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From the ED's desk

Dear Partners and Stakeholders,

As we draw the curtains on the third quarter of 2023, I'm thrilled to share TACONNECT's impactful strides in collaboration with our valued partners. Our commitment to enhancing healthcare systems and enriching communities in Nigeria remains unwavering.



Dr. Lilian Anomnachi

In this edition, we delve into an in-depth conversation with our very own Technical Director, Dr. Olayiwola Jaiyeola, shedding light on the core of our mission. You'll gain insights into our innovative programs and witness the transformation we are fostering in Nigeria's healthcare landscape

In Niger State, our PHC system strengthening initiative, in collaboration with Sydani Group and supported by the Bill & Melinda Gates Foundation, has yielded impressive results. We addressed critical gaps in PHC management capacity, resulting in significant improvements across various domains.

Our collaboration with the Pfizer Foundation in Kano state has safeguarded over 22,000 children through rotavirus vaccinations, showcasing the strength of collective efforts in reaching remote communities and enhancing healthcare outcomes.

Our involvement in crafting the National Safe Motherhood Strategic Framework in Nigeria, alongside the Federal Ministry of Health, underscores our dedication to reducing maternal and neonatal mortality rates.

We remain devoted to our mission of improving healthcare access and outcomes. Your unwavering support is deeply appreciated.

Warm regards.

Dr. Lilian Anomnachi

Executive Director, TACONNECT

Unlocking healthcare transformation: An exclusive interview with TAConnect's Technical Director, Dr. Olayiwola Jaiyeola - (Segment 1)

In this special feature, we present an in-depth conversation with our very own Technical Director, divided into two insightful segments. Join us as we delve into the heart of our mission, gain insights into our innovative programs, and witness the impact we're creating in Nigeria's healthcare landscape. In this first segment, we'll explore how TAConnect is leveraging innovative strategies to strengthen health systems, improve maternal and newborn outcomes, and tackle gender disparities head-on. Discover key achievements and the challenges faced in this initial instalment. Stay tuned for the second segment next quarter, where we'll continue the discussion and explore the path to sustainable, state-driven healthcare solutions.

"TAConnect's journey began with a mission to offer cost-efficient technical assistance, aiming to strengthen health systems and enhance maternal and newborn outcomes. Our unique niche is to be an innovative technical assistance hub, providing cost-efficient, human-centered design programs that strengthen health systems".

–Dr. Jaiyeola

Overview of TAConnect's mission and programs

TAConnect's mission is clear: To support national and sub-national governments to build and strengthen resilient health systems and improve health outcomes. Dr. Olayiwola Jaiyeola underscores the importance of cost-efficiency in program design and highlights their unique niche in providing innovative, human-centred design programs.

We embarked on a mission to offer cost-efficient technical assistance, aiming to strengthen health systems and enhance maternal and newborn outcomes. This mission arose from the recognition of the critical role that technical assistance plays in designing and implementing robust programs. To achieve this, cost-efficiency is imperative. So, our unique niche is to be an innovative technical assistance hub, providing cost-efficient, human-centered design programs that strengthen health systems. Ultimately, we leverage this platform to improve maternal and newborn outcomes. TAConnect's journey began with the initial design phase and has evolved into an autonomous, indigenous NGO operating in Nigeria across multiple states, both in the northern and southern regions. Our current programs primarily revolve around health system strengthening, acknowledging the pivotal role strong systems play. Without resilient health systems, we cannot substantially improve maternal and newborn outcomes or change the precarious situation within Nigeria's healthcare landscape.

Since our inception, we have collaborated with states to design state-led programs using a human-centered design approach. Our primary focus is on strengthening primary healthcare systems because we understand that a robust primary care system is essential for achieving universal health coverage.



Dr. Olayiwola Jaiyeola, Technical Director, TAConnect

To reach the most vulnerable communities and those in need, we must fortify our primary healthcare system, making it sustainable. This constitutes one of our primary areas of focus. The other area aligns with health system strengthening and revolves around reproductive, maternal, newborn, and child health (RMNCH). Maternal and newborn health is paramount, given the challenges Nigeria faces in this regard. Therefore, our efforts center on RMNCH, primarily focusing on system strengthening. Currently, we operate in ten states, spanning both northern and southern Nigeria.

A focus on TAConnect's G-ANC program and outcomes

The interview reveals the groundbreaking impact of TAConnect's Group Antenatal Care (Group ANC) model. This model has not only increased attendance at antenatal care but also significantly improved facility deliveries and postnatal care utilization. These outcomes are a ray of hope in Nigeria's struggle with high maternal and newborn mortality rates.

We worked closely with states to implement an innovative antenatal care model known as Group Antenatal Care (Group ANC). This model represents a paradigm shift from traditional antenatal care, emphasizing greater involvement of pregnant women in their own care. In Group ANC, women are organized into smaller groups, fostering social bonds and peer networks. Importantly, services are delivered through a participatory facilitated learning approach. This approach empowers women to actively engage in their healthcare, breaking down hierarchical barriers between service providers and clients. Women acquire vital knowledge on topics related to their pregnancy, health, and infant care, enhancing the continuum of care and key interventions.

Historically, Nigeria faced a challenge of high attendance at antenatal care but lower rates of facility deliveries, largely due to cultural, religious, and gender factors. However, Group ANC showed transformative results by increasing the number of women attending antenatal care, retaining them throughout pregnancy, and encouraging facility deliveries. It also stimulated women's participation in postnatal care and other key interventions. These outcomes were particularly significant, considering Nigeria's struggle with maternal and newborn mortality, where we unfortunately ranked among the highest globally.

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Cont... Unlocking healthcare transformation: An exclusive interview with TACONnect's Technical Director, Dr. Olayiwola Jaiyeola - (Segment 1)

Traditionally, women attended some antenatal visits but often dropped out, leading to missed opportunities for vital care. With Group ANC, this trend reversed, as more women consistently attended antenatal care and continued through the postnatal period. This innovative approach addressed critical issues related to maternal and newborn health, including increased facility deliveries and improved postpartum family planning, immunization, and cord care, all of which contribute to reducing maternal and newborn mortality rates.

Our current focus extends beyond Group ANC, aiming to replicate its successes in other stages of the continuum of care, particularly during labor and delivery, where maternal and newborn deaths are more common. Our objective is to demonstrate that by following women through this continuum and ensuring access to high-impact interventions, we can significantly reduce maternal and newborn mortality rates. However, it's crucial to emphasize that while our program is comprehensive and well-designed, it's not a silver bullet. Achieving transformative effects will require substantial partnerships, data-driven approaches, a human-centered design, and a commitment to addressing gender-related barriers to intervention uptake. Our program builds upon the foundation of Group ANC to expand and optimize high-impact interventions throughout the continuum of care.

Challenges faced and innovative solutions

The interview delved into some key challenges encountered during implementation, including human resource shortages, commodity availability, data quality, and security issues in certain areas. However, it also highlights the organization's proactive strategies to address these challenges, emphasizing collaboration and adaptability.

Naturally, for every venture, there are always some challenges. I think the GANC program itself has had its own fair share. The challenges have been quite formidable. As I mentioned earlier, GANC is not a silver bullet, and it won't solve all our RMNCAH problems in any setting. Since it's integrated into the health system, it naturally experiences setbacks and shocks from a weakened health system like Nigeria's. In an ideal GANC model, a group of 8 to 15 women is assigned to a service provider, and they receive services throughout their pregnancy and up to delivery from the same service provider. The goal is to maintain the bonds between the women and the service provider, thus breaking down the hierarchical relationship between service providers and clients that GANC aims to address.

One of the main struggles the GANC program has faced is the chronic and ongoing issue of human resources for health. This has been a formidable challenge for GANC implementation, especially in high-volume facilities where skilled human resources are often insufficient. The challenges related to human resources for health are well-documented, and we've consistently failed to produce the right number of skilled professionals. This challenge has been exacerbated by the mass migration of healthcare providers, which has further weakened an already fragile system. Additionally, even when healthcare providers are available, there are often issues with their skill sets, quantities, and qualities, which compound the problem. Attrition is another concern, not just migration, but also the routine attrition as service providers retire, further straining the system. The movement of service providers from one facility to another, a regular administrative procedure at the state level, has also complicated matters.

Working with state-led programs, we've taken steps to mitigate some of these issues. For example, we try to reduce the risk of transfers of trained GANC service providers by ensuring that if they move, they do so from one GANC facility to another. States have also adopted task shifting and task

sharing, as well as continuous training for service providers to address the human resources for health challenge. Nonetheless, human resources for health remains a significant challenge for GANC programs.

Another major challenge is commodity security. Having the necessary commodities available at facilities is critical. Facilities are only as good as the availability of commodities. When women come in large numbers for ANC and cannot receive the commodities they need, it undermines their confidence in the healthcare system. Unfortunately, with a shrinking fiscal climate both nationally and sub-nationally, states have struggled to provide all the required commodities for women. This includes not only GANC-related commodities but also those needed by all citizens who seek services at health facilities. For instance, when women come for ANC, they may need to pick up medications like sulfadoxine and pyrimethamine for malaria prevention. Ideally, they should be able to take these drugs at the facility, but often the drugs are unavailable, or women may need to pay for them, which can be a barrier, especially for those in poor rural areas. These missed opportunities and reduced confidence in the health system affect the program's success.

Data quality has also been a challenge. The way GANC is structured is not always aligned with the National Health Management Information System (NHMIS). While some adaptations have been made at the state level to ensure the documentation of GANC services, it's not the ideal approach. Data is crucial for evaluating program effectiveness, and we've had to make adaptations to ensure we can continue documenting GANC services.

In some northern states, we've faced issues of insecurity. Facilities have had to close due to security concerns, and women have been unable to access services. However, it's important to note that the challenges the GANC program faces are not unique to it; they are health system issues. Without the right interventions by the states, we may not be able to fully realize the benefits of GANC. These challenges include human resources for health, commodity availability, data quality, equipment maintenance, and even issues related to quality of care. For example, some facilities have experienced frequent equipment breakdowns, which can weaken the GANC program since women are actively involved in their own care, including using digital blood pressure apparatus. When these tools break down and are not replaced, it affects the program's transformative effects.

However, despite these challenges, the program continues to move forward. We work closely with the states to address some of these issues, and while we may not be able to solve them entirely, we collaborate to incorporate the GANC program into the annual operational plan and seek ways to improve resource allocation. With the recent removal of subsidies, we hope that states will commit more resources to primary healthcare and, by extension, to all RMNCAH programs.

In this first segment, we've delved deep into TACONnect's mission and innovative programs, shedding light on how we're transforming Nigeria's healthcare landscape. From strengthening health systems to enhancing maternal and newborn outcomes, we've explored the remarkable achievements and the challenges faced. The journey has just begun, and the story continues.

Stay tuned for the next segment of this insightful interview, where we'll further unravel TACONnect's impactful initiatives and discuss the path to sustainable, state-driven healthcare solutions. Don't miss out on the next chapter of this insightful interview series

Niger State: TAConnect's PHC system strengthening initiative drives significant improvements in service delivery

Across Nigeria, many states grapple with various challenges that hinders the delivery of quality primary healthcare (PHC) services. These challenges include inadequate managerial structures, limited capacity among PHC managers, poor data management practices, financial mismanagement, supply chain inefficiencies, and gaps in planning and community relations. They contribute to suboptimal healthcare outcomes and impede the effective delivery of essential services to the population.

As part of efforts to domesticate the national Primary Health Care Under One Roof (PHCUOR) policy and position herself as a primary healthcare leader in Nigeria, Niger state is revitalizing her PHC system with a special focus on strengthening her PHC management capacity. To compliment governments effort to improve health outcomes in the states, TAConnect through funding from the Bill and Melinda Gates Foundation focuses on strengthening the capacity of primary healthcare (PHC) institutions and managers to improve service delivery and quality of care.

In April of 2022, TAConnect supported Sydani Group to provide Technical Assistance to Niger State government to enhance the delivery of quality PHC services in the state. The Niger State PHC Management Capacity Strengthening Project unfolded in three distinct phases: firstly, the comprehensive assessment of PHC management capacity; followed by the collaborative development of a robust plan to enhance PHC management capacity; and finally, the implementation of targeted interventions aimed at strengthening the PHC management system.

As part of the initiative, Sydani conducted a PHC Management Capacity Assessment, which revealed key challenges, including no defined structure for identifying ward development committee heads and managerial gaps. The appointment of managers was often influenced by political factors or civil service ranks. Moreover, PHC managers lacked essential skills and knowledge in various areas, including facility management, human resources, finance, data management, planning, community relations, and quality management. At the LGA level, managers demonstrated intermediate proficiency in most areas, Ward-level heads and secretaries also had significant knowledge gaps, particularly in quality management, planning, community relations, and financial management.

From April 2022 to June 2023 of the project lifespan, significant improvements were observed in PHC managers' capacities in all areas of the PHC system domains. These include the use of data for programmatic decision making by PHCs from 80% to 97% of the implementing facilities. The coverage of PHCs instituting improvement changes based on Quality management action plans also in-

creased to 96% from 90%. The incidence of unapproved absenteeism also reduced to 10% of the implementing facilities by the end of implementation. Compliance with financial management guidelines and principles is now at 100% by the end of the implementation period. Using data for programmatic decision making, advocacy to stakeholders at the primary health care level is yielding result, with the procurement of additional consumables and equipment's such as Air conditioning systems, digital apparatus, stationaries etc. by the ward health development committees in different localities to complement government effort in enhancing service delivery.

These achievements reflect TAConnect's commitment to strengthening its partnership with Niger State government and to further enhance the healthcare system.

The Niger State PHC Management Capacity Strengthening Project spanned from April 2022 to June 2023, and targeted 128 healthcare facilities across 12 prioritized local government areas (LGAs) in Niger State.

"This is one of the most remarkable interventions we've witnessed in a long time." - Dr. Junaidu

In an exclusive interview, Dr. Inuwa Junaidu, the Director of Planning Research and Statistics at the Niger State Primary Healthcare Development Agency, shared insights into the Primary Healthcare (PHC) Management Capacity Strengthening Support Project. According to him, the project recorded remarkable achievements in the state, demonstrating that Niger State can become one of the leading healthcare systems in the national ranking of PHC service delivery in Nigeria.

"We had relevant officers, but many lacked the capacity to implement effectively. They faced challenges in using technology, managing facilities, prioritizing activities, and ensuring accountability. Some facilities lacked even the basic tools like fixed registers, and supervision was irregular with ineffective checklists" Dr. Junaidu explained.

"The Primary Healthcare (PHC) Management Capacity Strengthening Support Project is a pivotal turning point for the PHC system in the state. This is one of the most remarkable interventions we've witnessed in a long time."

Some key project findings and early results and outcomes of the intervention were impressive. Over 500 healthcare workers received training and knowledge necessary to provide high-quality care. The percentage of Primary Health Centers (PHCs)

utilizing data for decision-making surged from below 20% to an impressive 97%. Capacity-building efforts in monitoring and evaluation (M&E) led to substantial improvements, and innovative capstone projects tackled vital issues.

"One particularly encouraging change was the reduction in unapproved absenteeism, with 96% of PHCs now reporting absences through proper channels," he added.

On the technical assistance provider's role, Dr. Junaidu underlined Sydani's collaborative approach, engaging stakeholders at all levels in the implementation of the project. "It's akin to a combination of various capacity-building strategies," he explained. This method fostered peer-to-peer learning, mentorship, and ongoing support. It extended beyond mere training, focusing on ensuring knowledge transfer and practical implementation in the field.

The success achieved in Niger State represents just the beginning. Dr. Junaidu unveiled a three-pronged approach to ensure sustainability: people, processes, and tools. Mentors trained during the project will become integral members of the integrated supportive supervisory team of the Basic Healthcare Provision Fund. Financial sustainability will be driven by capitation proceeds and quarterly funding. Essential tools, especially those related to M&E and Power BI utilization, will be widely accessible.



Dr. Junaidu Inuwa, Director, Planning, Research and Statistics, NSPHCDA

He extended heartfelt gratitude to the Gates Foundation for its pivotal role in Niger State's healthcare journey and called for continued support. "We appreciate their contributions, but, as Oliver Twist, we will continue to ask for more," he concluded with a smile. The journey is far from over, but with unwavering support, Niger State's primary healthcare system is poised to exceed even the loftiest expectations" He adds.

Investing in PHC managers for a healthier tomorrow: Fatima Yunusa's Journey of empowerment and impact



Fatima Yunusa, Officer in Charge, Maitumbi PHC, Niger

Investing in the training and capacity building of primary healthcare workers is a fundamental pillar to creating strong health systems — and to achieving universal health coverage by 2030, according to the World Health Organisation. In the heart of Niger State, a significant change was unfolding within primary healthcare system. Fatima Yunusa, the Officer in Charge at Maitumbi Primary Healthcare Centre, shares her remarkable story of change, all thanks to the Management Capacity Strengthening Project.

Maitumbi PHC in Niger state is one of the 128 PHC Facilities that were supported under the PHC Management Capacity Strengthening Project. Prior to the commencement of the project, Maitumbi Primary Healthcare Facility contended with a plethora of challenges. Community engagement was at a minimum, equipment management was chaotic, and staff attendance records were disarrayed. The lack of feedback mechanisms to local government authorities and the conspicuous absence of the Ward Health Development Committee (WHDC) chairman in facility oversight only exacerbated these issues.

Fatima was one of the 556 primary healthcare managers who received comprehensive training and mentoring sessions offered under the PHC Management Capacity Strengthening Project in Niger state. The training focused on seven (7) thematic areas: Human resource management, data management, facility management, PCR management, financial management, quality management and supply chain management. "The training I received significantly aid me in managing the health facility. Also, I conducted step down training sessions for other healthcare workers, enabling us to

harmonize our overall operations," she elucidated.

Fatima's leadership extended far beyond her role as Officer in Charge. She decentralized responsibilities, ensuring that each unit had a dedicated staff member overseeing their operations. This delegation of duties not only bolstered efficiency but also instilled a sense of ownership among the staff.

With renewed dedication among staff, the facility recorded increased patient turnout, particularly for immunization and antenatal care services.

Fatima shared stories of transformation resonating throughout her facility. "Patients now experienced better services. Equipment is readily available; my staff are well-prepared. The transformation has been profound; we've meticulously catalogued our equipment, and the patient turnout has seen a significant boost," she expressed with pride.

"The training I received significantly aid me in managing the health facility. Also, I conducted step down training sessions for other healthcare workers, enabling us to harmonize our overall operations"

When queried about the overall impact of the project, Fatima's eyes sparkled with pride. "This program has been an invaluable asset to us, and its accomplishments cannot be overstated," she emphasized. The project had significantly enhanced the knowledge of staff across various domains, streamlined reporting systems, and elevated patient satisfaction levels.

Another remarkable accomplishment attributable to the project was the substantial reduction in staff absenteeism. The implementation of a sign-in system, coupled with diligent recording of absences and permissions, had instilled discipline among the staff. "The sign-in system has been instrumental; it's a visual reminder of attendance, and absenteeism has markedly decreased," Fatima explained.

These improvements were not serendipitous but the fruit of diligent efforts, regular ward health development committee (WHDC)

"Patients now experienced better services. Equipment is readily available; my staff are well-prepared. The transformation has been profound; we've meticulously catalogued our equipment, and the patient turnout has seen a significant boost,"

meetings, and an unwavering commitment to problem-solving. Fatima underscored, "Now, our WHDC meetings, have been crucial in addressing issues."

For Fatima, the project held a personal resonance as well. As the Officer in Charge, it endowed her with the confidence to address staff concerns and hold them accountable. Her leadership became more assertive, and her staff reciprocated with heightened commitment. Fatima's gratitude flowed freely. "I wish to extend my profound gratitude to the organisations that provided us this support; their provision of data tools and mentorship have been invaluable to us," she conveyed. She comprehended the pivotal role played by the project in their transformative journey.

As the project officially concluded, one question loomed large: would these improvements endure? Fatima remains hopeful, but she recognizes the vital need for sustained support. "As it stands, there is no designated funding for post-project phases, but engaging the relevant agencies could potentially secure ongoing support," she concluded, underscoring the critical importance of continued assistance to maintain the progress.



TACoconnect and Pfizer Foundation make strides in Kano state: Over 22,000 children under five receive rotavirus vaccination.

In Kano State, TACoconnect and the Pfizer Foundation collaboration has continued to increase the uptake of rotavirus vaccination among children under the age of five especially in remote hard to reach communities.

Since March of 2023, TACoconnect has partnered with the Kano State Primary Healthcare Management Board to reach out to parents, guardians, and religious leaders to educate them on the significance of routine immunization.

This effort has increased acceptance and participation in immunization campaigns and safeguarded over 22,000 children against the life-threatening rotavirus disease.

TACoconnect and Pfizer Foundation partnership has trained 171 healthcare professionals across nine Local Government Areas on community relations, client -centric care, service delivery, and community mobilization. The program emphasizes record-keeping for accurate vaccination history maintenance.



Health workers administering Rotavirus vaccine in Kano communities

Early program outcomes have shown a significant reduction in diarrheal cases across target communities, promising improved survival rates and overall health outcomes for children in Kano State. This collaboration serves as an example of what can be achieved when organizations unite to deliver life-saving healthcare services to those in need.

TACoconnect supports Government of Nigeria in developing National Safe Motherhood Strategic Framework.

From August 14th to 18th, 2023, TACoconnect provided support to the Nigerian Federal Ministry of Health in a stakeholders' meeting to develop a strategic framework for safe motherhood in Nigeria. This is in line with the National Safe Motherhood Program mission to reduce maternal and neonatal morbidity and mortality and improve the health of mothers and newborns.

The meeting resulted in the creation of the first draft of the safe motherhood strategy framework which aims to address maternal mortality in Nigeria, which is high and provide timely and effective healthcare services before, during, and after childbirth.

Dr. Samuel Oyeniyi, the Head of Safe Motherhood at the Federal Ministry of Health expressed gratitude to TACoconnect for the sponsorship and emphasized the importance of collaboration for maternal and childcare in Nigeria where one woman dies every minute due to pregnancy-related causes.

"It is vital to acknowledge the role of TACoconnect in sponsoring this meeting, coordinated partner support and the involvement of subnational bodies in development and implementation of this strategy" he said.

"Better outcomes can be ensured only if the government and organizations continuously work together to drive maternal health initiatives forward".



Unity in Action: Participants of the Safe Motherhood Workshop Join Forces for Maternal Health

The National Safe Motherhood Strategic Framework is a significant step towards improving the maternal and neonatal healthcare system in Nigeria. This draft brings together recommendations and guidelines and will be a reference document for maternal healthcare in Nigeria.

"With maternal mortality rates as high as they are in Nigeria, the development of the National Safe Motherhood Strategic Framework is a beacon of

hope.

"The meeting has opened a dialogue, and it is essential that the collaboration between TACoconnect and the government continues to support maternal and childcare initiatives and strengthen coordination between all stakeholders". Dr. Oyeniyi said.

TACConnect shares insights on scaling Group Antenatal Care in Malawi

Dr. Olayiwola Jaiyeola, the Technical Director of TACConnect, was recently in Malawi to share valuable insights on scaling up Group Antenatal Care (G-ANC) in Nigeria at the dissemination event of the National Institute of Health (NIH) funded project titled "Group Antenatal Care: Effectiveness and Contextual Factors Linked to Implementation Success in Malawi."

TACConnect was invited to participate in this significant event due to its noteworthy presentation at the Group Centering Pregnancy Conference in the Netherlands earlier this year where the team shared its extensive experience and lessons learned from scaling up G-ANC in Nigeria.

Dr. Olayiwola Jaiyeola delivered a presentation titled "Scaling up G-ANC in Nigeria: Experiences and Lessons from Nigeria." He shared valuable insights into the challenges and successes encountered during the implementation of G-ANC in Nigeria. He emphasized the importance of contextual factors and the need for adaptability when introducing such programs in different regions.

His presentation was well-received by the attendees, which included senior members of the Malawian Federal Ministry of Health, sub-national entities, and civil society groups.

The Malawian Ministry of Health officials and attendees expressed their appreciation to TACConnect and expressed interest in further collaboration and technical assistance from TACConnect. Malawi is currently considering the adoption and scale-up of G-ANC in its healthcare system, and TACCon-



Dr. Jaiyeola actively interacts with participants as he delivers his engaging presentation at the event

nect's expertise and insights are expected to play a crucial role in this process.

The dissemination event took place on August 4th, 2023, at the College of Nursing, Kamuzu University of Health Sciences in Blantyre. It aimed to share research findings and best practices regarding the implementation of G-ANC in the African context. The project, which spanned five years, was conducted as a randomized controlled trial (RCT) in Malawi and was led by the University of Illinois Chicago.

TACConnect partners with CHAI to improve reproductive and maternal healthcare in Gombe state.

In a significant step towards improving the quality of healthcare services for Reproductive, Maternal, Newborn, and Child Health (RMNCH) in Gombe State, the Clinton Health Access Initiative (CHAI) has been awarded a grant by Technical Advice Connect (TACConnect) through funding from the Bill and Melinda Gates Foundation to provide vital technical assistance to the state. This initiative aims to support the Gombe State government through the Primary Health Care Development Agency in adopting and implementing the Group Antenatal Care (G-ANC) model with a gender-sensitive approach.

The G-ANC model, proven to enhance the uptake and quality of RMNCH and nutrition services, serves as an alternative approach to antenatal care service delivery. It leverages community structures and prioritize the well-being of pregnant women and their children during pregnancy, intrapartum, and postpartum periods.

To maximize the impact, this intervention is being implemented across 11 Local Government Areas (LGAs) in Gombe State. It encompasses 70 primary healthcare facilities and 11 secondary

facilities designated as referral sites. Additionally, the program also includes a pilot community G-ANC initiative in five selected vulnerable communities, spanning two LGAs.

As part of the initial activities, CHAI, in collaboration with TACConnect, has engaged in various meetings and stakeholder interactions. These include kick-off meetings with TACConnect, introductory sessions with state and partner stakeholders, and a program kick-off stakeholder and workplan development meeting. These activities were essential in laying the groundwork for G-ANC and RMNCH implementation in Gombe State while securing the government's commitment and leadership for the intervention.

This partnership between TACConnect and the Gombe State government, signifies a promising step forward in enhancing healthcare services for expectant mothers and their newborns. It highlights the importance of innovative and community-driven approaches to achieving better RMNCH outcomes and addressing gender disparities in healthcare access.



File photo from the archives



Dr. Oyeniyi, Head of Safe Motherhood Unit at the Federal Ministry of Health, addressing participants at the stakeholders meeting for the development of the safe motherhood strategy framework in lagos



participants engrossed in insightful discussions, collectively working towards safer motherhood and healthier futures at the Lagos Safe Motherhood Workshop



A dynamic breakout session at the Lagos Safe Motherhood Workshop, where collaboration sparks innovation and drives progress



A full house of passionate advocates and experts at the Lagos Safe Motherhood Workshop, working hand in hand to improve maternal and neonatal health outcomes.



Technical Advice Connect (TAConnect) is an innovative Technical Assistance (TA) delivery platform, set up to respond to TA priorities to promote sustainable improvements Healthcare systems' performance and to increase the uptake of Reproductive, Maternal, Newborn, Child, Adolescent Health and Nutrition (RMNCAH+N) services. TAConnect curates and deploys comprehensive, cohesive technical assistance and institutional strengthening support to state governments, using a tailored and coordinated approach to promote sustainable health systems strengthening and enhanced service delivery

To foster critical shift in the TA delivery in Nigeria, TAConnect works with states and funders to define issues, identify solutions, and the skills/expertise needed to help strengthen the effectiveness, efficiency, and quality of services while it manages the selection and deployment of technical assistance by providing technical and programmatic oversight to ensure efficiency, effectiveness, and value for money

TAConnect has deployed an innovative operational model that facilitates a paradigm shift from the traditional top to bottom approach of partner support, to a demand driven bottom to top approach, involving states in problem identification, project design and implementation hence promoting ownership and long-term sustainability, as well as improving synergy and coordination.

Our Vision

To be the leading enabler of cost-effective technical assistance services for sustainable health systems and service delivery

Our Mission

To support national and sub-national governments to build and strengthen resilient health systems and improve health outcomes

Stories and Graphics

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