Improving access to skilled pregnancy care in rural Nigeria: The role of advocacy

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Introduction
Nigeria accounts for 19% of global maternal deaths in 2015 [1]. The majority of these deaths occur in rural communities as a result of unskilled care during pregnancy and childbirth. Policymakers in Nigeria recognize that primary healthcare (PHC) should play a key role in improving access to skilled pregnancy care, but PHC is often poorly utilized [2]. This research aims to identify and document the role of evidence-based advocacy in improving access to skilled pregnancy care in PHCs in two rural Local Government Areas, Esan South East and Etsako East of Edo state, Nigeria.

Methods
The Research – Three-phase intervention study: Baseline, Intervention and Evaluation driven by advocacy as a core strategy
Evidence for advocacy was generated through baseline mixed method research.
Presentation of evidence to community stakeholders and policy makers for a buy in to the project, support, ownership and active involvement in designing and implementing intervention activities.

Advocacy process/Steps
Stakeholder mapping
Meetings with traditional rulers
Community conversation with elders. – presenting the problem of access to skilled pregnancy care and getting them to proffer and commit to the solution

Results
Increased commitment by the Edo State Government leading to the prioritization of improved delivery of PHC in the State;
Deployment of Youth Corp doctor for PHC services in the IMCHA project communities;
Community Health Fund for free maternal and child care
Implementation of community-led Drug Revolving Fund;
Implementation of RapidSMS - enables effective and real-time two-way communication between a pregnant woman in distress, the Ward Development Chairman (WDC), Transporter and primary health care workers for action, using a mobile device.
RapidSMS – support from Edo State Government; funding support from West African Health Organisation through the Federal Ministry of Health
Donation of 2 Tricycle Ambulance by Edo State Government through the Local Government Council to IMCHA project PHCs.
Regular Community health education driven by the WDC and Traditional rulers

Advocacy Impact - improving women’s health
Community conversations got the elders to see the need to increase women’s access to skilled care during pregnancy
Community health fund removes the burden of out-of-pocket expenses for medical care from women who hitherto depended on the partners to pay their medical bills.
RapidSMS empowers women to seek and access timely care in emergency.
Increase in government attention to revitalize PHCs in Edo State.

Fig 2: Community-led and Government Supported Intervention Activities

Short-term Outcomes
Mid-term evaluation of this project indicates that within 12 months of implementation January – December 2018, the number of women attending antenatal care in the project PHCs has increased by 250%;
the number of women using the PHCs for delivery have also increased by 266%;
post natal attendance has doubled.
All referral cases have been successfully managed because of effective referral system and available transport arrangement.

Fig 1. Advocacy visit to the Executive Governor of Edo State
Fig 3. Community Conversation with elders

Fig 4. Ambulance donated by the government for IMCHA project

The Research Team
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