



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 orientation and training of 158 health care workers from 8 local government areas on the National Health Management Information System (NHMIS).
- The programme supported the development of a concept note on Community-based Contributory Healthcare Insurance Scheme for the state.
- 27 newly-hired Monitoring and Evaluation Officers were trained on Organizational Capacity Tool (OCA) processes across all the local government area.
- The programme trained and mentored the Local Government Planning Teams to develop demographic data to inform health care service delivery across the local government areas (LGAs) of the state.

### Lessons

- Inadequate power supply has made blood storage difficult at Balangu Primary Health Care Centre, Kafin-Hausa LGA.
- Engaging policy makers from the Primary Health Care Management Board during the LGA-level data validation has led to the adoption of a policy that monthly data must be validated before data entry on the District Health Management Information System (DHIS2) .
- Data review and validation introduced at the LGA level has helped in reducing errors on the NHMIS and DHIS2 platform.

### Transition and Sustainability

- The Ministry of Women Affairs and Social Development alongside JSPHCDA supported the payment of monthly allowances and transportation fare for SSI facilitators during the state level review of the Safe Space Initiative manual with stakeholders.
- The State Ministry of Health (SMOH) has inaugurated a Maternal and Perinatal Death Surveillance and Response (MPDSR) Steering Committee to sustain MPDSR activities in the state.

### Priorities for the next month

- Conduct Post-training Supportive Supervision to previously trained health care providers from the MNCH2-supported health facilities.
- Support the SMOH to review transition plan on Health Data Consultative Committee.
- Work with Health Data Consultative Committee and other partners in the state to discuss the programme transition and sustainability plan.
- Support the SMOH to conduct Health Data Consultative Committee (HDCC) meeting as well as draw up an actions plan for sustainability.

“The MNCH2 bottom-up approach to data review and validation meetings is cost effective, easy for the state to adopt and it has gradually reduced the errors on the Jigawa DHIS2 looking at the last few years.”

- Aminu Inuwa  
Planning/HMIS Officer

Jigawa State Primary Health Care Delivery Agency (JSPHCDA)

Orientation of health care workers from low-performing health facilities on NHMIS Standard Operating Procedures in Dutse LGA

