## **MNCH2 Monthly Flash Report** March 2018

# 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**

- During the reporting month, the programme provided Integrated Reproductive Maternal Newborn and Child Health (IMNCH) services to 36 hard-to-reach communities in the state., reaching a total of 4,360 persons with services ranging from routine immunisations to integrated management of childhood illnesses (IMCI), nutrition, referrals, Healthy Timing and Spacing of Pregnancy, deworming, antenatal care and postnatal care services.
- The programme trained 41 State Monitoring and Evaluation Officers and the Health Management Information System (HMIS) team on the District Health Information System (DHIS2), and proper documentation on the National Health Management Information System (NHMIS).
- The programme printed and distributed NHMIS tools, which pushed the state beyond the annual target for data quality assessment from 63% to 77%.



Healthcare workers & State Midwife Mentors after a 2-week training on IRMNCH in Hadejia LGA

### Lessons

- Involvement of the Ministry of Women Affairs and Social Development in quarterly review meetings of the National Union of Road Transport Workers (NURTW) has encouraged the Ministry to advocate for a budget line to support NURTW Emergency Transport Scheme volunteers.
- Frequent attrition due to retirements, resignation and transfer of staff from supported health facilities is poses a significant risk to gains made on having skilled providers in facilities.

We can see the increased capacity, skills and proficiency on Integrated Reproductive Maternal, Newborn and Child Health Programming as a result of the comprehensive training on IRMNCH by MNCH2. I am indeed grateful to the Programme."

> - Isa Mohammed Abdullah, General Hospital Hadejia, Hadejia LGA

## **Transition and Sustainability**

- The State Ministry of Health has taken responsibility for warehousing, inventory management, distribution, supervision and monitoring of MNCH2-provided drugs and equipment.
- MNCH2 is collaborating with the Engaging Citizens' Pillar of the Partnership for Engagement, Reform and Learning (PERL-ECP) and the State House of Assembly Committee on Health to sustain the Jigawa State MNCH Accountability Forum's (JIMAF's) advocacy efforts and other oversight functions at health facilities.
- Despite strengthening of linkages between the Saving One Million Lives (SOML) programme and traditional / religious leaders, there are no budgetary provisions for them to sustain demand creation in the communities.

#### Priorities for the next month

- Follow up by members of JIMAF on advocacy to the state government.
- Strengthen collaboration with other partners with interest in Maternal Perinatal Death Surveillance and Response (MPDSR) activities for support.
- Support the development of the Community-based Contributory Healthcare Insurance Scheme.

births assisted by skilled personnel 171,708 pregnant women making at least 4 ANC visits **495,987** 

newborns and mothers who received care within 24 hours of delivery by a skilled health care provider 52.786

children fully immunised against vaccinepreventable diseases.

632,285

additional women using modern Family Planning methods

> 100,382 Last updated: March 2018