

AN EXTRA MILE FOR IMMUNIZATION: A CASE OF BAUCHI AND SOKOTO STATES, NIGERIA



0-72 hours children referred by TBAs waiting to receive immunization at the Women and Children Welfare Hospital
Photo credit: Stella Abah, LGA Polio Monitor, TSHIP Sokoto

It was a cold morning in Gagi, a rural community in Nigeria's northern state of Sokoto. Thirty-eight year-old Jummai Abubakar, a traditional birth attendant (TBA), adjusted her scarf, the only shield from the harsh harmattan wind, as she made a second attempt to announce her arrival at a family compound. She called out "Mun dawo!" (Meaning "We are back!"). She was returning from the Gagi health clinic where she had taken Saddiq, the family's six week-old baby, for his required immunizations. Without further hesitation, Jummai entered the compound just as Saddiq's twenty-two-year-old mother rushed out from one of the compound's humble rooms. Saddiq's mother smiled as she received her well-wrapped child from Jummai. "I am very grateful that Jummai was able to take my son to the clinic," she said. Jummai expressed her delight as she headed out. She had to make a few more stops before noon.

As Jummai trekked along the dusty road, she shared her perspective on the low immunization coverage in the area. "Some women still do not understand the benefits of routine immunization. Sometimes when mothers are willing to take their child to be immunized, the husband will not permit them to do so," said Jummai. The situation in

Gagi is similar to other rural communities in Nigeria. Despite an increase in global immunization coverage, Nigeria is still lagging behind, reaching only 52% coverage (National Immunization Coverage Survey, 2010). Although this represents an increase from 18% in 2006, there is a need to intensify efforts in order to meet the 2015 Millennium Development Goals. Nigeria's northern regions are major contributors to this low coverage rate. This negative trend is largely caused by the fact that the majority of deliveries occur in homes, making it difficult to track newborns and children under the age of five.

To improve the situation, the United States Agency for International Development (USAID), through the Targeted States High Impact Project (TSHIP), is engaging TBAs to refer newborns and children to nearby health facilities for immunization services. Using the training provided by TSHIP, TBAs have continued to educate parents on ways to protect their children through immunization. However, the TBAs have done much more. "I track newlyweds also and encourage them to visit the health facility for antenatal care and thereafter visit the health facility for routine immunization. I also offer to take the children to the health facility for immunization if the mother cannot," said

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Jummai. In most northern communities, new mothers are not permitted to leave their homes for a period after delivery. During this time, the child and mother are deprived of immunizations and post-natal services, thus leaving them in harm's way.

Thanks to the efforts of Jummai and several other TBAs, the number of immunized children in these communities is increasing. Showing off her branded bag and its contents, Jummai explained how she records her activities. "I use two different cards. The yellow coded cards are used to refer newborns and children for vaccination." The TBAs are required to conduct follow-up visits to households to ensure that the children have received immunizations. "If the child has not been brought to the health facility, I retrieve the yellow card and give the parent a red card." The red card clearly designates the child as a defaulter. "Sometimes it is just easier to take the child myself; this way, we have fewer defaulters," said Jummai.

In northern Nigeria, TBAs are well respected, so it is easier

for the husbands to allow them to take children for immunizations. At the health facilities, service providers keep track of the referred children using immunization registers. They compare records in the registers with entries in the TBA's notebook and stubs from the color coded cards. The service providers also provide ongoing mentorship to the TBAs. According to health facility records, Jummai and her counterparts increased the number of children immunized by more than 80,000, which represents 36% of the total number of children immunized in Nigeria's Bauchi and Sokoto states between October and December 2011.

In Gagi and several other communities, where 1,104 TSHIP-engaged TBAs work, their roles are changing. Although they are still supporting women and children, this time, they are using their influence effectively to increase and promote health-seeking practices. "We will continue to play our part," said Jummai. "Ultimately, our children and mothers will be better off for it."

0-72 hours child tracked in the household and was immunized while she was receiving her first birth
Photo credit: Stella Abah, LGA Polio Monitor, TSHIP Sokoto



This publication is made possible by the generous support of the American people through the United States Agency for International Development (USAID). The contents are the responsibility of JSI Research & Training Institute, Inc. and do not necessarily reflect the views of USAID or the United States Government