



Zamfara is located in northwest Nigeria and has a population of 4.1 million (including 800,000 children under 5). Maternal Mortality Ratio (MMR) is 1,100 deaths per 100,000 live births; Infant mortality is 104 / 1,000 live births. Contraceptive prevalence rate has increased from 3.3% in 2011 to 5% 2016. (MIC survey 2011-2016).

Key achievements

- The programme marked International Women’s Day with outreach services. 220 women were sensitised on the importance of institutional delivery, Healthy Timing and Spacing of Pregnancy (HTSP) and postnatal care.
- According to the Data Quality Assurance (DQA) exercise conducted, there is marked improvement in the state’s overall data quality - from 76% in Quarter 3 (Oct-Dec 2017) to 90% in Quarter 4 of Year 4 (Jan – Mar 2018).
- The programme supported the State Ministries of Health and Justice to develop and review the draft bill on Zamfara State Contributory Health Care Financing.

Lessons

- Extending Integrated Supportive Supervision (ISS) to private health facilities has led to the closure of some uncertified health facilities, which consequently led to a higher turnout in government health facilities.
- Withdrawal of Zinc, Iron and Folic Acid Supplementation project (ZIFAS) in supplying Magnesium Sulphate, ORS and Zinc has led to the stock-out of these commodities in some of the MNCH2-supported health facilities.

Transition and Sustainability

- The State Ministry of Health has taken over ISS through Saving One Million Lives (SOML) funding.
- The State Government has approved N1.5 billion for the renovation of Talata Mafara General Hospital and 147 primary health facilities across the state.

Priorities for next month

- Follow up with Ministry of Religious Affairs to finalise on the actual date of transiting sensitization and community mobilization activities.
- Print and distribute Community Maternal Perinatal Death Surveillance and Response tools to health facilities and communities.
- Support facility level Maternal Death Review Committees to develop and implement action plans based on national Community Maternal Perinatal Death Surveillance and Response Guidelines.
- Establish additional Facility Health Committees to meet programme targets.

“The MNCH2 impact is well-felt in the State. When I resumed office as new Commissioner of Health, most of the places I went to, and those people in the office and at facilities I interacted with were just echoing ‘MNCH2’ [...] MNCH2 is the best intervention in the State. The approach is superb, we wish to have MNCH3 in the State.”

- Hon. M. Liman,
Zamfara State Commissioner of Health



Traditional birth attendants proudly display kit bags given to them by MNCH2 at Barayar Zaki PHC, Anka LGA



86,955



pregnant women making at least 4 ANC visits

117,179



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

28,834



children fully immunised against vaccine-preventable diseases.

214,235



additional women using modern Family Planning methods

119,504