COMMUNIQUÉ ISSUED AT THE END OF A ONE-DAY EXECUTIVE, LEGISLATIVE, CSOs 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 1ST MARCH, 2018.

PREAMBLE:

Civil Society Legislative Advocacy Centre (CISLAC) organized a One-day Executive, Legislative, CSOs and Media Dialogue on Maternal Health. The Dialogue aims at bringing Katsina state’s executive, legislators, CSOs and media under one roof to brainstorm on current trend, progress, opportunities and challenges on maternal healthcare service provision and delivery in the state. The meeting drew participants representing State House of Assembly, Ministries of Health, Education and the Media. After exhaustive deliberations on various thematic issues, the following trend, progress, opportunities, challenges and recommendations were recorded:

Progress:

1. In 2018 Appropriation, the state has allocated 11.8% of its total budget to the health sector.
2. The State House of Assembly has sustained and intensified its existing open door policy with the civil society group to present issues and recommendations on improving maternal health services.
3. The state has proposed recruitment of additional 450 health personnel in the 2018 Appropriation to bridge existing gaps in healthcare service delivery.
4. The state government has mainstreamed two candidates each across 34 local governments in the state into state’s School of Nursing and Midwifery to fill human resources challenge bedeviling accessibility to maternal health services, especially in the grassroots.
5. Maternal Death Review is presently conducted and reported to provide quantitative and qualitative data to inform appropriate policy and legislative decision and intervention on maternal health in the state.
6. Katsina State Accountability Mechanism—comprising State Assembly, Executives, CSOs and Media, presently scrutinizes maternal health issues and regularly advocates to the State Ministry of Health.
7. The state Government through SOML programme has re-employed qualified nurses and midwives into the health service primarily to fill existing human resources gaps in the health sector.
8. Media holds constructive criticisms and accountability on government policy and programmes on maternal health.
9. The state government responded to issues of nutrition by employing nutritionists to promote accessible to maternal and child nutrition services in the state.
10. The State Government has graduated over 100 female students from School of Nursing and Midwifery mainstreamed and trained under Foundation Year Programme.

Opportunities:

1. Proposed CSOs-Executive meeting in the state will help to ascertain Maternal Health allocation for 2018.
2. About $6 million was given as a bonus for effective performance—zonal champion, to the state by the World Bank in addition to its existing $1 million under the Save 1 million lives initiative.
3. The State House of Assembly is currently deliberating on amendment to the College of Nursing and Midwifery and College of Health Science and Technology laws to sustain Foundation Year Programme.
4. Accountability Mechanism group leverages on existing radio programmes and legislative engagements to articulate trend, development, progress and challenges on maternal health.
5. Civil society presently advocates for international training and experience sharing programme to enhance media capacity and reportage on maternal health related issues.
6. The institutionalized Primary Health Care under one roof will ensure coordination and improve healthcare service delivery.
7. Existing appreciable level of political will and interest in maternal health service provision and delivery.
8. Open door policy to committed Health Committee demanding accountability on maternal health related issues.
9. The existing collaboration among Ministries of Women Affairs, Education and Health in awareness creation and women mobilization for health attendance.
10. Existing School Feeding Programme remains an enabling platform to promote maternal and childhood nutrition services in the state.
11. Existing Health Reporters Forum leveraging the social media in advocating maternal health related issues.

Challenges:

1. Lack of synergy and direct budget line item by the underlining ministries on maternal health.
2. Under-reported related progress and development in the health sector in the media.
3. Existing human resources gaps in the health sector delay adequate accessibility to maternal health services.
4. Under-performance by the Office of Senior Special Assistant to the Governor on Development Partners and Donor Agencies delays appropriate monitoring of donors’
presence, capital receipts to avoid duplication of activities in maternal healthcare by
development partners.

5. Delayed collaboration among Ministries of Women Affairs, Health, Education and
Information remains a challenge in sustaining synergy in financing and activities on
maternal health.

6. Inadequate nutrition-specific human resources across schools to administer and
mainstream nutrition and maternal health related issues into home management
teaching curriculum.

Action points:

1. Civil Society group to facilitate the implementation of provision of the National
Health Act.

2. Civil Society group to facilitate collaboration among underlining Ministries in
improving synergy in activities and finance for maternal health.

3. Civil Society to continuously advocate for better partnership to facilitate adequate
monitoring and speed release of funds.

4. Media to partner development partners on capacity building to enhance accurate
and effective reportage on maternal health.

5. Civil society to facilitate special engagement plan between line ministries and donor
agencies.

6. Executives to facilitate timely release of funds across the line ministries.

Signed:

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