2019

NIGERIA HEALTHWATCH

ANNUAL REPORT

Nigeria Health Watch Annual Report 2019

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PROFILE

Management Team

VIVIANNE IHEKWEAZU
Director of Programmes

DR. IFEANYI NSOFOR
Director of Policy and Advocacy

CHRISTOPHER NNAJI
Director of Finance and Administration

Mission

Our mission is to ensure that Nigerians have the tools and knowledge to make informed decisions about their health. We seek to advocate for improved access to health services at the federal and state level, promoting transparency and health reform where needed. Nigeria Health Watch aims to achieve this mission through informed commentary, effective advocacy, education, health information dissemination and policy recommendation.

Values

Our values are excellence, partnership, commitment and open-mindedness, as we work collectively to advocate for better access to health care for all Nigerians.

Vision

Nigeria Health Watch is committed to working with stakeholders, through advocacy to realise its vision of a Nigeria where all people, irrespective of income have access to improved and affordable quality health care.

Core Beliefs

- Excellence
- Partnership
- Commitment
- Open-minded

BOARD OF TRUSTEES

Dr. Zainab Imam obtained her medical degree from the University of Ibadan in Nigeria. This was followed by training at the University College Hospital in Ibadan. Dr Imam retrained as a General Adult Psychiatrist in the Ukiah endorsement in Rehabilitation and Subspecialty interests in Early Intervention in Psychosis and Perinatal Psychiatry. She has worked in Psychiatry for over 10 years and is currently a Consultant in Women's Mental Health at Sidra Medicine in Qatar. She is member of the Royal College of Psychiatrists and she holds one year Intermediate Certificate from the University of Plymouth in Psychodynamic Psychotherapy. Prior to moving to Qatar, Dr Imam was an Honorary University Fellow at Plymouth University Peninsula Schools of Medicine and Dentistry. She was also a Trustee and Director of Plymouth Centre for Faiths and Cultural Diversity. Dr Imam is a member of the Public Education Engagement Board of the Royal College of Psychiatrists, and is a Partner in Psychiatry-UK LLP, the only NHS and CQC approved provider of Tele-psychiatry services in the UK. She is a faculty member of a United Nation's Population Fund (UNFPA) supported joint MANSAG and IDP Diaspora Support Group, Trauma Counselling Training Program in Nigeria. She is married to Ibrahim and they are blessed with four children.

Dr. Ike Anya is a Partner at EpiAFRIC and manages all engagements in Western Europe. He was until recently a Consultant in Public Health Medicine, and Deputy Director of Public Health with the UK National Health Service in London and an honorary lecturer in Public Health at Imperial College. A Fellow of the Faculty of Public Health, he has taught at the London School of Hygiene and Tropical Medicine (LSHTM), Imperial College, University College London, the University of the West of England and Bristol University. A lead partner for the General Medical Council, he is a member of the Black & Ethnic Minority Health and Epidemiology & Public Health Section Council's at the Royal Society of Medicine and member of the Advisory Committee for Medecins Du Monde's Project: London.

He is a co-founder of the Abuja Literary Society, the Nigerian Public Health Foundation, and the Nigeria Health Watch. He is a TED Global Fellow and cofounder of TEDxEuston.

Dr. Chikwe Ihekweazu is the Director General of the Nigeria Centre for Disease Control (NCDC), as well as Acting Director of the Regional Centre for Disease Control for West Africa. Dr Ihekweazu trained as an infectious disease epidemiologist and has over 20 years' experience working in senior public health and leadership positions at the South African National Institute for Communicable Diseases (NICD), the UK's Health Protection Agency, and Germany's Robert Koch Institute (RKI). Dr Ihekweazu has led several short-term engagements for WHO, mainly in response to major infectious disease outbreaks around the world. He is a graduate of the College of Medicine, University of Nigeria and has a Masters in Public Health (MPH) from the Heinrich-Heine University, Dusseldorf, Germany. In 2003, he was awarded a Fellowship for the European Programme for Intervention Epidemiology Training (EPIET), completing his Public Health specialisation in the UK. He is widely published in medical peer review journals and is on the board of the NGOs: Public Health Foundation of Nigeria, Health Watch Foundation, Society for Family Health (SFH), Education as a Vaccine (EVA). He is on the Africa Policy Advisory Board of ONE and a TED Fellow, and co-founder of TEDxEuston. In between public service, he was a Managing Partner of EpiAFRIC – a health consultancy firm in Abuja.

Dr. Olusola Aruna is a Fellow of the United Kingdom Faculty of Public Health (FPH). Dr Aruna qualified as a doctor in 1984 from the University of Ife, Nigeria. She gained her Masters in Public Health (MPH) with distinction from the University of Leeds in 1996 as a British Chevening Scholar, and holds a Diploma in Child Health (DCH) from the Royal College of Physicians and Surgeons of Glasgow. Dr Aruna was appointed Consultant in Public Health Medicine in the UK National Health Service (NHS) in 2007, and has worked on the identification, assessment, analysis and use of data and other information for decision-making, including the control of communicable diseases. Her work has also involved providing expert evidence-based advice to politicians, donor agencies and Board Executives at different levels. Dr. Aruna supported the design, implementation and evaluation of surveillance systems in Nigeria as a Senior Technical Advisor on Surveillance to the Nigeria Centre for Disease Control, under the USAID funded MEASURE Evaluation Project. She is currently the country lead for Public Health England's (PHE) International Health Regulations (IHR) Strengthening Programme in Nigeria.

FOREWORD

"OUR INCREASING SHARING OF OUR WORK ON A MORE GLOBAL LEVEL WILL BE ENHANCED, AS WE CONTINUE TO FOCUS ON A DIVERSITY OF PROJECTS TO ENSURE THE LONG-TERM SUSTAINABILITY OF THE ORGANIZATION."

It was gratifying to see Nigeria Health Watch continue on its trajectory of growth in 2019, fuelled by the passion, commitment and dedication of the team, led by the reconstituted and energized leadership team. The breadth and diversity of projects, events and programmes delivered was testimony to our continuing to build on our vision of becoming a strong, effective voice and platform for improving health and healthcare in Nigeria through a variety of media and partnerships. 2019 was again another incredibly busy year for all of us at Nigeria Health Watch.

2019 saw many of the relationships and networks we had acquired and nurtured prior to and since our inception effectively deployed to deliver work that was recognised through commendation and awards. We remain committed to an outcome focused agenda, working to improve health in Nigeria and beyond. We will continue to do this by providing accurate, credible and unbiased information tailored appropriately to our audiences; by promoting accountability through highlighting areas for improvement and sharing examples of good practice and most importantly by facilitating dialogue between key individuals and organisations to produce and implement necessary changes in policy and practice.

Growth in 2019 was not just in volume as evidenced by our increased social media numbers, but was also reflected in the number of influential individuals and organizations within the health sector who subscribed to our channels. At a time of debate about credible sources of information, our increasingly trusted position as an honest broker meant that we were looked to by many to provide accurate perspectives on a variety of issues.

We continued to build on the results of the baseline survey and other conversations that resulted in our first Strategic Development Plan on which we are making progress.

The team continues to grow and develop, earning individual and collective recognitions, and remaining a vibrant and energetic source of cheer and fun while delivering work to very high standards. We remain committed to challenging and supporting the team to grow even more, continuing to ensure that being a part of Nigeria Health Watch remains the badge of honour that it is increasingly seen as.

The challenges of the future will be to consolidate on our existing strengths and building on the areas where we and our partners have identified for growth. Our increasing sharing of our work on a more global level will be enhanced, as we continue to focus on a diversity of projects to ensure the long-term sustainability of the organization.

We remain grateful and proud of the hard work of the team, and appreciative of the support and compliments from all our partners- subscribers, followers, readers, funders and collaborators. We look forward to continuing to work with you all in the years ahead, urging you to continue to hold us accountable to our vision and values.

Particular thanks to the Bill & Melinda Gates Foundation, Christian Aid, MSD for Mothers, Resolve to Save Lives and all our other partners for their continued support and commitment to our cause.

We remain firmly committed to improving global health by making the health of every Nigerian a priority.

Ike Anya

DR. IKE ANYA

OVERVIEW

We are all very proud at Nigeria Health Watch of the immense growth in the organisation. In 2019, we were able to grow our portfolio of projects. We were also struck by how much our organisation was called on to support the communications efforts of many of our partners with the unique service offering our organisation. Our mission is to "ensure that Nigerians have the tools and knowledge to make informed decisions about their health". Our advocacy efforts for improved access to health services for Nigerians shone through in the projects that we carried out.

'NIGERIA HEALTH WATCH HAS COME TO BE KNOWN FOR OUR STELLAR EVENTS IN THE HEALTH SECTOR, CONVENING KEY STAKEHOLDERS ACROSS SECTORS TO ELEVATE THE DISCOURSE AROUND CRITICAL HEALTH ISSUES.'

Growing our advocacy efforts

In 2019, Nigeria Health Watch continued to strengthen its advocacy efforts, publishing 49 Thought Leadership and 49 Torchlight Series articles, sharing our perspective on the health sector in Nigeria. Our Torchlight Series articles highlighted stories of interventions and solutions that had led to positive change and health outcomes. Issues that the organisation focused on included, maternal, newborn & child health, immunisation, nutrition, sexual and reproductive health and rights, polio, primary health care, Universal Health Coverage and epidemic preparedness. Nigeria is on the path to being declared polio free and this will be a monumental feat for the country to achieve, especially given the tremendous efforts of the National Primary Health Care Development Agency (NPHCDA) and partners like the Bill & Melinda Foundation, Rotary International and others, kicking polio out of Nigeria.

Our audiences across our various social media channels and subscribers are at the heart of the work we do. We had 200,578 visitors to nigeriahealthwatch.com from 177 countries, 38,400 Twitter followers by the end of December 2019 and 54,361 Facebook followers. Our media presence saw the organisation take part in 26 radio shows, TV interviews with media mentions across all the Nigerian print titles.

Ensuring accountability in health programmes

We are proud of the projects we carried out in 2019. The significant inequalities in access to healthcare in Nigeria has become ever more evident in the outcomes of pregnant women when giving birth in Nigeria. We kicked off the "Catalysing Accountability of Maternal Deaths in Nigeria" as part of a consortium with EpiAFRIC and Africare, with support through funding from MSD for Mothers' $500 million initiative to help create a world where no woman dies giving life in March 2019. This programme was anchored on advocacy on social media, using the #GivingBirthInNigeria hashtag, stakeholder meetings and a community audit of maternal deaths over a 12-month period in six geo-political zones in Nigeria, gaining insights into why pregnant women were dying while giving birth in communities. The surveillance programme will culminate in a report "Why are Women Dying While Giving Birth Birth in Nigeria", to be completed in 2020. The Global Policy and Advocacy project supported by the Bill & Melinda Gates Foundation increased knowledge, awareness and engagement across a range of health issues. The Prevent Epidemics project supported by Resolve to Save Lives helped to garner understanding and support among Nigeria's policymakers for epidemic preparedness funding with strong components of strengthening media narratives for sustained funding for epidemics preparedness. The Closing the Gap to Sustainable Health Access project supported by Christian Aid Nigeria continued to provide knowledge while increasing demand for equitable funding models for health services, especially for the most vulnerable groups in hardest-to-reach communities.

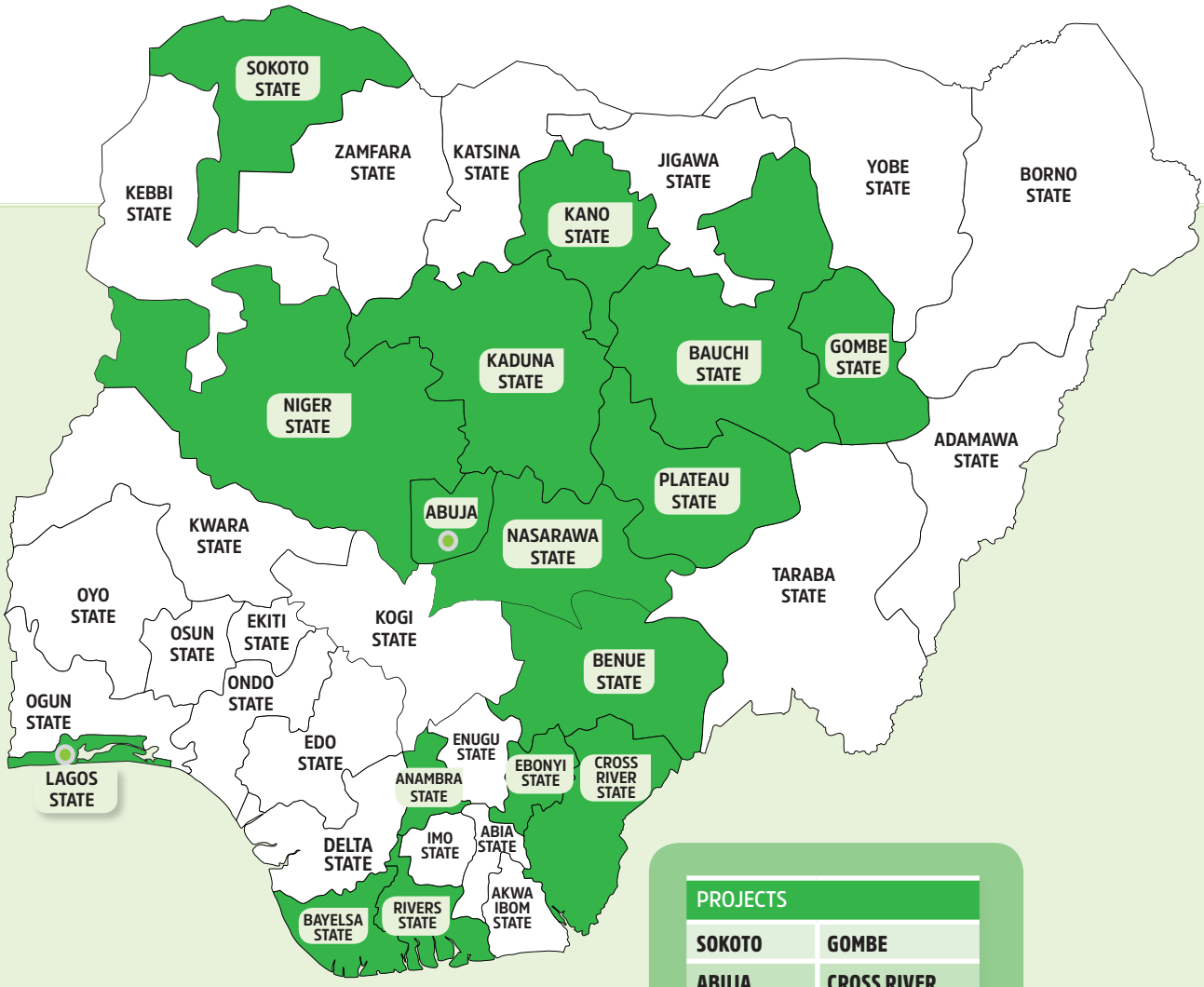
Nigeria Health Watch has come to be known for our stellar events in the health sector, convening key stakeholders across sectors to elevate the discourse around critical health issues. This continues to be important to us because our events create the needed platform for Nigerians to set their own course for health, haven been provided in-depth information to make informed decisions. In 2019, our health events engaged audiences around themes such as: the cost of epidemics, the role of the media in preventing epidemics, public private partnerships for health, youth engagement in driving developmental policy changes, sexual and reproductive health research, health systems strengthening in fragile settings, and universal health coverage. The multi-stakeholder meetings across the 6 geo-political zones helped to nudge states to strengthen mechanisms for better maternal healthcare.

Our flagship event, the Future of Health Conference 2019 focused on the all-important subject of quality in healthcare, exploring the need for greater efforts to improve quality in healthcare, in order to increase confidence in the healthcare sector, with the use of quality measures to access service delivery. A second day event delved even deeper and looked at advancing quality maternal healthcare in Nigeria.

In the coming year, we are excited about harnessing our convening power to bring together more critical stakeholders in health and beyond the health sector, to see that Nigerians have the information to choose effective health services and demand for quality improvements in healthcare.

With gratitude to our partners, subscribers and followers, we are honoured to present our Annual Report 2019. We look forward to continued positive engagement in 2020.

PROJECT AND CONFERENCE MAP



PROJECTS	
SOKOTO	GOMBE
ABUJA	CROSS RIVER
LAGOS	NASARAWA
NIGER	BAUCHI
KADUNA	EBONYI
ANAMBRA	PLATEAU
BAUCHI	KANO
BENUE	RIVERS
GOMBE	
CONFERENCES	
ABUJA	
LAGOS	

Map of Nigeria showing Projects, Conferences and Events by State

PROJECTS

Global Policy Advocacy Project

Increasing awareness, knowledge and engagement among Nigerians on health issues

The CHAIN Project

Closing the Gap to Sustainable Health Access in Nigeria

Prevent Epidemics Project

Preventing epidemics through public awareness and advocacy for sustained funding to improve epidemic preparedness in Nigeria

Catalysing Accountability for Maternal Deaths in Nigeria

#GivingBirthInNigeria

GLOBAL POLICY ADVOCACY PROJECT

The Global Policy Advocacy project funded by the Bill & Melinda Gates Foundation focuses its advocacy efforts on raising awareness, knowledge, and engagement among Nigerians on health issues in Nigeria with emphasis on primary health care, maternal, newborn and child health (MNCH), polio, routine immunisation, nutrition and reproductive health and family planning. The project was carried out both at federal and state level, with a focus in Kano, Kaduna, Lagos, Borno State and the Federal Capital Territory (FCT).

OBJECTIVES

- To increase engagement around health issues in Nigeria, primarily on the above focus areas.
- To increase the use of evidence and policy analysis by decision makers in the Nigerian public health sector when it comes to policy making and implementation. policy making and implementation.

OUTPUTS

- Convened 4 health events (policy forums and policy dialogues)
- Published 61 articles on focus areas
- 26 appearances on radio stations across Nigeria
- 1 Focus Group Discussion
- 6 appearances on TV stations advocating on health issues
- Produced 56 videos
- Produced audio-visuals and infographics

OUTCOMES

Increased engagement, knowledge, awareness of key focus health issues across multiple social media platforms

Wrote an in-depth analysis on the primary healthcare system in Nigeria and produced a detailed report focusing on primary health care service provision in Kano State as a case study.

Provided at least one relevant training opportunity for each staff member (linked to job focus area)

ACCOMPLISHMENTS

Initiated new partnerships with international media such *Bhekisisa and El Pais* (*Planeta Futuro*)

Developed two major strategic partnerships with Society for Family Health and Connected Development to increase advocacy efforts

Recognised for the second year in a row for online media excellence by Nigerian Healthcare Excellence Awards (NHEA).

Generated revenue by providing communications support to several organisations (Aisha Buhari Foundation, EU-SIGN, Federal Ministry of Health, National Assembly, Jigawa State Government, Nigeria Medical Association, Stop TB Partnership, Shell Nigeria, dRPC etc.)

Nigeria Health Watch was one of the partners at the Presidential launch of the Basic Health Care Provision Fund – January 2019

Grew Twitter followers by 26% and Facebook followers by 13%

Organised a health policy dialogue in collaboration with the All Party Parliamentary Group at the House of Lords, London, United Kingdom

Produced a report on service delivery at Primary Healthcare centres in Kano State

Nigeria Health Watch provided social media and communications support to the Society for Family Health (SFH) at their Gombe State MNCH Dissemination Project in Gombe and Abuja, in August and September 2019.

The project intervention targeted the proximate causes of maternal and neonatal mortality in Gombe State namely; low uptake of MNCH services, poor provider attitude and skills, transportation barrier and unavailability of essential lifesaving drugs and poor MNCH behaviors and practices. Themed "Improving MNCH Outcomes through Effective Collaboration, Partnership and Government Ownership", the dissemination showcased the potentials of the project's implementation model in accelerating universal health coverage and advocate for its adoption and replication in other Nigerian states.

The First Lady of Nigeria, Dr. Mrs Aisha Muhammadu Buhari and the Wife of the Vice President, Mrs Oludolapo Osinbajo and other stakeholders at the Aisha Buhari Foundation event themed, 'Increasing local production of Ready-To-Use Therapeutic Food (RUTF) for the treatment of Severe Acute Malnutrition: Private Sector Engagement' where Nigeria Health Watch provided communication and social media support.

THE CHAIN PROJECT

The Closing the Gap to Sustainable Health Access in Nigeria (CHAIN) project is funded by Christian Aid UK, Nigeria Office and Implemented by Nigeria Health Watch. The goal of the project is to help Nigeria achieve Universal Health Coverage through sustainable health insurance models that prevent catastrophic expenditure for informal and vulnerable groups.

The project has been implemented in Benue state and at the federal level using informed advocacy for better health and health insurance systems since 2017.

GOAL

To improve access to health care of vulnerable people in project communities.

OBJECTIVES AND STRATEGIC APPROACH

- To reduce out of pocket payment for health care in target communities
- To improve the uptake of health care services in target communities
- To improve utilisation of health insurance in project communities

  By:

  - Creating literacy for health insurance
  - Identifying and creating linkages between CBHIS and target population
  - Encouraging uptake of health insurance in target locations

OUTPUTS

Delivered 3 Direct Community Engagement Drives for UHC through health insurance

Convened 5 policy dialogues and town hall meetings

Conducted a baseline survey of Community Based Health Insurance in Benue State

Conducted 2 cohorts of training for Community Based Monitors

Delivered 3 Technical Support events to State Agencies and Community based agencies

OUTCOMES

Community ownership and drive for UHC through health insurance increased with the activities of the commissioned Community based monitors

Increased literacy and uptake of health insurance for project communities

Created linkages between CBHIS and their target population

ACCOMPLISHMENTS

Created previously non-existent connection between state and CBHIS

With different policy dialogue avenues, strengthened their relationship.

Demand from informal groups led to plan for concurrent mass enrolment for non-civil servants.

Strengthened ties with funder. Christian Aid's entire health strategy has shifted from commodities to achieving UHC through health insurance.

Strong community presence, increasing interest and literacy for UHC through Health insurance. Consistent radio and TV advocacy.

For the first time ever in the state, created a forum for representatives from all state parastatals (civil servants) and the state health insurance agency to dialogue.

PREVENT EPIDEMICS PROJECT

The Prevent Epidemics Project continues to advocate for financial support for disease surveillance and preparedness. Its objectives are to create and increase public awareness and support for epidemic prevention, and understanding and support among policymakers for dedicated epidemic preparedness funding. The project leverages on social and traditional media (radio, print and TV) using the hash tag *#PreventEpidemicsNaija* to grow engagements with the public and policymakers.

OBJECTIVES

- To build public awareness and support for epidemic prevention
- To build understanding and support among policymakers for dedicated epidemic preparedness funding

OUTPUTS

- Delivered a 2-day health journalism masterclass with 20 journalists, editors and social media influencers.
- Delivered a Health Watch Forum titled, 'Prevent Epidemics: Immunise'.
- Convened an Editor's Roundtable on the role of the media in building public awareness and support for epidemic preparedness and funding.
- Sponsored a 3-month Journalism fellowship and mentorship program for journalists to build the capacity of selected journalists to develop in-depth solutions journalism projects on Epidemic Preparedness and the need for sustained funding.
- Delivered a Health Policy Dialogue titled, 'The Cost of Epidemics'. Discussed why it is essential for Nigeria to prepare for epidemics.
- Hosted a media roundtable with Dr. Tom Frieden, CEO of Resolve To Save Lives, where the impact of infectious diseases and how the media can leverage on their influence to promote the call for epidemic preparedness was discussed.
- Partnered with the Legislative Network for Universal Health Coverage to deliver the Strategic Retreat of Principal Officers of the 5 Health Committees of the 9th National Assembly.
- Partnered with the Legislative Network for Universal Health Coverage to deliver the 3rd UHC Summit, tagged, 'Efficiency and Effectiveness in the Nigerian Health Sector: The Role of Legislators in a Decentralised Democracy'.

OUTCOMES

Built understanding and support among policymakers for sustained epidemic preparedness funding.

Improved knowledge on the need for sustained funding for epidemics preparedness.

Increased capacity of journalists to identify and accurately report on key issues to promote awareness and national support for epidemics preparedness.

Improved accuracy, content and frequency of stories outlining the importance of sustained funding for epidemics preparedness, leading to improved public awareness and support for epidemic prevention.

ACCOMPLISHMENTS

- Greater public awareness and support for epidemic prevention
- Successful and effective media engagement that improved volume and quality of reportage outlining the importance of sustained funding for epidemics preparedness, leading to improved public awareness and support for epidemic prevention.
- Engagement with different sectors effectively improved understanding on infectious disease as more than a health concern.
- Increased knowledge of NCDC as Nigeria's public health institute and their work in preventing, detecting, and controlling diseases of public health importance in Nigeria.
- Successfully engaged with the legislature about the need for effective budgeting for epidemic preparedness and their role in advocating for more funding for epidemic preparedness nationally and in the states.

CATALYSING ACCOUNTABILITY FOR MATERNAL DEATHS IN NIGERIA

In January 2019, Africare, EpiAFRIC and Nigeria Health formed a consortium to implement the Giving Birth in Nigeria project. Supported and funded by Merck through MSD for Mothers, this $500m initiative is to help create a world where no woman dies giving life. Merck for Mothers is known as MSD for Mothers outside the United States and Canada. MSD for Mothers is an initiative of Merck & Co., Inc., Kenilworth, N.J., U.S.A.

The aim of this project is to accelerate accountability for maternal deaths that occur in communities across Nigeria. Nigeria Health Watch, is charged with raising awareness of Nigeria's MMR burden, increase engagement among social media users on maternal health stories and establishing state-level dialogue among relevant stakeholders in maternal care from the community and policy influencer and regulation levels.

OBJECTIVES

- To develop and implement an innovative community reporting mechanism that captures quantitative and qualitative data and stories of maternal deaths and directs them to existing MPDSR platforms
- To raise public awareness of Nigeria's maternal mortality burden
- To promote accountability by government and responsibility by the people through communication, collaboration and use of technology
- To publish a 'Why Are Women Dying?' report

OUTPUTS

- Nigeria Health Watch implemented an advocacy campaign for better maternal care by campaigning for increased sharing of stories on #GivingBirthInNigeria
- Nigeria Health Watch facilitated multi-stakeholder dialogues across 4 out of 6 target states and campaigned for women and men and to share their stories of #GivingBirthInNigeria on radio across the country
- Nigeria Health Watch has a dedicated #GivingBirthInNigeria web page where it collates stories of giving birth in Nigeria shared by individuals from across social media including Twitter, Facebook and Instagram. Data and information gathered from this page will be used alongside our other dedicated sources to produce a final "Why are women Dying" report.
- The project was implemented in the six geo-political zones (NE-Bauchi State, NW-Kebbi State, NC-Niger State, SE- Ebonyi State, SW-Lagos State, SS- Bayelsa State) and the Federal Capital Territory

OUTCOMES

On Thursday June 27 2019, Nigeria Health Watch facilitated its first multi-stakeholder dialogue in Minna, Niger State. The meeting had in attendance Ameerah Salatu A. Mohammed, President of The Federation of Muslim Women's Associations in Nigeria (FOMWAN) Niger State, Dr. Magaji Aminu, Chairman, Niger State Steering Committee on Maternal and Prenatal Death Surveillance and Response (MPDSR) and other stakeholders from state-level agencies, community groups, professional associations and religious groups.

On Thursday September 5 2019, Nigeria Health Watch facilitated its second multi-stakeholder dialogue in Abakaliki, Ebonyi State. The meeting had in attendance Bina Marcillina, Director of Women Affairs, Ebonyi State Ministry of Women, Ugo Ndukwe Uduma, Executive Director of Safe Motherhood Ladies Association (SMLAS) and other representatives of the State Ministry of Health, Local Government Councils, Professional Associations, Community Groups, religious and traditional leaders.

On Tuesday November 5 2019, Nigeria Health Watch facilitated its third multi-stakeholder dialogue in Bauchi, Bauchi State. The meeting had in attendance the representative of the First Lady, Bauchi State, Hajiya Bala Mohammed, religious leaders and traditional rulers alongside community influencers from our target communities.

On Tuesday, December 3 2019, Nigeria Health Watch facilitated its fourth multi-stakeholder dialogue in Yenagoa, Bayelsa State. Representatives from the Bayelsa State Ministry of Health, Civil Society Groups, Professional Associations, Groups and Community Leaders were on ground to dialogue on ways to mitigate the menace of maternal mortality.

Nigeria Health Watch has gone on radio campaigns all through 2019 to raise awareness for better maternal care in Nigeria, putting into consideration the socio-cultural and economic influences in maternal care delivery in these states.

Radio Shows we have been on:

- Prestige FM, Niger State
- Ebonyi Broadcasting Corporation, Ebonyi State
- Globe FM (FRCN), Bauchi State
- Radio Lagos, Lagos State

12 monthly #GivingBirthInNigeria blog stories were published in 2019 to raise awareness of the challenges we face in maternal healthcare in Nigeria and also highlight solutions being implemented in various states across the country including our target states.

ACCOMPLISHMENTS

Government commitment to better maternal healthcare service delivery in each state and policy statements to back these commitments were recorded in the states during the multi-stakeholder visits

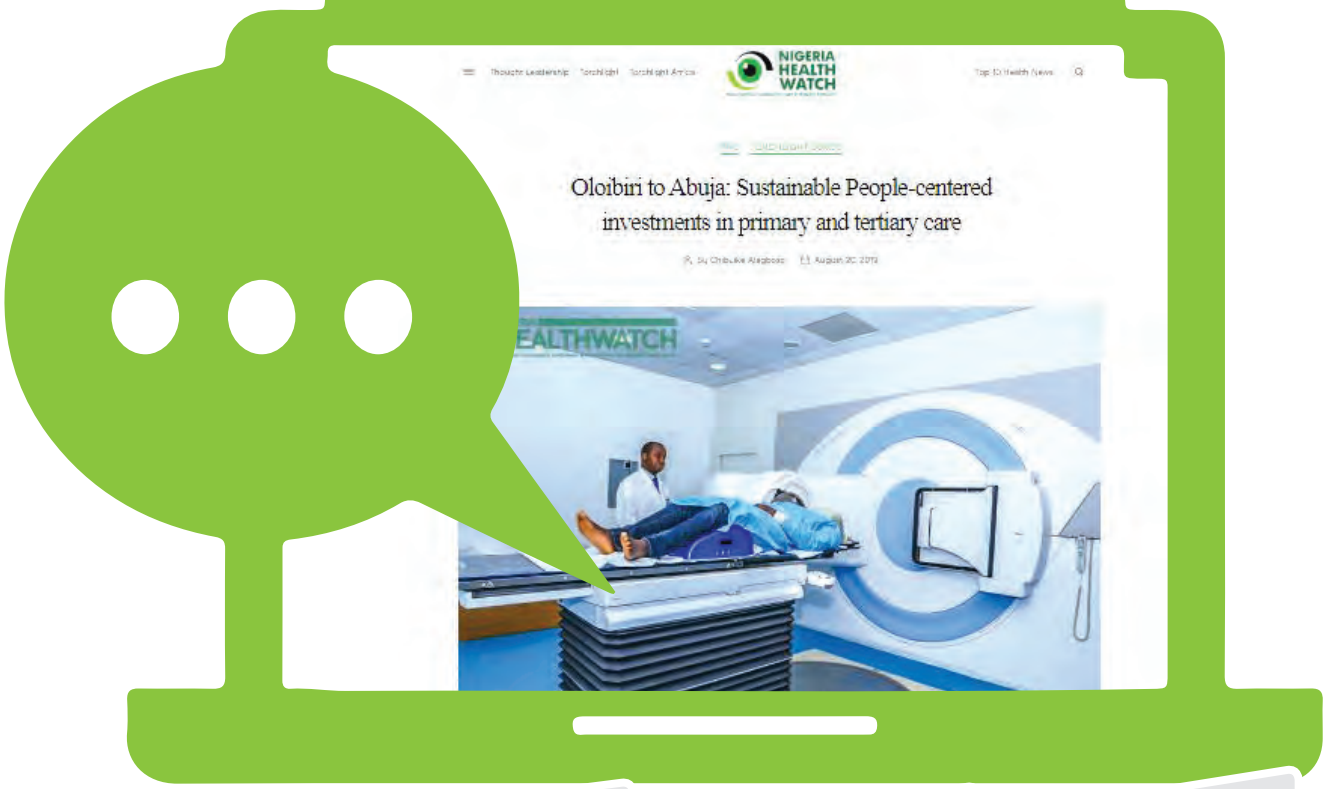
Increased media advocacy online and offline on social media, radio, print media and TV has increased the levels of knowledge on the incidence of maternal health outcomes and maternal mortality and has raised a new crop of advocates for better maternal health action and policy

Increased awareness on the role of religious and cultural institutions have been recorded through advocacy, community outreaches and media appearances

ONLINE PRESENCE

MOST VIEWED BLOG PUBLISHED IN 2019

Oloibiri To Abuja: Sustainable People-Centered Investments In Primary And Tertiary Care '

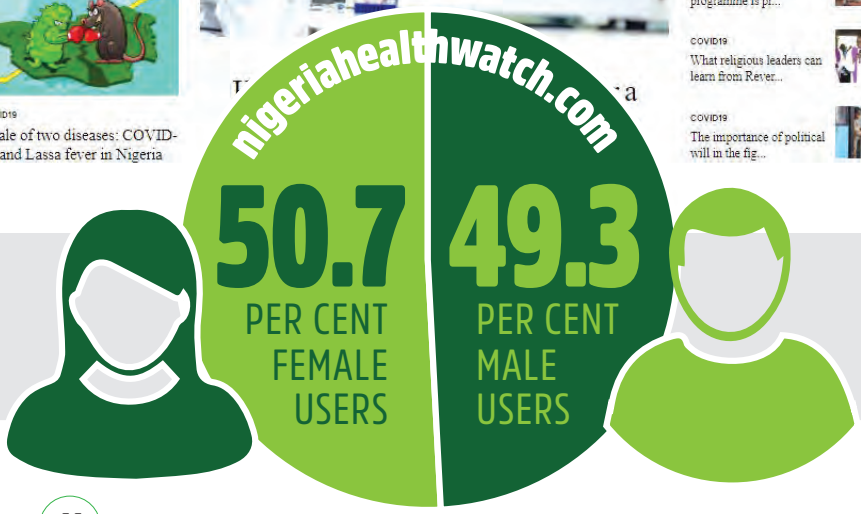


TOP 3 REFERRERS TO WEBSITE

SEARCH ENGINES » TWITTER » FACEBOOK

223 posts on nigeriahealthwatch.com in 2019

Website Visitors



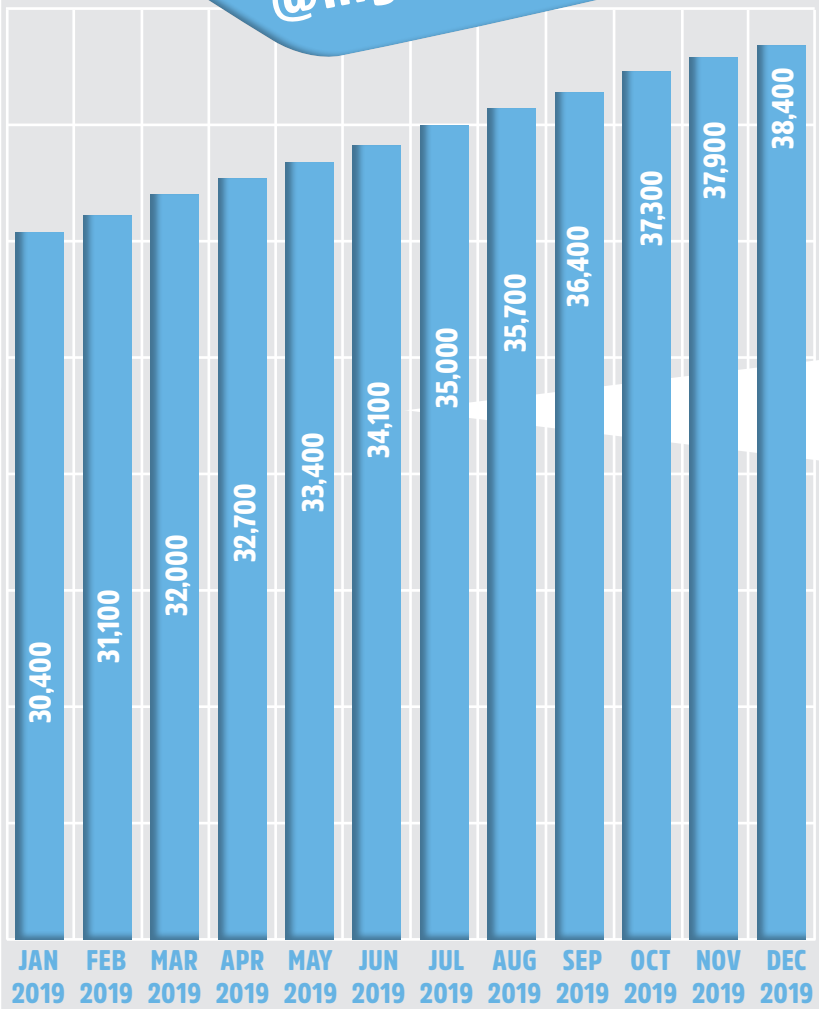
Twitter Followers in 2019

38,400

TWITTER FOLLOWERS AT THE END OF 2019 FOR **@nighealthwatch**

7,300 +

New Followers



34,807

Retweets

50,280

Likes

@

18,850

Mentions

Facebook Followers in 2019

6,151
facebook NEW LIKES
AT THE END OF 2019

54,361
facebook Likes
AT THE END OF 2019 FOR
www.facebook.com/NigeriaHealthWatch

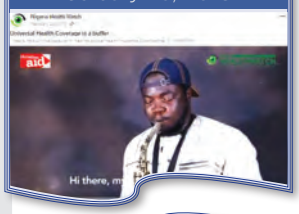
6,387
facebook NEW FOLLOWERS
AT THE END OF 2019

54,597
FOLLOWERS
AT THE END OF 2019 FOR
www.facebook.com/NigeriaHealthWatch

TOP 3 facebook VIDEOS PUBLISHED IN 2019

12,300 views

Universal Health Coverage is a buffer
February 28, 2019



9,200 views

Female Condoms: The contraceptive no one is talking about
February 14, 2019

8,600 views

Dr. Mary-Ann Etiebet at the Future of Health Conference
November 20, 2019

Followers on other Platforms

3,125
Instagram
FOLLOWERS
IN 2019

2,252
LinkedIn
FOLLOWERS
AT THE END OF 2019

17,917
MailChimp
SUBSCRIBERS
AT THE END OF 2019

OVER
26
RADIO
SHOWS
IN 2019 ON
SOUNDCLOUD

Media Mentions and References

HASHTAG WITH THE MOST CONSISTENT INTERACTION IN 2019

#PreventEpidemicsNaija

NEW CAMPAIGNS IN 2019

#GivingBirthInNigeria
#QualityHealthNaija
#PHC4AllNaija

PLATFORM WITH THE LARGEST FOLLOWING IN 2019

Facebook

PLATFORMS WITH THE MOST CONSISTENT FEEDBACK IN 2019

Twitter
Facebook

TV APPEARANCES

RADIO APPEARANCES

Editorial Publications

JOBS
31

PRESS RELEASES
39

TOP 10 HEALTH NEWS
52

TORCHLIGHT SERIES
49

THOUGHT LEADERSHIP BLOGS
49

TOP 3 YouTube VIDEOS PUBLISHED IN 2019

917 views

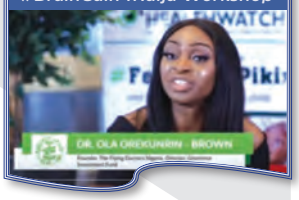
Exclusive Interview with Dr. Sani Aliyu - Official trailer

778 views

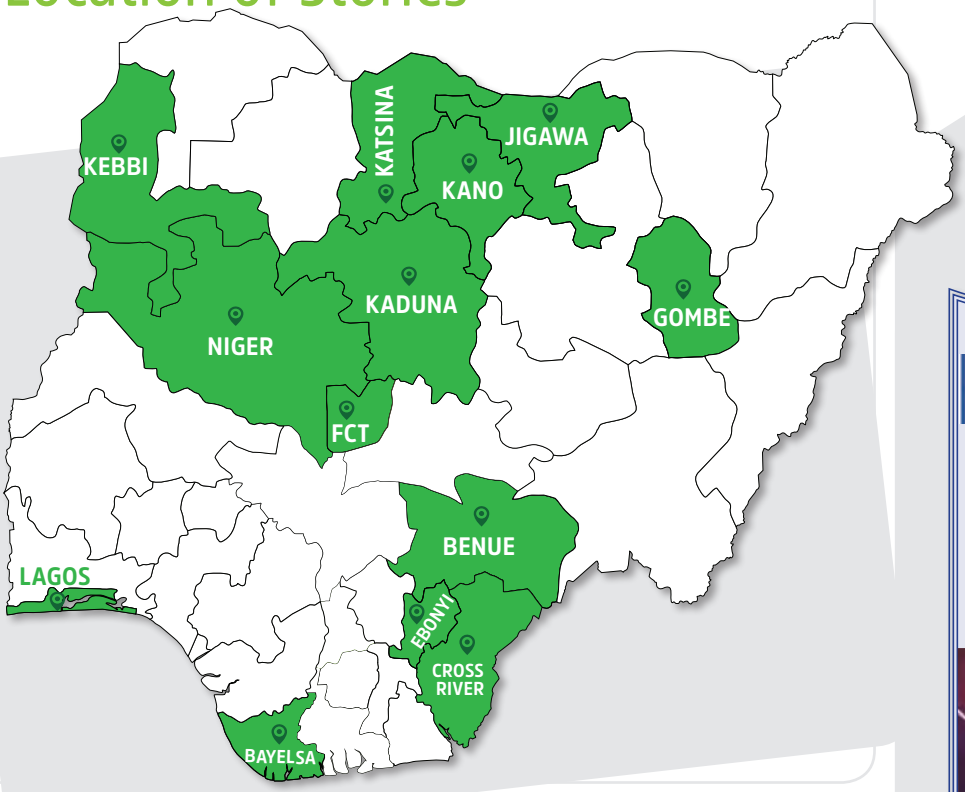
Female Condoms: The contraceptive no one is talking about

777 views

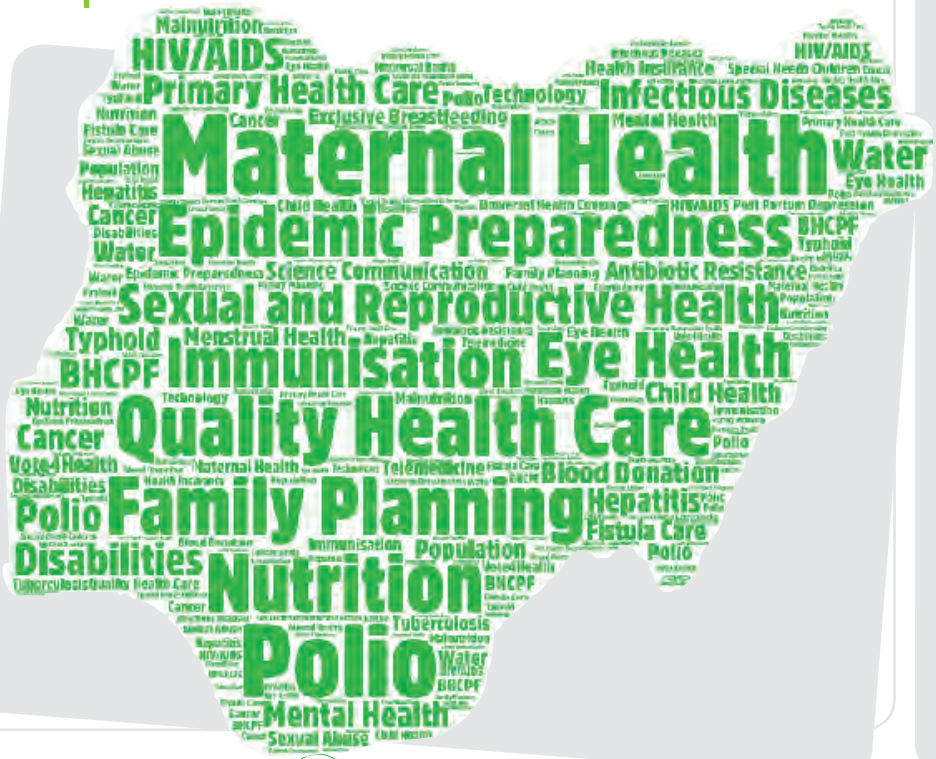
Funding your health startup | Ola Brown | #BrainGain4Naija Workshop



Location of Stories



Topical Issues Covered



VIDEOS BY NUMBERS

facebook

40 videos

YouTube

89 videos

EVENTS

MARCH 14-15, 2019
JOURNALISM MASTERCLASS, ABUJA
Health Journalism Masterclass
30 ATTENDEES

APRIL 11, 2019
POLICY DIALOGUE, LAGOS
Public-Private Partnership
205 ATTENDEES

APRIL 24, 2019
HEALTH WATCH FORUM, ABUJA
Prevent Epidemics: Immunise
125 ATTENDEES

MAY 9, 2019
POLICY DIALOGUE, ABUJA
Media Round Table
25 ATTENDEES

MAY 30, 2019
POLICY DIALOGUE, ABUJA
The Cost of Epidemics
35 ATTENDEES

JUNE 20, 2019
FOCUS GROUP DISCUSSION, MOGADISHU BARRACKS
Sexual and Reproductive Health Research
26 ATTENDEES

JUNE 25, 2019
FOCUS GROUP DISCUSSION, KUJE
Sexual and Reproductive Health Research
26 ATTENDEES

JUNE 27, 2019
MULTI STAKEHOLDER MEETING, MINNA
Giving Birth in Nigeria
53 ATTENDEES

AUGUST 7, 2019
POLICY DIALOGUE, ABUJA
Dr. Tom Frieden Visits
40 ATTENDEES

SEPTEMBER 5, 2019
MULTI STAKEHOLDER MEETING, ABAKALIKI
Giving Birth in Nigeria
60 ATTENDEES

SEPTEMBER 11, 2019
POLICY DIALOGUE, ABUJA
No Too Young to Be Heard
60 ATTENDEES

SEPTEMBER 13, 2019
POLICY DIALOGUE, ABUJA
Do No Harm
120 ATTENDEES

OCTOBER 17, 2019
FUTURE OF HEALTH CONFERENCE, DAY 1
Time to Focus on Quality in Healthcare: Improving Outcomes
362 ATTENDEES

OCTOBER 18, 2019
FUTURE OF HEALTH CONFERENCE, DAY 2
Advancing Quality Maternal Healthcare in Nigeria: What are the Missing Links?
114 ATTENDEES

NOVEMBER 5, 2019
MULTI STAKEHOLDER MEETING, BAUCHI
Giving Birth in Nigeria
57 ATTENDEES

DECEMBER 10, 2019
MULTI STAKEHOLDER MEETING, YENAGOA
Giving Birth in Nigeria
44 ATTENDEES

DECEMBER 12, 2019
TOWN HALL MEETING, JIWA
UHC Day Celebration
113 ATTENDEES

MARCH 14-15, 2019

JOURNALISM MASTERCLASS, ABUJA

Health Journalism Masterclass

30
ATTENDEES

In March, Nigeria Health Watch organized a two-day health journalism masterclass for health journalists, editors and social media influencers. The masterclass was designed for journalists who report on health and those interested in health reportage to equip them with the professional and technical knowledge to accurately report on and increase reportage around epidemic preparedness, the need for sustained funding and the connector between environmental health practices and disease outbreaks. Facilitators trained the participants on the following topics:

- Understanding the Connection Between Environmental Health Practices and the Prevention of Disease Outbreaks.
- Nigeria's National Action Plan for Health Security From IHR to JEE: How prepared is Nigeria?
- Nigeria's Epidemic Preparedness Budget
- Developing and Pitching Story Ideas on Epidemic Preparedness, etc.

At the end of the masterclass, a call for applications into the first #PreventEpidemicsNaija fellowship was made. The goal of the fellowship was to generate support for robust epidemic preparedness by building the capacity of selected journalists to develop in-depth solutions journalism projects on Epidemics Preparedness and the need for sustained funding.

APRIL 11, 2019

POLICY DIALOGUE, LAGOS

Public-Private Partnership

205
ATTENDEES

The policy dialogue highlighted the importance of a multi-stakeholder approach in developing innovative models to maximise efficiency and access to quality health care.

The health policy dialogue titiled ***'Disrupting Health Care: PPPs as a Model Adoption for Health System Strengthening'*** demonstrated how public-private partnerships (PPPs) could be used as a model to invest in healthcare infrastructure, and therefore enable governments to allocate scarce capital resources more effectively, improve health outcomes, and foster economic growth by reducing medical tourism.

The aim of the policy dialogue was to have a wider discussion, gather a broader view of private sector engagement in healthcare and highlight ensuing benefits to the concerned entities.

The breakfast-styled meeting brought together people that were seeking innovative approaches to engaging with the health sector and those with experience having engaged in PPP arrangements in the healthcare sector.

Nigeria Health Watch worked with PharmAccess Foundation to identify stakeholders from states that had entered into PPP arrangements. Speakers and panelists came from existing financial institutions that had partnered with PharmAccess Foundation and the Medical Credit Fund; Bank of Industry (BoI), GroFin and Sterling Bank.

Stakeholders were drawn from the state and federal healthcare institutions where PharmAccess Foundation had partnered in PPPs to improve healthcare delivery, especially in states that needed to adopt different approaches following previous experiences. Delegates included individuals working in clinics, hospitals, academic institutions, government ministries, departments, and agencies, academic institutions and NGOs in Nigeria.

Other speakers and delegates included CMDs and Directors from secondary and tertiary healthcare facilities, PharmAccess Foundation partners, State Commissioners for Health, Federal and State Directors of the office of Public-Private-Partnership.

The forum which took place in Lagos featured two moderated panel discussions with the talks curated using audio-visual support.

Partners brought their success stories and critical lessons learnt and shared same for better insight. The policy dialogue highlighted the importance of a multi-stakeholder approach in developing innovative models to maximise efficiency and access to quality health care.

Opportunities available in equipment financing and leasing were discussed. Illustrations on how PPP approaches could be integrated into current healthcare delivery in Nigeria were made. Specific challenges were identified, successful existing models brought to the fore, possibilities of scaling-up such models outlined, and stiff and unwarranted policies that were detrimental to healthcare were highlighted and solutions proffered.

In summary, ideas were shared and people were inspired to adopt PPPs as a possible model to strengthen health systems in Nigeria.

APRIL 24, 2019

HEALTH WATCH FORUM, ABUJA

Prevent Epidemics: Immunise

125
ATTENDEES

Immunisation is key to preventing epidemics across the world. According to UNICEF, immunisation is one of the most cost-effective public health interventions to date, averting an estimated 2 to 3 million deaths every year.

The **'Prevent Epidemics: Immunise'** forum was about how immunisation could help prevent disease outbreaks in Nigeria. The forum also addressed challenges facing the distribution of vaccines across the country and how overcoming these challenges could fortify the nation from diseases.

The success stories, incredible innovations and fantastic collaborations that were taking place in the immunisation space were brought to light. Deliberations highlighted the challenges facing the distribution of vaccines across the country. Solutions were proffered on how to overcome the challenges to better prepare the country, build a healthy nation and set Nigeria on the path to reclaim her national pride.

The underlying thread was how immunisation could be funded in Nigeria since health was considered a key part of the country's economy. Speakers and panelists shared their passion, expertise, and insights on this important conversation. The gathering of health advocates and change-makers probed, asked questions, and put forward ideas which could boost funding for immunisation.

Health insurance schemes, domestic resource mobilisation, federal and state governments making provisions for vaccines in their budgets, ploughing back recovered stolen funds, lawmakers – especially senators – forfeiting some percentage of their allowances, individuals adopting PHCs, source deductions from state allocations for vaccines, strategic corporate social responsibility (CSR) drives, and adoption of best practices were put forward as possible ways of boosting funding for immunisation at the forum.

Deliberations at the forum addressed challenges facing the distribution of vaccines across the country and how overcoming these challenges can fortify the nation from diseases.

MAY 9, 2019

POLICY DIALOGUE, ABUJA

Media Round Table

25
ATTENDEES

In May, a media roundtable was organized with editors of notable media houses or their representatives, to help build public awareness and support for epidemic prevention and funding. Discussion was focused on; the role of the media in building public awareness and support for epidemic prevention and funding; pushing the agenda of epidemic preparedness and funding as a major financial and economic issue. At the event, were representatives of notable media houses like, NTA, Premium Times Centre for Investigative Journalism, Leadership Newspaper, Africa Independent Television, Arise News TV, Wazobia FM, etc.

They discussed media story focus for 2019, their needs and challenges. The also discussed ways to improve reportage for epidemic preparedness. Some of which are:

- Report on state level budgeting for health (budgeting, release funds/implement)
- Drive synergy between medical practitioners and media houses: Media can network and decide on a day/week to publish issues around epidemic preparedness to get the issues trending.
- Opinion pieces and and sponsored media shows can be an avenue for media to increase awareness for funding for epidemic preparedness.
- Actively drive conversation in the media by engaging with health practitioners, health advocates, government officials, etc.

Participants at the round-table discussed the role of the media in building public awareness and support for epidemic prevention and funding.

MAY 30, 2019

POLICY DIALOGUE, ABUJA

The Cost of Epidemics

35
ATTENDEES

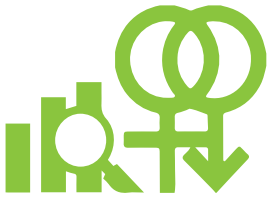
'The Cost of Epidemics' health policy dialogue brought together key stakeholders to discuss why it was essential for Nigeria to prepare for epidemics. The stakeholders from education, banking, healthcare, media, private and public sectors shared their views on the need to budget for epidemics and put forward domestic resource mobilisation channels for epidemic preparedness. The economics of epidemic response was a highpoint of the discourse.

The progress made over the last three years by the Nigeria Centre for Disease Control (NCDC) and its collaborating partners – Rapid Response Teams (RRTs), Public Health Emergency Operational Centres (PHEOCs), Port Health, network of collaborating Public Health Laboratory Services, etc. – in the response to emergencies, was highlighted. Communication gaps with the public that needed strengthening despite the best efforts of the public health agencies were also identified.

The key message at the dialogue, was for every one to be concerned about infectious disease outbreaks, as it was really everybody's business.

The economics of epidemic response was a highpoint of the policy dialogue

JUNE 20, 2019



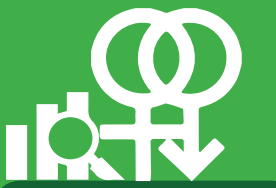
FOCUS GROUP DISCUSSION MOGADISHU BARRACKS

Sexual and Reproductive Health Research

26
ATTENDEES

When young people are provided safe and non-judgmental environments, they are comfortable to share their reproductive health experiences and challenges

JUNE 25, 2019



FOCUS GROUP DISCUSSION KUJE

Sexual and Reproductive Health Research

26
ATTENDEES

Nigeria Health Watch in collaboration with Education As A Vaccine (EVA) recently conducted two Focus Group Discussions (FGDs) in Nyanya and Kuje areas of the Federal Capital Territory, amongst adolescents. The objectives of the FGDs were to:

- gauge the perceptions of youths about sexual and reproductive health in general
- identify the key issues of youths in sexual and reproductive health rights
- identify challenges that youths face in accessing sexual health services in Nigeria
- make appropriate recommendations on sexual and reproductive health rights in Nigeria

The FGDs were conducted among in-school and out-of-school adolescents aged 15–25 years in Nyanya and Kuje, FCT. The Nyanya group consisted of 7 females and 6 males while the Kuje group consisted of 6 females and 7 males. The discussion explored adolescents' sexual and reproductive health knowledge and choices, the types of choices they make and the factors that influence those choices.

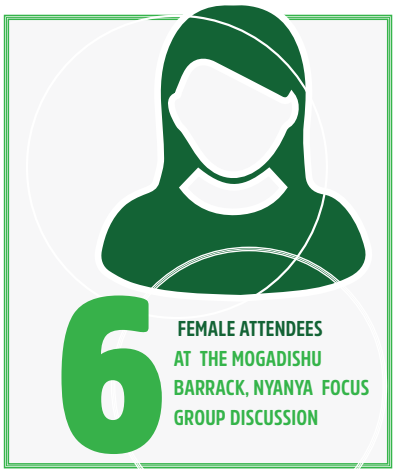
Nigerian adolescents shouldn't be judged when they visit health facilities to seek sexual health advice, counselling and services

From the FGD, it was quite clear that our adolescents especially girls do not receive adequate sex education. Girls should be taught about sex as much as boys are taught. Most importantly, we need to realise that sex education is beyond the act of sexual intercourse, but helping young people understand their bodies beyond the academic approach in school curricula, what to expect as they grow, how to handle physical changes and how they can stay safe and healthy.

While misinformation was common among them, the adolescents were also knowledgeable about approved emergency contraception pills like Postinor II. They also knew that condoms can prevent unintended pregnancies and STIs.

What do Nigerian adolescents really want? They want a judgement-free zone! They do not want to be judged when they ask questions about sex in class. They do not want to be judged when they visit health facilities to seek sexual health advice, counselling and services. Nigerian adolescents want to walk into any pharmacy or health facility to buy contraceptives without being called prostitutes, gossiped about or labelled promiscuous. They want contraceptive dispensers in public places including schools, hotels and restaurants.

The evidence is there to guide anyone who works with or is interested in working with young people on matters pertaining to their sexual and reproductive health. It is important that we all—parents, school proprietors, religious leaders, policymakers, and officials tasked with the responsibility of developing youth policies and education curricula like the Family Life and HIV Education curriculum used across the country—understand that young people must be empowered to protect their reproductive futures. That is the only way we can reap the potential they possess.



JUNE 27, 2019

MULTI STAKEHOLDER MEETING, MINNA

Giving Birth in Nigeria

53
ATTENDEES

On Thursday June 27 2019, Nigeria Health Watch facilitated its first multi-stakeholder dialogue in Minna, Niger State. The meeting had in attendance Ameerah Salatu A. Mohammed, President of The Federation of Muslim Women's Associations in Nigeria (FOMWAN) Niger State, Dr. Magaji Aminu, Chairman, Niger State Steering Committee on Maternal and Prenatal Death Surveillance and Response (MPDSR) and other stakeholders from state-level agencies, community groups, professional associations and religious groups. The meeting started with a playback of the footage got from the Niger State 'Giving Birth in Nigeria' baseline assessment. A panel consisting of representatives from the Niger State Ministry of Health, Civil Society and FOMWAN engaged in panel discussions that focused on bringing women together to sensitise them on better pregnancies and safer deliveries to prevent maternal deaths, local solutions for local challenges to champion for

better maternal health in Niger State, the importance of multi-stakeholder collaborations in ensuring no woman dies while giving birth in Niger State and accountability for maternal deaths at the community level by members of the local community who were well represented by women leaders, youth leaders and traditional leaders. After discussing these topics, questions were answered by participants present on: What can the State do to ensure that mechanisms are in place for better maternal healthcare in Niger State and What can each of us, as individuals and groups do to make sure that there is an increased level of answerability to the death of ONE woman while giving birth in our communities? A Call to Action was presented by Ugonna Ofonagoro, Head of Projects at EpiAFRIC. This call was an advocacy for a change in mindset and attitudes:

- of men who believe that since their mothers gave birth to them without visiting any hospital or health care centre, so there is no need for their wives to visit any hospital while pregnant.
- of women who think that since their previous deliveries were 'all hassle-free' without attending any health facility, there is no need for them to attend antenatal while pregnant

AUGUST 7, 2019

POLICY DIALOGUE, ABUJA

Dr. Tom Frieden Visits

40
ATTENDEES

In August, Dr Tom Frieden, President and CEO, Resolve to Save Lives, a global public health initiative that helps governments and civil society implement scalable, proven strategies, visited Nigeria to attend the formal launching of the partnership between Resolve to Save Lives and the Nigeria Centre for Disease Control to prevent epidemics in Nigeria.

During his visit, Nigeria Health Watch hosted Dr. Frieden to a media roundtable where he discussed the impact of infectious diseases with journalists and how the media can leverage on their influence to promote the call for epidemic preparedness. He also answered questions about Nigeria's preparedness level and the impact of infectious diseases.

In attendance were journalists from Thisday Newspaper, Nigeria Info FM, Punch Newspaper, BBC Pidgin, AIT, TVC and others. Also, in attendance was Mrs. Elsie Ilori, Deputy Director of Surveillance at the Nigeria Centre for Disease Control.

Some of notable points raised at the roundtable are as follows:

- It is so difficult for people to plan for what they have not seen. In the Nigerian context where we don't plan, it becomes a little more difficult to prepare for epidemics.
- It is life-threatening when there is no disease tracking system, no lab networks, no rapid response teams to stop an outbreak, non-effective public health staff. These are huge gaps.
- If an infectious disease outbreak occurs in any part of the country, even the reporters will be scared to cover the story because no one wants to be infected.
- The National Action Plan for Health Security (NAPHS) is not just for the Nigeria Centre for Disease Control (NCDC) but for all sectors. The NCDC is working to fill in the gaps outlined by NAPHS for epidemic prevention and control in Nigeria.
- The Nigeria Centre for Disease Control cannot do it all. They need the cooperation of state governments. Outbreaks happen in communities. How many states have a budget for epidemic preparedness?
- Budget is crucial in epidemic preparedness. Improving preparedness at the state level is equally crucial.
- Money, coverage, effective spending of the money are the three things needed to prevent epidemics.
- We are encouraged by the progress of the Nigeria Centre for Disease Control; with a dynamic leadership, they are building a sustainable and accountable public-health institution.
- The faster we detect diseases, the easier we can control them and the less the economic impact. Also, to sustain the health system, we need a sustained commitment from the government.
- We need to take the message of prevention to the nooks and crannies of Nigeria. Everyone should be involved because everyone will be affected in an outbreak.

SEPTEMBER 5, 2019

MULTI STAKEHOLDER MEETING, ABAKALIKI

Giving Birth in Nigeria

60
ATTENDEES

On Thursday September 5 2019, Nigeria Health Watch facilitated its second multi-stakeholder dialogue in Abakaliki, Ebonyi State. The meeting had in attendance Bina Marcillina, Director of Women Affairs, Ebonyi State Ministry of Women, Ugo Ndukwe Uduma, Executive Director of Safe Motherhood Ladies Association (SMLAS) and other representatives of the State Ministry of Health, Local Government Councils, Professional Associations, Community Groups, religious and traditional leaders. The meeting started with a playback of the footage got from the Ebonyi State 'Giving Birth in Nigeria' baseline assessment as well as a video on the AMURT "bringing maternal health relief to Odenigbo community" Case Study. A panel consisting of representatives from the Ebonyi State Ministry of Health, Ministry of Women Affairs, Civil Society and Professional Associations engaged in panel discussions that focused on eliminating vulnerabilities of giving birth, the importance of multi-stakeholder collaborations in ensuring no woman dies while giving birth in Ebonyi State and the role of the State in ensuring that mechanisms are in place for better maternal healthcare in Ebonyi State.

After discussing these topics, questions were answered by participants present on: What can we do as individuals do to ensure that there is accountability to the death of ONE woman while giving birth? What can the State do to ensure that mechanisms are in place for better maternal healthcare in Niger State and What can each of us, as individuals and groups do to make sure that there is an increased level of answerability to the death of ONE woman while giving birth in our communities? A Call to Action was presented by Vivianne Ihekweazu, Director of Programmes at Nigeria Health Watch.

This call to action beckoned that:

- Citizens should be sensitised on health related policies.
- Government should ensure that medicines are available at health centres to reduce out of pocket expenditures and boost the accessing of health facilities.
- There should be collaboration among stakeholders along the lines of maternal and child survival.
- Government should collaborate with private health care facilities for synergy and help drive down rising costs of health services.
- Politics should be discouraged from critical health demands and needs.
- Young people should be sensitised to partner with health professionals whenever pregnancies occur.
- People should ensure that they are made aware of maternal deaths
- Women should be empowered economically and culturally to enable them make decisions on their own health safety.
- Provisions for better health care services be made available – directly to health centres to avoid diversion and misappropriation.
- An exclusive emergency fund for the health of women should be set up to be accessed during pregnancies.

SEPTEMBER 11, 2019

POLICY DIALOGUE, ABUJA

No Too Young to Be Heard

60
ATTENDEES

More than half of Nigeria's population is under 30 years. Youths constitute not only a formidable demographic force, but also make up the next generation of parents, workers and leaders. Therefore when Christian Aid Nigeria Office hosted its Global CEO, Ms. Amanda Khozi Mukwashi who was visiting Nigeria for the first time, a youth engagement dialogue was imminent. At the #NotTooYoungToBeHeard Dialogue themed around youth engagement in development, participants made recommendations for improved youth policies and leadership opportunities for young people.

Some of the suggestions include:

- Understanding the varying dimensions of culture and strategically changing that paradigm can only be achieved with a movement and not just a project. That is what must be achieved with the #NotTooYoungToBeHeard conversation
- Girls play a major role in youth and any empowerment but unfortunately are often suppressed because of our patriarchal society. Thus, there should also be more leadership clubs for young girls in schools. It is important also that policies for women be taken to the grassroot level because once we take women's issues there, it will be fought for and won
- We need to open up the space to be able to have engagement with young people, pick specific issues, address challenges and proffer relevant solutions to tackle them.
- Young people have the capacity, resources and willpower to bring solutions to the table, it is important that we create a future that can get young people into a real world of opportunity for young people to create this change.
- We must push the private sector hard. It's not the place of the government to create jobs; but they must put in place the right environment for the private sector to effectively operate.
- The capacities of young people need to be built to effectively eliminate the mass anti-intellectualism that often breeds the opinion that young people are incapable when given leadership opportunities.

Young people in Nigeria face many challenges especially navigating advocacy and policy influence. Young people are also Nigeria's greatest chance to provide ideas for a more equitable country.

SEPTEMBER 13, 2019

POLICY DIALOGUE, ABUJA

Do No Harm

120
ATTENDEES

In the week of September, the 9th 2019, Christian Aid Nigeria Office hosted its Global CEO, Ms. Amanda Khozi Mukwashi who was visiting Nigeria for the first time. At the #DoNoHarm Townhall meeting, participants working in fragile settings met with Ms Amanda to discuss ways to maximise health service delivery in conflict areas of Nigeria. Participants present shared successes, lessons learnt, and challenges experienced based on the work they do providing healthcare in conflict zones. The three objectives itemised above served as the talking points at the townhall meeting. The event moderator (Dr. Ifeanyi Nsofor) guided the discussions, he ensured that as many members of the audience as possible got to offer their opinions on each objective. This was followed by Ms Amanda Mukwashi's global perspectives on programming in conflict zones.

Some recommendations from the event include:

- •Civil society, religious groups, cultural groups, community-based organisations etc must find a balance that ensures that we all work together to deliver our common goal
- Health and healthcare needs are infinite, but resources are limited. Thus the decision must be made about "What issues we want to focus on?" because in terms of capacity and resources, we cannot solve all the problems in existence.
- There is great strength and productivity in numbers. Civil society organisations or development partners do not own the monopoly on 'having ä heart for the people'. To achieve maximum results in fragile settings, we all have roles to play for the collective good.
- It is important to change strategy from looking outward to looking within our communities; empower locals and that alone will accelerate the change they need.
- The traditional strictures are the custodians of norms and practices. If we are going to deal with health in fragile settings, we must recognize that health is a communal issue. We must engage the traditional norms and practices that are harmful and stand in the way of improvements in health and healthcare.
- To make any lasting impact in community healthcare in Nigeria, one must work with the local government. There will be no support from the Primary Health Care if government partnership is not involved.

It is important to create a synergy between partners to improve effectiveness and efficiency to deliver more holistic interventions– especially looking at Internally Displaced Persons and people affected by conflict as the most important focus of the work partners do.

OCTOBER 17, 2019

FUTURE OF HEALTH CONFERENCE, DAY 1

Time to Focus on Quality in Healthcare: Improving Outcomes

362
ATTENDEES

The Future of Health Conference 2019 threw up important points of view on the extent to which healthcare services provided to patients ensured desired health outcomes. The objective was to increase confidence in the healthcare sector, with the use of quality measures to access service delivery. The conference connected people through robust healthcare networks, brought to the open the need to integrate quality at all levels of healthcare access and delivery.

The first speaker, Engr. Chidi Izuwah, Director General and Chief Executive Officer, Infrastructure Concession Regulatory Commission (ICRC) was emphatic: "Improvement in healthcare generally must precede everything, including economic development and infrastructure." This narrative was one that could in reality, provide the needed access for people to good quality care as advocated by Dr Ike Anya, co-founder, EpiAFRIC and Nigeria Health Watch in his opening remarks.

It was clear to all delegates that quality healthcare was critical as the discussions progressed, but the caveat for all was laid down by Dr Ngozi Azodoh, Head of Special Projects department, Federal Ministry of Health: "Quality is not quality if it is not consistent and constant." Consequently vison sharing, leveraging on technology, customer/patient engagement and inclusion, improvement in regulations, replication of positive results, building capacity of healthcare workers and change in public attitudes provided the resounding notes to improve outcomes in quality healthcare in Nigeria.

The speakers and panelists at the conference called for a more concerted effort and commitment from all stakeholders, from policy makers to healthcare professionals to achieve desired levels of quality in healthcare through purposeful interventions.

"We need to train health workers on how to treat people with disabilities, especially women. They need to see us as human beings. We deserve quality healthcare too."

MS. PATIENCE DICKSON
Chairperson Women with Disabilities Initiative

"Consumers should be at the centre of healthcare. Healthcare service providers haven't done so well in carrying the consumers."

DR. AMINA AMINU DORAYI
Technical Director, Family Planning & Reproductive Health, SHOPS Plus Project

"Medicine quality is very critical. Poor quality medicine is a global issue but in Africa and other developing countries, it is acute."

DR. CHIMEZIE ANYAKORA
Chief of Party, Promoting the Quality of Medicine (PQM) Program, U.S. Pharmacopeia

"Medical personnel need to conquer professional pride and treat patients rightly. They should explain well enough to the patients."

DR. DOROTHY JEFF-NNAMANI, *Founder, Novo Health Africa (HMO)*

"To somebody in Zamfara, providing quality healthcare might not be about having a good facility or hospital. It may just be about how she is treated in a primary healthcare centre."

MR. EMEKA E. OKAFOR
Project Manager, IntegratE, Society for Family Health

"PPPs across our teaching hospitals are key for us to drive quality health outcomes."

ENGR. CHIDI IZUWAH
DG/CEO, The Presidency, Infrastructure Concession Regulatory Commission

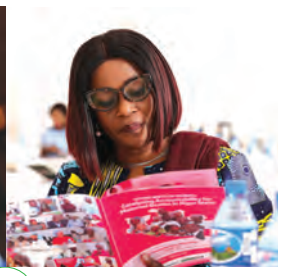
The consensus from speakers and participants at the 2019 Future of Health Conference was that quality is the bedrock of healthcare.

OCTOBER 18, 2019

FUTURE OF HEALTH CONFERENCE, DAY 2

Advancing Quality Maternal Healthcare in Nigeria: What are the Missing Links?

114
ATTENDEES



Nigeria is the second highest contributor to maternal mortality after India, with an estimated 58,000maternal deaths annually. About 9.2million women and girls become pregnant every year. This population is faced with the risk of maternal deaths from preventable causes related to pregnancy and childbirth.

According to latest 2018 National Demographic and Health Survey (NDHS) data, 67% of pregnant women commenced antenatal visits, while only 56.8% completed four visits. The most common cause of maternal deaths in Nigeria has been attributed to heavy bleeding post-childbirth due to postpartum haemorrhage (PPH), which accounts for 23% of all maternal deaths, followed by infections, followed by childbirth (sepsis) at 17% and unsafe abortion at 11%. It is pertinent to note that some of the efficacious interventions to tackle these causes are still not reaching women, especially the poor, disadvantaged and most vulnerable. There is a significant gap in the numbers in the North-Eastern region of Nigeria, with maternal deaths at 1,547 per 100,000 live births, compared to the national average of 512 deaths per 100,000 live births.

Quality in maternal healthcare is not yielding the improvement in health indices as expected in Nigeria, so it is imperative to consider the standard of healthcare being received. Quality maternal healthcare should minimise risk and harm to women while providing effective services using evidence-based guidelines. Quality maternal healthcare should reduce the delays women face in receiving care and maximise resources to avoid wastage. Discussions explored the dimensions of quality maternal healthcare, in addition looking at service delivery and ways of integrating quality at all levels of maternal healthcare delivery in Nigeria.

Delivering quality maternal healthcare in Nigeria should involve collaboration between all stakeholders in the healthcare sector, both private and public healthcare providers, practitioners, public and private suppliers, health maintenance organisations (HMOs), pharmaceutical companies, and government. The goal of these collaborations should be to always put the patient first. This was the aim of the Stakeholders Summit.

Why the focus on quality in maternal healthcare, and why now? In the drive to achieve the three arms of universal overage - access, affordability and quality – a greater focus is needed on quality in healthcare in order to improve patient outcomes and experience,

ensuring that all patients have access to quality healthcare. However, when increases in health access and coverage do not bring about corresponding improvements in health indices, this is an indication of gaping inadequacies in the quality of care provided in health facilities.

Currently, efforts to improve quality in healthcare are not consistent across all healthcare providers, leaving many gaps in the system. There needs to be a greater effort to improve quality in healthcare in order to in crease confidence in the healthcare sector, with the use of quality measures to access service delivery.

How do we measure quality maternal healthcare? Every effort to measure quality maternal healthcare should have these goals as the big picture:

- Alleviate the burden of the three delays and eliminate these gaps as significantly as possible so that women are able to get better care in the home, in the community and in the health facility.
- Improve the woman's experience of care.
- Reduce the per capita cost of maternal healthcare.
- Reduce clinician and staff burnout.

These goals will influence the development of nationalised outcome measures for quality of maternal health care. Outcome measures are 'changes in the health of an individual, group of people, or population that is attributable to an intervention or series of interventions.' Outcome measures (mortality, morbidity, re-admission, patient experience, etc.) are the quality and cost targets of healthcare.

Our administration believes in inclusive governance that leaves no one behind and **is committed to extending health services to the poor and vulnerable irrespective of their status and where they live**.

DR. **OSAGIE ENAHIRE,** *Honourable Minister of Health, FMoH*

When we pick **the right types of interventions,** work **with the right people** and really invest in human capital in our communities, we **can have an impact** at the primary healthcare centres...**with ripple effects.**

DR. **MARY-ANN ETIEBET,** *Executive Director, MSD for Mothers*

At NPHCDA we want that **cordinating platform** that has everybody. It is everybody's **responsibility** to be there as stakeholders.

DR. **NNEKA ONWU,** *Director, Community Health Services, NPHCDA*

"Quality healthcare is expensive and it is even more expensive for women."

ABIOLA NEJO, *Segment Manager, Women & Young Professionals, Access Bank*

NOVEMBER 5, 2019

MULTI STAKEHOLDER MEETING, BAUCHI

Giving Birth in Nigeria

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ATTENDEES

On Tuesday November 5 2019, Nigeria Health Watch facilitated its third multi-stakeholder dialogue in Bauchi, Bauchi State. The meeting had in attendance the representative of the First Lady, Bauchi State, Hajiya Bala Mohammed, religious leaders and traditional rulers alongside community influencers from our target communities.

The traditional In Bauchi State, influenced by the work of the Giving Birth in Nigeria programme, there is a plan to implement multi-stakeholder collaboration in tackling maternal deaths. A commitment has been made to ensure the inclusion of traditional leaders, community influencers, religious leaders and community-based organisations in surveillance and reports of maternal deaths in the communities. Each stakeholder understands the gravity of maternal deaths as a matter of public health concern. The Bauchi State Government is also committed to channelling community data through the newly established State Emergency Maternal and Child Health Intervention Centre (SEMCHIC) and Local Government Emergency Maternal and Child Health Intervention Centre (LEMCHIC) which would both feed into existing state-level structures to ensure more holistic data and insight, the creation of informed solutions and the implementation of plans and strategies to end maternal deaths in the State.

A call for a shift in responsibility from a total reliance on the government for maternal outcomes to multi-stakeholder responsibility for the outcome of every Bauchi woman was made during multi-stakeholder dialogue. Civil Society Organisations (CSOs), medical associations, media, women groups, professional associations, religious organisations, ward development committees, village development groups and philanthropists must come together to proffer solutions to the threats of maternal deaths, particularly at the community level where the majority of maternal deaths occur. Development partners should play a key role in providing technical support as well as in the provision of financial investments to enable the creation of a strategic maternal health development plan for the State. These collaborations will feed into the government's role as custodian and coordinator of such a plan.

DECEMBER 10, 2019

MULTI STAKEHOLDER MEETING, YENAGOA

Giving Birth in Nigeria

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ATTENDEES

On Tuesday, December 3 2019, Nigeria Health Watch facilitated its fourth multi-stakeholder dialogue in Yenagoa, Bayelsa State. Representatives from the Bayelsa State Ministry of Health, Civil Society Groups, Professional Associations, Groups and Community Leaders were on ground to dialogue on ways to mitigate the menace of maternal mortality. Bunmi Oyebanji, Programme Manager at Nigeria Health Watch ended the impactful session with a call to action for community actors to find locally created and custom solutions to the local challenges they face in maternal care without depending entirely on the state government.

Following the establishment of the community surveillance by the Giving Birth in Nigeria programme, the Bayelsa State government identified the need for community MPDSR and has set up community maternal death reporting committees in three pilot communities of Anyama, Alebri and Amassoma. The role of each committee is to galvanise members of the communities to action.

There is also a need for increased advocacy and awareness creation in Bayelsa State and Civil Society Organisations (CSOs) should be empowered, adequately funded and mobilized to carry out mobilization activities at the community level. The Giving Birth in Nigeria programme has spurred the state MPDSR Steering Committee in action and highlighted the need for increased advocacy in Bayelsa State to improve maternal outcomes.

Stakeholders called on the Bayelsa State Government to take maternal health outcomes seriously by putting in place better systems such as refurbishing primary health care centres in hard-to-reach riverine communities and providing better working conditions for health workers in these communities

DECEMBER 12, 2019

TOWN HALL MEETING, JIWA

UHC Day Celebration

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ATTENDEES

To commemorate Universal Health Coverage (UHC) Day 2019, Nigeria Health Watch (NHW) in partnership with Centre for Family Health Initiative (CFHI) organised a community hall forum to help generate understanding, awareness and grassroots demand for UHC and motivate policies and investments that truly aim to leave no one behind. The forum was held at Jiwa Village, Abuja Municipal Area Council (AMAC), Abuja on Thursday, December 12 2019 from 9am to 2pm. In attendance were the representative of the Emir – Tanko Nuhu who is the Madaki of Jiwa, Village head - Alhaji Aliyu Jatau, Health facility in-charge, community groups including the women, men, youths and children.

Objectives

The objectives of the forum are to:

- Understand the community perspective on the implementation of Basic Health Care Provision Fund (BHCPF) and how this drives the achievement of UHC.
- Sensitise and build awareness about the services that community members should expect from their Primary Health Centres (PHCs) as provided by the fund.
- Facilitate advocacy to ensure that community members are equipped to demand compliance with the National Health Act (NHA) from their local government officials and from the health system.

Activity Outputs

- Some of the outputs of the community hall forum includes:
- Increased knowledge of the community members on the Basic Health Care Provision Fund including list of its benefit packages, beneficiaries and how to benefit.
- The forum stimulated community members to demand for full implementation of the BHCPF. This demand was captured through short messages to decision makers and shared on Nigeria Health Watch social media platforms.

Conclusion

The Basic Health Care Provision Fund is a driver towards achieving UHC in Nigeria. There is need for continuous community engagement and support to demand for the full implementation of the BHCPF. It is of utmost important that community members hold government starting from the local government accountable to deliver on the promise through a seamless and efficient roll out of the BHCPF.

ABBREVIATIONS AND ACRONYMS

AMAC	Abuja Municipal Area Council
BoI	Bank of Industry
BHCPF	Basic Health Care Provision Fund
CFHI	Centre for Family Health Initiative
CHAIN	Catalysing Accountability for Maternal Deaths in Nigeria
CBHIS	Community-Based Health Insurance Scheme
CSR	Corporate Social Responsibility
FCT	Federal Capital Territory
FGD	Focus Group Discussion
FOMWAN	Federation of Muslim Women's Associations in Nigeria
HMO	Health Maintenance Organisations
ICRC	Infrastructure Concession Regulatory Commission
MNCH	Maternal, Newborn and Child Health
MPDSR	Maternal and Perinatal Disease Surveillance Response
MMR	Maternal Mortality Rate
NCDC	Nigeria Centre for Disease Control
NDHS	National Demographic and Health Survey
NHW	Nigeria Health Watch
NHA	National Health Act
NHEA	Nigerian Healthcare Excellency Award
PPP	Public-Private Partnerships
PHC	Primary Health Care
PPH	Postpartum Haemorrhage
PHEOCs	Public Health Emergency Operational Centres
RUTF	Ready-To-Use Therapeutic Food
RRTs	Rapid Response Teams
SMLAS	Save Motherhood Ladies Association
UHC	Universal Health Coverage

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