



Addressing the shortage of female health workers in Nigeria

The Women for Health programme contributes to improving maternal outcomes by addressing the acute shortage of female health workers, especially midwives, in five states of northern Nigeria (Jigawa, Kano, Katsina, Yobe and Zamfara) using gender, equity and culturally sensitive approaches.

Collaborating with 20 Midwifery, Nursing and Community Health Extension Worker Training Institutions and state ministries of health, the Programme aims to support the training of more than 6,000 female health workers and support their deployment to rural health facilities where they can have the greatest impact on maternal, infant and child mortality.

This is particularly important in a context where social norms in rural communities can prohibit women from receiving care from male health workers.

Key facts in focal states before W4H

Up to 90% of women deliver their babies without a skilled birth attendant present in northern Nigeria, compared to 35% of women in the South

Less than 3% of women in the North use contraceptives compared to 50% of women in Lagos state

In Jigawa state there are only five nurses per 100,000 people, compared to Enugu state in the Southeast with 59 per 100,000

W4H (2014) Root Cause Analysis Report

This transformation is supported by the following series of interrelated activities, implemented by W4H:

- **Engaging with key decision-makers and opinion leaders**, to build support for, and address political and socio-economic barriers to the training, employment and retention of female health workers in rural areas.
- **Advocating to and supporting state governments** to deliver on their responsibilities to the training institutions to ensure provision of adequate infrastructure and timely release of funds.
- **Increasing the number of students in training** by supporting health training institutions to gain and retain accreditation and supporting states to establish new training institutions and Community Midwifery programmes.



- **Strengthening management systems and structures** of the training institutions to provide an appropriate environment for high quality professional training
- **Improving the 'female-friendliness' of the health training institutions** by increasing the gender sensitivity of staff; constructing female-friendly accommodation, improving security, providing academic and psycho-social counseling, provision of child care facilities, and increasing the proportion of female tutors and managers.
- **Establishing a Foundation Year Programme in each W4H state** to recruit and build the academic, and personal and social capital of young women from rural areas, so that they can gain access to professional training programmes, return to work in



Nine schools fully accredited

Over 4600 female students enrolled

35 houses built for midwives

95% of students are positive about the future

their home environment, act as role models in their communities.

- **Increasing personal, social and economic empowerment of rural women** who are unable to gain a place on professional programmes.
- **Improving the quality of teaching** by supporting capacity strengthening of tutors in student-centered methodologies
- **Improving available resources, teaching facilities and access to digital technologies** to maximize the quality of teaching.
- **Engaging with community and religious leaders and parents/husbands** to gain support for women undertaking training and working as health service providers.
- **Increasing the number of female tutors by funding midwives, nurses and community health extension workers** to undergo tutor training.
- **Improving the recruitment and retention of midwives in rural communities** by addressing the practical, social and religious barriers to their retention.
- **Maximising the potential of new technologies** by establishing effective information management and results systems, and e-learning opportunities.

Results as of December 2016:

4,609 female students are, or have been, enrolled into professional training of Midwifery, Nursing and JCHEW/CHEW since the start of the programme.

1276 female students from rural areas attended a Foundation Year Programme to prepare them for professional health training.

35 houses (seven per state) were constructed to accommodate midwives to ease accommodation challenges and support their retention in rural areas.

7 out of the 20 institutions now have a female principal and all have more female tutors and females in senior management positions.



167 infrastructure projects have improved the quality of accommodation and learning in the training institutions and their suitability for female students.

13 health training institutions have established crèches and 10 have employed nannies for female students with babies and young children.

10 out of 13 institutions (Schools of Nursing and Schools of Health Technology) have established a quota for female admission (some as high as 80%).

9 schools now have full accreditation and eleven have provisional accreditation.

95% of students on the Foundation Year Programme have greater hope for the future, are acting as role models for other young women and feel that they are accorded greater respect within their home and their community.

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