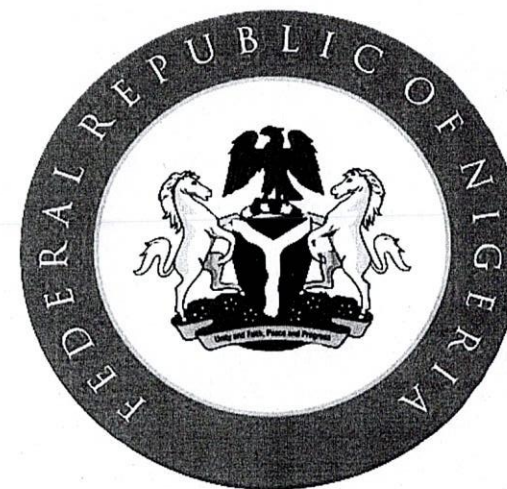


**National Economic Council:
Human Capital Development Core Working Group**

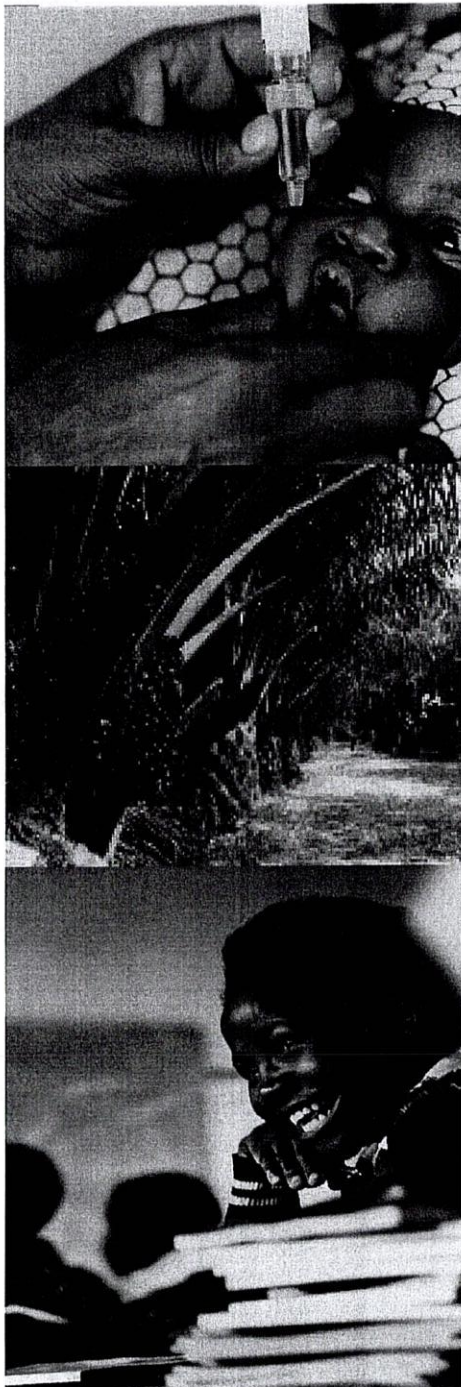
Accelerating Human Capital Development in Nigeria

NIGERIA GOVERNORS' FORUM MEETING

NOVEMBER 14TH 2018



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Objectives for today's meeting

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1 Re-cap Nigeria's Human Capital Development challenge

2 Align on unified vision for accelerating HCD

3 Discuss State engagement and service delivery transformation

4 Share next steps and support required

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1 A number of key events have taken place on the HCD effort — Legend

Event / milestone	Timing	Objectives & outcome	Participants
Health prioritization workshop	Sept 2018	<ul style="list-style-type: none"> 5 core interventions areas were prioritized: Operationalizing BHPCF, Ramping up NHIS, Improving health human resources, Reducing fertility rates, Leveraging the private sector, 3 enabler intervention areas were prioritized : funding, data and governance 	<ul style="list-style-type: none"> ~30 attendees from the Ministry of Health, State representatives, CWG and Donor partners (World Bank, DFID, USAID, Aliko Dangote Foundation)
Education workshop	Sept 2018	<ul style="list-style-type: none"> Prioritized interventions from 60 to 13 core interventions across 3 dimension <ul style="list-style-type: none"> Quality of learning; Teachers, Curriculum Expected years of school: Enrollment rate and Completion rate for primary and secondary school 	<ul style="list-style-type: none"> ~45 attendees from the Ministry of Education, State representatives, CWG and Development Partners
Labour force participation workshop	Sept 2018	<ul style="list-style-type: none"> Alignment on drivers of low participation for youth and suggestion of innovative interventions for Youth in general: classified under Productivity, Access to employment and Self-employment Young women: classified under Expected returns to participation and Barriers to participation 	<ul style="list-style-type: none"> Representatives from Ministries of Labour and Employment, and States. Donors included World Bank, BMGF, and Aliko Dangote Foundation
Visioning workshop	Oct 2018	<ul style="list-style-type: none"> Strong alignment on a single vision, "Healthy, Educated and Productive Nigerians by 2030", with an overall goal for Nigeria to double its Human Capital Index Score (from 0.34 to 0.7) 	<ul style="list-style-type: none"> Representatives from Ministries of Health, Education, Labour and Employment, and States. Development Partners
World Bank Annual Meeting	Oct 2018	<ul style="list-style-type: none"> Nigerian delegation attended World Bank Annual Meetings in Bali where the World Bank had a Human Capital Even and launched its Human Capital Index 	<ul style="list-style-type: none"> Representatives from Ministry of Finance and Office of the Vice President
Steerco	Oct 2018	<ul style="list-style-type: none"> Key decisions made to accelerate HCD: <ul style="list-style-type: none"> Deputy Governors should be States focal persons to ensure HCD effort gets the right level of attention and coordination A new SSA for HCD role should be appointed 	<ul style="list-style-type: none"> Steering Committee

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1 The first Steering Committee was a success in galvanizing strong support on the human capital development effort

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COMMENTS NOT EXHAUSTIVE

Comments from October 4 th SteerCo	Recommendations	Decisions made
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	Unit of measure		
Data	<ul style="list-style-type: none"> Absence of critical data for planning and decision making 	<ul style="list-style-type: none"> Collaborate with NBS to extract data relevant for HCD 	<p>1 Deputy Governors should be States focal persons to ensure HCD effort gets the right level of attention and coordination</p> <p>2 A new SSA for HCD role should be appointed by each Governor</p>
Funding	<ul style="list-style-type: none"> Real challenges persist with existing funds set up for health and education e.g., UBEC has no robust monitoring framework Releases have been limited despite allocation increases in HCD areas 	<ul style="list-style-type: none"> Consider legislative actions <ul style="list-style-type: none"> Review Tet Fund Act and possibly divert resources to basic education fund, UBEC Compulsory NHIS Ensure system in place where Governors accessing funds are tracked Need to mobilize resources and get support from agencies 	
State specificity	<ul style="list-style-type: none"> The bulk of HCD crisis is in Northern Nigeria; critical investments are required in Education and Health 	<ul style="list-style-type: none"> Provide a State level view on data Incentivize States to invest and tie funds to improving outcomes 	
Outcome area	<ul style="list-style-type: none"> Overall HCD will not improve with population growth rates (Nigeria is projected to surpass 300mn by 2050) 	<ul style="list-style-type: none"> Make fertility rates (population) a major outcome area for the overall effort 	

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¹Footnote

1 External players have played a key role in the success of the HCD Strategy visioning to date

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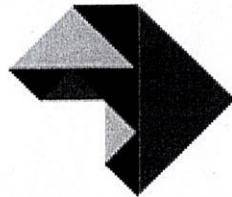
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External donors, partners and

Support received

Aliko Dangote Foundation



DFID

Department for International Development



THE WORLD BANK

The Nigerian Economic Summit Group

- **Aliko Dangote Foundation and Bill & Melinda Gates Foundation** have been instrumental in providing funding for the HCD initiative
- The HCD initiative has also received technical support and baseline and implementation methodology support from other partners including: **DFID, The World Bank and The Nigerian Economic Summit Group.**




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1 Footnote

1 Re-cap Nigeria ranks as a country with low human development, below sub-Saharan Africa average across major indices

Rank Legend

Overview of Nigeria's human capital development performance and ranking

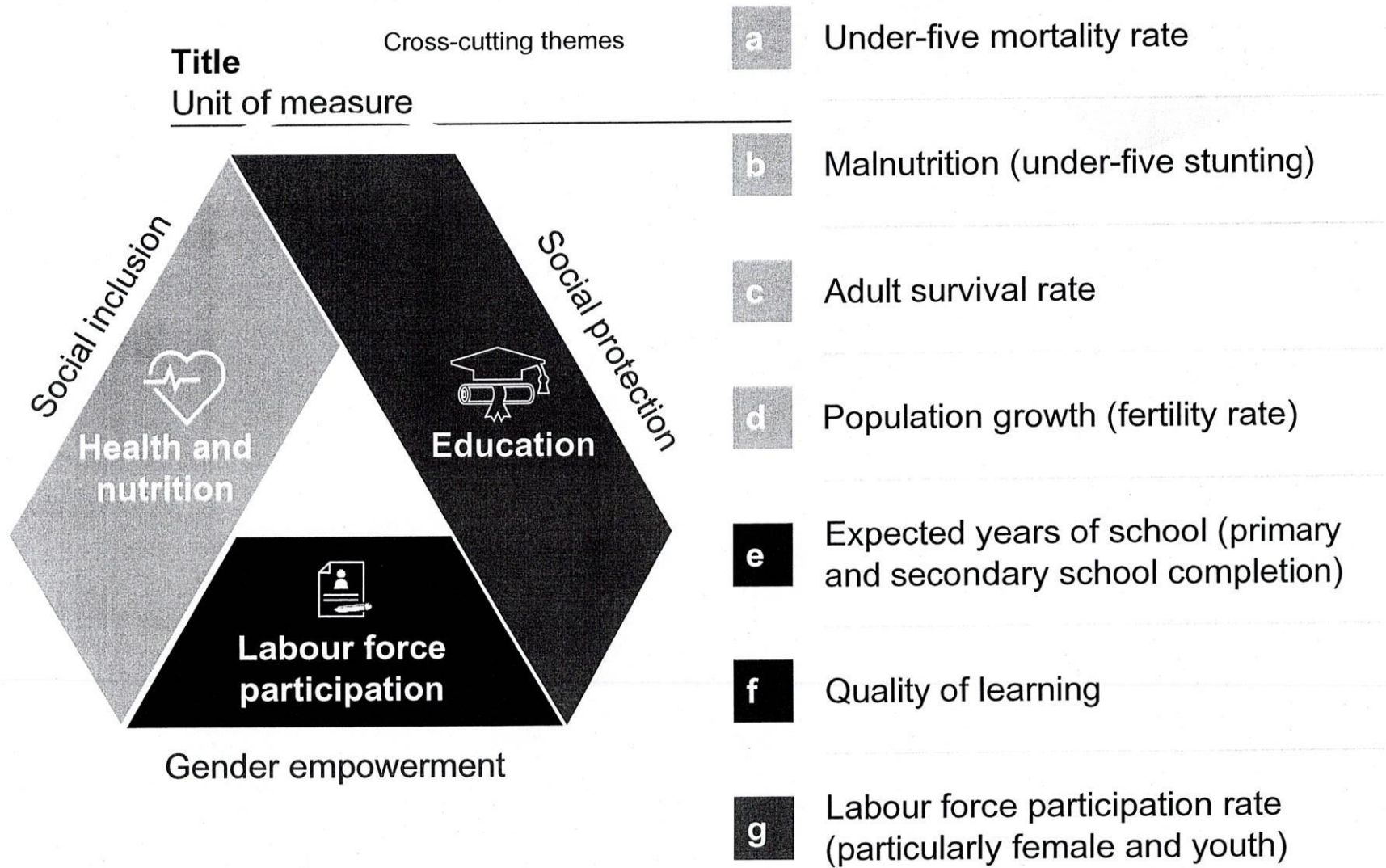
Index	Unit of measure	Best performer	SSA average	Nigeria	Lowest performer
 United Nations Human Development Index (2017)¹	0.95	1	N/A	157	189
 Expected Human Capital Index (2016)²	25.00	1	N/A	171	195
 World Bank Human capital Index (2018)	.88	1	N/A	152	157

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1 The Human Development Index is a summary measure of three dimensions of human development: health (life expectancy at birth), education (mean years of schooling for adults <25 and expected years of schooling for children of school entering age), and standard of living (gross national income per capita)
 2 Definition: expected years lived from ages 20-64 and adjusted for educational attainment, learning, health, and survival

1 Health and nutrition, education, and labour force participation were identified as core thematic areas in this effort

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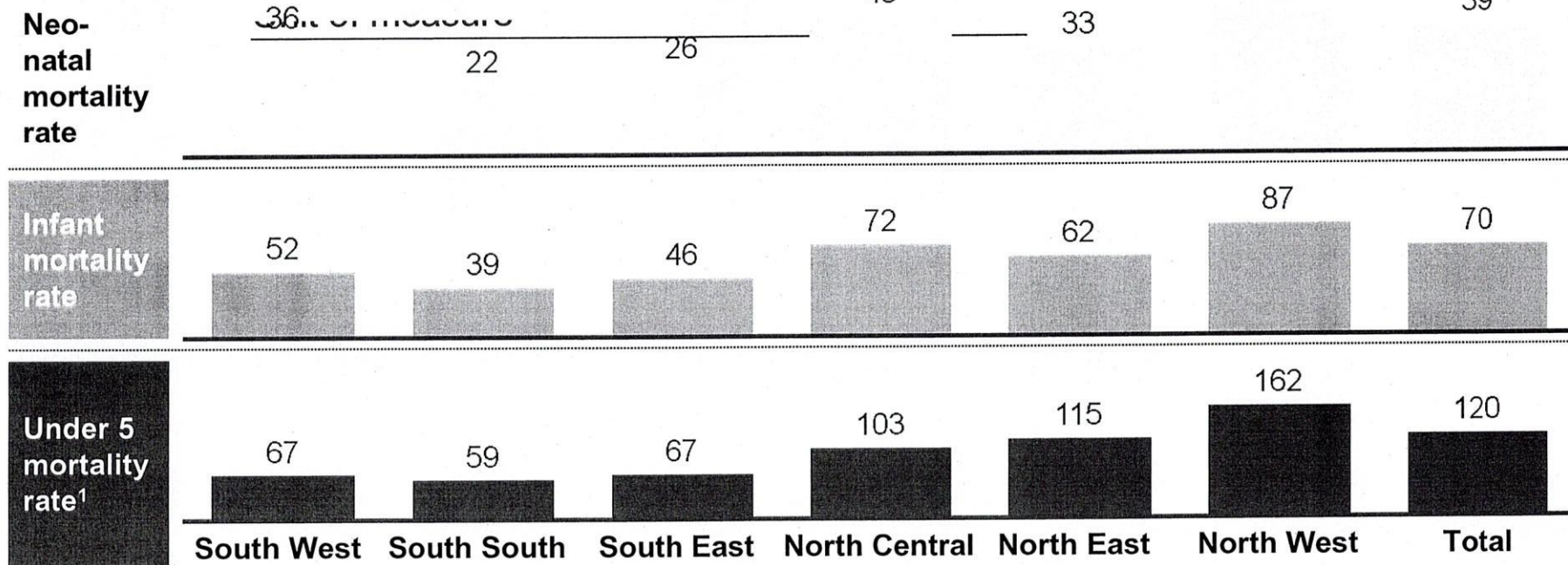


1 Footnote

1 Overall, health and nutrition is primarily a state level challenge, with the lowest indicators in the Northern States

Early childhood mortality rates by geopolitical zone

No. of deaths of children under age 5 per 1000 live births, 2016-17 (MICS)



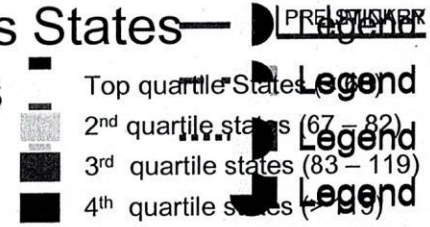
- States**
- Ekiti
 - Lagos
 - Ogun
 - Ondo
 - Osun
 - Oyo
 - Akwa Ibom
 - Cross River
 - Bayelsa
 - Rivers
 - Delta
 - Edo
 - Abia
 - Anambra
 - Ebonyi
 - Enugu
 - Imo
 - Benue
 - Kogi
 - Kwara
 - Nasarawa
 - Niger
 - Plateau
 - FCT
 - Adamawa
 - Bauchi
 - Borno
 - Gombe
 - Taraba
 - Yobe
 - Jigawa
 - Kaduna
 - Kano
 - Katsina
 - Kebbi
 - Sokoto
 - Zamfara

¹ Percent of children selected for survey differs by geo-political zone: N. West- 37.9%, N. Central- 16.4%, N.East- 21.5%, S.East-5.5%, S. South-8.1%, S. West- 10.6%

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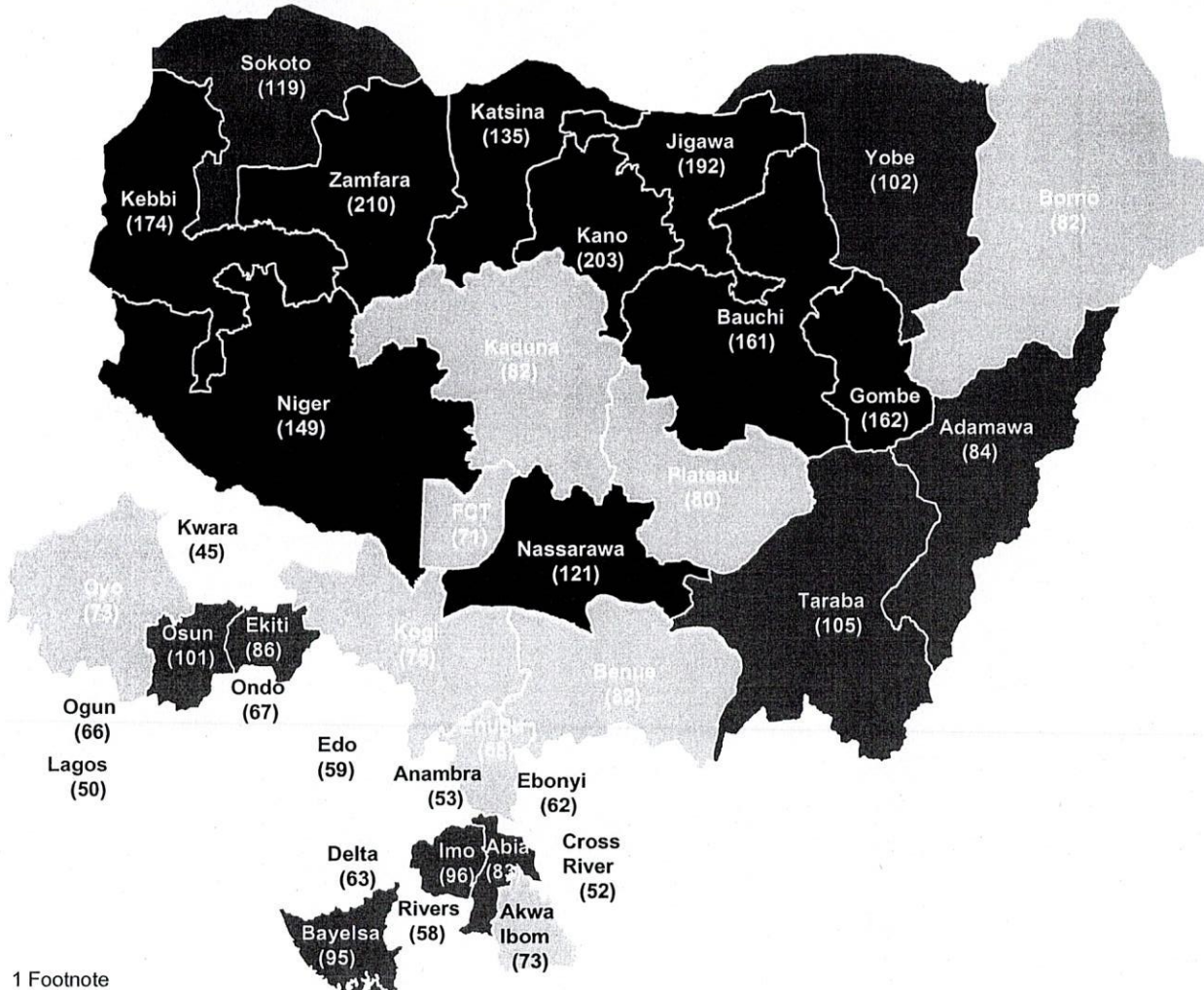
1 Wide variation exists in under-five mortality rates across States —

Subwith a range from 45 to 210 deaths per 1,000 live births



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Under-five mortality rate by State 2017, No. of deaths per 1000 live births



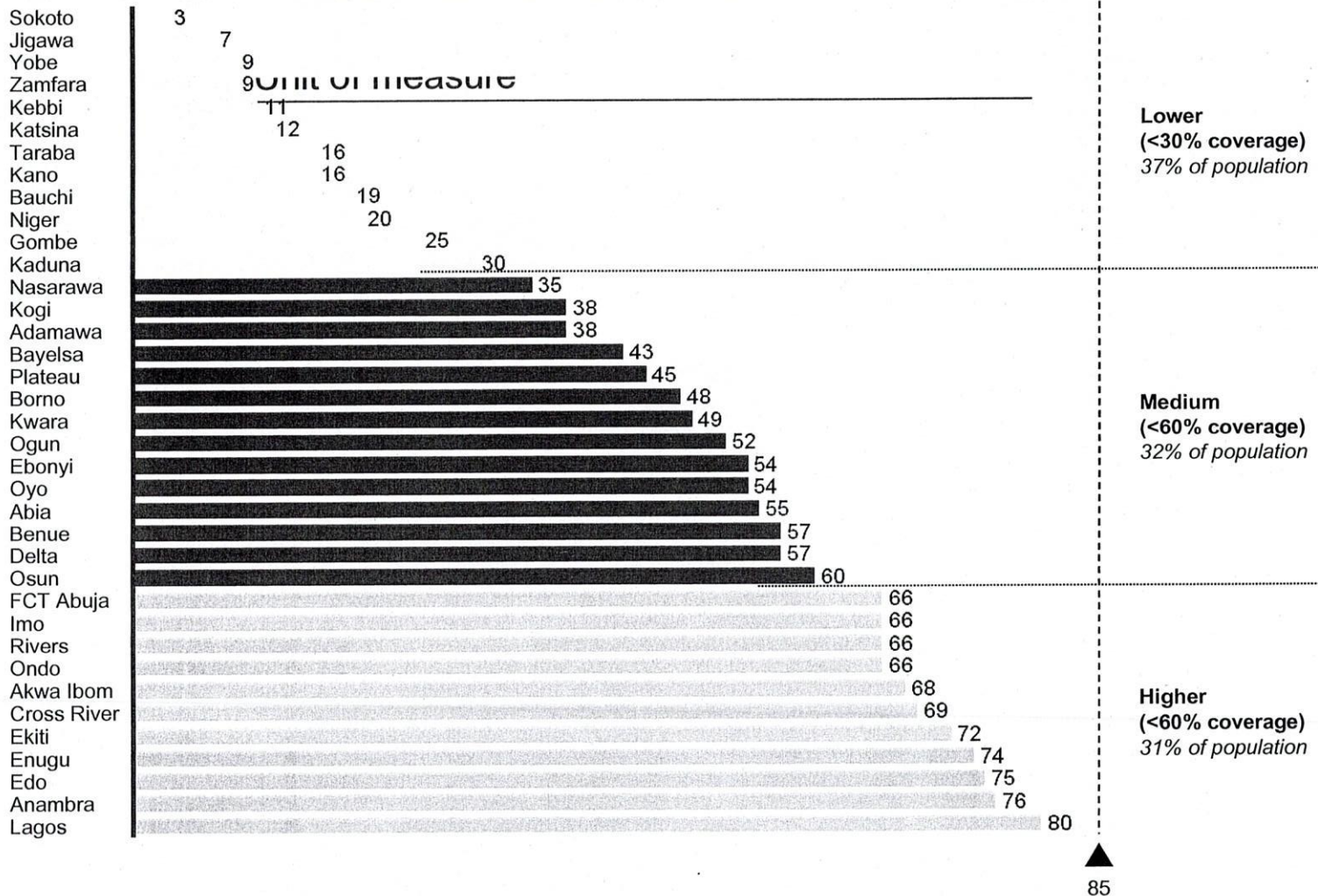
- Most states with high Under 5 mortality deaths (>100) are in the North
- Significant variation across States, for example:
 - High-performing States like Kwara at 45/1000 live births (comparable to India's 43)
 - Other States have rates that are worse than the lowest performing country globally, Somalia (2016 rate of 133)
- Even within regions, significant disparity exists
 - 203 in Kano vs 82 in Kaduna
 - 83 in Abia vs 53 in Anambra

1 Footnote

1 Immunization coverage in Nigerian States show huge variation

Subtitle: Across 3 categories, all States fall below global average target of 85%

2017 Full immunization coverage by State, % coverage of DTP-3¹



Full immunization coverage is an important proxy for under five mortality as vaccine preventable diseases (e.g., pneumonia) and malnutrition are major contributors to mortality rates

All States fall below global average targets for immunization coverage of 85%

¹ Diphtheria-tetanus-pertussis (DTP3) vaccine, protecting children against infectious diseases that can cause serious illness and disability or be fatal

SOURCE: National Bureau of Statistics (NBS) and United Nations Children's Fund (UNICEF). 2017. Multiple Indicator Cluster Survey 2016-17, Survey Findings Report. Abuja, Nigeria:

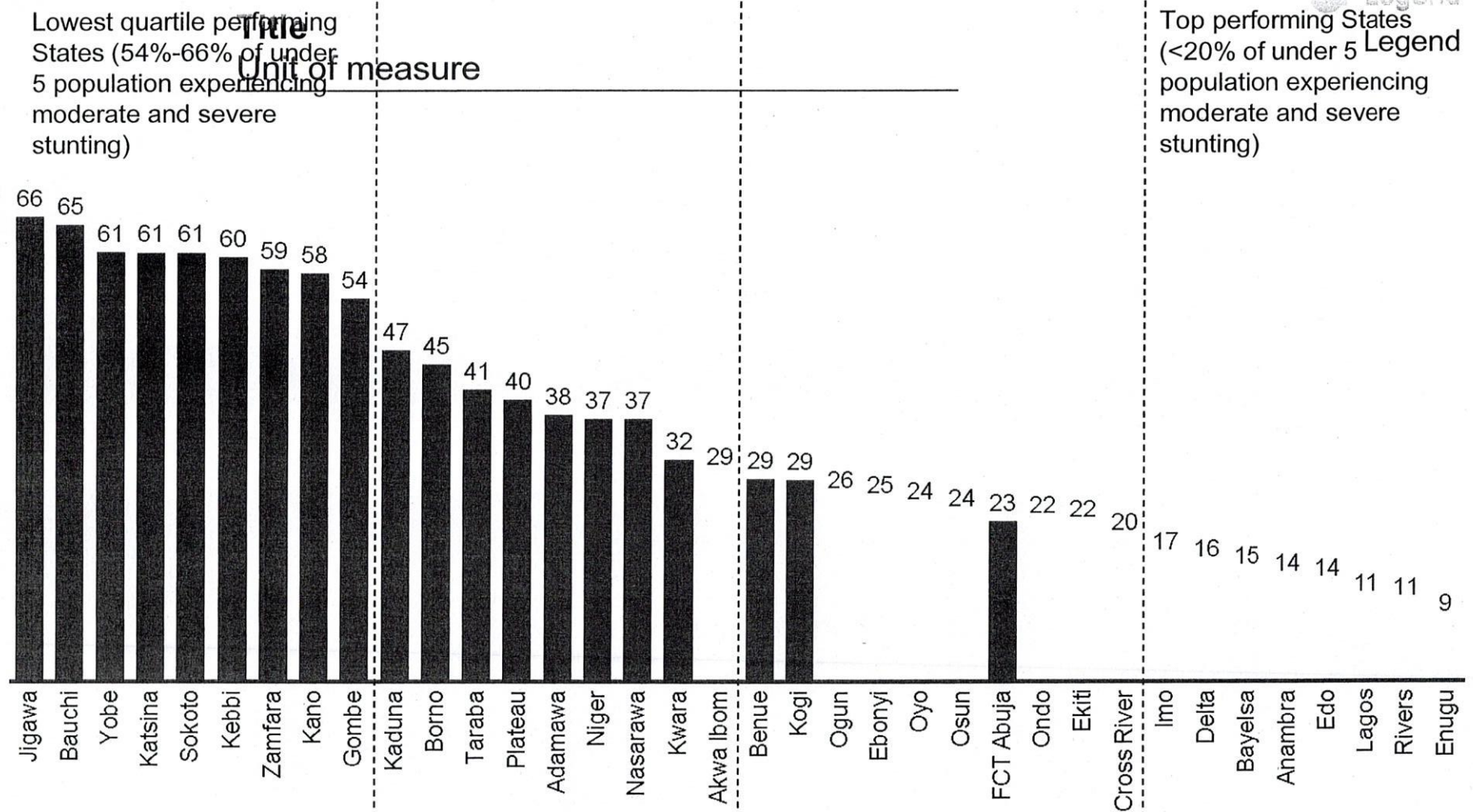
SOURCE: National Bureau of Statistics and United Nations Children's Fund.

1 Stunting rates are highest in the Northern States which also have the highest poverty rates

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- South
- North

Under 5 stunting rate (moderate and severe 2017, % of under 5 population)



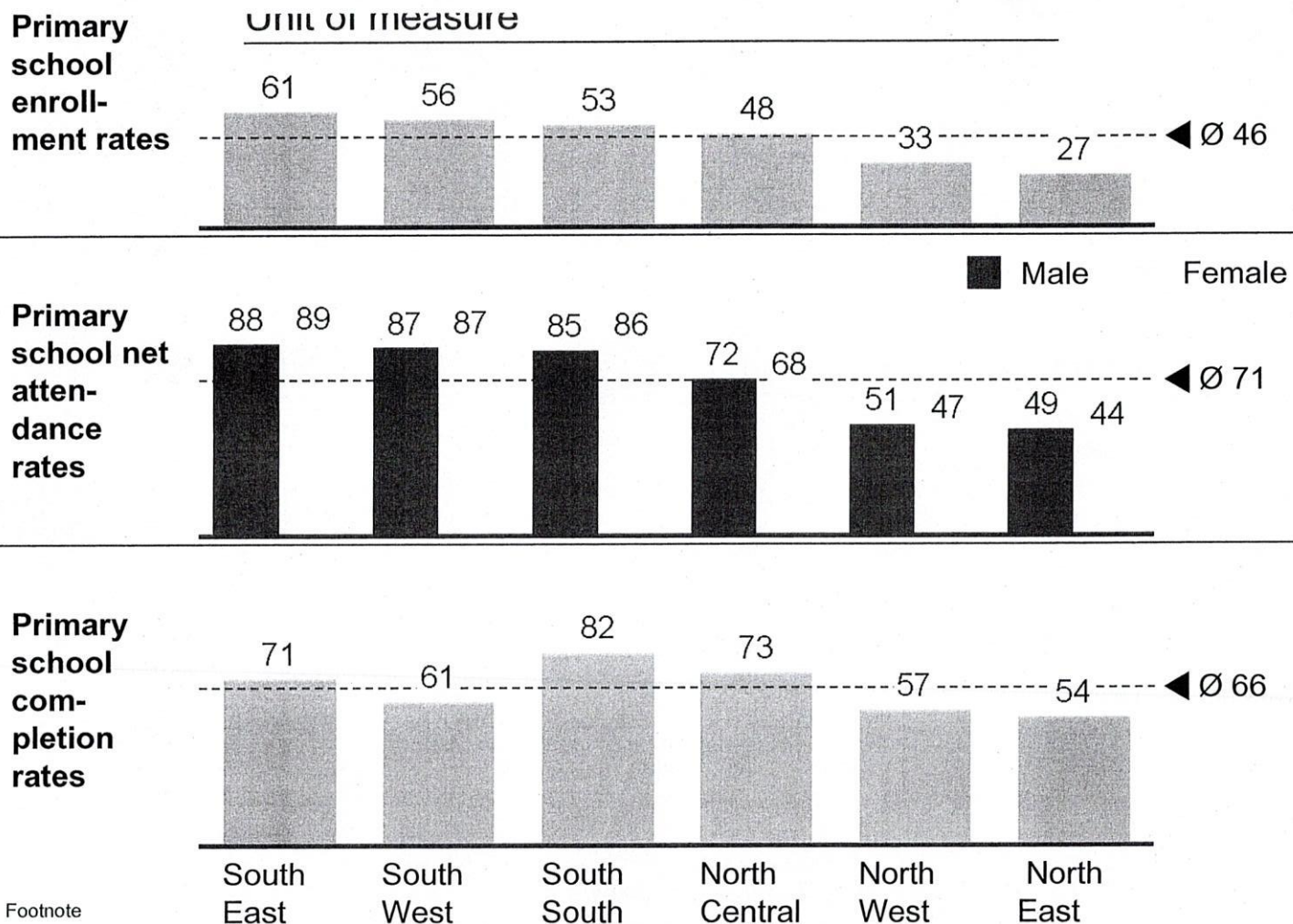
1 Footnote

1 Household survey results report a wide variation in geo-political zones in key indicators for expected years-of school

Primary school enrollment rate, net attendance rates and completion rates 2016, %

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Insights Legend

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- Primary school intake rate into grade 1 is below average across the Northern regions
- The average enrollment rate is ~50%
- Similarly, net attendance rates are low at primary school level and the gender gap is prominent in the Northern States
- The completion rate of primary education is generally high, ~66% across the regions

1 Footnote

2 Nigeria's vision to accelerate Human Capital Development by 2030

Subtitle




Healthy, Educated, and Productive Nigerians for a globally competitive nation by 2030

Overall target

~24 million additional healthy (under-five year old children surviving and not stunted), educated (completing secondary school) and productive (youth entering the labour force) Nigerians by 2030¹

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State-Led Service Delivery Transformation			
Strategic themes	Health and nutrition 	Education 	Labor force 
Vision	<ul style="list-style-type: none"> Provide equitable access to affordable and quality healthcare for every Nigerian 	<ul style="list-style-type: none"> Promote a quality, inclusive and functional education system 	<ul style="list-style-type: none"> Empower youth to have the capacity and skills to create or seek employment
Targets	<ul style="list-style-type: none"> Improve nutrition and reduce childhood stunting by half, from 44% to 22% by 2030 Reduce under 5 mortality rate by half, from 120/1000 U5 population to 60/1000 by 2030 Reduce maternal mortality by half, from 576 deaths/100,000 live births to 288 by 2030 	<ul style="list-style-type: none"> Double primary school enrolment rates from 46% to ~90% by 2030 Double female enrolment Double secondary school completion rates from 42% to ~80% by 2030 Reduce out-of-school children (~10m) by at least 70% Primary school literacy and numeracy skills test (to be established) Teacher learning assessment (to be established) 	<ul style="list-style-type: none"> Double youth participation in labour force from 23% to 46% by 2030 Double female labour force participation from 21% to 41%
Cross-cutting enablers	<p>Data: Improve data collection at Federal, State and LGAs for optimal tracking and data-driven decision making</p> <p>Funding: Increase allocation and release of funds and employ effective financing mechanisms</p> <p>Governance: Drive greater political commitment to ensure improved coordination and accountability</p>		

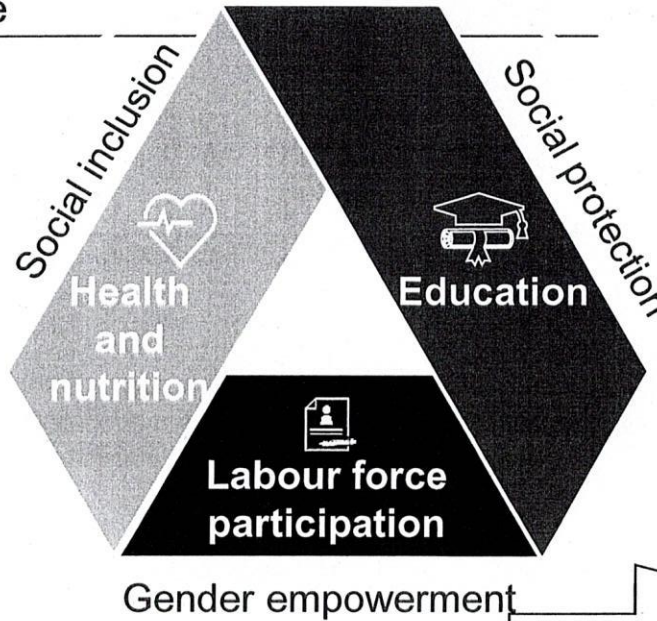
¹ SOURCE: SOURCE
Detailed description of analysis in back-up

3 By meeting targets across outcome areas health, education and productivity improvements are expected for ~24 million people

1 1.8m more under 5s surviving annually and entering the education system

2 5.8m fewer children stunted, with the ability to realise their full potential

3 Increased availability of contraception to allow families to plan for their children



4 14.3 m more children completing secondary school, and better prepared to enter the labour market

5 Improved quality of learning leading to a more productive labour force

6 1.9m additional youth in the labour force in 2030

Analysis indicates total of ~20-24 million additional healthy (under-five year old children surviving and not stunted), educated (completing secondary school) and productive (youth entering the labour force) Nigerians by 2030¹

Estimated 24 million to Benefit from

¹ Estimated 24 million number was calculated based on the additional impact that will incur for each of the thematic areas if HCD targets are achieved by 2030

3 A preliminary list of interventions has been identified across HCD Sub-thematic areas for States to accelerate

DETAILED INTERVENTIONS Legend

Health	Education	Labor force
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- Basic Healthcare Provision Fund**
 - 1 Operationalization of the **Basic Healthcare Provision Fund (BHPCF)**
 - 2 Implementation and ramp-up of **NHIS to reduce out-of-pocket spend**

- Fertility**
 - 3 **Free family planning programs** and increased education

- Funding in health**
 - 4 **Effective financing mechanisms** to drive desired outcomes

- Human resources**
 - 5 **Recruitment and training** of health workers including CHEWs and Increased incentives for personnel going to underserved areas

- Private sector**
 - 6 **Leveraging private sector capacity** to fill capacity gaps in service delivery

1 Footnote

SOURCE: Intervention prioritisation workshops

- Expected years of school (enrollment and completion)**
 - 7 **Roll out interventions for marginalized boys** e.g., merit based scholarships, advocacy from influential leaders
 - 8 **Roll out girls education initiatives** to boost girls completion of basic education e.g., CCTs, free education for girls in JSS





- Quality of learning**
 - Teachers**
 - 9 **Revamp NCE and optimize the process for how teachers get certified**
 - 10 Improve professional development and **performance management** including **learning assessments**, providing motivation for low skills teachers and clear process for remedial actions to performance
 - Pedagogical interventions**
 - 11 **Revise curriculum of what is being taught, and methodology of teaching** to a more directive style i.e. the use of lesson plans

- Youth participation**
 - 12 **Improve management and strategic focus of TVET** e.g., revise curricula, management partnerships with private sector, write a National Skills Strategy based on future industry demand
 - 13 **Improve access to job market information** e.g., introduce community employment centres
 - 14 **Implement legislative action to increase hiring**

- SME support**
 - 15 **Financially assist SMEs** through improving credit systems and increasing access
 - 16 **Technically assist SMEs** through strengthening supply chains, creating an enabling digital environment and training

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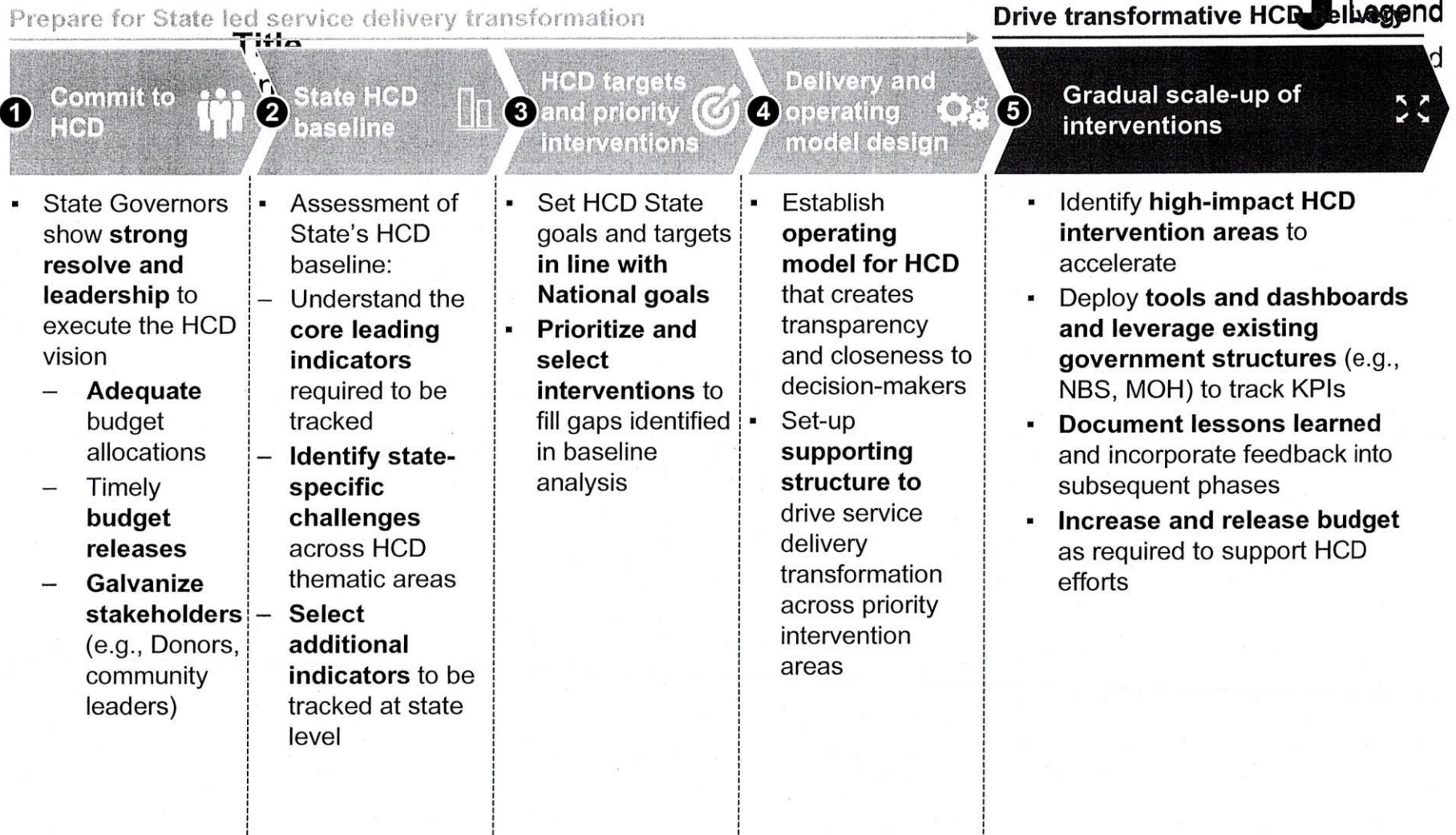
3 There are four guiding principles that would ensure the success of State-led Human Capital Development service delivery transformation

Guiding Principles	Specific considerations
<p>1 Pragmatic and results-oriented mandate</p> 	<ul style="list-style-type: none"> Focus attention and resources on the issues that matter the most Set specific targets and KPI's Align with internal and external stakeholders to establish sense of purpose and momentum
<p>2 Investment in a skilled and capable team</p> 	<ul style="list-style-type: none"> Recruit leadership and top talent from the public and private sectors to ensure a doer approach, focused on results Assign clear roles and responsibilities Empower and train team to deliver on transformation targets
<p>3 Evidence-based decision making</p> 	<ul style="list-style-type: none"> Collect and track timely and credible performance data across all indicators Use collated data to design and improve interventions Benchmark consistently against peers
<p>4 Leverage partnerships and collaborate with the community, private and social sectors</p> 	<ul style="list-style-type: none"> Mobilize donors around delivery efforts and harmonize donor and government interventions Leverage private sector and community service providers expertise for roll-out and scaling up interventions Ensure community ownership, identifying key influencers and change agents

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3 There are a set of recommended steps for States to accelerate human capital service delivery

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1 There is a wide community of support to help States successfully drive HCD implementation

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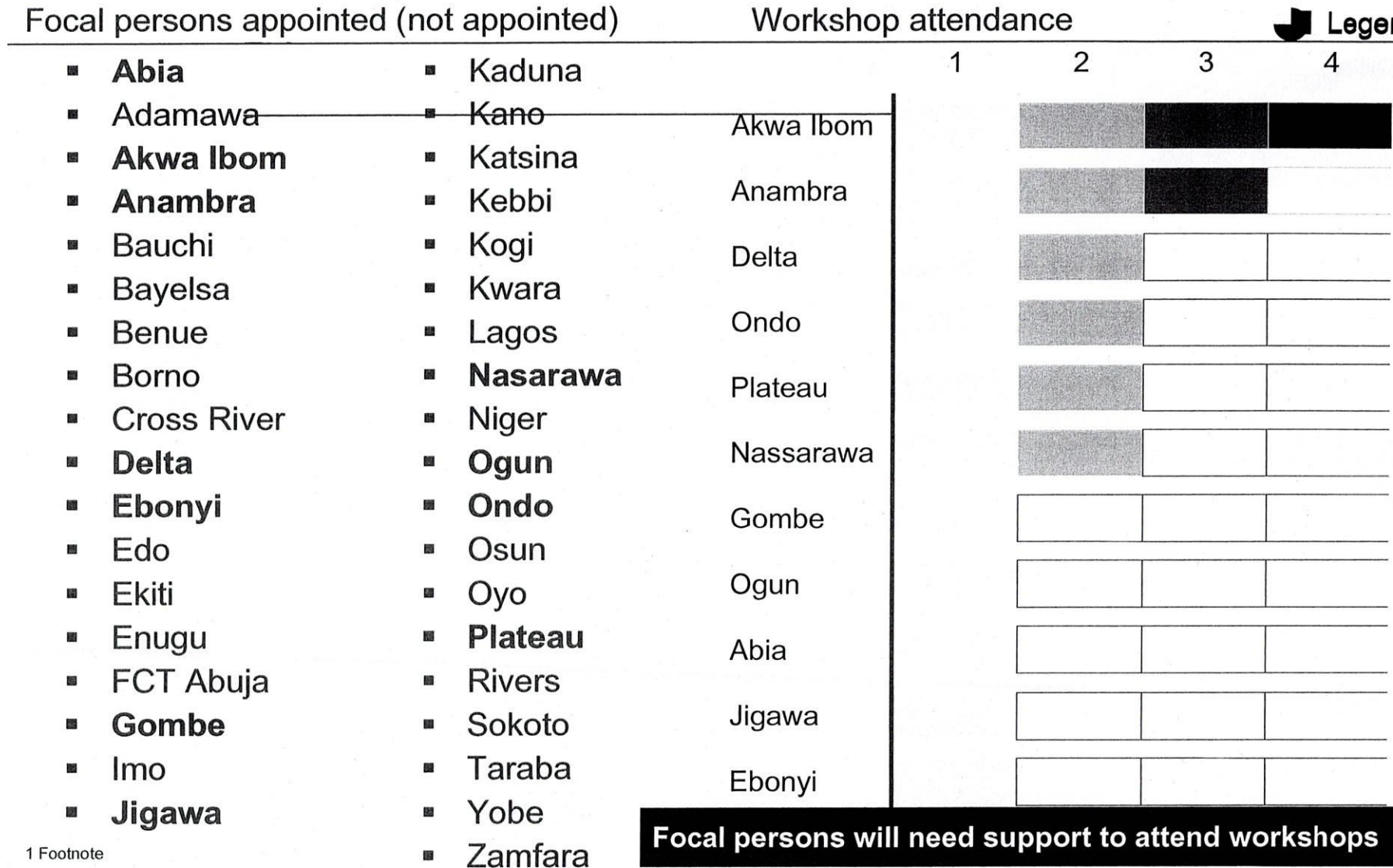
	National	Development partners	CSOs and NGOs	Others
Organisations				
Support provided	<ul style="list-style-type: none"> Baseline and implementation methodology support Policy creation to drive HCD in states 	<ul style="list-style-type: none"> Technical support Funding Content expertise 	<ul style="list-style-type: none"> Advocacy on policy Push for transparency and accountability 	<ul style="list-style-type: none"> Capabilities to fill public sector capacity gaps (data management, IT infrastructure etc.) Technical support

3 11 State focal persons have been appointed and attended workshops regularly, 25

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Focal persons will need support to attend workshops

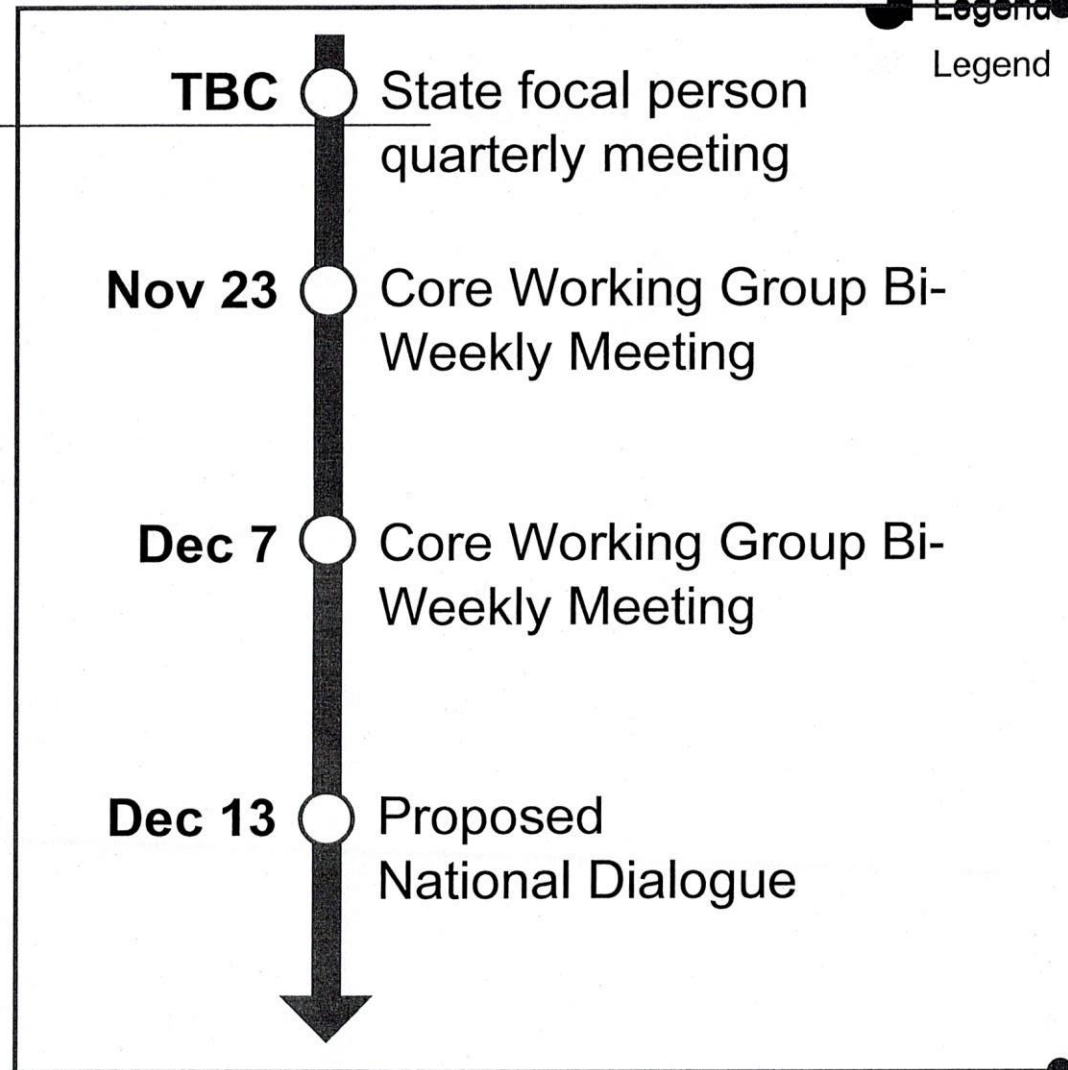
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SOURCE: Source

4 Next steps and key upcoming meetings

Support required

- Commit to accelerate Human Capital Development in State:
 - Assign State focal person for Core Working Group
 - Set-up sub-national HCD infrastructure (e.g., State Human Capital Development Committee)
 - Identify and prioritize interventions to accelerate across the 3 thematic areas

Next steps and upcoming meetings



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Proposed plan for the national dialogue

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Subtitle

Description

Purpose

- Share the vision for Human Capital Development in Nigeria:
 - ~24 million additional healthy, educated and productive Nigerians by 2030
- Ensure citizen and stakeholder buy-in for vision



Approach

- Single national conference bringing together all stakeholders
- Six conferences held in each of the geo-political zones

Convener

- National Economic Council:
 - Government representatives (MDAs and other govt. agencies)
 - Development Partners (USAID, Gate, Dangote, DFID, etc.)
 - Nigerian Governors Forum



Participants

- The dialogue will engage ~300 participants including:
 - State Governors
 - National Assembly (Relevant Committee Chair Persons) (~12)
 - Traditional and religious rulers (~20)
 - All members of the Core Working Group (~20)
 - Focal persons and other delegates for each state (~72)
 - Professional Bodies (~15)
 - All civil society organizations (~60) and trade union reps (~40)
 - Members of the press corps (~30) and Citizens (~50)

1 Footnote

SOURCE: Source