

**GF/NACA/ATM/RSSH/C19RM PROJECT**

**STATE: NASARAWA**

**LGA: KOKONA**

**WARD: GARAKU**

**PREPARED**

**BY**

**FIRST STEP ACTION FOR CHILDREN INITIATIVE**

**SUBMITTED TO:**

**NETWORK OF PEOPLE LIVING WITH HIV/AIDS IN NIGERIA  
(NEPWHAN)**

**REPORTING PERIOD:**

**QUARTER 2 (APRIL-JUNE) 2024**

<b>PROEJCT TTLE:</b>	
RESILIENT AND SUSTAINABLE SYSTEM FOR HEALTH (RSSH/ATM PROJECT) AND COVID-19 RESPONSE MECHANISM (RSSHC19RM)	
Name of Organizations:	FIRST STEP ACTION FOR CHILDREN INTIATIVE
Communities	1 (Garaku)
Ward of implementation	Garaku
Facility of implementation	PHC 1, Garaku
LGA:	Kokona
Reporting Period:	Q2 (April-June, 2024)
The Project objectives	<ol style="list-style-type: none"> <li>1. To address health issues in a sustainable, equitable, and effective manner, including services to combat HIV/AIDS, tuberculosis (TB), and malaria.</li> <li>2. Strengthening governance, coordination, and data use across HIV/AIDS, TB, and malaria programs at the federal, state, and local government levels;</li> </ol>
<b>Project Goals:</b>	
<ol style="list-style-type: none"> <li>1. To contribute to making foundational changes to strengthen the health system in Nigeria through targeted interventions that support the federal government to set policies, strategies, and standards</li> <li>2. To support the strengthening of Nigeria's health system for effective response to COVID-19 pandemic and other public health emergencies.</li> </ol>	
<b>Summary of Activities and outputs Implemented in the Quarter</b>	
<p>The Resilient and Sustainable System for Health (RSSH) and COVID-19 Response Mechanism (C19RM) grant seeks to address gaps in the systems and infrastructures for efficient and effective outcomes in the health systems with Civil Society organizations (CSOs) contributing their quota in achieving results.</p> <p>In Q2 (April-June, 2024), First Step Action mobilized targeted community stakeholders into action through advocacy visits. Stakeholders such as leadership of the National Union of Road Transport Workers (NURTW), Business Women/Men, religious leaders, the Youth, Traditional leaders and other opinion leaders in Garaku community were reached and advocated on the need to address issues at PHC 1, Garaku.</p> <p>Strategies used to address issues at the facility were through advocacy follow-ups, Focused Group Discussions, Client Exit Interviews, Key Informant Interviews at facilities (OIC) and LG levels (M&amp;E through LG Disease Surveillance Unit Officer) respectively.</p>	

In addition, in the quarter under review, NEPWHAN the organization conducted Sexual and Gender Based Violence Sensitization Outreach and First Step conducted the activity in Garaku community in April, 2024 reaching over 1,500 (M900/F600). The organization leveraged on the Nasarawa state government Palliative Distribution venue to reach larger population. Key messages passed were on the effect of Sexual and Gender Based Violence (SGBV) to the individual, family and society. How and where to report SGBV, existence of Nasarawa State Violence Against Persons Prohibition (VAPP) Law, categories of perpetrators of SGBV and types/forms of SGBV respectively. CBO extracted key contacts of SGBV service providers in the LG and state and added in the fliers and shared to participants during the sensitization.

**Outcome/Immediate Result.**

1. A total 1,500 (M900/F600) people were sensitized about Sexual and Gender Based Violence
2. 24 Clients (M7/F17) were interviewed at PHC 1, Garaku. Using a standardized tool, issues interviewed were on quality of services of AIDS, Tuberculosis, Malaria and COVID-19, availability of ATM/C-19 drugs/vaccines at the facility, issues around gender and human rights abuses and accessibility (clients' proximity) to the facility.
3. As a result of the advocacies/follow-ups, stakeholders donated 2 tables to PHC 1, Garaku

**Ongoing Follow-Ups**

At the entry advocacies in April, 2024, 3 issues were identified at PHC 1 Garaku as follows:

1. Inadequate tables
2. Lack of male Ward at PHC 1 Garaku.
3. Collapsed/abandoned incinerator (pending)

However, stakeholders through advocacies were able to donate 2 tables to PHC 1. Garaku. The issue no 2 and 3 above are still unresolved.

The organization is still following up with stakeholders such as Abaga Toni, HRH, Chief Sylvester Ayi the Chairman Traditional Council of Chiefs, Kokona LGA, the Kokona LGA (Health Department), the District Head of Garaku and PHC1 Garaku management to address the remaining two issues which seems to be beyond community efforts looking at their financial implications.

**Challenges:** Key challenges encountered in the quarter under review are as follows:

1. Ignorance: Some stakeholders despite sensitization still held that PHCs are government structures hence, community should not support them.
2. Weak support from some stakeholders blaming their actions on economy hardship

### Lessons Learnt

*Lessons learnt should be stand alone*

1. Working with right community stakeholders can produce timely results because it increases project visibility and promote understanding of issues being addressed.
2. Working as a team called Community Led Monitoring Team (CLMT made up of organization Program Officer, facility WDC and a Community representative) on the project promoted project buy-in for ownership and sustainability.

### Risk Analysis:

**The following posed Risk to the RSSH/ATM Project Intervention**

**1. Inadequate information about the project goals and objectives to the stakeholders:** The team was aware of this threats hence focused on providing adequate sensitization to all stakeholders for project buy-in and sustainability.

**2. Weak or no support due to financial constraint:** The team was aware of this risk going by our previous intervention hence devised a means of allotting facility issues to groups in the community based on their presumed financial capacity. Some issues were assigned to youths, NURTW, business women and religious leaders. Some were assigned to traditional leaders, LG and facility management.

**3. Financial Mismanagement:** CLMT envisaged the likelihood of funds contributed at the community to be fraudulently utilized. As a result, stakeholders agreed to channel all funds raised to 1 person (WDC) who was mandated to be given daily update of funds received to the Program Officer. It was discussed that at the end of the contributions, all names of groups and their support given shall be submitted in the final report for all to see.

#### BREAKDOWN OF CONTRIBUTORS FOR THE PROCUREMENT OF TWO TABLES AT PHC 1, GARAKU

S/N	ITEM	UNIT COST	BREAK DOWN OF CONTRIBUTORS	TOTAL
1	Procurement of first table to PHC 1, Garaku	20,0000	1.Stakeholders = (7,000) 2. CBO (PO) = (5,000) WDC & CR = (8,000)	20,000
2	Procurement of second table to PHC 1, Garaku	30,000	1.Stakeholders = (15,000) 2. WDC&CR = (15,000)	30,000
3	<b>Grand Total</b>	<b>50,000</b>		<b>50,000</b>

### Planned Activities for next Month

In Q3 (July-September, 2024), First Step Action will be working in a new community/facility while following up with the Q2 community/stakeholders to address the 2 pending issues.

The new community is PHC 2, Garaku located in Angwan Loko, Garaku.

The following are the planned activities for the quarter (July-September, 2024)

1. 24 Client Exit Interviews at PHC 2, Garaku (8 monthly)
2. Two Focused group Discussions (July and September)
3. Community Entry Advocacy/advocacy follow-ups to Angwan Loko community stakeholders
4. Facility Entry Advocacy/advocacy follow-ups to PHC 2, Garaku, Angwan Loko
5. Sexual and Gender Based Violence Sensitization outreach at Angwan Loko Community Play ground, Religious worship centres and schools.
6. Two Facility Key Informant Interviews with OIC PHC 2 Garaku

**Annex: PICTURES**



**PO facilitating facility Entry Advocacy session at PHC 1, Garaku on 6<sup>th</sup> April, 2024  
Primary School, Garaku**

**PO facilitating GBV Sensitization on 23<sup>th</sup> April, 2024 at LGEA**



**Community Rep Conducting CEI at PHC 1, Garaku on 7<sup>th</sup> April, 2024**

**WDC Conducting CEI at PHC 1, Garaku on 9<sup>th</sup> April, 2024**



**CLMT with Kokona LG Health Secretary & LGA M&E during LG Level entry Advocacy on 19<sup>th</sup> April, 2024 at LG Secretariat, Garaku**



**ATM Coordinators, CLMT and PHC 1 Garaku Management During Follow-Up Advocacy to Abaga Toni on Wednesday, 15<sup>th</sup> May, 2024**



**NEPWHAN SPO, CLMT & OIC PHC 1 Garaku during handing-Over of 2 tables donated by stakeholders on 10/06/2024 & 30/July, 2024**



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