



MNCH2 Monthly Flash Report

November 2017

JIGAWA



Jigawa is situated in the north-western part of the country with a population of 5,590,272 (Male: 51% Female 49%). 86% of the state's wards boast of functional primary healthcare facilities. Infant mortality stands at 83 per 1000 live births; unmet need for family planning is 98.7% and the use of contraceptives stands at 1.3% (MICS, 2016).

Key achievements

MNCH2 supported the inauguration of a State Emergency Routine Immunisation Coordination Centre to manage the full implementation of the state's routine immunisation programmes, strategies and other recommendations to improve RI coverage. The primary aim is to achieve at least 85% immunisation coverage for all antigens and to improve detection and responsiveness in the resolution of RI gaps.

The programme conducted the third roll-out of free RMNCH drugs to health facilities across the state, distributing drugs worth more than N18 million to 44 health facilities. All 162 MNCH2-supported health facilities in the state are now providing free RMNCH services.

PHC Advisory Committees supported by MNCH2 made remarkable efforts in advocacy and resource mobilisation, leading to increased political will from government and other stakeholders. Results achieved included recruitment of casual staff by Kiyawa LGA Council, renovation of Kwatai PHC in Birnin-Kudu LGA, identification of a permanent site for the MSF hospital in Jahun LGA and the purchase of 30 beds for Gwaram Cottage Hospital by Senator Sabo Nakudu.



A health worker performs Healthy Timing and Spacing of Pregnancy counseling under the supervision of a Master Trainer Mentor during Post Training Supportive Supervision in Dansure PHC, Kiyawa LGA

Lessons

- The push distribution approach enhances availability of minimum stocks in supported health facilities. Each month, MNCH2 supports vaccine distribution to the 27 LGA Cold Chain Stores.
- Availability of free drugs in supported health facilities has resulted in an upsurge of patient and client turn-out leading to a new wave of stock-outs. This calls for increase in the quantity of MNCH free drugs in order to address the gaps.
- Members of the Jigawa State House of Assembly have relatively low knowledge and are inadequately informed on the real situation in state health facilities and they need to be reached with information to support them to make decisions.



“In assessing the interventions of MNCH2 in our community, we realised that as a result of outreaches and other services rendered to our locality, antenatal attendance (ANC) has increased significantly. I have linked these good results to the MNCH2 support for Post Training Supportive Supervision (PTSS). Nowadays, there are very few or no cases of ruptured uterus, anaemia in pregnancy, intra-uterine foetal deaths and placenta praevia.”

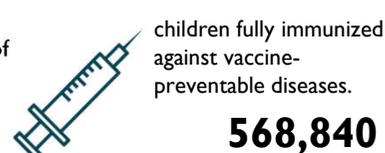
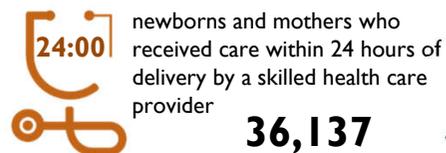
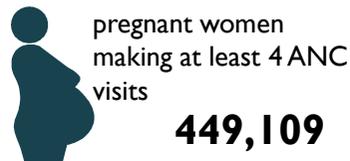
- Kabiru Hassan Babura
Chief Nursing Officer
Babura General Hospital)

Transition and Sustainability

The Jigawa State Government has adopted the MNCH2 quarterly State Outreach Days (SOD) approach to community outreaches. This is resulting in improvements, especially with regards to routine immunisation. MNCH2 is gradually handing over the leadership for outreach coordination to the state government.

Priorities for next month

- Follow up support to Babura and Dutse General Hospitals' Maternal Death Review Committees on post training activities.
- Support the Lot Quality Assurance Sampling (LQAS) for Jigawa State stakeholders.
- Support bi-annual Data Review and Validation meeting with PHC Managers, DSNOs and M&E Officers.
- Support Training of PHC Management Staff on Monitoring and Evaluation of free MNCH drugs.



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