



Yobe is located in northeast Nigeria and borders four Nigerian states as well as the Republic of Niger. It has a population of 3.4 million. Its economy is mainly based on agriculture. Under-five mortality stands at 102 per 1000, immunisation coverage is 7%, and antenatal care attendance is 26.6%. Most wards in the state (98.4%) have a functional health facility (MICs 2016/2017).

Key achievements

- As part of efforts to improve on quality of care and services, the programme conducted integrated supportive supervision (ISS) visits to 14 supported facilities across 3 Local Government Areas (LGAs) of the state (Nguru, Machina and Karasuwa).
- MNCH2 increased its coverage of facilities for data quality assurance from 102 to 152 primary health centers in the state.

Lessons

- A marginal increase has been observed in the average capacities for organizational planning and budgeting as measured by the Organizational Capacity Assessment Tool (OCAT) from 5.09 to 5.3 for all LGAs across the state.

This is attributed to intense follow up and mentoring support to LGA MNCH Steering Committees on resource mobilization across the state.

- MNCH2-established facility health committee efforts are leading to the provision of potable water, deployment of more skilled personnel and maintaining good sanitation of health facilities in the state.

Transition and Sustainability

MNCH2 advocacy to the Yobe State Commissioner for Health on sustaining the Safe Space Intervention by the State Ministry of Health has started yielding fruits with a request made by the Commissioner for the programme to support in leading high-level advocacy to the Secretary to the State Government on the issue.

Priorities for next month

- Provision of capacity building to LGA teams on ISS and data validation process, institutionalisation of regular visits to facilities and incorporation of data validation as part of the supportive supervision checklist.
- Regular meetings of facility Maternal and Perinatal Death Surveillance and Response Committees to ensure tools are filled according to the National Guidelines.



MNCH2 Outreach team supporting IMCI at Gumayamari community in Yusufari LGA

“Our committee is up and doing, mobilising communities around the health facility to avail themselves of the services it provides. MNCH2 has created a robust relationship between the health facility and the community through the facility health committee (FHC).”

- Mohammed Garba,
FHC Chairman

Dikumari Community, Damaturu LGA



births assisted by skilled personnel
50,598



pregnant women making at least 4 ANC visits
142,101



newborns and mothers who received care within 24 hours of delivery by a skilled health care provider
14,790



children fully immunized against vaccine-preventable diseases.
173,507



additional women using modern Family Planning methods
49,456

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