



## **1-DAY HIGH-LEVEL STRATEGIC ENGAGEMENT WITH FP STAKEHOLDERS IN KADUNA STATE.**

**Date: Tuesday 28<sup>th</sup> January, 2020**

**Location: Bafra Hotel, Kaduna State**

**Name of reporter: Victoria David**

### **Introduction/Background:**

The Partnership for Advocacy in Child and Family Health at Scale (PACFaH@Scale) project Nigeria, referred to as PAS is a health advocacy project anchored by the Nigeria non-profit, the dRPC and implemented directly by local NGOs and health professional associations. The project is not service delivery and it is not awareness creation. Its focus is limited to evidence-based advocacy. The project's timeline is 2018 to 2022 and the issue areas of the project are:

1. Routine Immunization
2. Family Planning
3. Amoxicillin as first line treatment for Pneumonia and ORS-Zinc as treatment for childhood diarrheal diseases
4. Primary Health Care Under One Roof

The project is designed as an evidence-based advocacy intervention to catalyze government at national and state levels to deliver on pledges, from June 2019 in the areas of:

- Health financing;
- Administrative/regulatory procedures; and
- Child and family health policy.

The PAS Project is designed to support the improvement of general poor indices around key health issues, Routine Immunization, Family Planning, Amoxicillin as first line treatment for Pneumonia and ORS-Zinc as treatment for childhood diarrheal diseases and Primary Health Care Under One Roof. Findings specific to states that will be unravelled by this intervention will serve as baseline information and data for an evidence-based advocacy in Kaduna State specifically.

The focal states of the PAS project in Nigeria are Anambra, Enugu, Kaduna, Kano, Niger, Rivers, Taraba and Lagos States.

**Objective(s):**

- Identify emerging FP/Child Spacing issues in Kaduna State
- Health financing in Kaduna State relevant to FP (Required best practice, pledges, compliance status, achievements, challenges, recommendations)
- Administrative/regulatory procedures around FP (Required best practice, pledges, implementation and compliance status, achievements, challenges and recommendation by Kaduna State/Ministry of Health)
- FP policy (Federal policies that Kaduna is expected to domesticate, policies already domesticated, pledges, status of implementation/achievements, challenges & recommendations).

**Participants profile**

**Methodology**

- Provision of information and data on the situation of FP in Kaduna in a meeting with Stakeholders, PAS NGOs and dRPC. The update shall provide information on identifying emerging FP/Child Spacing and to make recommendations to address the issues identified in Kaduna State

**Overview**

Undertake a study on Family Planning in Kaduna State, to be delivered within the stipulated timeframe.

Provide update on FP situation in Kaduna state to Stakeholders, PAS NGOs and dRPC in Kaduna

The meeting started at 9.30am as scheduled with the arrival and registration of participants and ended at 3.30pm.

**Opening Prayer** was given by Imam Sani Isah, Project Director Interfaith Mediation Centre-PAS, Kaduna State while closing prayer was given by Dr. Isaac Auta Committee Chairman On Health KDHA

Stake holders in attendance are the followings:

PS KdSMOH - Mohammed Shuaibu representing the honourable commissioner for health

KsPHCDAFp/Rh Coordinator - Nafisat Musa Isa

KsPHCDA/PMJere – Dr. C.K Bakan

KDHA - AuwalAbdulrahaman

Committee Chairman On Health KDHA - Dr. Isaac Auta

SPHCDA - Mohammed .M. Maida

SMOLGA Affairs - MaimunaSafiyanu

SPHCDA - JubrillIsah

KAD.MOF - Afunu .G. Gaiya

KADHSMA - Yohana Lekwot

Zone 1 Tech RH – RaliyaGamagira

KADSPHCDA - Ayi Anthony Galadima

Zone 3 - Elizabeth TalauSarki

SPHCDA Z/Kataf - Stanley Sahmasha

Z/C Zone 2 - Aliyu Alhassan

### **Executive Summary**

Welcome address was given by the PS KadSMoH who represented Dr. Amina Baloni, Honourable Commissioner of Health, Kaduna State. In his welcome address he mentioned some areas in the FP service were met doing well but with the challenges of finance, facility dilapidation etc. the government intervened in the finance area by creating a budget line for FP services in the state and were able to renovate some facilities, while some are still under renovation which led to challenges in FP service in the said communities because some of the facilities are using primary school premises for service provision.

Operational plan was put into place and the micro-plans speaks directly to specific activities with definite timeline and persons responsible to facilitate adequate monitoring and quality feedback mechanism.

He went further to appreciate the intervention of development Research and Projects Centre and other implementing partners in the state.

### **Goodwill Message was given by:**

#### **Bill and Melinda Gates Foundation Representative in Kaduna State, Dr. Joseph.**

Dr. Joseph appreciates the state government efforts thus far, but highlighted on some areas where more efforts need to be improved:

- I. The indices used to address the metrics in FP are not favourable

II. CPR for long acting reversible contraceptive (LARC) is was low in 2018 and need to be improved on

He went further to say he is looking to a fruitful deliberation.

### **Clinton Health Initiative(CHAI) representatives in Kaduna State, LewuFolorunsho**

Mr. Lewu Folorunsho mentioned that CHAJ is one of the implementing partners on Child Health and Family Planning in Kaduna State both at private and government health facilities sector. The organization has trained over 2000 providers on childhood killer disease.

### **Save the Children representatives in Kaduna State, Isah Ibrahim**

Save the Children is also an implementing partner supporting the government since 2001 in different thematic areas listed as follows, HR Policy, Strategic Planning, and Child Nutrition. The following gaps were mentioned by him:

- Human resources gap especially in the rural areas, saying the use of volunteers is not the best option to permanent staff
- Gap of release of money backing for program
- He advised that government should take the lead role in all programs.

### **Dr. Isaac Auta, committee chairman on health, Kaduna House of Assembly**

He asked question on origin of FP servise in the state in order to raise a bill which can be culminated into a law to improve FP service and take up in kaduna state. This was responded to by the state FPRH coordinator in person of HajiaNafisatIsah Mus

### **OVERVIEW of dRPC-PAS**

Overview of dRPC-PAS was given by Mercy Anene, PAS Coordinator Kaduna State

### **Tea Break**

Tea Break was taken by all.

### **Presentation on Emerging Issues on Family Planning in Kaduna State was given by Victoria David – FP/SRH Consultant.**

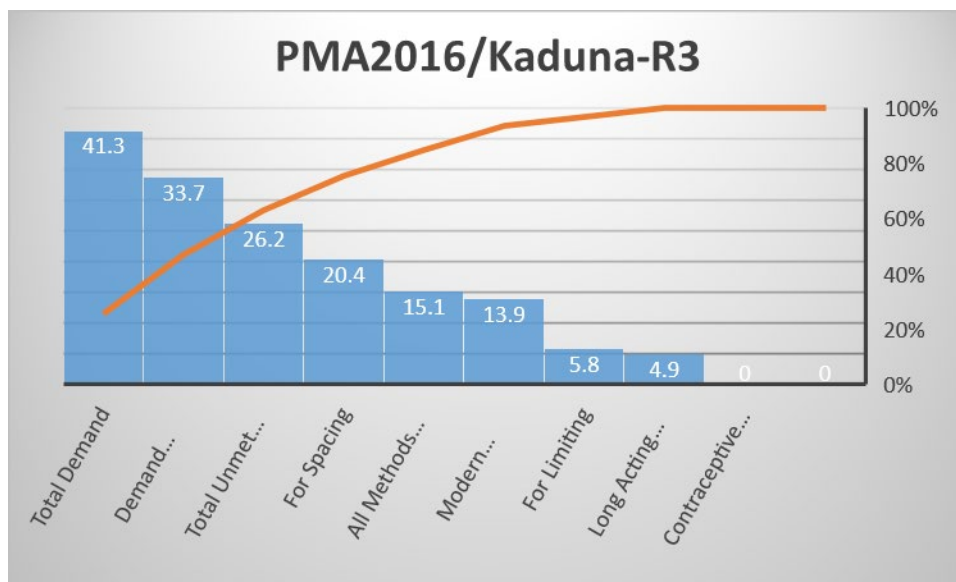
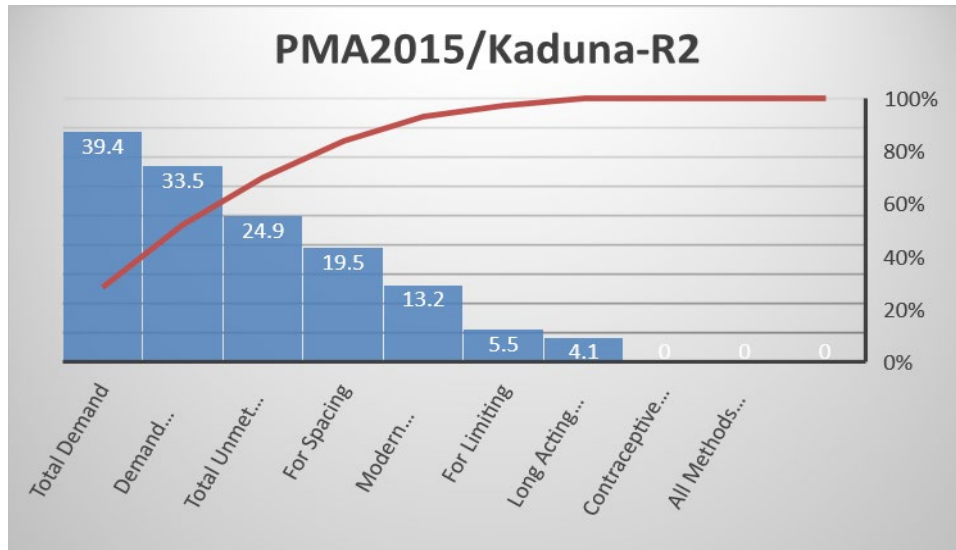
During presentation by Victoria, following points were highlighted and given as a take home points:

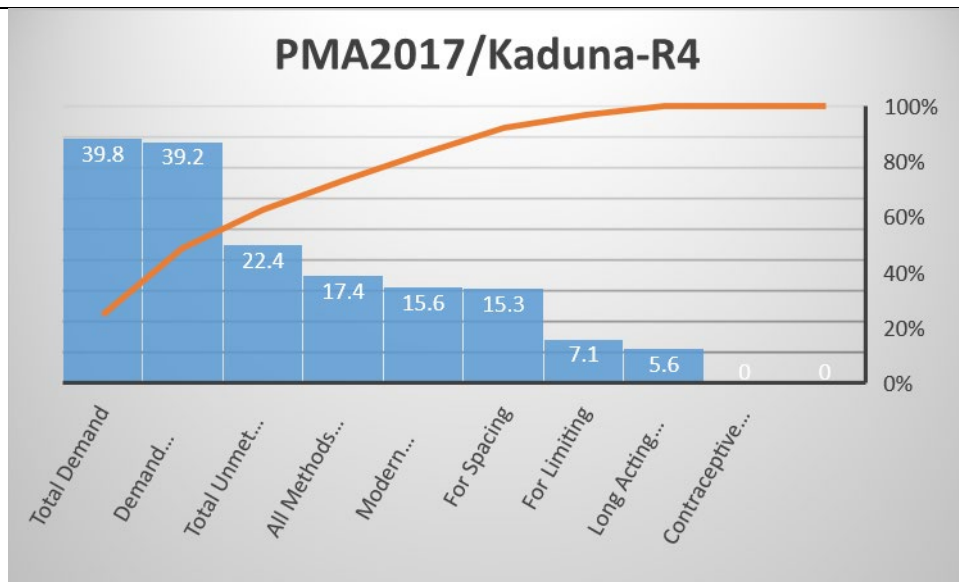
- A work not documented, is a work not done
- It is family planning not woman planning hence the need for men to agree with their wives to plan their family
- Family planning is same as child spacing
- Women has the right to have as many children as she desires but this should be reasonably spaced due to health, economy etc.
- It is the religious beliefs of Islamic religion to have 4 wives etc. but the man knowing this must be able to decide human children he wants and share it amongst the wives

- Budgeting of funds is not functional if the fund is not released for execution of program

## KEY FAMILY PLANNING INDICATORS

Select Family Planning Indicators Across Recent Surveys (All Women, Age 15-49)





The presentation slide will be attached to the report.

**Panel Discussion was held: Topic: Emerging Issues in the Family Planning landscape in Kaduna State**

**Panellists:**

1. Abdullahi Suwaiba, GIWAC/PAS representative Kaduna State
2. Dr. Joseph Onah, Bill and Melinda Gates Foundation Representative in Kaduna State
3. Alh. Mustapha Jumare, Project Director IIGES-PAS, Kaduna State
4. Haj. Nafisa Musa Isah, Reproductive Health Coordinator in Kaduna State

**Discussion:**

**Haj. Nafisa Musa Isah, Reproductive Health Coordinator in Kaduna State**

According to her the major challenge/issue are:

- Providing FP service during Post-Partum period
- Adolescence accessing FP service due to religion and cultural beliefs
- Logistics – need to build the capacity of the team
- M&E team also need capacity building in other for them to be able to capture and document right data for quality decision making
- Weak and non-availability of reporting tools
- Non release of cash of budgeted fund for FP service activities

**Alh. Mustapha Jumare, Project Director IIGES-PAS, Kaduna State**

Emphasis on the immediate need to address the followings:

- Complete release of budgeted fund with cash backing and not only budgeting only.
- The need to work with the traditional and religious leaders in the state to meet the un-met needs

**Dr. Joseph Onah, Bill and Melinda Gates Foundation Representative in Kaduna State**

- Raised his discussion from the demand and supply side of FP – the state records stock out of FP commodities which dose down the effect of the demand creation made by the state, hence the need for the state to ensure that stock out of commodities and consumables is addressed accordingly.
- The state should ensure timely disbursement of funds for procurement etc.
- Data management system should be strengthened and addressed.
- The costed implementation plan should be launched and bring to an optimal functionality.

**Question and Answer Session**

Question 1: Can another name be giving to Family Planning in other to address the misconception related to it?

Answer: The other name for FP is child spacing.

Question 2: what will the SMOH do this year to improve on release of cash backing for FP.

Answer by the PS SMOH: According to the PS, 2017, 2018, were hard years for the government because they didn't receive the promised fund allocation for the state. Hence this year all hands are on deck with concise steps to ensure full release of cash backing for FP in the state.

Question 3: FP for youth and adolescent. The state has only 9 youth friendly site which was set up by CIHP an implementing partner on HIV/AIDS in the state and its only 2 sites that are functional. What is the government doing now to be able to reach out to the youth by taking advantage of the technology available?

Answer: The state is setting up Adolescent and Youth working group in the state, PACFAU and other implementing partners on the program are encouraged key in and work together with the group.

**Evaluation**

**PRE & POST TEST**

Pre-Test was done to evaluate and assess the perception and acceptance of FP in the state.

Total of 46 participants participated in the pre and post-test. 25 males and 21 females.

**Pre-Test Evaluation - 26 Participants.**



**Post-Test Evaluation – 21 Participants**



**Conclusions/ Recommendation:**

**In conclusion the PS SMOH promised:**

- To ensure immediate release of cash backing for FP in the state
- To hasten the completion of health facilities renovation, so as to, improve access to FP service at all facilities
- To work closely with implementing partners and take full ownership of FP

**FPRH coordinator promised:**

**To hasten the SMOH in the procurement of FP commodities and consumables to address the issue of stock out of both**

**Recommendations:**

- Strengthening of Advocacy
- Reshaping service delivery
- Creating demand
- Sustainability
- Capacity Building

**Number of Persons Reached: 51**

**M – 30**

**F - 21**



## Pictures



**Group Picture of Participants**



**PS KadSMoH Muhammed Shuaibu**



**Hon. Dr. Isaac .A.Z. KSHA Chairman Health Committee**



**Section of participants**





**Section of participants**





**Kaduna state FP/SRH Coordinator NafisaIsah Musa**



## SRH Consultant Victoria David

