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Raise a Healthy Child Project

Focus: Action against Malaria & Malnutrition
The Kabri Project Report

By

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The Overview

Raise a healthy child is a five year community project designed to address the menace of maternal and child mortality in rural, hard-to-reach or underserved communities. Malaria and malnutrition was the first target of this project because it has been identified as the major cause of death among women and child especially during pregnancy and the first five years of life. Under this, we provided nutritional training to women, we supported pregnant women with vitamin and nutritional supplement to ensure healthy pregnancy and normal child growth, we provided malaria screening, prevention and treatment for pregnant women and child below five years and we preparing distribute subsidized sterile delivery kits in all the selected communities to ensure safe delivery.

This report covers only Kabri project in three communities including; Kabri-song, Kabri-chana and Kara which was initiated and executed by RHEMN with medical supply and logistical support from Lawanti Community Development Foundation (LCDF), Federation of Muslim Women Association of Nigeria (FOMWAN), A.A Aliyu Global Resources Gombe, Sardauna LGA PHC department and some passionate individuals. The project was launched on January 30th 2017 to February 1st 2017.

Project Objectives

- To provide women with basic training and knowledge of child nutrition and food preparation using local resources
- To support women and children with essential vitamin supplements for healthy pregnancy and normal child growth
- To create awareness about hygiene and malaria preventive measures
- To provide prophylactic treatment of malaria for pregnant women and curative treatment for children of 5 years and below
- To provide pregnant women with sterile supplies to ensure healthy delivery and minimize infection.

Project Goal

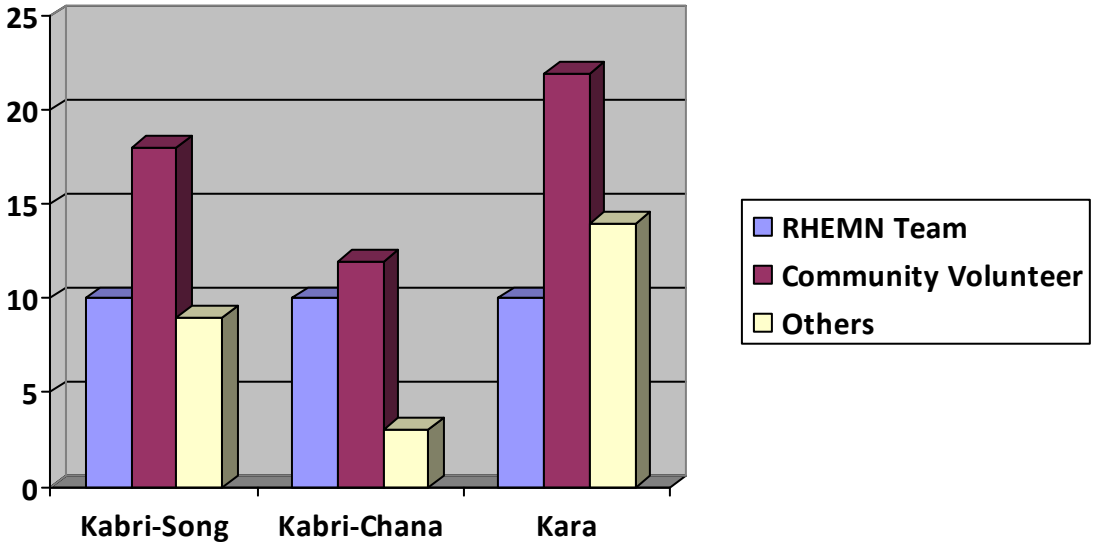
To address the menace of maternal and child mortality and strengthen basic healthcare service in hard-to-reach communities.

Required Resources

Human resources; the personnel needed for this project was drawn from RHEMN pool of volunteers and community volunteers who did not require any financial

compensation. LGA primary healthcare workers were also enrolled into the program and they formed the integral part of our community volunteer team to sustain the project.

Fig 1. Participants Demography



Material resources;

The PHC facilities in the three communities were used as the venue of our events.

5000 doses of vitamin A supplement and 5000 doses of Albendazole tablets were donated to us by Federation of Muslim Women Association of Nigeria (FOMWAN).

About 1000 doses of prophylactic antimalaria tablets (fansider) and 500 doses of coartem tablets for malaria treatment was donated by AA. Aliyu Global Resources Gombe.

Another 500 doses of coartem tablet for malaria treatment and 10 packets of malaria testing kits purchased from money raised as contribution/donation from RHEMN members and some passionate individuals.

200 bottles of 6 months dosages of Pre/post natal vitamin supplements for pregnant women was donated by LCDF and FOMWAN.

All stationaries were printed from funds raised by RHEMN members**.** The communities provided chairs, writing tables and canopies in some instances at the venues of the events.

Finances/fundraising; All funds used in this project were sourced from contributions/Donations from RHEMN members and some passionate members of the target community who were contacted for support among which include: Prof Ahmed Mayun of UNIMAID, Engineer Hassan Umar Kabri of MAUTECH, Misa

Gaji, Dr Ahmed Kara, Abubakar Ibrahim Saddiq and Alhaji Saidu Baju.

Project Target

The targeted population was based on the surrounding villages of the three communities. The chart below shows target kabri-song community was has more surrounding villages than others and other factors include; awareness and mobilization. Population projected to cover was 7000. Three communities were targeted for pilot study which include; Kabri-Chana, Kabri-Song and Kara communities.

Fig 2. Project target Table

Community	Target Population	Total Reached
Kabri-Song	3000	2196
Kabri-Chana	2000	861
Kara	2000	1198
Total	**7000**	**4257**

Fig 3. Project Target Chart

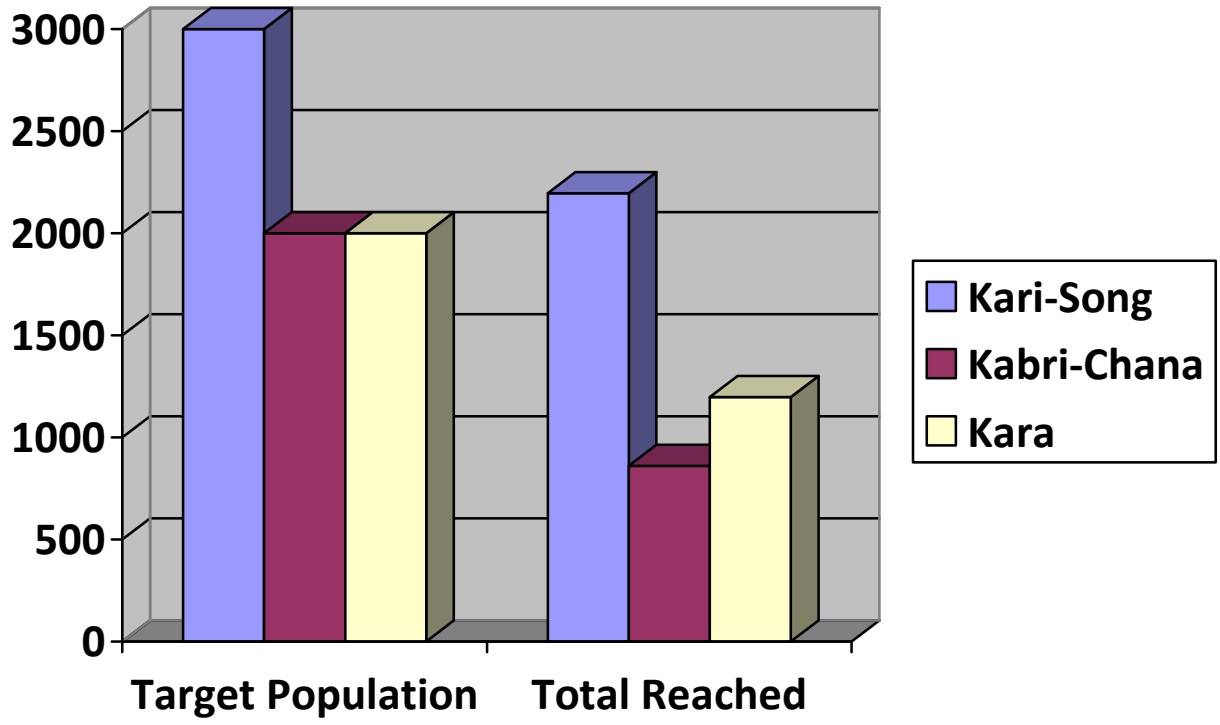


Fig 4. The Community Layout

Project management

The project is managed by RHEMN project management committee and community volunteer structure was setup to facilitate home visits as well as sustain the activities and reaching out to other communities within this ward. All new programs for this project must be ascertained by the two committees

The Intervention

Community mobilization; Community mobilization was carried out through the community leaders and the local organizing committee led by Mallam Husseini A. Saddiq

Vitamin A supplement and albendazole tablets; Triage was done to sort out eligible children for deworming and vitamin A supplement. There was good turnout across the three community targeted leading to 80% success of our target. Children between 5 to 11 years were also enrolled for antiworm treatment based on our need assessment team recommendation.

Pre/Post natal vitamin supplement;
The pregnant women were sorted out; they were counseled on the need for regular antenatal visit to clinics managed by trained health personnel and strict adherence to the supplements given to them. They are expected to take these caps once daily for 6 consecutive month pre and post delivery. Those women whose pregnancy was up to 9 months were given folic acid tablets and fersolate tablet for 3 months and were advised to adhere to strict post natal visit to ascertain need for 6 months post delivery supplement which will be provided via the community team. In Kara, about 13 pregnant women who were eligible for prenatal supplement could not get it because it was out of stock at the venue of the program. However, their names and addresses were noted to be supplied with those drugs on the later date through the community volunteer team.

Malaria Screening, treatment and prophylaxis; All pregnant women were screened and children showing symptoms of malaria infection were also screened and those tested serum positive were treated immediately while those tested negative were given malaria prophylaxis (Fansidar).

Distribution of ITNs; Treated nets were not distributed during the outreach because it was out of stock as at the time of commencing this project. Efforts are been met to secure adequate quantity of nets for distribution in the three communities as soon as possible.

Nutritional Training/counseling; There was also general health lecture on hygiene, preparation of child nutrition using local resources, hand washing procedures, and monitoring of child growth.

Home Visit; All pregnant women who were given multivitamin supplement were informed about the home visit in three month time to ascertain the level of compliance and adherence. The team will also review the status of the pregnancy and report any relevant signs of complication.

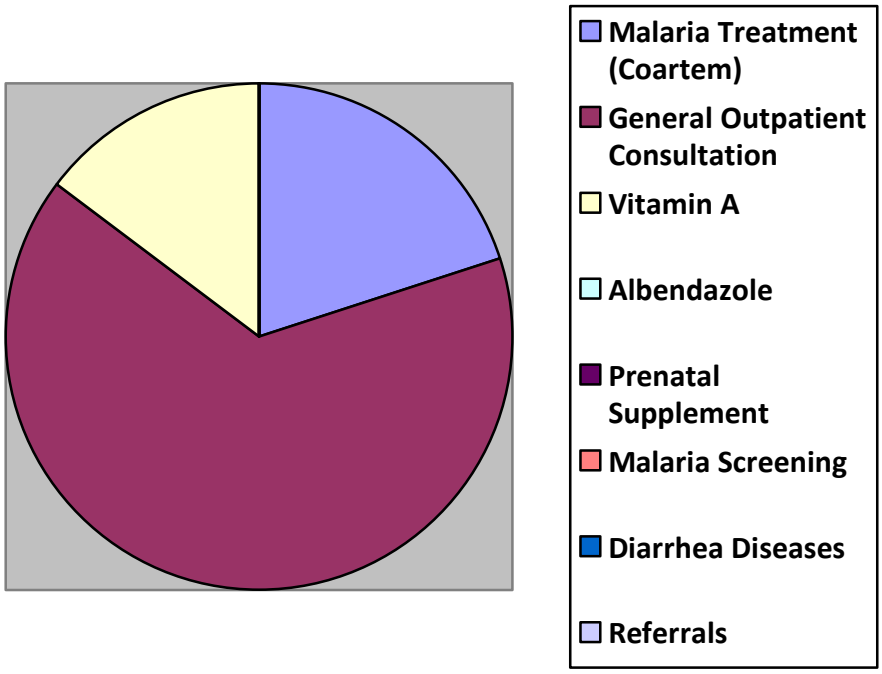
Open Consultation; Based on the recommendation of the need assessment team, general consultation was opened to all for medical advice, counseling and obtaining prescription for minor cases and to facilitate referral of complex cases. Those whose drugs were not available onsite were written out for them to purchase elsewhere.

Referral; During open consultation, complex cases were referred to higher health facilities including; General hospital Gembu, FMC Jalingo and Specialist hospital Jalingo for further evaluation.

Weight monitoring; All women and children who were enrolled in this project were weighed and their weight will be regularly monitored during home visits.
Sterile Delivery kits: The health facilities identified in all the three communities will be the delivery point to receive and distribute the subsidized sterile delivery kits for use on every delivery in the three communities.

Fig 5. Intervention Table and chart

Intervention	**Target**	**Total achieved**	**Percentage**
Vitamin A Supplement	3000	2257	75.2%
Albendazole deworming	4000	2814	70.35%
Pre/Post natal supplement	450	256	56.8%
Malaria Prophylaxis (fansidar)	1000	580	58%
Malaria treatment (coartem)	450	170	37.7%
Malaria Screening	1000	580	58%
General Consultation	2500	1676	67.04%
Diarrhea Diseases	200	93	46.5%
Referrals	300	152	50.6%
Total	**12900**	**8578**	**66.4%**



Partnership; RHEMN have partnered the community, organizations and NGOs to facilitate the success of this project. The partners include; Federation of Muslim Women Association of Nigeria (FOMWAN), Lawanti Community Development Foundation (LCDF) and AA Aliyu Global Resources.
RHEMN is open to partner with any organization, government entity and individuals who are passionate about the project.

Sustainability Plan;

- The local organizing team was setup for continued monitoring of the project in the community. All home visits will be carried out in collaboration with the community volunteer teams and the Community healthcare workers.
- RHEMN will ensure continuous supply of drug and other medical supplies such as pre/post natal supplement, Folic acid tablets, Malaria rapid test trips and Anti malarials.
- RHEMN will also sustain quarterly workshop and training for community health workers and volunteers to maintain standard.
- RHEMN will commence the supply of subsidized sterile delivery kits for pregnant women to minimize post partum infection

Challenges

- Lack of adequate logistical support to conduct house-to-house intervention
- Quack health practices in the three communities affecting antenatal care because the quacks are not well equipt with the basic knowledge and skills to detect dangers during pregnancy and delivery.
- Lack of access road to the communities affecting the movement of patients, volunteers and equipment

Recommendations

- Empower the community volunteer health workers and TBAs through workshops and trainings
- Involve the local media in the mobilization strategy
- Reaffirm strong community volunteer team
- Extend the project to other communities on the plateau needing the same services.
- Advocate for government intervention in terms of quack practice in the communities.

Conclusion

This project was a successful one as about 80% of our target was met. The project will maintain 6 month interval outreach for the next five years. There was massive community participation in all the three communities. All the healthcare workers in the three communities participated passionately.

Appendix I Donations Received for Kabri project

S/N	Item	Unit	Quantity Supplied	Quantity Used in the field	Balance
Lawanti Community Development Foundation (LCDF)					
1	Vitamin A 100,000 IU (Blue)	5 tins	2500 dose	1000 doses	1500 doses
2	Vitamin A 200,000 IU (Red)	10 tins	5000 dose	1500 doses	3500 doses
3	Albendazole Tablet 400mg	5 tins	5000 dose	1500 doses	3500 doses
4	Multivitamin Capsules	105 tin	18900 dos	18900 doses	Nil
Federation of Muslim Women Association of Nigeria (FOMWAN)					
1	Vitamin A 100,000 IU (Blue)	10 tins	5000 dose	1500 doses	3500 doses
2	Vitamin A 200,000 IU (Red)	10 tins	5000 dose	1500 doses	3500 doses
3	Albendazole Tablet 400mg	5 tins	5000 dose	1500 doses	3500 doses
4	Multivitamin Capsules	20 tins	3600 dose	3600 doses	Nil
5	Paracetamol Tablets	2 tins	-	2 tins	Nil
A.A Aliyu Global Resources Gombe					
1	Paracetamol Syrup	Bottle	100 bottles	100 bottles	Nil
2	Folic Acid Tablets	5 tins	5000 dose	3000 doses	2000 doses
3	Coartem Tablet	3 pkts	300 doses	200 doses	100 doses
4	Fansidar Tablet	2 rolls	60 doses	60 doses	Nil
Deborah Tiyatiye					
1	ORS	1 cartn	200 sachet	100 sachets	100 sachets
2	Zinc Oxide tablets	1 cartn	100 doses	50 doses	50 doses
Al'yasau Bojude					
1	Maldox Tablets	6 rolls	60 doses	60 doses	Nil

Cash Donation		
	Name	**Amount**
1	RHEMN team	N44500
1	Ahmed Mayun	N10000
2	Ahmed Hamidu Kara	N20000
3	Hassan Umar Kabri	N20000
4	Abubakar Ibrahim Saddiq	N10000
5	Alhaji Saidu Baju	N20000

Total	**N124500**

Appendix 2 Equipment and Medical Supplies

1. Vitamin A. Supplement
2. Albendazole Tablets
3. Coartem Tablets for adults and Children
4. Multivitamin capsules
5. Folic Acid Tablets
6. Fersolate Tablets
7. Fansidar Tablets
8. Paracetamol Tablets and syrups
9. ORS powders/Zinc oxide tabs
10. Malaria rapid test kits
11. Weighing Scale

Appendix 3 Expenses Summary

S/N	Item	Amount
1	Transportation of RHEMN team from Gombe to Gembu through Jalingo	N34900
	Transportation of RHEMN team from Gembu to Gombe through Jalingo	N38000
2	Transportation of RHEMN team from Gembu to Kabri	N10500
3	Transportation of RHEMN team from Kabri to Chana	N2250
4	Transportation of RHEMN team from Kabri to Kara	N2550
5	Transportation of RHEMN team from Kara to Gembu	N4200
6	Feeding in Jalingo one day	N5250
7	Feeding of RHEMN team in Gembu Day 1	N10700
8	Feeding of RHEMN team in Gembu Day 2	N6000
9	Feeding of RHEMN team in Gembu on departure	N6000
10	Malaria RDT strips	N4000
Total		**N124350**

Note;

1. Accommodations of all volunteers in Gembu were provided by Prof Ahmed Mayun and in Kabri it was provided by Hon Julde Garba Kabri.
2. Feeding of volunteers in kabri was covered by the respective community leaders during all the program days.
   So, no money was spent in that regard.

Appendix 4 List of Participants

S/N	Name	S/N	Name
RHEMN Team Participants		21	Hammanjoda Yahya
1	Muhammad Ahmad Saddiq	22	Muhammadu Alhaji Hassan
2	Muhammad Adam	23	Abdurrahman Mbayiri
3	Tukur Muhammed Jibrin	24	Esther Philip
4	Yusuf Sule	25	Jamilatu Nuhu
5	Muhammed Umar Wammi	26	Abubakar Mahmuda
6	Zulkifli Shehu	27	Bala Usman
7	Muhammed A. Zurungwa	28	Kasimu Ali
8	Muhammed Ali Lawanti	29	Abubakar Adamu
9	Muhammed Musa Zambuk	30	Obediah Abel
Community Volunteers		31	Halidu Bobboi
10	Saidu Yahya	32	Umar Abdullahi
11	Husseini Ahmadu Saddiq	33	Abubakar Tajir
12	Abdullahi Ahmadu	34	Muhammadu Hammaraji
13	Dalailu Shuaibu	35	Jibrilla Hamidu
14	Jannatu Ahmadu Saddiq	36	Muhammed Hono
15	Juli Winboi	37	Bashiru Babba
16	Yusuf Dauda	38	Aliyu Yakubu
17	Ahijo Zongo	39	Ma,aji Adamu
18	Junaidu Mustapha	40	Iliyasu A. Adamu
19	Danladi Bagu	41	Hammasumo Sulei
20	Hamidu Yakubu		

The Event Pictures

Donation from FOMWAN

Malaria Screening

Donation from Ayasa's Bojude

Donation from LCDF Gombe

A child receiving vitamin A at Kara

RHEMN Team at chana

A.A Aliyu Global Resources Donation

Consulting at Kabri

RHEMN at Kara

RHEMN Team crossing to kabri

RHEMN Team in group Photo

Women & Children at Chana

Arrival of RHEMN Team at kabri

In a Community meeting at Kabri