

MNCH Program Implementation in a Nigerian Conflict Zone: Community Partnerships with the Local Church and Village Development Committees

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HOPE IN HEALTH: OUR LABOR IS NOT IN VAIN

BACKGROUND

- In an environment of farmer-herder conflicts, poverty and inadequate health facility in North-West and Central Nigeria.
- Funded by the Baker Family Estate, World Renew and its Nigerian partner organization Beacon of Hope Initiative successfully implemented the Maternal New-born and Child Health (MNCH) program promoting good practices in pregnancy and the first 1000 days of life.

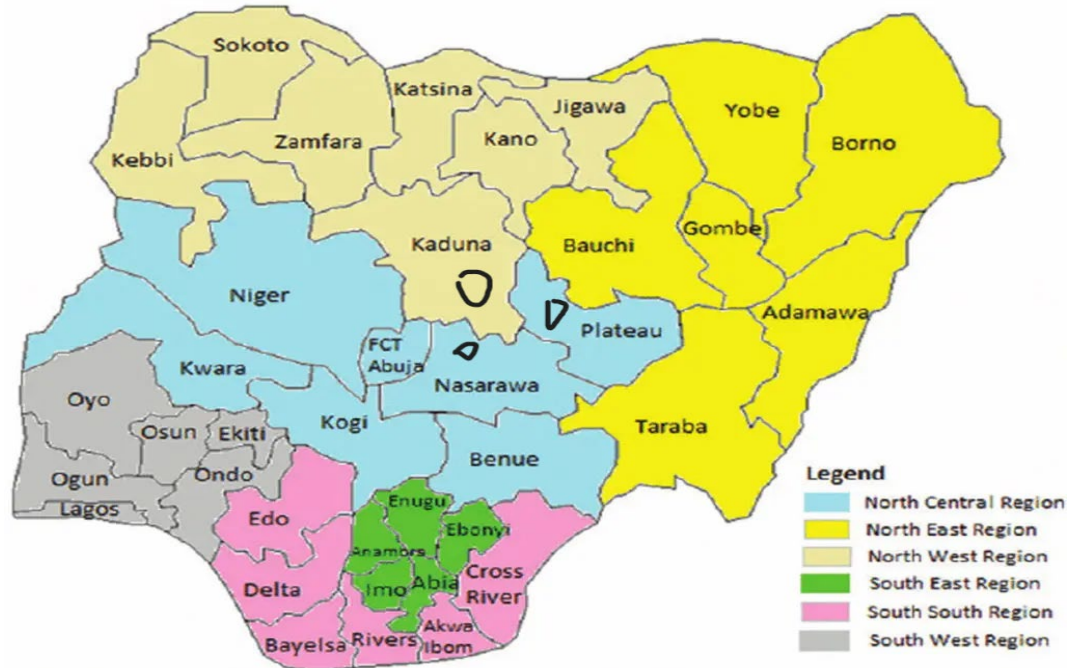


Nigeria: Nassarawa, Plateau and Kaduna States

60 communities

2,983 households

3,420 women



CHALLENGES

Challenges to North – West and Central Nigerian children's health in their first 1000 days

- High maternal mortality
- High rate of Neo-natal and New-born deaths during the first 1000 days of life.
- Poor sanitation
- Malnutrition (Stunting /Wasting)
- Contaminated water
- Under-nutrition of women and Nursing Mothers
- Compromised physical and mental growth and development in Children



CHALLENGES FOR IMPLEMENTING MNCH

Northern Nigeria has experienced insecurity due to conflict between herders' and farmers' communities.

This has made it difficult to address problems affecting Maternal, Newborn and Child Health (MNCH).

Traditional/cultural beliefs about feeding women (during pregnancy) and children have proved to be a hindrance to MNCH programs in this region.

Some communities are difficult to access due to religious and cultural beliefs.



INTERVENTION STRATEGIES

- Advocacy at different levels- Local Government authorities, VDC's Churches and Community Health Care facilities, helped in breaking barriers and mistrust between the communities and the organization.
- Gatekeepers from these communities, selected representatives from both Christian and Muslim faith groups to serve as members of Village Development committees.
- VDCs were then equipped and in turn stepped down the lessons learned in the community and households' levels.



INTERVENTION STRATEGIES

Visit to Churches and Village Head are some of the key strategies in succeeding in MNCH programs in North-West and Central Nigeria.



OUTCOMES OF THE STRATEGY

With the support of the VDC's, Village Heads and Churches we were able to reach the unreached population and communities throughout the life cycle of the program.



OUTCOMES OF THE STRATEGY

Improved health of pregnant and nursing mothers and their children.

Structural barriers in accessing health care services are bridged through home visits with a focus on mothers and young children during the first 1000 days.



OUTCOMES OF THE STRATEGY

Communities promoted women's and children's health through the construction of latrines, maintaining health facilities, and provision of transportation in times of emergencies.



BEST PRACTICES OF THE MNCH PROGRAM

- Sustainable nutrition education
- Establishment of kitchen gardens
- Water purification.
- Improved sanitation.
- Stakeholder engagement with LG Officials ,VDC, Religious and Community Leaders.
- Comprehensive male engagement strategy.
- Capacity development of healthcare providers.
- Participants leading roadshows and drama at market squares, and women's meetings.



Thank You

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