



Katsina State is located in the Sahel Savannah in northwest Nigeria. It has a total population of nearly 6 million. Each ward has at least one functional primary health facility and the state has seen great improvements in some health indicators: delivery by skilled birth attendance has risen from 5.1% in 2008 to 20.8% in 2017. However, antenatal attendance stands at 33.40% and immunisation coverage is 6%. The unmet need for child spacing is 29.5% (MICs 2016/2017).

Key achievements

- 20 service providers across 10 Local government areas (LGAs) were trained on the management of labour using partographs, essential newborn care and resuscitation, active management of the third stage of labour (AMSTL), High Level Disinfection (HLD), management of eclampsia and updating records in antenatal and postnatal registers.
- The programme trained 34 local government Health Promotion Officers, Community Volunteers and Maternal and Child Health Coordinators on integrated demand creation activities.
- MNCH2 supported the State Led Accountability Mechanism (SLAM) in organising a step-down training on maternal death reviews and tracking of free MNCH drugs for community based organisations (CBOs) and facility health committee (FHC) members from the 34 LGAs.

Lessons

- Mobilisation of funds from community members by District Heads has made drugs available and accessible to the less privileged in Maiaduwa, Zango and Sandamu Local Government Areas (LGAs).
- Frequent engagement of the local government Monitoring and Evaluation Officers by partners has slowed down their commitment to their primary data collation and reporting duties.

Transition and Sustainability

- A philanthropist sponsored the training of an additional 100 community volunteers in an effort to sustain demand creation activities in Dandume LGA.
- The programme successfully handed over logistics and supply chain activities to the State Ministry of Health (SMoH).
- The SMoH has printed daily general attendance registers worth NGN 2.5 Million to address the shortage of tools reported in some of the health facilities in the state.

“*I thank the Facility Health Committee (FHC) members of Yandaki for mobilising funds to repair the health facility ambulance. You can clearly see how this has helped in transporting pregnant women from hard-to-reach communities to the facility.*”

- Alhaji Maikudi A. Tama
FHC Chairman,
Yandaki, Kaita LGA.


Priorities for next month


- Follow-up meeting with National Council for Women Society (NCWS) and civil society organisations (CSOs) on sustainability.
- Follow-up with the SMoH on the data quality assurance action plan.
- Share data quality assessment budget with the SMoH for sustaining data quality assessments (DQAs).
- Follow-up with UNICEF on the proposed training of Monitoring and Evaluation Officers on District Health Management Information System (DHIS2).





MNCH2 Outreach Team provides maternal, newborn and child health services at Yankwani, Bakori LGA

 births assisted by skilled personnel
180,670

 pregnant women making at least 4 ANC visits
605,042

 newborns and mothers who received care within 24 hours of delivery by a skilled health care provider
116,502

 children fully immunised against vaccine-preventable diseases.
658,179

 additional women using modern Family Planning methods
256,789