The Project

Most cases of child death in Nigeria are caused by treatable diseases like malaria, diarrhea and pneumonia. Child morbidity rates are significantly higher in hard-to-reach rural settlements where poverty is rife; health facilities are many times not within easy reach of these communities. The Partnership for Improved Child Health (PICH) project by Christian Aid Nigeria is aimed at reducing morbidity and mortality rates of under-five children from treatable diseases like malaria, diarrhea and pneumonia. The project employs the Integrated Community Case Management of childhood illnesses (iCCM) strategy which provides timely and effective treatment to children below age five in hard to reach communities. The PICH project is currently being implemented in four Local Government Areas in Benue State Nigeria with UK Aid Match Funding from the UK Department for International Development.

With the commencement of the project, Community Resource Persons (CORPS) will be trained to manage and treat iCCM conditions – malaria, diarrhoea and pneumonia – in children below the age of five. These CORPS will be resident in the hard-to-reach communities of the 4 Local Government Areas of Benue State where the PICH project will be implemented.

Mimidoo’s Need

Mimidoo Avungu, 28, farmer, lost her first child when the toddler was three years old. The girl had been sick with fever but Mimidoo did not have the resources to get medical help for her, the nearest health facility to her community was also a long distance away by foot and Mimidoo would have to cross a river on a makeshift bridge to get her child to the health facility in another community. When the toddler’s health got worse she tried to take her to the health facility on a commercial motorcycle but the child died before they got to the Primary Healthcare Centre which was far away from Uno community in Kwande LGA, Mimidoo’s community of residence.
Mimidoo’s second child, a boy was two when he died during a rainy season. Commercial motorbikes did not run during the rainy season and Uno community was cut off from the health facility by the river which was so high it washed the makeshift bridge away. She made an effort to get him medical help however; she walked the long distance on foot and waded through the river with her baby in her arms. The baby however died in her arms before she got to the health facility so she walked back to her community with her dead child in her arms.

When Mimidoo’s third child, a boy, died at 1 year 6 months, Mimidoo did not try to visit the health facility, she had neither the resources for the visit nor the will to make the trek which could end with her baby dead in her arms. The baby was diagnosed with pneumonia by a health practitioner resident in her community; the health practitioner requested for payment before administering any treatment. When she was unable to pay him, he did not treat the baby so he died.

Mimidoo says the project will have great impact on the lives of her only surviving children – twins she had a month before Christian Aid Nigeria’s visit to her community in May 2017. In addition to accessible treatment for her twins, Mimidoo hopes a decent bridge will be constructed through the project to connect her community with the health facility.

An Urgent Situation

Mimidoo’s story is not an isolated incident; cases of infant mortality and morbidity are rife in Benue State, Nigeria. When Christian Aid visited Kwande Local Government Area of Benue State in May 2017, one of the four Local Governments in Benue State where the PICH project will be implemented, Sewuese Akula’s 4 month old son, Terkimbi, had a severe case of diarrhoea and a suspected case of pneumonia. Sewuese got medical help for the child 4 days after she noticed he was sick; according to Sewuese, she waited that long because the child was “only vomiting” and she had bought drugs over the counter to stop the vomiting. When the diarrhoea manifested through stooling she took the child to a private
health practitioner who recommended that the baby be admitted at the health facility. Due to financial constraints, Sewuese’s husband rejected the recommendation and purchased more drugs instead.

At the time of Christian Aid visit to Kwande, Terkimbi was in very poor condition. A staff of Christian Aid already trained on management of iCCM conditions, recommended and bought Oral Rehydration Solution for Terkimbi; the treatment was administered by Elizabeth Ugwe, the Officer in Charge of the Primary Health Facility closest to Sewuese’s community. Sewuese said the treatment had not been recommended by the private health practitioner she visited.

Free and Accessible Treatment for Children Under-five

Community Resource Persons (CORPs) on the PICH project will be trained and equipped with medicines and treatment options like the Oral Rehydration Solution required for Terkimbi’s treatment. They will also be armed with medicines for the treatment of Malaria and Pneumonia which will be available for free. Free treatment will reduce out of pocket expenditure on healthcare for under-five children from women like Sewuese who live in poverty. The CORPs will be trained to provide early and accurate treatment which can save the lives of under-five children like Terkimbi. Trained health workers like Elizabeth, the Benue State Ministry of Health and the Federal Ministry of Health will oversee the activities of the CORPs in the four local governments where the project will be implemented.

Test, Diagnose, Treat!

Under-five children taken to the CORPs for treatment will be tested for diagnosis to be reached before treatment is administered. The CORPs will refer severe cases to primary healthcare facilities after administering palliative treatment. The tests will be useful to eliminate blind treatment which could have severe consequences.

Oche Oko, a blacksmith and his wife Salome Oko, a farmer, lost their 4 year old child to malaria after they treated the child with drugs bought at a Chemist without prescription. Oche and Salome did not take the child to the health facility for four days because they were afraid the bills would be too much for them and they thought the child would get well after they administered the drugs they bought.
Doowuese sold cassava to finance health care for her daughter who had diarrhoea. Doowuese is pictured here with her third child, a son.

Credit: Christian Aid/Nneoma Anieto

When the boy’s condition did not get better, they took him to the hospital along with the drugs they purchased from the chemist. The hospital diagnosed the boy with malaria but he died before treatment could be offered to combat the malaria.

A Much Needed Support

Financial constraints are a primary reason why caregivers in Benue State buy over the counter drugs without testing and diagnosis instead of visiting health facilities. Doowuese Aondohem a 20 year old farmer said women in her community use traditional medicine on their children and lose the children when the traditional medicine proves ineffective. When Doowuese’s second child had diarrhoea at 1 year 5 months, she knew traditional medicine was not an option. She was however unable to immediately get healthcare for her daughter due to financial constraints. She waited till the next day when she could sell her cassava at the market to raise funds to take the child to the health facility. With proceeds from her cassava sales, she took the child to the health facility where she was treated; the child is currently 2 years old and very healthy.

The PICH project will provide needed help to caregivers in remote communities where healthcare is inaccessible and will provide relief to poor households who are unable to bear the cost of healthcare. Child mortality and morbidity rates will also be greatly reduced in the communities where PICH project will be implemented. The Traditional Ruler of Agbede Community in Konshisha LGA of Benue State, Zaki Nder Kuha said “The government is overloaded so we are excited when NGOs come to help us. Your own has less protocol, there will be no moving files from table to table and you will help us within the shortest possible time.”

Oche and Salome Oko treated their son with unprescribed drugs, they lost him. Credit: Christian Aid/Nneoma Anieto

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Zaki Nder Kuha is excited about the PICH project in his community. Credit: Christian Aid/Nneoma Anieto

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