

## **Investing in Nigerian People: an Agenda for Sustainable Livelihoods and National Development**

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### **Abstract**

A major factor affecting school performance in Nigeria no doubt is the health and nutrition of students. Moreover, their health and nutrition also affect their future productivity in the work force. The study examined the rationale for the present government under the Economic Recovery Growth Plan (ERGP) framework to vigorously pursue investment in Nigerian people so as to ensure their sustainable livelihoods and to achieve the desired national development aspiration. The approach used in the study is descriptive but mostly analytical. The data are from secondary sources; from the publications of the Central Bank of Nigeria (CBN), National Bureau of Statistics (NBS) and the World Bank Global Development Indicator. Evidence-based statistics from the study have shown that human development indicators hinged on Human Development Index (HDI) and anchored on long and healthy life, access to knowledge and a decent standard of living have not shown remarkable improvement in spite of the various economic policy changes and directions of the economy. Therefore, it behooves on the current government through the ERGP framework to focus on strict policy implementation of the plan document and beam searchlight on ensuring and improving accessibility, affordability and quality of education, health care delivery mechanisms and personal income across the six geo-political zones by reviewing for effectiveness the extant education and health, income and employment policies in Nigeria.

**Keywords:** *Investment in human capital, Sustainable livelihoods, National development, Health, Education, Employment*

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### **Background to the Study**

National development planning is a deliberate, comprehensive, time-specific effort, initiated and sustained by the central government for the purpose of creating and maintaining conditions that will accelerate economic growth and social development. Meanwhile, growth and development requires a long-term perspective to frame short term trade-offs. A long-term plan enables the government and society to deal with the inevitable short-term turbulences in a nation's progress (Adeoye, 2008; 2011).

National development planning has occupied the attention of Nigerian political leaders and the civil society for decades now. It has come in different shades and forms, and has been couched in different policy garbs. For emphasis, outside the 'Development Plans', previous development efforts include: Operation Feed the Nation, Green Revolution, Structural Adjustment Programme (SAP), Vision 2010, Vision 20:2020, 7 Point Agenda, the Agriculture Transformation Agenda (ATA) and most currently the Economic Recovery Growth Plan (ERGP), which incidentally shapes the focus of this study.

Nigeria has the potential of becoming a major player in the global economy by virtue of its human and natural resources endowments. However since 1960 to date, the Nigerian economy has focused more on crude oil export rather than agriculture, solid mineral, and tourism just to mention but few the numerous sectors that can leverage the growth of the Nigerian economy. Oil and the proceeds accounts for more than 95 percent of exports and foreign exchange earnings of the Nigerian economy while agriculture, manufacturing and other sectors accounts for less than one percent of total exports. The high economic growth rate recorded during 2011 – 2015, which averaged 4.8 per cent per annum mainly driven by higher oil prices, was largely non-inclusive, highly import dependent, consumption driven and undiversified economy base. Declining quality of education, health, low per capita income and high unemployment rate poses serious impediments to the development of the economy. Of the approximate 6 million Nigerians graduating annually from the educational system, only about 10% are often employed, thereby leaving about 4.5 million to enter into the labour market annually (a combination of unemployment, under-employment, low-wage employment and social exclusion) (FGN, 2009). The deficit in educational quality has grossly undermined the competitiveness of the Nigerian labour forces in national and global labour market, making it difficult for qualified Nigerians to access jobs globally. Despite the emerging global hunt for talents, especially in the ICT sub-sector. The inability of many of our youths to gain access to global centers of learning excellence for the furtherance of their education has further compounded the issue of unemployment at home.

Nigeria finds herself faced with the paradox of the simultaneous existence of surplus labour and scarcity of skills, due to a persistent skills mismatch which further compounds the unemployment problem. Formal and informal education and training lacks focus and coordination in line with the development needs of the Nigerian economy while the content and quality of Nigerian education is in crisis with strikes at different educational institution across the country. At the primary level, the regular assessment of student's achievement remains rare. Meanwhile, the existing assessments that exist are not encouraging. At the university level, religious studies and civil service needs have resulted in the development of the humanities and the social sciences and the neglect of the natural sciences, applied technology, business – related skills and research capabilities. Another major factor affecting school performance is the health and nutrition of students. Their health and nutrition also affect their

future productivity in the workforce. Health infrastructure, represented by the establishment of tertiary, secondary and primary hospital, has suffered deterioration similar to the other sector. The sector is characterized by inadequate funding, lack of drugs, medical personnel and equipment. The decay and neglect in the health sector has led to serious brain drain as many health specialists have left the country for greener pastures. Majority of Nigerians remain under the burden of poverty, inequality and unemployment. General economic performance was also seriously undermined by deplorable infrastructure, corruption and mismanagement of public finances. Decades of consumption and high oil price – driven growth led to an economy with a positive but jobless growth trajectory (FGN, 2016). After more than a decade of economic growth, the sharp and continuous decline in crude oil prices since mid-2014, along with a failure to diversify the sources of revenue and foreign exchange in the economy, led to a recession in the second quarter of 2016. The challenges in the oil sector, including sabotage of oil export terminals in the Niger Delta, negatively impacted government revenue and export earning, as well as the fiscal capacity to prevent the economy from contracting. The capacity of government spending was equally constrained by lack of fiscal buffers to absorb the shock, as well as the leakages of public resources due to corruption and inefficient spending in the recent past years.

The current administration recognizing the need to maintain a steady macroeconomic balance in the economy introduced the Economic Recovery and Growth Plan (ERGP), a medium term plan for 2017 – 2020 that is built, on the Strategic Implementation Plan (SIP) framework as its compass for re-directing the economy to a sustainable growth path. It aims at restoring economic growth while leveraging the hard work and resilience of the Nigerian people, the nation's most priceless assets. The ERGP is consistent with the aspirations of the Sustainable Development Goals (SDGs) and the African Vision 2063. The ERGP has three broad strategic objectives that will help achieve the vision of inclusive growth.

### **Objectives of the Study**

The objectives include: First, gradually restoring growth in Gross Domestic Product (GDP) to its 2010-2011 levels of 7 per cent by 2020. This will involve; providing fiscal buffers, ensuring macroeconomic stability as well as diversifying the economy by leveraging science and technology to drive growth in agriculture, energy, industry, manufacturing, and key service sectors. Second, improving the human capital base of the economy through investments in job creation, youth empowerment, education, health, and supporting the vulnerable groups of the Nigerian society. Third, building a global and competitive economy by creating a business-friendly environment to support the operations and inventiveness of the private sector. The second objective which no doubt is the cardinal objective of every growth and development plan is the focus of the paper. The key questions to frame the discussions of the study include: What are the lingering challenges of human development in Nigeria? What will ERGP do differently from other plans to improve investment in human development in Nigeria? And what are the possible agenda for change?

The rest of the paper is divided into five sections. Following section one is the theoretical literature presented in section two. Section three highlights some of the trends and profile of human development indicators in Nigeria. Section four reviews the commitment of the Nigerian government to human development together with the tools for investing in Nigerian people with an intention of providing an agenda for change which is presented in the last section alongside the concluding remarks.

## **Conceptual Issues**

### **Human Development**

Ultimately, the economy is about people and resources. It is difficult to understand the economy and its economic growth without a better understanding of the human development indicators: health, education, income and employment as outlined by the United Nations Development Programme (UNDP, 1990). The concept of human development has been at the heart of the United Nations Development Programme since 1990 when the foundations were laid for a perspective on development aspirations that is today widely known and accepted. Human development is therefore regarded as development that improves people's lives and their livelihoods and places human beings at the centre of all development efforts. It also refers to the process of enlarging the range of people's choices; increasing their opportunities for education, health-care, income and employment- and covers a full range of human choices; from a sound physical environment to economic and political freedom. It involves an accumulation of material wealth as well as social capital. The concept of human capital development is designed to promote development which addresses the root cause of poverty and human deprivation (NHDR, 2015). Human development is however, generally measured by the Human Development Index (HDI), which include indicators on income, literacy levels, and life expectancy.

### **Human Development Index (HDI)**

The HDI is a composite of three basic components of human development: longevity, knowledge and standard of living of the people all revolving around the explanations to human development. Longevity is measured by life expectancy. Knowledge is measured by a combination of adult literacy (two thirds weight) and mean years of schooling (one –third weight) while standard of living is measured by the peoples' purchasing power, based on real GDP per capita adjusted for the local cost of living(purchasing power parity, PPP) (HDR,1994) Unarguably, the HDI offers an alternative to Gross National Product(GNP) for measuring the relative socio-economic progress of nations. It enables people and their government to evaluate progress over time and to determine priorities for policy intervention. It also permits instructive comparisons of the human development experiences in different countries. The complimentary indices to HDI are: the Inequality-adjusted Human Development Index (IHDI) and the Gender Inequality Index (GII). The trio of HDI, IHID and the GII forms the key features of the current HDI computation, which involves a change from a simple arithmetic average to a more holistic 'geometric' average. Indeed, up and till 2010, the HDI was seen and defined rather simplistically as an arithmetic average of normalized indices in the dimensions of health, education, and income. The HDI and the other complimentary indices capture more accurately, the state of deprivations as well as the attendant disparities in an economy, (NHDR, 2015.)The HDI has been used in five main ways:

1. To stimulate national political debates.
2. To give priority to human development.
3. To highlight disparities within countries and within regions
4. To open new avenues for socio-economic analysis.
5. To stimulate dialogue on aid policy.

### Human Security

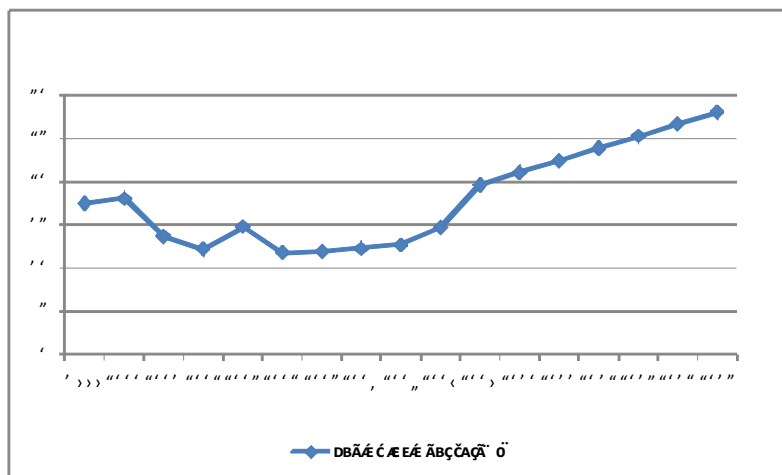
A discussion on human development is quite incomplete these days without some comments on human security. Human security analysis is an aspect of human development analysis initiated by Haq, Sen and associates. Human development and human security are inseparable such that while human security seeks to increase peoples' options, opportunities and access to public services and goods, and emphasize what can be achieved, human security focuses on the risks, dangers, and threats to human development. It evaluates the degree of confidence that people have in public services and goods, and emphasizes what can be lost when human potential is thwarted (Tadjbakhsh and Chenoy, 2007; NHDR, 2015)

Human development and human security can be seen as two processes that go hand in hand. This is mainly because the major effect of the two is to enhanced quality of life for the ordinary citizen and as such progress in one is most likely to enhance the chances of progress in the other, while the reverse is the most likely possible. Addressed in another dimension, human security challenges the question of 'security' from its traditional conceptualization of the safety of states from military threats and insurrection to safety of the people, for the people and their communities. To buttress the analysis, poverty of the people is conceptualized as a human security threats for the simple reason that it is a threat to the dignity of individuals as well as threat to the stability of the nation state. Environmental destruction, lack of access to clean drinking water, poor maternal health and unemployment are all forms of human insecurity. Human security includes not just protecting the people but also empowering people to fend for themselves.

### Profiles of Human Development Indicators in Nigeria

This section aims at presenting the scenarios of human development indicators in Nigeria. At some point cross-country comparisons are made to showcase where Nigeria is or where Nigeria ought to be among the comparator countries. The figures and tables are presented below.

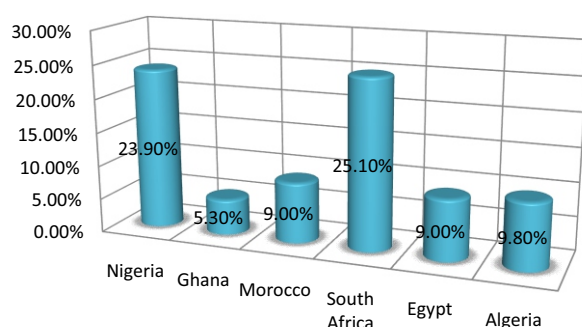
Figure 1: Nigeria's Unemployment Rate, 1999- 2015



Source: World Development Indicator, 2015.

In terms of job creation, Figure 1 shows the trend of unemployment rate in Nigeria between 1999 and 2015. From the figure, it is evident that the country which felt better between 1999 by ensuring an unemployment rate of less than 5% has continued to fail in job creation for the majority of the populace. Unemployment rate has been rising consistently from 2009 to 2015 and beyond. These questions the effectiveness of employment generation measures of the government in the present years. Comparatively, evidence from the United Nations Statistical Database (2014) provides facts about unemployment rates in some African countries as illustrated in the Figure 2.

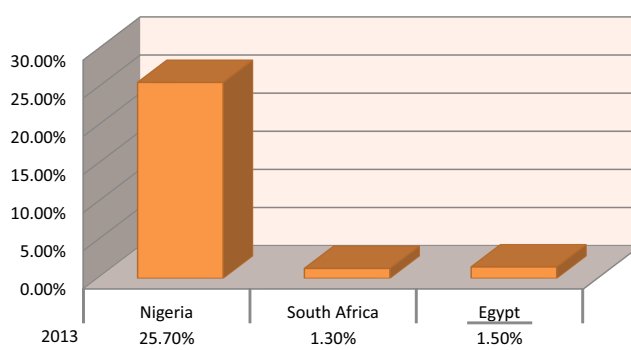
**Figure 2: Unemployment Rate among African Countries, 2013**



**Source:** World Development Indicator, 2014

In Figure 2, comparison of unemployment among the six most vibrant economies in Africa – Nigeria, South Africa, Egypt, Algeria, Morocco and Ghana was made. Figure 2 shows that in 2013, unemployment rates of Ghana were about 5.3 per cent, 9 per cent in Morocco and Egypt respectively, 9.8 per cent in Algeria, 23.9 per cent in Nigeria and 25.1 per cent in South Africa. This means that the two largest African economies are lagging behind in job creation. Therefore, more still needs to be done in Nigeria in terms of job creation in an attempt to increase inclusive growth process. Figure 3 shows the percentage of the population in severe poverty among the three economies of Nigeria, South Africa and Egypt.

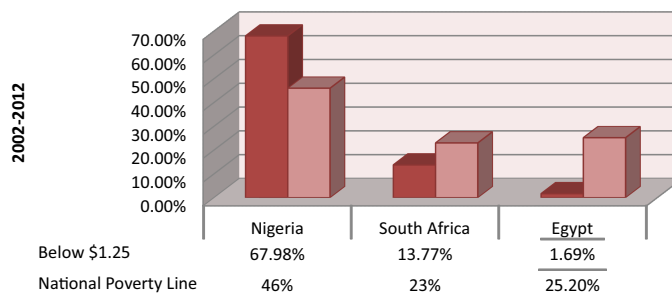
**Figure 3: Population in Severe Poverty among Nigeria, South Africa and Egypt**



**Source:** World Development Indicator (2014)

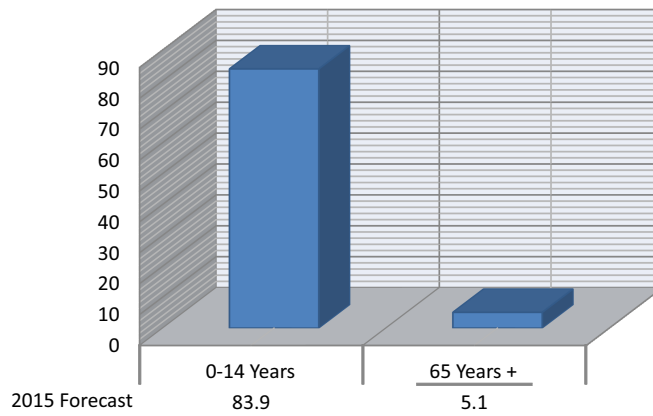
In Figure 3, the three largest economies in Africa were compared in terms of the proportion of their population in severe poverty. Africa's largest economy has 1.3% compared to Nigeria's 25.7% and Egypt's 1.5% respectively. Similarly, from Figure 4, it is clear that between 2002 and 2012, Nigeria recorded the highest population of people living below the poverty line. In terms of national poverty line, according to the UN Statistics (2014), 46% of Nigerians were living below poverty line compared to South Africa's 23% and Egypt's 25.2%. Moreover, when poverty is measured in terms of people living below \$1.25 per day, about 67.98% of Nigerians were living below the poverty line when we had just 13.77% of South Africans and 1.69% of Egyptians living below poverty line. High level of poverty is not synonymous with inclusive growth.

**Figure 4: Population below Poverty Line in Africa**



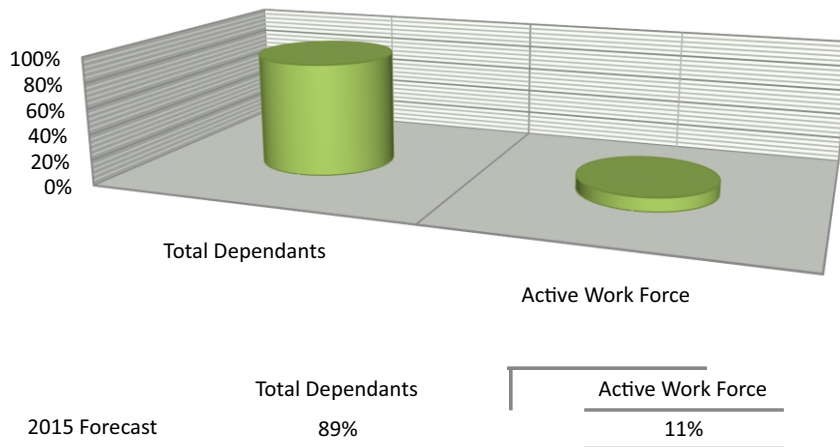
**Source:** World Development Indicator, WDI (2014)

**Figure 5a: Forecast of Dependency Ratio in Nigeria, 2015**



**Sources:** World Development Indicator, (2014)

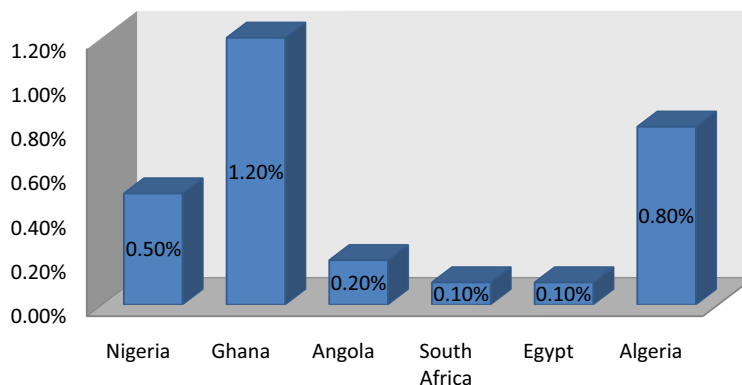
**Figure 5b: Forecast of Dependency Ratio in Nigeria, 2015**



**Sources:** World Development Indicator, 2014

One of the causes of exclusive growth is in terms of dependency ratio. In Figure 5a and Figure 5b, Nigeria's dependency ratio of ages 0-4 was around 83.9% while the dependency ratio of 65 years old and above was expected to be about 5.1%. The effect of this on the active workforce is shown in Figure 5b where the percentage of total dependent in Nigeria was forecast to be 89% in 2015 according to the United Nations Statistical Database (UNSD, 2014), meaning that the active work force will be just 11% by 2015. The implication of this is that incidences of poverty will become more intensified regardless of any governmental efforts to curb the situation owing to the fact that the real income of an active worker will fall drastically in Nigeria years to come, because there are mouths to feed. This may negatively affect efforts to achieve inclusive growth in Nigeria. From Figure 6, we can observe the proportion of homeless persons in 2013 in each country as a percentage of the entire population. This also measures poverty in these countries.

**Figure 6: Homeless Person among African Countries**

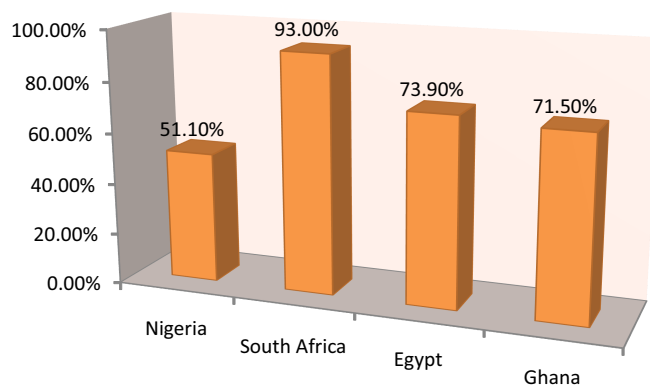


**Sources:** World Development Indicator, 2014



Findings show that Ghana has the highest percentage of 1.2% followed by Algeria with 0.8%. In Nigeria, 0.5 % of the entire population is homeless, 0.2 % in Angola and 0.1% in South Africa and Egypt respectively. Though Nigeria seems to have low percentage when based on its proportion, however, when converted to the actual number of population that is homeless, Nigeria has the highest incidence of 0.5% of over 170 million. This would have also worsened due to the present insecurity caused by *Boko Haram* (Western education is harmful) that has rendered many people in the North East region (Borno and Yobe States in particular) of the country homeless. This represents the internally displaced persons (IDPs).

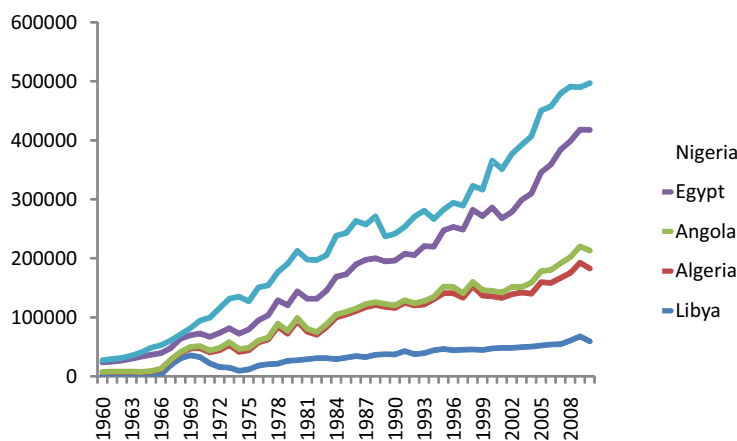
**Figure 7: Literacy Rate among African Countries, 2002-2015**



**Source:** World Development Indicator, 2015

Figure 7 shows the literacy rate of Nigeria between 2002 and 2015 which stood at 51.1%. This is very low for a country that wants to reduce poverty and increase participation in the growth process and in benefit sharing. Moreover, considering the status of the country in terms of natural endowment, a 51% literacy rate compared with South Africa's 93%, Egypt's 73.9% and Ghana's 71.5%, is very low.

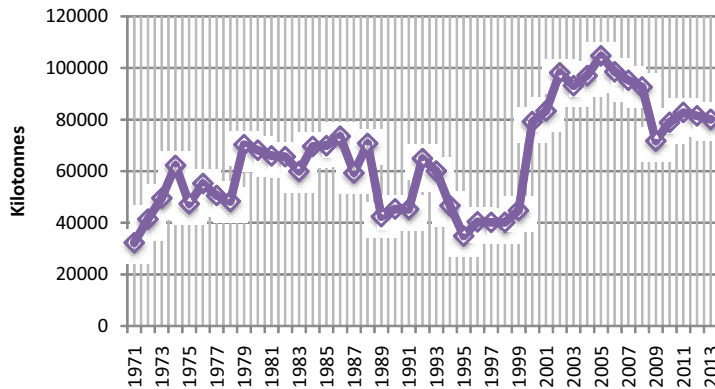
**Figure 8: Carbon Emission (KT) among African Countries**



**Source:** World Development Indicator, 2015

Figure 9 provides information on the amount of carbon emission in kilo tones of oil equivalent by the top five oil producing countries in Africa. From the trend, Nigeria is the highest emitting country among the five countries. This trend appears to continue unabated except in the early 1980s, early and late 1990s when emissions dropped a little, but has remained unabated since then.

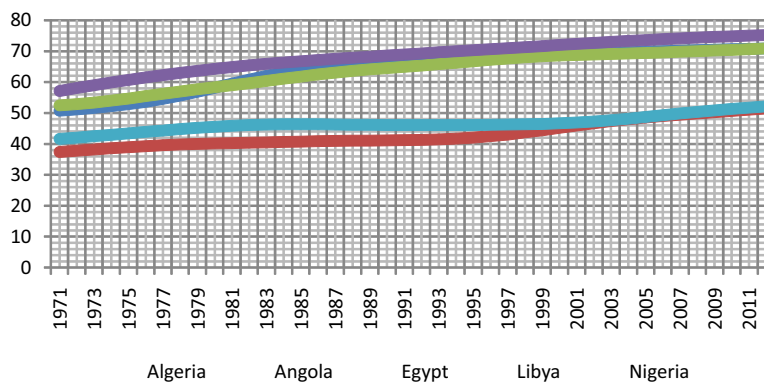
**Figure 9: Carbon Emission(Co<sub>2</sub>) in Nigeria**



**Source:** World Development Indicator, 2015

In Figure 10, it became clear that some improvements were recorded prior to 2010 mostly because of the implementation of the Gas Master Plan of 2006, which was not sustainable. Egypt follows Nigeria from the trend in terms of carbon emission, Angola and Algeria follows. Libya has the lowest rate of carbon emission among the five largest oil producing economies in Africa. Nigeria's emission will continue to grow unless due attention is given to reducing gas flaring in the Niger Delta region of the country. High rate of emission means lesser natural capital utilization now and in the near future and this portends danger for the growth process to be inclusive. Inclusive growth will require that all forms of capital (natural and unnatural) are maintained to guarantee future usage. Moreover, increase carbon emission has health hazard as it reduces life expectancy.

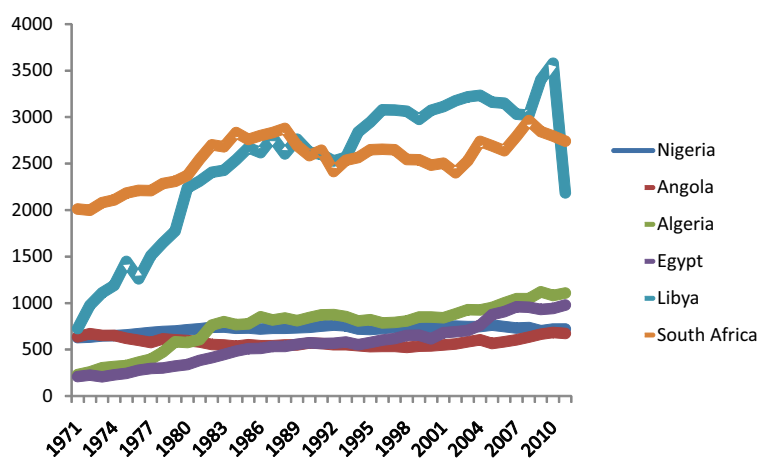
**Figure 10: Life Expectancy at Birth**



**Source:** World Development Indicator, 2014

The life expectancy in Nigeria compared to the five largest oil producing African economies is among the lowest. Comparatively, it fares better than that of Angola within the years, 1971 to 2013. Libya has highest life expectancy, followed by Egypt and Algeria. Libya's life expectancy at birth is 73 years in 2006 and 75 years in 2012, in Egypt, it was 69 years in 2006 and 70.9 years in 2012, in Algeria, it was 70 years in 2006 and 70.88 years in 2012, in Nigeria it was about 49 years in 2006 and 52 years in 2012, while in Angola, it was also about 49 years in 2006 and 51.5 years in 2012. If to go by anything, improvement in the life expectancy of Nigerians must be considered to ensure inclusive growth. In terms of energy consumption per/capita, the trend below shows that Libya and South Africa is having an edge as it relates to the amount of energy consumed per capita. Algeria is ahead of Nigeria around the early 1980s and Egypt around the late 1990s. While Nigeria's energy consumed per capita continues to shrink daily, Angola seems to be increasing forward. For growth to be termed inclusive, access to energy consumption in Nigeria must be positive and ever increasing.

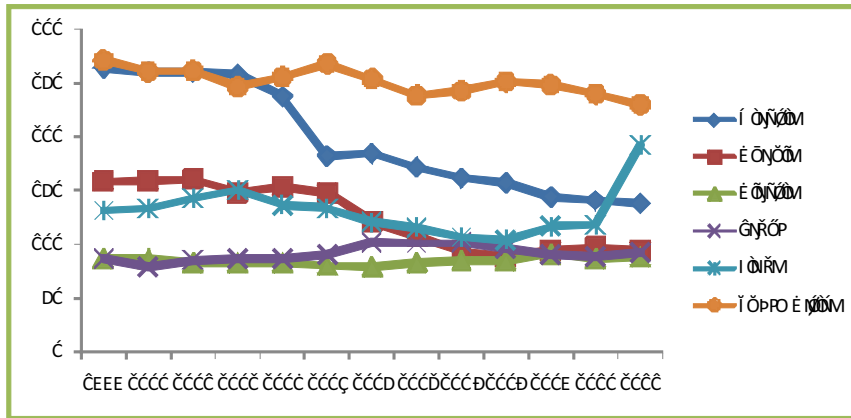
**Figure 11: Energy Consumed Per-Capita**



**Source:** World Development Indicator, 2014

It is observed that between 1999 and early 2000, Nigeria was almost at par with South Africa in terms of energy consumed per \$1000 GDP. In the early 2000s, Nigeria became Africa's most energy consuming nation per \$1000 GDP, but since 2003 to data the country's energy consumption has remained below South Africa's energy consumption and that of Libya. The abysmally low energy consumption of Nigeria implies that more needs to be done in order to ensure inclusive growth.

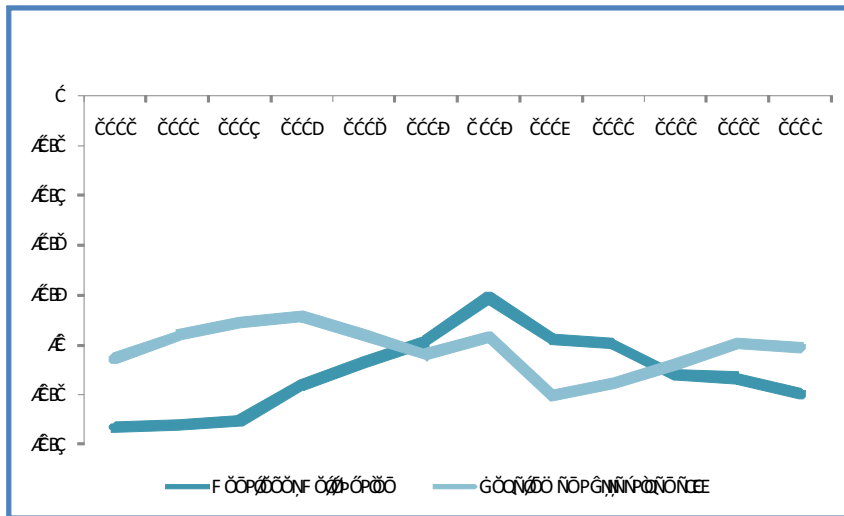
**Figure 12: Energy Consumed Per \$1000 GDP**



**Source:** World Development Indicator, 2014

The role of institution and governance is necessary for inclusive growth (Bouma and Berkhout, 2015). As the authors rightly observed, quality institution and effective governance is related to lower inequality and lower incidence of poverty and unemployment. The Figure below presents two indicators of governance among others.

**Figure 13: Governance Indicators**



**Source:** World Development Indicator, 2014

The value of the Figure 13 ranges from -2.5 (low rank) to 2.5 (high rank). As observed from the trend, the highest Nigeria achieved was in 2008 when it earned about -0.8 in control of corruption. In terms of corruption, Nigeria has always been ranked high. From 2008 till date, corruption has deteriorated from -0.8 to about -1.2 in 2013. Meanwhile, government effectiveness in Nigeria maintained an upward trend between 2002 and 2006, at the peak of -0.9, but has been on decline over time. This shows that inclusive growth in Nigeria is either weak or no-existing and as such needs to be improved and sustained if inclusive growth is to be achieved.

Table 1 summarizes the status of some of the major factors that impact on life expectancy and human development in Nigeria by international standards and by the standards even in most sub-Saharan African countries, Nigeria is very poorly equipped to development its human capacities.

**Table 1: Selected Health Indicators in Nigeria**

Indicators	1992	1996	2004	2005	2007	2009	2010	2014	2015
Life expectancy at birth (years)	52	54	54	54	54	54.0	54.0	52.5	53.05
Crude birth rate per 1000 persons	49	49	42.0	45	13.60	14.8	13.2	42.0	39.1
Crude death rate (per 1000 person)	14	14	11.1	12	17.8	15	14	17	12.7
Infant mortality per 1000 live births	195	75.1	76	76	76	75	76	114	69.4

**Source:** WDI (2016)

Life expectancy dropped from 54 years in 2010 to 53 in 2015 according to UNDP (2016). In comparison, this is far below that of Indonesia where life expectancy is estimated at 70 and also in Botswana and Ghana, which is 64 and 61.1 years respectively (UNDP, 2016). Crude death rate per 1000 persons remains at 14 from 1992 to 2001 before it dropped to 12 in 2005 and further declined to 11 in 2006. It gradually rose to 17.8 percent in 2007 but dropped to 14 percent in 2010. As at 2016 it stood at 16. Infant mortality rate on the other hand experienced a marginal improvement in the year 2000 as it stood at 75 per 1000 births. In the year 2001, it was 80 per 1000 births after which it steadily improved slightly to 76 in 2004 and reached 75 in 2009. By 2016, the infant mortality rate stood at 87.2.

**Table 2; Trends in Nigeria's three Mortalities, 2012-2016**

Infant mortality rate (per 1000 live birth)	61	63	64.7	69.4	71.2
Under – 5 mortality rate (per 100 live birth)	120.9	116.6	112.5	108.8	128
Maternal mortality rate (100,000 live birth)	678	800	789	800	814
Life expectancy	76	75	76	50.3	55.25

**Source:** World Development Indicator (2016)

It should be noted that under – 5 mortality rate (U5MR) is, according to UNICEF (2013), the principal indicator measuring human progress. This implies that U5MR is the end result of the development process rather than an input because it is the result of a wide variety of inputs on

nutritional health and the health of mothers. These include the level of immunization and oral rehydration therapy (ORT), availability of maternal and child health services (including parental care), income and food availability in the family, and the availability of clean water and safe sanitation. U5MR represents a more accurate picture of the health status of the majority of children and society as a whole. This is the reason why UNICEF has chosen U5MR as its single most important indicator of the state of nation's children. The profile of USMR is Nigeria demonstrates clearly the appalling and uncared state of Nigeria's children, a major challenge indeed to the Nigerian economy. The top five child killers of U5 are parental conditions, respiratory infections, diarrhea diseases, vaccine preventable diseases and malaria (Dawuda and Gajere, 2015). The table below shows the reported cases of notifiable health challenges in Nigeria between 2007 and 2016.

**Table 3: Reported Cases of Notifiable Diseases (2007 – 2016)**

Type of disease	2007	2008	2010	2011	2014	2016
Malaria	4,456,976	5,307,553	3,837,215	5,085,533	5,945,010	6,345,091
HIV/AIDS	44,010	47,365	44,290	41,961	42,876	45,763
Tuberculosis	31,264	32,882	29,949	24,752	26,711	35,765
Measles	12,049	65,804	26,290	53,522	50,321	56,876
Cholera	12,194	17,854	7,152	16,119	17,456	18,090

**Source:** Federal Ministry of Health, Abuja, Nigeria (2016)

As presented in tables 4. All the zones in Nigeria experienced reduction in infant mortality between 2007 and 2016. As at 2016, the North-West geo-political zone recorded the highest rate while the least was recorded by the South-South zone. The same applies to under 5 mortality rate. However, there was a drop from 162 between 2004 and 2008 to 128 in 2009 and 2012. As at 2013, the South – West had the highest Under 5 mortality rate while the South – West had the least. The spate of improved performance is also observed in the proportion of under one children immunized against measles. There was a slight increase in this proportion from 41.4 percent in 2008 to 42.1 percent in 2013. The same pattern is observed for all the geo-political zones, with the exception of the North Central and the South – West zones where the proportions respectively dropped from 51.4 to 48.1 and from 65.5 to 62.5 (NDHS, 2005).

**Table 4: Infant Mortality Rate**

Geo – political Zone	2008	2016
<b>North – Central</b>	77	66
<b>North – East</b>	109	77
<b>North – West</b>	91	89
<b>South – East</b>	95	82
<b>South – South</b>	84	58
<b>South – West</b>	59	61

**Sources:** NDHS 2013 and 2015

**Table 5: Under – 5 Mortality rate**

Geo – Political Zone	2008	2016
<b>North – Central</b>	135	100
<b>North – East</b>	222	160
<b>North – West</b>	217	185
<b>South – East</b>	153	131
<b>South – South</b>	138	91
<b>South – West</b>	157	128

Sources: NDHS 2013 and 2015

Furthermore, antenatal care as provided by skilled providers improves chances of pregnant women's safe delivery. From the surveys of National Human Development in Nigeria, it appears that for the entire country, the performance of the indicator – proportion of women aged 15 – 49 and who received antenatal care from skilled providers has witnessed some improvement. The proportion increased from 57.7 percent to 60.6 per cent between the periods 2008 and 2016. The same applied to all the geo-political zones as presented in table 6. The zone with the highest proportion of women in this category as at 2016 was the South – West zone while the least proportion was recorded in the North-West zone. Table 6 presents the report of the survey.

**Table 6: Proportion of Women aged 15 – 49 who Received Antenatal Care from Skilled Providers**

Geo – political Zone	2008	2016
<b>North – Central</b>	65.1	67.0
<b>North – East</b>	43.1	49.3
<b>North – West</b>	31.1	41.0
<b>South – East</b>	87.0	90.6
<b>South – South</b>	69.8	73.1
<b>South – West</b>	87.1	90.4
<b>National</b>	57.7	60.6

Sources: NDHS 2013 and 2015

However, the case of pregnant women delivered by skilled personnel is slightly different. As shown in table 6, there was a slight drop from 38.9 per cent in 2008 to 38.1 per cent in 2016 suggesting a decrease in the number of pregnant women delivered by skilled personnel. With respect to zonal differences, all the zones, as presented in table 6, recorded increase in the proportion of pregnant women delivered by skilled personnel with the exception of the South – South where in 2016 there was a drop of 0.4 percent from the 2008 figure.

**Table 7: Proportion of Pregnant Women Delivered by Skilled Personnel**

Geo – political Zone	2008	2016
<b>North – Central</b>	42.7	67.0
<b>North – East</b>	15.5	19.9
<b>North – West</b>	9.8	12.3
<b>South – East</b>	81.8	82.2
<b>South – South</b>	55.8	55.4
<b>South – West</b>	76.5	82.5
<b>National</b>	38.9	38.1

Sources: NDHS 2013 and 2015

One of the strategies for ensuring wide unhindered access to health services is the provision of health insurance opportunity for the people. As presented in table 8 at least nine out of every ten people are yet to enjoy health insurance coverage. Between 2008 and 2016, the proportion of men and women in this category dropped slightly, suggesting that more men and women were covered within this period. The same applies to all the geo-political zones, with the exception of the South – South zone where some men lost the opportunity to be covered by health insurance organizations as the proportion of men not enjoying the coverage increased from 96.6 percent to 98.0 percent as presented in the table 8.

**Table 8: Proportion of People aged 15 – 49 years not enjoying health insurance coverage**

Geo – political Zone	Men 2008	2016	Women 2008	2016
<b>North – Central</b>	97.4	95.2	97.4	97.2
<b>North – East</b>	98.3	97.6	99.5	99.0
<b>North – West</b>	99.4	98.7	99.3	97.9
<b>South – East</b>	97.9	97.6	99.3	97.6
<b>South – South</b>	96.6	98.0	96.6	95.2
<b>South – West</b>	97.8	95.4	97.3	96.7
<b>National</b>	98.2	97.0	98.2	97.1

Sources: NDHS 2013 and 2015

Meanwhile, in Nigeria, the first serious attempt to monitor the HIV/AIDS epidemic began in 1991 when the Federal Ministry of Health established the HIV/AIDS surveillance. Subsequent surveys have been taking place over the years till date. Using the results of the National Development Human Survey 2013 and 2015, the prevalence rate of HIV/AIDS dropped slightly from 5.8 percent in 2008 to 4.6 per cent in 2010 across the six geo-political zones in Nigeria (NDHS, 2013 and 2014). Table 9 shows the Multi-dimensional Poverty Index (MPI) in Nigeria. The MPI measures peoples' deprivations in health, education and standard of living. The MPI combines information on the proportion or incidence of peoples' deprivations as well as the intensity of these deprivations (NBS, 2015)



**Table 9: Censored Headcounts in Nigeria and Contribution of Deprivation to MPI in 2015 with K = 2.5**

Geo – political zone	MPI value 1	Nutrition	Proportion of people who are poor and deputed in Electricity	Sanitation	Drinking water	Assets
<b>North – West</b>	0.315	0.169	0.581	0.056	0.436	0.805
<b>North – East</b>	0.329	0.117	0.696	0.106	0.541	0.833
<b>North – Central</b>	0.285	0.136	0.528	0.375	0.365	0.797
<b>South – West</b>	0.154	0.22	0.208	0.234	0.407	0.762
<b>South – East</b>	0.176	0.334	0.302	0.1703	0.427	0.753
<b>South – South</b>	0.194	0.19	0.259	0.263	0.322	0.807
<b>FCT</b>	0.22	0.172	0.311	0.289	0.251	0.7
<b>National</b>	0.247	0.168	0.436	0.192	0.415	0.794

**Sources:** NBS, 2015

Information from Table 9 shows that the Nigerian MPI stood at 0.247 in 2013, an improvement over the 0.31 recorded in 2008. Table 9 shows a breakdown of MPI for the geo-political zones and the FCT, with the South-West recording the least MPI value of 0.154 in 2013. This indicated that the combined measure of the incidence and the intensity of poverty are lowest in the South –West zone in 2013. Since the MPI represents a combined measure of deprivation across the already defined dimensions, a pattern showing better performance in the South as opposed to the Northern geo-political zones was observed. The Northern geo-political zones have the highest MPI values. However, the proportion of people deprived in nutrition is relatively low in the Northern zones compared with the South –West and South- East zones. The North-East has the least contribution of deprivation from nutrition. The reason is not far-fetched: The most recent development programme of Agricultural Transformation Agenda (ATA) and the Growth Enhancement Scheme (GES) of the recent past administration recorded a good performance in improved production of arable crops and livestock through the provision of subsidized inputs to farmers, while the GES, which started in the Northern zone has had a good coverage within the zone. The deprivation of people in the Northern zones has been attributed to more of lack of household infrastructure including electricity, sanitation and portable drinking water and lack of assets (NDHS, 2015). Furthermore, the breakdown of the overall MPI value by states as revealed by the National Bureau of Statistics documentation indicates that the top five least deprived states in Nigeria were Lagos, Abia, Ogun, Anambra and Rivers, all in the Southern region while, the top five most deprived states in the Northern region include: Taraba, Sokoto, Kebbi, Bauchi and Kastina (NBS, 2015). Table 10 shows the Nigerian six geo-political zones human security index at 2015. From the table, it is only in the South- East that the human security is above 0.50. Residents in the North-West are the least humanly secured, closely followed by residents in the North –East geo-political zone.

**Table 10: Composite Human Security Index**

<u>Geo-Political Zone</u>	<u>Human Security Index</u>
North-Central	0.3888
North East	0.3043
North- West	0.2967
South East	0.5342
South-South	0.4723
South- West	0.4680
National	0.3299

**Source:** NHDR, 2015

### **Tools for Investing in Nigerian People: Lessons for Economic Recovery and Growth Plan (ERGP)**

At this point, it is quite expedient to make an evaluation of Nigerian Government commitment to human development before prescribing some vital tools for investing in Nigerian people. Meanwhile, the persistence of institutional inefficiencies, coupled with the low volume and poor quality of many development indices and human security indices as outlined in the previous section, often lead to the assumption that the Nigerian government is not committed to their peoples' development. For example, the allocation of government budget to education and health, are they in line with the international standard? The answer may be entirely no. Therefore at this point, the question that may be asked is simple. What should ERGP do differently from previous plan documents to improve human development indices?

It is to be noted that the problem may not necessarily be the lack of political commitment but rather the wide range of actions and inactions needed to create effective human development system. Political commitment is needed not just to improving human development in general but to boosting nutrition, implementing focal and major health and education reforms, to confronting HIV/AIDS, and Ebola, to protecting the vulnerable poor. Not only must vested interests be overcome, but human development programmes must simultaneously focus on the needs of the poorest, through basic health and education, and on the need to build the Nigerian society more generally. Taken together, the agitations within the public education system in Nigeria including the University lecturers (ASUU) and non-academic staff (NASU) and health labour forces under the aegis of the Nigerian Medical Association and the Joint Health Workers Union which normally represent the bulk of the non-military public services in Nigeria must be balanced.

For ERGP to reverse the ugly trends and promote investment in Nigeria's people. The social development targets of the Sustainable Development Goals (SDGs) (2030) and Africa's Vision 2063 offers a benchmark:

- i. Achieving and promoting universal primary education and other levels of education.
- ii. Eliminating gender disparities in education among the geopolitical zones (by 2020)
- iii. Reducing infant and child mortality by two – thirds of the Nigerian population.
- iv. Reducing maternal mortality by three quarters of the Nigerian population
- v. Achieving universal access to reproductive health services
- vi. Reducing extreme poverty by half (by 2020)
- vii. Reversing trends in the loss of environmental resources (by 2020)

For the present government through the ERGP framework to achieve the desired economic goals, political commitment, appropriate and effective service delivery and increased international cooperation must be sought. Although mechanisms have been instituted and they are yielding positive results, replications are urgently needed now at the state and local government levels.

### **Conclusion and Recommendation**

This study yields a number of insights into the analysis of human development in Nigeria using the descriptive but mostly analytical approach. The choice of this analytical approach is to provide an in-depth economic assessment of the human development indices of the Nigerian economy. Overall, the status of human development in Nigeria has not shown remarkable improvement in spite of the changes in the social and economic conditions in recent years following the reform measures. Moreover, there still exist the challenges of inequality, unemployment, educational and health challenges as well as the fear of macroeconomic instability.

In the mean time, the status of human development in Nigeria is being influenced by a number of factors. Basically, poor implementation of human development policies has been the bane of achieving the laudable objectives of development plans and documents in Nigeria. The inability of the government to effectively implement the economic blue prints as regards human development to the latter is one of the explanations of poor living standard and poor human development in Nigeria. Addressing the full implementation, monitoring and evaluation of ERGP, therefore becomes a critical criteria to ERGP improving the standard of living of Nigerians. Efforts should be made to improve the accessibility, affordability and quality of health care delivery mechanisms, access to basic education for all by improving the quality of secondary and tertiary education and science and technology based education for Nigerians through the ERGP framework.

The basic limitation encountered in the course of the study is data availability on the education and health variables. Meanwhile, the relied UNDP reports on Nigerian human development indices are limited and this no doubt could affect in some ways the robustness of the analysis and of the study and its policy relevance. That notwithstanding, the study gives some useful guidance to policy makers on human development and sustainable livelihoods within the Nigerian context.

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