



Northeast Nigeria Humanitarian Response

COVID-19 Response



Donation of PPEs to a Health Facility by UNFPA

Health Sector Bulletin

October 2020



5.6 Million

PEOPLE IN NEED OF
HEALTHCARE



4.4 Million

PEOPLE TARGETED BY
THE HEALTH SECTOR



1.9 Million*

IDPs IN THE THREE
STATES



2.7 Million***

PEOPLE REACHED IN
2020

Highlights

- As of 1st November 2020, a total of 1,084 confirmed cases have been recorded including 63 deaths, 10 active cases, and 1,011 recoveries in the three states. Planning has commenced in Adamawa State for the training of NYSC staff to help in sample collection.
- SMS cycle 4 implementation was delayed due to late arrival of the drugs. The state, partners and stakeholders have agreed to commence cycle 4 door-to-door administration of the drugs to eligible children from 17th of November, 2020.
- The sector has also finalized its PiN to be 5.8M across the BAY states (Borno: 2.87M; Adamawa: 1.8M; and Yobe: 1.13M), the estimated target is 5.26M across the BAY states (Borno: 2.67M; Adamawa: 1.68M; and Yobe: 0.92M). The financial requirement to meet the stated needs is estimated at \$105.3M.
- So far so good, the sector has been able to reach 2.7M people in 2020 with Basic Primary Health Services across all sites which includes, IDP Camps, Health Facilities, and Host Communities.
- A total of 65 Primary Health Care Centres in Borno, Adamawa and Yobe State (BAY states) (Borno: 26 HFs, Adamawa: 26 HFs, Yobe: 13 HFs) have been provided with supplies (essential psychotropic drugs, mhGAP registers and patient appointment cards) to support treatment of patients with mental health disorders by trained PHC workers at the PHC levels.

HEALTH SECTOR



45 HEALTH SECTOR PARTNERS
(HRP & NON HRP)

HEALTH FACILITIES IN BAY STATES**



1529 (58.1%) FULLY FUNCTIONING
268 (10.2%) NON-FUNCTIONING
300 (11.4%) PARTIALLY FUNCTIONING
326 (12.4%) FULLY DAMAGED

CUMULATIVE CONSULTATIONS



4.9 Million CONSULTATIONS****
1,490 REFERRALS
72,566 CONSULTATIONS THROUGH HARD TO REACH TEAMS

EARLY WARNING & ALERT RESPONSE



276 EWARS SENTINEL SITES
19SS8 REPORTING SENTINEL SITE
2,000 TOTAL ALERTS RAISED*****
85% ALERT VERIFIED

SECTOR FUNDING, HRP 2020



*Total number of IDPs in Adamawa, Borno and Yobe States by IOM DTM XXX

**MoH/Health Sector BAY State HeRAMS September/October 2019/2020

***Number of health interventions provided by reporting partners as of September 2020.

**** Cumulative number of medical consultations from Hard-To-Reach Teams.

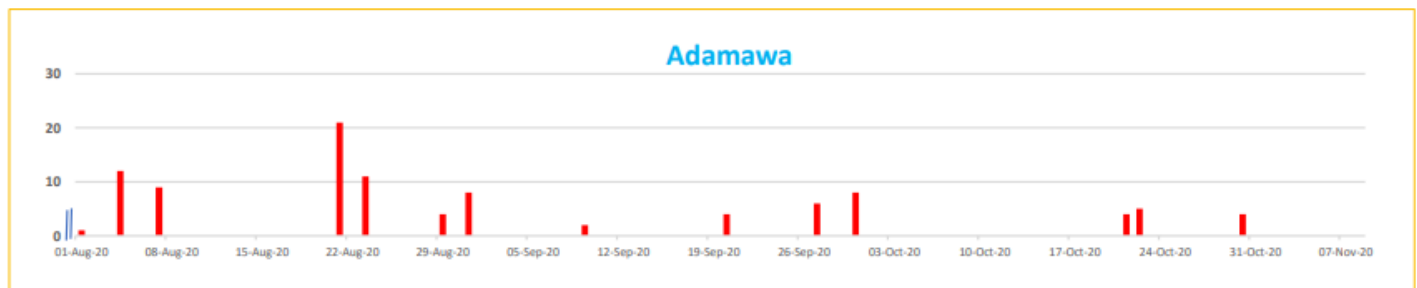
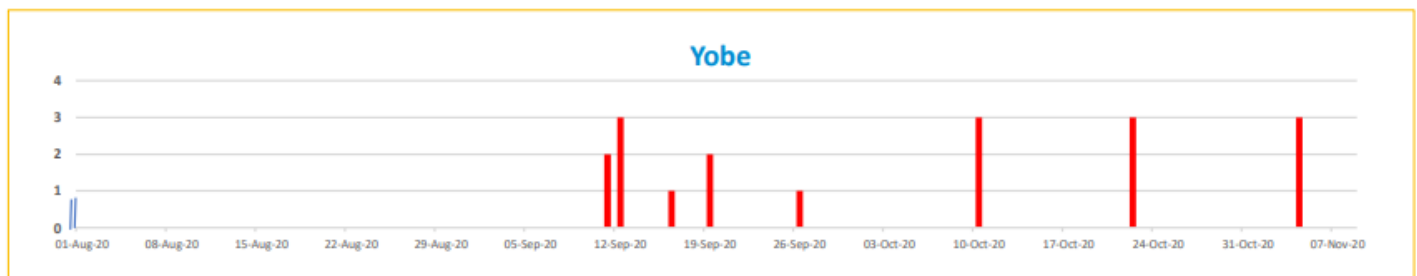
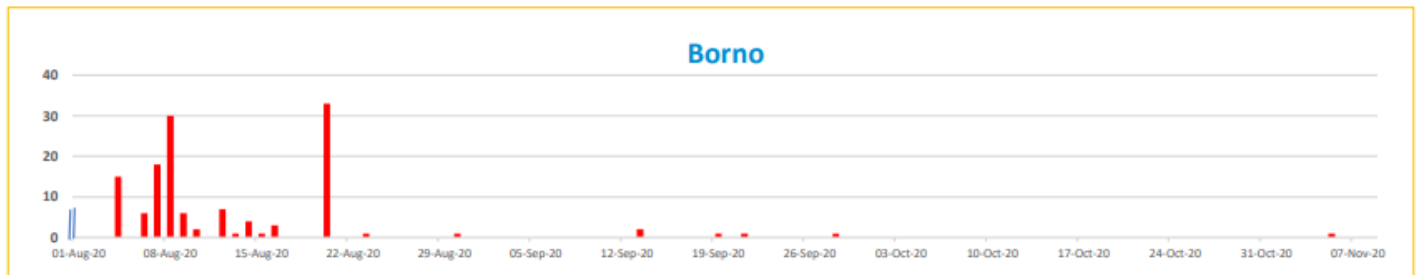
***** The number of alerts from Week 1 – 45, 2020

Situation Updates

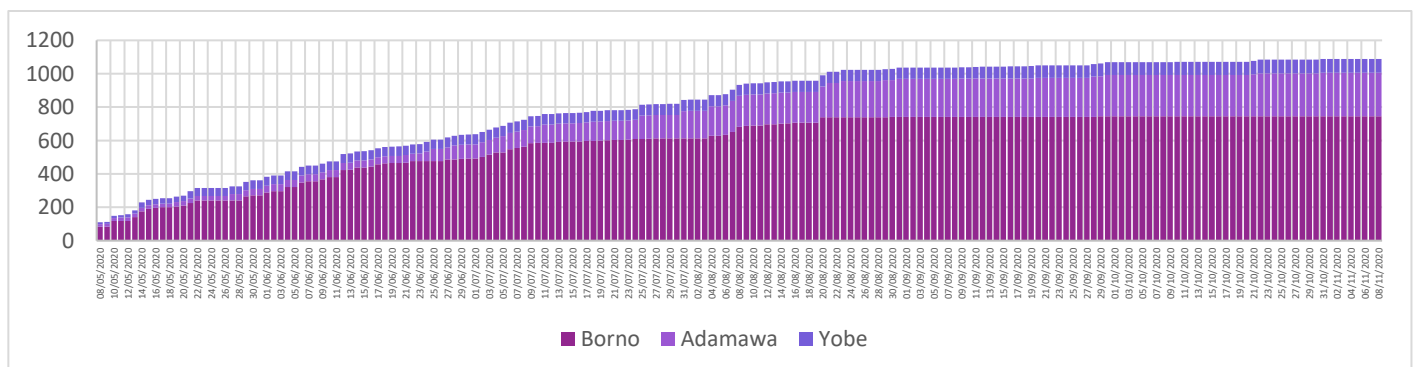
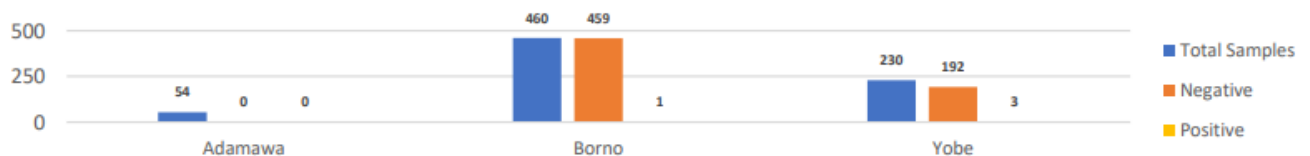
COVID-19 EPIDEMIOLOGICAL SUMMARY

As of 8th November 2020, a total of 1,094 confirmed cases have been recorded including 63 deaths, 14 active cases and 1,020 recoveries in the three states. In Borno state, 1 confirmed case was reported for week 45 and there was no death recorded; 1 patient was discharged and 460 samples were collected in week 45 as against 347 in the preceding week. In Adamawa state, no confirmed case was reported for week 45 and 54 samples were collected within the week. Total samples pending for testing is 236. In Yobe state, there are 3 new confirmed cases in week 45 and 230 samples were collected in week 45, out of which 192 samples tested negative while 35 results are pending.

Daily Confirmed Cases (1st Aug. – 8th Nov. 2020)



BAY States Weekly Sample Analysis



COVID-19 Mental Health and Psychosocial Support (PSS) Intervention:

Host Community and IDP Camps: WHO has supported the mhGAP response teams to provide group sensitization and counselling on COVID-19 during routine mental health care outreach sessions in Jere, Mafa, MMC, and Ngala LGA. Over 430 patients and their care givers were educated and counselled on COVID-19 realities, mode of transmission, signs and symptoms, IPC standard precaution and steps to take when symptoms occur.

In Yobe state, WHO and SPHCMB are working to scale-up mental health and psychosocial services in remote and security-compromised LGAs. After training conducting 5-day training for 34 PHC workers from selected PHC Centers in high-risk LGAs, WHO and SPHCMB are working to provide drugs, commodities and job manuals to the PHC workers to ensure prompt and adequate services delivery in remote areas.

HIV:

- HIV is fully integrated into COVID-19 response to share experience in management of stigma amongst infected people and their families, to help develop processes in tackling stigmatization and psychosocial support. The 8 HIV Counsellors that were incorporated into the POE & MHPSS pillars response for pre & post-test counselling of clients for COVID-19, are still counselling of clients.

NTDs:

- Lymphatic Filariasis Campaign was conducted in five LGAs for 4days aimed at reaching 500,000 children (5 years & above) in IDP camps and host communities.
- MDA against Lymphatic Filariasis commenced within the week on the 7th October in all 5 implementing LGAs, at the end of every day, evening review meetings are held to discuss progress on the field, challenges and plan for the next day.

COMMUNICATIONS:

Community health champions reached more than 100,000 IDPs with Cholera, Malaria and COVID-19 preventive messages in Borno state;

- Radio jingle on covid-19 prevention ongoing across 3 Radio stations in Borno state
- WHO published 20 media reports on WHO activities and health emergencies at large

DISTRUCTION & LOOTING OF WHE STORES HOUSING COMMODITIES FOR THE HTR MOBILE TEAMS, ICCM CORPS & PLUSES FOR EPI

On Monday the 26th of October 2020, hoodlums invaded the premises of the warehouse housing the state essential drugs stores, state cold chain, ADPHCDA building and WHO stores and vandalized every equipment/commodity at site. Commodities stored for the HTR MT and the ICCM CORPS including pluses for EPI were all destroyed. The executive Governor alongside with the commissioner of health, WHO and the EC ADPHCDA paid an on-the-spot visit to assess the unfortunate incidence. The governor called for calm and requested that with the measure put in place, he is optimistic that the vandals will return some of the commodities in few days to come.

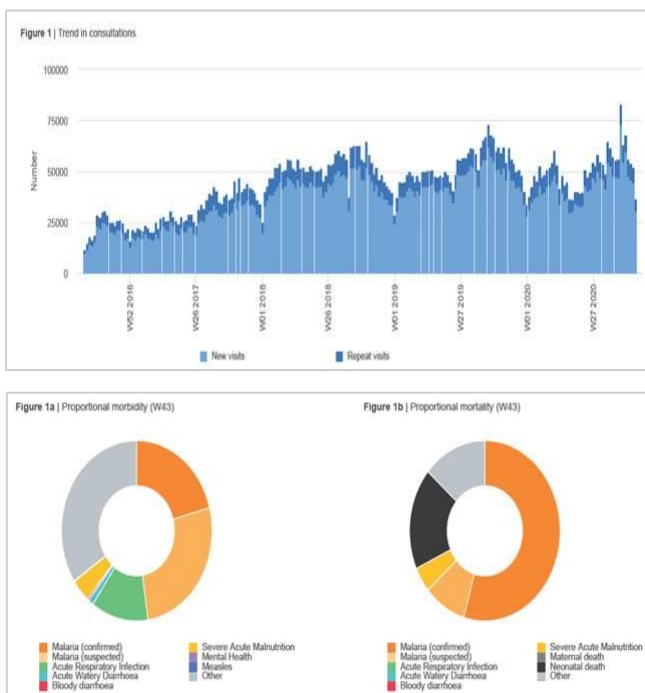
Early Warning Alert and Response System (EWARS)

Number of reporting sites in week 43: A total of 198 out of 276 reporting sites (including 32 IDP camps) submitted their weekly reports. The timeliness and completeness of reporting this week were both 71% respectively (target 80%).

Total number of consultations in week 43: Total consultations were 30,265 marking a 26% decrease in comparison to the previous week (n=41,197).

Leading cause of morbidity and mortality in week 43: Malaria (suspected n= 9,542; confirmed n= 7,466) was the leading cause of morbidity and mortality reported through EWARS accounting for 47% of the reported cases and 54% of the reported deaths.

Number of alerts in week 43: Thirty-three (33) indicator-based alerts were generated with 100% of them verified.



Morbidity Patterns

Malaria: In Epi week 43, 7,466 cases of confirmed malaria were reported through EWARS. Of the reported cases, 1,724 were reported from Gwange PHC in MMC, 445 were from General Hospital Biu, 349 were from Hausari IDP Camp Clinic (MDM) in Damboa, 187 were from Uba General Hospital in Askira Uba, 123 were from Gajiram MCH in Nganzai, 118 were from Dikwa General Hospital, 116 were from ISS IDP Camp Clinic (FHI360) in Ngala and 115 were from Askira FSP Clinic in Askira Uba. Twelve (12) associated deaths were reported from Gwange PHC in MMC (11) and Koronglim Dispensary in Chibok (1).

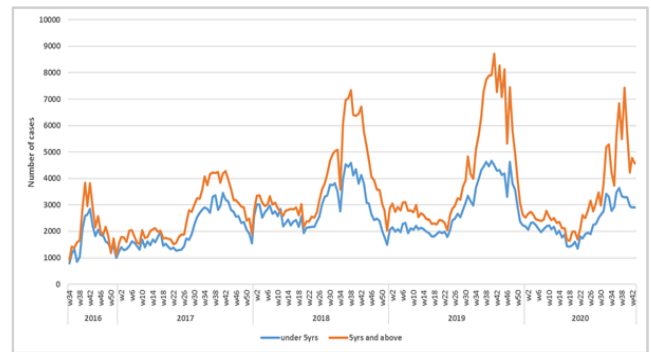


Figure 2: Trend of malaria cases by week, Borno State, Week 34 2016 – 43 2020

Acute Watery Diarrhea: In Epi week 43, 394 cases of acute watery diarrhea were reported through EWARS. Of the reported cases, 45 were from Gwoza Wakane IDP Camp Clinic in Gwoza, 43 were from Dalori PHC in Jere, 22 cases each from Dikwa General Hospital and State Specialist Hospital in MMC, 20 were from IRC GSS IDP Camp Clinic in Gwoza and 19 were from Gamadadi PHC in Bayo. No associated death was reported.

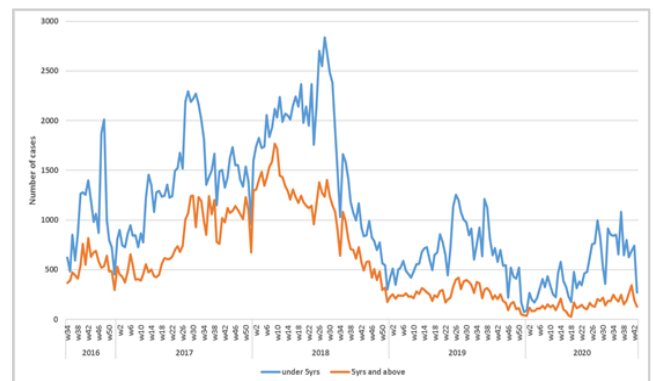


Figure 3: Trend of acute watery diarrhea cases by week, Borno State, week 34 2016- 43 2020

Acute Respiratory Infection: In Epi week 43, 4,394 cases of acute respiratory infection were reported through EWARS. Of the reported cases, 365 were from FHI360 Clinic Banki in Bama, 272 were from Hausari IDP Camp Clinic (MDM) in Damboa, 233 were from Dikwa General Hospital, 188 were from ISS IDP Camp Clinic (FHI360) in Ngala, 183 General Hospital Ngala (FHI360) and 158 were from Gumsuri Clinic in Damboa. No associated death was reported.

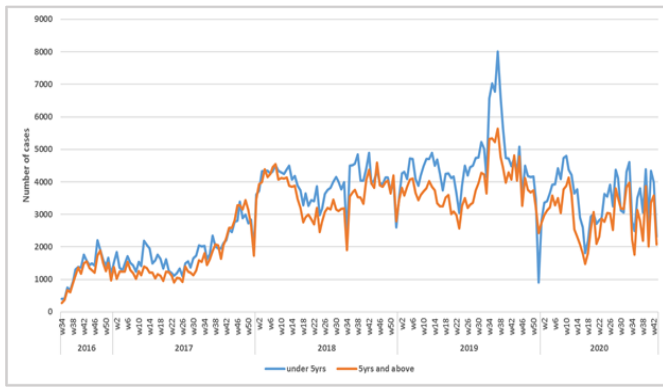


Figure 4: Trend of acute respiratory infection cases by Week, Borno State, week 34 2016- 43 2020

Suspected Measles: Ten (10) suspected measles cases were reported through EWARS from Zabarmari PHC in Jere (2) and One (1) case each from Chibok General Hospital, Dalori Health Clinic in Konduga, Hausari IDP Camp Clinic (MDM) in Damboa, Mainahari Clinic in Biu, Malaharam Dispensary in Damboa, Muna Garage Camp Clinic B in Jere, Njingowa Health Clinic in Magumeri and Shuwari Host Community Clinic in Damboa. Twenty-four (24) additional cases were reported through IDSR* from Chibok (1), Konduga (8), Kukawa (9), MMC (2) and Monguno (4) LGAs making a total of 34 suspected measles cases. No associated death was reported

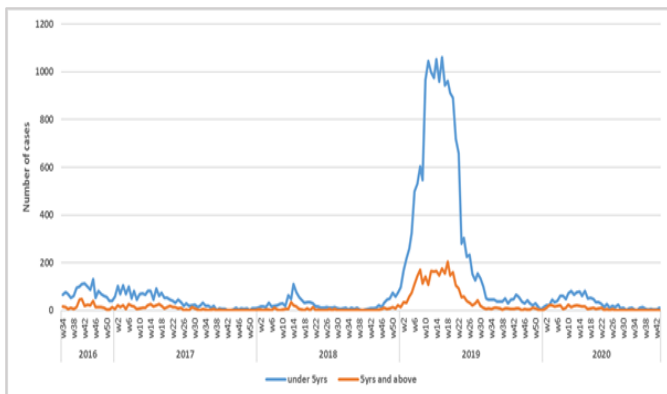


Figure 5: Trend of suspected measles cases by week, Borno State, Week 34 2016- 43 2020

Suspected Yellow Fever: Three (3) suspected yellow fever cases were reported through EWARS from Gamadadi PHC in Bayo (1), Kuda Lawanti Health Clinic in Nganzai (1) and MCH Miringa in Biu (1). Eight (8) additional cases were reported through IDSR from Damboa (3), Kala-Balge (1), Konduga (1), Magumeri (1), MMC (1) and Nganzai (1) LGAs making a total of 11 suspected Yellow Fever cases. No associated death was reported.

Suspected Meningitis: Three (3) suspected meningitis cases were reported through EWARS from University of Maiduguri Teaching Hospital in Jere.

Suspected VHF: No suspected VHF case was reported in week 43.

Suspected COVID-19: No suspected case of COVID-19 was reported through EWARS in week 43.

Suspected cholera: No suspected cholera case was reported in week 43.

Malnutrition: 1,474 cases of severe acute malnutrition were reported through EWARS in week 43. Of the reported cases, 120 were from Boarding Primary Camp Clinic in Konduga, 61 were from Banki Health Clinic in Bama, 58 cases each from Gajiram FSP in Nganzai and Kurbagayi MCH in Kwaya Kusar, 56 were from Fori PHC in Jere, 51 were from Farm Centre Camp Clinic in Jere and 48 were from Umaru Shehu Hospital in Jere. One associated death was reported from Jaragol Clinic in Bayo.

Neonatal death: Three (3) neonatal deaths were reported through EWARS from University of Maiduguri Teaching Hospital in Jere.

Maternal death: No maternal death was reported through EWARS in week 43.

**IDSR- Integrated Disease Surveillance and Response*



AGUF carried out selection and training of 35 field staff/volunteers to facilitate mobile health care services in Guyuk and Lamurde Local Government Areas. Essential drugs were also procured for distribution to 12 selected health facilities (six in each of Guyuk and Lamurde LGAs).

AGUF also mapped and mobilized six new clients/beneficiaries with mental health challenges for support. Also, our field staff, volunteers and project staff were able to consolidate on the mobile health services in Girei and Song as well as launch into similar outreaches in Guyuk and Lamurde Local Government Areas.

A mission on assessment of displaced persons was undertaken to Holma and Zumo wards of Song Local Government Areas in company of other health sector colleagues. While on the mission, essential drugs and hospital equipment were also presented to Holma PHCC, which provide services to displaced persons at the camp, returnees and the host community.



AHI carried actively carried out shelter-to-shelter outreaches in Dikwa and Monguno LGAs.

Pregnant women and nursing mothers were sensitized during the shelter-to-shelter outreaches in both LGAs. The need to carryout anti-natal care, postnatal care and immunization was emphasized to the pregnant women in the course of the outreach. The beneficiaries were also sensitized on the different family planning services available and the importance of child spacing. Pregnant women were referred to facilities where AHI supports with delivery kits and also follow-up on women who have delivered in facilities supported by AHI to encourage on immunization and post-natal services.

Sexual and Reproductive health sessions with adolescent girls and young women were conducted by volunteers involved in outreaches with adolescent girls. They were sensitized on sexual violence such as rape, the general modes of transmission, preventive measures and general precautionary measures. The need for general body hygiene and menstrual hygiene was emphasized to adolescent girls. The importance of hair plaiting, washing of inner wears and proper disposal method of sanitary pad was highlighted.

With regards to capacity building, 10 volunteer researchers were trained on IDRC project on understanding and addressing the sexual reproductive health needs and challenges of young girls in humanitarian settings in Uganda and Nigeria. 36 individuals were reached with questions on the proposed topic (young girls, married women, service providers and key community informants). Also, 36 health workers from Damboa and Gwoza were trained on a two-day refresher training on MISIP.



ALIMA provided a total of 15,073 outpatient consultations with Acute Diarrhoea, Malaria, ARI and skin infection being the leading cause of morbidity. There is an increase number of inpatient admissions and deliveries as compared to the preceding month. 701 patients were managed in the Inpatient Department with 836 deliveries assisted by a skilled attendant and 1,754 PNCs and 5,075 ANC consultations were conducted. A total of 12 C-sections were performed at Monguno General Hospital.

2,216 OPD consultations for children under 5 were provided in Muna Clinic with 62 referrals and 4,057 consultations for all ages in TVC Clinic with 79 referrals. At Waterboard clinic in Monguno, 1,132 OPD consultations were conducted while a total of 4,286 OPD consultations for children under 5 were conducted in Askira and Hawul LGAs.

In Monguno, a total of 72 Trauma related cases were seen and managed, 16 cases of Road Traffic Accidents, 39 cases of domestic accidents, 15 cases of assaults, 1 burn case and 1 I&D were all seen and managed accordingly.

For SRH activities in MMC/Jere, 1,293 ANC and 237 PNC consultations were provided, in which 547 ANC are first visit and PNC within 72 hours of delivery at Muna Clinic with 2 referrals. At Teachers Village clinic, 1,122 pregnant women in total came for ANC (ANC 1, 429) while the total PNC consultations were around 373(PNC within 72hours 297). BEmOC activities were conducted at CBDA clinic where 241 deliveries were recorded which is higher compared to last month delivery, a total of 15 referrals was made to secondary/tertiary care and 250 deliveries were conducted at TVC Clinic, the total number of deliveries is higher compared to last month deliveries. Traditional Birth Attendants (10) in Muna and TVC (8) were engaged to refer patients from the community for delivery at CBDA and TVC Clinic.

In Askira and Hawul LGAs in Southern Borno, 240 deliveries were recorded and 1,240 ANC consultations were conducted.



CARE has three projects under the SRHR program docket in Borno State. Supporting Access to Family Planning and Post Abortion Care (SAFPAC) project supports 20 health facilities in three Local Government Areas (MMC, Jere and Konduga). The UNPFA-funded by KIOCA for Emergency Sexual and Reproductive, Maternal, New-born, Child Health and Integrated with referral (MMC, Jere and Konduga) and Global Affairs Canada project, which focuses on lifesaving activities for communities in Bama and Dikwa LGAs.

The project teams reached 8,723 (2,399 girls; 3,398 women; 1,065 boys; 1,280 men) on SRH/GBV awareness raising. Other sensitization sessions at the community level and in facilities reached 235 boys, 268 girls, 396 men, 530 women for STI prevention and protection methods for safe sex. 160 boys, 129 girls, 466 men and 224 women received

condoms. On the LARC; 44 girls and 77 women were reached. Birth Controls via injectable were administered to 85 girls and 249 women. Oral contraceptives were given to 223 girls, and 370 women. Family planning, safe abortion and post abortion care services available at the health facilities reached 361G, 550W with ANC services, 102 girls, 201 deliveries and Post Natal Care (PNC) to 118 girls and 262 women. Delivery kits were also provided to girls and women of reproductive age to maintain hygiene. Additional support through TBA supported deliveries during labour reached 203 women. All these services were achieved across the 20 health facilities namely Abbaganaram, Jakana, Auno, Chabbal, Mairi, Fori, 505 Housing Estate, Dalori, Gamboru, CBDA Housing Estate, Gongolong, Njimtilo, Bulabulin, Dalaram, 777 Housing Estate, 1000 Housing Estate, Gwange, Jiddari, Pompomari, Dusuman, and mobile clinics in Dikwa and Bama.

CARE also completed its minimum initial service provision (MISP) package training for SEMA focal points at the IDP camps, health service providers in MMC, Jere and Konduga and government stakeholders from SEMA and SPHCDA. The training brought together 30 persons in two batches of 3-day training each.



CPPLI conducted sensitization/awareness sessions in some project locations with strict adherence to COVID-19 preventive measures. At Delichim community in Michika LGA, parents and caregivers were sensitized on child labour, and participants were encouraged not to engage and burden their children with overbearing work especially during the harvest period. A total of 43 women attended the sensitization session and 20 were reached. At Sabongari community in Askira Uba, targeted parents and caregivers were sensitized on the effect of child/early marriage. The session recorded 30 persons in attendance (27 women, 3 men) and 16 persons (14 women, 2 men) were reached. During the session, consequences of early marriage such as vesico-vaginal fistula (VVF), trauma, death during giving birth were highlighted.

At Bazza, Kuburshosho in Michika and Betso community in Mubi north, the commemoration of the international day for girl child was done focusing on eliminating harmful traditional practises such as female genital mutilation (FGM), cultural marks, denial of opportunities such as education to girl child among others. The community members commemorated the day with match and rally with lots of captivating inscriptions portraying the importance of girl child in the society. CPPLI supported the activity with face masks for the adolescent girls, flipchart paper and markers.



Commemoration of International Girl Child in Mubi

A total number of 150 adolescent girls participated in the activity and 123 persons were reached (23 men, 60 women, 12 adolescent boys, 28 adolescent girls). Six (6) minor cases of child protection concerns (2B, 4G) were referred to hospital for medical treatment and the survivors are coping well.



FHI 360 provided 19,525 outpatient curative consultations in her clinic facilities in Dikwa, Banki, Ngala and Damasak in the month of October 2020. Acute Respiratory Infection (ARI) was the leading cause of communicable disease morbidity with 4,371 cases. It accounts for the highest morbidities in three sites (Dikwa, Ngala, and Banki). Also, malaria (2,184 cumulative cases) was the second major cause of morbidity across the four sites. Peptic ulcer disease remains the leading single etiology of non-communicable disease (NCD) morbidity in the month of October. This month, a total of 1028 persons with peptic ulcer were treated across all FHI 360's clinics. Cases of hypertension was also seen in significant numbers, at 521 cases.

FHI 360 vaccinated a total of 1083 children in company of their caregivers in Ngala, with a total of 3,294 vaccines administered (304 children enrolled in OPV1 and 153 children completed their third doses (OPV3)). FHI 360 also administered Tetanus Toxoid vaccination to 366 women of reproductive age in Ngala.



IRC with funding from SIDA, EU, OFDA, NHF, ECHO, DFID and GAC reached a total of 67,335 (26,787 M, 40,548 F) clients. Out of this total, 47,597 (18,947 Males, 28,650 Females) were provided with comprehensive primary Health care and reproductive health services at mobile clinics and supported static health facilities. While during the same period 19,738 (11,898 Females, 7,840 Males) were reached with health promotion activities. Major focus of health promotion and sensitization carried out at the clinics and in the communities, by the IRC's health clinician, community volunteers were on symptoms, signs of COVID-19 and prevention, Infection Prevention and Control. Personal Protective Equipment and IPC supplies were distributed to all supported Health facility to enable health workers conduct clinic service safely.

Summary of Beneficiaries reached in October

Primary healthcare	Beneficiaries reached				
	<5years		>5years		Total
	M	F	M	F	
Patient consultations (Communicable & Non-communicable Diseases)	6,903	6,910	11,593	16,746	42,152
Health promotion activities			7,840	11,898	19,738
Reproductive health					5,445
Antenatal care (first visit)					2,062
Delivery by skilled birth attendant					824
Family planning methods (new users)					824
STI			451	1284	1735

In Mafa LGA, Borno state, the IRC completed the rehabilitation of Mafa PHC Clinic building, pharmacy store and the staff quarters. Based on the needs, essential drugs, medical consumables, equipment, PPE and IPC supplies were distributed to all IRC supported health facilities to ensure optimal functioning of all the clinics. IRC Capacity building sessions on Clinical Care of Sexual Assault Survivors (CCSAS) was conducted by the IRC for 15 (11 Females, 4 Males) Health Facilities staff from Konduga LGA Borno state.



MDM provided a total of 2,258 outpatient consultations for all ages in Garba-Buzu clinic Maiduguri with 10 life-saving referrals. 8 out of the 10 referrals were paediatric medical cases while the other 2 referrals were adult medical cases. Kawar-Maila clinic in Maiduguri also had a total of 2,088 OPD consultations for all ages with 23 life-saving referrals. 18 out of the 23 referrals were paediatric medical cases while the other 5 were adult medical cases. El-Miskin clinic in Jere had a total of 1,971 consultations with 35 life-saving referrals. 25 out of the 35 referrals were paediatric medical cases, 5 were adult medical cases while 5 were gynaecological cases. In Damboa, Hausari clinic provided 2,035 consultations while GTS clinic provided 2,310 consultations. Top morbidities for the month were malaria, Acute respiratory tract infection, Gastritis, skin diseases and High blood pressure. For Sexual and Reproductive Health activities, Mdm provided 1,652 ANC consultations across clinics in Maiduguri with 632 as first visits while Damboa provided 785 ANC consultations with 273 as first visit. A total of 355 PNC consultations were provided across clinics in Maiduguri with 285 consultations within first three days of delivery while Damboa provided 113 PNC consultation with 63 consultations within first three days of delivery. 290 Family planning consultations were provided to beneficiaries across Mdm clinics in Maiduguri while 49 beneficiaries benefited from Family planning services in Damboa. 22 Mdm staff were trained on Family planning. For MHPSS activities, Mdm in collaboration with WHO provided a total of 247 (Male-116, Female-131) mental health consultation with 29 (Male-15, Female-14) referrals to WHO and Federal Neuro Psychiatric Hospital. 133 (Male-66, Female-67) beneficiaries had Individual counselling out of which 31 were first visit. 733 (Male-150, Female-583) beneficiaries benefited in MHPSS group sessions across MDM clinics. 20 MDM staff were trained on MHGAP. For GBV services, a total of 55 GBV consultations were provided. 9 out of the 55 were clinical management of rape that came in more than 120 hours. 8,519 community members were sensitized on human rights, PSEA, GBV response and Community-based Safety Planning and Audits. 8 social workers had refresher training on case management, 12 GBV staff were trained on clinical supervision while 44 Daily workers had refresher training on GBV basic concepts and handling disclosure.



PUI provided a total of 24,488 OPD consultations, which is less than that of the preceding month. 4,699 beneficiaries were provided with Sexual Reproductive Health services and Malaria cases confirmed by RDT accounted for 2,904 cases, less than 6,728 cases for the preceding month. This is attributed to the fact that PUI had shortage in Malaria RDT kits. As such clinically diagnosed cases of malaria accounted to 7,385. The number of Acute Watery Diarrhoea is also decreasing as 1,032 cases were reported across health facilities compared 2,295 cases for the previous month. 5,126 cases of ARI were reported. 286 patients were referred for various hospitals for services not provided by PUI facilities, out of which 131 patients were referred to other NGOs that provide IPD services and 137 other patients were referred to government facilities. 558 cases of Malaria confirmed with RDT and 1,789 were clinically diagnosed at Herwa Peace PHC and 1 case of suspected measles was reported to DSNO and WHO.

At Ngarannam PHC, 1,085 cases of Malaria confirmed with RDT and 2,012 were clinically diagnosed. 4 cases of suspected measles were reported to DSNO and the EWARS. Outreach Health Teams at Bayan Texaco, Jajeri Kantudu and Bulabulin Alhajiri reported 1,261 cases of confirmed malaria and 3,584 cases of clinically diagnosed malaria and 3 cases of suspected measles.

With regards to immunization services, a total of 2,862 doses of different vaccines were provided to women and children at Herwa Peace PHC, 1,421 doses of different vaccines provided to women and children at Ngarannam PHC and 1,211 doses of different vaccines provided to pregnant women and children by the Mobile Health Teams at Bayan Texaco, Jajeri Kantudu and Bulabulin Alhajiri.

For Sexual and Reproductive Health Services, Herwa Peace PHC had 782 antenatal visits, 343 post-natal visits, 144 family planning visits. 257 clean delivery kits were distributed and 257 deliveries were recorded. No maternal death was recorded. At Ngarannam PHC, there were 940 antenatal visits and as well as 343 post-natal visits. 146 family planning visits were recorded and 265 deliveries. A total of 265 clean delivery kits/dignity kits were distributed. No maternal death was recorded. The Mobile Health Teams at Bayan Texaco, Jajeri Kantudu and Bulabulin Alhajiri recorded a total of 1,383 antenatal visits, 118 post-natal visits, and 354 clean delivery kits were distributed. No maternal death or delivery was recorded.

For MHPSS, Herwa Peace PHC provided services to 43 individuals, 16 at Ngarannam PHC and 32 by the Mobile Health teams at Bayan Texaco, Jajeri Kantudu and Bulabulin Alhajiri.



TFT continue to address the SRHR knowledge Attitude and Practice (KAP) gap on menstrual hygiene and management identified through research among the women and girls living in IDP camps.

Hence, TFT developed and designed a 6-month project with the women and girls in the Angwan Kara IDP camp Damere in Girei LGA where monthly awareness on menstruation management, hygiene and distribution of sanitary pads were conducted in addition to raising awareness on COVID19 and its safety measures for five (5) months. TFT with support from individuals, WHO and sanitary pad vendor (CRYSYTA) was able to provide 200 sanitary pads monthly for 5 months now alongside hand washing soap, water guard in Angwan Kara IDP camp Damere in Girei LGA where 200 women and girls benefited and are benefiting from this project. In summary 1,200 sanitary pads have been distributed, 100 water guard, 200 pieces of hand washing soaps have also been distributed.



UNFPA in collaboration with The Ministry of Health continue to strengthen preparedness, prevention and response to COVID-19 pandemic. Amidst COVID-19 pandemic, access to Sexual and Reproductive Health (SRH) Services remain critical. Priority need is to ensure the provision of integrated SRH services, as an essential service package to prevent excess morbidity and mortality among most vulnerable population. UNFPA continue to prioritize safe delivery supported by skill birth attendants, ANC, PNC, STIs, including Family Planning services. We have also continued to strengthen SRH partners' coordination and technical support intermittently through a virtual means to ensure partners continue to deliver qualitative and timely service in compliance with WHO and NCDC COVID-19 guidelines.

Another set of personal protection equipment (PPE), including foot-operated hand washing systems, Infection prevention control (IPC) measures which included 10 Motorized fabricated hand sanitizer dispensers, 100 alcohol based hand sanitizers and liquid soap, 6 infrared thermometers, 15 Hazmat Suits, 20 boxes of facemask of 50 unit of each, 10 cartons of N9 Facemask respirator 50 unit of each, 15 Nitrile cartoons, 50 units of each of Hand Gloves were donated to different facilities across Jere, Mafa, MMC and Konduga LGA to strengthen IPC measures for prevention of COVID- 19 and also to increase access in sexual reproductive health services.

Some 200 lactating mothers and pregnant women were reached with Dignity/Hygiene kits and 200 face masks at Integrated health facility Muna, Gubio, Madinatu and Dalori camp were distributed.

SRH /ASRH Information and sensitizations is key with COVID-19 response plan and we have reached 3,807 individuals with Sexual reproductive health/COVID-19 through sensitization and awareness rising.

498 women attended ANC services, 21 deliveries were supported by skilled birth attendants, 34 PNC consultations were provided, 63 women of reproductive age received (FP) family planning services across the service points and 48 benefited from treatment of STIs at UNFPA integrated Health facility.



UNICEF reached a total of 216,581 children, women and men were reached with OPD consultations for integrated PHC services in all UNICEF supported health facilities in the IDP camps and host communities in Adamawa, Borno and Yobe States, out of which 104,345 (48%) were children below five years.

During the reporting period, 108,998 Out-Patient Department (OPD) consultations for curative services were recorded, with Malaria – 44,267 being the major cause of consultations, followed by ARI – 18,982; AWD – 9,405; measles – 160, and other medical conditions – 36,184. A total of 98,409 consultations for prevention services were recorded, including 5,708 children vaccinated against measles through RI sessions; 47,146 children and pregnant women reached with various other antigens (Penta, OPV, TT, Hepatitis, PCV, Meningitis, Yellow Fever); Vitamin A capsules – 12,196, Albendazole tablets for deworming – 8,154, ANC visits – 21,177 and 4,028 LLINs distributed through RI and ANC clinics in Adamawa, Borno and Yobe States. A total of 3,259 deliveries (skilled delivery – 3,022, unskilled – 237) and 5,952 postnatal/home visits were recorded during the reporting period.



WHO HTR teams provided life-saving health services to women and under-5 children in security-compromised communities, the total client treated by HTR teams in 25 LGAs were 30,719. Over 5,280 pregnant women were provided with ANC services in remote and security compromised areas by HTR teams, where Intermittent Prophylactic Therapy (IPT) for malaria and Iron/folate to prevent malaria in pregnancy. While 12,553 children 6-59months were supplemented with Vitamin A and dewormed.

WHO supported HTR teams in the BAY states are intensifying efforts to provide essential health services and prevent malnutrition in remote and security compromised areas. The HTR teams have screened 43,400 children under-5 years for malnutrition and referred children with SAM to OTP sites and SCs across the state.

HTR teams have conducted health promotion sessions on sexual and reproductive health, hygiene and IYCF practices. In October, about 22,404 women of reproductive age were reached with health promotion messages/KHHPs.

ICCM

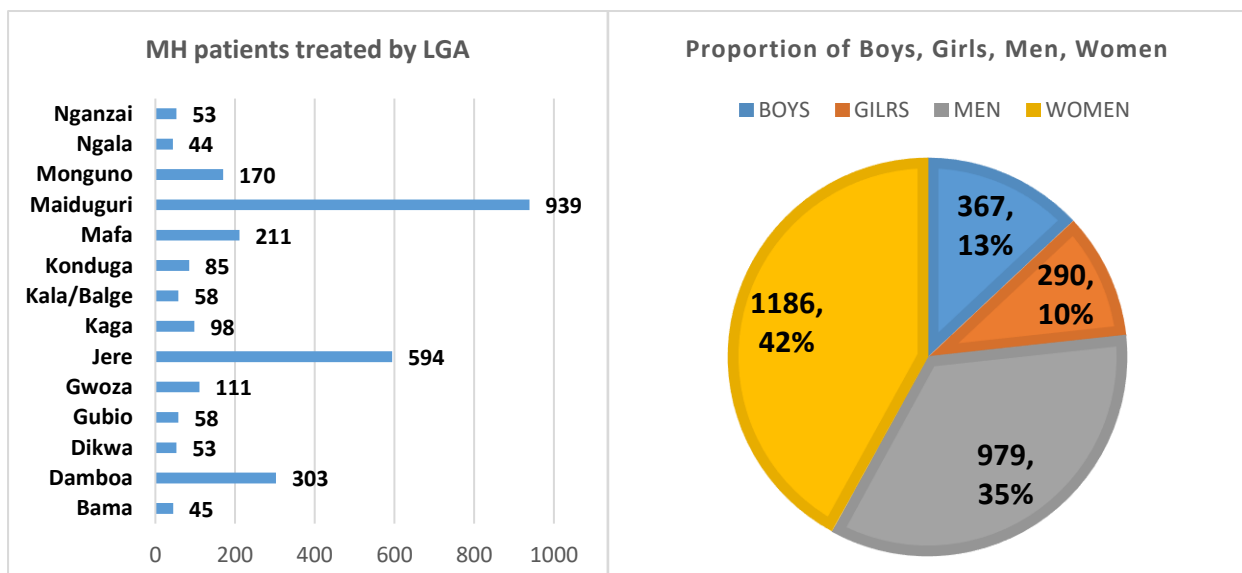
In Adamawa State, 1,496 children were treated for malaria, diarrhoea and Pneumonia by 54/63 CoRPs in 8 LGAs of the state. 1140 of the children were screened for malnutrition using MUAC. 77(6.8%) of the children screened had MAM and were counselled on proper nutrition, while 1 (0.3%) of them had SAM demonstrated by Red on MUAC and were referred to CMAM sites for proper management.

HTR

13,061 clients were seen by WHO supported 8 H2R teams providing services in 8 LGAs of Adamawa state. The teams treated 12549 persons with minor ailments and dewormed a total of 242 children during the month. Pregnant women were provided FANC services with 634 of them receiving Iron folate to boost their haemoglobin concentration while 414 received Sulphadoxine Pyrimethamine (SP) as IPTP for prevention of malaria in Pregnancy.

Mental Health

A total of 97 MH sessions were conducted in 14 LGAs across 47 clinics in host communities and IDP Camps. 2,822 patients were treated, with 16 patients treated on admission at the Federal Neuro Psychiatric Hospital (FNPH) Maiduguri.



COVID-19 MHPSS RESPONSE:

Mental Health Gap Action Programme (mhGAP) teams have continued with COVID-19 sensitization and counselling to patients with mental health disorders and their care givers, during routine outreach sessions in host community clinics and IDP Camps. Sensitization and counselling are aimed at providing psychoeducation on realities of COVID-19, the need to continue with IPC standard precaution and what to do should symptoms occur.

INTEGRATING BASIC MENTAL HEALTH CARE SERVICES INTO PHC LEVELS IN BAY STATES:

A total of 65 Primary Health Care Centres in Borno, Adamawa and Yobe State (BAY states) (Borno: 26 HFs, Adamawa: 26 HFs, Yobe: 13 HFs) have been provided with supplies (essential psychotropic drugs, mhGAP registers and patient appointment cards) to support treatment of patients with mental health disorders by trained PHC workers at the PHC levels.

COMMEMORATION OF 2020 WORLD MENTAL HEALTH DAY (WMHD):

WHO joined MHPSS SWG to commemorate 2020 WMHD with the topic “An Opportunity for Massive Investment in Mental Health” under the theme “Mental Health for All: Greater Investment, Greater Access”. There were speeches and a paper was presented on the topic “Opportunities and Threats of Mental Health Services in the Midst of COVID-19 pandemic in Borno State”. The celebration was both physical and virtual, in order to observe COVID-19 standard precaution.



SS

Nutrition Updates



ALIMA continue to provide lifesaving nutrition services by conducting interventions in all ALIMA ATFC. At Muna Clinic, a total of 344 new SAM cases were admitted and 374 cases were discharged from the program. 19 SAM cases with complications were transferred out to ALIMA ITFC at UMTH. In total, ALIMA supported ITFC at UMTH, admitted 159 new SAM cases with complications and discharged 174. Nutrition interventions were conducted in the ATFC at Water Board Reception Clinic where 16 new SAM cases were admitted and 138 were discharged from the program.

In Askira and Hawul LGAs, 159 children suffering from SAM in ATFC were admitted and 12 complicated SAM case at the ITFC in Askira General Hospital. 13,528 caretakers completed ALIMA facilitated MUAC-mother training sessions; and 89% have shown mastery in the use of the MUAC tapes during the training post-test evaluations. The number has of the reduction of participants in order to maintain social distance during the training session.



MDM had 50 new SAM cases admissions in Garba Buzu clinic, 47 discharges and 45 exit kits distributed. 2 SAM cases with complications were referred to stabilization centre. 1,016 children 6 months – 59 months were screened using MUAC tape at the clinic while 425 (Green-202, yellow-179, orange- 16 and red-28) were screened in the communities. Kawar Maila OTP had 35 new SAM cases admissions, 60 discharges and 56 exit kits. 3 SAM cases with complications were referred to stabilization centre. 855 children 6 months – 59 months were screened using MUAC tape at the clinic while 389 (Green-186, yellow- 158, orange- 37 and red 8) children were screened in the communities. El-Miskin clinic in Jere screened 620 (Green-91, yellow- 187, orange-248, red-94)

children in the clinic while 386 (Green-211, yellow- 117, orange- 47 and red-11) children in the community. All SAM cases without complications were referred to ACF OTP while 3 SAM cases with complications were referred to stabilization centre.



PUI had 37 new admissions for SAM cases in OTP at Herwa Peace PHC, 330 new admissions for SAM cases in OTP at Ngarannam PHC and 176 new admissions for SAM cases in OTP at the Mobile Health Teams at Bayan Texaco, Jajeri Kantudu and Bulabulin Alhajiri.



WHO screened 7,824 children in Adamawa for malnutrition using MUAC by WHO supported 8 H2R teams. Of this number, 48 (0.61%) children had MAM and their caregivers were counseled on proper nutrition, while 11 (0.14%) of them had SAM as demonstrated by Red on MUAC. The SAM cases were referred to the Outpatient Therapeutic Program (OTP) centres, while the SAM cases with medical complications were referred to the stabilization centres across the state for proper management.

Public Health Risks and Gaps

- High risk of COVID-19 spread due to various factors including population living in congested IDP camps, weak surveillance due to insecurity issues, porous international borders, poor compliance in the use of facemask, social distancing, and good hygiene practices by the general public.
- High risk of epidemic outbreaks especially cholera, meningitis, measles, yellow fever. The northeast region is highly endemic for malaria and cholera.
- Unpredictable security situation hampers movements of health workers, drugs and other medical supplies.
- Although health situation is improving under the NE Nigeria Health Sector 2019 Strategy, the health service delivery continues to be hampered by the breakdown of health facilities infrastructure.
- There is a serious shortage of skilled health care workers, particularly doctors, nurses and midwives, with many remaining reluctant to work inaccessible areas because of ongoing armed conflict.
- Continuous population displacements and influx of returnees and/or refugees disrupt and further challenges the health programs implementation.
- Access to secondary health care and referral services in remote areas is significantly limited.
- Unavailability of network coverage in the newly liberated areas negatively affects timely submission of health data for prompt decision-making.

Health Sector Partners and Presence

Federal Ministry of Health and Adamawa, Borno and Yobe State Ministries of Health, UN Agencies: IOM, OCHA, UNFPA, UNICEF, UNDP, WHO, National and International NGOs: ALIMA, Action Against Hunger, Action Health Incorporated, AGUL, CARE International, COOPI, GOAL PRIME, Janna Foundation, MSF (France, Belgium, Spain and Switzerland), ICRC, INTERSOS, Malteser International, Medicines du Monde, Premiere Urgence Internationale, International Rescue Committee, eHealth Africa, FHI-360, International Medical Corps, Catholic Caritas Foundation of Nigeria, Nigerian Red Cross Society, Victims of Violence, Terre des hommes, SIPD, Swift Relief Foundation, Nigeria Centre for Disease Control, RUWASA, BOSEPA, PCNI, BOSACAM; other sectors (WASH, Nutrition, Protection, CCCM, Food Security, Shelter and RRM), Nigerian Armed Forces and Nigerian Air Force.

-Health sector bulletins, updates and reports are now available at <https://health-sector.org>

For more information, please contact:

Dr. Salisu Aliyu Kwaya-bura

Commissioner for Health, Borno State Ministry of Health

Email: kwayabura2007@yahoo.com

Mobile: (+234)08035774564

Dr. Kida Ibrahim

Incident Manager PHEOC

Email: kida.ibrahim@gmail.com

Mobile : (+234)0888035570030

Mr. Muhammad Shafiq

Health Sector Coordinator-NE Nigeria

Email: shafiqm@who.int

Mobile: (+234)07031781777

Mr. Oluwafemi OOJU

Health Sector IMO-NE Nigeria

Email: oojuo@who.int

Mobile: (+234)08034412280

Mr. Safiasnu Ado Ibrahim

Health Sector IMO-NE Nigeria

Email: sibrahim@who.int

Mobile: (+234)07039236199