
PROPOSAL FOR PARTNERSHIP AND SPONSORSHIP

ACUBIAC 2023

**2023 AMAKA CHIWUIKE-UBA
INTERNATIONAL ASTHMA CONFERENCE**

THEME

COVID-19 AND THE FUTURE IN THE PAST
Health Financing and Universal Health Coverage in Africa

THURSDAY, JULY 20, 2023
OAKLAND HOTEL, ENUGU, NIGERIA
9.00AM PROMPT



in collaboration with

Global Allergy & Airways Patient Platform (GAAPP)

Nigerian Medical Association (NMA)

Nigerian Thoracic Society (NTS)

NCD Alliance, Nigeria

Human Rights Volunteer Corps (HRVC)

Knowledge and Policy Management Initiative

Little Lung Africa (LLA)

THEME

COVID-19 AND THE FUTURE IN THE PAST

Health Financing and Universal Health Coverage

CHAIRMAN



▼ **PROFESSOR ISAAC FOLORUNSO ADEWOLE**,
FAS, FSPSP, FRCOG, FNAMed, DSc(Hons)
Former Minister of Health, Federal Republic of Nigeria

CONVENER



▼ **CHIWUIKE UBA, Ph.D.**
Chairman of the Board, Amaka Chiwuike-Uba
Foundation (ACUF)

SPEAKER



▼ **DR. UCHE R. OJINMAH**
President, Nigerian Medical Association
(NMA)

SPEAKER



▼ **PROFESSOR OBINNA ONWUJEKWE** FAS, FNAMeds
Professor of Health Economics, Systems & Policy

SPEAKER



▼ **TONYA WINDERS**
President, Global Allergy Asthma
Patient Platform (GAAPP)

SPEAKER



▼ **DR. ADAEZE AYUK** FMCPaed
Paediatric Pulmonologist,
UNTH, Enugu

SPEAKER



▼ **IFEDIORA C. AMOBI, Ph.D.**
Economic Consultant and former SSA to the President
on National Development Matters

SPEAKER



▼ **LARRY OGUEGO**
Leadership Consultant & Founder,
Human Rights Volunteer Corps

Date

**THURSDAY, 20TH
JULY, 2023**

Venue

**Oaklands Hotel &
Amusement Park,
Enugu, Nigeria**

Time

9:00AM

PARTNERS



For registration and seat reservation,
visit <http://acufasthmaconference.org.ng/form-sample/>
or send email/sms with your full name, email,
whatsapp number and gender to +234 909 114 4601
or acufasthmaconference@gmail.com

**For Partnership
Sponsorship**

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Request for Partnership and Sponsorship of ACUBIAC 2023

It is our pleasure to invite you/your company to co-sponsor the 2023 Amaka Chiwuike-Uba International Asthma Conference (ACUBIAC 2023). With your sponsorship, you will partner with Amaka Chiwuike-Uba Foundation (ACUF) and its collaborating Institutions for a successful 2023 ACUBIAC. This event will be drawing and featuring high-profile participants from Nigeria and across Africa and will attract over 1000 businesses and professionals.

ACUBIAC 2023 is the third in the series of national advocacy and public-private dialogue for better health sector environment in Nigeria. By identifying with ACUBIAC and its products, you/your organisation will earn a unique corporate image as supporter of health system environment reforms across Nigeria. In addition to being listed on all advertising and press as a sponsor of the event, you will have the opportunity to host a booth at the event to display products. This will earn you great publicity, a rich opportunity for business development through the conference audience and boost the corporate social responsibility of your organization.

The sponsorship opportunities include donating asthma medicines and management facilities, sponsorship of venue and facilities, production of policy briefs and conference reports and media and publicity activities in the run up to the landmark ACUBIAC 2023. Also, ACUBIAC 2023 provides rich opportunity for your organisation to engage commercially with the ACUBIAC 2023 participants. This includes the 36 state governments and their MDAs, local, national and global experts in health sector, including multilateral and bilateral development partners and foundations, members of the legislature, medical practitioners, civil society organizations, non-governmental organizations, academia, professional associations and the private sector and broader communities.

We look forward to see your benign presence with active contribution and support to make this Conference successful. Your early response would be greatly appreciated as it shall enable us to make final announcements in time and for Marketing Tools of this event. We have a target to print marketing material by the 27 May 2023 to give sponsors marketing millage/exposure of a month before the event date.

For confirmation and/or further enquiries, please contact any of the following: +234 803 309 5266, cuba@acuf.org.ng. As we await your favorable reaction to this request, please accept our sincere regards for your much-esteemed office.

Yours sincerely,



Chiwuike Uba, PhD, FCNA, MCIPR, MCIPM

Chairman, Board of Trustees

Amaka Chiwuike-Uba Foundation (ACUF)

+234 803 309 5266

ABOUT AMAKA CHIWUIKE-UBA FOUNDATION (ACUF)

Amaka Chiwuike-Uba Foundation (ACUF) is a non-profit, non-governmental and charitable organization established in November 2016 in memory of Mrs. Amaka Chiwuike-Uba who died from asthma exacerbation on July 4 2016. ACUF is dedicated to improving the quality of life of people; especially, those with asthma, allergy and respiratory diseases through research, education and training, advocacy and networking. ACUF envision a society with better breathing, better living and a people that are happier, healthier, united and prosperous.

ACUF broad programme objectives are carried out through four major Strategic Approaches of **Research, Education & Training, Advocacy, Policy Analysis & Dialogues**; and **Networks & Partnerships**.

WHAT IS ACUBIAC

ACUBIAC is acronym of *Amaka Chiwuike-Uba International Asthma Conference*. ACUBIAC is an international flagship public-private collaborative research and advocacy programme of stimulating policy dialogue and collaboration among stakeholders on improving the efficiency and effectiveness of health systems.

ACUBIAC is coordinated by the Amaka Chiwuike-Uba Foundation (ACUF) with support of public and private sector stakeholders in within and outside Nigeria. ACUF is an international, independent, non-partisan, not-for-profit think tank devoted to promoting evidence-based socioeconomic policies in Africa. Particularly, improving the quality of life of people through research, education and training and advocacy.

ACUBIAC is designed to continually benchmark and evaluate health systems environment across Nigerian States. The objective is to support evidence-based health systems environment reforms for enhanced competitiveness, effectiveness and efficiency of the health sector. The strategy is to mobilize and engage stakeholders in systematic, objective and sustained appraisal and improvement of the health environment. ACUBIAC is the advocacy and public-private dialogue mechanism by which ACUF periodically rallies and engages stakeholders on developments in the global, particularly the Nigerian health and other related sectors. ACUBIAC 2023 is the third in the series of national advocacy and public-private dialogue for better health sector environment in Nigeria.

The overall objective of ACUBIAC 2023, which has as its theme ***“COVID-19 and the Future in the Past: Health Financing and Universal Health Coverage (UHC)”***, is to stimulate dialogue and collaboration among stakeholders on health financing and UHC. In particular, to increase funding and improve the effectiveness and efficiency of investments/financing in the health sector and access to quality and affordable healthcare in Nigeria

The 2023 Conference is a follow-up to the 2017 and 2019 Amaka Chiwuike-Uba International Conferences, organized in collaboration with the Nigerian Medical Association (NMA), Nigerian Thoracic Society (NTS), Non-Communicable Diseases Alliance, Nigeria (NCD

Alliance), Human Rights Volunteer Corps (HRVC) and the Knowledge and Policy Management Initiative (KAPOMI).

The 2017 Conference on ***“Improving the Quality of Life of Nigerians: The Role of Timely and Accurate Diagnosis and Management of Asthma”*** was chaired by Rt. Hon. Ghali Umar Na’abba (former Speaker, House of Representatives, National Assembly). The event, which has over 700 media reports across the world also, had H.E. Dr. Emmanuel E. Uduaghan (former Delta State Governor), the Minister of Health, the Minister of Education, Minister of Science and Technology and over 350 persons in attendance.

The 2019 Conference on ***‘Better Breathing, Better Living: The Role of the Environment and Governance’*** was chaired Prof. Onyebuchi Chukwu (former Minister of Health). The Conference, which had over 700 participants had Dr. Mrs. Oby Ezekwesili, Prof. Rowland Ndoma-Egba, Prof. Chinedu O. Nebo, Prof. Tunji Olaopa, Prof. Benjamin S.C. Uzochukwu, Ademola H. Adigun, Prof. Gregory Erhabor, Dr. Adaeze Ayuk, Prof. Adewole O. Olufemi, Larry Oguego and Dr. Ifediora C. Amobi as speakers.

WHAT IS THE BRAND?

ACUBIAC is comprehensive, authoritative and scientifically based and embodies leading-edge knowledge products. The ACUBIAC brand will benefit government policy makers, technocrats, administrators, investors, business managers, entrepreneurs and civil society. The brand provides evidence-based and policy-oriented informational resources to improve health management systems, conduct risk analysis of investments, engineer policies for promoting investment and businesses in health sector across Nigeria.

WHAT IS IN IT FOR YOUR ORGANISATION?

There exists large scope for partnership with ACUBIAC to promote the brand. The collaboration opportunities are identified as follows:

- ✚ ***Sponsorship of Media and Publicity Activities.*** ACUBIAC 2023 involves prime-time nation-wide radio and television publicity. This earns the partners and sponsors great audience and boost public awareness and appreciation of sponsors as supporter and advocate of health sector reforms across Nigerian states. Every Partner-sponsored ACUBIAC publicity will explicitly bear due acknowledgement. The media hype will enhance the corporate image of the Partner in Nigeria, especially the health sector.
- ✚ ***Sponsorship of venue and facilities:*** There is also opportunity for Partner to sponsor venue and facilities for the Conference. The epic international event avails Partner(s) rich occasion to advertise its brands and communicate its corporate strategy and vision to the cream of Nigeria’s public and private sector and civil society and the investing public at large.
- ✚ ***The quality high-profile audience in ACUBIAC 2023 is deserving of attention from the Partner(s).*** Top echelons of public and private sector will be in attendance. ACUBIAC

2023 will bring together local, national and global experts in health sector, including multilateral and bilateral development partners and foundations. In addition, the participants, which are expected to be over 1000 persons, will include the members of the legislature, the executive (key policy and decision makers who have the powers to put policies and programmes into action), medical practitioners, civil society organizations, non-governmental organizations, academia, professional associations and the private sector and broader communities. The audience will provide a rich opportunity for business development for your organisation.

INVESTMENTS REQUIRED

PLATINUM SPONSORSHIP N10, 000, 000.00 & Above

(Maximum of three platinum sponsor)

This sponsor for the whole programme, and will have the following privileges (not limited to these one only):

- ✓ Sponsor name will be part of the official event name
- ✓ Flags/banners at entrance and inside the hall of ACUBIAC 2023
- ✓ Branding of the Conference tables
- ✓ Most prominent name and logo placement on all printed materials related to event
- ✓ Most prominent advert in Official Event Program Brochure
- ✓ Logo placement on banners, which serve as backdrop in all press photo opportunities
- ✓ Prominent Sponsor name recognition in all press releases related to events as a 'platinum sponsor'
- ✓ Preferred seating/tables at the event and opportunity to make remarks at the event
- ✓ Opportunities for Sponsor logo placement in newspaper ads, magazine press, radio and TV announcements
- ✓ Logo placement on ACUF and Conference websites, Event Page & Calendar
- ✓ Opportunity to conduct targeted marketing for efficient lead generation and sales
- ✓ Direct access to ideal customer profile (ICP) data and platform for post-event interactions

GOLD SPONSORSHIP N5, 000, 000.00 - N9,999,000.00

(Maximum of six sponsors)

This sponsor will have the following privileges (not limited to these ones only provided the platinum sponsor has not ceased that opportunity):

- ✓ Sponsor name will be part of the official event name
- ✓ Prominent name and logo placement on all printed materials related to event
- ✓ Prominent advert in Official Event Program Brochure
- ✓ Logo placement on banners, which serve as backdrop in all press photo opportunities
- ✓ Prominent Sponsor name recognition in all press releases related to events as the "gold sponsor"
- ✓ Special seating/tables at the event and opportunity to make remarks at the event
- ✓ Opportunities for Sponsor name in radio and TV announcements
- ✓ Logo placement on ACUF and Conference websites, Event Page & Calendar
- ✓ Opportunity to conduct targeted marketing for efficient lead generation and sales

SILVER SPONSORSHIP	₦2, 000, 000.00 – ₦4,999,000.00
Maximum of 20 sponsors <ul style="list-style-type: none"> ✓ Sponsor name will be part of the official event name ✓ Logo placement on all printed materials related to event ✓ Logo placement on banners, which serve as backdrop in all press photo opportunities ✓ Opportunity to make remarks at the event ✓ Opportunities for Sponsor name in radio and TV announcements ✓ Logo placement on ACUF and Conference websites, Event Page & Calendar 	
BRONZE SPONSORSHIP	₦500, 000.00 – ₦1,999,000.00
Maximum of 50 sponsors <ul style="list-style-type: none"> ✓ Name and logo on all official artwork ✓ Branding of the breakfast table ✓ Logo placement on banners, which serve as backdrop in all press photo opportunities ✓ Logo placement on the cover of the brochures, leaflets and correspondences 	
Ad Hoc SPONSORSHIP	Any amount/item
<ul style="list-style-type: none"> ✓ Name and logo on all official artwork ✓ Logo placement on banners, which serve as backdrop in all press photo opportunities 	

WHO ARE THE OTHER SPONSORS?

ACUBIAC is jointly sponsored by leading public and private sector institutions. The main sponsor is the Amaka Chiwuike-Uba Foundation (ACUF) which has funded more than 50% of the total budget since 2017. Support also comes from financial and in-kind donations from individuals and corporate organisations.

WHAT WILL YOUR ORGANISATION FUND?

The entire budget of ACUBIAC 2023 specifying the items for sponsorship provided in this proposal. We urge you to co-fund this budget and partner with ACUBIAC. You may wish to fund specific components of the Budget or make a lump-sum donation or provide facilities in lieu of the specific budget items.

FINANCIAL TERMS AND CONDITIONS

As with any sponsorship opportunity, as soon as you financially commit to becoming a sponsor, your name will be associated with the programme and exposure will commence. The programme marketing is well underway with the website being developed, the programme brochures are being compiled and press releases and other associated promotional materials are being organized/distributed.

Payment terms are as follows:

100% payment by end of month in which sponsorship deal is concluded.

If you are interested in taking up any of these sponsorship opportunities and would like to discuss the sponsorship in more detail please feel free to contact:

Dr. Chiwuike Uba | **+234 803 309 5266** | **cuba@acuf.org.ng**

Bank Account Details

You can make an online donation by clicking this [link](#) or a direct fund transfer to any of the following bank accounts.

Account Beneficiary	Amaka Chiwuike-Uba Foundation (ACUF)
Bank Name	Guaranty Trust Bank Plc
Account Numbers	0236341138 (NGN N)
	0236341145 (USD \$)
	0236341152 (GBP)
	0236341169 (Euro N)
Branch Sort Code	058255315
Swift Code	GTBINGLA

BUDGET FOR ACUBIAC 2023

S/N	Description of Activity	Rate	Qty	Days/ Nights	Amount (Naira)
A	INTERNATIONAL ASTHMA CONFERENCE				
	Acomodation and Transport for Resource Persons				
	Accomodation	45,000.00	10	2	900,000.00
	Transportation (including return ticket + est. airport taxis) max	210,000.00	9	1	1,890,000.00
	International Transportation (including return ticket + est. airport taxis) max	1,300,000.00	1	1	1,300,000.00
	Subsistence	15,000.00	10	3	450,000.00
					4,540,000.00
	Honoraria				
	Registration, ushering attendants - 10 persons@N10,000/day	10,000.00	10	1	100,000.00
	Honoraria for Rapporteurs	70,000.00	2	3	420,000.00
	Honoraria for Panel and Resource Persons upto absolute max N200,00.00	200,000.00	10	1	2,000,000.00
					2,520,000.00
	Hall/LUNCH				
	Hall	1,800,000.00	1	1	1,800,000.00
	Group Lunch	5,950.00	800	1	4,760,000.00
	Tea/Cofee Break	2,200.00	800	1	1,760,000.00
	Bottled Water	150.00	1000	2	300,000.00
	Beverages	350.00	1000	1	350,000.00
					8,970,000.00
	Facilitation				
	Communications (emails, telephone calls, text messages, etc)				300,000.00
	Banners	62,000.00	6	1	372,000.00
	Couriers	6,500.00	120	1	780,000.00
	PA system	150,000.00	1	1	150,000.00
	Projector and Screen	350,000.00	1	1	350,000.00
					1,652,000.00
	Consumables				
	Secretariat and logistics materials including toners, papers and related materials				350,000.00
	Printing of Conference Programme, Asthma Toolkits	2,200.00	1000	1	2,200,000.00
	Photocopies/production of papers to be presented conference	30.00	1000	1	30,000.00
	Conference Folders/Bags	2,000.00	1000	1	2,000,000.00
					4,580,000.00
	Publicity and Dissemination				
	TV/Radio Announcements	6,800.00	10	15	1,020,000.00
	Press/Media releases, announcemnt articles, conferences, Op-Eds,	120,000.00	5	2	1,200,000.00
	Videographer	600,000.00	1	1	600,000.00
					2,820,000.00
	Transportation & Logistics (Provisional)				1,000,000.00
	<i>Preparation and production of Policy briefs, proceedings of the Conference and Stakeholder Enlightenment Papers</i>				2,000,000.00
					3,000,000.00
	Sub-Total to International Asthma Conference				28,082,000.00
B	AWARENESS AND ADVOCACY PROGRAMME				
	Phone-in Radio Programme (Airtime/Slot Payment)				
	Experts (Honorarium---transportation,etc)	20,000.00	10	10	2,000,000.00
	Airtime/slot payment	50,000.00	10	10	5,000,000.00
					7,000,000.00
	Free Medical Mission to Rural Communities				
	Honorairum to Doctors	30,000.00	5	3	450,000.00
	Honorairum to Nurses	10,000.00	5	3	150,000.00
	Transportation				200,000.00
	Provision for Medical Equipment				1,000,000.00
	Provision for Drugs				6,000,000.00
					7,800,000.00
	Sub-Total to Awareness Creation and Advocacy				14,800,000.00
C	GRAND TOTAL (A+B)				42,882,000.00

CONFERENCE CONCEPT NOTE

1.0 Background

The COVID-19 pandemic has not only exposed the weaknesses of health systems and resilience in Africa, but also exposed areas of need, provided opportunities to strengthen Africa's health infrastructure and confirmed the need to mobilize resources and secure public funding for health spending. It has also provided the framework to recognise the critical importance of universal systems to galvanize progress towards universal health systems, by capitalizing on the current political commitment to address health emergencies. One of the major problems facing Africa; especially Nigeria is the lack of healthcare structures, materials and health care workers, archaic methods, poor health care financing, poor/low health care services, and the inability to build upon lessons learned. These problems persist despite the recognition of the right to life as a fundamental human right of all human beings, by the Constitutions, international charters, commissions and conventions and most recently, the SDGs. Specifically, SDG 3 has an overarching objective to "ensure healthy lives and promote wellbeing for all at all ages".¹ Nevertheless, the achievement of the remaining 16 SDGs rests squarely on the achievement of SDG 3.

According to the World Health Organisation (WHO), over 920 million people spend at least 10% of their household budget on out-of-pocket expenditures on health care, and about 100 million people are still pushed into extreme poverty because they have to pay for health care². In Africa, approximately one in three people (33% of the population) currently has access to essential health services under the available health systems, while the remaining 67% of the population does not have access to essential health services. In addition, about 38% of Africans delay or forgo health care due to high costs, even when the continent is carrying 23% of the global disease burden, with lower respiratory diseases (including asthma) as one of the highest six major diseases. According to 2020 Global Spending on Health Report, Africa's health expenditure in 2018 accounted for just 1% of total global health expenditures and the rest of the world spends 10 times more on health care than Africa.³ Evidently, increased public spending on health and investment in stronger health systems is crucial in ensuring universal health coverage (UHC), while responding to COVID-19, protecting people from future health threats and making health for all a reality.⁴

In Nigeria, the profound lack of recommended asthma medicines in pharmacies is worrisome. In most cases, the available medicines, such as oral corticosteroids, have multiple adverse side effect. The oral salbutamol formulations also are associated with side effects such as tremors and cardiac arrhythmias and may promote recurrent exacerbations and the risk of asthma mortality. Unfortunately, these oral formulations are on the Nigerian EML which is clearly out of tune with the current recommendations by WHO. None of the medicines that are the mainstay of treatment for asthma is available in Nigeria. The drivers for the high availability of oral

¹ https://www.who.int/health-topics/sustainable-development-goals#tab=tab_2

² [https://www.who.int/news-room/fact-sheets/detail/universal-health-coverage-\(uhc\)](https://www.who.int/news-room/fact-sheets/detail/universal-health-coverage-(uhc))

³ <https://www.who.int/publications/i/item/9789240017788>

⁴ <https://www.who.int/news-room/feature-stories/detail/responding-to-covid-19-and-building-stronger-health-systems-for-universal-health-coverage>

salbutamol and other non-guideline recommended treatment for asthma in Nigeria may be related to the poverty, poor knowledge and non-application of guideline-based care among doctors who continue to prescribe these medications. Due to the lack of access to asthma medications in Nigeria, occasioned by availability and affordability issues, the level of asthma control in Nigeria is poor with a high burden of asthma symptoms, limitation in activities and mortality.

Understanding that the UHC is the bedrock for resilient health systems, which will remove financial barriers to accessing primary health care, particularly for the poor and vulnerable, all the United Nations Member States agreed to achieve universal health coverage by 2030, as part of the SDGs. The SDG 3.8 aims to achieve **universal health coverage**, including financial risk protection, access to quality essential healthcare services, and access to safe, effective, quality, and affordable essential medicines and vaccines for all. Also, SDG 3.4 aims to reduce by one third premature mortality from **non-communicable diseases** through prevention and treatment and promote mental health and well-being.

To achieve this, while the Addis Ababa Action Agenda underscored the need for the mobilization of private-sector finance and domestic public resources, the Abuja Declaration had all the African Union countries pledged to spend at least 15 percent of their annual national budget on health. Painfully, despite the above agreements, public spending on health has remained abysmally low, with the exception of Tanzania that has achieved the target of 15% of the total annual budget on health. For other countries, the share of government expenditures going to health is even reducing compared to the position prior to the Abuja Declaration. Health budget outturn in terms of actual spending and achieving key budget objectives is even worse than the budgeted amount.

Africa's public spending on health remains inadequate to meet the annual health financing gap of about US \$66 billion, as well as the rising health care demands. Increasing public debts may not be the option as most African economies are currently spending up to five times their health budgets on debt repayments.⁵ Therefore, to bridge the financing gap and increase access to affordable and quality health care in Africa, policy to expand universal health insurance coverage and leverage the capital and capacity of the private sector to complement government financing and investments is needed. Primary Healthcare (PHC) as the main enabler of UHC and poverty reduction requires huge investment in health facilities, equipment and infrastructure, human resources (including e-learning) and e-health tools to improve access and quality of health service delivery to the poor and vulnerable populations.

In Nigeria, PHC is very weak and one of the main foundations and drivers of gross inequality in health status of people. Many perceive health as a non-productive sector, one which does not contribute so much to growth and development. However, available data have shown that health is a very productive sector for investment. According to Nigeria's government, Nigeria alone is losing \$1bn annually to medical tourism and Africa's health care market is worth over \$35 billion. This is even more given the Africa's population growth rate.

⁵ <https://qz.com/africa/1848047/nigeria-kenya-ghana-spend-twice-more-debt-payment-than-health/>

Nigeria has 40,400 hospitals and clinics, with 34,385 representing 85.1% of the total hospitals and clinics as PHCs. While about 12% of the total practicing physicians work in the 34,385 PHCs (public and private), 74% work in private hospitals and 26% in public hospitals. Conversely, while a larger percentage (74%) of the practicing physicians works in private hospitals, private hospitals and clinics represent only 27% of the total hospitals and clinics in Nigeria. In summary, Nigeria has 1 physician per 2500 population and 1 nurse per 625 populations.^{6,7}

Since the formal launch of the NHIS on June 6, 2005, while government spending on health as a percentage of the total budget has continued to decline, with less than 3 percent of Nigeria's population covered by the scheme. In 2018, government spending as a percentage of health spending is only 14.9%, with out-of-pocket expenditure accounting for 76.6%, external aid 7.86% and health insurance 0.76%. According to 2020 Report on Global Health Expenditure by the World Health Organization, Nigeria's out of pocket expenditure has continued to increase from 60.2% in year 2000 to 76.6% in year 2018, while government spending as a percentage of health spending and health insurance coverage have continued to decrease.

There can be no UHC without affordable, quality, equitable and sustainable primary healthcare, supported by health financing. Therefore, increased public spending, private sector investments, and universal health insurance are panacea to achieving universal health coverage - managing health inequalities and risks for the poor, vulnerable and marginalized populations as well as reduction in poverty and avoidable annual deaths and morbidity. Therefore, in realization of and on the need to address these key components of healthcare systems and management; especially health financing and universal health coverage, the theme for the 2023 Amaka Chiwuike-Uba Annual Asthma Conference has been chosen as **“Future of the Past: Health Financing and Universal Health Coverage”**.

2.0 Objectives of the Conference

The overarching goal of the Conference is to provide a platform/forum to identify, brainstorm and share information on Health Financing and Universal Health Coverage as well as stimulate dialogue and enhance collaboration among stakeholders for more effective public, private and external investments and financing of the health sector, with a view to urgently accelerate progress towards health SDGs and achievement of UHC by 2030. Specifically, the conference will, amongst other things, help to:

1. Identify the critical links between health, finance and governance and prioritize the key emerging public health challenges in Nigeria;
2. Define key areas for action at policy and implementation level with focus on viable and sustainable public-private partnerships on health financing;
3. Share innovative, sustainable, scalable, models and best practices for public health sector reforms;

⁶ <https://hfr.health.gov.ng/statistics/tables>

⁷ National Primary Health Care Development Agency (NPHCDA 2015). Report of the expert group on revitalization of primary health care in Nigeria. Abuja Nigeria

4. Share viable health financing models for PPPs and provide a platform for potential new private and public sector partners to enter the field;
5. Build consensus regarding the causes of and solutions to ineffective and inequitable public, private and external financing of the health sector;
6. Facilitate an exchange between the governments, political leaders, donors, technical experts and CSOs to build consensus on approaches to enhance strategies, policy and advocacy on health financing and UHC;
7. Build momentum for the achievement of SDGs, especially, SDG7 and SDG3, by catalyzing and coordinating action at a sub-national, national and global level.

3.0 Format of the Conference and Description of the Main Activities

In order to adhere to the COVID-19 guidelines and protocols, the one-day interactive Conference will adopt a hybrid format (on-site and online) and will be divided into three sessions.

3.1.1. An Opening Segment

The opening segment shall feature opening remarks from key partners and selected participants, a keynote paper presentation on the theme of the Conference and a group photograph.

3.1.2. Three Interactive Panel Discussions

Each panel will feature up to four speakers, including representatives of multi-stakeholder constituencies with diverse backgrounds and other targeted presentations on health financing and universal health coverage. Sessions will include statements from panelists; stories from the field related to the theme of the session, audience polling on specific questions and facilitated discussions with the panelists to answer questions raised from the floor. At the end of the session, moderators will wrap up and summarize the key points. Priority of interventions from the floor (approximately 15-20 interventions per session) will be given to joint statements of the Conference.

3.1.3. A Closing Segment

This segment will be the final segment of the Conference and will feature wrap ups, draft action plans/recommendations and closing remarks.

The Annual Conference will be chaired by somebody not below the rank of a Federal Minister and will also feature high-level contributions and discussions by distinguished global leaders in various fields, complemented by young minds, and other participants who will be making contributions from their individual perspectives. We are also expecting special addresses from Special Guests of Honour, some State Governors and the Vice President, Federal Republic of Nigeria

3.1.4 Themes and Topics

The thematic areas and sub-topics for the Conference include the following:

- COVID-19 and the Future of the Past: Health Financing and Universal Health Coverage (UHC);

- Health Insurance and Protection of the Poor: A tool for Efficiency and Equity in Health Care Service Delivery;
- Health Care Financing Reforms in Nigeria: Toward Universal Coverage under Fiscal Constraints;
- "Implications of Health Financing on Severe and Difficult to Control Asthma and Patient Experiences;
- Redefining the Role of PPP's: Investments and Strengthening Health Systems for Inclusive Development and Prosperity;
- Connecting People to Connected Health: UHC 2030 and the SDGs;
- Noncommunicable Diseases (NCDs), and Emerging Health Issues and Priorities: A Reality Check;
- Human Rights, UHC and Health Management in Africa;
- Implications of Doctors Emigration on Nigeria's Healthcare System

4.0 Process Leading to the Conference

A broad and inclusive process will be deployed ahead of the conference, where experts and representatives of relevant organizations and agencies will be consulted on the conference objectives and how they can contribute to the event. Other processes which will culminate in the Conference include the following:

1. Phone-in TV and Radio program on SDG 3, Health Financing, Governance and Universal Health Coverage
2. Medical outreach for those with asthma, allergy and other respiratory conditions. The outreach will include free medical consultation, diagnosis, and asthma medicines.

3.0 Proposed Post-Conference Activities:

- a. A post-Conference review meeting to evaluate the Conference and its processes. This evaluation will inform future actions for the implementation of the resolutions/action plans from the Conference.
- b. Develop health care financing and UHC information systems (indicators in UHC monitoring and poverty-environment mapping) that can track the value and use of key health assets in relation to the needs of the poor;
- c. Build the capacity of the State and Non-State actors to support health financing and budget reviews, monitoring and evaluation as part of all sectors' inputs into public expenditure

review processes to determine and match the cost of health care services and assets with the benefits/results;

- d. Strengthen the Civil Society Organizations' (CSOs) monitoring and communications (feedback mechanisms) skills to track the use of healthcare assets, hold leaders accountable to promises of health for all and progress toward stronger, more equitable health systems and improve transparency of government and private sector health expenditures;
- e. Capacity building/skilling for unemployed youth as community care givers/social workers, and to provide services that will assist the community to collect data/statistics of health cases, which the government might not be aware of and helping where they can but mostly bringing a detailed report with pictures of the situation in order to meet UHC in 2030;
- f. Provide technical assistance to the relevant Legislative Committees to develop overall legislative and regulatory frameworks for health care governance, financing and universal health care coverage;
- g. Build cross-sectoral mechanisms for coordinated actions and investments for UHC;
- h. Continue to raise awareness on the benefits of good practice and develop practical guidelines on health care governance and management; and
- i. Provide the platform and facilitate regular debates and policy dialogues between key stakeholders to review and discuss states of practice on health care governance, financing and management in line with UHC and relevant SDGs.

5.0 Expected Participants

The Conference will bring together local, national and global experts and organizations in the public and health finance, including Ministries of Health, Finance and Planning, Environment, Education and other national and sub-national government representatives; multilateral and bilateral development partners and foundations. In addition, the participants, which are expected to be over 500 persons, will include the members of the legislature, the executive (key policy and decision makers who have the powers to put policies and programmes into action), medical practitioners, civil society organizations, non-governmental organizations, academia, professional associations and the private sector and broader communities. This includes ensuring the participation and voices of women, children, youth and other vulnerable groups.

6.0 Expected Outcome

- Secured financial and political commitments from government to prioritize, increase and sustain investments and financing on universal health coverage.
- Accelerated progress towards universal health coverage, including access to essential health services;

- Accelerated and scaled up action on NCDs to meet global targets to reduce the number of people dying from NCDs like asthma, diabetes, cancer, heart and other lung diseases.
- Raised awareness among policy makers and other stakeholders to the importance of and the opportunity that health financing and public spending on health play in creating stronger, more resilient health systems in Africa and why additional attention to and resources for this issue are urgently needed;
- Exchanged knowledge and practical experiences in delivering quality, affordable, equitable and sustainable health care services in resource-constrained environments through innovations (efficient medical devices) and financing/delivery models; and
- Built a coalition in support of national and global action on health financing and universal health care coverage and delivery.

7.0 Expected Output

The Conference will produce a Report capturing and detailing the processes and learning from the Conference, proceedings, agreements, and proposed action plans.

8.0 Venue and Date of the Summit

The Conference will be held on Thursday, 20th July, 2023, in Enugu, Nigeria

THEME

COVID-19 AND THE FUTURE IN THE PAST Health Financing and Universal Health Coverage

CHAIRMAN



▼ **PROFESSOR ISAAC FOLORUNSO ADEWOLE,**
FAS, FSPSP, FRCOG, FNAMed, DSc(Hons)
Former Minister of Health, Federal Republic of Nigeria

CONVENER



▼ **CHIWUIKE UBA, Ph.D.**
Chairman of the Board, Amaka Chiwuike-Uba
Foundation (ACUF)

SPEAKER



▼ **DR. UCHE R. OJINMAH**
President, Nigerian Medical Association
(NMA)

SPEAKER



▼ **PROFESSOR OBINNA ONWUJEKE** FAS, FNAMeds
Professor of Health Economics, Systems & Policy

SPEAKER



▼ **TONYA WINDERS**
President, Global Allergy Asthma
Patient Platform (GAAPP)

SPEAKER



▼ **DR. ADAEZE AYUK** FMCPaed
Paediatric Pulmonologist,
UNTH, Enugu

SPEAKER



▼ **IFEDIORA C. AMOBI, Ph.D.**
Economic Consultant and former SSA to the President
on National Development Matters

SPEAKER



▼ **LARRY OGUEGO**
Leadership Consultant & Founder,
Human Rights Volunteer Corps

Date

**THURSDAY, 20TH
JULY, 2023**

Venue

**Oaklands Hotel &
Amusement Park,
Enugu, Nigeria**

Time

9:00AM

PARTNERS



For registration and seat reservation,
visit <http://acufasthmaconference.org.ng/form-sample/>
or send email/sms with your full name, email,
whatsapp number and gender to +234 909 114 4601
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