



# NIGERIA GOVERNORS' FORUM



## Kano State Health Profile Centre of Commerce



Universal Health Coverage



RI/Polio Eradication



Nutrition



Health Security



*Your Excellency,*

*This profile gives a snapshot of the key health indices in your state as well as some of the key actions your excellency needs to prioritize to build a stronger and resilient health system for better health outcomes.*

*Signed*

*DG NGF*

# Get to Know Kano State



Kano state, ranked 1st in terms of population size and has a population density of 792 persons/km<sup>2</sup>.



Created

27/05/1967



Land Mass

20,131 km<sup>2</sup>



Population

15,952,449



LGAs

44



Political Wards

484



Under 1 Population

638,098



Under 5 Population

3,190,490



Women of Child Bearing Age

3,509,539



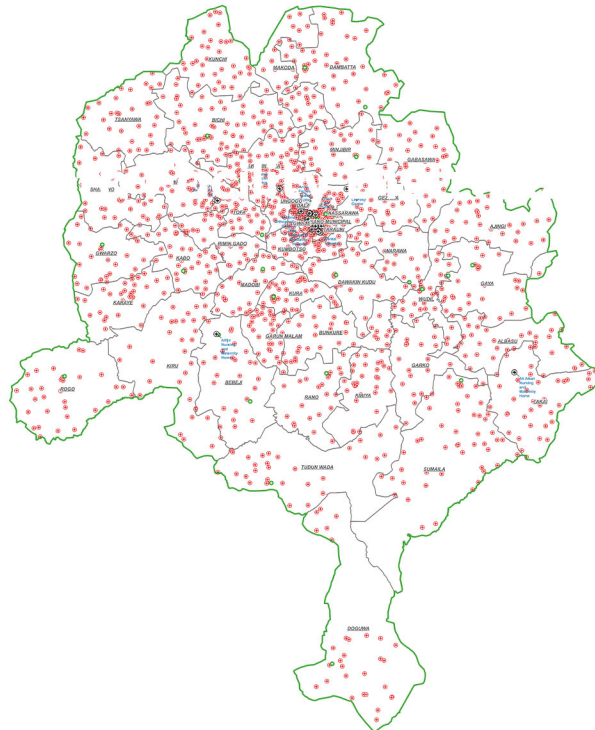
Pregnant Women

797,622

# Health Facility Distribution



No Data



⊕ Primary Health Facility ⊕ Secondary Health Facility ⊕ Tertiary Health Facility □ Local Government Area Boundaries □ State Boundary

🏠 Primary -

Public: -

Private: -

🏠 Secondary -

Public: -

Private: -

🏠 Tertiary -

Public: -

Private: -

Health Facility Per Capita -  
Population

N/A



Call to Action

# Human Resource for Health



No Data



## Health Training Institutions

Institution	Public	Private	Admission Quota
College(s) of Medicine	-	-	-
School(s) of Nursing & Midwifery	-	-	-
School(s) of Health Technology	-	-	-
School(s) of Pharmacy	-	-	-



## Human Resource for Health

Occupation	Number	Density <i>(Per 10,000 Population)</i>	Target <b>(WHO)</b>
Doctors	-	-	-
Nurses/Midwives	-	-	-
Community Health Workers	-	-	-
Pharmacists	-	-	-



Call to Action

N/A

# Health Financing



Kano state has met the Abuja Declaration of 15% budgetary allocation, but the release is low. The per capita expenditure on health of N1,115 is also low.

## Allocation - FY 2022



### Total State Budget

₦221.2 bn



### Allocation to Health (%)

₦34.8 bn (15%)



### Percentage Health Allocation to PHC

₦3.9 bn (12%)

## Performance - FY 2022

### State Budget Performance



₦134.8 bn

61%

### Health Budget Performance



₦17.8 bn

52%

### Health Expenditure Per Capita



₦1,115.0



### Call to Action

The state should sustain the high percentage budgetary allocation to health while working gradually towards \$29\*(N12,000 approx.) per capita and investing more in health insurance.

Reference: ((prorated state contribution from \$86 per capita - WHO recommended) World Health Organization. (2018).

# Health Insurance



The state has a functional state social health insurance scheme which has made health insurance mandatory. There has been release of equity fund and employee contribution for the formal sector, however, the non-release of Government contribution would negatively impact on the scheme.

## Scorecard (2022)

Indicator	Status
Existence of a State Social Health Insurance Agency	●
Health Insurance Made Mandatory	●
Equity Funds Release	●
Government Contribution For Formal Sector	●
Employee Contribution For Formal Sector	●

## Total No. of Enrollees



**No Data**

- Target Not Met
- Target Met
- No Data



## Call to Action

The State Government to fast-track government contribution into the scheme.

# PHCUOR Scorecard

## Primary Health Care Under One Roof



Kano state has performed well in its implementation of the Primary Health Care Under One Roof policy – a governance reform to improve PHC implementation and integration.

Scorecard	
Indicator	Status
Existence of a State Primary Health Care Board	●
Existence of Approved Minimum Service Package That Is Linked To SSHDP	●
Existence of Costed Service Delivery/Investment Plan	●
Provision Made For Investment Plan In The Annual Budget of The Last Year	●
PHC Programmes And Staff Moved To SPHCB From SMoH and SMoLGA	●

- Target Not Met
- Target Met
- No Data



### Call to Action

The State Government should ensure one **FUNCTIONAL** PHC per ward as per minimum service package for healthcare delivery outlined in the National Primary Health Care Development Agency (NPHCDA) guidelines for the revitalization of PHCs.



# Nutrition Scorecard



The state has a functional state committee on food and nutrition. However, the state does not have a nutrition department in relevant MDAs and most of the nutrition interventions are funded by partners which is not sustainable.

## Scorecard

Indicator	Status
Existence of State Committee on Food and Nutrition	●
Presence of Nutrition Departments In Relevant MDAs	●
Budget Line For Nutrition In Key MDAs	●
Release of Fund For Nutrition (2022)	●
Availability of Multi-Sectoral Plan of Action For Nutrition	●
Availability of Government-Owned Creche	●
Approved Six Months Paid Maternity Leave.	●
Government Spending Greater than/Equal to Partner Spending	●

- Target Not Met
- Target Met
- No Data/Missing Validation



## Call to Action

The state government should:

1. Set up nutrition departments in relevant MDAs (- at minimum in the following MDAs: Health, Agriculture, Budget and Planning, Women Affairs, State Primary Health Care Board);
2. Ensure timely release of funds to implement programmes in the MSPAN.
3. Approve 6 months paid maternity leave.

# Drug Management Agency (DMA) Scorecard



| Kano state has a Drug Management Agency but has no pharma grade warehouse.

Scorecard	
Indicator	Status
State Has Established An Autonomous DMA Backed By Law	Target Met
DMA Is Capitalized	Target Met
At Least 60% Of The Focal Ward PHCs Is Capitalized	Target Met
DMA Has Pharmagrade Warehouse With Adequate Capacity	Target Not Met
State Has A Single Supply Chain System	Target Met
State Manages Last Mile Delivery	Target Met

- Target Not Met
- Target Met
- No Data



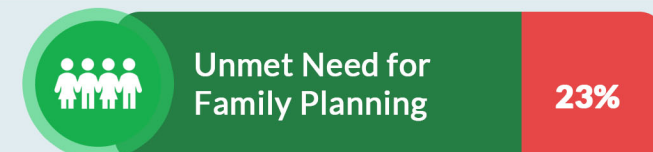
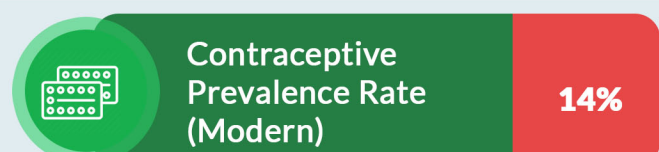
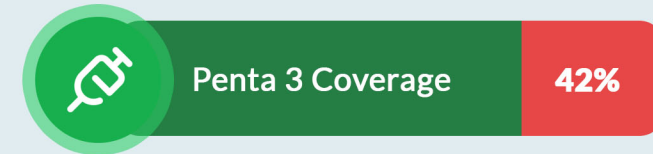
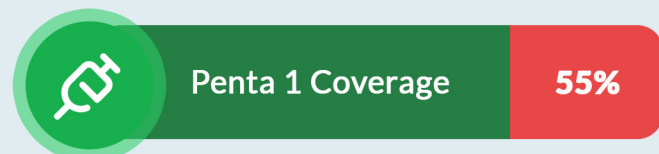
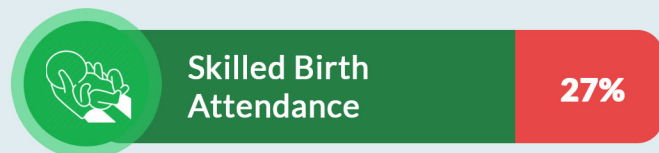
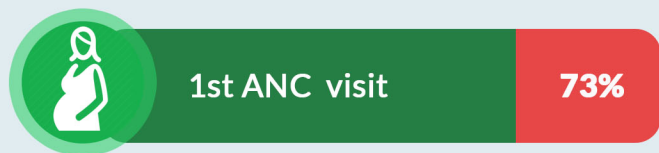
## Call to Action

The State Government should to continue support to its drug management agency, and build a pharma grade warehouse to ensure availability of quality essential medicines in all health facilities within the state.

# Access and Service Utilization...



There is poor access and utilization of antenatal, delivery, immunization and family planning services and less than a quarter of children under 6 months of age are exclusively breastfed.



## Call to Action

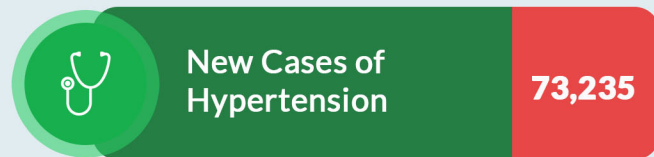
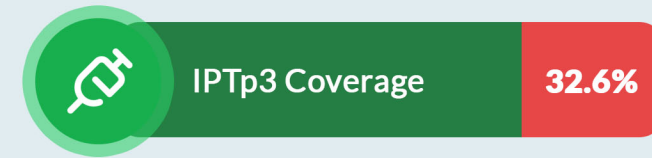
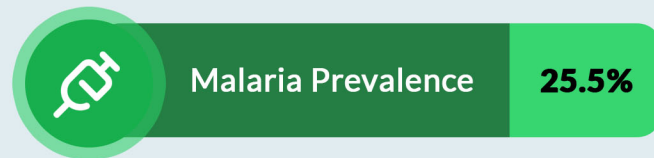
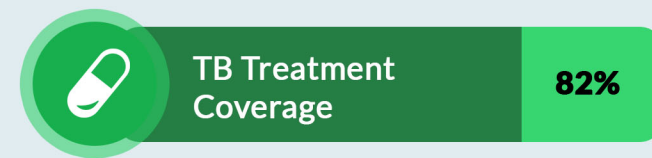
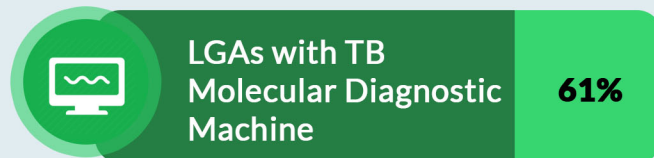
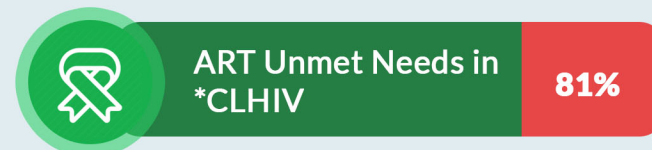
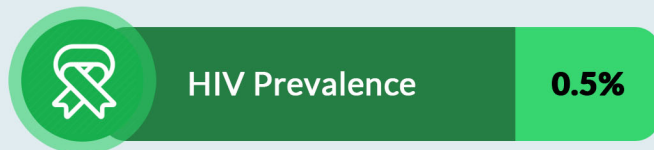
The state government should:

1. Improve its performance on antenatal and immunization services.
2. Identify and address barriers to access and utilization of family planning services.
3. Promote advocacy for exclusive breastfeeding.

# Access and Service Utilization



The state has a low network of TB molecular diagnostic machine. A high unmet need in the treatment for Children living with HIV and only provides 3 doses of malaria prophylaxis for third of its pregnant women.



## Call to Action

The State Government should ensure at least one functional molecular diagnostic machine per LGA, scale up ART treatment for CLHIV and expand coverage of IPTp3.

CLHIV - Children Living with HIV, ART - Antiretroviral Therapy, IPTp3 - Intermittent Preventive Treatment of Malaria for Pregnant Women (3rd dose +)  
Reference: HIV health Sector Report 2021, NTBLCP, NMEP, DHIS2.

# Health Outcomes

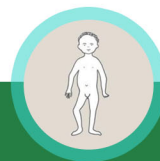


There a significant number of zero-dose children, high number of children with stunting & wasting, and unacceptably high number of childhood mortalities in the state. The state has the highest number of deaths in children before their 5th birthday in Nigeria.



Zero Dose Children

271,641



No. of Children with Stunting

830,240



No. of Children with Wasting

41,931



No. of Children who Die before 28 Days of Life (Yearly)

22,862



No. of Children who Die before 1st Birthday (Yearly)

44,947



No. of Children who Die before 5th Birthday (Yearly)

76,530



## Call to Action

The State Government urgently needs to prioritize investments in maternal and child healthcare services, including nutrition interventions, and immunizations to improve the health outcomes of children in the state. It is also important for the state to work with key partners to identify and target communities with unvaccinated children.

- i. Stunting: Children Shorter in Height-for-Age
- ii. Wasting: Children with Low Weight-for-Height
- iii. Zero-dose: Children who failed to receive any routine vaccination - never reached by routine immunization services

# Flagship Projects



This page details the key flagship projects ongoing in Kano state that the Government needs to sustain.

S/N	Title	Description
	N/A	N/A

# Partner Mapping



S/N	Implementing Partner	Intervention	Geographical Coverage
	No Data	No Data	No Data

# Summary of Key Actions



## Health Facility Distribution

N/A

## Human Resource for Health

N/A

## Health Financing

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## Health Insurance

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## Nutrition

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2. Ensure timely release of funds to implement programmes in the MSPAN.
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## About the NGF Secretariat

### The Nigeria Governors' Forum

The Nigeria Governors' Forum (NGF) was founded in 1999. It is a platform for the elected Governors of the 36 states of Nigeria that promotes collaboration amongst the Governors, irrespective of their party affiliation, to share experience, promote co-operation, and good governance at the subnational level.

### The NGF Secretariat

The NGF is supported by a secretariat which is the technical and administrative arm of the Nigeria Governors' Forum. It is a policy hub and resource centre that sets agendas & priorities to enable the forum to meet its set objectives. The Secretariat serves as an interface between federal MDAs, development partners, and states. The Secretariat has several units including Health, IGR, Economics, Legal, Education, Agriculture, Peace, and Inclusive Security.

### The Health Team

The health unit of the NGF Secretariat is responsible for coordinating all health-related interventions being championed by the secretariat. It is committed to catalysing a stronger health system and better health outcomes at the subnational level in line with national goals and strategies.

#### Our Vision

Is to be the leading go-to resource and learning hub for catalysing subnational health development and contributing to health SDGs.

#### Our Mission

Is to keep the NGF informed and up-to-date on health priorities and promote evidence-based decision-making & actions, accountability, and learning for better health outcomes at the subnational level.

#### What We Do

We leverage our convening powers to support States to achieve their health goals through Evidence Generation, High-Level Advocacy, Resource Mobilization, Accountability and Partnerships, and Capacity Building. We also engage with key federal MDAs, such as the FMOH, NHIA, NPHCDA, FMFBNP, and Office of the Vice President.

#### Our Team

The health team is a multidisciplinary team that includes high-profile professionals that have excelled in different fields of endeavour including Advocacy, Health Policy Analysis, Health Systems Strengthening, Public Health, Health Financing, Health Information System, Immunization, Supply Chain, Monitoring, Evaluation, and Learning.

#### Our Health Partners

BMGF, ADF, GAVI, UNICEF, R4D, NHED.

# NIGERIA GOVERNORS' FORUM



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