COMMUNIQUÉ ISSUED AT THE END OF A ONE-DAY LEGISLATIVE AND MEDIA DIALOGUE ON MATERNAL HEALTH ORGANIZED BY CIVIL SOCIETY LEGISLATIVE ADVOCACY CENTRE (CISLAC) WITH SUPPORT FROM THE MACARTHUR FOUNDATION, HELD AT MAKERA HOTEL, KATSINA STATE ON 8TH JUNE, 2017.

PREAMBLE:
Civil Society Legislative Advocacy Centre (CISLAC) organized a One-day Legislative and Media Dialogue on Maternal Health. The Dialogue aimed at bringing Katsina State’s legislature and the media under one roof to brainstorm on necessary legislative action to address current maternal health funding challenges in the state for effective, efficient and affordable maternal and child healthcare delivery in the state. The meeting drew over 20 participants representing State House of Assembly and the Media. After exhaustive deliberations on various thematic issues, the following observations and recommendations were made:

Observations:

1. Legislature remains a key institution with significant constitutional power to address funding gaps in maternal health through appropriation process and oversight activities.
2. The existing open-door policy operates by the Katsina State House of Assembly is an enabling channel to strengthen effective legislature and media working relations.
3. While health sector development remains a major priority of the state, the ongoing dwindling revenue to the state from the Federation Account hampers adequate budgetary allocation to the sector.
4. High maternal death rate is attributed to poverty, HIV/AIDS, general hygiene, accessibility gaps, inadequate infrastructural facilities and health care services.
5. Identified lapses in budgetary defence by the line ministries are major impediments to adequate budgetary allocation to health sector in the state.
6. Inadequate investigative journalism and reportage on maternal and child health related issues in the state.
7. Loopholes in the collection and administration of Internally Generated Revenue hinder efforts by the state to effectively harmonise revenue to boost budgetary allocation to key sectors including health care.

Recommendations:

1. Creating a legislative system to harmonise and integrate maternal and child health issues in submissions by various legislative Committees during the appropriation process.
2. Appropriate legislative-executive synergy to fast-track the harmonization of Primary Health Care under one roof to promote coordinated, accessible and affordable health care at grassroots level.
3. Embracing innovative funding strategies through public-private partnership to bridge existing funding gap and sustain adequate budgetary allocation to health sector.
4. Encouraging women inclusiveness and participation in the legislature to effectively champion and address issues affecting maternal health.

5. Enhanced legislative priority for women empowerment schemes in collaboration with the line ministries to promote self-sufficient women and alleviate poverty.

6. Proactive media to embrace high level professionalism and skills in the analysis and reporting of maternal and child health related issues to raise legislative and policy consciousness on maternal health.

7. Persistent investigative journalism and massive public and policy awareness on maternal and child health.

Call to immediate action:

- Intensify media awareness and sensitization on the important of harnessing Internally Generated Revenue to bridge funding gaps in maternal health.
- Embrace investigative journalism into maternal and child health related issues.
- House of Assembly to liaise with and engage the line MDAs on maternal health issues so as to facilitate improved allocation to health sector.
- Civil society and professional unions working to advocate to the House Committee on Health and Primary Health Care.

Signed:

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