Nigeria

December 2024

Maternal and Newborn Health Care Policy Brief

INTRODUCTION

Institutional births have increased dramatically across the globe, including in sub-saharan Africa, but the places where births occur vary enormously and are poorly understood.

Countdown to 2030 analyzed maternal and newborn health data from Nigeria in the last two decades. The study aims to inform the best balance of childbirth care services across facilities to adequately provide life-saving and respectful childbirth care. Data sources included DHS, HMIS, and others.

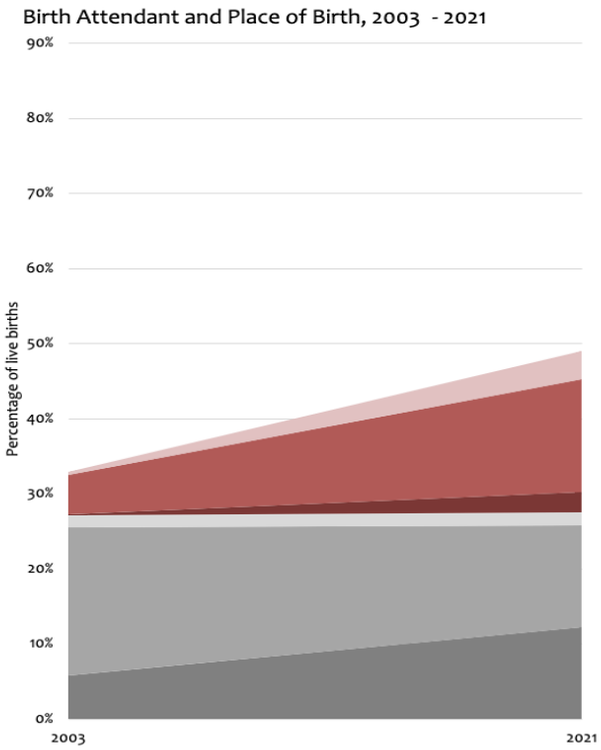
FINDINGS

Birth Attendance & Place of Delivery

Hospital deliveries have exhibited variations throughout time, 27% in 2003, to 34% in 2011,and 27% in 2021.

Deliveries at lower-level facilities rose from 6% in 2003, to 18% in 2007. There was a decline to 9% in 2008 and 2009, followed by a gradual rise to 15% in 2018, and then a reduction to 13% in 2021.

Home deliveries decreased from 67% in 2003 to 54% in 2011. Starting in 2011, there has been a consistent rise in the preference for home deliveries, peaking at 61% in 2018 and then decreasing to 51% in 2021.



Volume and Concentration of Care

62.5% of facilities handle a smaller number of births (1-49 per year) while, 4.1% of facilities handle a very large number of births (400+ per year).

24.5% of facilities perform a comparatively low number of C-sections (1-49) annually.

Cesarean Section

There is an increase in the prevalence of C-sections from 2003 to 2011, with the highest percentage occurring in 2011. After 2011, there is a decline in 2013, followed by fluctuations in the subsequent years (general upward trend). In 2021, C-section rates are higher than in 2003, but lower than 2011.

The prevalence of C-sections is consistently highest among the richest quintile throughout the years. There is a clear socioeconomic gradient, with each higher wealth quintile generally having a higher prevalence of C-sections.

Over time, the prevalence of C-sections increases across all wealth quintiles, but the gap between the poorest and the richest widens. By 2021, the wealthiest individuals have a much higher prevalence of C-sections compared to the poorest, indicating substantial inequality.

RECOMMENDATIONS & NEXT STEPS

- Strengthen infrastructure and equipment in lower-level facilities for critical care.
- Address workforce shortages through targeted recruitment, retention strategies, and incentives.
- Fully implement policies on maternal and newborn health.
- Upgrade health information systems for data-driven decision-making.

Learn More:

www.countdown.org/maternal-newborn-health

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Countdown to 2030

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