



We envision an Africa with Universal Health Coverage (UHC) where there is no health inequality irrespective of one's socioeconomic status.



#### **CONTENTS**

Executive Summary	6
Milestone	7
Community Based Interventions	8
Conference & Events	9 - 18
Media Engagement & Campaigns	19 - 20
On the Spot Assessment; Some PHC WASH Facilities in Nigeria	21 - 22
Social Media Footprints	23
Advocacy Visits & Partnership Engagements	26 - 28
Photo Splash	32 - 34
Our Partners	. 35
Acronyms	. 36



#### **ABOUT US**

PHC Initiative Africa, founded in 2019, is a nonprofit organization disrupting the irregularities in the Nigerian health care system and Africa at large; through the use of simple, innovative, cost-effective, locally adaptable and sustainable strategies by our multisectoral approach to primary health care. We develop and implement appropriate solutions that seek to improve health system strengthening for a primary health care service delivery that ensures health equality, equity and optimized healthcare outcome for the most vulnerable. We strengthen primary health care through shifting focus largely from curative to preventive care in order to strike a balance on health equality. This is done through advocacy, influencing policies that can transform the health of the people. We reach out to the government and the led; the community and its people. Here, it is about synergy targeted at ensuring health for all.

This organization was born out of the dare need to ensure common Nigerian masses have access to quality health care service delivery at all times irrespective of location, socioeconomic status and financial capability. In the last two years, we have worked mostly in the Northern Nigeria which has the highest regional disparity rates for health, poverty, education, and other development indices. The North-East is ravaged by 12 years of conflict which has reduced the nutritional status among children and women, created severe adverse effects on population health, weak health system, and devastated the already fragile public infrastructures, such as health, education, water, sanitation, and other public service capacities to protect children in fragile humanitarian settings



#### **MISSION:**

We strive to see a strengthened and sustainable primary health care system that supports healthy communities.

#### **VISION:**

An Africa without health inequality.

#### **Our Core Values:**

- PASSION.... Our drive
- PEOPLE.... Centered around the people
- ADVOCACY ...This is central
- INNOVATION .... Beyond just seeing the problem, we create solution
- SERVICE.... Committed to serve
- PARTNERSHIP.... Key in what we do
- ACCOUNTABILITY & TRUST.... We are accountable and can be trusted

#### **OUR THEMATICS**

- PRIMARY HEALTH CARE CENTERS
- MATERNAL NEONATAL AND CHILD HEALTH (MNCH)
- WATER SANITATION AND HYGIENE (WASH)
- COMMUNICABLE DISEASES
- NON COMMUNICABLE DISEASES (NCDs)
- NUTRITION
- MENTAL HEALTH



## **OUR TEAM**





Zakari Isiaka Osheku

EXECUTIVE DIRECTOR



Harrison Onunaezeh
DIR. PROGRAMME & STRATEGY



Shehu Mohammed Hassan DIR. RESEARCH & TRAINING



Mikailu Abdulrahman DIR. POLICY & ADVOCACY



Dorcas Samaila



Hikmat Zakari ASST. PROGRAMME MANAGER





Afia Butt Q.
NUTRITION ADVISOR



Judith Okuson MNCH ADVISOR



Imasuen Omo wash/environmental health advisor



Idris Olumide COMMUNICABLE DISEASE ADVISOR



Zainab Usman Gele



Chinelo Uzomaka O.
PROGRAMME ASSOCIATE



Ridwan Adegoke
PROGRAMME ASSOCIATE



Sanusi Danjuma Sanusi GRAPHICS DESIGN MANAGER



In the year 2020, the world was medically challenged, scientifically worried, educationally stalled and economically affected due to COVID-19 pandemic. The effects were massive, as even the technically advanced countries with good healthcare system were not left out. The COVID-19 pandemic has further highlighted and exercebated the gaps in health care; eroded the gains of decade investments in health care.

I have always held the opinion that health is the nucleus of a nation to which every other sector points to. In view of this, our approach to primary health care strengthening has always been an inter-sectoral one, touching every sphere of human existence.

No doubt, in Africa, lies most of the health challenges and it seems hopeless. So, our choice for Africa was not accidental, it was pertinent for we Africans to take up the heinous task of distrupting the irregularities in its healthcare system by entrenching proactivity in preventive to promotive care than treatment.

So far, the team I lead, has tremendously focused on our singular mandate of strengthening primary health care despite the numerous challenges.

I am humbled to lead such a great team of young, vibrant, experienced, focused and highly intelligent professionals.

We are number one in primary health care strengthening in Africa.

Hence, to further strengthen our capacity for a better health care outcome of the most vulnerable in Nigeria and Africa, we look forward to more partnerships.

Finally, I give credit of our numerous impacts, encapsulated in this report, to the entire team of PHC Initiative Africa and various partners for the period under review for their undeterred supports and unalloyed commitments.

Zakari Isiaka Osheku Executive Director PHC Initiative Africa

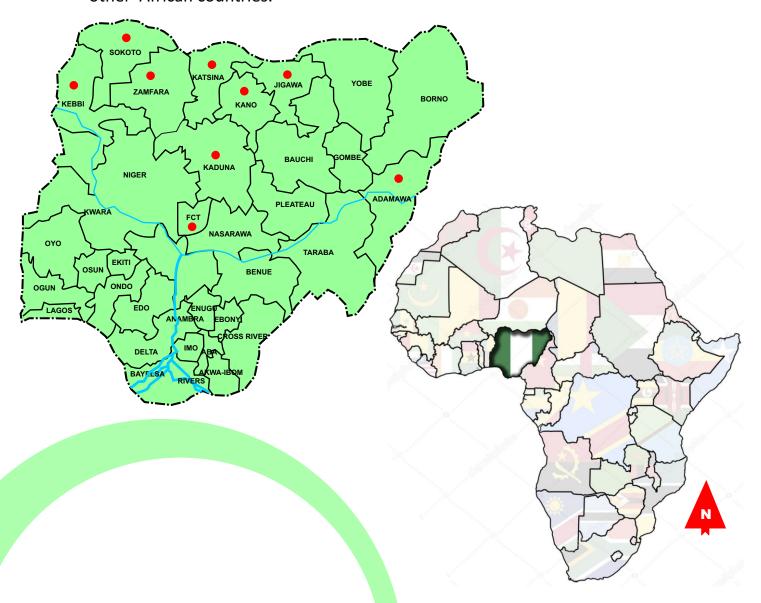


#### **MILESTONE**

In Nigeria, we have successfully carried out our interventions with the support of our Primary Health Care Advocates (PHCA) in the following states.

- Kaduna
- Kano
- Sokoto
- Kebbi
- Jigawa
- Zamfara
- Katsina
- Adamawa
- Abuja

We plan to extend our existence beyond the shores of Nigeria to include other African countries.





## **Community Based**

#### **INTERVENTIONS**



Our interventions range from community based projects, research and training, which covers a wide spectrum of individuals to improve the performance of primary health care strengthening by lowering the overall health care expenditure, while enhancing the population's health and access. This helps to prevent and control the spread of both communicable and non-communicable diseases among targeted communities. In the last two years, we have developed various innovative strategies that are cost effective, efficient and equitable in the implementation of our programmes which are multi sectoral. These include Covid-19 Train the Trainers, Breastfeed the Future, My Health Sure and Nurse per School campaign, all centered on demand generation.



# COVID-19 Train The Trainers: Our response to the Pandemic





During the peak of the COVID-19 Pandemic, we provided capacity building worth \$2,350 for 100 frontline health workers across some selected PHCs and private clinics based on the need assessment carried out on Infection Prevention Control (IPC) for COVID-19.

Participants for this training were carefully selected from the various departments of the hospitals, so they can conduct a step down training in their various units.

This was possible with support from the Kaduna State Primary Health Care Board.





Virtually, we also trained 525 frontline health workers, mostly community health extension workers (CHEWs) on IPC for COVID-19 accross Nigeria.

Capacity Building IPC For COVID-19	INPUT	RATE (\$)	VALUE PER 100 PERSON
	Certificate	\$4	\$400
	Training Manual	\$8	\$800
	Refreshment	\$5	\$500
	Face mask	\$0.5	\$50
	Hand Hygiene buckets	\$2.5	\$250
	Staff Time	\$350	\$350
	TOTAL		\$2,350







## BREASTFEED THE FUTURE:

Improving The Breastfeeding Culture among potential mothers in Northwestern Nigeria





During the world breastfeeding week 1st to 7th of August, 2020, we launched a project tagged Breastfeed the Future, aimed at improving breastfeeding culture among the grassroot women in Nigeria through training at least 10,000 breastfeeding counselors who will provide skilled breastfeeding counseling on exclusive breastfeeding, Zero water, only breast milk for six (6) months to potential mothers across the seven (7) states of the Northwestern Nigeria by 2025. As part of our advocacy, between August, 2020 till December, 2021, we have had 17 media appearances on radio, promoting exclusive breastfeeding.

This project is currently running in Kaduna as the pilot state. So far we have trained about 391 breastfeeding counselors in Kaduna, hoping to scale up to other states in the region.



## MY HEALTH SURE:

## Community Centred Advocacy Onliversal Health Coverage.

Less than a decade to the attainment of Universal Health Coverage (UHC), Nigeria seems very far from reaching the SDG Target 3.8, despite the National Health Insurance Act passed into law in 2004. Till date, less than 5% of the country's population is covered after 15 years of commencing the scheme. Of those covered, a substantial amount are those under the pay-roll of the federal government which is under the formal sector. And this formal sector only constitutes a minute percentage of the population going by the World Bank stating as 80.4% employment from the informal sector living the number from the formal employment as small.

In view of the above and upon our engagements, it was identified that there was low awareness of what health insurance means and how to get involved, especially from those who are not under any formal employments. Hence, there is urgent need for an aggressive advocacy campaigns on UHC in some selected disadvantaged states in Nigeria ravaged by terrorism, banditry, kidnapping and high illiteracy level or high poverty index. So the goal of My Health Sure, is to create more awareness on the benefits of health insurance in Adamawa, Borno, Yobe, Zamfara, Sokoto, Kebbi, Benue, and Kaduna States and the need to take charge of their health by leveraging massive amount of recyclable waste within their environment.

My Health Sure was officially launched with Kaduna as a pilot state on the Universal Health Coverage Day, December 12, 2021. This advocacy is evidence centred, targeting the informal sector population of the northern states of Nigeria badly affected by terrorism, banditry, kidnapping, illiteracy and/or poverty.

Our goal is to reach out to a minimum of 10,000,000 people by the end of 2025 across the states with our call to action UHC advocacy campaigns through:

- 1. Radio
- 2. Townhall meetings
- 3. Worship centers
- 4. Traditional institutions
- 5. Trade unions
- 6. Digital space



As part of the celebration of Universal Health Coverage Day on 12th Dec. 2021, we kicked off My Health Sure campaign by paying health premiums for 5 socioeconomically challenged widows in Kaduna State to start accessing health insurance immediately for a period of one year.



#### **ECONOMY**

We understood that most of our targeted populations are poor - including the 5 widows we paid premiums for – knowing they could hardly sustain this insurance on their own. We empowered them how it can be sustained leveraging recyclable wastes which are readily available in their environment in exchange for health insurance in collaboration with one of our partners, a low cost health insurance company.

**IMPACT** 

Improved access to basic health care services

Plastic-free environment

**Reduced OOP** 

Reduced AMR



#### Private Sector (PSE) Involvement In Universal Health Coverage (UHC)

Based on the private sector landscape assessment by the WHO, the PSE constitutes over 50% of the health sector, hence its involvement in UHC cannot be overemphasized. Similarly, primary health care (PHC) is of fundamental importance to the attainment of UHC in Nigeria as a whole.

Hence, our CFP-Framework is specifically designed for both the PSE and the PHCs

#### What is CFP-Framework



CFP-Framework means Community, Facility, Package - Framework which is geared to towards driving the enrolment of people particularly from the informal sector through this innovative framework that is strategic by working with the communities and the facilities, in this case the PSE and the PHCs. This CFP-Framework is to create a robust collaboration between the facility and the community closest to it.

#### Who Are Our Target

Broadly, they are divided into:

Community: Our major target under this framework is the informal sector. Working with the community heads in clusters, we reach out to them easily.

Facility: We target private health care providers and primary health care centres

#### **Our Strategy - ITEM**

Identify: In view of the importance of private health care providers to the attainment of universal health coverage (UHC), we identify private health care providers not part of state health insurance schemes and are profiled to find out their reasons and possible challenges. Also, we identify and understudy those under the scheme for gaps and challenges. Then, we intervene.

**Train:** Where lapses or gaps exist, we train or offer solution to the facility based on the facility's need.

**Engage:** Having identified facilities and trained where necessary, we engage the community through advocacy on health insurance and the dangers of not being involved. We equally engage the agency with technical supports after our findings.

**Monitor:** Finally, the implementation of this CFP-Framework is monitored and evaluated from time to time for possible improvements using its model.

#### The Magic Of This Framework

The implementation of this framework to latter helps in tens and hundreds of enrolments depending on the number of clusters used.



### CONFERENCE, TRAININGS & EVENTS AFRICA CONFERENCE ON PRIMARY HEALTH CARE 1.0



On the 9th of January 2021, we launched our first Africa Conference on Primary Health Care in Nigeria, with the theme: Leveraging Digital Health to Strengthen Primary Health Care. The essence of this conference was to engage stakeholders from different sectors, relevant to health in Africa in order to drive policies for an improved health system strengthening. This was a two-day conference centered on addressing the gaps in digital health in Nigeria. We had eleven (11) physical attendants and fifteen (15) virtual attendants.

Our team are already engaging stakeholders for the participation of the next Africa Conference on Primary Health Care 2.0.







## C ONFERENC Public Health in Africa

This was Africa's 1st international public health conference that provided a unique platform to discuss #COVID19 response, prepare for the next health crisis and build a more resilient Africa, hosted by the Africa CDC and African Union, with support from an Organizing Committee of public health experts from Africa and around the world on 14-16 December, 2021. This Conference on Public Health in Africa 2021 was celebrated with the hashtag - #CPHIA2021.

Our Executive Director, Zakari Isiaka Osheku, along side Communicable Diseases Advisor, Idris Olumide Orelonu, were among the 12,364 attendees across the world.

#### On Route to Rwanda #CPHIA2022

As an organization who leads in her advocacy on primary health care strengthening in the African continent, we have to be in Rwanda for the 2022 Conference On Public Health In Africa (CPHIA) to share our experience in the work we do while sharing our simple, innovative, cost-effective, locally adaptable and sustainable strategies that are multisectoral.

In addition, we are open to more learning, networking and collaboration as we look forward to being in Rwanda come 2022.

Already, here are our proposed attendees for Rwanda #CPHIA2022:

- 1. Executive Director
- 2. Director Programme & Strategy
- 3. Director Research & Training
- 4. MNCH Advisor
- 5. Nutrition Advisor
- 6. Media Manager

Who will take us to Rwanda?

It could just be you!











During our Blood Pressure (BP) Challenge to mark the World Heart Day 2020, 32 grassroots men and women resident in Tudun Wada, Kaduna-South LG of Kaduna State, Nigeria participated in this challenge. They all had their BPs checked and sensitized on how best to prevent and manage their BPs. The results were as follows:

Gender	<b>Participants</b>	Hypertensive	Non- Hypertensive
Male	5	2	3
Female	27	18	9

One of the female hypertensive participants whose BP measured 182/104 mmHg was further interviewed by our team on the last time she took her medication, and the result was shocking. She responded, 'more than 3 months ago.' Why? She responded again 'that she had no money to buy her prescribed medicines.

This is the situation of so many women in Nigeria suffering from either hypertension or diabetes that are engulfed in abject poverty with no health insurance cover. Amazingly, she was not aware of the existence of any health insurance scheme in Nigeria.

So, there is a need for more aggressive advocacy campaigns on universal health coverage.

Finally, all participants were better informed on prevention and management of cardiovascular diseases and the need for a health insurance cover.

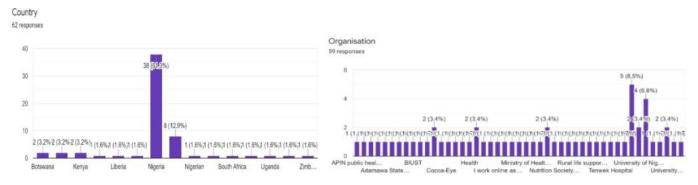
Get yourself enrolled into a health insurance scheme NOW

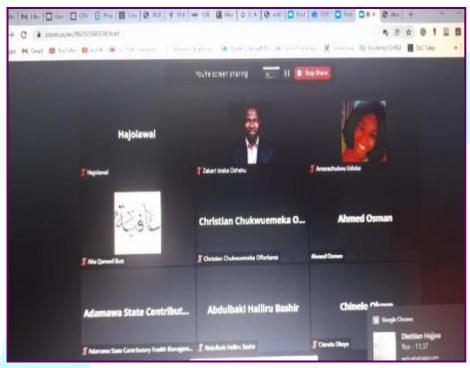


## TRAINING ON EFFECTIVE DATA COLLECTION TECHNIQUES IN HEALTH CARE

Due to the importance of accurate and quality data collection, the need for effective database in health cannot be overemphasized. We trained 59 health professionals across some African countries on Effective Data Collection Techniques in Health Care.

Below shows our participants for the first training based on countries and organizations.







#### /// MEDIA ENGAGEMENT & CAMPAIGN:

#### RADIO ENGAGEMENTS: SIXTY SIX (66) APPEARANCES

T.V: TWO (2) APPEARANCES ON AIT



OUR EXECUTIVE DIRECTOR, PHC INITIATIVE AFRICA ON A NATIONAL TELEVISION (AIT) IN NIGERIA, ADVOCATING FOR MORE COVID 19 TESTING CENTRES BE ADDED ACROSS THE SEVEN (7) GEOPOLITAL ZONES IN NIGERIA





#### MEDIA ENGAGEMENT & CAMPAIGN:









## ON THE SPOT ASSESMENT OF WASH FACILITIES IN SOME PRIMARY HEALTH CARE CENTERS IN NIGERIA

#### **IMAGES SPEAKS:**







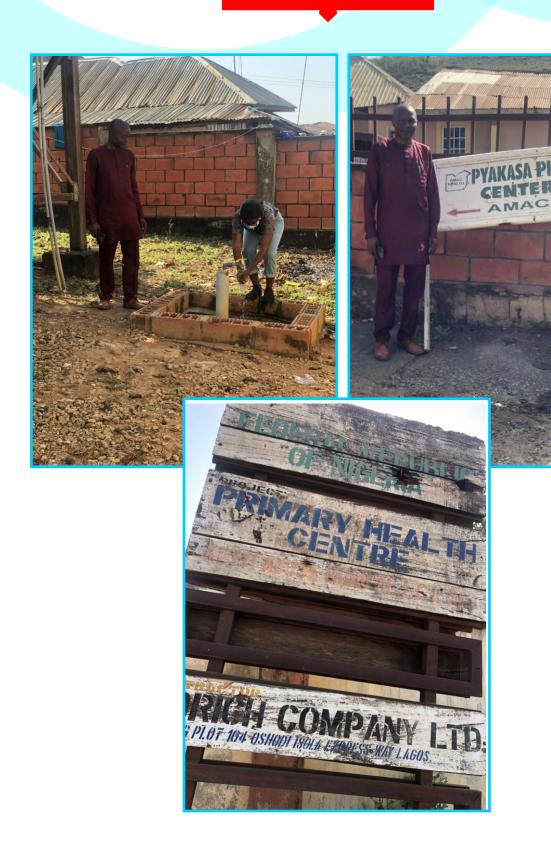






## ON THE SPOT ASSESMENT OF WASH FACILITIES IN SOME PRIMARY HEALTH CARE CENTERS IN NIGERIA

#### **IMAGES SPEAKS:**





#### **Social Media Footprints**



Over 8,500 members of PHC Advocates from all across Africa

Profile reach: 64,800 Engagement: 2,352



Total impressions: 17,856



**Total Impressions: 6,200** 

You can become a member of our **Primary Health Care Advocates** on social media. Visit our Facebook page **@phciafrica** click on visit group to join.

To become a volunteer use the link:

https://phcinitiativeafrica.org/join-our-volunteers/



#### **MEDICAL TOURISM: EVERY POLITICIAN'S PIE**





3" April, 2021.

#### Dear Nigerians,

To Whom It May Concern: No To Medical Tourism For Public Office Holders

As a reputable organisation, we are strongly advocating that more investments in health needs to be done in Nigeria. This way the disadvantaged communities could have access to quality basic health care, our facilities strengthened, our medical workforce competitively remunerated, a more productive workforce, a better GDP and a robust tax revenue for the government. And it is a WIN-WIN for all.

To do this, we are pushing for #NaijaMedicalTourismBan for all public office holders in Nigeria. A public office holder has no business seeking health care, whatsoever, abroad. It is high time we put a stop to this abuse of office and more funds to the health of our citizenry.

Enough of the systemic neglect in the health sectors, it time to influence government policy on Medical Tourism for public office holders.

Finally, we are appealing to all Nigerians to push for this #NaijaMedicalTourismBan for all public office holders. For the sake of the pregnant women dying now in Nigeria, do consider this as a Call-To-Action for #NaijaMedicalTourismBan for all public office holders.

Thank you.

Yours faithfully, Zakari Islaka Osheku, (Executive Director) It saddens our hearts that in Nigeria, those placed in positions of authority to correct systemic ills in the health sector often fail in that regard.

About \$1 billion dollars is spent annually by Nigerians on medical tourism.

Enough of this humongous amount of hard currency on foreign flights for medical tourism and this systemic neglect in the Nigerian health sectors.

It is high time we put a stop to this abuse of office, and more funds invested to the health of our citizenry.



### Introducing: Naija Medical Tourism Ban

This is a policy formulation; engaging and appealing to the consciousness of the relevant stakeholders, by developing a policy brief that places a ban on all public office holders (President, Vice President, legislators, ministers, cabinet members, judiciary - Chief Justice, judges, etc) seeking health care services abroad while in office.

With this in place, we will have the right budget going to the health sector and the will to ensure proper allocation of funds, monitoring and punishment where funds are not judiciously utilized.

Wondering why every Nigerian politicians wanting a bite of the pie, even after proclaimingnot to! It is because the requisite investment needed for the transformation of the health sector is not made. About two decades after the Abuja Declaration, where all members of African Union states unanimously agreed that going forward, they were to invest 15% of their country's individual budget on health. Sadly Nigeria has consistently failed woefully in this regard over the years. This is why our politicians always want to have a bite of a pie abroad in the quest for accessing health care services, living the millions of Nigerians at the mercy of the poor health systems they have failed to build.



## OUR ADVOCACY VISITS AND PARTNERSHIP ENGAGEMENT









Our Advocacy Visit to Connected Development [CODE] Office in Abuja, Discussing with the Chief Executive Hamzat Lawal and His Team on Areas of Collaboration on WASH.







PHC Initiative Africa Was Hosted on a Zoom Meeting by WISH Foundation India Sharing Various Innovative Models on Digital Health as We Both Discussed on Areas of Collaboration as it Relates to Strengthening Primary Health Care System.











An Engagement with Adamawa State Contributory Health Management Agency (ASCHMA), upon the acceptance to provide them technical assistance on capacity building, drafting health reform bill and accountability framework on the operationalization of the BHCPF.





Advocacy Visit to The Director General, Kaduna State Contributory Health Management Authority (KADCHMA) Discussing Strategies to Engage the Informal Sector into the State Health Insurance Scheme Using our CFP Framework.







Menstruation is experienced by nearly all women of reproductive age, an average woman will have about 450 menstrual cycles throughout her life time. So, it is important to educate women how best to manage their cycles safely, hygienically and with confidence.

Adolescent girls today in Nigeria are the most vulnerable to the negative outcomes related to periods. Aside affecting their overall self-esteem and confidence, those that lack sanitary facilities due to poverty, suffer a lot of health implications when they use unhygienic materials to manage their periods.



**GAIL Foundation** with support from **PHC Initiative Africa** on 30th May, 2021 carried out an awareness campaign to mark the Menstrual Hygiene Day, 2021. This campaign was led by our MNCH advisor **Judith Okosun** whereby seventy (70) adolescent girls were sensitized.

Project Name: Pad a girl

**Objective:** To raise awareness on menstrual hygiene management among adolescent girls living within Ungwan Romi community, Kaduna State.

Participants: Seventy (70) Girls

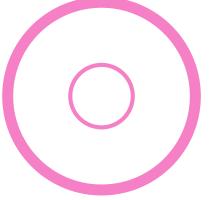
**Inputs:** Seventy (70) packs of sanitary pads were distributed.

#### **Outcome of Activity:**

- Participants left with a better understanding of safest low-cost menstrual hygiene management.
- Each Participant received the free pack of sanitary pad with excitement.
- Participants were willing to share knowledge learnt to their friends, relatives and loved ones.

#### **Challenges:**

Due to inadequate funding to execute this campaign, our projected number of participants were reduced to accommodate the limited budget of available sanitary pads.





more spotlight on the importance of primary health care services

more spotlight on the importance of primary health care services across many countries of the world, especially in Africa, where most health challenges were recorded. Primary health care still remains on focus even after four decades of the Alma Ata declaration on global health.

The services of primary health care are meant to be accessible and reachable to every person, especially the most vulnerable and marginalized in our community. This makes it easier to address health problems of the people even before they may require more specialized interventions.

In PHC Initiative Africa, most of our activities are centered on the primary health centers, the health service providers, the community and its people. These have enabled us ascertain problems in the health system as well as proffered sustainable and innovative solutions that best disrupts the irregularities in the health system.

Our programme department works closely with our team of advisors for the best appropriate interventions needed to face health challenges within our targeted communities. This has led to the successful execution of some of our intervention programmes like COVID-19 Train the Trainers, Breastfeed the Future, My Health Sure and others in various locations in Northwest, Nigeria.

In achieving our mandate, we work with other partners that share in the goals and objectives of our organization, relying on quality data generated from our research to carry out evidence-based advocacy.

We are open to more learning and partnerships, both locally and internationally for a more improved heath outcome of the people in Nigeria and across Africa.

#### **Harrison Onunaezeh**

**Director Programme & Strategy** 



# Splash





















































#### **OUR PARTNERS:**





#### **CONTRIBUTORS**

Harrison Onunaezeh Zakari I. Osheku Judith Okosun Afia Butt Q. Hassan Shehu Mohammed

#### **DESIGN**

Sanusi Danjuma Sanusi

#### **OUR CONTACT:**

### PLOT. 13, RIBADU ROAD, UNGUWAN RIMI, KADUNA STATE, NIGERIA

info@phcinitiativeafrica.org

www.phcinitiativeafrica.org

+2347033630009, +2347033052343







@phciafrica





ADSCHMA Adamawa State Contributory Health Management Agency

AMR Antimicrobial Resistance

BP Blood Pressure

BHCPF Basic Health Care Provision Fund

CDs Communicable Diseases

CODE Connected Development

CHEWs Community Health Extension Workers

CPHIA Conference on Public Health in Africa

CFP-F Community Facility Package Framework

IPC Infection, Prevention & Control

ITEM Identify, Train, Engage and Monitor

KADSCHMA Kaduna Sate Contributory Health Management Authority

MNCH Maternal Neonatal & Child Health

NCDs Non Communicable Diseases

OOP Out of Pocket

PHC Primary Health Care

PHCA Primary Health Care Advocates

PSE Private Sector

UHC Universal Health Coverage
WHO World Health Organization

WASH Water Sanitation and Hygiene





21st May, 2021

#### TO WHOM IT MAY CONCERN

We are proud to recognize **PHC Initiative Africa's** invaluable contributions toward strengthening primary health care in the state. We particularly appreciate your organization for the training and certification of frontline health workers at the Primary Health Care centers on Infection Prevention Control (IPC) for COVID-19 amongst other interventions you have been involved in.

It is an honour having you as partner to the Kaduna State Primary Health Care Board and the health sector as a whole.

Kindly accord them the necessary cooperation needed.

Thank you.

Dr Dutse Musa Gimba

Partners Coordination Desk Officer

+2348037030893

