



Health Ethics & Law
CONSULTING

Insights from the Report of the State of Health of the Nation

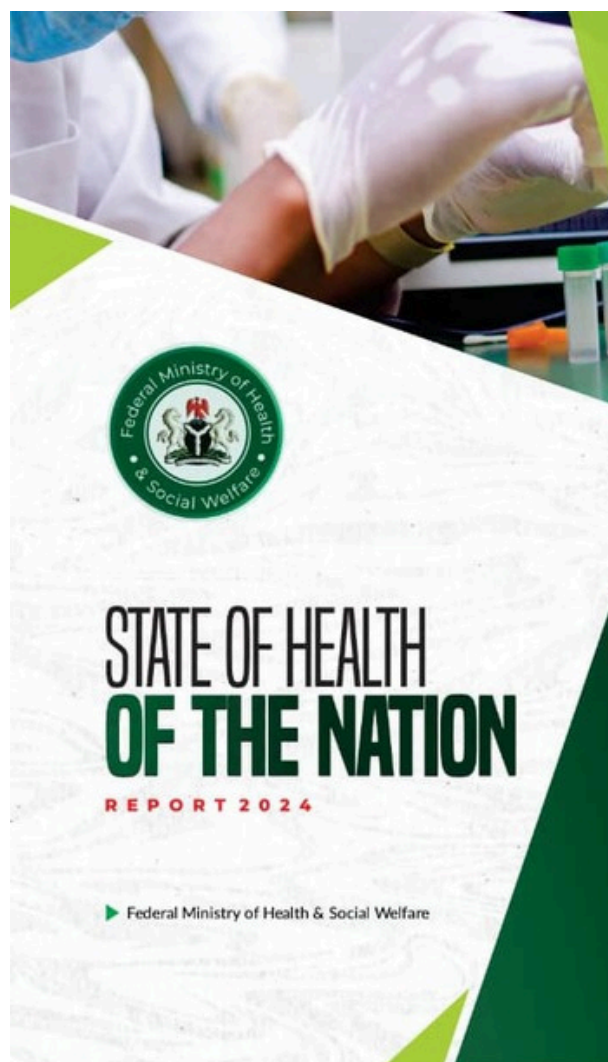
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Introduction

On 7th March 2025, the Federal Ministry of Health and Social Welfare launched the State of the Health Report of the Nation. This is the first comprehensive report since the enactment of the National Health Act (NHA) 2014. The publication of the report is a milestone, delivering the first in-depth evaluation of Nigeria's health sector since the pandemic, equipping policymakers to drive strategic investments and target urgent priorities.

Section 2(2)(d) of the National Health Act (NHA) 2014 requires the Federal Ministry of Health to prepare and present a report regarding the state of health of the nation and the National Health System to the President and the National Assembly annually. Essentially, the report is intended to detail the state of health of the nation and assess the operation of the national health system. The report serves as a critical tool for assessing progress, identifying challenges, and guiding policy decisions to strengthen healthcare delivery in the country.

Compliance with the National Health Act's requirement to prepare this report is essential demonstrating government's commitment to implementation of the law. In addition, it is an opportunity to take stock of the nation's health achievements, setbacks, and opportunities for growth. For example, by compiling data, analysing trends, and presenting actionable insights, the report becomes a roadmap for policymakers, healthcare providers, and stakeholders to address systemic issues and build a healthier future for all Nigerians.



In a country as diverse as Nigeria, the annual report will serve as a unifying tool, thereby providing a common framework for understanding health disparities across regions, genders, and socioeconomic groups.

The 2024 State of the Nation's Health report critically examines the health status of Nigerians, the condition of the health system, and a summary of state reports, amongst other areas. For the purpose of this blog, we will examine Chapter Two of the report, which covers the state of health of Nigerians.

State of Health of Nigerians

This section of the report reviews the state of health of the nation in 2024, covering achievements, challenges, and emerging trends. The 2024 report documents measurable progress in the health of Nigerians, including expanded immunisation coverage and declines in maternal and child mortality. However, persistent disparities remain along gender and other divides. Communicable diseases such as malaria, HIV and tuberculosis, together with noncommunicable diseases, continue to pose significant challenges, exacerbated by unequal access to health care, especially for vulnerable rural populations. Although life expectancy in Nigeria has risen slightly to 54.6 years (54.9 for women and 54.3 for men), it remains substantially below the global average. There is a steady reduction in fertility rate at 4.8, even though it is still one of the highest globally, with rural-urban gaps (5.6 and 3.9) fuelled by unequal access to education and health care services.

Gender and age disparities persist, with rural women facing higher poverty, less healthcare access, and lower education than men. Youth unemployment reaches 8.4%,^[1] disproportionately affecting young women. These disparities exert a demonstrable impact on population health, as poverty and unemployment systematically constrain access to essential healthcare services.

Key Findings

This section of the report comprises six priority areas, examined below.

Improve Reproductive, Maternal, Newborn, Child, Adolescent Health and Nutrition (RMNCAH+N)

According to the 2024 report of the state of the health of the nation, Nigeria's health sector shows progress in reproductive, maternal, newborn, adolescent health, and nutrition through initiatives like the BHCPF, per 2023/24 NDHS data. However, critical gaps persist, particularly in maternal and child health. However, critical gaps remain that demand urgent attention, particularly in maternal and child health services.

Antenatal coverage declined from 57% (2018) to 53% (2023), with urban (78.3%) far outpacing rural areas (34.8%). Skilled birth attendance rose slightly (43% to 46%) but remains low, with extreme disparities, for example, Kebbi (9.6%) and Imo (97.2%).

In the area of family planning and reproductive health, modern contraceptives increased from 12% to 15%, however, unmet need remains high at 21%.

State-level performance shows the following:

- Seventeen states improved above the national average;
- Ten states improved but remained below average;
- Ten states declined or showed minimal progress.

[1] NBS, "Nigeria Labour Force Statistics Report Q1 2024".
https://www.nigerianstat.gov.ng/pdfuploads/NLFS_Q1_2024_Report.pdf

Notably, six states (Delta, Ekiti, Gombe, Imo, Nasarawa, Ogun) nearly doubled their performance, while Bayelsa and Sokoto achieved fivefold improvements. However, only 18.5% of facilities stock oral pills and 17.8% have implants/IUDs, despite 87.7% offering counseling.

In the area of nutrition, child malnutrition indicators show concerning trends. Stunting increased to 39.5% in 2023 from 36.8% in 2013, while wasting rose to 8% after a previous decline to 7% in 2018. Similarly, the proportion of underweight children grew to 27% from 22% over the same period.

Key 2024 interventions include \$4M for family planning, scaling maternal health innovations, and a new Nutrition Task Force.

Accelerate Immunisation

Nigeria's immunisation efforts show progress, with a 2 percentage-point national decline in zero-dose (Penta 1) children from 2018 to 2023/24. While 19 of 37 states improved immunization rates, 13 saw declines (remaining below average) and 6 performed worse than average. Seven states halved zero-dose rates, with Bayelsa achieving a remarkable 45.4 percentage-point increase.

Penta 3 coverage improved 3.3% nationally, with Gombe doubling and six other states nearly doubling their rates. Despite Jigawa reaching 62.2% Penta 3 coverage, 34.3% of children remained unvaccinated. New initiatives vaccinated 12 million girls against HPV, 1.6 million against meningitis in four states, and 10 million during diphtheria outbreaks.

Slow the Prevalence of Non-Communicable Diseases (NCDs)

Hypertension prevalence stands at 31.2% amongst Nigerian adults, causing 11% of deaths. Only 12.1% of facilities offer treatment, with screening disparities (women 52%, men 32%). Diabetes testing shows 19% of women and 17% of men screened, with 1% diagnosis rate.

Reduce Incidence of AIDS, Tuberculosis, and Malaria (ATMs)

HIV infections declined from 86,000 to 75,000 annually, with prevalence falling from 5.8% to 1.4%. Case reports dropped 73% to 127,086 (2024). Current metrics show 86% awareness, 98% ART coverage, and 96% suppression. Mother-to-child transmission prevention reaches 97% efficacy (100% in Yobe, Plateau, Borno, Katsina).

Malaria ACT coverage improved to 56% (Southeast:78%; North Central: 35.7%). ITN ownership ranges from 17% (Enugu) to 86% (Jigawa), with urban usage exceeding rural areas.

Improve Quality of Care (QoC) & Primary Health Care (PHC) Services

The BHCPF 2.0 reforms established performance-based Decentralised Facility Financing, monitored by 774 Performance Facility Monitoring Officers.

The NPHCDA elevated oversight allocations from 5% to 15% of budgets while revising facility funding tiers to ₦800,000 (high-volume PHCs) and ₦600,000 (low-volume), a significant improvement in resource allocation that strengthens primary healthcare delivery nationwide.

Expand Finance Protection (Health Insurance Coverage)

The report further reveals that Nigeria's health insurance coverage reached 9% of the population by 2024, with a 17.5% utilisation rate for services including the Basic Minimum Package of Health Services (BMPHS). While showing progress, these figures remain below the 20-25% target. Significant disparities exist across states. For example, Delta, FCT, Lagos, Ekiti, Nasarawa, Bayelsa, Yobe, Osun, Edo and Enugu account for 56.2% of total enrollments, while 27 states perform below the national average. Despite comparatively higher insurance coverage in some regions, coverage gaps persist, exposing many Nigerians, particularly in populous states such as Lagos and Kano, to financial risk as a result of high uninsured rates. Approximately 30% of insured Nigerians are indigent beneficiaries, with state-level variations. For example, whilst Akwa Ibom covers about 5% of indigent enrollees, Delta achieves 78%.

Conclusion

The 2024 State of the Nation's Health Report marks a critical milestone—the first comprehensive assessment since the enactment of the National Health Act (NHA) 2014.

Although fulfilling this legal requirement is commendable, the true value of the report lies in its ability to expose systemic gaps, regional disparities, and urgent health priorities that demand immediate action.

The findings reveal measurable progress in immunisation, HIV response, and PHC reforms; however, persistent challenges, such as unequal access, maternal health deficits, rising NCDs, and malnutrition, underscore the need for targeted interventions. The report's data-driven insights must transcend documentation to catalyse decisive policy shifts, strategic investments, and accountability in Nigeria's health sector.

To ensure progress, this annual exercise must transcend compliance and become a blueprint for tangible improvements, one that bridges equity gaps in access to health insurance, particularly for vulnerable groups, strengthens primary healthcare in areas such as malaria, nutrition, maternal, and child care services, and ensures no Nigerian is left behind. We anticipate the 2025 report will build on this foundation, tracking how identified challenges inform government action. The government must now institutionalise these findings through systemic reforms, ensuring evidence-based practices become permanent drivers of health equity.

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