Health systems, Nigeria

Which Nigerian mothers still give birth without skilled care?

Nigeria records about 6% of the world's births and 29% of its maternal deaths. A skilled attendant is present at 92% of births in the richest fifth of households and 16% in the poorest.

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In short

- Nigeria accounted for 28.7% of the world's estimated maternal deaths in 2023, about 74,600 women, while recording about 5.7% of the world's births: five times its share.
- A doctor, nurse or midwife attended 46% of births in the 2023–24 Demographic and Health Survey. On that rate, about 4.1 million births a year take place without one (our calculation; range 3.9 to 4.3 million).
- Wealth divides mothers more sharply than town and country: skilled attendance is 91.7% in the richest fifth of households and 16.2% in the poorest, against 70.2% in towns and 30.6% in rural areas. Among states it ranges from 10% in Kebbi to 97% in Imo.

The evidence

Each figure carries its source, its date and a label for how much weight it can bear. Open 'How we know this' for the method.

Modelled or projected — 2023

28.7%

of the world's estimated maternal deaths occurred in Nigeria: 74,559 women. Nigeria recorded about 5.7% of the world's births.

UN Maternal Mortality Estimation Inter-agency Group, 2025; UN World Population Prospects 2024

How we know this

A modelled estimate. Nigeria has no complete registration of deaths, so the UN agencies combine all available data in a statistical model. The 2023 estimate is 74,559 deaths, with an uncertainty interval of 53,945 to 115,636. The birth share is our calculation: 7.51 million of the world's 132.1 million births in 2023.

Survey estimate — 2023–24

16% and 92%

of births had a skilled attendant in the poorest and the richest fifths of households: a gap of 75.5 percentage points.

Nigeria Demographic and Health Survey 2023–24, tabulated by UNICEF

How we know this

Live births in the two years before the survey (fieldwork December 2023 to May 2024). A skilled provider means a doctor, nurse or midwife. Exact values: poorest fifth 16.2%, richest fifth 91.7%.

Modelled or projected

2024

About 4.1 million

births a year in Nigeria take place without a doctor, nurse or midwife present.

Probatio Africa calculation from the Nigeria DHS 2023–24, its 2026 policy brief and UN World Population Prospects 2024

How we know this

7,560,407 projected births in 2024 × (1 − 0.457), the share of births with a skilled attendant. The survey's 95% confidence interval for that share, reported in the 2026 policy brief (43% to 49%), gives a range of 3.9 to 4.3 million.

Sources disagree

2023 and 2024

572 or 993

maternal deaths per 100,000 live births: the household survey and the UN model disagree, and their ranges do not overlap.

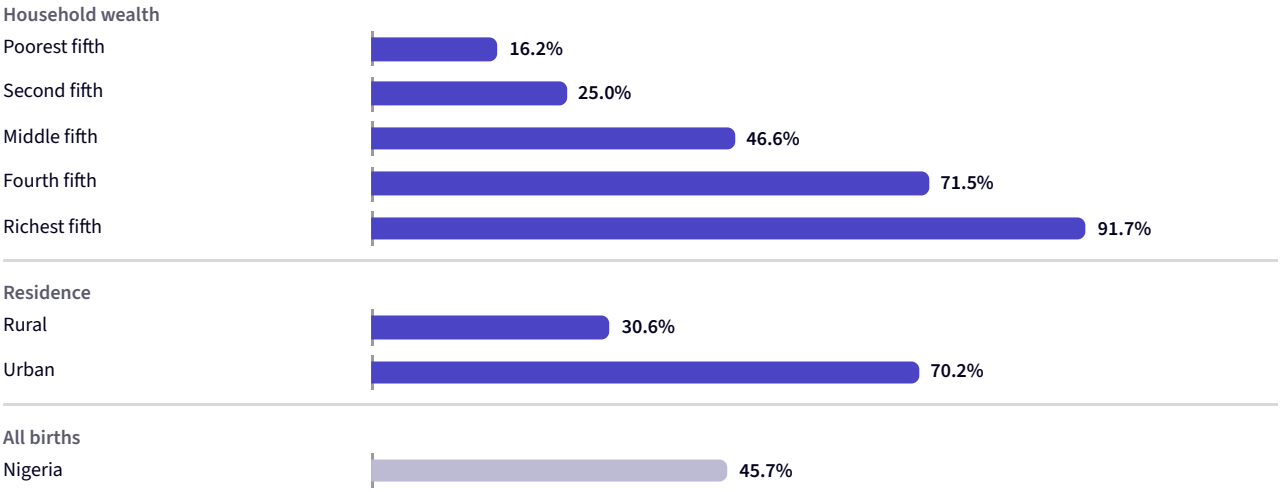
Nigeria DHS 2023–24 (policy brief, 2026); UN Maternal Mortality Estimation Inter-agency Group, 2025

How we know this

The survey gives 572 (95% confidence interval 444 to 699). The UN model gives 993 for 2023 (uncertainty interval 718 to 1,540). We use the UN figure for comparisons between countries, because it is the only series calculated the same way for every country, and report both.

Births with a skilled attendant, by household wealth and by residence

Share of live births attended by a doctor, nurse or midwife, Nigeria 2023–24



Births in the two years before the survey. Values are UNICEF's tabulation of the survey data and may differ by a decimal place from the survey's printed tables.

Sources: 5, 6.

What the data show

The UN agencies' latest estimates put Nigeria's maternal mortality ratio at 993 deaths per 100,000 live births in 2023, the highest of any country, and its 74,559 maternal deaths at 28.7% of the world total [1,2]. Nigeria recorded about 5.7% of the world's births that year [3]. A Nigerian girl aged 15 faces a lifetime risk of dying from a maternal cause of 1 in 25, against 1 in 272 worldwide [1,4].

The 2023–24 Demographic and Health Survey found a doctor, nurse or midwife at 46% of births and a health facility at 43%; 56% of births took place at home [5]. Home births reach 82% among mothers with no education and in the poorest households, 88% in Sokoto and 91% in Kebbi [5].

Wealth separates mothers more sharply than urban or rural residence. Skilled attendance rises from 16.2% in the poorest fifth of households to 91.7% in the richest, a gap of 75.5 percentage points; the urban–rural gap is 40 points (70.2% against 30.6%) [6]. The gap continues after birth: a postnatal check within two days reached 81.5% of mothers in the richest fifth and 22% in the poorest [6]. Among states, skilled attendance is lowest in Kebbi (10%), Sokoto (12%) and Zamfara (13%), and reaches 97% in Imo [5].

Applied to the 7.56 million births projected for 2024, the survey's rate means about 4.1 million births a year without a skilled attendant [3,5]. Given the rates by wealth, most of them are in the poorest two fifths of households.

Where sources disagree

The survey's own estimate of the maternal mortality ratio is 572 per 100,000 live births (95% confidence interval 444 to 699) [7]. The UN model's estimate for 2023 is 993 (uncertainty interval 718 to 1,540) [1]. The ranges do not overlap. The survey figure is a direct household estimate; the UN figure is a model that combines every available source on a common basis for all countries. Neither is a count: Nigeria does not register most deaths.

The National Population Commission's launch statement quoted 42% for postnatal care within two days [8]. In the survey's summary report, 42% is the figure for newborns; for mothers it is 43% [5].

What this means for decisions

- National averages hide where gains are possible. The richest fifth of households already has a skilled attendant at more than nine in ten births; the lowest rates are in the poorest fifth, in rural areas and in north-western states such as Kebbi, Sokoto and Zamfara.
- The indicator counts doctors, nurses and midwives only [5]. Births attended by community health extension workers, who staff many primary health care centres, do not count as skilled. Programmes that rely on them need to report who attended each birth, or their progress will not show in this measure.
- With the two main estimates 421 deaths per 100,000 births apart, any target for maternal deaths needs to name its source. Verbal and social autopsy and facility death reviews are how Nigeria can count deaths rather than model them.
- These figures predate the 2025 cuts in aid. They are a baseline against which changes in coverage can be measured.

Method

- Maternal deaths, ratios and lifetime risk: the UN Maternal Mortality Estimation Inter-agency Group's estimates for 2023 (published April 2025), read from the report and from the WHO Global Health Observatory and UNICEF data feeds.
- Skilled attendance, place of delivery and postnatal care: the Nigeria Demographic and Health Survey 2023–24 summary report, for live births in the two years before the survey; breakdowns by wealth and residence from UNICEF's tabulation of the survey data.
- Births without a skilled attendant: UN World Population Prospects 2024 projected births for 2024 (7,560,407) × (1 − 0.457). The range uses the survey's 95% confidence interval of 43% to 49%, as reported in the 2026 policy brief.
- Share of world births: Nigeria's 7,509,758 births in 2023 ÷ the world's 132,110,264 (UN World Population Prospects 2024) = 5.7%. The UN maternal estimates use the same births: 74,559 ÷ 7,509,758 × 100,000 = 993.

Limitations

- A skilled attendant at birth does not guarantee good care. These data measure who was present, not the quality of what they did.
- The survey rate describes births in roughly 2022 to 2024; our count applies it to projected births in 2024.
- We did not use breakdowns by geopolitical zone: we could not verify the full survey report's zone tables before publication. State values are from the summary report.
- The UN maternal estimates carry wide uncertainty: between 53,945 and 115,636 deaths in 2023.

Sources

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