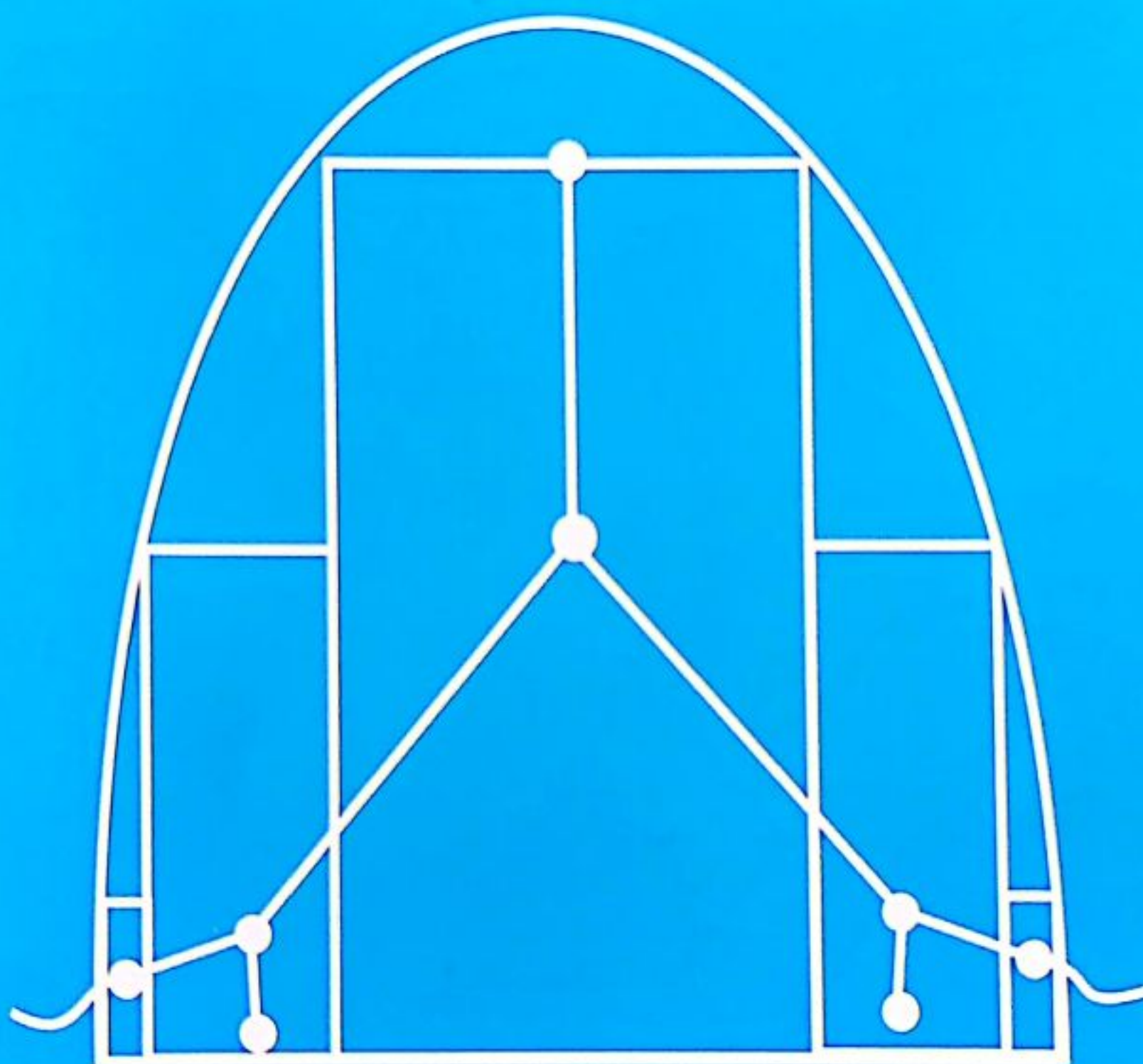


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Impact of National Health Insurance Scheme (NHIS) on Health Care Delivery of Residents in Ilorin South Local Government Area, Kwara State

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Abstract

The study examined the Impact of National Health Insurance Scheme on health care delivery of residents in Ilorin South Local Government Area, Kwara State. Descriptive research design of survey method was used for the study. The population for the study comprises all residents in Ilorin South Local Government Area of Kwara State. A sample of 200 respondents were selected through a multistage sampling techniques, which consist of stratified and simple random sampling techniques. Researchers structured questionnaire of Likert format rating scale for the study which was validated by the experts and tested for reliability was used. A correlation co-efficient of 0.87 was obtained. The instrument was administered by the researchers and two trained research assistants. The data collected were analyzed with the use of descriptive statistics of frequency count and percentage and inferential statistics of chi-square statistics was use to analyze the research hypotheses set for the study at 0.05 alpha level of significance. The study revealed that National Health Insurance Scheme have significant impact on health care delivery services, also National Health Insurance Scheme have significant impact on the relief of hospital bills, National Health Insurance Scheme have significant impact on child and maternal mortality rate controls. Based on the findings, the researchers recommends that, NHIS should be available for all, so as to promote the health care delivery service of the residents, and to also assist the average residents on hospital bills that they may not be able to afford and to prevent child and maternal mortality. Rate through prompt care, the study also recommends that government at all levels should promote the scheme and monitor the disbursement of funds release for the scheme, the funds must be directed towards achieving the goal of establishing the National Health Insurance Scheme and special attention must be paid to health training institutions to ensure quality training of medical personnel so as to improve health care delivery of residents especially in Ilorin South Local Government Area, Kwara State.

Introduction

Over the last two decades, several health insurance schemes have been introduced they are individual, family and group insurance schemes for health care, senior citizens insurance and insurance for specific diseases, (Narain, 2004). Narain (2004) further observed that development of health care system through health insurance has been in operation in several countries of the world with different mix ups and produced adequate results, most especially in India. The reform of government in the health sector are to improve efficiency in both public and private health care markets and to assist the poor who have previously been marginalized. In most cases there is a clear lack of universal coverage of health care and little equity (Sanusi & Awe, 2009).

Falegan (2008) observed that in Nigeria an increased proportion of the nation's resources are being spent on health and medical care than it was at independence. In spite of these achievements however, majority of Nigerians still do not have access to medical care when they need it. The government instituted the national health policy (NHP) in 1988 with the primary objective of improving the health status of the people to allow Nigerians to have wholesome, productive, social and economic lives, yet a large proportion of the privileged few who have access to medical facilities cannot afford to pay for health care due to its rapidly escalating cost (Sanusi & Awe, 2009) as a way out, the government launched a National Health Insurance Scheme (NHIS) in June 2005. In Nigeria, the provision of quality accessible and affordable health care remains an important issue. There is no doubt that, the health care service delivery in Nigeria is not adequate, and that the people are suffering from poor health care Agba (2010). Further affirmed that today, Nigeria is recorded as one of the highest maternal morbidity and infant mortality rates in the world. Daniel, Peter, Janes, and John (2007) defines health insurance as a system for the advance financing of medical expenses through contributions or taxes paid into a common fund to pay for all or part of health services specified in an insurance policy or law. The key elements are advance payment of premiums or taxes, pooling of funds and eligibility for benefits on the basis of contributions or employment without an income or assets test.

Health insurance may be applied to a limited or comprehensive range of medical services which provides for full or partial payment of the costs of specific services, the benefits of this consist of the right to certain health service and of the insured for specified medical costs. Agba (2010) asserted that private health insurance is organized and administered by an insurance company, or other private agency the government runs public health insurance. Abati (2013) stressed that the health insurance can be viewed as a contract between an insurance provider and insurance company or a government or an individual or sponsor, an employer or an organization. The contract can be annually, monthly or life long in the case of private sector insurance or even be mandatory for all

citizens in the case of national health plans which involves resource mobilization, pooling, allocation and purchasing. A health insurance scheme has to provide quality equitable, accessible, affordable and efficient care of health services delivery to the people in a community. In Nigeria today people enjoy health care service delivery through the intervention of NHIS programme.

Agba (2010) observed that the purpose of establishing National Health Insurance Scheme (NHIS) and management care organization is to address a number of problems plaguing health system in Nigeria and to improve health care delivery. The NHIS was promulgated in 1999 degree 35 new Act 35 of 1999 by the military regime of Abdulsalam Abubakar and launched in 2005 by the Obasanjo Administration between 1999-2007, although the idea was conceived in 1962 (Halevi Committees Lagos Health Bill). It was executed for forty three years after which it was stopped because of lack of political will to actualize the dream by successive military and civilian government (Falegan, 2008). The objective of this health scheme are as follow, to ensure that every Nigerian has access to good health care services, to protect families from the financial hardship of huge medical bills, to limit the rise in the cost of health care services, and to ensure efficiency in health care services, other objectives of NHIS are as follow:

- (i) to ensure that every Nigerian has access to good health care services;
- (ii) to protect families from the financial hardship of huge medical bills;
- (iii) to limit the rise in the cost of health care services;
- (iv) to ensure equitable distribution of health care costs among different income groups;
- (v) to maintain high standards of health care delivery services within the scheme;
- (vi) to ensure efficiency in health care services;
- (vii) to improve and harness private sector participation in the provision of health care services;
- (viii) to ensure equitable distribution health facilities within the federation;
- (ix) to ensure appropriate patronage of all levels of health care; and
- (x) to ensure the availability of funds to the health sector for improved services.

Awosika (2005) opined that manage care as the name implies refers to systems for organizing doctors, hospitals and other providers into groups to enhance the quality of health care services and assure that they are delivered in a cost-efficient manner. Manage care organizations co-ordinate all aspects of the delivery health care system in order to manage all the cost in the system.

Agba (2010) affirmed that families who are already covered by the scheme either through private sector insurance programmes have already receive a reasonable level of protection from high cost of medical bills. The challenge is that less than 20% Nigerian families are still included in the scheme. The expansion of health insurance in Nigeria help to address these challenges in order to improve the status and ability of households to cope with deadly diseases. This also can be done not in isolation of wellbeing but rather to improve their economic status in line with Millennium Development Goals (MDGs). Which is now sustainable Development goals (SDG's) Good health care delivery contributes to improve economic status of poor people in a community (Agba, 2010). Like Kwara and Lagos State where the Community Health Insurance Scheme has been in operation since 2007, rural dwellers have benefitted from this scheme through the delivery of a nation and affordable health care services provide. The replicate of NIHS through this scheme will go a long way to facilitate a nation wide access to health care delivery by Nigerians and would in turn reduce child morbidity and mortality as well as maternal death in Nigeria.

Statement of the Problem

It is observed that there are many health sectors owned by the three tiers of government in Nigeria. These include; federal, state and local government hospitals. Most of these hospitals charge bills that are not affordable by the patients as a result of their level of income, many of these patients as a result of their inability to meet their hospital bills lead to death. It is also observed that of recent, the federal government established a health sector called National Health Insurance Scheme probably to assist the patient that could not afford to pay the instant hospital bill charged. This is to improve the health delivery system in the country and prevent both child and maternal mortality. It is the opinion of the researcher that this new health sector called NHIS will have impact on the health of residents. Therefore, the researchers examined the impact of the National Health Insurance Scheme on the health care service delivery of residents in Ilorin South Local Government Area, Kwara State

Research Questions

The following research question are raised to guide the study.

1. Does NHIS have any impact on health care delivery service of residents in Ilorin South Local Government?
2. Does NHIS have any impact on relief of hospital bill of residents in Ilorin South Local Government?
3. Does NHIS have any impact on child and maternal mortality rate of residents in Ilorin South Local Government?

Research Hypotheses

The following research hypotheses were formulated and tested for the study.

1. NHIS will not significantly have any impact on health care delivery of residents in Ilorin South Local Government.
2. NHIS will not significantly have any impact on relief of hospital bill of residents in Ilorin South Local Government.
3. NHIS will not significantly have any impact on child and maternal mortality rate of residents in Ilorin South Local Government.

Methodology

The research design use for this study is a descriptive research of survey type. The population comprised all the residents in the study area. A multistage sampling technique of stratified and simple random sampling technique was used for the study. The study area was stratified into 11 wards. This include 6 wards in the town and 5 wards in the rural area, the six wards in the town include Balogun Fulani wards 1,2,3, Okeogun ward and Okaka wards 1 and 2 while the remaining 5 wards in rural areas include Akanbi wards 1,2,3,4 and 5, simple random sampling technique was used to pick two wards each from town and the rural areas respectively using a lucky dip method of (fish bowl). The two wards selected in town include Balogun Fulani ward 1 and Okeogun ward while the other 2 wards selected in the rural area include Akanbi ward 1 and 3. 50 respondents were randomly selected from each of the stratum using simple random technique. The sample comprises of 30 females and 20 males, this sample was based on the population proportion of the gender in the area selected. The samples were selected during their ward meetings. A total of 200 respondents were selected for this study. This consists of 120 females and 80males. The instrument used for the study was researchers' developed of likert format rating scale questionnaire which was validated by the experts in the field of study in the Department of Health Promotion and Environmental Health Education, University of Ilorin. A reliability of the instrument was carry out using test re-test method of two weeks interval from a ward in Ilorin West Local Government outside the area of the study, using 10 males and 10 females, Pearson Product Moment Correlation statistics was used to established the relationship between first and second administration of the administered instruments. A correlation co-efficient of 0.87 was obtained showing that the instrument was reliable for the study. The instrument was administered by the researchers and two trained research assistants. Three research questions and three hypotheses were used for the study. The data collected were sorted, coded and analyzed using descriptive statistics of frequency count and percentage and inferential statistics of chi-square was used to analysed the research hypotheses set for the study at 0.05 alpha level of significance.

Results

Hypothesis 1: NHIS will not significantly have any impact on health care delivery of residents of Ilorin South Local Government Area, Kwara State.

Table 1

Impact of NHIS on health care delivery of residents in Ilorin South Local Government Area

S/N	Items	SA	A	D	SD	Total	Cal. value	df	Crti. Value	Dec.
1.	NHIS programme contribute to quality health care delivery in our hospitals	40 20%	20 10%	60 30%	80 40%	200 100%	30.23	9	16.92	Hypothesis rejected
2.	NHIS programme makes health care delivery service accessible to all the residents	35 17.5%	30 15%	65 32.5%	70 3.5%	200 100%				
3.	NHIS programme makes residents to visit hospital without fear of hospital bills	45 22.5%	15 7.5%	90 45%	50 25%	200 100%				
4.	NHIS programme makes residents to attend any government owned hospitals in order to promote health care delivery	38 19%	32 18%	55 27.5%	75 37.5%	200 100%				
	Total	158 19.5%	97 12.5%	270 33.5%	275 34.5%	800 100%				

Table 1 shows that 255(32%) of the respondents agreed that NHIS have significant impact on the health care delivery services of residents of Ilorin South Local Government while 545(68%) of the respondents disagreed. The result also revealed the calculated χ^2 value of 30.23 as against the critical χ^2 value of 16.92 with 9 degree of freedom at 0.05 alpha level of significance, since the calculated χ^2 value is greater than the critical χ^2 value, the null hypothesis which stated that, NHIS will not significantly have any impact on health care delivery service of residents of Ilorin South is hereby rejected. This implies that NHIS have significant impact on the health care delivery service of residents in Ilorin South Local Government Area, Kwara State.

Hypothesis 2: NHIS will not significantly have any impact on the relief of hospital bill of people in Ilorin South Local Government Area, Kwara State.

Table 2

Impact of NHIS on relief of hospital bill of residents in Ilorin South Local Government Area

S/N	Items	SA	A	D	SD	Total	Cal. value	df	Crti. Value	Dec.
1.	NHIS programme makes the cost of health care delivery to be affordable	45 22.5%	15 7.5%	55 27.5%	85 42.5%	200 100%	52.76	9	16.92	Hypothesis rejected
2.	NHIS programme makes health care delivery to be easily accessed.	41 20.5%	34 17%	50 25%	75 37.5%	200 100%				
3.	NHIS programme helps to subsidizes the hospital bill of the residents in the community	12 6%	48 24%	60 30%	80 40%	200 100%				
4.	NHIS programme helps to reduce the cost of expensive drugs in hospital.	37 18.5%	35 17.5%	58 29%	70 35%	200 100%				
Total		135 16.9%	132 16.6%	223 27.5%	310 30.5%	800 100%				

Table 2 revealed that 267(33.5%) of the respondents agreed that NHIS have significant impact on the relief of hospital bill of residents in Ilorin South Local Government. While 533(66.5%) of the respondents disagreed. Also the findings revealed a critical analysis of table 2 which indicates the calculated χ^2 value of 52.76 as against the critical χ^2 value of 16.92 with 9 degree of freedom at 0.05 alpha level of significance, since the calculated χ^2 value is greater than the critical χ^2 value, therefore the null hypothesis which stated that NHIS will not significantly have any impact on the relief of hospital bills of residents in Ilorin South Local Government is hereby rejected. This means that, NHIS have significant impact on the relief of hospital bill of resident in Ilorin South Local Government Area, Kwara State.

Hypothesis 3: NHIS will not significantly have any impact on child and maternal mortality of residents in Ilorin South Local Government Area, Kwara State.

Table 3

NHIS impact on child and maternal mortality of residents in Ilorin South Local Government Area, Kwara State

S/N	Items	SA	A	D	SD	Total	Cal. value	df	Crti. Value	Dec.
1.	NHIS programme prevent the death of children	25 12.5%	17 8.5%	63 31.5%	95 47.5%	200 100%				
2.	NHIS programme prevent sudden death of women in our community	27 13.5%	33 16.5%	55 27.5%	85 42.5%	200 100%				
3.	NHIS programme enhances effective treatment of residents especially the children and mothers	35 17.5%	25 12.5%	60 30%	80 40%	200 100%	37.18	9	16.92	
4.	NHIS programme prevent the disease that could affect the child and women in the community	36 18%	31 15.5%	80 40%	53 26.5%	200 100%				
	Total	123 15.3%	106 13.2%	258 32.45%	313 39.55%	800 100%				Hypothesis rejected

Table 3 shows that 229(28.5%) of the respondents agreed that NHIS have significant impact on the child and the maternal mortality of residents in Ilorin South Local Government while 571(71.5%) of the respondents disagreed. The findings also revealed the calculated χ^2 value of 37.18 as against the critical χ^2 value of 16.92 with 9 degree of freedom at 0.05 alpha level of significance, since the calculated χ^2 value is greater than the critical χ^2 value, therefore the null hypothesis which stated that NHIS will not significantly have any impact on the child and maternal mortality of residents in Ilorin South is hereby rejected. This implies that NHIS have significant impact on child maternal mortality of residents in Ilorin South Local Government Area, Kwara State.

Discussion of Findings

The result of hypothesis 1 from table 1 showed chi-square analysis of impact of NHIS on the health care delivery service of residents in Ilorin South Local Government. The finding revealed that NHIS have significant impact on the health care delivery service of residents in Ilorin south local government. This result is in agreement with the view of Abati (2013) who affirmed that the establishment of National Health Insurance Scheme (NHIS) which provides

quality accessible and affordable health services delivery for the people promote effective health care delivery for the people. Also in the same view Agba (2010) observed that, the purpose of establishing National Health Insurance Scheme (NHIS) and management care organization is to address a number of problems plaguing health system in Nigeria and to improve health care delivery service of people in a community.

The finding from hypothesis 2 revealed that, NHIS have significant impact on the relief of hospital bills of residents of Ilorin South Local Government Area. This result tallied with the view of Nnamuchi (2007) who stressed that families who are already covered by the scheme are already receiving a reasonable level of protection from high cost of hospital bills. Also in the same vain Abati (2013) stated that Health Insurance tend to applied a limited or comprehensive range of medical services which provides for full or partial payment of the costs of specific services, this implies that payment of hospital bills will be less or affordable for residents to pay.

The finding from hypothesis 3 showed that NHIS have significant impact on the child and maternal mortality of residents of Ilorin South Local Government Area. This result is supported by the findings of Agba (2010) who affirmed that the establishment of National Health Insurance Scheme has reduce the high rate of maternal morbidity and infants mortality rates in the community. Also WHO (2003) pointed out that, the contribution of NHIS policy on the reduction of child and maternal mortality rate cannot be ignored or overrule because it has a positive impact to the child and maternal mortality rate.

Conclusion

Based on the findings of this study, the following conclusions were made

1. National Health Insurance Scheme (NHIS) have significant impact on the health care service delivery of residents in Ilorin South Local Government Area, Kwara State.
2. National Health Insurance Scheme (NHIS) have significant impact on the relief of hospital bill of residents in Ilorin South Local Government Area, Kwara State.
3. National Health Insurance Scheme (NHIS) have significant impact on the child and maternal mortality of residents in Ilorin South Local Government Area, Kwara State.

Recommendations

Based on the conclusions of this study the following recommendations were made;

1. NHIS should be available to all in order to promote and improve health care services in the community since ill-health is unavoidable.
2. NHIS should be available for all so as to promote the health care delivery service of the residents and to relief of high costs of hospital bills.
3. NHIS programme must be available to prevent child and maternal mortality rate in the community.
4. The policy should cut across every residents in the community irrespective of their place of work in Ilorin and in Nigeria as a whole, it must not be limited to federal staff alone.
5. All Kwara residents should be sensitized on the availability of a replicate of NHIS which is Community Health Insurance Scheme at the rural area and be advised to register.

References

- Abati, R. (2013). Nigeria's problematic health insurance scheme, national health insurance scheme degree No. 35 of 1999 laws of the federation of Nigeria. NISD Publication
- Agba, M.S. (2010). Perceived impact of the national health insurance schemes (NHIS) among registered staff in Federal Polytechnic Idah, Kogi State, Nigeria. *Studies in Sociology of Science* 1(1) 44-49
- Awosika, L. (2005). Health insurance and managed care in Nigeria, *Annals of Ibadan Postgraduate Medicine*. 3(2) 20-25
- Falegan, A. (2008). Knowledge and attitude of health professionals towards the National Insurance Health Scheme. Gariki, Abuja accessed from <http://www.doublegist.com/modern-healthcare-facilities-factor-influencing-the-utilization>. Retrieve (12th November, 2013)
- Nnamuchi A. (2007) contribution of National Health Insurance Scheme's accessed from <http://www.healthcareproviders Association of Nigeria>. Retrieve (13th November, 2013)
- Narain, J. P. (2004). Risk factors for HIV transmission India, New Delhi Bangalore publishing Ltd.
- Daniel J. Peter R., Janes, S., & John E., (2007). The words best-selling learners dictionary (6th ed.), Oxford Advance learner Dictionary Cambridge, University Press. www.cambridge.org/.../Dictionary.com retrieved 13/11/15
- Sanusi, R.A. & Awe, A.T. (2009). Perception of National Health Insurance Scheme by Health care consumers in Oyo State, Nigeria. *Pakistan journal of social sciences* 6,48-53
- World Health Organization (2003). World health report on HIV/AIDS confronting a killer, Geneva, WHO-UNAIDS Publication.