

**ADVOCACY NOTE ON MATERNAL AND CHILD HEALTH PRESENTED BY
CIVIL SOCIETY LEGISLATIVE ADVOCACY CENTRE (CISLAC) TO RADIO
KATSINA ON 6th FEBRUARY, 2015**

Sir, our studies gathered that in Nigeria, one in 13 women dies during pregnancy or childbirth, and 12% of children die before reaching the age of five; every 10 minutes one woman dies from conditions associated with childbirth; and only 39% births take place with assistance of medically trained personnel, coupled with the scarcity of skilled attendants, absence of personnel among other factors impeding the effectiveness of health services in the country; while no fewer than 1,025 deaths take place per 10,000 births in Katsina State.

As part of our commitments to give greater attention to the plights of women and children in Nigeria, the above challenges informed the decision of Civil Society Legislative Advocacy Centre (CISLAC) with support from Mac Arthur Foundation to engage relevant stakeholders in Katsina and interrogate issues around maternal and child health.

We recognized and appreciate the persistent participation and robust contributions by Radio Katsina during our various engagements such as CSOs-Legislative-Executive Roundtable on Maternal Health, Media Training for Legislative Reporting on Maternal Health and Town-Hall Meeting on Strengthening Existing MDGs Committee in the Katsina State Assembly, Town-Hall Meeting on Understanding Legislative Oversight Function on Maternal Health carried out between 22nd-23rd January, 2014 and 7th-8th May, 2014, respectively.

We observed during the aforementioned engagements that:

- Over the years, Northern part of the country has recorded high level of maternal mortality; and Katsina State is among the States hit by high maternal mortality rate.
- Inadequate data on the current budgetary allocation to health sector and maternal mortality rate has posed a setback to the level of interventions on maternal mortality in the State.
- The State Government has established several interventions through MDGs schemes such as funding of special projects and conditional grants scheme to combat maternal mortality and other health related challenges in the State.
- Early child birth, inadequate public awareness on maternal health and shortage of medical personnel to provide for sustainable maternal and

other related health services in the State has aggravated maternal mortality in the State.

- Delay in the provision of effective infrastructural facilities, theft and sabotage of the existing ones, especially across the grassroots have threatened maternal accountability in the State.
- Attitudes of some health personnel, existing socio-cultural beliefs, and high level of poverty have discouraged several women, especially in the grassroots from attending maternal health services in the State.
- Medical facilities are over-concentrated in the urban areas at the expense of the rural counterparts in the State.
- Lack of gender inclusion in policy and decision making terrains, lack of public participation and involvement in budgetary processes in the State backpedal maternal and child health.
- There is no existing Bill or legislation on Free Maternal Newborn and Child Health at Katsina State House of Assembly; and inadequate facilities at Primary Healthcare System in the State.
- There is inadequate media reportage and agenda setting on maternal mortality and other related cases, especially in the grassroots.
- Continuous shift in individuals' attention and interest from local to international media reportage; and unethical attitudes of health personnel has discouraged several women from attending maternal health services.
- Weak media engagement at State level has narrowed the achievement of effective reportage on maternal mortality.
- There is inadequate media commitment to hold policy makers accountable for their constitutional mandates and oversights on maternal health.
- There is inadequate skills and knowledge by the media on various declarations on health that Nigeria is signatory to.
- There is poor public awareness and sensitization on maternal health, especially in the grassroots.
- Poor funding, under-utilization of the existing resources and inappropriate political policies toward the health sector has threatened achievement of effective maternal and child health in the State.
- There is weak media reportage and supervision on budgetary allocation and implementation in the health sector; and poor media surveillance on the existing medical facilities in the State.

Recommendations from the various engagements include:

- Effective political commitment and intensified legislative oversight towards health sector in the State.
- Objective focused and de-normalised media reportage to influence advocacy and participation on maternal health across the grassroots.
- Well-informed and evidence-based media to generate factual data and reportage on maternal health in the State.
- Effective use of socio-media as a tool to enhance media reportage, audience interactivity and accessibility, and feedback on maternal health.
- Investigative journalism, qualitative, informative and educative, reportage to drive individual attention towards local media reportage.
- Strengthened media reportage on maternal health using new reliable and developmental platforms.
- Persistent and expanded media coverage and reportage on maternal health; and increased in political oversights on proper codes of conduct by medical personnel in the State.
- Massive and sustainable public awareness and sensitization to drive individual positive orientation maternal health across the grassroots with significant consideration for religion and traditional leaders.
- Effective and judicious utilization of the existing local resources to cater for sufficient maternal healthcare service in the State.
- Increased in media curiosity towards reportage and supervision on budgetary allocation and implementation in the health sector.
- Effective utilisation of the existing data sources to validate media reportage on maternal health; and increase surveillance by reporters on the existing health facilities in the State.
- Effective political commitment; increased legislative oversights and concerted efforts by various stakeholders to enhance maternal accountability in the State.
- Massive recruitment of medically trained personnel to strengthen the existing medical attendance; and provision of training and re-training programmes on maternal health for medical personnel in the State.
- Provision of sufficient infrastructural facilities, especially at the grassroots to combat maternal and infant mortality across the State.
- Provision of adequate security measures to tackle theft and sabotage on the State's infrastructural facilities, especially in the grassroots.
- Radical sensitization campaign, advocacy and public awareness programmes to drive positive individual orientation towards maternal health services across the State.

- Adequate and accurate data on budgetary allocation to health sector and maternal mortality across the state to assist government and development partners interventions toward maternal health services.
- Increase in budgetary allocation, supervision and transparency toward the health sector; and intensified focus on preventive rather than curative measures on maternal mortality.
- Strengthen Primary Healthcare System, judicious utilization of existing resources and workable implementation of health related policies across the State.
- Continuous demand for gender equality in policy and decision making; enhanced public involvement and participation in budgetary process; and immediate development and presentation for passage, comprehensive Bill on Free Maternal Newborn and Child Health by Katsina State House of Assembly.
- Increased legislative oversight and supervision to ensure proper professional codes of conduct by medical personnel in the State; and constructive collaboration among CSOs, executives and legislators on effective maternal accountability.

Having been part of CISLAC's activities on maternal and child health, CISLAC believes Radio Katsina as a human right and public enlightenment organization remains an essential channel to further canvass, galvanize, prioritise and draw attention of relevant stakeholders in the State towards various issues highlighted above.

Thank you!