

Short Communcation

Evaluation of National Health Insurance Scheme (NHIS) awareness by civil servants in Enugu and Abakaliki

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The awareness of the National Health Insurance Scheme (NHIS) by civil servants residing in Enugu and Abakaliki were evaluated using questionnaire. The results show that the level of awareness was very low with most of the respondents not knowing the mode of payment and benefits of the NHIS and were of the opinion that NHIS may not succeed in Nigeria. The recommendation is that the operators of the NHIS should embark on educating the citizenry on the mode of operation and benefits of the NHIS. A good knowledge of the scheme will improve its utilization.

Key words: NHIS, awareness, civil servants.

INTRODUCTION

Ever since Emperor Otto Von Bismarck of Germany enacted the mandatory legislation on the “sickness funds” for working Germans in 1883, different models of health insurance have continued to evolve worldwide albeit with the same general insurance principles. In the developed world, insurance in one form or the other is a veritable and sustainable tool for financing healthcare. The National Health Insurance (NHIS) was launched in Nigerian on October 15, 1997 and was passed into law in May 1999. The original scheme has been modified to include healthcare for less privileged persons in the country (FMH, 1998).

According to the World Health Organization (WHO) in 2005, Nigeria was ranked 197th out of 2000 nations; life expectancy was put at 48 years for male and 50 years for female while healthy life expectancy (HALE) for both sexes was put at 42 years. Nigeria accounts for 10% of global maternal mortality with 59,000 women dying annually from pregnancy and child birth; only 39% are delivered by skilled health professionals. In order to provide equitable distribution of health, the NHIS was introduced in Nigeria.

The need for the establishment of the scheme was informed by the general poor state of the nation’s

healthcare services, excessive dependence and pressure on the government’s provision of health facilities, dwindling funding of health care in the face of rising cost, poor integration of private health facilities in the nation’s healthcare delivery system and overwhelming dependence on out-of-pocket expenses to purchase health. Like any other insurance scheme, the premium for the NHIS is the amount charged by the insurance compared with the promise to pay for any eventual “covered medical treatment” for the designated “coverage”. Consequently health insurance makes it possible to substitute a small but certain cost for a larger but uncertain loss (chain) under an arrangement in which the healthy majority compensate for the risks and costs of the unfortunate ill minority. The NHIS currently represents 15% of one’s basic salary. The employer is to pay 10% while the employee contributes 5% of his/her basic salary to enjoy healthcare benefits. The contribution made by the insured person entitles his/her spouse and four children under the age of 18 to full health benefits (FMH 2005).

NHIS was designed to provide minimum economic security for workers with regard to unfavorable losses resulting from accidental injury, sickness, old age,

Table 1. Awareness Response to NHIS by Civil Servant

No. Question	Nurses = 240				Artisans =120				Clerical officer =136				Teacher = 200			
	Yes		No		Yes		No		Yes		No		Yes		No	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
1 Do you know about National Health Insurance Scheme (NHIS)	154	64	86	36	24	20	96	80	27	28.1	69	71.9	20	10	180	90
2 Are you a registered member of NHIS	53	2	235	98	-	00	120	100	1	1	95	99	2	1	198	99
3 Do you know anybody who is a registered member of NHIS	113	47	127	53	-	00	120	100	3	3.1	93	96.9	5	2.5	195	97.5
4 Do you know a healthcare facility that have NHIS accreditation certificate	134	56	106	43.9	15	12.5	105	87.5	20	20.8	76	79.2	17	8.5	183	91.5
5 NHIS is earning related	149	62	91	63	11	9.2	109	90.8	25	26	71	74	10	5	190	95
6 NHIS is 15% basic salary	149	62	91	38	11	9.2	109	90.8	9	9.4	87	90.6	3	1.5	197	98.5
7 Percentage to be paid by employer is 10%	149	62	91	66	11	9.2	109	90.8	9	9.4	87	90.6	3	1.5	197	98.5
8 Percentage to be paid by employee is 5%	149	62	91	66	13	10.8	107	89.2	17	17.7	79	82.3	3	1.5	197	98.5
9 NHIS covers employee, spouse and 4 children below 18 years of age	96	64	86	36	9	7.5	110	92.5	12	12.5	84	87.5	12	6	188	94
10 Do you think health insurance policy will work in Nigeria	48	20	192	80	5	4.2	115	95.8	8	8.3	88	91.7	10	5	190	95

unemployment and premature death of family wage earner. NHIS is made compulsory because the government based on past experiences predicted that some citizens cannot engage in the scheme and the government also has the duty to protect the general welfare of all citizens (Ibiwoye and Adedeke, 2007). It is also the government's belief that NHIS will help to break the vicious cycle of poverty in the country. It is also a form of social support for workers (Jutting, 2003).

There is lack of health care coverage and little equity. Access to healthcare is limited and most Nigerians are unable to pay for health services and health facilities are far from being equitably distributed. All these contributed to the limitation in health services (Samin and Awe, 2009). The available health services are very expensive and the common man cannot afford it; only the privileged few can get access to good health. This study aims at assessing the level of knowledge and attitude of civil servants resident in Enugu and Abakaliki to NHIS.

METHODOLOGY

A descriptive survey design was adopted for the study

examining the awareness of Civil servants in Enugu and Abakaliki on NHIS. The population of the study comprised nurses, artisans, clerical officers and teachers resident in Enugu and Abakaliki. Convenient sampling procedure was used to select 696 civil servants resident in both study areas.

The instrument used for data collection was the questionnaire. The self constructed questionnaire was validated using test and retest method. The final corrected copy was used on a pilot study before being adopted for the study. The researcher administered the questionnaire to the respondents in their various offices and homes.

The respondents were given 24 h to fill the questionnaires before returning them to the researcher. Data were analyzed statistically using descriptive statistics and SPSS package was used for the analysis.

RESULTS

The result of response of civil servants to the awareness of NHIS is shown on Table 1. The results show that 64% of the nurses know about NHIS, 20% of artisan, 28.1% of clerical officer while 20% of the teachers know about the NHIS. 2% of Nurses are registered members of NHIS while 47% of the Nurses know other registered members of NHIS. None of the artisans is a registered member of NHIS and none also know

anybody that is a registered member. 1% of the clerical officers and teachers are registered members while 3.1% clerical officers know other registered members of NHIS and only 2.5% of teachers know other registered members.

56.1% of nurses know healthcare facilities accredited for NHIS while 12.5%, 20.8% and 8.5% of artisans, clerical officer and teachers respectively know healthcare facility accredited for NHIS. 62% of the nurses agreed that NHIS is earning related (15% of the basic salary and employee pay 5%). 9.2% of artisans are of the opinion that it is earning related and employers pay 10% while 15.8% of the artisan agreed that it is 15% of the basic salary of the members and 10.8% agreed that the employee pays 5%. 26% of clerical officers agreed that NHIS is earning related, 14.5% agreed that it is 15% of the basic salary while 9.6% agreed that the employer pays 10% while 17.7% agreed that the employee pays 5% of the premium.

64% of the nurses agreed that the NHIS covers the employee, spouse and 4 children below 18 years of age. Only 20% of the nurses agreed that the NHIS policy will work in Nigeria. 7.5% of the artisans agreed that the NHIS covers the

employee, the spouse and four children below the age of 18 years of age while only 4.2% agreed that NHIS policy will work in Nigeria. 12.5% of the clerical officers agreed that the policy covers the employee, the spouse and four children below the ages of 18 years of age and 8.3% agreed that NHIS policy will work in Nigeria 6% of the teachers agreed that the policy covers the employee, spouse and four children below the ages of 18 years of age while only 5% agreed that NHIS policy will not work in Nigeria.

DISCUSSION

This result indicates that civil servants working with Ebonyi and Enugu State governments do not know much about the NHIS. Nurses have the greatest knowledge about NHIS when compared to artisans, clerical officers and teachers. This is not surprising since the insurance policy has to do with health care provision which nurses play a very important role in. Considering the fact that nurses are involved in the implementation of the policy, 64% awareness among the nurses is therefore too low. The extent of the success of NHIS is shown from the fact that the policy launched in 1997 and passed into law in 1999 is not yet known by civil servants whom this policy should serve. This is a policy designed over 12 years ago to provide minimum economic security for civil servants resulting from accidental injuries sickness, old age and unemployment (Olanrinwaju 2013; FMH, 2005). 12 years after the introduction of the policy, civil servants in Enugu and Ebonyi States do not know what the policy is all about. This must be part of the reasons the National House of Representatives' Committee on Health in November 2011 whilst investigating the implementation of the scheme declared NHIS "a national embarrassment, disaster and colossal failure".

Most of the respondents do not know that NHIS is earnings related and currently represents 15% of the workers basic salary. The employer pays 10% while the remaining 5% is paid by the employee and that NHIS cares for the employer, the spouse and four children below 18 years of age. This level of awareness has indicated that it may not be possible to meet the objectives of the scheme whose establishing act states that the scheme is to ensure that all Nigerians are covered by the scheme by 2015 by eliminating problems associated with accessing health care delivery. Unlike

primary health care that aims at bringing medi-care to the doorstep of rural dwellers and is funded by government, NHIS is funded by the citizens through their own contribution. Most of the respondents do not agree that NHIS will work in Nigeria. This opinion may be based on the level of their awareness about how the scheme operates or due to previous experiences with insurance schemes in Nigeria whose operations are not clear and contributors never benefit from it.

RECOMMENDATION

It is recommended from the study that the operators of NHIS should provide massive education programme to enable citizens understand what it is all about and facilities available to its contributors. If there is knowledge and availability of healthcare facilities, Nigerians are likely to patronize the scheme.

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