



Kano is located in north-western Nigeria. With an estimated population of 13.4 million, it is the most populous of Nigeria's 36 states. The child mortality rate is 103/1000 live births (MICS 2016/17), with less than 50% of children under 5 fully vaccinated and 20% availability of child health cards (MICS 2017).

Key achievements

- MNCH2 supported the Primary Healthcare Management Board (PHCMB) to distribute 500 copies of out-patient registers to 37 Local Government Areas (LGAs).
- Integrated medical outreaches reached 48 women with insertion of implants, 187 with Depo, 170 with oral pills, 592 with antenatal care services, 521 with Integrated Management Childhood Illnesses services, 114 with postnatal services, 164 children with immunisations, 1,712 with outpatient services and 57 referred for next levels of care.
- Results from data mop-ups showed an increase in uptake of postnatal care within 24 hours from 45,701 to 50,446 and new family planning acceptors from 90,659 to 95,847.
- MNCH2 supported the State Ministry of Health (SMOH) to conduct an internal review of the Drugs and Medical Consumable Supply Agency (DMCSA) Law of 2009 with a view to identifying gaps and proposing recommendations and possible amendments to the law.

Lessons

- The SMOH's establishment of 30 additional Facility Health Committees (FHCs) in 18 LGAs in consonance with CHAI Memorandum of Understanding (MoU) has led to an increase in number of FHCs in the state to 294.
- Due to reports that some health facilities charge exorbitant prices on medical consumables procured under the Kano State Contributory Health Care Scheme (KSCHS), the State Contributory Health Care Management Agency (KSCHMA) has directed all health facilities to follow the operational guidelines and display a price list of drugs and services they provide.

Transition and Sustainability

- Kano State House of Assembly members have agreed to commit part of their constituency projects to renovation of at least one primary health care facility (PHC) per Member each year and construction of new accommodation for midwives where staff accommodation is not available.
- The State Government has approved the sum of NGN1,877,000 to fund the conduct of an analysis on performance of the Drug Revolving Fund (DRF) in some secondary health facilities from January 2016 to September 2018. The SMOH has also built the capacity of 52 hospital accountants on retirement of DRF sales and accountability for free maternal and child health drugs.
- The State Government has initiated State-Wide Executive Integrated Supportive Supervision (SWEISS) to assess external environment, physical infrastructure, administration, DRF, medicines, supplies and equipment, human resources development and trainings at healthcare facilities.

“If we can have development partners like MNCH2 in Kano State I will be contented because they carry us along and they have an awesome strategy to improve the lives of women and children.”

Dr. Kabiru Ibrahim Getso
Hon. Commissioner of Health

Priorities for next month

- Conduct of integrated medical outreach in 15 hard-to-reach communities.
- Provide technical support to Ministry of Women Affairs to adopt the Safe Space Initiative Training Manual and Discussion Guide.
- Support review of the Drug Management Consumable Supply Agency (DMCSA) and Primary Healthcare Management Board (PHCMB) laws.



MNCH2 midwife mentor, a traditional birth attendant and community leaders demonstrating the application of chlorhexidine for cord care in Gogel community, Warawa LGA.



births assisted by skilled personnel

328,187



pregnant women making at least 4 ANC visits

659,136



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

203,812



children fully immunised against vaccine-preventable diseases.

1,416,740



additional women using modern Family Planning methods

492,603