The Challenge Initiative (TCI) accelerates positive changes in reproductive health outcomes through the scale-up of homegrown proven solutions that expand access to quality health services and reduce unmet need for family planning. TCI is guided by principles of a demand-driven model, which requires states to self-select to be part of the TCI network and benefit for the technical and financial support the TCI platform provides. TCI is pioneering a new way of thinking and operating to help support local governments efficiently and effectively drive their own health programs - we refer to this new mindset as “Business Unusual”. TCI currently works with 11 states in Nigeria.

Editor's Note


In supporting state governments to implement proven-to-work family planning interventions, TCI adopts demand-driven model which allows states to actively self-select to be part of TCI and bring in their human and financial resources to implement proven-to-work family planning interventions. We are most proud of the steps taken by our partner states – Abia, Anambra, Bauchi, Delta, Edo, Kano, Niger, Ogun, Plateau, Rivers and Taraba – to adapt and implement high-impact family planning interventions to improve the reproductive health of their communities.

It has been an eventful three years since we commenced implementation in Nigeria. Each year has brought new lessons, challenges and achievements. We have learned and unlearned and adjusted our program implementation accordingly to ensure sustainable impact. As we enter our fourth year of implementation, we have decided to commence sharing our joys packaged in this bi-annual newsletter which chronicles the accomplishments, learnings and new thinking in championing innovation in reproductive health development in Nigeria.

Welcome to TCI and happy reading!

Dr. Victor Igharo
Director, TCI Nigeria
Adoption and Diffusion of the 72-hour Clinic Makeover

The 72-hour Clinic Makeover is an innovative approach pioneered by the Nigerian Urban Reproductive Health Initiative (NURHI) in Nigeria. The approach seeks to ensure a conducive environment for the uptake of quality family planning services by renovating high volume health facility sites with community manpower and support in just three days. In executing the model, renovation commences at the close of business on Friday and reopens for services afresh on Monday. TCI is taking this cost-efficient strategy for renovating health institutions to scale in all its supported states.

Two supported states, Bauchi and Plateau state, have used the 72-hour Clinic Makeover model to renovate a collective total of seven health facilities. The two states provided funding and technical oversight for the makeovers with TCI providing technical assistance to the states.

The Plateau state government adopted the 72-hour Clinic Makeover model to refurbish two health facilities in the state after observing TCI's demonstration of the approach in five health facilities in the state. Drawing from the lessons learned during TCI's demonstration, the Plateau state government through the
State Primary Health Care Board renovated two Primary Healthcare Centres (PHC). The focus was on the entire facility, not just on the family planning units of the facilities; the aim of renovating the facilities as a whole instead of just specific units was to ensure that the positive impact of the makeover on service providers is felt by all members of staff in the facilities, not just by the FP service providers.

The Bauchi state government renovated a total of six health facilities in the state using the 72-hour Clinic Makeover model and plans to makeover an additional five health facilities using the model.

The replication of the 72-hour Clinic Makeover by the Bauchi and Plateau state governments has demonstrated the states’ capacity to take this proven approach to scale and diffuse it throughout the states, which will ultimately ensure greater access to quality health services throughout both states.

Costed Implementation Plan developed in Taraba State

In line with its objective of supporting government to lead and drive implementation of family planning programs, TCI provided technical assistance to the Taraba state government along with funding from Marie Stopes International to develop a family planning costed implementation plan (CIP). Drawing on learnings from Ogun, Bauchi and Delta states which were also supported to develop the CIP, the Taraba CIP development process was driven by data and evidence from routine data, surveys and emerging program priorities. Plans are ongoing by the state to print, disseminate and operationalize the CIP.

TECHNICAL FOCUS

From Referrals to Completed Referrals: Bridging the Gap

Olumide Adefioye, TCI Social Behaviour Change Communication Officer

Background

Social mobilization which is one of the impactful demand generation strategies include neighborhood campaigns, sensitization at association meetings, community engagements, key life events as well as voluntary mobilization. These activities are led by Local Government Area (LGA) Health Educators with support from Social Mobilization Assistants (SMAs) trained by TCI. These two groups supervise TCI-trained social mobilizers as they engage in interpersonal communication with community members and conduct referrals during social mobilization activities. While these social mobilization activities have been proven to have high impact in reaching potential family planning clients, there was a wide gap between number of people referred during these activities and the number of people completing the referrals, that is, the number of people who after collecting the referral card went to the health facilities for the uptake of family planning service.

The demand generation strategies resulted in a 12% increase in completed referral rates. Learn more about how the program diagnosed the challenges and employed effective strategies.
IN OTHER NEWS

The Male Pill: Oral Hormonal Contraceptives for Men

Ever heard of the male pill?

According to an article published in the February 2019 edition of the Journal of Clinical Endocrinology and Metabolism, a new prototype of the male pill, a hormonal contraceptive, has passed preliminary safety and tolerability tests in healthy men. Oral dimethandrolone undecanoate (DMAU), a modified testosterone that combines the action of an androgen (a male hormone) and a progesterone, was administered once a day for 28 days. Eighty-two subjects completed the double blind, randomized, placebo-controlled study. Safety and tolerability parameters were measured, as well as drug pharmacokinetics profiles and pharmacodynamics effects.

This study was published in the February 2019 edition of the Journal of Clinical Endocrinology and Metabolism. Read the full article.

STORIES

Improving Access to and Quality of Family Planning Services

Meeting Unmet Need for Family Planning Through Facility-Based In-Reaches in Delta State

The facility based in-reaches are a proven strategy for improving access to family planning services. Facilities where there has been a low uptake of family planning services are selected specifically for facility-based in-reaches. Clients from communities close to the facility are mobilized to the health facilities on the selected day for the in-reach.

Learn more about the facility-based in-reaches in Delta State.

24-Hour Services Commence in Kabuga Primary Healthcare Facility, Kano State

Following the completion of 72-hour Clinic Makeover in six health facilities including Kabuga PHC in Kano state, the health facility now operate 24-hour services to ensure that the facility is not underutilized and to guarantee that members of the community enjoy the benefits of the enhanced facility. More health personnel were posted to Kabuga PHC to ensure smooth provision of round the clock services at the
health facility. Speaking on the transformed status of the health facility, Usman Muhammad, a Community Health Extension Worker and the Officer-in-Charge of Kabuga PHC said:

**“72-hour Clinic Makeover is the most important health intervention I have witnessed in my life. With the 72-hour renovation in my facility, several benefits have come, one of them is the commencement of 24/7 healthcare services, which would have been impossible before the renovation. The renovation upgraded my facility and made it conducive; before, we did not have water and we had epileptic power supply. But now everything has been fixed.”**

Usman also commented on the benefits of the improved facility to the community saying,

**“Before this development a woman in labor especially in the night had to go to Jakara or Murtala Hospitals straight, but now they can be attended to at whatever time and can appropriately be referred to another hospital as the case maybe.”**

Learn More about how the 72-hour Clinic Makeover also elicited philanthropic contributions in Ja’een Primary Healthcare Facility, Kano state., Alhaji Uba Dan Zainab donated a male ward to the facility.

**Taking the 72-hour Clinic Makeover Beyond TCI-Supported States & Nigeria**

The innovative 72-hour Clinic Makeover strategy has been replicated beyond TCI-supported geographies in Nigeria. In January 2019, a team from Uganda visited Nigeria to understudy the 72-hour Clinic Makeover in Niger state, Nigeria. Following their learning visit, the team used the strategy in renovation of health facilities in Uganda.

Within Nigeria, Planned Parenthood Federation of Nigeria (PPFN) learned the 72-hour Clinic Makeover strategy and deployed it in Gombe state, a non-TCI state.

The journey to replicating the strategy in a non-TCI state started with a contraceptive technology update (CTU) organized by Bauchi State. TCI introduced the 72-hour Clinic Makeover and implementation process to policymakers, technocrats and other implementing partners during the update and invited interested participants to implement the approach. PPFN representatives in attendance during the CTU felt that the approach could help them expand access to sexual and reproductive health services in Gombe state. PPFN asked to observe 72-hour makeovers implemented at five facilities in Katagum LGA, Bauchi state in March 2019 to learn and prepare for adapting the approach for its facilities in Gombe state.
Increased Client Turnout and Uptake for Family Planning Services Achieved through 72-Hour Clinic Makeover in River State

Increased uptake of family planning services and increased uptake of other maternal health services are tangible results experienced following 72-hour Clinic Makeover of health facilities. An improved environment invariably attracts clients to health facilities, this was the case at Model Primary Health, Churchill, Rivers state following the renovation of the health facility in May 2019. Mrs. Mercy Kumanwe Dan, the Chief Nursing Officer-in-charge/FP Focal Person at health facility, noted that the turnout of clients following the makeover was the highest since she started working at the facility.

She said,

“On the day of the Makeover, we worked as if we wanted to die! In fact see work! Anything free in this environment people come out once you talk to them. Throughout that week of makeover people kept on coming, some with the referral card they were given. On that day alone, about 30 persons took up FP methods and services.”

Mrs. Mercy also said uptake of delivery services increased following the makeover,

“Since I came in here as the Matron-in-charge, we mostly record about 8-10 deliveries every month. If we get 15 deliveries, we thank God self. For this month of May, we had 26 deliveries in the maternity.”

Enhancing Knowledge of Family Planning and Transforming Mindsets

To address the gaps in leadership and technical capacity to govern and manage FP programs effectively, TCI applies a blended learning and capacity development approach that is comprised of technical assistance through coaching and leadership enhancement. TCI Nigeria supports states to lead and implement family planning interventions using our Lead, Assist, Observe Coaching model. This model comprises of a blend of facilitation and demonstration techniques, on-site and virtual technical coaching and mentoring, and leadership and coordination support.
Strengthening Capacity for Adolescent and Youth Reproductive Health Programming in Niger State

When TCI came into the state, the adolescent desk was in existence but with suboptimal capabilities and little coordination progress. However, Hajia Fati, the Adolescent Health Desk Officer of Niger state, who had a clinical background has to transition from a service provider to program management-oriented role. The commencement of TCI’s Life Planning for Adolescents and Youths (LPAY) program provided Hajia Fati with the opportunity to develop skills and knowledge with respect to AYRH program design and implementation. TCI also coached Hajia Fati on technical writing, presentation and public speaking skills, engaging with government, implementing partners and community-based organizations. Through series of values clarification sessions, she was also reoriented on right-based youth programming and the tenets of meaningful youth engagement.

Speaking on her increased capacity and confidence, Hajia Fati said:

“Prior to TCI’s support for AYSRH intervention in Niger state, I knew that adolescents and youths made up a huge chunk of unmet needs for FP but I knew little or nothing about strategies and approaches to reach them. In the past 12 months, TCI built my capacity on ways to engage these youths and make services available for them. I used to be a shy person and experience stage fright, but since engaging with TCI, I have built my self-confidence and can speak publicly.”

Read more about this approach and Haijia Fati’s story.

Right Information, Stronger Agency and Lasting Action – How TCI Equips Women and Girls to Own their Future

One of the results of TCI’s AYRH programs in increased uptake of contraceptive services by adolescents and youths between the ages of 15 to 24 years. Deborah David, a 22-year-old from Ungwan Mata new Kabong Jos north LGA of Plateau state, accessed contraceptive services following an encounter with a TCI-trained Social Mobilizer in her community.
**Deborah’s Story**

I have primary school certificate only because my parents were unable to pay school fees. My only source of income is to do routine sales rep jobs such as promotion of item for companies most especially indomie noodles which is seasonal.

When I was 15 years I got pregnant and gave birth at the age of 16 years, I was forced to go and live with the man that made me pregnant. After the birth of my baby I left, he took my baby away from me. The baby girl is now 6 years old. Because of lack of information on safe sex and pregnancy prevention options for me, I got pregnant again 3 years ago and gave birth to a baby boy who sadly died last year due to a childhood illness.

I thank God I met a social mobilizer in my community who shared with me various options for preventing pregnancy and advised me that since I can’t abstain from sex I should stop having unprotected sex; with her advice I went to the facility and accessed 5 years FP service known as Jadelle to prevent me from unwanted pregnancy. I have also advised many of my friends to do the same because in my community abortion is very common and is not safe as most girls visit quacks to get rid of pregnancies.

I now know I don’t have the fear of getting unwanted pregnancy and I plan to save money from my job and further my education. This will help me become a better person in the future.

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**Islamic Religious Leader Spreads Family Planning Messages at Naming Ceremonies**

Religious leaders have been proven to be trusted sources of information for the Nigerian people. TCI therefore works with religious leaders to promote uptake of family planning services among their congregation. A religious leader in Ogun State, Nigeria, is embedding family planning messages while speaking at naming ceremonies, which are conducted eight days after birth to give the baby a name and pray for it. This event is usually attended by family and friends. Alhaji Shefiu Misbah-ud-Deen (Al-Ameeriy), the Missioner of Ansar-ud-Deen Society, Ijebu Mushin Branch in Ogun State looks at the ceremony as an opportunity to spread the word about family planning.

Alhaji Shefiu, a member of the Interfaith Forum in Ogun State, was one of the Islamic religious leaders trained in family planning advocacy and messaging by TCI. He also received copies of Islamic Perspectives and Sermon Notes on family planning. Following his training, Alhaji Shefiu identified naming ceremonies as a relevant platform for disseminating family planning messages.

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Islam is not against family planning or childbirth spacing, it supports it. In the Qur'an, God instructed that children should take care of their parents because they are very important and when you deliver a child, make sure you breastfeed the child for 30 months, 2 and half years. When you breastfeed for two and half years and you want to have another child, the first one will be almost three years of age, if we observe this, it has a lot of advantages, the mother will be able to recover fully before having another child, when breastfeeding, the mother and child will be healthy.
In addition to asking women to adopt family planning methods, Alhaji Shefiu also encourages male involvement in family planning.

"The man also has a key role to play in protecting their wives during intercourse, they can use condom. When we do this, it will help prevent unplanned pregnancy, the woman can also visit the health center to do family planning this will promote her wellbeing. When the child starts school, the pressure of paying school fees will be reduced if we space our children properly unlike when we give birth to them without spacing, it will affect our quality of lives."

Increasing Government Commitment to Family Planning Program Areas

Family Planning Budget Created in Abia State

Before TCI’s entry to Abia State in June 2018, Family Planning was not considered high priority in the State, partner support for family planning was negligible when compared with support received for other reproductive health programs and the family planning unit in the state planned activities totally dependent on partner funds. TCI conducted a net-mapping exercise in the state to identify resources that could be harnessed in support of family planning. Following the net-mapping, TCI provided technical assistance to the state to institute and inaugurate the Advocacy Core Group in the state and trained the ACG on family planning, SMART Advocacy and the development of advocacy materials. The ACG then developed factsheets and advocacy briefs on family planning and working with media-based advocates, targeted policy makers using those tools.

As a result, the Abia state government approved N200 million ($552,000) in the released 2019 budget estimates, marking a new beginning for the family planning program area. TCI’s investment, advocacy and demonstration of high impact interventions in Abia State resulted in the State Government budgeting 200 million Naira for Family Planning interventions in its 2019 budget estimates for the very first time in the history of the state.

Historic investments in FP

Abia State budgeted N200 million for family planning interventions in its 2019 budget estimates.

The Advocacy Core Group in Anambra push for removal of Family Planning user fees

Family planning user fees presents as a major barrier to family planning in Anambra State. Through a net-mapping exercise, TCI worked with state counterparts and community members to identify influencers in Anambra State who could be candidates for an independent pressure group. TCI facilitated the establishment of the Anambra state Advocacy Core Group (ACG) positioning and equipping it as the premier independent pressure group to engage with government to ensure accountability, enabling environment and resources for family planning.

Following several visits to the Chairman of the Anambra State House of Assembly Committee on Health, the Special Advisor on Health to the Governor and the Anambra State Commissioner of Health, the ACG advocated for the removal of user fees, explaining that service delivery fees are a significant deterrent to family planning uptake. As a result, the commissioner promised to present the issue to the state governor. The governor then issued an official policy statement in January 2019 directing that user fees for family planning and immunization services be removed.
Women in Anambra state can now access family planning services without paying any service fee. The State Primary Health Care Development Agency and Local Government Area health departments are currently monitoring the situation to ensure full compliance with the directive.

"Since the removal of user fees, there has been remarkable increase in the turnout of clients for family planning and other integrated services rendered in the facility," said the officer in-charge of a maternal and child health center in the Anambra town of Ogibi. "Monthly data show an increase from 40 clients to about 70 or more."

Champions for Change promoting Family Planning in Taraba State
TCI works with the state to identify notable stakeholders who can amplify discuss and uptake of family planning and facilitate an enabling environment for family planning to thrive. In Taraba state, the District Head of Muri was identified as being passionate about reproductive, maternal, newborn and child health, and subsequently decorated as a family planning champion. Being also the Chairman of the state’s social mobilization committee at the time, he was instrumental to the expansion of the committee into the Social Behavior and Change Communication (SBCC) Committee in February 2019. Under his leadership, he continues to coordinate the growth and development of the SBCC committee, making FP a mainstay of the platform. With the decoration of the District head of Muri, the state now has two notable and passionate family planning champions in the southern and northern senatorial zones of the state. Speaking after his decoration, Alhaji Lamido Tukur said:

"Over time as the District Head of Muri Emirate Council, I have had to face the challenge of so many of my adherents coming to meet me to solve several family welfare related issues. Particularly, payment of hospital bills, school fees and even providing food for certain families. I have noticed that most of these families that I supported have large number of children that they could not cater for. So, prior to now, in my own little way and informally, I had always spoken in favour of family planning. My greatest joy today is seeing Taraba State take the lead in Family Planning with support from TCI. Also as the SBCC chairman, the knowledge and interaction that I have gained from TCI orientations, with the large support base that the council covers, I will utilize every gatherings and events to publicly sensitize people on the benefits of family planning, dispelling every myths and misconceptions related to Family Planning and also promote the use of integration of health care services."