps identify where investments are working and where additional attention is needed.

It also ensures that reforms across the health sector are grounded in evidence, transparency and measurable outcomes.

What Nigerians Should Expect

The findings from the 2025 report point to a health system that is improving access and expanding services, particularly at the primary care level.

However, significant challenges remain, including closing immunization gaps, expanding financial protection for more households, and ensuring equitable access to care across all communities.

Going forward, the Federal Ministry of Health and Social Welfare will continue implementing reforms under the Health Sector Renewal Investment Initiative, strengthening primary healthcare, expanding health insurance coverage and improving the quality of care nationwide.

For Nigerians, the message is clear: a stronger, more responsive health system is being built, with the goal that every citizen can access affordable, quality healthcare when they need it.

Testimonial

from the NHF cohort



“

The NHF experience taught me the importance of community engagement and the role of innovative strategies in addressing health challenges. I learned that public health is not just about providing services, but about building trust and empowering communities

”

Adediran Adekunle Solomon

Cohort 1 Fellow, Iwajowa LGA, Oyo State

“

Driven by a deep desire to address healthcare disparities in my community, I joined the prestigious National Health Fellowship, where I honed my skills in healthcare leadership and management. Today, I am a respected figure in Nigeria's healthcare sector, inspiring young professionals and continuing to push boundaries in healthcare delivery

”

Okono Francis Ade

Cohort 1 Fellow, Obanliku LGA, Cross River State

“

Before I joined the National Health Fellowship, health facilities in Jos East relied entirely on manual reporting systems. I took the initiative to conduct digital training and capacity-building sessions for health officers across facilities. The fellowship empowered me to move from observation to action, using data and digital innovation to strengthen the health system and save lives at the community level

”

Jonathan Itsegok Gimba

Cohort 1 Fellow, Jos East LGA, Plateau State



“

I led free Hepatitis B screening outreaches across all 11 wards in Ussa, reaching diverse populations through community gatherings, markets, and religious institutions. This fellowship strengthened my resolve to advocate for special interventions in underserved communities, where early detection and prevention can save thousands of lives

”

Rimannuskep Hagga

Cohort 1 Fellow, Ussa LGA, Taraba State

“

Guided by the leadership and systems-thinking skills I gained through the NHF, I collaborated with the Local Government Health Authority to recruit 170 community health volunteers, including CHEWs, JCHEWs, birth attendants, clinical assistants, and laboratory staff. Today, all PHCs within the LGA are functional, demonstrating the programme's impact in transforming healthcare delivery

”

Saapine Aondoemba Godwin

Cohort 1 Fellow, Konshisha LGA, Benue State

“

This fellowship reinforced my belief in preventive healthcare, strong primary health systems, and data-driven solutions. It was not just a service year but a responsibility. The experience sharpened my skills, deepened my commitment to public health, and strengthened my resolve to make a meaningful contribution to Nigeria's health system

”

Mohammed Mohammed

Cohort 1 Fellow, Misau LGA, Bauchi State

4 - POINT AGENDA

of the Federal Ministry of Health and Social Welfare,
under **COORDINATING MINISTER PROF. MUHAMMED ALI PATE, CON**



RENEWED
HOPE

Improve Governance 01

Enhancing leadership, accountability, and transparency within the health system

Enhancing population health outcome 02

strengthening primary healthcare, reducing the disease burden

Unlocking the health value chain 03

Promoting local production of pharmaceuticals and medical consumables

Strengthening health security 04

Strengthening preparedness, surveillance, and response to public health emergencies.