

SOKOTO STATE



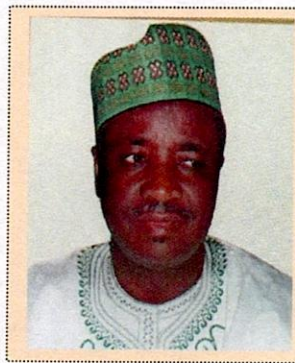
PRIMARY HEALTH CARE DEVELOPMENT AGENCY

ANNUAL REPORT

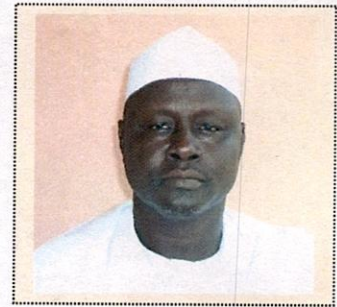
JANUARY TO DECEMBER 2011



Alh. Abdullahi Maigwandu
Honorable Commissioner for Health

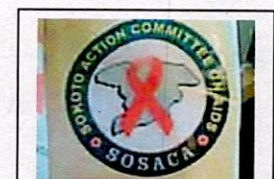
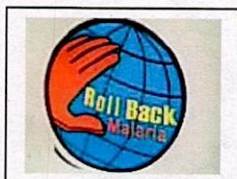


His Excellency,
Alh. (Dr.) Aliyu Magatakarda Wamakko
(SARKIN YAMMAN SOKOTO)
Executive Governor,
Sokoto State



Comrade Ibrahim Jibrin Sokoto, FHR
Honorable Special Adviser

SUBMITTED TO THE STATE EXECUTIVE GOVERNOR



BY
MANAGEMENT TEAM
DECEMBER, 2011

TABLE OF CONTENT

➤ Acronyms _____	3
➤ Executive Summary _____	4
➤ Background _____	5-11
➤ Key Achievements from January to August, 2011 _____	12-20
➤ Contribution by Development Partners _____	21-23
➤ Conclusion _____	24

Primary Health Care Development Agency:

Progress Report

ACRONYMS

AFP	Acute Flaccid Paralysis	MLSS	Modified Life Saving Skills
AIDS	Acquired Immune Deficiency Syndrome	MNCH	Maternal and Newborn Child Health Care
ANC	Antenatal Care	MOWA	Ministry of Women Affairs
CCD	Control of Communicable Diseases	MSF	Medicins Sans Frontieres
CLMS	Commodity Logistics Management System	MSS	Midwives Service Scheme
DOTS	Directly Observed Treatment Short Course	MUAC	Mid Upper Arm Circumference
DP	Development Partner	NCDP	Non-communicable Diseases Prevention
DPT	Diphtheria, Pertussis and Tetanus	OPV	Oral Polio Vaccine
FP;	Family Planning	OTP	Outpatient Therapeutic Programme
GAVI	Global Alliance for Vaccine and Immunization	PHC	Primary Health Care
GMP	Growth Monitoring Promotion	PO	Programme Officer
HF	Health Facility	RBM	Roll Back Malaria
HIV	Human Immunodeficiency Virus	RH	Reproductive Health
HMIS	Health Management Information System	RHCS	Reproductive Health Commodity Security
HPRS	Health Planning Research and Statistics	SDP	Service Delivery Point
HRH	Human Resource for Health	SPHCDA	State Primary Health Care Development Agency
HRMDGs	Health Related Millennium Development Goals	TSHIP	Targeted States High Impact Project
IMCI	Integrated Management of Childhood Illness	UNFPA	United Nations Fund for Population Activities
IMNCH	Integrated Maternal, Newborn and Child Health Strategy	UNICEF	United Nations International Children Emergency Fund
LSS	Life Saving Skills	VVF	Vesico Vaginal Fistula
M&E	Monitoring and Evaluation	WDC	Ward Development Committee
MEN-AFRIC. V	Meningitis Africa Vaccine	WHO	World Health Organisation
		WMHCP	Ward Minimum Health Care Package

Progress Report

EXECUTIVE SUMMARY

The Sokoto State Primary Health Care Development Agency took off and commenced into serious activities following the excision of the Department of Primary Health Care Services of the Ministry of Health in January 2011. This was consequence upon the establishment of the agency and signing into law by the Governor on 20th May 2010 and subsequent appointment of the Honorable Special Adviser on SSPHCDA in November, 2010. Followed up to that was the establishment of management structure and department with various units to coordinate and implement programmes and activities.

Before the transformation of the Department of PHC services into the agency there were several meetings held with the management of Ministry of Health in respect of transfer of staff, programmes, vehicles and basic office equipment essential to the agency. There was also an important meeting held to address issues on roles and responsibilities of the Ministry of Health and Agency in health care delivery in the State. Other meetings held were, the maiden meeting with Development Partners to develop the focus and road map for the agency for primary health care activities implementations in the State. There was also a meeting between the management of the State Primary Health Care Development Agency and that of Ministry for Local Government and Community Development on the transfer of selected primary health care centers to the Agency. It was agreed and resolved that for a start, sixty eight (68) primary health facilities across the twenty-three (23) LGAs be transferred to the State Primary Health Care Development Agency for administration and management with effect from 1st January, 2012.

Land mark achievements were recorded from January to December, 2011 which cut across all departments and units under the Agency. Furthermore, His Excellency, the Executive Governor of Sokoto State personally flagged off the 6th Round of IPDs in June, 2011 @ Maganawa Community of Wamakko LGA of Sokoto State while His Eminence, the Sultan of Sokoto met with Northern Traditional Leaders on PHC and Polio related activities in April, 2011. His Eminence, the Sultan along with Northern Traditional Leaders paid a courtesy call to His Excellency, the Executive Governor of Sokoto State and discussed extensively on way forward for polio interruption in the state in May 2011. Also worth noting, Bill Gates Rep along with State Team on Polio paid a courtesy call on the Governor for polio interruption in the state in June 2011. The Geneva and Abuja Surveillance Team for polio was in the State to conduct rapid surveillance assessment for polio activities in the state. The finding of their assessment showed that the state is making progress and quite on track towards polio eradication.

The number of health facilities conducting routine immunization in the State has increased from 400 to 457 in 2011 while in the area of supplemental immunization activities; the coverage of polio vaccination has consistently increased from January to December IPDs meaning that more children were reached. In maternal health, more pregnant women are attending ANC and deliver in health facilities. Family Planning services access has tremendously improved within the reporting period while at the same time the nutrition project in the State recording a huge success.

The Coordination and tracking of development partners programmes and activities within the reporting period has greatly strengthened and improved.

Progress Report

Background:

This progress report contains essentially all activities implemented by the Sokoto State Primary Health Care Development Agency from the time it came into existence to December, 2011. It covers some of the related issues on the handing over, foundation meetings, and collaboration with relevant stakeholders and settling down or take-off activities of the agency as captured under the following headings for ease of reference.

1. Introduction:

In line with national practice and the need to hasten the achievement of health related Millennium Development Goals (MDGs), the Federal Ministry of Health through the National Primary Health Care Development Agency Abuja and Development Partners expect that all States, (Sokoto State inclusive) to establish States Primary Health Care Development Agencies/Boards. This is fundamental to ensuring stronger strengthening and coordination of Primary Health Care Services for the overall improvement of health delivery in the country.

Accordingly, a sizable number of States including Sokoto State have established State Primary Health Care Development Agency to address weakness hitherto noticed in health delivery under total control of local Governments where capacity and commitment are generally very challenging.

2. Establishment of Sokoto State Primary Health Care Development Agency

The conceptualization and process of establishment of the SPHCDA commenced in 2007 under the present administration of *His Excellency, the Executive Governor of Sokoto State, Dr. Aliyu Magatakarda Wamakko*. The draft bill, a bye product of cross fertilization of ideas, visits to different states who have established similar Agencies and in consultations with Development Partners and other stakeholders was raised and forwarded to Ministry of Justice for the legal inputs and finalization of the draft. The finalized bill was then sent to the State House Assembly as an Executive Bill by the Governor for passage into law. It was passed and signed into law by the State Governor on 20th May, 2010.

The roles and responsibilities of the agency include the coordination and implementation of the primary health care components as was envisaged and originally designed at **Alma Ata International Conference 1978 organized by WHO and UNICEF** thus, the Primary Health Care is referred to as the "Essential health care based on practical, scientifically sound and socially acceptable methods and technology made universally accessible to individuals and families in the community through their full participation and at a cost that the community and the country can afford to maintain at every stage of their development in the spirit of self-determination".

Although, there are 8-11 PHC components out of which five fall under the purview and are being coordinated by the agency. Each component is regarded as a unit and headed by a Programme officer. The units are; Health Education, Maternal and Child Health including Family Planning, Nutrition, Immunization and Control of diarrheal/endemic diseases.

3. Metamorphosis of the Department of Primary Health Care into State Primary Health Development Agency and its Responsibilities

Following the signing of Sokoto State Edict into law by the Governor on 20th May 2010 for the establishment of the Sokoto State Primary Health Care Development Agency and subsequent appointment of the Hon Special Adviser to the Governor in November 2010, the Department of Primary Health Care of the Ministry of Health was excised and became the State Agency for Primary Health Care Services with the following responsibilities:-

- (a) Review the existing health policies particularly with regards to their relevance in the development of primary health care facilities and propose changes where necessary;
- (b) Study health plans for primary health care at various levels under its supervisions to ensure their relevance to the National Health Policy.
- (c) Promote and Monitor the implementation of plans at various level of the state primary health care services.
- (d) Provide strategic technical support for the implementation of the priority primary health care components as may be required or introduce new components integrations;
- (e) Mobilize resources nationally and internationally for the development of primary health care in support of the agency programs;
- (f) Ensure effective implementation of all primary health care activities as well as to ensure effective supervision and monitoring for the maintenance of minimum acceptable standard;
- (g) Ensure effective community involvement or participation in all primary health care activities from inception to implementation stage;
- (h) Strengthens referrals and linkages with other branches of the health sector especially in the area of maternal and child health, reproductive health care as well as other ailments with a view to significantly reduce morbidity and mortality;
- (i) Develop sound database for effective planning, implementation and supervision of all primary health care activities in the state;
- (j) Develop effective programme for training and re-training of all primary health care providers;
- (k) Encourage effective collaboration with other sectors at all level in the development and support of primary health care system to avoid duplication and waste of resources;

Primary Health Care Development Agency:

Progress Report

- (l) Take over and oversee the running of all primary health care facilities located in the state; except the local government dispensaries and clinics, which shall be managed by the Local Government Councils in the state;
- (m) Provide and maintain all infrastructure and equipment as well as employ and discipline staff of such facilities under its direct supervision
- (n) Ensure the implementation of all relevant policies with regards to facilities, equipment and staff under its care;
- (o) Promote multi-sectoral and multi-disciplinary collaboration and encourage networking among various and relevant stakeholders;
- (p) Do anything which in the opinion of the board is designed to facilitate the carrying out of the activities of the Agency.

4. Establishment of the Management Structure of the Agency.

A Special Adviser to the Executive Governor on SSPHCDA was appointed in Nov. 2010. He is the political head and accounting officer of the State Primary Health Care Development Agency and reports to the Governor directly or sometimes jointly with Hon. Commissioner of Health or that of Local Governments on all matters related to the Primary Health Care services in the state.

In consultation with the Governor, white paper on the establishment of the Primary Health Development Agency and provision of the law establishing the Agency, the following key officers were appointed:

Executive Secretary to the Agency, He is the most senior officer and heads the departments in the Agency. He reports to the Hon. Special Adviser and coordinate all technical activities of the Agency. There are basically four established departments of the Agency which includes; the Departments of Community Health Services, Disease Control, Planning, Research and Statistics and Admin/Finance. The Director of CHS/PHC is the most senior and is next to Executive Secretary while the Finance officer heads the department of Admin/Finance.

5. Process of taking off

As a new Agency carved out from the Ministry the following were the processes undertaken to ensure smooth take-off:

- **Met with the Ministry of Health Management Team to streamline activities to avoid over lapping.**

Primary Health Care Development Agency:

Progress Report

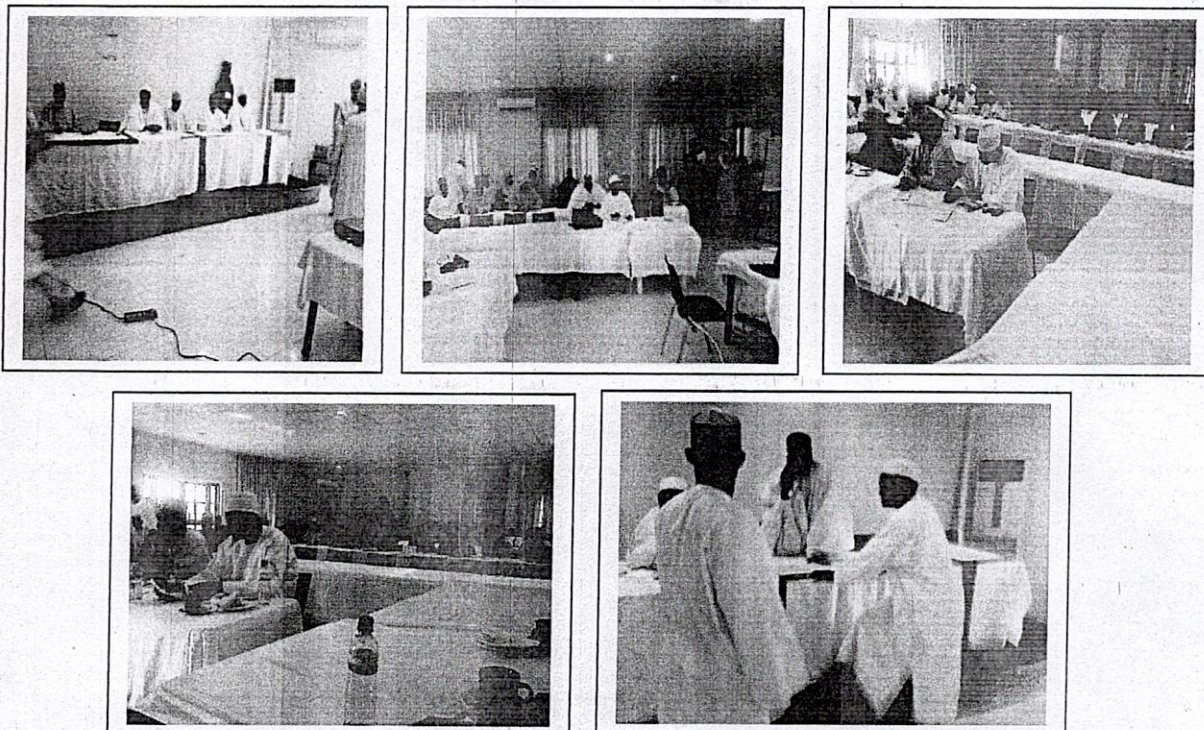
The meeting which was held on Thursday 28th April 2011 chaired by Dr A. M Gandhi SSPHCDA, attended by Alh M. B Umar D/Daji MOH, Ibrahim Dadi Adare MOH, Dr Khaliru Alhassan MOH, Alh Garba Kadi SSPHCDA, Secretary.

Reference to earlier meeting of 28th April, 2011 chaired by the Hon. Commissioner Alh. Abdullahi Maigwandu on the above subject matter that resulted in the constituting of 5 member sub-committee mentioned above, to advice on the overlapping functions between Ministry of Health And State Primary Health Care Development Agency. The five member sub-committee deliberated on all the issues raised and gave their recommendations as follows:

- All postings should follow the normal civil service procedures.
 - Roll back malaria program is to remain under the control of Ministry of Health.
 - Zonal offices shall be under the supervision of SSPHCDA in collaboration with SMOH,
 - The epidemiological unit is under the control of MOH in collaboration with the SSPHCDA,
 - Midwifery Service Scheme is an initiative of NPHCDA, Abuja to reduce the incidence of maternal mortality and morbidity as such it should be under the supervision of SPHCDA in collaboration with MOH,
 - Reproductive Health and Nutrition program are components of PHC and they should be under the supervision of SSPHCDA in collaboration with MOH,
 - The Ministry of Health, SSPHCDA and Ministry for Local Government called to collaborate on all health matters to facilitate the smooth delivery of health care in the state.
 - All policy issues related to health care delivery services should be coordinated by Ministry Of Health.
- **The management of the agency met with the relevant development partners and other Stakeholders in the State to discuss and develop road map for effective take-off of the agency.**

One Day Stakeholders Meeting on the Take-off of Sokoto State Primary Health Care Development Agency was conducted at Dankane Guest Inn Sokoto on 18th January 2011. The Meeting was chaired by the Honorable Special Adviser to the Governor on State Primary Health Care Development Agency supported by USAID T-SHIP Sokoto, headed by the Deputy Chief of Party Dr. A.M Maishanu. Representatives in attendance were; MOH, MBEP, Women Affairs, Min LGA, Information. Others; HSMB, SOSACAT, School of Health Information Management (UDUTH) Sokoto, School of Community Health (UDUTH) Sokoto, School Of Nursing Sokoto, Sultan Abdulrahman Sch. Of Health Technology, Gwadabawa etc. Development Partners; WHO, MSF, SFH, FISTULA, UNICEF, GAVI etc. At the end of the meeting, the harmonized views and guidelines for effective and smooth take off of the Agency were developed.

Progress Report



- ***Meeting With the Management Team of Ministry for Local Government and Community Development on the number of PHCs to be Taken over by the Agency***

The meeting which was held on Wednesday 17th and Monday 20th June 2011 was attended by The Hon. Special Adviser SSPHCDA Comrade Ibrahim Jibrin (Chairman), The Permanent secretary Ministry for Local Government Alh Muhammad Bello Abubakar Guiwa (Secretary), Executive Secretary SSPHCDA Dr Abdurazaq Gandi, Director PHC to the Agency Alh Garba Kadi, Director Local Government matters Alh Abdulkadir Jelani Wurno, Director Disease Control PHCDA Dr Aminu Shehu, Deputy Director PHC Local Government Alh Junaidu Muhammad and Alh Aminu Shehu D/Daji Staff of SPHCDA.

After first and second meetings of the representatives of the Ministry for Local Government Affairs and State Primary Health care Development Agency on the above subject matter, it was agreed that 68 Primary Health Care Facilities be transferred to the State Primary Health Care Development Agency as follows:

Progress Report

LIST OF PRIMARY HEALTH CENTRES UNDER PRIMARY HEALTH CARE DEVELOPMENT AGENCY BY ZONE

S/No			
	Sokoto North	1	PHC Helele
		2	PHC Runjin Sambo
	Sokoto South	1	PHC Gagi
		2	PHC Mabera
	Wamakko	1	PHC Yarume
		2	PHC Samalu
		3	PHC Kontagora
	Silame	1	PHC Silame
		2	PHC Gande
	Binji	1	MPHC Bunkari
		2	PHC Maikulki
	Tangaza	1	PHC Gidan Madi
		2	PHC Ruwa Wuri
	Gudu	1	PHC Karfen Sarki
		2	PHC J J Sule
		3	PHC Kurdulla
		4	PHC Bachaka
	Kware	1	MPHC Balkore
		2	PHC Kware
		3	PHC Hamma Ali
		4	PHC Umaruma
		5	PHC Durbawa
	Wurno	1	PHC Achida I
		2	PHC Marnona
		3	MPHC Achida II
	Rabah	1	PHC Rara
		2	PHC Gandi
		3	PHC Yar Tsakkuwa
		4	PHC Gawakuke
	Goronyo	1	PHC Shinaka
		2	PHC Goronyo
		3	PHC S G Dole
	Sabon Birni	1	PHC Gatawa
		2	PHC Son Allah
	Isa	1	PHC Bafarawa
		2	MPHC Yankafo
		3	PHC Bargaja
	Gada	1	PHC Wauru
		2	PHC Keffe
		3	PHC Kaddassaka
		4	PHC Kadadin Buda

Primary Health Care Development Agency:

Progress Report

	5	PHC Dukamaje
Gwadabawa	1	PHC Mamande
	2	PHC Gigane
	3	PHC Atakonyo
	4	PHC Salame
Illela	1	PHC Araba
	2	PHC Ambarura
Tambuwal		
	1	PHC Jabo
	2	PHC Sanyinna
	3	PHC Alasan
	4	PHC Romon Liman
	5	PHC Nabaguda
Tureta	1	PHC Tureta
	2	PHC Tsamiya
Bodinga	1	MPHC Bagarawa
	2	PHC Dingyadi
	5	PHC Danchadi
Yabo	1	PHC Kilgori
	2	PHC Binjin Muza
Dange – Shuni	1	PHC Dange
	2	PHC Shuni
	3	PHC Fajaldu
Shagari	1	PHC Shagari
	2	PHC Horo
	3	PHC Dandin Mahe
Kebbe	1	PHC Margai
	2	PHC Kuchi

- **Established regular monthly review meetings and planning with program officers and Development Partners.**

Based on the program officers and development partners work plans, regular monthly review meetings are being conducted to assess the level of implementation of programs and projects, challenges there in and offering solutions on ways forward

Progress Report

KEY ACHIEVEMENTS FROM JANUARY TO DECEMBER, 2011

Department of Administration and Finance:

Achievements

- Finance officer, Deputy finance officer, Accountant, Auditor and Cashier were posted to the Agency in Dec. 2010 by the Ministry of Finance
- Staff officer and 2 clerical officers were posted to the agency in Nov. 2010 by the Department of Establishment
- Temporary office accommodation at Block 14, 1st Floor of Shehu Kangiwa Secretariat was secured as accommodation for the agency
- Monthly impress for the agency running was secured from the State Government.
- Submission on the takeoff grant for the agency is still awaiting action from the Chief Executive of the State.
- Official vehicle for the Hon Special Adviser was released by the Cabinet Office immediately after the appointment.
- Office furniture, minor repairs of the agency offices and stationeries were procured.
- Salary line was created for SSPHCDA staff
- A congratulatory visit to the new Minister of Health Dr. Muhammad Ali Pate was done in August 2011 by the agency management team
- Director of Administration was posted from Cabinet in Dec. 2011
- Budget proposal for 2012 was drawn and submitted to the MBE and was defended including the expected new employees from LGA

Challenges:

- Lack of takeoff grant is hindering expansion of PHCDA activities
- Inadequate office accommodation, some senior staff are still without offices.
- Inadequate program vehicles for office use and supervision of programmes and activities of PHC.

Department of Primary Health Care

Key Achievements;

Under the Department of Primary Health Care Services of the Agency, the following achievements have been recorded from Jan to Dec. 2011:

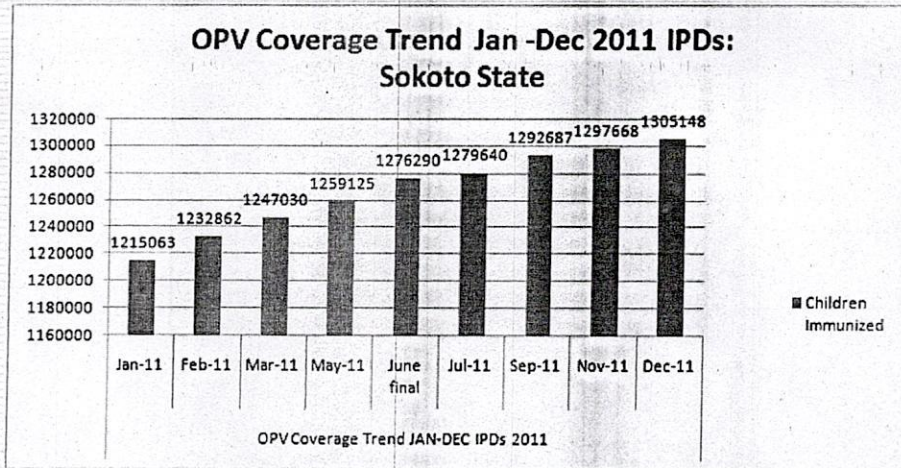
Immunization Activities:

- Conducted 8 Rounds of Immunization Plus Days with sustained improved coverage following each round
- Conducted 3 mop-up campaigns following detection of wild polio virus. In S/Birni, Isa and Wamakko.
- Number of health facilities conducting routine immunization has increased to 457
- Conducted on monthly basis, meeting of Local Immunization Officers and Disease Surveillance and Notification Officers.

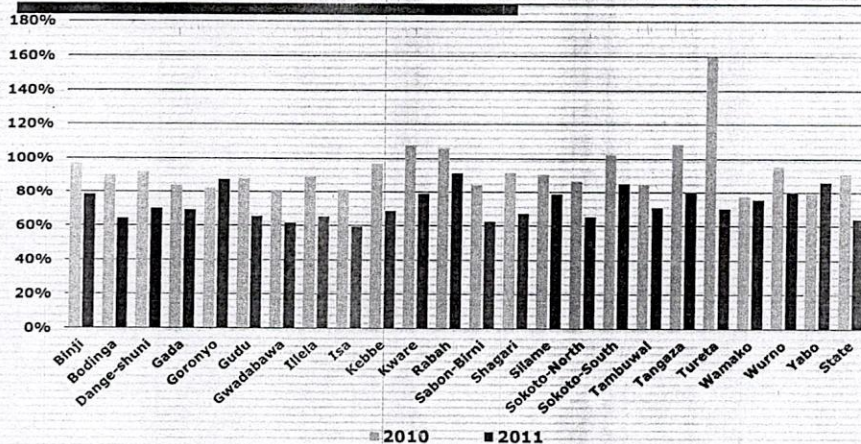
Primary Health Care Development Agency:

Progress Report

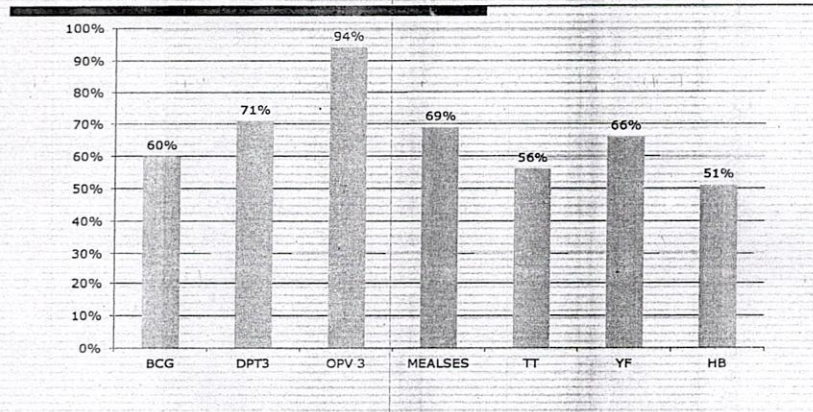
- Conducted before each round of IPDs, pre-implementation training, team selection and social mobilization activities to ensure quality implementation.
- Flagged off of IPDs campaigns by the Governor or representative in each round of IPDs
- Participation of State Taskforce Members and Directors from the Agency and MOH in the Monitoring and Supervision of IPDS.
- Sokoto state observed the Nigerian Governors forum declaration on polio eradication on the 13th August 2011.



**Cumulative DPT3 Coverage
(Dec. 2010/2011)**

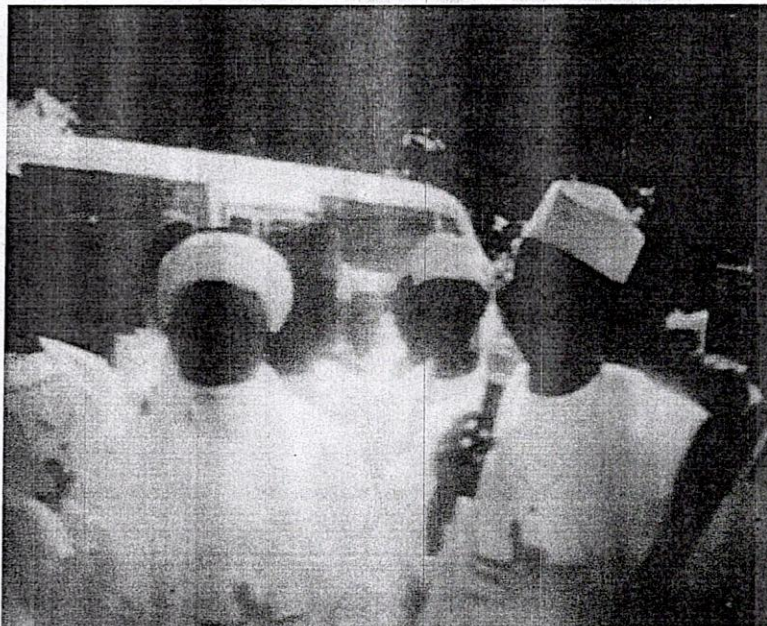


Immunization Coverage by antigen 2011



Big Events on Immunization Activities:

- His Excellency, the Executive Governor of Sokoto State personally flagged off the 6th Round of IPDs in June, 2011 @ Maganawa Community of Wamakko LGA of Sokoto State.



- His Eminence, the Sultan of Sokoto met with Northern Traditional Leaders on PHC and Polio related activities in April, 2011

Progress Report

- His Eminence, the Sultan along with Northern Traditional Leaders paid a courtesy call to His Excellency, the Executive Governor of Sokoto State and discussed extensively on ways forward for polio interruption in the state in May 2011.
- Bill Gates Rep along with State Team on Polio paid a courtesy call on the Governor for polio interruption in the state in June 2011.
- UNICEF Communication Expert Team from New York, USA paid a Courtesy Call on His Excellency under the leadership of Hon Special Adviser and solicited for continued commitment to polio eradication.
- Geneva and Abuja Surveillance Team for polio was in the state to conduct Rapid Surveillance Assessment for polio activities in the state. The finding of their assessment showed state is making progress and quite on track towards polio eradication.
- The new Honourable Minister State for Health, Prof M Ali Pate was in Sokoto in Nov. 2011 along with new ED, NPHCDA, Dr. Ado JG and later was formally introduced to His Eminence, The Sultan of Sokoto in the presence of Hon. Commissioner of Health and Hon. SA

National/zonal meetings Attended:

- Hon SA and Exe. Secretary attended the 22nd Expert Review Committee on Polio meeting held in March, 2011 at Abuja
- Hon SA and Director PHC attended sensitization meeting on introduction of new meningitis vaccine in Kaduna in April 2011.
- Hon SA, Director PHC and SIO attended national midyear review meeting of polio eradication activities and review of progress on the preparation for the implementation of MengafriVac held in Sokoto in July 2011.
- SIO attended several zonal and national meetings on routine immunizations, supplemental immunization and surveillance activities.
- Executive Secretary and SIO attended the national debriefing meeting on IPDs conducted so far from Jan to Dec. 2011.
- SIO attended a review meeting on unimmunized children of UNICEF focal states (Zone C) held at Kaduna from 17th to 20th Dec. 2011
- Conduct of IPC skills for health educators on 23rd Nov. 2011 and similar trainings in the two pilot LGAs of Wamakko and Illela (24-24 Nov. 2011)
- The Executive Secretary represented Hon. Commissioner of Health at High level Advocacy Meeting of UNICEF Zone Z Field Office held in Kaduna from 29th to 30th November, 2011.

Challenges:

- State and LGA taskforces on Polio are weak signaling fatigue for polio eradication initiative activities.
- New cold room built by the EU Prime yet to be connected to national grid and commissioned.
- Some LGAs cold stores require rehabilitation.

Progress Report

Reproductive Health/Family Planning Activities;

Key achievements:

- Conducted advocacy and community mobilization using Radio/TV jingles on HIV/AIDS
- Supported NGOs/CBOs/FBOs Quarterly meeting on HIV related condom promotion activities
- Conducted one day female condom counseling training for CBOs/NGOs/FBOs and public sectors.
- Conducted five day advocacy visit to policy makers in the state and LGAs on RH/HIV service integration
- Supported NYNETHA to implement HIV prevention among tertiary institutions/SWs through the dissemination of strategy and framework in HIV prevention in sex workers
- NGOs, CBOs, FBOs travelled to Kwannawa to sensitize the community on RH/HIV integration and also distributed Male and Female condoms
- Three day training for 30 PHC level Health personnel on Youth friendly service delivery was conducted
- Three day training for 20 youth from CSOs on ASRH was also conducted in the state
- Collected and collated FP service and logistics data on a monitoring / quarterly basis in line with approved CLMS guideline and produce feedback
- The Project Director ,Coordinator, FP coordinator conducted five day supervision / Stock assessment of FP SDPs in 30 selected health facilities of 10 UNFPA focus LGAs.
- Conducted Multi-sectoral state based RHCS committee Bi-annual meeting
- The project Director, Deputy Director PHC, Coordinator paid an advocacy visits to Philanthropists / multi- national companies to support RHCS
- The Project Director, Coordinator, FP coord and secretary conducted a day advocacy visit to each community and religious leader to support child spacing in 30 communities of 10 UNFPA LGA
- A one day sensitization meeting with health care providers on the management of victim of gender based violence in collaboration with Ministry of Women Affairs (MOWA) was conducted in the state
- Three day training for health workers on the use of Anti-Shock garment, MgSo4, was also held within the reporting period

Primary Health Care Development Agency:

Progress Report

- Celebrated the 2011 Safe Motherhood Day in collaboration with other stakeholders
- Conducted quarterly meeting of state and LGA partnership on maternal and neonatal health care (MNCH)
- Conducted sensitization meeting with village development committee to take ownership of RH programmes in 30 communities using the traditional and religious leaders committee on RHR.
- A one day sensitization Seminar for Religious leaders and CDC members, Women and youth leaders in 30 communities on the operations of health system in their domain, obligations and responsibilities in ensuring quality health care delivery and facility utilization.
- Conducted quarterly TAC meeting and purchased of office Stationeries
- Received of 10 maternity beds and other instruments from UNICEF Kaduna zonal office in support of reproductive health activities.
- Executive Secretary and Reproductive Health Coordinator along with 8 other LGA DPHCs attended 10 days study tour in Ghana organized and sponsored by dRPC, Kano (USAID)
- Hon. Special Adviser/HCH and FP coordinator were in Dakar, Senegal for Regional Conference on FP held from 29th Nov to 2nd Dec. 2011
- Purchase and distribution of Mgso4 and Misoprostol to UNFPA HFs in the 4th quarter 2011
- Conducted supervision and monitoring of the unfpa supported health facilities by the committee of network of traditional leaders under His Royal Highness, the Galadiman Gari in the 4th quarter, 2011
- Conducted a two days interactive meeting on Leadership Development Forum in Community Driven maternal Health Programm with 40 key stakeholders (policymakers and traditional leaders). It was held in Sokoto Guest Inn from 26th to 27th Nov. 2011
- Conducted a sensitization meeting with service providers (50) on community driven maternal health services with support of dRPC and held in Guest Inn from 23rd to 24th Dec. 2011

Big Events on Reproductive Health Activities:

- Maintenance of 144 midwives and 72 female community extension workers allowances from the state and local governments.

Primary Health Care Development Agency:

Progress Report

- UNFPA Country Representative was in the State and paid advocacy visits to His Excellency, the Governor, Deputy Governor and His Eminence the Sultan of Sokoto on maternal health and young adults' issues.
- Attendance to the World Family Planning Conference in Dakar, Senegal by Hon. HCH/SA and FP coordinator in Nov. 2011
- Study tour on maternal child health in Ghana by Executive Secretary and RH Coordinator

Challenges:

- Payment of Female Community Extension Workers deployed to state in December, 2011 by the State and 9 concerned LGAs of the State is still pending even approval has been granted by the Governor.

National/Zonal Meetings Attended:

- Hon. Special Adviser and family planning coordinator attended a training on rapid model on family planning services held in Kaduna in March 2011
- Exe. Secretary and Family Planning Coordinator attended five days meeting on RH Commodity Security strategic plan on family planning 2011-2015 and costing of free commodities in Nigeria held in Abuja in March, 2011
- Exec. Sec and Family Planning Coordinator attended four days meeting on development and costing of free commodities distribution in Nigeria held also in June, 2011, Abuja
- Family Planning coordinator attended short term technical assistance for the evaluation of the contraceptive logistic management system held in Abuja, August, 2011
- Family planning need assessment was conducted in the state in August, 2011.
- FP Coordinator attended an Integration of HIV/FP meeting held in Abuja
- Adolescent Health Coordinator attended a training on the designing of Action Plan for Adolescence Health Development in Nigeria held in Abuja
- AH Coordinator attended a TOT training of ARH held at Kaduna
- AH Coordinator also attended a meeting on the review of training manuals of adolescence health development/clinical service protocol held in Osun
- AH Coordinator also attended a consultative forum meeting on advanced young people health development in Nigeria held in Abuja
- FP Coordinator attended meeting on intergration of VVF, FP and HIV services held in Abuja

Progress Report
Nutrition and Early Child Care

Key Achievements/Results;

For the year 2011, the following activities were implemented:

- State received a consignment of 4,000 cartons of plumpy nuts from UNICEF Kaduna Zonal Office in March 2011 for nutrition project.
- Continued to maintain the 3 Severe and Acute Malnutrition project sites at Gada, Illela and Tangaza with regular monitoring and supervisions.
- Supply at intervals the ready to use food supplements from the State store of plumpy nuts
- Celebrated World breast feeding week in the state in 1st week of August, 2011
- Conducted needs assessment in the two additional LGAs of Sabon Birni and Sokoto South on the expansion of the SAM Project
- Conducted a one day stakeholders for the review of the Nutrition Project and planning for the expansion in August, 2011.
- Conducted community sensitization for SAM Project in the upcoming LGAs of SBN and Sokoto South.
- State Nutrition Officer attended two zonal meeting to review quarterly the performance of the SAM Project in the state and both meetings were held in Zamfara State.

	TOTAL NO. OF SITES	ADM	CURED DISEASES	DEATH	DEFAULTERS	NON RECOVERY	TO STAB. CENTRE
JANUARY	15	2877	328	1	50	1	0
FEBRUARY	15	2769	182	2	66	3	0
MARCH	15	988	100	2	28	6	0
APRIL	13	714	91	0	89	1	0
MAY	15	506	246	0	147	0	0
JUNE	15	483	256	3	132	1	0
JULY	15	658	197	1	29	0	0
AUGUST	15	724	347	8	147	0	0
SEPTEMBER	20	1233	456	3	256	1	0
OCTOBER	25	2857	419	5	149	0	0
NOVEMBER	31	1223	535	4	262	1	0
DECEMBER	31	989	753	7	194	1	0
		16,101	4,208	36	1608	14	0

Progress Report

Achievements in collaboration with NPHCDA;

- Conducted training on life saving skills for the newly deployed midwives.
- Misoprostol drug training for MSS midwives for one day and supply of such drug to MSS cluster centers.
- Supply of some mama kits to the mss cluster health facilities
- NPHCDA in collaboration with Fed Ministry of Women Affairs issued two ambulances to state for emergency obstetric referral program. The ambulances are stationed in Wurno and Bodinga general hospitals of the state. The remaining one ambulance for Tangaza General Hospital is yet to be released by the Federal Ministry for Women Affairs and Social Development, Abuja.
- Undertaken monitoring and supervision of primary health care services across the state.
- Conducted training on health system strengthening in two LGAs of Sabon Birni and Gwadabawa. At moment similar training is taking place in Tambuwal
- Continued to engage traditional and religious leaders on polio eradication activities.
- Review of MSS program in Kaduna in August, 2011 and review of PHC activities in Nov. 2011 in Saminaka town of Kaduna State

Department of M&E

Achievements:

Under the department the following key achievements were recorded as follows:-

- Hired a specialist and a computer analyst on part time to put all necessary structures for effective monitoring and evaluation of the department in the Agency.
- Baseline assessment of all 68 health facilities to be transferred to the Agency was conducted and the data is being analyzed. Essentially, it involves update on staff strength, nature of condition of health facility, equipping situation and other adjunct facilities such as water, ambulance, staff quarters etc.
- Ward Minimum Health Care Package adopted from the National was developed and now ready for printing.
- Operational Plan for 2012 has been developed for implementation.
- Effective Mechanism for SSPHCDA coordination on programme implementation work plan has also been developed.

Department of Disease Control

Achievements:

- It's just coming on board, more meetings to be held with the Ministry of Health for demarcation of responsibilities.
- Rapid Response Team for the control of outbreak has been established with collaboration with the Development Partners
- Community Directed Intervention for Malaria Control Guidelines developed.
- State Working Group on IMCI has been established.
- ORT Corners are established in all sixty-eight (68) facilities of the Agency.

Progress Report

Contribution by Development Partners

A) **World Health Organization (WHO).** The World Health Organization is collaborating with agency to support the state towards delivery of qualitative health care services:

- Giving technical support in the training of all cadres of staff to be involved in the immunization exercise. WHO consultants take active part in the training of personnel for immunization activities with the provision of adequate training materials.
- Direct payment of allowances to personnel involved in the execution of immunization activities.
- Wild Polio Virus and other diseases surveillance and notification activities including delivery of stool sample for analysis to Ibadan reference laboratory.
- Taking part in rapid respond to counteract epidemic spread in the State such as meningitis and measles outbreaks.
- Data generation, collation and analysis for the supplemental and routine immunization activities for planning and action.
- Also complement the state in area of social mobilization for polio eradication initiative by organizing sensitization meetings for Malams and ensure their involvement in campaign execution.

B) **UNICEF:** like WHO is important synergy partner in the area of overall health development in the State. The UNICEF assistance cut across many units of the agency.

- In the area of immunization, UNICEF supports the donation of cold chain equipment such as refrigerator, cold boxes, vaccine carriers, ice liners, and solar energy generation equipment.
- In addition, it supports on the job training of technical personnel to be involved in immunization activities and data management.
- While in the supplemental immunization campaigns, UNICEF take care of Social Mobilization and Logistic Funds for the 23 LGAs of the State. UNICEF usually sponsors some training in the area of reproductive health and nutrition in collaboration with agency.
- The UNICEF in collaboration with state and partners championed the mosquitoes' nets distribution in Dec. 2009 and has been the arrow head of Maternal and Child Health Week scheduled twice in a year.

C) **National Primary Health Care Development Agency** is the body coordinating and implementing primary health care policies and programmes in Nigeria.

- The assistance, the agency receives from this National Agency includes bundled vaccines free of charge and occasionally vehicle, motorcycles as well as refrigerators and bicycles.
- The NPHCDA Agency also spearheads the construction and equipping of Model Primary Health Centers across the Federation. In Sokoto State, in life time of the present administration primary health centers located at Alasan, Gatawa, Gandi, Horo, Bunkari, Balkore, Kilgori, Dange were constructed and equipped by this Agency. Others are Shinaka, Bagarawa, Achida and Yar rume.
- The NPHCDA collaborate with agency in the supervision and monitoring of the performance of the PHCs services in the state.

Primary Health Care Development Agency:

Progress Report

- Another area of collaboration is in the orientation and sensitization of NYSC Corp members deploy to state on PHC activities and need to accept posting to rural areas.
- In Nov 2009, the NPHCDA started the implementation of Midwives Service Scheme which is aimed at ensuring availability of midwives in the rural areas. Nine LGAs namely; Yabo, Tambuwal, Sokoto North, Wamakko, Rabah, Gudu, Gwadabawa, Bodinga and Gada were selected for the scheme. There are presently 144 midwives working in 4 PHCs in each of the 9 LGAs and 72 Female Community Extension Workers.
- A zonal technical officer employed by the agency coordinates all activities of the agency.

D) *Global Alliance for Vaccine and Immunization (GAVI)*

- The Global Agency focusing on the strengthening and revitalization of routine immunization operates under the National Primary Health Care Development Agency, Abuja and corresponding body at state level.
- It supports occasionally, the agency 23 LGAs with funds for strengthening and revitalization of routine immunization in state.
- The areas of supports include, conduct of supervision and monitoring of immunization activities by the state and local government officials, training of technical staff on immunization services, data management training, sensitization workshops for traditional and religious leaders on immunization, repairs of immunization monitoring vehicle.
- Community awareness and sensitization on routine immunization utilization and patronage.
- The GAVI in 2009, renovated all health facilities in Gwadabawa LGA

E) *Medicins Sans Frontieres (MSF)*: This organization has MOU with state in the area of prevention and control of epidemic prone diseases such as Meningitis, Cholera and Gastroenteritis. Recently, it has been involved in the management of severe and acute malnutrition as well as maternal and child health in Goronyo LGA

F) *United Nations Fund for Population Activities (UNFPA)*. This United Nation organization was invited by the State Govt. to complement its efforts in the area of improvement of maternal health care services. The MOU between the State and UNFPA was signed and since then, the organization has swung into operation.

- The Project period was for four years i.e. 2004-2007 but extended to 2008.
- The areas of intervention include the followings; capacity building for doctors and midwives on emergency life saving skills and life saving skills respectively; supply of essential obstetric equipment to all general hospitals in the state and 10 primary health centers in each of 23 LGAs of the state.
- So far, a sizable number of doctors and midwives were trained under this arrangement and equipment worth millions of naira were supplied and distributed to centers satisfied across the state.

Primary Health Care Development Agency:

Progress Report

- Various training for doctors and nurses on reproductive health, HIV/AIDS, contraceptive logistic management systems were conducted both at State and Federal levels. Other activities conducted so far include establishment of voluntary Testing and Counseling Centers for HIV/AIDS at Specialist Hospital and Gen. Hospital. Illela, supply of HIV testing reagents on regular basis and VVF campaigns.
- It is worth noting that a successful VVF campaign was conducted in Feb. 2005 where about 200 patients were operated. Following the successful implementation of the 5th country programme of the UNFPA in the state from 2004-08, the UNFPA authority selected Sokoto state for the 6th CP extending from 2009-2013..
- Programmes and activities are being implemented for the improvement of maternal health. UNFPA has an office and is run by the Zonal Head with supporting staff located within the MOH Premises.

G) *Acquire Project:* This is a VVF oriented Project funded by USAID and the life span of the project will be for five years beginning from 2007 and end by the year 2012.

- The project is targeting control, prevention and treatment of VVF in Sokoto State during the project life span.
- The project was launched in February, 2007 by US Ambassador to Nigeria. So far it has been a success story in the state

H) *IPAS:* This is a relatively small international organization operating and assisting the agency in the area of Post-abortion care by capacity building of doctors and midwives.

- It also provides free contraceptive commodities to some selected health facilities in the state as well as provision of Manual Vacuum Aspiration (**MVA**) instruments.
- Community awareness and sensitization on utilization of maternal health services is also carried out by this organization occasionally.
- A consultant gynecologist from UDUTH, Sokoto and PHC Department coordinate the activities of this organization.

I) *TSHIP: Targeted State High Impact Project, a USAID Funded Project.*

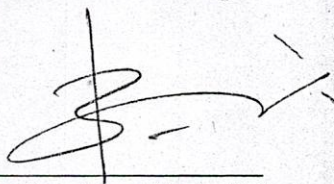
- This is a new but very big Project by USAID and was Launched in March, 2010.
- It is for strengthening of overall health care delivery in Sokoto State ranging from construction of health centers, renovation of health facilities, capacity building of health workers, awareness creation for health service utilization etc.
- It has the largest workforce of all agencies collaborating with the Ministry of Health and the agency. The project will last for five years ie 2009-2014.

Progress Report

Conclusion

Major achievements in the improvement of health care delivery including quality and coordination have been achieved as a result of establishment of the Agency. The coordination and the tracking of the Development Partners activities and programs are better coordinated now than ever and the confidence in the system by the supporting DPs is further boosted in the State.

Commendations and making use of the media to show case State Government achievements on health care sector are becoming increasingly palpable in the State. Robust and real work plan for 2012 programmes and activities have been developed with contributions from Development Partners.



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