

AWARENESS AND UTILIZATION OF THE SERVICES OF ANAMBRA STATE HEALTH INSURANCE AGENCY (ASHIA) AMONG PRIMARY SCHOOL TEACHERS IN ANAMBRA STATE NIGERIA

Nnaemezie Nkiru Onyinyechukwu¹ and Onyiuka Chisom Maryann²

^{1,2}Department of Health Promotion and Public Health Education, Nnamdi Azikiwe University, Awka Nigeria.
no.nnaemezie@unizik.edu.ng

Abstract

This Study investigated This Study investigated Awareness of the services of Anambra State Health Insurance Agency (ASHIA) among primary school teachers in Anambra state. Three research questions and two null hypotheses guided the study. Cross-sectional research design was adopted for this study. A sample of ninety-three (93) teachers out of a population of 1,874 was used. Multi stage sampling method was used to draw the sample. The instrument used for data collection is a questionnaire titled Awareness and Utilization of the services of ASHIA (AUASHIAQ). The instrument was validated by three experts, Kuder -Richardson formula was used to compute the internal consistency of the instrument. Mean and standard deviation were used to answer the research questions while T-test was used to test the hypotheses. All the hypotheses were tested at .05 level of significance and appropriate degrees of freedom. The data collected was analyzed with SPSS version 25. Findings revealed that primary school teachers demonstrated a moderate level of awareness of the services of ASHIA. Findings revealed that primary school teachers in Anambra State demonstrated a moderate level of awareness of the services provided by the Anambra State Health Insurance Agency (ASHIA). The level of awareness among both male and female primary school teachers was also moderate. Similarly, teachers with 0–10 years, 11–20 years, and above 20 years of service demonstrated a moderate level of awareness of ASHIA's services. There was no significant difference in the awareness of ASHIA's services among male and female primary school teachers, nor was there a significant difference based on years of service. Despite this moderate level of awareness, the findings further revealed that the extent to which primary school teachers utilized ASHIA's services was low. The extent of utilization among both male and female primary school teachers was low. Similarly, teachers with 0–10 years and above 20 years of service utilized ASHIA's services to a low extent, while those with 11–20 years of service demonstrated a moderate extent of utilization. Based on the findings it was recommended that School administrators integrate health insurance information into staff meetings and communications. Regular updates about ASHIA services, success stories, and utilization guidance should be part of routine school communications to maintain awareness and encourage utilization.

Keywords- Awareness; Utilization; Health Insurance Agency

INTRODUCTION

The pursuit of universal health coverage (UHC); the principle that every individual should have access to quality health services without financial hardship has been recognized by the World Health Organization as a critical component of sustainable development and poverty reduction (WHO, 2025). Yet progress remains deeply uneven. The rate of the global population facing catastrophic out-of-pocket health expenditure rose continuously from 9.6% in 2000 to 13.5% in 2019, surpassing one billion people (WHO, 2025). Health

insurance addresses this burden through the pooling of contributions to finance members' healthcare. It serves as a financial mechanism that protects individuals and families from the potentially catastrophic costs of medical care while acting as a gateway to health services and a determinant of health system efficiency (Anderson, Hussey & Petrosyan, 2019). This mechanism, however, is only as strong as the systems built to deliver it and in many developing nations, those systems have fallen critically short

Nowhere is this challenge more evident than in Nigeria. The country's healthcare system is characterized by inadequate infrastructure, insufficient public funding, and inequitable access to quality services (Aregbeshola & Khan, 2018). Out-of-pocket payments account for approximately 77 percent of total health expenditure, among the highest rates globally (Nigeria Health Watch, 2021), forcing families to choose between medical care and basic needs and driving patients to delay treatment until conditions become critical. Onwujekwe et al. (2019) found that many individuals resort to self-medication or traditional remedies rather than seeking formal care because of cost concerns. The federal government established the National Health Insurance Scheme (NHIS) in 2005 to address this, yet by 2021 only approximately 5% of the population were enrolled, far below the government's own target of 30% coverage by 2015 (National Bureau of Statistics, 2022). Onoka, Onwujekwe, Uzochukwu and Ezumah (2018) attributed this to inadequate funding, poor public awareness, and the difficulty of extending coverage to rural and informal sector populations. In response, several states developed their own schemes tailored to local needs (Uzochukwu et al., 2019), and Anambra State was among them.

The Anambra State Health Insurance Agency (ASHIA) was established in 2018 with the objective of providing affordable, equitable, and accessible healthcare to all residents through a contributory pre-payment mechanism, targeting at least 90% enrollment and eliminating catastrophic health expenditures (ASHIA, 2023). Among its target populations, primary school teachers represent a particularly significant group. Oke, Labeodan and Adeola (2016) highlight that teachers' health and wellbeing have direct implications for the quality of education they deliver and the broader human capital development of the state. Adeloye et al. (2022) demonstrated that teachers in Nigeria frequently face barriers to quality healthcare due to financial constraints and inadequate coverage. Adebayo et al. (2015) further noted that teachers, as influential community figures, are well-positioned to promote positive health-seeking behavior within their communities when adequately informed.

For primary school teachers in Anambra State, participation in ASHIA is compulsory, with monthly contributions deducted directly from their salaries. However, financial contribution alone does not guarantee access to benefits, as teachers must still personally register with ASHIA and select an accredited facility before any services can be accessed. A teacher whose salary is being deducted monthly may therefore receive no benefit not because the scheme has failed, but because they lack awareness of the steps required to activate their own coverage. Awareness, the state or ability to perceive, recognize, and understand events, objects, or sensory patterns (UltimateLexicon.com, 2024), is the foundation upon which enrollment and sustained participation are built. Effiong et al. (2025) established that low awareness significantly constrains uptake, as potential beneficiaries fail to perceive a scheme's relevance or doubt its credibility. Owhojedo, Awuno, Enemuwe, Oyibo and Tettehfio (2023) found in Delta State that while 99.7% of teachers were aware of their state's contributory health scheme, only 36% demonstrated good knowledge of it. Onyemaechi and Ezenwaka (2022) established that moderate awareness improves enrollment but produces inconsistent service use, while Onyemaechi et al. (2025) found that high awareness is associated with greater utilization and satisfaction.

Utilization is the process of deploying resources effectively to achieve specific outcomes in healthcare delivery (Shi and Singh, 2019). Owhojedo et al. (2023) demonstrated that high utilization among teachers ensures timely treatment and reduces absenteeism, translating directly into better learning outcomes for pupils. Obelebra and Adeniji (2021) established that low utilization, even where enrollment exists, signals barriers such as poor awareness, distance to accredited facilities, or inadequate trust in the scheme. Both awareness and utilization do not occur uniformly across the teaching workforce. Women's more frequent interaction with health facilities for reproductive and maternal services tends to build greater familiarity with health insurance entitlements and more consistent utilization (Koch et al., 2022), a pattern Obelebra and Adeniji (2020) and Gillio et al. (2021) both confirmed in their studies. Among longer-serving teachers,

accumulated professional experience through seminars, union meetings, and workplace interactions deepens engagement with schemes like ASHIA over time. Adewole, Dairo and Bolarinwa (2016) reported that awareness of the NHIS was significantly higher among workers with longer service years, while Fischer et al (2020) found that motivation to engage with health insurance rises as individual's age and health needs increase.

Despite the significance of these issues, empirical evidence on the level of awareness and extent of utilization of ASHIA specifically among primary school teachers in Anambra State remains absent from the literature. It is upon this premise that this study seeks to assess the level of awareness and extent of utilization of ASHIA services among primary school teachers in Anambra State.

PURPOSE OF THE STUDY

The purpose of this study is to determine the Awareness of Anambra State health insurance agency among primary school Teachers in Anambra State. Specifically the study seeks to determine the:

1. Level of awareness of the services of Anambra State Health Insurance Agency among primary school teachers in Anambra state
2. Level of awareness of the services of Anambra State Health Insurance Agency among male and female primary school teachers in Anambra State
3. Level of awareness of the services of Anambra State Health Insurance Agency among primary school teachers in Anambra State based on their years in service
4. Extent of utilization of the services of Anambra State Health Insurance Agency among primary school teachers in Anambra State
5. Extent of utilization of the services of Anambra State Health Insurance Agency among male and female primary school teachers in Anambra State.
6. Extent of utilization of the services of Anambra State Health Insurance Agency

among primary school teachers based on their years in service

RESEARCH QUESTIONS

The following research questions guided the study:

1. What is the level of awareness of the services of Anambra State Health Insurance Agency (ASHIA) among primary school teachers in Anambra State?
2. What is the level of awareness of the services of Anambra State Health Insurance Agency (ASHIA) among male and female primary school teachers in Anambra State?
3. What is the level of awareness of the services of Anambra State Health Insurance Agency (ASHIA) among primary school teachers based on their years of service in Anambra State?
4. What is the extent of utilization of the services of Anambra State Health Insurance Agency among primary school teachers in Anambra State?
5. What is the extent of utilization of the services of Anambra State Health Insurance Agency among male and female primary school teachers in Anambra State?
6. What is the extent of utilization of the services of Anambra State Health Insurance Agency among primary school teachers based on their years of service in Anambra State?

HYPOTHESES

The following null hypotheses was formulated and tested at 0.05 level of significance

- 1) There is no significant difference in the level of Awareness of the services of Anambra State Health Insurance Agency (ASHIA) among male and female teachers in Anambra State.
- 2) There is no significant difference in the level of Awareness of the services of Anambra State Health Insurance Agency (ASHIA) among teachers based on their years in service.
- 3) There is no significant difference in the level of Utilization of services of Anambra State Health Insurance Agency (ASHIA) among male and female teachers in Anambra state.
- 4) There is no significant difference in the level of Utilization of services of Anambra State Health

Insurance Agency (ASHIA) among teachers based on their years in service.

METHODS

The Cross-sectional research design was adopted for this study. The population of the study comprised 1,864 primary school teachers in six (6) Local Government Areas of Anambra State under the Anambra State Universal Basic Education Board. A sample of ninety- three primary school teachers was used for the study. At the end, of the exercise, only 81 copies of the instrument were retrieved. The instrument used for data collection is a questionnaire titled Awareness of Services of ASHIA among primary school teachers in Anambra State (AOASHIAQ).

The Statistical Package for Social Science batch system was employed to compute the internal consistency of the instrument using Kuder-Richardson formula. The reliability co-efficient of ASASHIAQ was 0.77 and therefore adjudged reliable for this study. Mean and standard deviation was used to answer the research questions while T-test was used to test the hypotheses. All the hypotheses were tested at 0.05 level of significance and appropriate degrees of freedom.

RESULTS

Research Question One: What is the level of awareness of the services of Anambra State Health Insurance Agency (ASHIA) among primary school teachers in Anambra State?

Table 1: Primary School Teachers' Mean Awareness Ratings of The Services of Anambra State Health Insurance Agency (Ashia)

S/N		Mean	SD	Remark
1	Existence of Anambra State Health Insurance Agency (ASHIA)	3.84	0.37	HA
2	ASHIA provide access to quality healthcare services for its enrollees	3.72	0.66	HA
3	ASHIA makes healthcare affordable	3.70	0.53	HA
4	ASHIA promotes preventive healthcare services?	3.44	0.79	MA
5	ASHIA offers different health insurance packages for individuals and families	3.38	0.83	MA
6	ASHIA's coverage includes outpatient care	2.75	1.19	MA
7	ASHIA's health insurance also covers hospitalization	3.25	0.84	MA
8	ASHIA provides coverage for prescription medications	3.49	0.88	
9	ASHIA aims to reduce health inequalities among peoples in different parts of Anambra State	3.46	0.84	MA
10	ASHIA provides coverage for emergency medicals services.	2.99	1.05	MA
11	ASHIA promotes health education among all	3.06	1.05	MA
12	ASHIA aims to reduce the prevalence of non-communicable diseases among enrollees	2.93	1.19	MA
13	ASHIA provides coverage for mental health services	2.47	1.34	SA
14	ASHIA aims to reduce waiting times for medical treatments	2.94	1.14	MA
15	ASHIA provides coverage for dental care	2.99	1.16	MA
16	ASHIA promotes the use of technology	3.14	1.08	MA
17	ASHIA provides coverage for diagnostic	3.23	1.00	MA
18	ASHIA partner with private healthcare providers to expand service coverage	3.38	1.03	MA
	Overall Mean Awareness of ASHIA Services	3.23	0.62	MA

Table 1 presents the item-by-item and overall mean ratings of primary school teachers' awareness of Anambra State Health Insurance Agency's (ASHIA) services. Individual item mean ratings indicate that primary school teachers had high awareness of the existence of ASHIA (Mean = 3.84), its provision of quality healthcare services to its enrollees (Mean = 3.72), and its making of healthcare affordable (Mean = 3.70). Furthermore, of the 18 items, the teachers were

moderately aware of 13 items, but were slightly aware of ASHIA's coverage of mental health services (Mean = 2.47). The overall mean value of 3.25 indicates that primary school teachers had moderate awareness of the ASHIA services.

Research Question Two: What is the level of awareness of the services of Anambra State Health Insurance Agency (ASHIA) among male and female primary school teachers in Anambra State.

Table 2: Male And Female Primary School Teachers' Mean Ratings of The Awareness of Anambra State Health Insurance Agency's Services

Gender	N	Mean	SD	Remark
Male	24	3.09	0.77	MA
Female	57	3.29	0.54	MA
Total	81	3.23	0.62	

Table 2 shows that the mean rating of the awareness of ASHIA's service by male teacher was 3.09 while that of female teachers was 3.29. This indicates a mean difference of 0.2. However, the two groups had moderate awareness of ASHIA and its services.

Research Question Three: What is the level of awareness of the services of Anambra State Health Insurance Agency (ASHIA) among primary school teachers based on their years of service in Anambra State

Table 3: Primary School Teachers' Mean Ratings of the Awareness of the Services of Anambra State Health Insurance Agency by Years of Experience

Experience	N	Mean	SD	Remark
0-10 years	37	3.23	0.47	MA
11-20 years	31	3.29	0.77	MA
20 years & above	13	3.09	0.64	MA
Total	81	3.23	0.62	

As shown in Table 3 the mean rating of ASHIA's services by primary school teachers with 0 – 10 years of experience was 3.23. Those with 11-20 years of experience had mean rating of 3.29 while those with 20 years of experience and above had mean rating of 3.09. However, all primary school teachers with

difference years of experience had moderate awareness of the ASHIA'S services.

Research Question Four: What is the extent of utilization of the services of Anambra State Health Insurance Agency among primary school teachers in Anambra State?

Table 4: Primary School Teachers' Mean Ratings of the Utilization of the Services of Anambra State Health Insurance Agency (ASHIA)

S/N		Mean	SD	Remark
1	I utilize ASHIA accredited healthcare facilities	2.77	1.06	ME
2	I use ASHIA for hospital admissions	2.73	1.20	ME
3	I receive prescribed medications and drugs through ASHIA	2.93	1.10	ME

4	I use ASHIA for maternal and child health services (Pregnant, breastfeeding and children)	2.56	1.29	ME
5	I access laboratory services through ASHIA	2.70	1.23	ME
6	I utilize emergency medical services under ASHIA	2.57	1.36	ME
7	I receive health education through ASHIA program	2.32	1.21	LE
8	I access family planning services through ASHIA	2.12	1.24	LE
9	I use ASHIA for regular health check ups	2.91	1.13	ME
10	I use ASHIA for surgical procedures when needed	2.02	1.19	LE
11	I access eye care services using ASHIA	2.02	1.28	LE
12	I utilize ASHIA to access routine preventive screenings such as blood pressure, blood sugar levels and cancer screening	2.30	1.25	LE
	Overall Mean Utilization of ASHIA Services	2.50	0.95	LE

Research Question Five: What is the extent of utilization of the services of Anambra State Health Insurance Agency among male and female primary school teachers in Anambra State?

Table 5 : Male and Female Primary School Teachers' Mean Ratings of the Utilization of the Services of Anambra State Health Insurance Agency

Gender	N	Mean	SD	Remark
Male	24	2.43	1.07	LE
Female	57	2.52	.90	LE
Total	81	2.50	0.95	

Research Question Six: What is the extent of utilization of the services of Anambra State Health Insurance Agency among primary school teachers based on their years in service in Anambra State?

Table 6: Primary School Teachers' Mean Rating of Awareness of the Services of Anambra State Health Insurance Agency by Years of Experience

Experience	N	Mean	SD	Remark
0-10 years	37	2.56	.98	ME
11-20 years	31	2.48	1.00	LE
20 years & above	13	2.37	.79	LE
Total	81	2.50	.95	

Hypothesis One: There is no significant difference in the level of Awareness of the services of Anambra state health insurance agency (ASHIA) among male and female teachers in Anambra State.

Table 7: Independent Samples t-test Analysis on Mean Ratings of the Awareness of the Services of Anambra State Health Insurance Agency's Services by Male and Female Primary School Teachers

Gender	N	Mean	SD	df	t	p	Remark
Male	24	3.09	0.77	79	1.35	0.181	NS*
Female	57	3.29	0.54				

NS -Not Significant

Hypothesis Two: There is no significant difference in the level of Awareness of the services of Anambra state health insurance agency (ASHIA) among teachers based on their years in service

Table 8: Summary of Analysis of Variance on Mean Ratings of Awareness of the Services of Anambra State Health Insurance Agency's Services by Primary School Teachers of Different Years of Experience

Source of Variation	SS	Df	MS	<i>f</i>	<i>p</i>	Remark
Between Groups	0.356	2	0.18	0.45	0.637	NS
Within Groups	30.60	78	0.39			
Total	30.96	80				

Hypothesis Three: There is no significant difference in the level of Utilization of services of Anambra state health insurance agency (ASHIA) among male and female teachers in Anambra state

Table 9: Independent Samples t-test Analysis on Mean Ratings of Utilization of the Services of Anambra State Health Insurance Agency's Services by Male and Female Primary School Teachers

Gender	N	Mean	SD	df	t	<i>p</i>	Remark
Male	24	2.43	1.07	79	0.40	0.691	NS
Female	57	2.52	.90				

Hypothesis Four: There is no significant difference in the level of Utilization of services of Anambra state health insurance agency (ASHIA) among teachers based on their years in service

Table 10: Summary of Analysis of Variance on Mean Ratings of the Utilization of the Services of Anambra State Health Insurance Agency's Services by Primary School Teachers of Different Years of Experience.

Source of Variation	SS	Df	MS	<i>f</i>	<i>p</i>	Remark
Between Groups	0.38	2	0.19	0.21	0.815	NS
Within Groups	71.93	78	0.92			
Total	72.304	80				

DISCUSSION OF FINDINGS

Level of awareness of ASHIA services among primary school teachers

The findings from the study revealed that the level of awareness of ASHIA's services by primary school teachers was moderate. The findings is in line with Ilochonwu and Ilochonwu (2017) who carried out a study on awareness, utilization and perception of healthcare workers towards NHIS in a tertiary hospital in Ile ife. The findings revealed that healthcare workers awareness was fair. This is in contradiction with the findings of Olayemi (2017) who opined that the level of awareness of NHIS among Librarians in Nigeria is

high. Specifically, respondents were highly aware of ASHIA's existence and its roles in improving access to and affordability of healthcare. They were moderately aware of services like diagnostic care, emergency coverage, and preventive services. Awareness of ASHIA's coverage for mental health was particularly low reflecting the generally limited mental health literacy in Nigeria and the persistent stigma that surrounds mental health issues. This is in agreement with Michael et al(2020) who opined that 80% of the respondent had average knowledge of NHIS while 48% had adequate knowledge of NHIS. It is also in line with the findings of Onyenoru, Nwakanma, and

Adeagbo (2021), who found out that their respondent have inadequate knowledge in some key aspects of NHIS program.

Both male and female primary school teachers demonstrated moderate awareness of ASHIA, with closely similar mean scores and no statistically significant gender difference. This may be so because of professional socialization; same in-service training, staff meetings, policy circulars, unions exposes both genders to similar information. This is in contradiction with Balu and Karthic (2024) who carried out a research on Awareness and Satisfaction Level of Health Insurance Policies among general public in Coimbatore City. The findings revealed that females exhibited higher levels of awareness than males. It is also in contradiction to Dhunghana et al (2021) who recorded a moderate level of awareness for males and low level of awareness for females. It is out of line with Yadav and Poudel (2025) who opined that males are more aware of the social health insurance in Sundarharaicha Municipality, Morang, Nepal.

The result of the hypothesis states that there is no significant difference in the level of awareness of ASHIA among male and female primary school teachers in Anambra State. This is in collaboration with the findings of Yadav and Poudel (2025) who opined that there's no significant difference in the level of awareness between males and females regarding the health insurance in Municipality and contradictory to Balu and Karthic (2024) who recorded a significant difference with females having higher levels of awareness.

Teachers across different experience levels demonstrated moderate level of awareness of ASHIA's services. This finding suggests that years of service does not strongly predict awareness, echoing the conclusion of James, Ezekiel and Abiodun (2022) in their study that the civil servants showed the same level of awareness. This finding implies that Institutional exposure and sensitization efforts are stronger determinants of health insurance awareness than occupational tenure or years of service. This is in contradiction to Okunna, Ezeama, Ezeama and Munala

(2020) who opined that Old and midlevel physicians have better knowledge of NHIS than young physicians

There was no significant difference in primary school teacher's level of awareness of ASHIA's services based on their years of service. This is in agreement with James et al (2022) who opined that there is no significant difference between grade level and knowledge of NHIS amongst civil servants in Minna, Niger State. It contrasts with the result of Okunna et al (2022) which reported a significant difference between length of service and knowledge of NHIS

The findings of this study reveal that primary school teachers' extent of Utilization of ASHIA services was low. The result of this study is in agreement with the findings of Adewole, Dairo and Bolarinwa (2016), that the utilization of NHIS among formal sector workers in Ilorin was low. The findings contradicts the study of Ukoh, Ajayi and Uloh (2025) which recorded a high rate of NHIA utilization among lecturers of agriculture in Rivers State. It also contrasts Obelebra and Adeniji (2021) in their study; factors affecting utilization of the National Health Insurance Scheme by federal civil servants in Rivers State, Nigeria, which recorded a high level utilization by Civil servants. The result of this may be due to inadequate awareness of service procedures, administrative bottlenecks, perceived poor quality of care, limited accessibility of accredited facilities, financial misconceptions, insufficient sensitization, and entrenched healthcare-seeking behaviors.

The study observed a low extent of utilization of ASHIA services among male and female teachers. It revealed minimal gender differences in ASHIA utilization, with both male and female teachers demonstrating low utilization levels. The slightly higher utilization among female teachers, while still categorized as low, may reflect the traditional pattern where women tend to engage more with healthcare services, particularly for reproductive and maternal health needs. This result was supported by the findings of Nwankwor, Arize, Aneke and Okoronkwo (2018); that female staff of University of Nigeria Teaching Hospital Ituku-Ozalla utilize NHIS more than males. The findings also aligned with Adeniji and Adebisi (2021). They revealed that female civil servants in

Rivers State Utilize NHIS more than male civil servants. In contradiction, Ukoh et al (2025) from their studies revealed that even tho both male and female lecturers utilize NHIS moderately, male's utilization rate was a bit higher than females.

There was no significant difference in the extent of utilization of services of ASHIA amongst male and female primary school teachers in Anambra State. This is in line with Obelebra and Adeniji (2021) in their research which states that there is no significant difference between male and female civil servants in Rivers state in their utilization of NHIS. It is in contrast with Ikpong, Ohunene and Uloh (2025) in their study on Gender differences in the utilization of National Health Insurance Authority (NHIA) among lecturers of agriculture in tertiary institutions in Rivers State, Nigeria. Which realized a significant difference between male and female lecturers.

Findings further indicate that Teachers with 0–10 years of experience reported moderate utilization while those with 11–20 and ≥ 20 years of experience recorded low utilization. This may reflect younger teachers' exposure to information campaigns or differing health needs such as maternal/child care. This contradicts popular notion that the more experienced workers utilize health insurance services more as backed by Ukoh et al (2025). This results contrast Chukwuezie et al. (2025) whose study realized that all medical doctors of various cadres and years of experience utilize health insurance at a high rate.

There was no significant difference in primary school teacher's extent of utilization of ASHIA services based on their years of service. This is in line with Etukudo, Uloh and Utukubok (2026) in their study which pointed that there is no significant difference between years of experience and utilization of National Health Insurance Authority (NHIA) among staff of the Federal Ministry of Agriculture and Food Security in Akwa Ibom State, Nigeria.

RECOMMENDATIONS

1. Ministry of Education should integrate health insurance education into teacher orientation programs and in-service training sessions. They should also establish workplace health promotion

programs that normalize preventive health-seeking behaviors among teachers.

2. School administrators should integrate health insurance information into staff meetings and communications. Regular updates about ASHIA services, success stories, and utilization guidance should be part of routine school communications to maintain awareness and encourage utilization.
3. The State Government should establish a Health Insurance Utilization Monitoring Committee. Regularly assess utilization rates and develop evidence-based solutions to identified problems.
4. ASHIA should strengthen coverage for underutilized services such as preventive care, dental care, eye care, and mental health services, ensuring they are affordable and accessible.

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