



PETER SINGER'S UTILITARIAN ETHICS AND PUBLIC HEALTH IN NIGERIA: ASSESSING HEALTHCARE INEQUALITY, VACCINATION DISTRIBUTION, AND MORAL DUTIES TOWARD THE POOR

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Abstract

The healthcare system in Nigeria is highly unequal and goes against the principle of utilitarianism which implies maximization of aggregate welfare. The analysis is based on the utilitarian model by Peter Singer to analyze the healthcare disparities, vaccination distribution, and moral responsibilities towards the poor. The results of the research indicate that the cost of healthcare among poor Nigerians is nearly nine times higher than it is among affluent citizens, and immunization is less than optimal 72 percent DTP3 coverage in West and Central Africa. The analysis shows that utilitarian ethics can be used to solve the issues of health inequalities by redistributing resources, increasing access to vaccinations, and implementing interventions that maximize health results to the greatest number of people through the equal consideration principle by Singer and the drowning child argument. The findings will assist applied ethics in global health as well as give policy recommendations based on utilitarian philosophy.

Keywords: Peter Singer, utilitarian ethics, Nigeria, healthcare inequality, vaccination, global health, moral obligations

Introduction: Nigeria's Health Paradox

Nigeria is a classic example of international health disparity, having a huge amount of oil and yet a high level of poverty and diseases that are not necessary. Nigeria is the largest economy in Africa, yet it takes the 163rd position among 177 countries, according to the Human Development Index, and life expectancy is 55.75 years (Dejusticia, 2024). The health inequalities can be analyzed using utilitarian ethics especially the philosophy put forward by Peter Singer which focuses on maximizing aggregate happiness and minimizing suffering.

The principles of utilitarianism defined by Singer in Practical Ethics and in the article, *Famine, Affluence, and Morality*, create certain moral duties to help those in need whenever possible without compromising anything of equal moral value (Duignan, 2019). When applied to the situation with Nigerian health issues, the framework by Singer requires critical evaluation of resource allocation, vaccination policies, and the needs of international assistance.

The acuity of the healthcare situation in the form of harsh statistics. The Nigerians living in poverty spend nine-fold more on health than the wealthy citizens, which leads to disastrous debts that contribute to poverty traps (Dejusticia, 2024). At the same time, Nigeria has high-vaccine-preventable disease rates, and is one of nine countries that have more than 50 percent of the children in the world without vaccinations (UNICEF, 2023).

The paper uses the utilitarian ethics outlined by Singer to the Nigerian public health in the context of financing healthcare, distribution of vaccinations, and poverty reduction as a



utilitarian. The analysis shows that utilitarian ethics does not only criticize the existing inequalities but it provides tangible policies on how to establish fairer health systems that will maximize welfare to all the Nigerians.

Singer's Utilitarian Ethics: Philosophical Foundations

Utilitarian Foundations and Equal Consideration

The utilitarian philosophy of Singer, which is a continuation of classical traditions of Jeremy Bentham and John Stuart Mill, is based on the view that moral value of actions is determined exclusively by their outcomes in terms of causing happiness or reducing suffering (Wikipedia, 2025). Singer uses a theory, which is preference utilitarianism, which advocates the greatest happiness of all beings, based on the weight of interest irrespective of the species, race or nationality.

The main idea of equal consideration of interests is that the interests of all beings that are impacted by the actions should be taken into account and equal consideration of the similar interests of other beings should be carried out (Hampton, 2023). This is the principle which is core to the arguments made by Singer about global poverty, animal rights, and effective altruism, and it is also applicable to the analysis of health policy.

The Drowning Child Argument and Global Health

The most renowned thought experiment created by Singer, an article titled *Famine, Affluence, and Morality* (1972) sets the rigorous health responsibility requirements across the globe. The logic: when you have a drowning kid in a shallow pond, you will save the kid even though you have destroyed a nice outfit. Singer says that geographical distance is not morally relevant, we should equally work to save lives no matter how far away they are (Hampton, 2023).

In the context of global health, this principle implies that people and the governments within the rich countries have great moral responsibilities to make financial contributions towards health projects in poor countries such as Nigeria when they are able to do so effectively without losing anything of equal moral worth. This policy applies domestically- health interventions that save the most lives at least cost should be given priority.

Utilitarian Framework for Health Policy

The utilitarian health policy outlined by Singer has a number of principles. First, maximization of cost-effectiveness necessitates that the resources are allocated to interventions that result in the highest rates of death, disability and suffering decreases relative to unit cost, which fits the definition of cost-effectiveness analysis in global health policy (Marseille & Kahn, 2019). Second, equal consideration means that the health interests of all persons should be treated equally as well as the economic position or location play no role, which conflicts with systems providing the rich with better care. Third, consequentialism emphasis implies that health policies are judged based on the real outcomes, which are the number of lives saved, the number of quality-adjusted life-years extended, and not by intentions or principles. Lastly, requirement of impartiality implies that decision-makers should assume objective views bearing in mind the interests of all the stakeholders and not biased towards other groups or nationalities.



Philosophical Analysis Of Nigerian Public Health

Healthcare Inequality and Utilitarian Violations

There is high inequality in the healthcare system in Nigeria that is against the principle of equal consideration of utilitarianism. Instead, the poor citizens are paying about nine times less as compared to rich citizens and this poses disastrous health expenditure toward poverty (Dejusticia, 2024). This disparity is manifested in insufficient investment in healthcare as well as retrogressive financing policies.

The health spending by the government amounts to a statistic of just 14.97 out of the 4.2% health spending appropriation by the Nigerian government, as opposed to direct patient care, which comprises 82.7% (Dejusticia, 2024). This is similar to other sub-Saharan African neighbors where Angola spends 42.06% of 6.7% health budget on government services, Botswana spends 74.71% of 32% budget and South Africa spends 62.1% of 11.6% budget.

This retrogressive financing is very problematic in terms of utilitarian views. The marginal utility of healthcare expenditure is very low in poor families since disastrous expenditure destroys poor families and the rich households can absorb such expenditure without being affected. The redistribution of the resources between the luxurious health care of the rich and the simple health care of the poor would dramatically enhance the aggregate welfare. The existing system will maximize neither total welfare nor fair distribution.

Others justify the status quo by stating that market based healthcare would enable an efficient allocation of resources by price mechanisms and by choice. Efforts to create equality would decrease the total prosperity and quality. Moreover, the rich people got their assets by labor and ability that warranted their compensation and redistribution was wrong.

These types of defenses however are not utilitarian. The information asymmetries and the externalities in healthcare markets are enormous and do not allow efficient market results. People are unable to rationally assess medical necessity or quality of treatment, and communicable diseases will produce externalities that need to be met by collective action. More essentially, utilitarian calculations give priority to the aggregate welfare and not the protection of wealth of the affluent. Utilitarianism will require such redistribution despite property rights claims when redistribution of healthcare resources between luxury services and basic care would result in a higher total welfare, and this is just the case with Nigeria.

Vaccination Coverage and Preventable Disease Burden

The Nigerian vaccination practices present an example of issues linked to the idea of public health and their utilitarian consequences. Globally, DTP3 vaccination was 85% in 2024, whereas in West and Central Africa, it was 72% with Nigeria being one of nine countries that harbor more than half of 14.3 million zero-dose children with no vaccines (UNICEF, 2025).

Recent HPV vaccine initiation will be utilitarian success. By introducing HPV vaccines in Nigeria, global coverage has increased to 27% in 2023, which was 20 percent before (UNICEF, 2023), and it is likely to save thousands of deaths due to cervical cancer. This indicates that intensive interventions can produce high levels of welfare profits.

However, the issue of measles vaccination is persistent as it has been shown that coverage of below 95 percent is required to eliminate a given outbreak. As of 2023, 83% of all children worldwide had received the first doses of measles, and the number in Nigeria is even lower



(UNICEF, 2023). Utilitarian analysis sees these coverage gaps to cause preventable suffering as a violation of moral obligations to maximize welfare.

The example of vaccination campaigns is a utilitarian intervention- it will avoid inflicting much more pain than good, defending vulnerable groups, and it has very high ratios of cost-efficiency. The estimates provided by the Global Burden of Disease project state that every dollar spent on vaccination programs can pay back in the form of economic benefits by 16-44 dollars by saving lives and spending on healthcare expenses (Marseille & Kahn, 2019).

Critics will say that compelling people to get vaccinated infringes their autonomy and that utilitarian calculations may justify the rights-violating coercion. Moreover, the idea of placing all attention on aggregate results disregards issues of distributive justice regarding the group of persons who are in danger of the vaccine and the group of persons who gain.

But these are the issues taken care of by Singer through utilitarianism. Equal consideration principle brings distributive issues whereby the weight of all persons should have equal consideration. Vaccination against vulnerable groups with informed consent served adequately in line with both choices, namely the utilitarian and rights-based. When considering the case of childhood vaccinations, the autonomy issues are less significant since parental choice has an impact on the well-being of children and society has justifiable interests in ensuring that epidemics do not cause harm to communities.

The Drowning Child Principle Applied

The drowning child thought experiment by Singer has direct implications on the Nigerian healthcare. In the same vein that individuals owe moral responsibilities to save the lives of drowning children at a small personal expense, so too do the rich in Nigeria and external stakeholders have a responsibility to finance life saving health interventions when they can be done at affordable prices without having to put them in similar situations.

In the case of affluent Nigerians, this principle dictates that they should ensure that they invest in improving their healthcare as opposed to luxury consumption. The price of one luxury car can save thousands of children lives through vaccination or even offer basic healthcare to whole communities. Such trade-offs are morally obligatory as opposed to being charitable according to Singer.

International commitments are also equally persuasive. The economic expenses of delivering basic a full-scale care in Nigeria, which is estimated to be around 15-20 per person every year, are insignificant sums of money to affluent countries but would guarantee immense misery (Sani et al., 2025). The framework by Singer considers such aid as a binding obligation according to the principles of equal consideration and not charity.

It is objected that insisting on this demanding set of principles by Singer is psychologically unrealistic and even counterproductive. The need to make huge sacrifices of people can create an opposition that will negate any help. Furthermore, foreign aid is usually futile because of corruption and bad institutions indicating that the resources to Nigeria do not necessarily help the state to change its welfare positively as expected.

These are legitimate practical objections that are worth attention but do not obstruct basic utilitarian duties. Singer accepts that it is important to find the ideal level of giving as well as the best methods, only through empirical research. The issue is not in doubting the existence of obligations but finding the most effective methods of intervention. In the issue of corruption,



utilitarianism requires effective aid mechanism instead of quitting the aid process altogether. It is demonstrated that properly developed health interventions, especially vaccination programs, can attain very good results even in difficult governance environments.

Policy Implications: Utilitarian Health Reform

The framework proposed by Singer has an excellent guide on how healthcare financing in Nigeria should be. Existing regressive systems that are against efficiency and equity are to be changed towards progressive taxation to fund universal healthcare. The low income marginal utility of the wealthy Nigerians should be contributed more significantly to healthcare systems that offer high marginal utility services to the poor families.

Implementation of universal health coverage is in line with equal consideration principles, which offers basic services to all Nigerians irrespective of the capacity to pay. The cost-effectiveness analysis suggests that the welfare benefits of universal primary healthcare would be higher in comparison to targeted programs. Though the utilitarian analysis does not necessarily prefer government to private delivery, it requires systems that are geared towards optimum health care instead of profit, which tend to support healthy and well provision of basic services with the involvement of the private sector in specialised care.

Vaccination and Preventive Care Prioritization

Immunization campaigns perfectly fit the concept of utilitarianism since they keep the large amount of suffering down to comparably low expenses. The framework provided by Singer emphasizes the need to pursue universal coverage of vaccination first, before spending money on curative care, which is very costly. Heavy investments should be made in supply chain improvements to mitigate the limitations of the cold chain infrastructure in Nigeria because health benefits of increased vaccine coverage significantly exceed investment.

The need to prevent vaccine hesitancy with the help of community education programs is a utilitarian necessity. Misconceptions that allow spreading preventable diseases go against the utilitarian requirements but do not violate autonomy. Cross border vaccination coordination is very imperative because of the transnational character of diseases. Nigeria should insure on mutual cooperation with her neighbors to reduce the levels of herd immunity.

International Obligations and Pharmaceutical Justice

The drowning child principle by Singer defines moral responsibilities by the rich countries in helping Nigerian healthcare. The status of current international health assistance is of a very inadequate level compared to utilitarian demands. The expenses of providing universal basic healthcare in Nigeria are insignificant percentages to the spending of healthcare in the rich countries, and it is therefore ethical to make more contributions to Nigeria as provided by Singer.

The efficiency of aid needs to target interventions with the highest impact on a dollar, usually vaccination, basic healthcare infrastructure, and preventive health care, rather than high-technology medical interventions. Rich nations need to invest in medical technology and knowledge transfers to improve health capacity in Nigeria. Patent laws that deprive people of life-saving drugs at the time when such drugs are allowed to avoid unnecessary pain do not observe the law of utilitarianism.

The concept of differential pricing where the pharmaceutical companies make profits in the rich nations and offer affordability in Nigeria, fits the utilitarian analysis where maximizing on



welfare is achieved by increasing treatment access without destroying incentives to innovate. There is the need to change the research priorities to give emphasis on the diseases that inflict maximum sufferings across the globe as opposed to paying excessive attention to the status of the wealthy groups.

Conclusion

This discussion has shown that the utilitarian framework by Singer is a strong criticism of the inequalities in healthcare in the state of Nigeria and includes constructive policy advice. The principle of equal consideration criticizes the systems that force poor Nigerians to spend nine times higher healthcare expenses than the rich citizens yet they get low-quality healthcare. The importance of utilitarian cost-effectiveness focus is the reason why the goal of prevention interventions in preventing health should focus on vaccination that has the highest health outcome per naira spending.

The drowning child principle by Singer creates a well-defined moral course of both domestic and international action. The rich in Nigeria have a duty to develop better healthcare instead of practicing luxury consumption and the rich countries should offer development aid that will help Nigeria to come out of the health crises. The principles of equal consideration hold that the prevention of the deaths of Nigerians is not inferior to the prevention of the deaths anywhere irrespective of the boundaries.

Some of the policy recommendations are reforms in healthcare financing where the resources are redistributed to the poor, efforts directed at universal coverage of vaccinations, maternal and child health as well as international aid. The barriers of implementation are still significant - the political economy of Nigeria does not experience utilitarian reforms at the expense of elite privileges, and there is a risk of conflicts between utilitarian universalism and cultural and religious diversity.

Nonetheless, the utilitarian framework of Singer gives the required insights to come up with more just health systems and more effective ones. Equal consideration would entail the consideration of the health interests of all Nigerians to be given equal policy in consideration. Cost-effective analysis provides objective criteria on resource allocation that is not affected by politics. The drowning child principle creates definite moral requirements to support the life-saving measures to domestic and international actors.

The health issues of Nigeria, which are represented by the country being ranked among the major contributors to child mortality and the vaccine-preventable disease burden in the world, require an urgent policy change on utilitarian grounds. The ethics framework presented by Singer will offer moral justification as well as practical guidance toward the development of health systems that really capture the interest of all Nigerians, and in particular, those who are most disadvantaged in the existing systems. Nigeria has no option other than alternative policy options but between enduring suffering that would be avoided and following the principles of utilitarianism, where human interests are considered paramount and above other factors.

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