

# **Achieving Healthy Lives and Well-being for All in Nigeria: Pursuing Sustainable Development Goal 3**

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**Abstract:**

Achieving Sustainable Development Goal 3 (SDG 3) in Nigeria presents various challenges and disparities in ensuring good health and well-being for all. This study explores the complexities surrounding SDG 3 in Nigeria, focusing on healthcare challenges and progress, strengthening primary health care, and innovative strategies for health improvement. Nigeria faces significant health challenges, including maternal and child health concerns, high communicable disease burden, rising non-communicable diseases, inadequate healthcare access, and a shortage of skilled health workers. To address these issues, Nigeria must strengthen its primary health care system by embracing universal health coverage principles and empowering communities in health planning, decision-making. By implementing these strategies and learning from global best practices, Nigeria can accelerate progress towards SDG 3, creating a healthier and more equitable society for all its citizens. Collaboration among stakeholders, strong political commitment, and effective partnerships are pivotal in attaining SDG 3's vision and promoting a flourishing future for Nigeria.

*Keywords: Health, Well-being, Diseases, Collaboration, Nigeria*

## **1.0. Introduction**

Sustainable Development Goal (SDG) 3 is a bold commitment by the global community to ensure healthy lives and promote well-being for all at every stage of life. This comprehensive goal encompasses a wide range of health priorities, including reproductive, maternal, and child health, the management of infectious and non-communicable diseases, mental health, universal health coverage, and access to safe and affordable medicines and vaccines. By addressing these critical health challenges, SDG 3 seeks to create a healthier and more equitable world for everyone (United Nations, 2021).

While the pursuit of good health and well-being is a shared global endeavor, in Nigeria, as in many other countries, the journey towards achieving SDG 3 is marked by diverse challenges and disparities. Nigerians do not uniformly experience good health and well-being as challenges in maternal and child health persist, alongside communicable diseases like malaria, tuberculosis, and HIV/AIDS. Additionally, non-communicable diseases (NCDs) pose a dual burden. Health inequalities persist, resulting from various social, political, and economic disadvantages faced by different individuals and communities. The quest to reduce these disparities and enhance health for all entails a concerted effort to ensure equal opportunities for well-being, regardless of identity or geographical location (World Health Organization, 2020).

To achieve healthy lives and well-being for all Nigerians, we must focus on reducing health inequalities, addressing infrastructure, healthcare financing, data collection addressing systemic barriers, and empowering communities. This calls for robust evidence-based approaches, collaborative engagement beyond the health sector, and knowledge-sharing to inform informed

decision-making across the nation. By advancing the SDG 3 agenda, Nigeria can foster a healthier and more prosperous society, where every individual has equal access to quality healthcare, health education, and the potential for a flourishing future.

## **2.0. Methodology**

In terms of methodology, this research adopts a document research approach. The data sources used are primarily secondary and gathered through a thorough review of pertinent journals, articles, books, relevant publications, and reports from international organizations, as well as relevant national policy documents pertaining to healthcare.

## **3.0. Healthcare Challenges and Progress in Nigeria**

As of the current state, Nigeria is making efforts to improve health outcomes in alignment with Sustainable Development Goal 3 (SDG 3) - Good Health and Well-being. However, significant challenges persist across various health indicators and targets. There are concerns about the country's slow progress in this area, similar to the challenges observed in SDGs 1 and 2 (No Poverty and Zero Hunger) (Dataphyte, 2023).

Maternal and child health remains a major concern. Nigeria has made some progress in reducing maternal mortality, but it still ranks among the countries with the highest maternal mortality rates globally with many women lacking access to quality antenatal and postnatal care (World Bank, 2021). Similarly, child mortality rates have declined, but the country still faces high rates of under-five deaths, mainly due to preventable diseases such as malaria, pneumonia, diarrhea and inadequate nutrition (Ezeh et al., 2016).

The burden of communicable diseases also remains a challenge. Nigeria has one of the highest malaria burdens globally, with millions of cases reported annually (WHO, 2021). Tuberculosis and HIV/AIDS are other major public health concerns, demanding ongoing efforts for effective prevention, diagnosis, and treatment (WHO, 2021). Despite progress in combating HIV/AIDS in recent years, the stigmatization of affected individuals continues to hamper early detection and treatment (UNAIDS, 2019). Non-communicable diseases (NCDs) are on the rise, contributing to the dual burden of diseases in Nigeria. Cardiovascular diseases, diabetes, cancer, and respiratory conditions are significant health challenges (World Health Organization, 2021). These NCDs are becoming more prevalent due to lifestyle changes and urbanization. The lack of awareness regarding NCDs and their risk factors further compounds the challenge (Alwan et al., 2010).

Access to quality healthcare services remains a critical issue, particularly in rural areas. Nigeria faces infrastructural gaps and a shortage of healthcare personnel, impacting the delivery of essential health services (World Bank, 2021). Additionally, healthcare financing is insufficient to meet the growing demands of the population. Nigeria's current healthcare expenditure is below the recommended threshold for effective health service delivery, hindering progress toward Universal Health Coverage (World Bank, 2021). Another crucial challenge is the insufficient investment in the health sector by the government. Nigeria allocates a relatively small percentage of its GDP to healthcare, resulting in a lack of resources for disease prevention, health education, and infrastructure development (Fakorede et al., 2020).

Sanitation and hygiene issues also require attention to improve health and well-being in Nigeria. Access to clean water and sanitation facilities is limited in many areas, contributing to the spread of water-borne diseases (Anyanwu et al., 2018). The impact of conflicts and humanitarian crises

on the health of Nigerians cannot be overlooked. Displacement, violence, and insecurity exacerbate health issues and reduce access to healthcare services (Mazurana et al., 2017).

Healthcare workforce shortages present a significant hurdle to SDG 3. The country faces a "brain drain" as trained healthcare professionals emigrate to seek better opportunities abroad, leading to a scarcity of skilled personnel within the country (Osungbade et al., 2015). Data collection and health information systems require improvement to enhance health planning and policymaking. Accurate and timely data are essential for effective monitoring and progress tracking toward SDG 3 targets (WHO, 2021).

Overall, Nigeria needs to address various health challenges and accelerate progress toward sustainable development goal 3, ensuring good health and well-being for its citizens.

#### **4.0. Strengthening Primary Health Care**

Ensuring access to quality health care for all citizens is not only a fundamental human right but also essential for the overall socio-economic development of the nation. To attain this ambitious goal, a comprehensive and relatable health care delivery conceptual framework must be established, addressing the unique challenges faced by Nigeria's health care system.

The foundation of Nigeria's health care delivery framework should be based on the principle of Universal Health Coverage (UHC). UHC aims to ensure that all individuals and communities can access essential health services without suffering financial hardship. By eliminating barriers to health care, such as out-of-pocket payments, and promoting equitable access, Nigeria can work

towards bridging the health disparities that currently exist between different regions and socio-economic groups (WHO, 2023).

A robust and well-functioning primary health care system is the cornerstone of a successful health care delivery framework. Nigeria must invest in strengthening its PHC infrastructure, focusing on preventive and promotive health services, as well as early detection and management of diseases. This approach will not only reduce the burden on secondary and tertiary health facilities but also improve health outcomes and reduce overall health care costs (WHO, 2022)

Meaningful community engagement and empowerment are vital for the success of Nigeria's health care delivery framework. Engaging communities in decision-making processes, health planning, and implementation of health programs can lead to more culturally appropriate and acceptable health services. Moreover, empowering individuals with health knowledge and skills can foster self-care and increase health-seeking behaviors.

Effective health information systems play a crucial role in guiding evidence-based decision making. Nigeria should invest in robust health information systems that collect, analyze, and disseminate accurate and timely health data. This data-driven approach will enable policymakers and health practitioners to identify health trends, target interventions, and monitor progress towards SDG 3 targets.

Nigeria's health care delivery framework must prioritize the development and retention of a skilled and motivated health workforce. Adequate training, continuous professional

development, and fair remuneration are essential for attracting and retaining qualified health professionals. Moreover, efforts should be made to address maldistribution of health workers between urban and rural areas to ensure equitable access to health services.

Sustainable funding mechanisms are necessary to support the implementation of the health care delivery framework. Nigeria should explore innovative financing models, such as health insurance schemes and public-private partnerships, to increase health sector funding. Additionally, efforts to improve domestic resource mobilization and reduce dependency on external funding sources will enhance the sustainability of health programs.

Nigeria's health care delivery framework should prioritize preventive health measures, including vaccination campaigns, health education, and promotion of healthy lifestyles. Behavioral change interventions can address risk factors for non-communicable diseases and reduce the burden of preventable illnesses.

Recognizing the significance of traditional medicine in Nigeria's culture, the health care delivery framework should incorporate and integrate traditional healers and practices into the formal health system. Collaboration between traditional and modern medicine can lead to more comprehensive and holistic health care services.

The conceptual framework for Nigeria's health care delivery under SDG 3 encompasses a multi-faceted approach that emphasizes equity, community engagement, preventive health, data-driven decision making, and sustainable financing. By implementing this comprehensive and relatable

framework, Nigeria can make significant strides towards achieving SDG 3 and ensuring Good Health and Well-being for all its citizens. The successful realization of this vision requires strong political commitment, effective partnerships, and the active involvement of all stakeholders in the health sector.

### **5.0. Innovative Strategies for Health Improvement in Nigeria**

To improve good health and well-being in Nigeria, the country can adopt a comprehensive and contextually sensitive approach that addresses key health inequalities and promotes healthy behaviors across various population groups. Learning from Canada's efforts, Nigeria can implement the following strategies:

Nigeria can create a Pan-Nigeria Health Inequalities Reporting Initiative, similar to Canada's initiative, to measure and monitor health disparities across different regions and demographics. By identifying priority areas for action and understanding the social determinants of health, Nigeria can develop targeted interventions to address these inequalities effectively (Government of Canada, 2010).

Investing in early child health and development programs can significantly impact future health outcomes. Nigeria should allocate funds to support communities and families in promoting healthy pregnancies, positive parenting, and healthy child development. Programs like the Community Action Program for Children and the Canada Prenatal Nutrition Program can serve as models for Nigeria's initiatives (Health Canada, 2023).

Nigeria can adopt a Healthy Eating Strategy to improve the food environment and encourage healthier food choices. By investing in community-level programs and subsidies for nutritious foods, Nigeria can address issues related to malnutrition and food insecurity, contributing to Sustainable Development Goal 2 – Zero Hunger (Health Canada, 2019, UN, 2021).

Nigeria can develop initiatives to promote mental health and wellness while preventing mental illnesses. This can include funding community-based programs, supporting innovative mental health promotion projects, and implementing interventions tailored to promote mental well-being, including social-emotional learning, resiliency, supports for suicide prevention and access to crisis support. Nigeria should invest in vaccination programs and surveillance systems to reduce the incidence of diseases. Collaborating with international partners and organizations can aid in combating infectious diseases and addressing the unique challenges faced by vulnerable populations (WHO, 2021)

Given the significant impact of zoonotic diseases, Nigeria should enhance monitoring and surveillance efforts in livestock, poultry, and aquatic animals. Collaboration with relevant stakeholders can lead to early detection and prevention of zoonotic outbreaks (Aina and Olugasa, 2019). To ensure the success of these initiatives, Nigeria should prioritize collaboration with governmental and non-governmental organizations, communities, and health professionals. Additionally, investing in research and innovation in health will provide evidence-based solutions to address Nigeria's unique health challenges (Health Canada, 2019).

Nigeria should invest in technology and training to implement computerized data collection systems like DHIS2 across healthcare facilities. This will enable the proper management of

health data, leading to the identification of prevalent health issues in specific catchment areas. Regular analysis of data can guide targeted interventions and resource allocation for better health outcomes (Otu et al., 2018). Nigeria should establish vital registration systems to record births and deaths in communities. These systems will provide accurate data on mortality rates, age-specific death rates, and life expectancy, helping to monitor progress towards improving health and identifying areas for targeted interventions (Rao and Bradshaw, 2003).

The country should develop and maintain disease registers for non-communicable diseases at district levels. These registers will aid in better planning and management of NCDs, allowing for early detection, prevention, and improved treatment strategies (WHO, 2022). Nigeria should implement interventions recommended by the Global Action Plan to reduce the burden of NCD risk factors. Additionally, conducting surveys to identify specific risk factors prevalent in the population will help design targeted prevention strategies (Abegunde et al., 2007).

When conducting surveys, Nigeria should optimize sample sizes to minimize costs while maintaining acceptable levels of data accuracy. This approach will allow for efficient use of available resources, especially in resource-constrained settings (Gore et al., 2011). Increasing health facility utilization rates can be achieved by implementing mobile clinics and hospital trains to reach remote populations. Additionally, addressing barriers to healthcare access, such as distance and quality of care, will improve universal health coverage.

Nigeria should leverage statistical and machine learning methods to improve disease diagnosis accuracy. Implementing AI-based diagnostic tools, especially in remote areas, can help diagnose illnesses promptly and facilitate timely treatment. To aid decision-making during disease outbreaks and other emergencies, Nigeria must prioritize timely data collection, entry, and

analysis. Implementing Open Data Kit (ODK) software can expedite data processing and enhance the use of real-time data.

By implementing these recommendations, Nigeria can make significant progress towards achieving SDG3, promoting better health and well-being for all its citizens. Collaborating with international partners and organizations will further support Nigeria's efforts to improve its healthcare system and enhance overall public health outcomes.

By adopting these strategies and tailoring them to the Nigerian context, the country can make significant strides in improving good health and well-being for all its citizens.

#### **6.0. International Best Practices Nigeria Can Learn From**

Canada's universal health care system is often cited as a successful model for ensuring equitable access to health services for all citizens. Through a publicly funded and comprehensive health care system, Canada has made significant progress in providing essential health services to its population without financial barriers. Nigeria can learn from Canada's approach to advance towards achieving SDG 3 and promoting universal health coverage (Government of Canada, 2020).

Finland is known for its comprehensive mental health services that prioritize preventive measures and early intervention. The country's approach includes promoting mental well-being, reducing stigma, and ensuring accessible mental health care. By investing in mental health promotion and treatment services, Nigeria can enhance overall well-being and resilience, supporting the achievement of SDG 3 (Lahtinen, 2006).

Rwanda's success in implementing a community-based health insurance scheme, known as "Mutuelles de Santé," has significantly improved access to health care for its citizens. By pooling resources and involving communities in decision-making, Rwanda has made substantial progress towards achieving universal health coverage. Nigeria can learn from this model to strengthen its own health financing mechanisms and move closer to UHC (Nyandekwe *et al.*, 2020)

Singapore's successful public-private partnerships in health research and innovation have contributed to advancements in medical technology and treatments. By fostering collaboration between the public and private sectors, Nigeria can harness the expertise and resources of both to drive innovation, improve health outcomes, and tackle emerging health challenges (Economic Development Board, 2020).

Japan has effectively addressed the challenges of an aging population by implementing comprehensive geriatric care services and promoting active aging. Nigeria can draw valuable insights from Japan's approach to ensure that its aging population receives appropriate health care and support, fostering healthy aging and well-being (Ministry of Health, Labour and Welfare, Japan, 2020).

Norway places a strong emphasis on health education and health literacy, equipping its citizens with the knowledge and skills to make informed health decisions. By prioritizing health education initiatives and promoting health literacy, Nigeria can empower its population to take charge of their health and prevent avoidable illnesses (Le *et al.*, 2021).

Brazil's Community Health Workers Program has been successful in improving primary health care delivery and reaching underserved communities. Nigeria can learn from this program to strengthen its primary health care system and extend health services to remote and marginalized populations (Krieger *et al.*, 2021).

The United Kingdom's National Health Service (NHS) is renowned for its integrated health care services, providing a seamless continuum of care for patients. Nigeria can explore ways to enhance coordination and integration among health facilities and services to optimize health care delivery (NHS England and NHS Improvement, 2021)

Kenya has made strides in using mobile health technology to collect health data, deliver health services, and raise health awareness among its population. Nigeria can adopt similar technology-driven approaches to improve health information systems, enhance data-driven decision-making, and reach remote communities with essential health services (Muinga *et al.*, 2020)

By learning from these best practices and adopting evidence-based strategies, Nigeria can make significant strides towards achieving SDG 3 and improving the health and well-being of its population.

## **7.0. Conclusion**

Achieving Sustainable Development Goal 3 (SDG 3) in Nigeria requires a multifaceted and contextually sensitive approach. By focusing on reducing health inequalities, strengthening primary health care, adopting innovative strategies for health improvement, and learning from

successful international best practices, Nigeria can make significant strides towards promoting good health and well-being for all its citizens. This entails investing in a robust primary health care system, engaging communities in decision-making, prioritizing mental health and preventive measures, strengthening health information systems, and ensuring a skilled and motivated health workforce. Collaborative efforts, innovative financing models, and data-driven decision-making are essential to address diverse health challenges and disparities and move closer to achieving SDG 3, creating a healthier, more equitable, and prosperous society for all Nigerians.

## 8.0. References:

- Abegunde, D., Mathers, C. D., Adam, T., Ortegón, M., Strong, K. (2007). The burden and costs of chronic diseases in low-income and middle-income countries. *The Lancet*, 370(9603), 1929-1938.
- Aina, V. O., and Olugasa, B. O. (2019). Zoonotic Diseases: A Review & Analysis of Emerging Trends, Health Challenges & Management Strategies in Nigeria. *Nigerian Medical Journal: Journal of the Nigeria Medical Association*, 60(2), 51-63.
- Alwan, A., Maclean, D. R., Riley, L. M., d'Espaignet, E. T., Mathers, C. D., Stevens, G. A., ... and Lopez, A. D. (2010). Monitoring and surveillance of chronic non-communicable diseases: progress and capacity in high-burden countries. *The Lancet*, 376(9755), 1861-1868.
- Anyanwu, O. E., Idemudia, E. S., & Chukwu, F. O. (2018). Examining the relationship between water, sanitation, and hygiene (WASH) knowledge and practices among mothers of under-five children in selected rural communities of Abia State, Nigeria. *BMC Public Health*, 18(1), 1-11.
- Dataphyte. (2023). Good Health and Wellbeing: Any progress on SDG 3 in Nigeria? | Dataphyte. Retrieved from: <https://www.dataphyte.com/latest-reports/good-health-and-wellbeing-any-progress-on-sdg-3-in-nigeria>
- Economic Development Board, Singapore. (2020). Health and Biomedical Sciences. Retrieved from: <https://www.edb.gov.sg/en/our-industries/health-and-biomedical-sciences.html>.

Retrieved from: <https://www.edb.gov.sg/en/business-insights/insights/the-healthtech-boom-in-southeast-asia-big-strides-and-new-opportunities-for-healthcare.html>.

Ezeh, O. K., Agho, K. E., Dibley, M. J., Hall, J. J., and Page, A. N. (2016). The impact of water and sanitation on childhood mortality in Nigeria: evidence from demographic and health surveys, 2003–2013. *International Journal of Environmental Research and Public Health*, 13(5), 512.

Fakorede, O., Abiola, S., Yusuf, O., & Afolabi, A. (2020). Health care financing in Nigeria: Implications for achieving universal health coverage. *Nigerian Postgraduate Medical Journal*, 27(3), 185-190.

Gore, F. M., Bloem, P. J., Patton, G. C., Ferguson, J., Joseph, V., Coffey, C., ... and Mathers, C. D. (2011). Global burden of disease in young people aged 10-24 years: a systematic analysis. *The Lancet*, 377(9783), 2093-2102

Government of Canada. (2020). Canada's health care system. Retrieved from: <https://www.canada.ca/en/health-canada/services/canada-health-care-system.html>

Government of Canada (2010). Key Health Inequalities in Canada: A National Portrait – Executive Summary. Retrieved from: <https://www.canada.ca/en/public-health/services/publications/science-research-data/key-health-inequalities-canada-national-portrait-executive-summary.html>

Health Canada (2019). Nutrition and Healthy Eating Retrieved from: <https://www.canada.ca/en/health-canada/services/food-nutrition/healthy-eating.html>

Health Canada (2023). Sustainable Development Goal 3: Good health and well-being. Retrieved from: <https://www.canada.ca/en/employment-social-development/programs/agenda-2030/health-well-being.html>

Krieger M. G., Wenham C., Nacif Pimenta, D., Nkya T. E., Schall B., Nunes A. C., De Menezes, A. and Lotta, G. (2021). How do community health workers institutionalise: An analysis of Brazil's CHW programme. *Global Public Health*, pp.1–18. doi:<https://doi.org/10.1080/17441692.2021.1940236>.

Lahtinen, Eero. (2006). Mental health in Finland. *International Psychiatry*. 3. 12-14. 10.1192/S1749367600001442.

Le, C., Finbråten, H. S., Pettersen, K. S., Joranger, P., & Guttersrud, Ø. (2021). Health Literacy in the Norwegian Population. English Summary. In *Befolkningens helsekompetanse, del I. The International Health Literacy Population Survey 2019 – 2021 (HLS19) – et samarbeidsprosjekt med nettverket M-POHL tilknyttet WHO-EHIL. The Norwegian Directorate of Health*.

Mazurana D., Krystalli, R. & Baaré, A.. (2017). Gender and disarmament, demobilization, and reintegration: Reviewing and advancing the field. 10.1093/oxfordhb/9780199300983.013.35.

Muinga, N., Magare, S., Monda, J. et al. (2020). Digital health Systems in Kenyan Public Hospitals: a mixed-methods survey. *BMC Med Inform Decis Mak* 20, 2. <https://doi.org/10.1186/s12911-019-1005-7>

NHS England and NHS Improvement. (2021). Integrated Care. Retrieved from:  
<https://www.england.nhs.uk/integratedcare/>

Nyandekwe M., Nzayirambaho M., Kakoma J. B. (2020). Universal health insurance in Rwanda: major challenges and solutions for financial sustainability case study of Rwanda community-based health insurance part I. *Pan Afr Med J.* 2020 Sep 14;37:55. doi: 10.11604/pamj.2020.37.55.20376. PMID: 33209182; PMCID: PMC7648486.

Ministry of Health, Labour and Welfare, Japan. (2016). Long-Term Care Insurance System of Japan Health and Welfare Bureau for the Elderly. Retrieved from:  
[https://www.mhlw.go.jp/english/policy/care-welfare/care-welfare-elderly/dl/ltcisj\\_e.pdf](https://www.mhlw.go.jp/english/policy/care-welfare/care-welfare-elderly/dl/ltcisj_e.pdf)

Osungbade, K. O., Obembe, T. A., & Oludara, M. A. (2015). Reasons for migration among Nigerian medical doctors. *African health sciences*, 15(2), 567-573.

Otu, A., Ameh, S., Osifo-Dawodu, E., and Ilesanmi, O. (2018). Developing and assessing a national health data dictionary for Nigeria: A case study of DHIS2. *BMC Medical Informatics and Decision Making*, 18(Suppl 1), 16.

Rao, C. and Bradshaw, D. (2003). Improving vital statistics in developing countries: Lessons from sub-Saharan Africa. *South African Journal of Demography*, 8(2), 47-64.

UNAIDS (2019). Nigeria. Retrieved from:  
<https://www.unaids.org/en/regionscountries/countries/nigeria>

United Nations. (2021). Sustainable Development Goals. Retrieved from:  
<https://sdgs.un.org/goals>

United Nations. (2021). Sustainable Development Goal 2 - Zero Hunger. Retrieved from  
<https://www.un.org/sustainabledevelopment/hunger/>

World Bank (2021). Nigeria. Retrieved from: <https://data.worldbank.org/country/nigeria>

World Bank (2021). World Development Indicators. Retrieved from:  
<https://databank.worldbank.org/source/world-development-indicators>

World Health Organization. (2020). Health Equity. Retrieved from:  
[https://www.who.int/topics/health\\_equity/en/](https://www.who.int/topics/health_equity/en/)

World Health Organization (WHO). (2021). Nigeria. Retrieved from  
<https://www.who.int/countries/nga/en/>

World Health Organization (WHO) (2021). World Health Statistics 2021. Retrieved from:  
<https://www.who.int/data/gho/data/themes/topics/health-systems-services-and-delivery>

World Health Organization (2022). Primary Health Care. Retrieved from:  
<https://www.who.int/news-room/q-a-detail/primary-health-care>

World Health Organization (2023). Universal Health Coverage (UHC). Retrieved from:  
<https://www.who.int/health-topics/universal-health-coverage>