Background

Nigeria is one of 57 countries defined by the World Health Organization as having a critical shortage of health workers, or less than the threshold of 2.3 nurses, doctors, and midwives per 1,000 people needed to ensure minimal access to basic health services for all. Nigeria’s continued progress toward meeting its primary health care goals relies upon education, employment, distribution, and retention of a strong health workforce. Primary health care training institutions are responsible for training those health workers most likely to provide care at the community level—nurses, midwives, and community health extension workers—making education, as well as the equitable absorption and distribution of their graduates vital to population health. The USAID-funded CapacityPlus project undertook an assessment of Nigerian midwifery, health technology, and nursing schools to better understand the progress and challenges in producing greater numbers of competent and qualified health providers.

Methods

Nineteen schools of nursing, midwifery, and health technology in seven Nigerian states were assessed through focus group interviews and on-site evaluations (see Figure 1).

Findings

The assessment found that despite steady effort, training institutions face a number of challenges in their attempts to increase the number and quality of graduates. These include admission of unqualified or under-qualified students, which leads to high drop-out rates in the first semester; high student-teacher ratios; limited training and career development opportunities for faculty; infrastructure deficiencies; and insufficient learning equipment and materials, including textbooks. Many schools provisionally admit far more students than they are capable of enrolling, and then “weed out” unqualified students for several months, an adaptive response to low student qualifications which unfortunately results in crowded classes and increases the workload of already stressed faculty. For example, in 2009, 35,600 students enrolled in an accredited course, yet only 23,798 completed the course requirements, and 13,852 passed the national examinations on their first, second, or third try (see Figure 2). Schools have developed creative strategies to ensure minimal access to basic health services for all. Nigeria is one of 57 countries defined by the World Health Organization as having a critical shortage of health workers, or less than the threshold of 2.3 nurses, doctors, and midwives per 1,000 people needed to ensure minimal access to basic health services for all. Nigeria’s continued progress toward meeting its primary health care goals relies upon education, employment, distribution, and retention of a strong health workforce. Primary health care training institutions are responsible for training those health workers most likely to provide care at the community level—nurses, midwives, and community health extension workers—making education, as well as the equitable absorption and distribution of their graduates vital to population health. The USAID-funded CapacityPlus project undertook an assessment of Nigerian midwifery, health technology, and nursing schools to better understand the progress and challenges in producing greater numbers of competent and qualified health providers.

The CapacityPlus/Nigeria Preservice Education Program

CapacityPlus has implemented a multilevel program of support to school leadership, faculty, and students. Interventions include: providing school leaders with opportunities to share experiences; bursaries and scholarships to students to reduce drop-out rates; training of faculty; provision of learning aids, textbooks, and equipment; and tutoring of graduates who have not passed their national examinations.

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Recommendations

Further progress toward meeting Nigeria’s primary health goals could be made through infrastructure and equipment support; faculty training; and providing opportunities for school leaders to share experiences. Long-term solutions include better aligning curricula and national examinations with primary health care priorities and population health needs; applying evidence-based strategies in preservice education to support the placement and retention of graduates in primary health care settings, and advocating for better absorption of highly-trained health workers in the market.