

#### **Executive Summary**

A large percentage of Nigeria's vulnerable population depends on primary healthcare. Of the 30,000 Primary Healthcare Centers (PHCs) present in communities across Nigeria, 80 percent lack the capacity to provide essential healthcare services. When essential healthcare services are beyond the reach of vulnerable populations, the country's entire healthcare system is in jeopardy.

This dire phenomenon necessitated our monitoring and evaluation of 783 PHCs across 36 States of the Federation plus the Federal Capital (FCT). The objective was to analyze the minimum standard requirement for PHCs in Nigeria based on specific criteria: the state of Water, Sanitation, and Hygiene (WASH); Infrastructure, Personnel; Service delivery, and COVID-19 Vaccine Administration. Our findings, detailed in this report, indicate our fragile healthcare system and reinforce the need for effective mechanisms to improve our healthcare institutions in general.

It's important to mention that some of the factors plaguing the service delivery of these PHCs are systemic. For example, 297 out of the 783 Primary Healthcare Centres visited are not connected to the national grid, and of those lacking access to power supply, 46 percent do not have alternative power sources. For many decades, Nigeria has struggled to provide constant electricity supply for its population despite billions of dollars spent by the government for the same purpose. This failure is rooted in the public sector's lack of accountability and transparency and its adverse effects are evident in the country's healthcare system.

Until we get healthcare service delivery right, our development as a nation will always be under question. And so, as the very first step towards fixing our healthcare system, I implore all critical stakeholders to study this report as it points directly to the issues we must address at the primary healthcare level.

Our gratitude to the National Primary Healthcare Development Agency (NPHCDA) and its leadership for consenting efforts in identifying the challenges confronting the PHC facilities across the country. We recommend that these obstacles impeding quality healthcare service delivery are tackled, beginning with the right policies and interventions.

Our appreciation is extended to the indefatigable team of community champions and state leads who have worked tirelessly to drive the judicious use of public funds. Indeed, with support from Conrad Hilton and Skoll Foundations, we are working to institutionalize health sector accountability in Africa.

We understand that our role as a civil society organization is to serve as a linkage between citizens and the government and our efforts have been dedicated to improving Nigeria's inchoate democracy.

Hamzat B. Lawal Founder, Follow The Money Int'l.

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#### Introduction

With the onset of COVID-19 pandemic affecting billions of lives across the globe, Nigeria's public health institutions kicked into full response mode particularly because its health infrastructure was ill-equipped in the event of a pandemic.

As government and international aid flooded into Africa and indeed Nigeria, FollowtheMoney Initiative and BudgiT launched a partnership named COVID-19 Transparency and Accountability Project (CTAP), to investigate the transparency and accountability in the availability and distribution of COVID-19 vaccines, and the use of COVID-19 funds in 7 African Countries.

In 2021, FollowTheMoney utilizing its youth strength, began tracking the state of Primary Healthcare Centers (PHC) across each of the geo-political zones in 15 states namely Cross River, Yobe, Bauchi, Gombe, Taraba, Abia, Anambra, Imo, Ebonyi, Benue, Kogi, Nasarawa, Plateau, Kebbi and Osun States. This research revealed that 80% of PHCs fell below the standard as outlined by the National Primary Health Care Development Agency (NPHCDA), the Agency responsible for the management and development of PHCs under the Ministry of Health.

The outcome of this tracking culminated in a campaign to standardize PHCs in Nigeria. With support from Skoll and Conrad Hilton Foundations, FTM expanded the reach of CTAP to 9 African countries in 2022 namely; Senegal, Malawi, Zimbabwe, Cameroon, Kenya, Sierra Leone, Ghana, Liberia, and Nigeria.

This phase of the project advocates for improved healthcare funding and addresses the issues related to vaccine deployment and equitable distribution across focus countries. We do this firstly, by conducting research on the post-COVID environment, the distribution of health sector resources, the government's commitment to healthcare funding, vaccine procurement plans and the issues affecting the equitable distribution in Africa, with a special focus on vulnerable groups in terms of commercial activity and socioeconomic status.

In Nigeria specifically, we scaled our campaign across the Federation, validating the results from CTAP Phase 1 in the 15 States and researching the state of PHCs in 21 other States plus the FCT. In total, we assessed 783 PHCs and conducted Community Outreach and Town Hall meetings.

#### Methodology

FollowTheMoney, using its network of 222 Community Champions led by 37 State leads, carried out preliminary visits to 783 PHCs across Nigeria. This robust team used a standardized KOBO Toolbox form to document the state of primary healthcare facilities. This form follows the "Minimum standards for Primary Healthcare" as outlined by the National Primary Healthcare Development Agency (NPHCDA), the Agency responsible for the development and management of PHCs in Nigeria.

Two Champions per senatorial zones collected data from two (2) PHCs in three Local Government Areas (LGAs) Per State except in States with security concerns or conflict-prone regions.

#### Findings

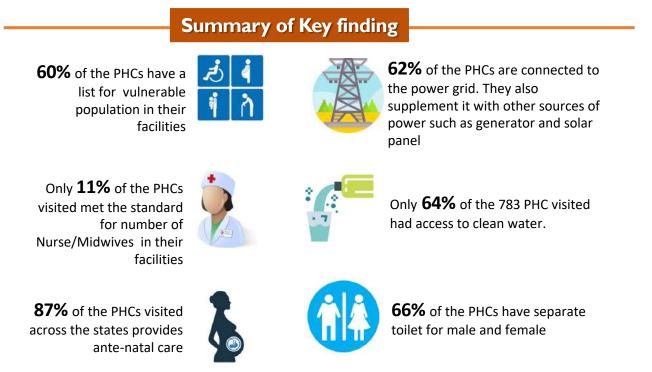
A total of 783 Primary Health Care were visited across 34 states of the Federation. The data collected were analyzed based on some thematic areas, that includes WASH, Infrastructure, Personnel, Service delivery and Covid-19 Vaccine Administration. All variables were analyzed vis a vis the minimum standard requirement for PHCs in Nigeria according to the National Primary Healthcare Development Agency (NPHCDA).

About 9 out of 10 PHCs visited did not meet the minimum number of Nurse/Midwives that should be in the PHCs. 3 out of 10 do not have nurses/midwifes at all in the facility.

297 out of the 783 primary health care visited are not connected to the national grid. About 137 out of these PHCs do not have alternative sources like solar or generator sets for power, they rely on kerosine lamps, and torchlights.

Availability of clean water is an essential requirement for PHCs and only 64% of the PHCs visited had access to water in the facility. 2 out of 10 facilities with access to water has protected wells, while majority had boreholes. 264 out of the 783 PHCs visited do not have separate toilets for male and female.

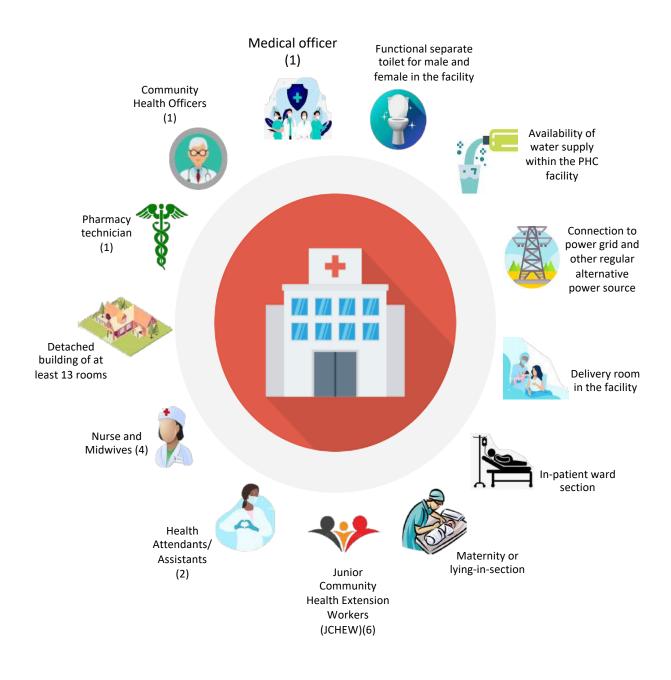
355 out of the 783 PHCs visited do not have pharmaceutical fridge for storage of COVID-19 vaccines. Also, 3% of pharmaceutical fridges are not functional in the PHC where they are available. 44% of PHCs visited do not have Ward Development Committee (WDC) in the facilities. About 60% of the PHCs have list of vulnerable population in their PHCS





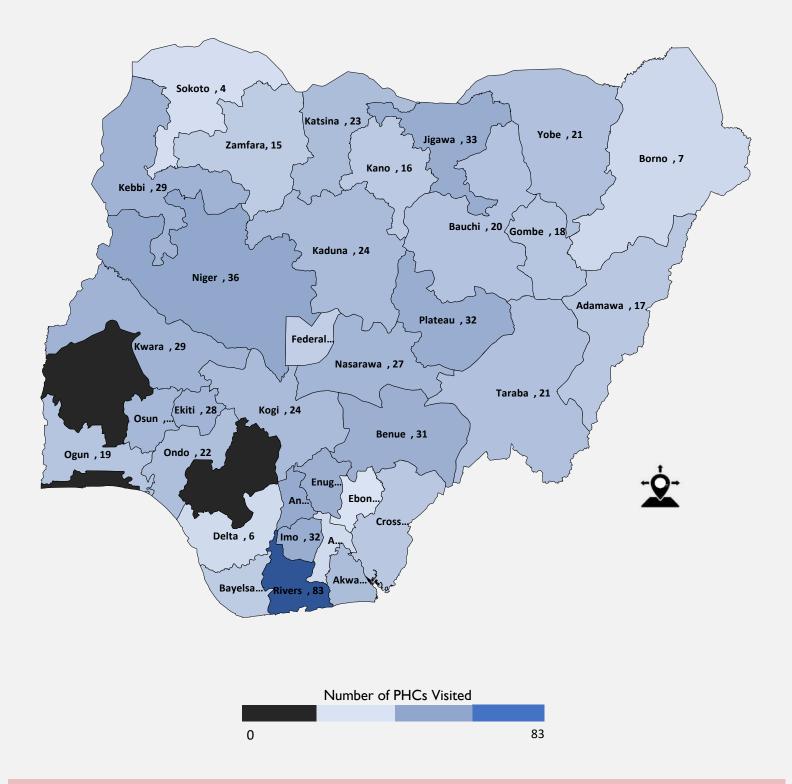
Only **56%** of the PHCs visited had a ward development Committee (WDC) in their facilities

#### Standard requirement for PHCs



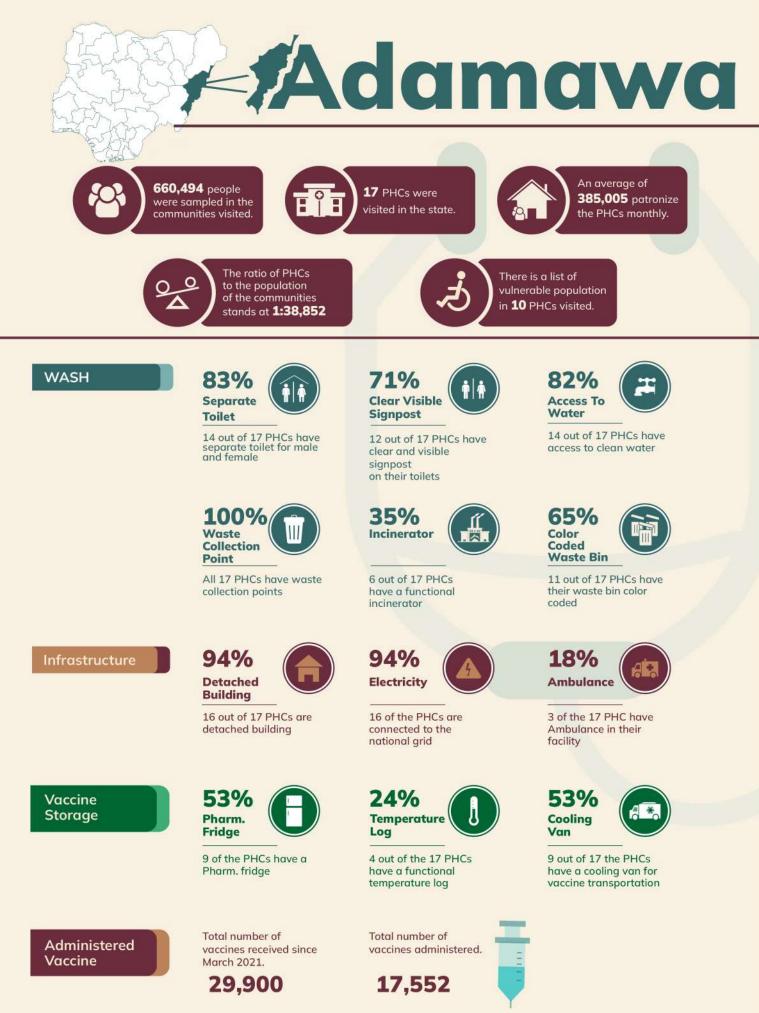
Culled from the Minimum Standards for Primary Healthcare in Nigeria

# Number of PHCs visited in each states



# North Nest





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8 out of the 17 PHCs Met the required standard

#### **59%**

Pharmacy Technicians

9 out of the 17 PHCs met the required standard

#### 59% Community Health Officer

9 of the PHCs met the required standard

#### 12%

Junior Community Health Extension Workers

2 of the 17 PHCs met the required standard

#### 18%

Nurse/Midwives

3 out of the 17 PHCs met the required standard

#### 95%

Health Attendants

15 out of 17 PHCs met the standard for number of health attendance

#### Service Delivery



#### 76%

Ante-natal Care

13 of 17 PHCs offer ante-natal care service

# 76%

**Delivery Rooms** 

13 out of 17 PHCs have delivery rooms in their facility

#### 65% Maternity/

Lying-in ward

11 out of 17 PHCs have maternity / lying-in ward



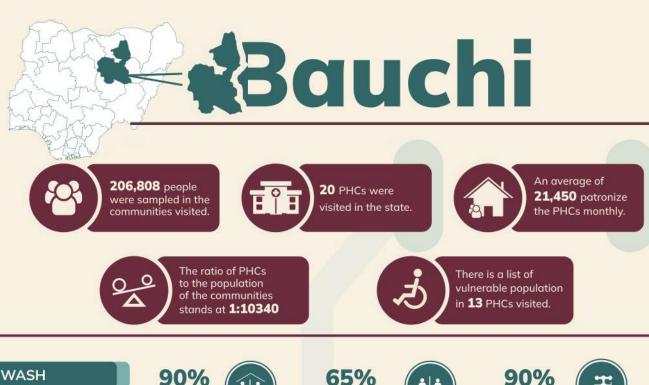
#### 18%

Ward Development Committee (WDC)

3 out of 17 PHCs have a WDC 88%

15 out of 17 PHCs have a functional laboratory 53% In-patient ward

9 out of 17 PHCs have an in-patient ward



Separate Toilet

18 out of 20 PHCs have separate toilet for male and female

85% Waste Collection Point

17 out of 20 PHCs have waste collection points

Infrastructure



16 out of 20 PHCs are detached building

Vaccine Storage



4 of the PHCs have a Pharm. fridge



Total number of vaccines received since March 2021.





13 out of 20 PHCs have clear and visible signpost on their toilets



8 out of 20 PHCs have a functional incinerator



16 out of 20 PHCs are connected to the national grid



8 out of the 20 PHCs have a functional temperature log

Total number of vaccines administered.





18 out of 20 PHCs have access to clean water



Bin

14 out of 20 PHCs have their waste bin color coded



4 of the PHC have Ambulance in their facility



7 out of 20 the PHCs have a cooling van for vaccine transportation





6 out of the 20 PHCs Met the required standard

50% Pharmacy Technicians

10 out of the 20 PHCs met the required standard 70% Community Health Officer

14 of the PHCs met the required standard

0% Junior Community Health Extension Workers

None of the PHCs met the required standard

10% Nurse/Midwives

2 out of the 20 PHCs met the required standard

70% Health Attendants

14 PHCs met the standard for number of health attendance

Service Delivery



#### 90% Ante-natal Care

18 of 20 PHCs offer ante-natal care service 45%

**Delivery Rooms** 

9 out of 20 PHCs have delivery rooms in their facility

65% Maternity/ Lying-in ward

13 out of 20 PHCs have maternity / lying-in ward



#### 65% Ward Development

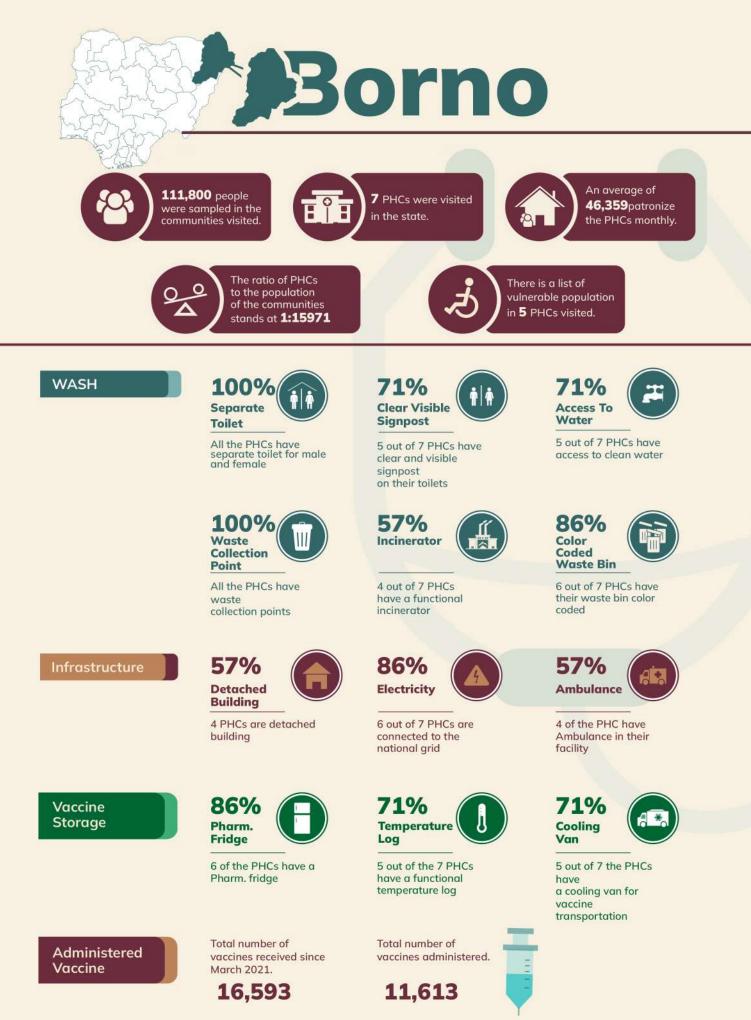
Committee (WDC)

13 out of 20 PHCs have a WDC 70% Laborator

14 out of 20 PHCs have a functional laboratory

60% In-patient ward

12 out of 20 PHCs have an in-patient ward







1 of the PHCs Met the

#### 29%

Pharmacy Technicians

2 out of the 15 PHCs met the required standard

#### 71% Community **Health Officer**

5 of the PHCs met the required standard

#### 14%

**Junior Community Health Extension** Workers

1 of the PHCs met the required standard

#### 14%

Nurse/Midwives

1 of the PHCs met the

#### 100%

Health Attendants

All the PHCs met the standard for number of health attendance

#### Service Delivery



#### 100%

Ante-natal Care

All the PHCs offer ante-natal care service

# 100%

**Delivery Rooms** 

All the PHCs have delivery rooms in their facility

#### 57% Maternity/

Lying-in ward

4 of the PHCs have maternity / lying-in ward



43%

Ward Development Committee (WDC)

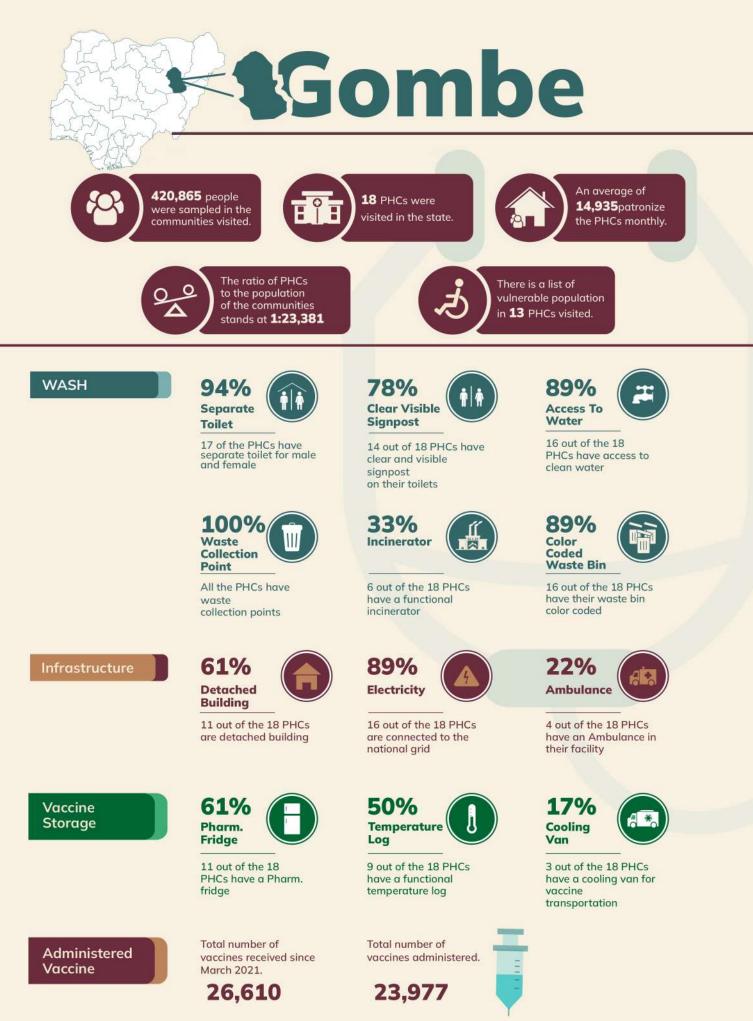
3 of the PHCs have a WDC

71% Laboratory

5 out of 7 PHCs have a functional laboratory

43% **In-patient** ward

3 out of 7 PHCs have an in-patient ward







4 out of the 18 PHCs Met the required standard

#### 33%

Pharmacy Technicians

6 out of the 18 PHCs met the required standard

#### 83% Community Health Officer

15 out of the 18 PHCs met the required standard

#### 0%

Junior Community Health Extension Workers

None of the 18 PHCs met the required standard

#### 0%

Nurse/Midwives

None of the 18 PHCs met the required standard

#### 83%

Health Attendants

15 out of the 18 PHCs met the standard for number of health attendance

#### Service Delivery



#### 100%

**Ante-natal Care** 

All the PHCs offer ante-natal care service

# 78%

**Delivery Rooms** 

14 out of the 18 PHCs have delivery rooms in their facility

#### 94% Maternity/ Lying-in ward

17 out of the 18 PHCs have maternity / lying-in ward



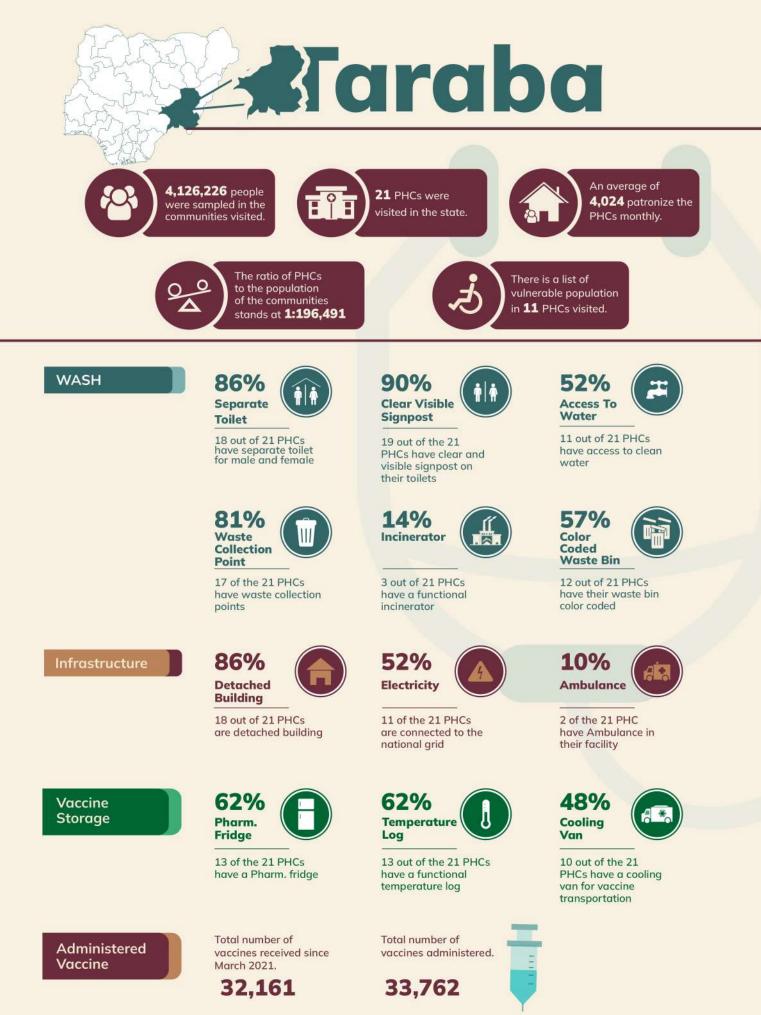
#### 83% Ward Development

Committee (WDC)

15 out of the 18 PHCs have a WDC 94% Laboratory

17 out of the 18 PHCs have a functional laboratory 94% In-patient ward

17 out of the 18 PHCs have an in-patient ward







6 out of the 21 PHCs Met the required standard

#### 19%

Pharmacy Technicians

4 out of the 21 PHCs met the required standard 29% Community Health Officer

6 of the 21 PHCs met the required standard

#### 10%

Junior Community Health Extension Workers

2 out of the 21 PHCs met the required standard

#### 38%

Nurse/Midwives

8 out of the 21 PHCs met the required standard

#### 86%

Health Attendants

18 out of 21 PHCs met the standard for number of health attendance

#### Service Delivery



#### 95%

**Ante-natal Care** 

20 of 21 PHCs offer ante-natal care service 52%

**Delivery Rooms** 

11 out of 21 PHCs have delivery rooms in their facility

#### 90% Maternity/ Lying-in ward

19 out of 21 PHCs have maternity / lying-in ward



#### 67% Ward Development

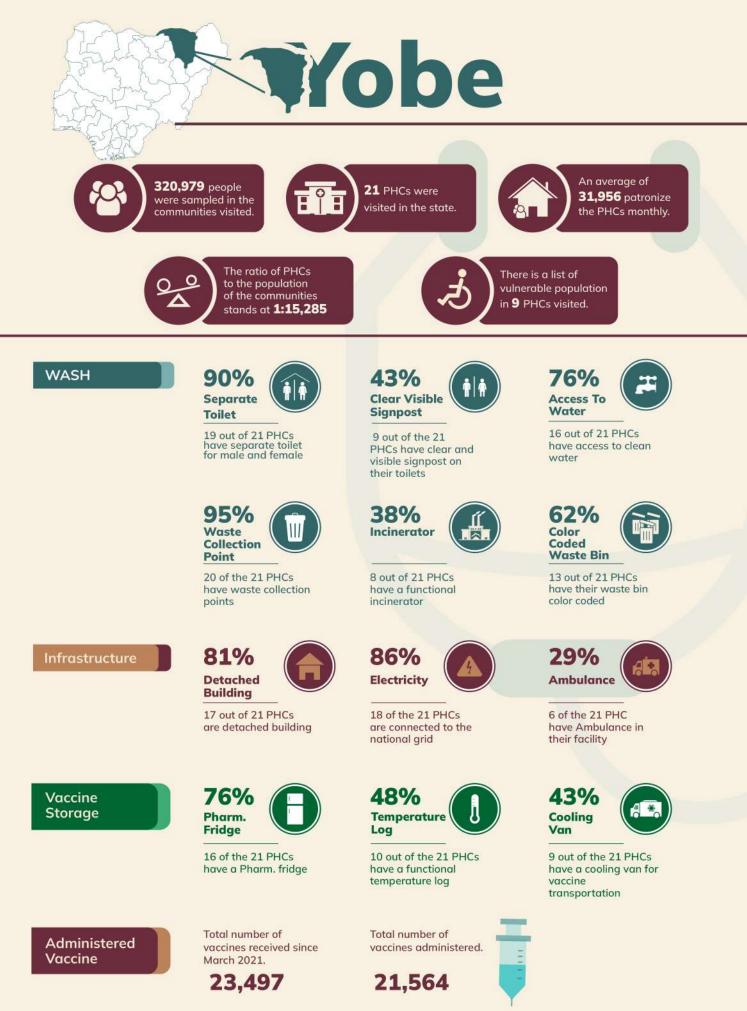
Committee (WDC) 14 of the 21 PHCs

have a WDC

90%

19 out of 21 PHCs have a functional laboratory 76% In-patient ward

16 out of 21 PHCs have an in-patient ward







4 out of the 21 PHCs Met the required standard

#### 43%

Pharmacy Technicians

9 out of the 21 PHCs met the required standard 52% Community Health Officer

11 of the 21 PHCs met the required standard

#### 5%

Junior Community Health Extension Workers

1 out of the 21 PHCs met the required standard

#### 38%

Nurse/Midwives

8 out of the 21 PHCs met the required standard

#### 86%

Health Attendants

18 out of 21 PHCs met the standard for number of health attendance

#### Service Delivery



#### 100%

**Ante-natal Care** 

All of the 21 PHCs offer ante-natal care service

# 86%

**Delivery Rooms** 

18 out of 21 PHCs have delivery rooms in their facility

#### 86% Maternity/

Lying-in ward

18 out of 21 PHCs have maternity / lying-in ward



# **95%**

Ward Development Committee (WDC)

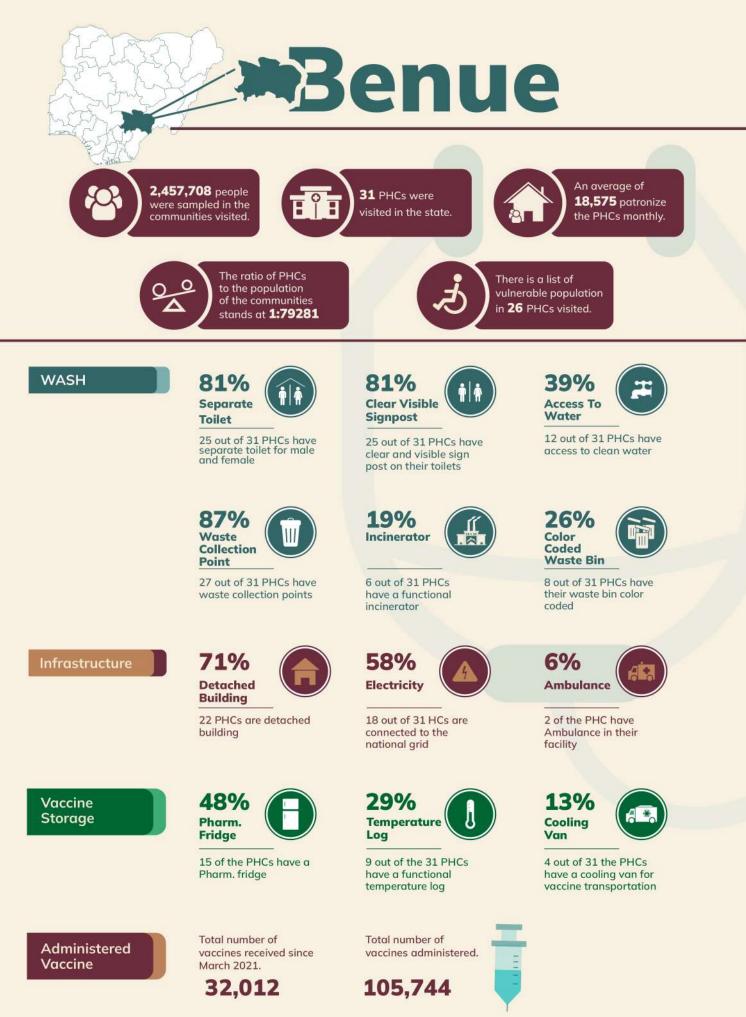
20 of the 21 PHCs have a WDC 90%

19 out of 21 PHCs have a functional laboratory 86% In-patient ward

18 out of 21 PHCs have an in-patient ward

# North Central Region









#### **6%**

Pharmacy Technicians

2 out of the 31 PHCs met the required standard 58% Community Health Officer

18 out of 31 PHCs met the required standard

#### 0%

Junior Community Health Extension Workers

None of the PHCs met the required standard

**3%** Nurse<u>/Midwives</u>

1 of the PHCs met the required standard

#### 52%

Health Attendants

16 PHCs met the standard for number of health attendance

#### Service Delivery



#### 97%

**Ante-natal Care** 

30 of the 31 PHCs offer ante-natal care service

# 68%

**Delivery Rooms** 

21out of 31 PHCs have delivery rooms in their facility

#### **71%** Maternity/ Lying-in ward

ward

22 of the PHCs have maternity / lying-in



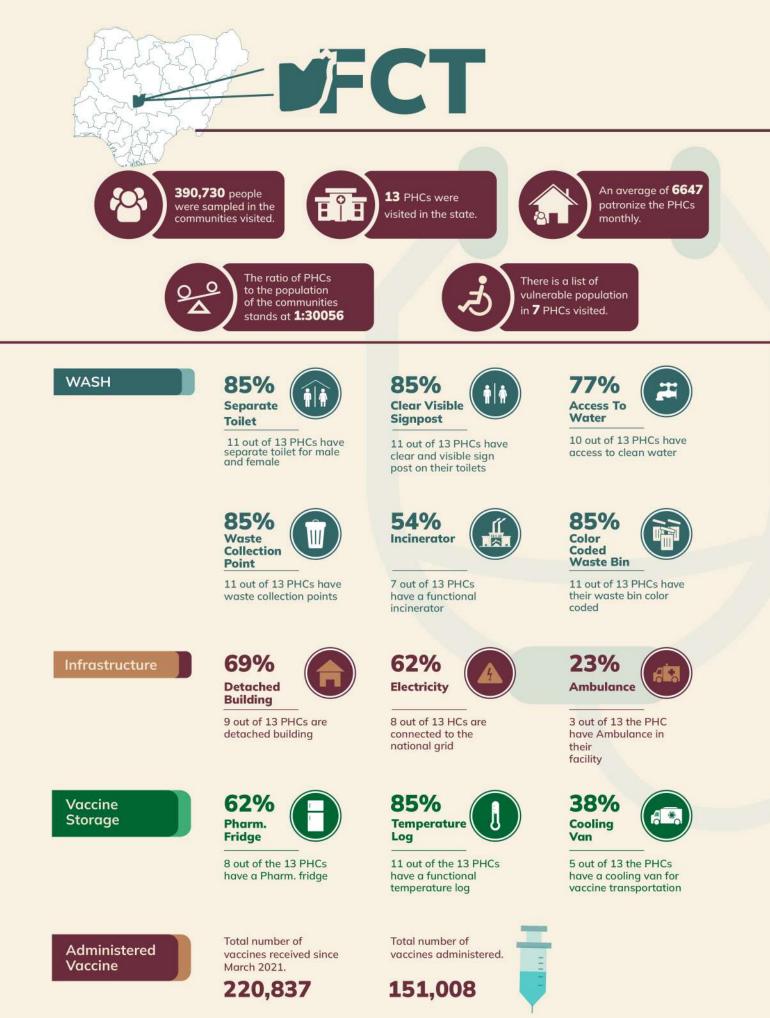
#### 72% Ward Development Committee (WDC)

16 of the PHCs have a WDC 65%

20 out of 31 PHCs have a functional laboratory

61% In-patient ward

19 out of 31 PHCs have an in-patient ward







Met the required standard

#### 8%

Pharmacy Technicians

1 out of the 13 PHCs met the required standard

#### 62% Community Health Officer

8 out of 13 PHCs met the required standard

#### 0%

Junior Community Health Extension Workers

None of the 13 PHCs met the required standard

#### 38%

Nurse/Midwives

5 out of 13 PHCs met the required standard

#### 38%

Health Attendants

5 out of 13 PHCs met the standard for number of health attendance

#### Service Delivery



#### 77%

**Ante-natal Care** 

10 out of 13 PHCs offer ante-natal care service

# 38%

**Delivery Rooms** 

5 out of 13 PHCs have delivery rooms in their facility

#### 69% Maternity/

Lying-in ward

9 out of the 13 PHCs have maternity / lying-in ward



#### 92% Ward Development

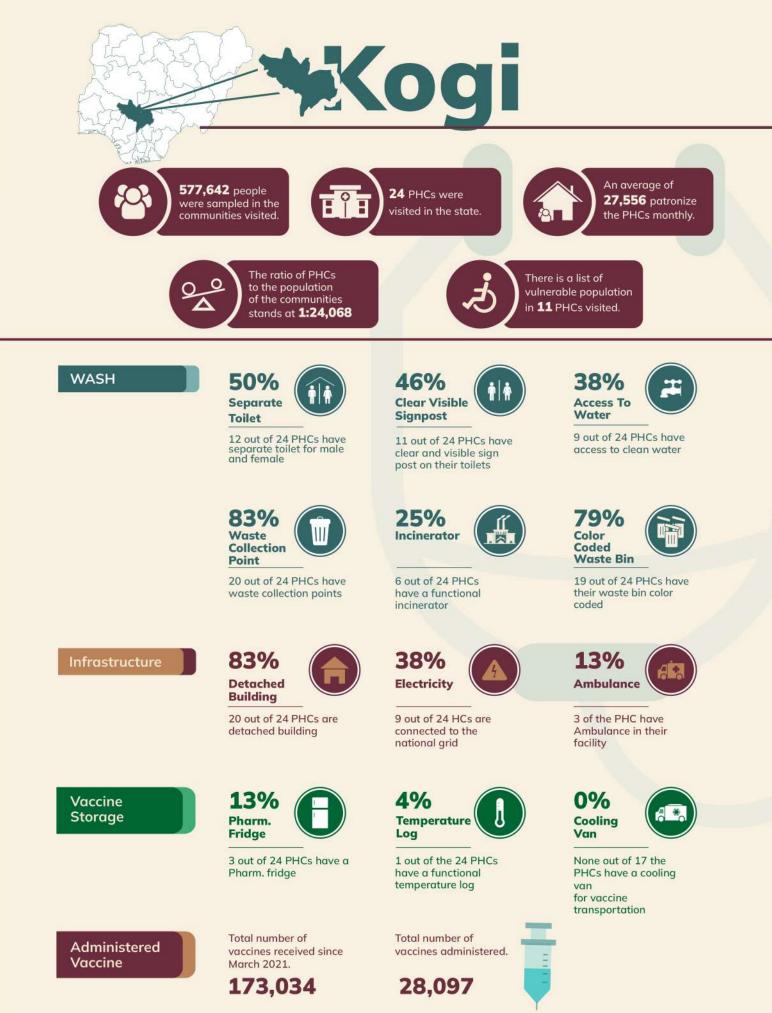
Committee (WDC)

12 out of the 13 PHCs have a WDC 92% Laboratory

12 out of 13 PHCs have a functional laboratory

23% In-patient ward

3 out of 13 PHCs have an in-patient ward







Pharmacy Technicians

2 out of the 24 PHCs met the required standard 54% Community Health Officer

13 of the 24 PHCs met the required standard

#### **4%**

Junior Community Health Extension Workers

1 of the 24 PHCs met the required standard

4% Nurse/Midwives

1 of 24 PHCs met the required standard

#### 4%

Health Attendants

14 out of 24 PHCs met the standard for number of health attendance

Service Delivery



#### 88%

Ante-natal Care

21 of 24 PHCs offer ante-natal care service 50%

**Delivery Rooms** 

12 out of 24 PHCs have delivery rooms in their facility **71%** Maternity/ Lying-in ward

17 out of 24 PHCs have maternity / lying-in ward



# **29%**

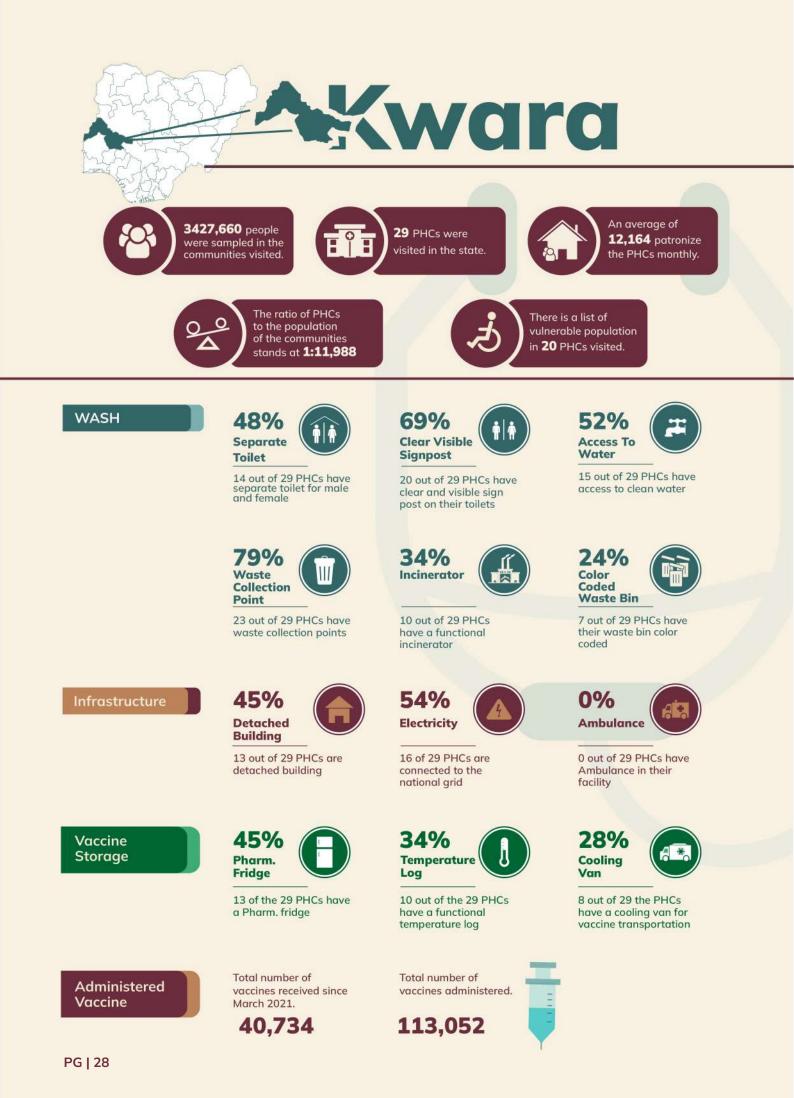
Ward Development Committee (WDC)

7 of out 24 PHCs have a WDC 50%

12 out of 24 PHCs have a functional laboratory

58% In-patient ward

14 out of 24 PHCs have an in-patient ward







Met the required standard

#### 24%

Pharmacy Technicians

7 out of the 29 PHCs met the required standard 76% Community Health Officer

22 of out 29 PHCs met the required standard

#### 0%

Junior Community Health Extension Workers

0 out of 29 PHCs met the required standard

### 14%

Nurse/Midwives

4 out of 29 PHCs met the required standard

#### 41%

Health Attendants

12 out of 29 PHCs met the standard for number of health attendance

#### Service Delivery



#### 97%

**Ante-natal Care** 

7 of 29 PHCs offer ante-natal care service

# 31%

**Delivery Rooms** 

9 out of 29 PHCs have delivery rooms in their facility

#### **79%** Maternity/

Lying-in ward

23 out of 29 PHCs have maternity / lying-in ward



# 66%

Ward Development Committee (WDC)

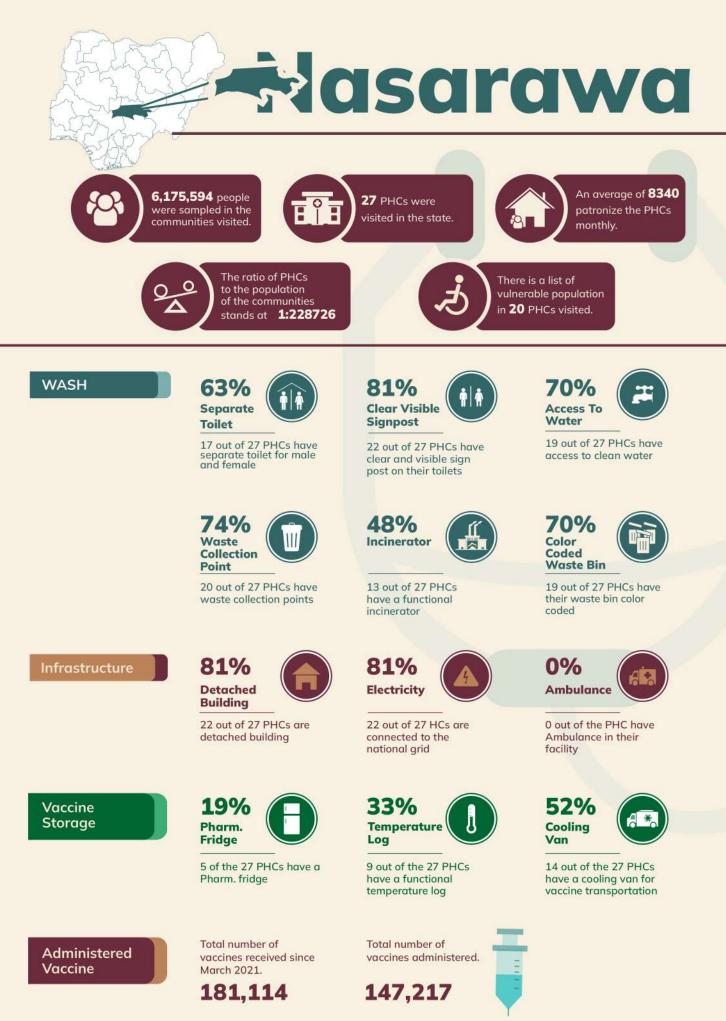
19 of the PHCs have a WDC

48%

14 out of 29 PHCs have a functional laboratory

52%

15 out of 29 PHCs have an in-patient ward







19 out of the 27 PHCs Met the required standard

#### 28%

Pharmacy Technicians

10 out of the 27 PHCs met the required standard 67% Community Health Officer

18 out of 27 PHCs met the required standard

#### 0%

Junior Community Health Extension Workers

0 of the 27 PHCs met the required standard

4% Nurse/Midwives

1 out of 27 PHCs met the required standard

#### 89%

Health Attendants

24 out of 27 PHCs met the standard for number of health attendance

#### Service Delivery



#### 89%

**Ante-natal Care** 

24 of 29 PHCs offer ante-natal care service 74%

**Delivery Rooms** 

20 out of 27 PHCs have delivery rooms in their facility

#### **78%** Maternity/ Lying-in ward

21 out of 27 PHCs have maternity / lying-in ward



#### 63% Ward Development

Committee (WDC)

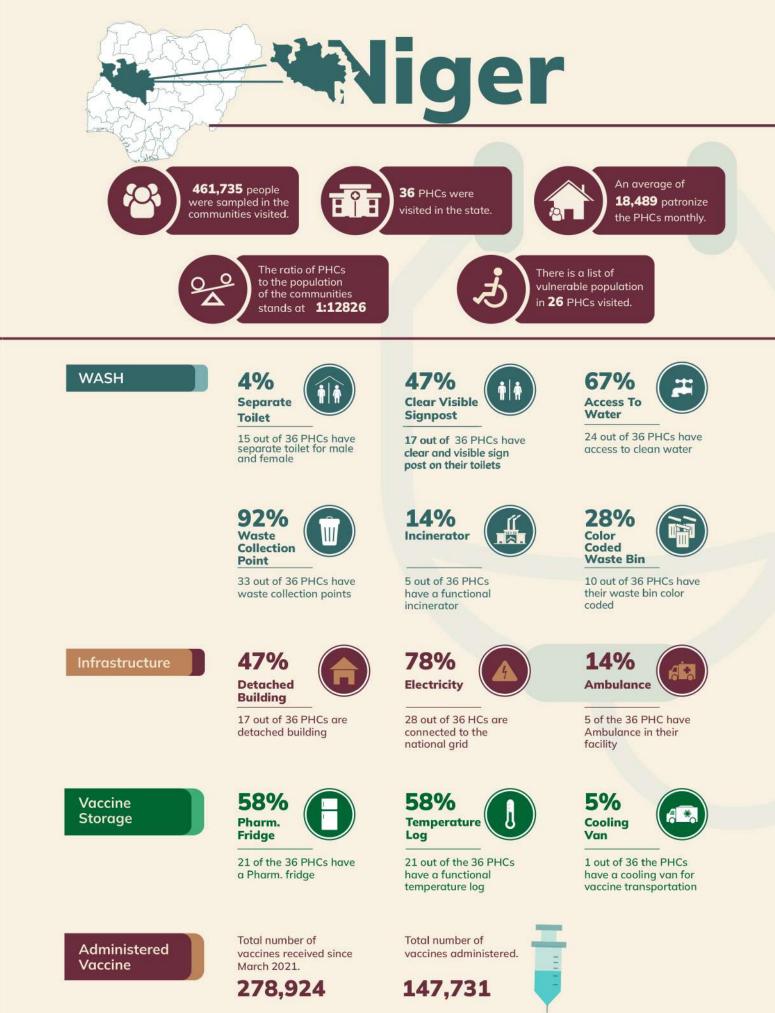
7 out of the 27 PHCs have a WDC



23 out of 27 PHCs have a functional laboratory

96% In-patient ward

26 out of 27 PHCs have an in-patient ward in their facility







Met the required standard

#### 28%

Pharmacy Technicians

10 out of the 36 PHCs met the required standard 58% Community Health Officer

21 out of 36 PHCs met the required standard

#### 8%

Junior Community Health Extension Workers

3 out of the 35 PHCs met the required standard

0% Nurse/<u>Midwives</u>

0 of 36 PHCs met the required standard

#### 69%

Health Attendants

25 out of 36 PHCs met the standard for number of health attendance

#### Service Delivery



#### 86%

**Ante-natal Care** 

31 of 36 PHCs offer ante-natal care service 58%

**Delivery Rooms** 

11 out of 36 PHCs have delivery rooms in their facility

#### 53% Maternity/ Lying-in ward

10 out of 36 PHCs have maternity / lying-in ward



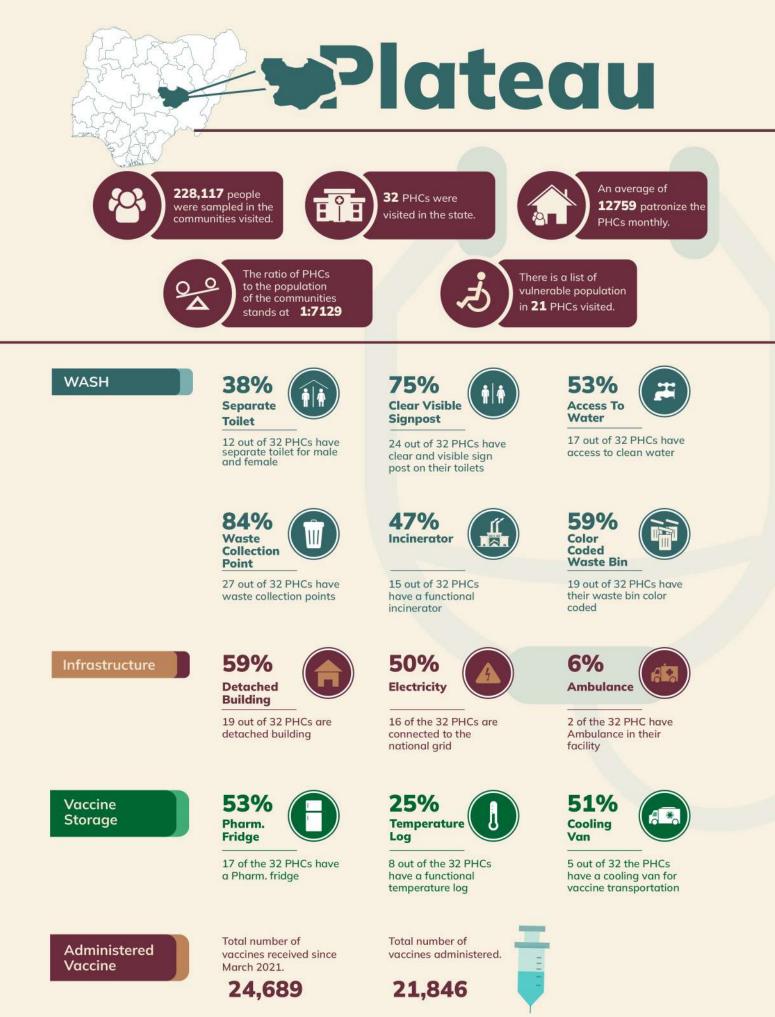
#### 83% Ward Development

Committee (WDC)

30 out of the 36 PHCs have a WDC 47%

9 out of 36 PHCs have a functional laboratory 50% In-patient ward

18 out of 36 PHCs have an in-patient ward







2%

Pharmacy Technicians

8 out of the 32 PHCs met the required standard 63% Community Health Officer

20 out of 32 PHCs met the required standard

#### 0%

Junior Community Health Extension Workers

None of the 32 PHCs met the required standard 3% Nurse/Midwives

1 of 32 PHCs met the required standard

75%

Health Attendants

24 out of 32 PHCs met the standard for number of health attendance

Service Delivery



#### 94%

**Ante-natal Care** 

30 of 32 PHCs offer ante-natal care service 56%

**Delivery Rooms** 

18 out of 32 PHCs have delivery rooms in their facility **59%** Maternity/ Lying-in ward

19 out of 32 PHCs have maternity / lying-in ward

#### 56%

Ward Development Committee (WDC)

18 out of the 32 PHCs have a WDC 94% Laboratory

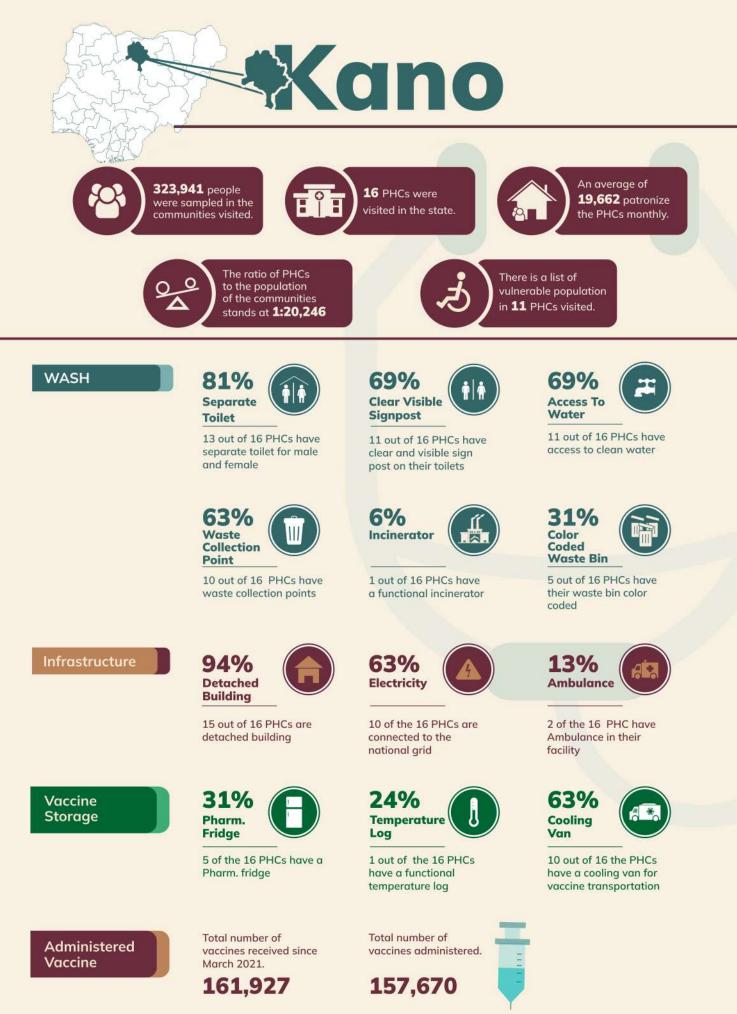
30 out of 32 PHCs have a functional laboratory

75% In-patient ward

24 out of 32 PHCs have an in-patient ward

# North Nest (Region









11 out of the 16 PHCs Met the required standard

# **69%**

Pharmacy Technicians

11 out of the 16 PHCs met the required standard 59% Community Health Officer

12 of the 16 PHCs met the required standard

# 0%

Junior Community Health Extension Workers

None of the 16 PHCs met the required standard 31% Nurse/Midwives

5 out of the 16 PHCs met the required standard

# 69%

Health Attendants

11 out of 16 PHCs met the standard for number of health attendance

#### Service Delivery



# 81%

Ante-natal Care

13 of 16 PHCs offer ante-natal care service

# 50%

**Delivery Rooms** 

8 out of 16 PHCs have delivery rooms in their facility

# 56% Maternity/

Lying-in ward

9 out of 16 PHCs have maternity / lying-in ward



# 38%

Ward Development Committee (WDC)

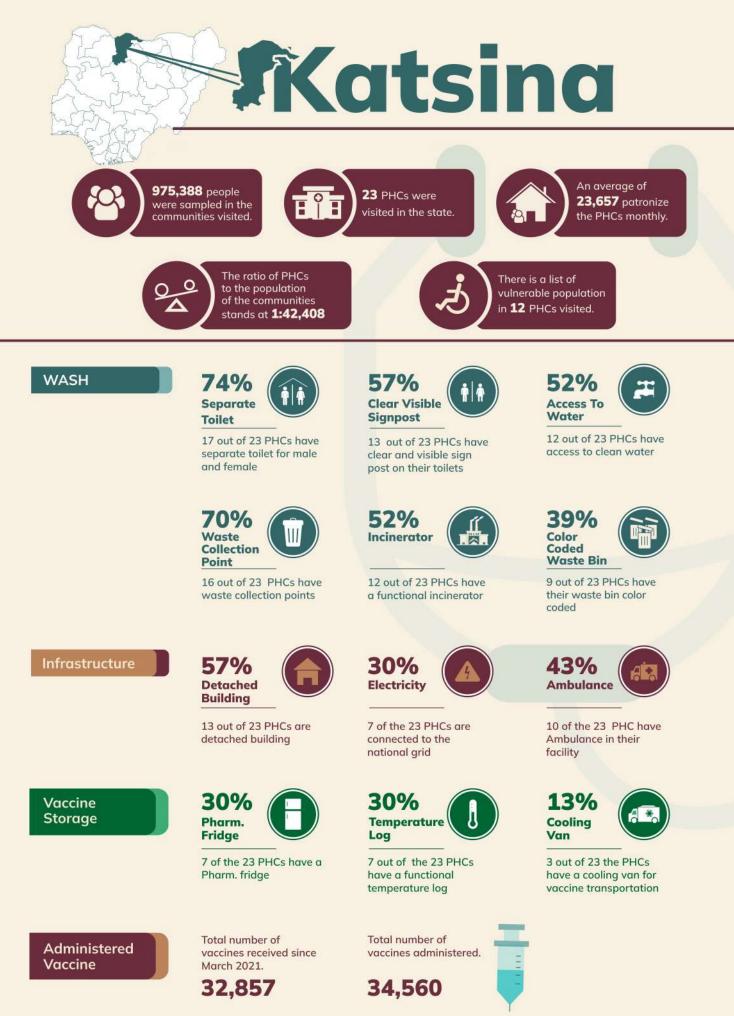
6 out of 16 PHCs have a WDC



9 out of 16 PHCs have a functional laboratory



4 out of 16 PHCs have an in-patient ward







12 out of the 23 PHCs Met the required standard

# 39%

Pharmacy Technicians

9 out of the 23 PHCs met the required standard

48% Community Health Officer

11 of the 23 PHCs met the required standard

# 9%

Junior Community Health Extension Workers

2 of the 23 PHCs met the required standard 17% Nurse/Midwives

4 out of the 23 PHCs met the required standard

# 61%

Health Attendants

14 out of 23 PHCs met the standard for number of health attendance

#### Service Delivery



#### 57% Ante-natal Care

\_\_\_\_\_ 13 of 23 PHCs offer ante-natal care service

# 48% Delivery Rooms

11 out of 23 PHCs have delivery rooms in their

#### **57%** Maternity/ Lying-in ward

13 out of 23 PHCs have maternity / lying-in ward



#### **22%** Ward Development Committee (WDC)

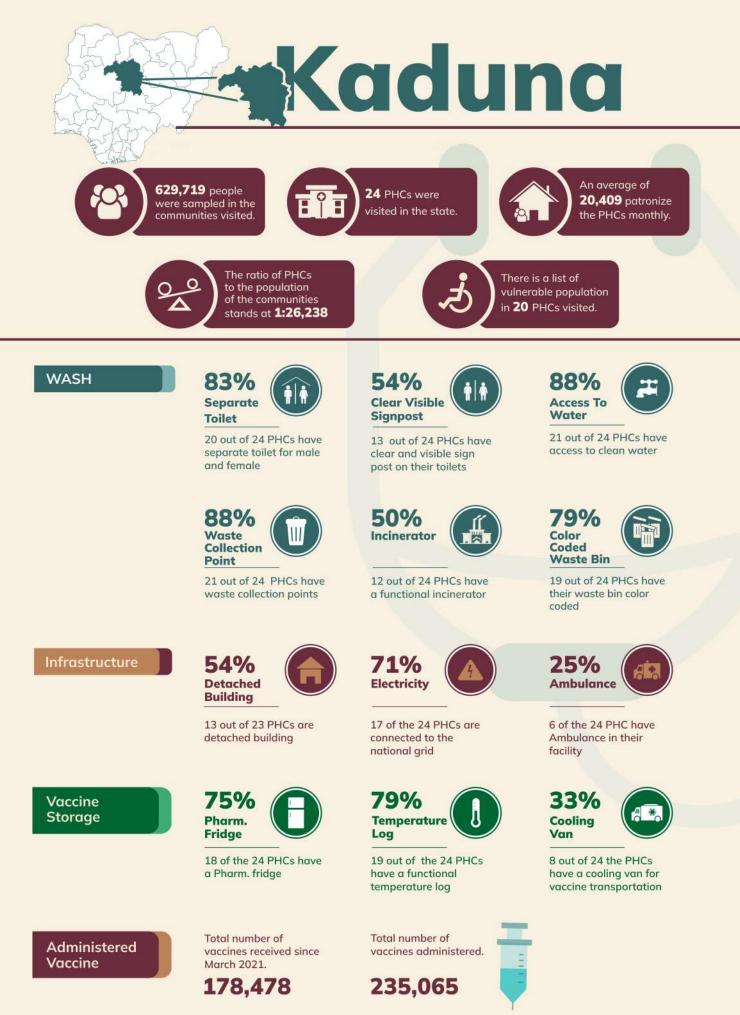
5 out of 23 PHCs have a WDC 56% Laborator

facility

13 out of 23 PHCs have a functional laboratory

65% In-atient ward

15 out of 23 PHCs have an in-patient ward







9 out of the 24 PHCs Met the required standard

# 67%

Pharmacy Technicians

16 out of the 24 PHCs met the required standard

#### 63% Community Health Officer

15 of the 24 PHCs met the required standard

# 0%

Junior Community Health Extension Workers

None of 24 PHCs met the required standard

#### 13% Nurse/Midwives

3 out of the 24 PHCs met the required standard

# 29%

Health Attendants

7 out of 24 PHCs met the standard for number of health attendance

#### Service Delivery



# 92% Ante-natal Care

22 of 24 PHCs offer ante-natal care service

# 54% Deliv<u>ery Rooms</u>

13 out of 24 PHCs have delivery rooms in their facility

#### 88% Maternity/ Lying-in ward

21 out of 24 PHCs have maternity / lying-in ward



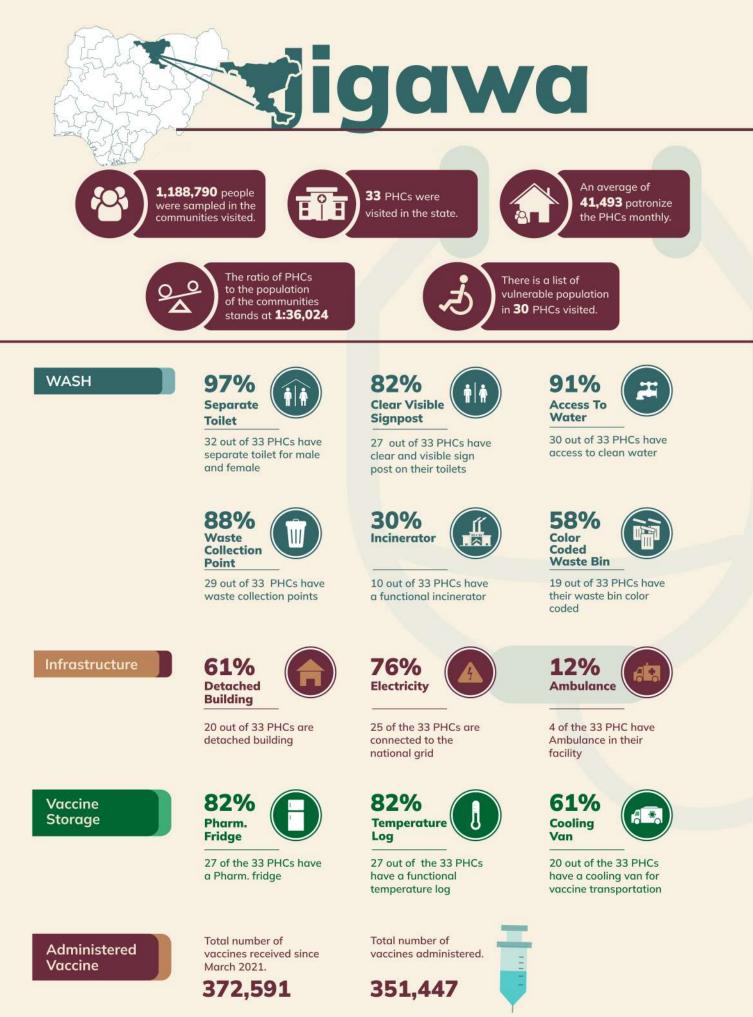
#### 92% Ward Development Committee (WDC)

22 out of 24 PHCs have a WDC 96%

23 out of 24 PHCs have a functional laboratory

88% In-atient ward

21 out of 24 PHCs have an in-patient ward







4 out of the 33 PHCs Met the required standard

36% Pharmacy Technicians

12 out of the 33 PHCs met the required standard 63% Community Health Officer

16 of the 33 PHCs met the required standard

9% Junior Community Health Extension Workers

3 out of the 33 PHCs met the required standard

15% Nurse/Midwives

5 out of the 33 PHCs met the required standard

48% Health Attendants

16 out of 33 PHCs met the standard for number of health attendance

Service Delivery



#### 97% Ante-natal Care

32 of 33 PHCs offer ante-natal care service 73% Delivery Rooms

24 out of 33 PHCs have delivery rooms in their facility 94% Maternity/ Lying-in ward

31 out of 33 PHCs have maternity / lying-in ward



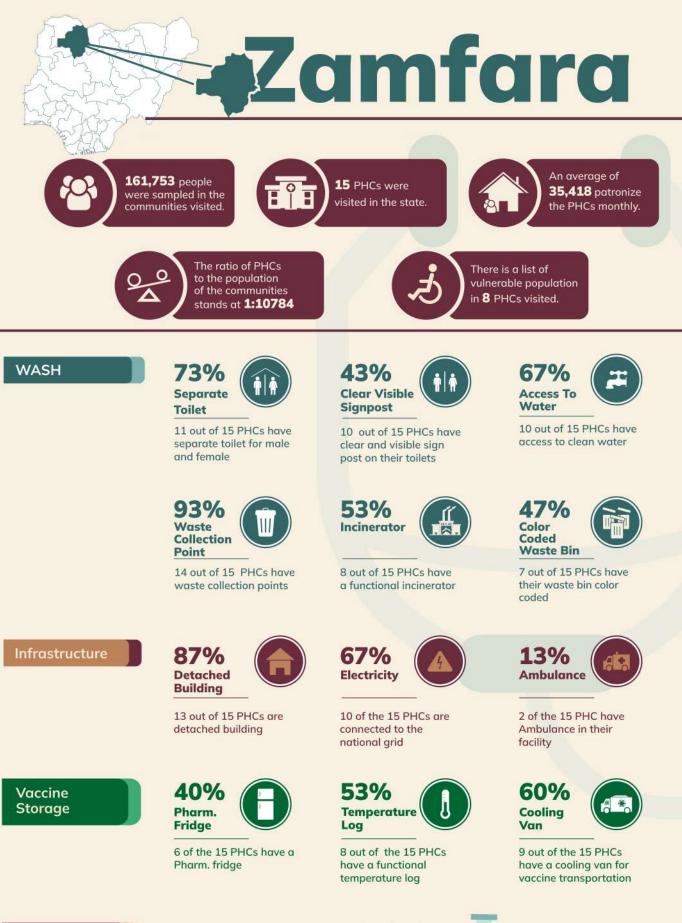
#### **91%** Ward Development Committee (WDC)

30 out of 33 PHCs have a WDC 96%

32 out of 33 PHCs have a functional laboratory

82%

27 out of 33 PHCs have an in-patient ward



Administered Vaccine Total number of vaccines received since March 2021.

41,720

38,167

Total number of

vaccines administered.





8 out of the 15 PHCs Met the required standard

> 67% Pharmacy Technicians

10 out of the 15 PHCs met the required standard

#### 73% Community Health Officer

11 of the 15 PHCs met the required standard

0% Junior Community Health Extension Workers

None of the PHCs met the required standard

13% Nurse/Midwives

2 out of the 15 PHCs met the required standard

67% Health Attendants

9 out of 15 PHCs met the standard for number of health attendance

#### Service Delivery



# 67% Ante-natal Care

service

\_\_\_\_\_\_ 10 Out of the 15 PHCs offer ante-natal care 53% Delivery Rooms

8 out of 15 PHCs have delivery rooms in their facility 67% Maternity/ Lying-in ward

10 out of 15 PHCs have maternity/lyingin ward

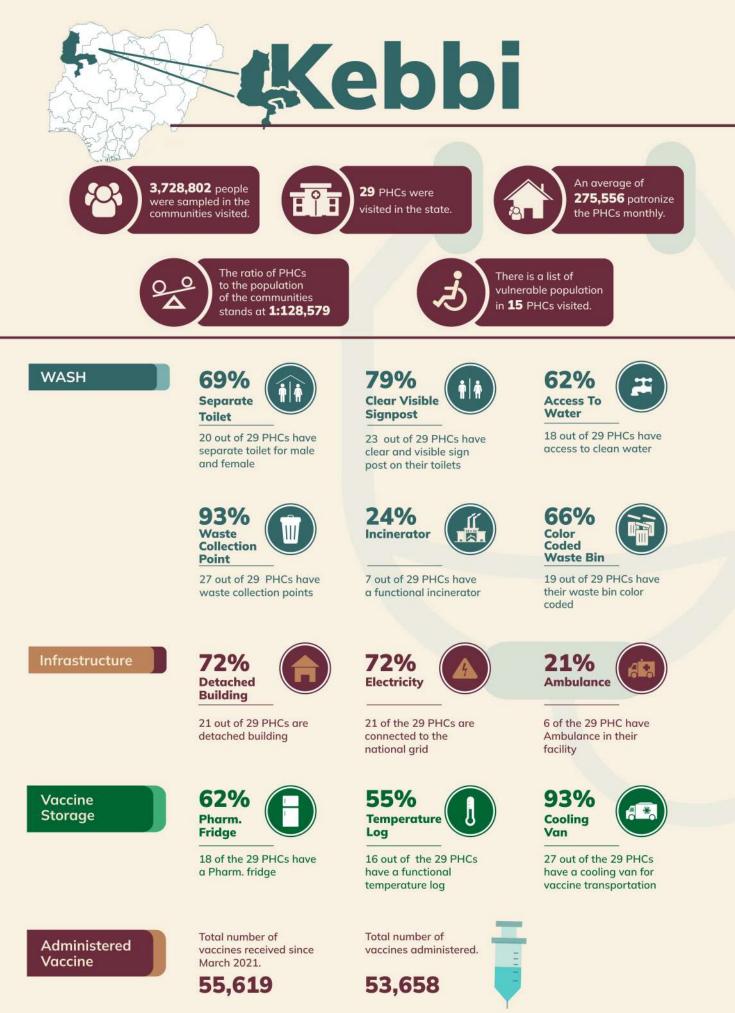


#### 53% Ward Development Committee (WDC)

8 out of 15 PHCs have a WDC 73%

11 out of 15 PHCs have a functional laboratory 53% In-atient ward

8 out of 15 PHCs have an in-patient ward t ward



PG | 47





15 out of 29 PHCs Met the required standard

62% Pharmacy Technicians

18 out of the 29 PHCs met the required standard

#### 48% Community Health Officer

14 of the 29 PHCs met the required standard

**7%** Junior Community Health Extension Workers

2 of the 29 PHCs met the required standard

0% Nurse/Midwives

None of the PHCs met the required standard

72% Health Attendants

21 out of 29 PHCs met the standard for number of health attendance

Service Delivery



#### 90% Ante-natal Care

26 out of the 29 PHCs offer ante-natal care service 69% Delivery Rooms

20 out of 29 PHCs have delivery rooms in their facility

55% Maternity/ Lying-in ward

16 out of 29 PHCs have maternity / lyingin ward



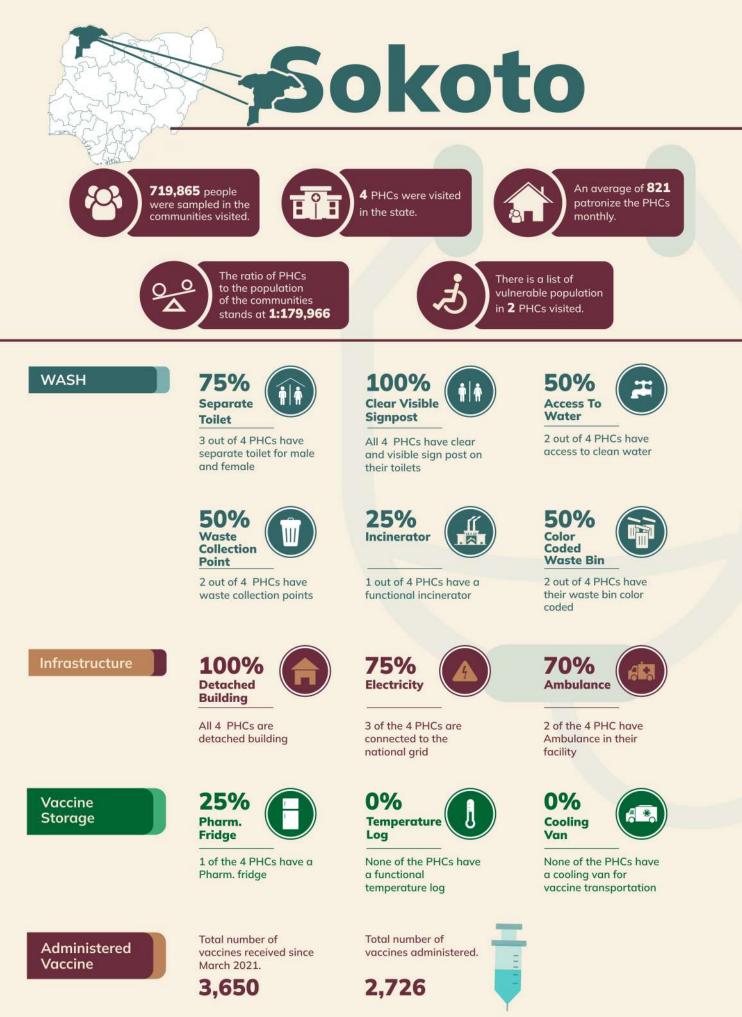
#### 76% Ward Development Committee (WDC)

22 out of 29 PHCs have a WDC 76% Laborator

22 out of 29 PHCs have a functional laboratory

72% In-atient ward

21 out of 29 PHCs have an in-patient ward







3 out of the 4 PHCs Met the required standard

75% Pharmacy Technicians

3 out of the 4 PHCs met the required standard

75% Community Health Officer

3 of the 4 PHCs met the required standard

0% Junior Community Health Extension Workers

None of the PHCs met the required standard

0% Nurse/Midwives

None of the PHCs met the required standard

> 100% Health Attendants

4 out of 4 PHCs met the standard for number of health attendance

Service Delivery



# 75% Ante-natal Care

3 out of the 4 PHCs offer ante-natal care service

50% Delive<u>ry Rooms</u>

2 out 4 PHCs have delivery rooms in their facility 50% Maternity/ Lying-in ward

2 out of 4 PHCs have maternity / lying-in ward



#### **0%** Ward Development Committee (WDC)

None of the PHCs have a WDC



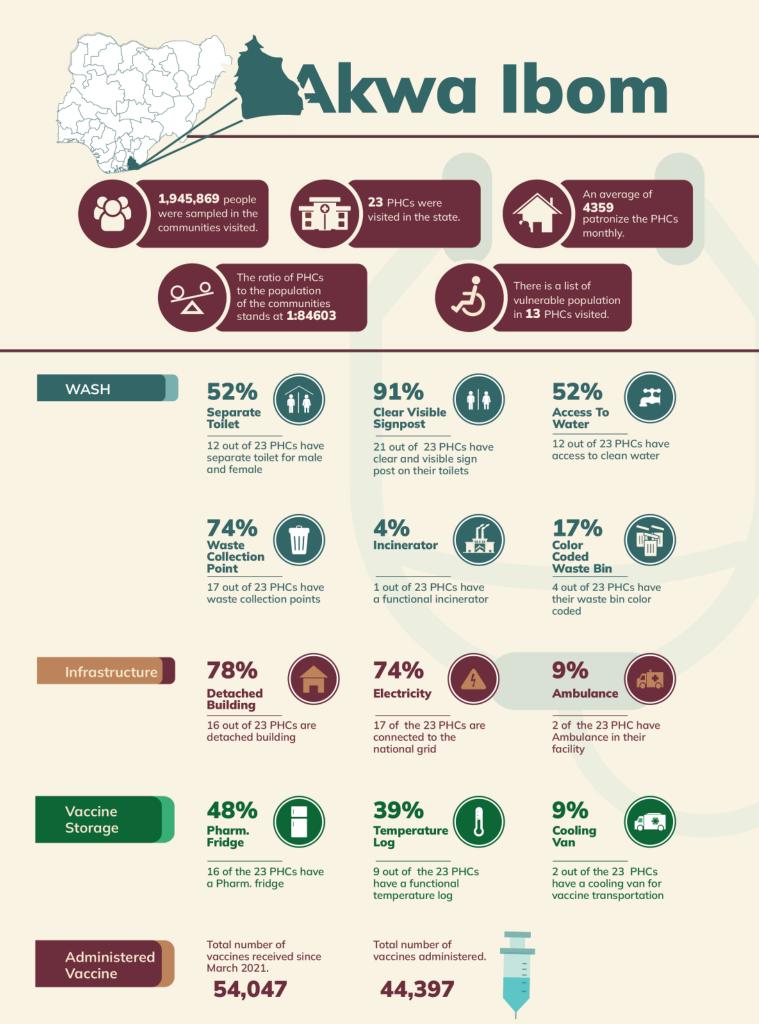
3 out of 4 PHCs have a functional laboratory

#### 100% In-atient ward

4 out of 4 PHCs have an in-patient ward











15 out of the 23 PHCs Met the required standard.

17%

Pharmacy Technicians

6 of 23 PHCs met the required standard

65% Community Health Officer

15 out of 23 PHCs met the required standard

# 0%

Junior Community Health Extension Workers

None of the 6 PHCs met the required standard

26% Nurse/Midwives

6 out of 23 PHCs met the required standard

# 35%

Health Attendants

8 out of 23 PHCs met the standard for number of health attendance.

#### Service Delivery



#### 100% Ante-natal Care

All PHCs offer ante-natal care service 52%

**Delivery Rooms** 

12 out of 23 PHCs have delivery rooms in their facility\_\_\_\_\_

# 74% Maternity/

Lying-in ward

17 out of 23 PHCs have maternity / lying-in ward



#### **43%** Ward Development Committee (WDC)

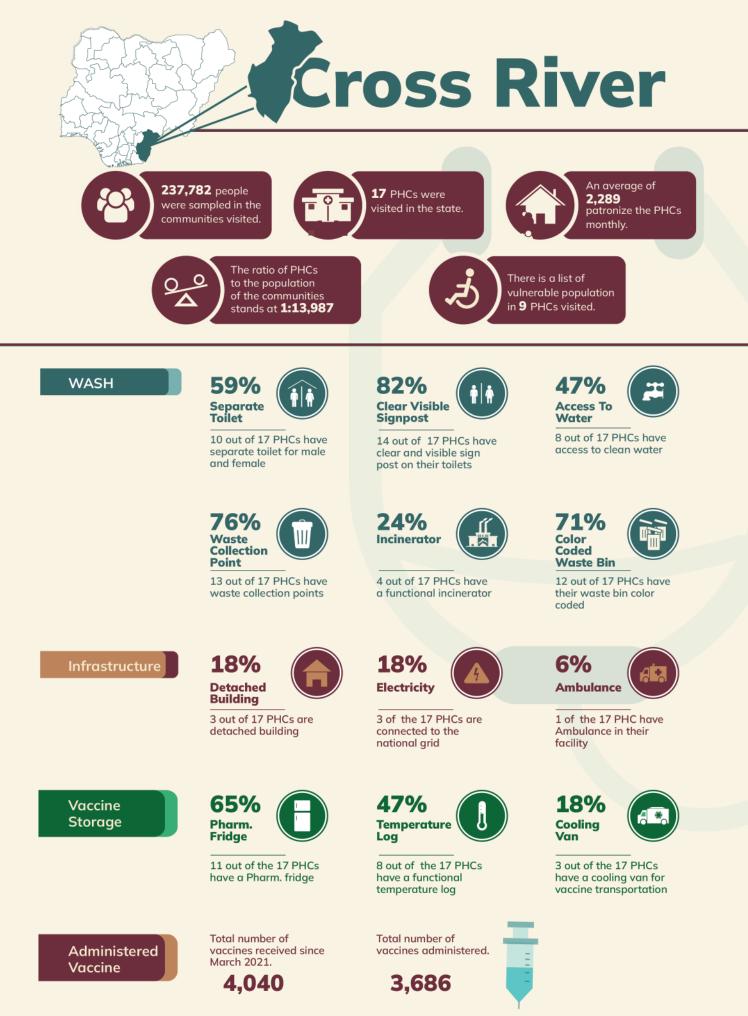
10 out of the 23 PHCs have a WDC



18 out of 23 PHCs have a functional laboratory



13 out of 23 PHCs have an in-patient ward







10 out of the 17 PHCs Met the required standard.

24%

Pharmacy Technicians

4 of 17 PHCs met the required standard

82%
Community
Health Officer

14 out of 17 PHCs met the required standard

# 6%

Junior Community Health Extension Workers

1 of the 17 PHCs met the required standard

0% Nurse/Midwives

None of the PHCs met the required standard

# 18%

Health Attendants

8 out of 17 PHCs met the standard for number of health attendance.

#### Service Delivery



#### **100%** Ante-natal Care

All PHCs offer ante-natal care service 41%

**Delivery Rooms** 

7 out of 17 PHCs have delivery rooms in their facility

# **71%** Maternity/

Lying-in ward

12 out of 17 PHCs have maternity / lying-in ward



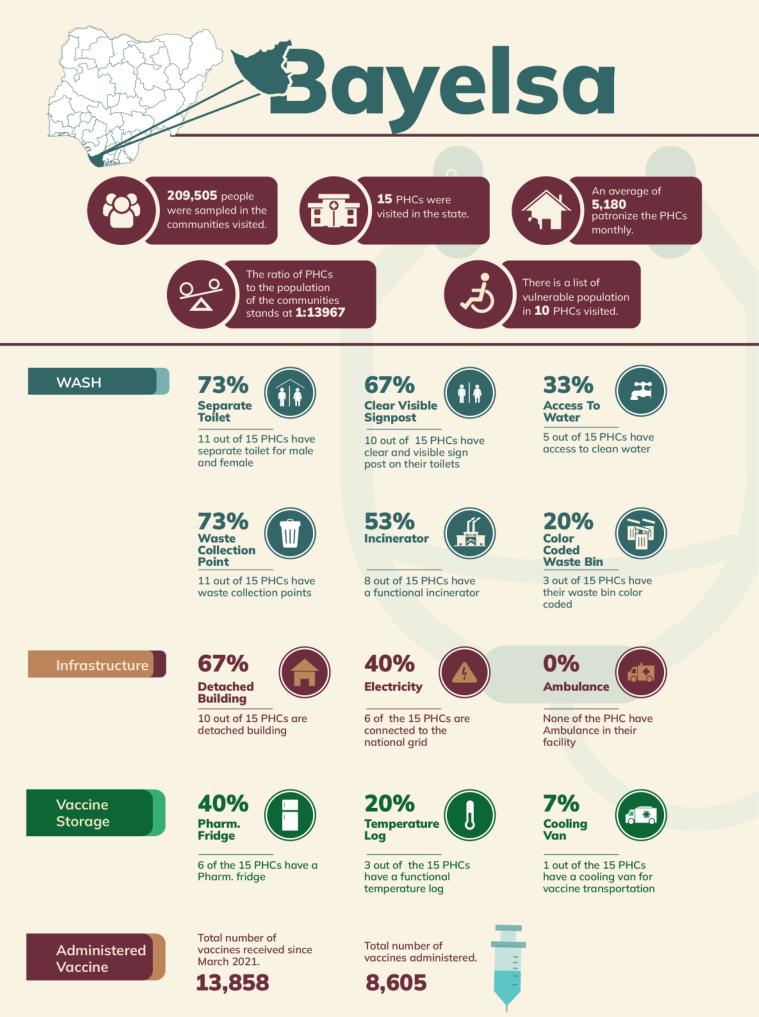


8 out of the 17 PHCs have a WDC 53%

9 out of 17 PHCs have a functional laboratory



11 out of 17 PHCs have an in-patient ward







11 out of the 15 PHCs Met the required standard.

**47%** 

Pharmacy Technicians

7 of 15 PHCs met the required standard

92% Community Health Officer

14 out of 15 PHCs met the required standard

# 0%

Junior Community Health Extension Workers

None of the 15 PHCs met the required standard

13% Nurse/Midwives

2 out of 15 PHCs met the required standard

# 20%

Health Attendants

2 out of 15 PHCs met the standard for number of health attendance.

#### Service Delivery



#### 93% Ante-natal Care

14 out of the 15 PHCs offer ante-natal care service 87%

**Delivery Rooms** 

13 out of 15 PHCs have delivery rooms in their facility

# 100% Maternity/

Lying-in ward

All 15 PHCs have maternity / lying-in ward



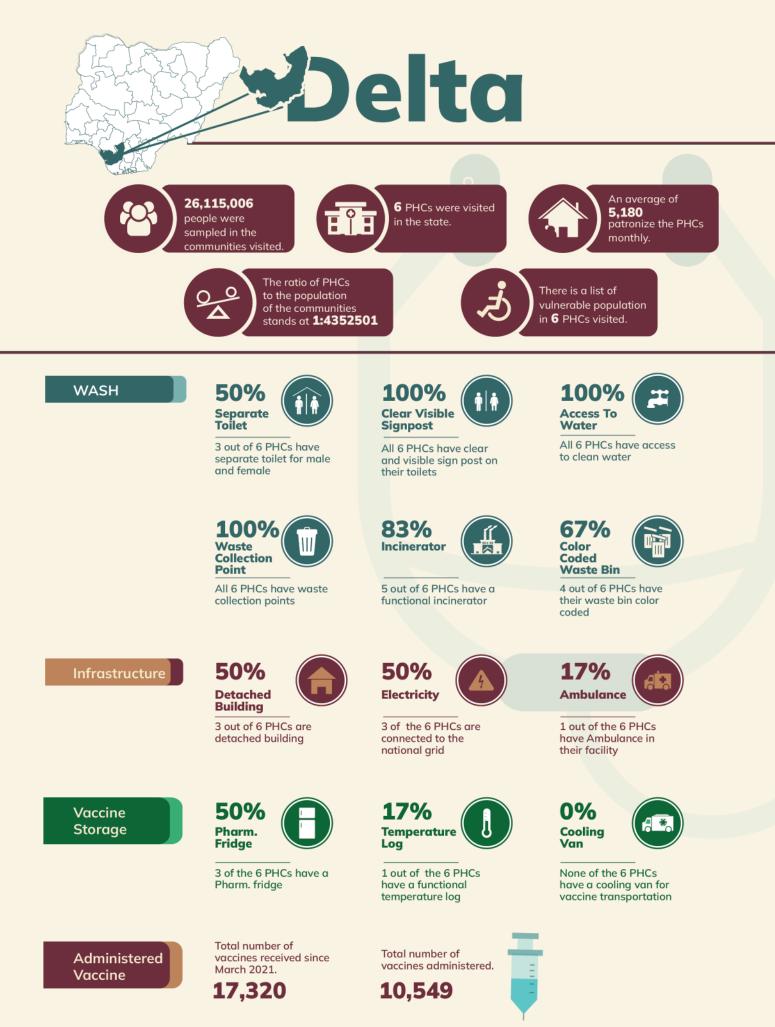
#### 40% Ward Development Committee (WDC)

6 out of the 15 PHCs have a WDC 67%

10 out of 15 PHCs have a functional laboratory

48% In-patient ward

6 out of 15 PHCs have an in-patient ward







5 out of the 6 PHCs Met the required standard.

# 50%

Pharmacy Technicians

3 of 6 PHCs met the required standard

83%
Community
Health Officer

5 out of 6 PHCs met the required standard

# 0%

Junior Community Health Extension Workers

None of the 6 PHCs met the required standard

17% Nurse/Midwives

1 out of the 6 PHCs met the required standard

# 50%

Health Attendants

3 out of 6 PHCs met the standard for number of health attendance.

#### Service Delivery



#### 50% Ante-natal Care

3 out of 6 PHCs offer ante-natal care service

# 33%

**Delivery Rooms** 

2 out of 6 PHCs have delivery rooms in their facility

# 33% Maternity/

Lying-in ward

2 out of 6 PHCs have maternity / lying-in ward



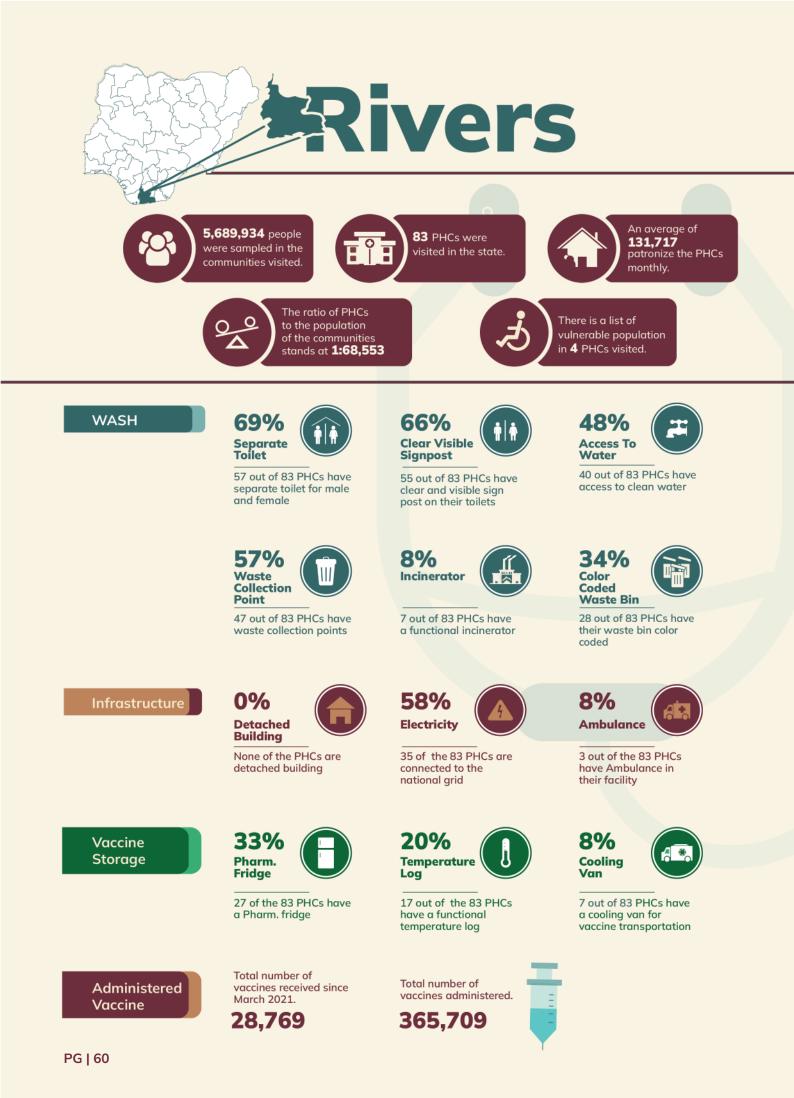
#### **0%** Ward Development Committee (WDC)

None of the 6 PHCs have a WDC 0% Laborator

None of the 6 PHCs have a functional laboratory



1 out of 6 PHCs have an in-patient ward







55 out of the 83 PHCs Met the required standard.

# **69%**

Pharmacy Technicians

57 of 83 PHCs met the required standard

**77%** Community Health Officer

64 out of 83 PHCs met the required standard

# **6%**

Junior Community Health Extension Workers

5 out of 83 PHCs met the required standard

8% Nurse/Midwives

7 out of 83 PHCs met the required standard

# 37%

Health Attendants

31 out of 83 PHCs met the standard for number of health attendance.

#### Service Delivery



#### 73% Ante-natal Care

61 out of 83 PHCs offer ante-natal care service

# 60%

**Delivery Rooms** 

50 out of 83 PHCs have delivery rooms in their facility

#### 64% Maternity/

Lying-in ward

53 out of 83 PHCs have maternity / lying-in ward



#### **1%** Ward Development Committee (WDC)

1 out of the 83 PHCs have a WDC

61%

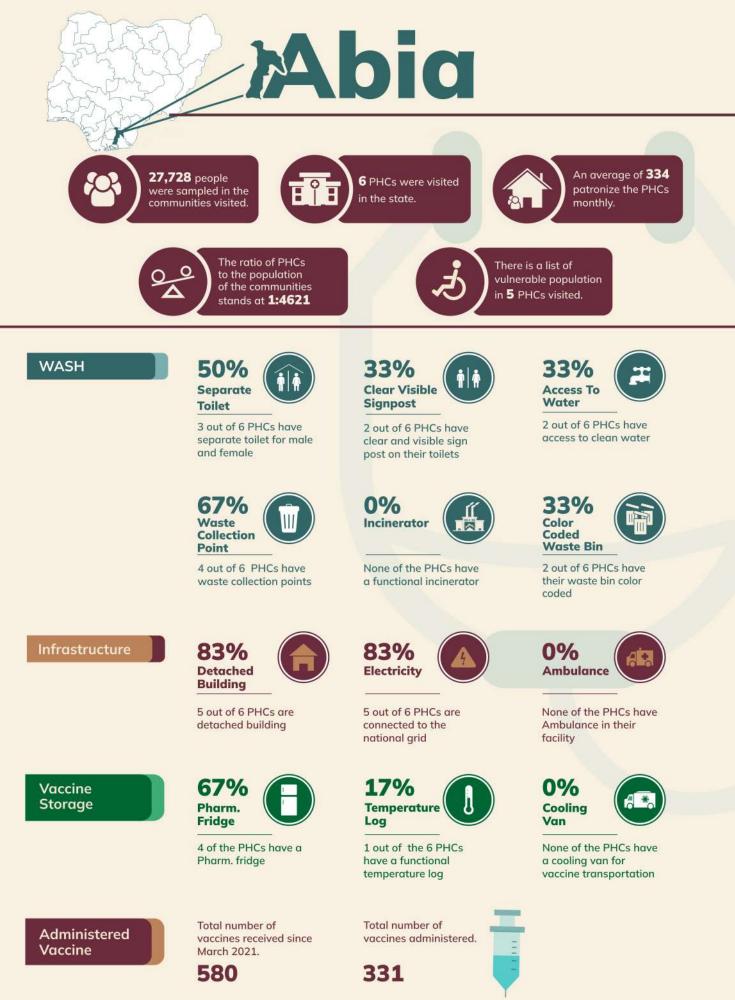
51 out of 83 PHCs have a functional laboratory



46 out of 83 PHCs have an in-patient ward

# South East Region





PG | 63





1 out of 6 PHCs met the required standard

> 17% Pharmacy Technicians

1 out of the 6 PHCs met the required standard

33% Community Health Officer

2 of the 6 PHCs met the required standard

# 0%

Junior Community Health Extension Workers

None of the PHCs met the required standard

0% Nurse/Midwives

None of the PHCs met the required standard

#### **17%** Health Attendants

1 out of 6 PHCs met the standard for number of health attendants

#### Service Delivery



# **100%** Ante-natal Care

All the PHCs offer antenatal care service

# 76% Delivery Rooms

2 out of 6 PHCs have delivery rooms in their facility

#### 65% Maternity/ Lying-in ward

5 out of 6 PHCs have maternity / lying-in ward



# 18%

Ward Development Committee (WDC)

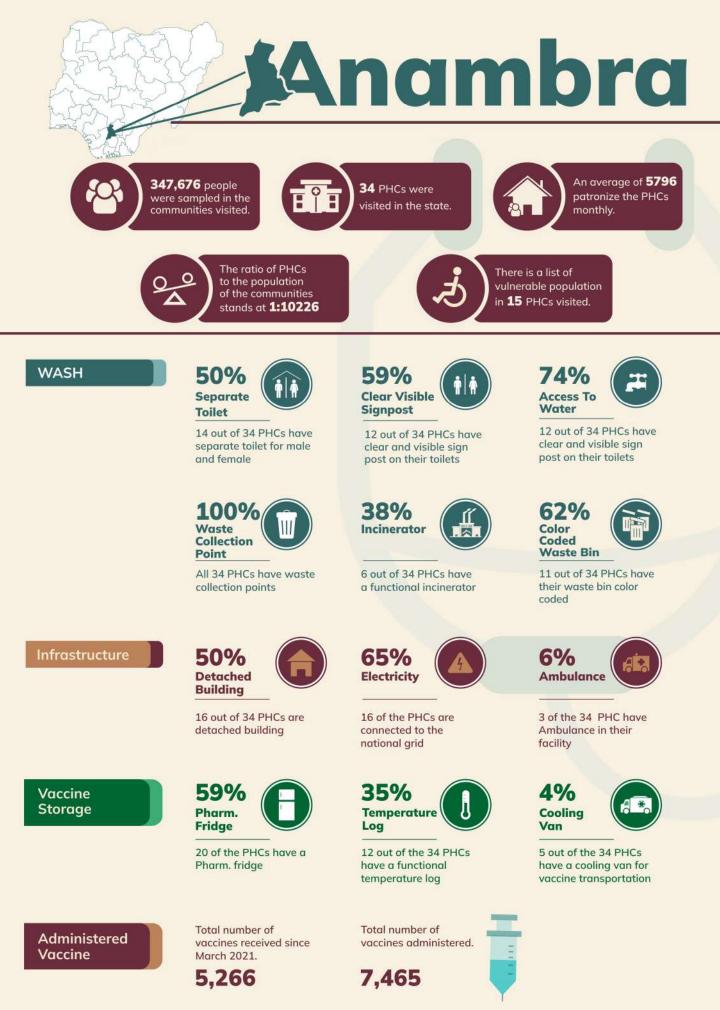
All the PHCs have a WDC

88%

3 out of 6 PHCs have a functional laboratory

53% In-atient ward

3 out of 6 PHCs have an in-patient ward







13 out of 34 PHCs met the required standard

9% Pharmacy Technicians

3 out of the 34 PHCs met the required standard

#### 29% Community Health Officer

10 out of 34 PHCs met the required standard

0% Junior Community Health Extension Workers

None of the PHCs met the required standard

0% Nurse/Midwives

None of the PHCs met the required standard

> 24% Health Attendants

8 out of 34 PHCs met the standard for number of health attendants

#### Service Delivery



#### 88% Ante-natal Care

# 47% Delivery Rooms

16 out of 34 PHCs have delivery rooms in their facility **76%** Maternity/ Lying-in ward

26 out of 34 PHCs have maternity / lying-in ward



#### 53% Ward Development Committee (WDC)

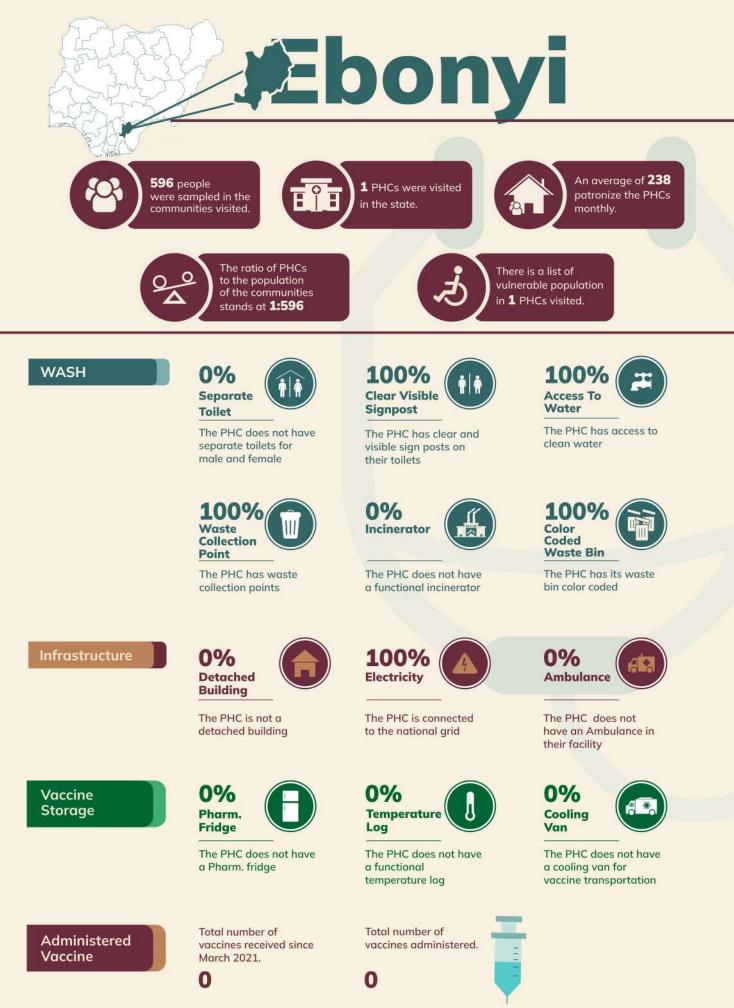
18 of the PHCs have a WDC

50% Laborator

17 out of 34 PHCs have a functional laboratory

70% In-atient ward

24 out of 34 PHCs have an in-patient ward



PG | 67





The PHC did not meet the required standard

0% Pharmacy Technicians

The PHC did not meet the required standard

0% Community Health Officer

The PHC did not meet the required standard

0% Junior Community Health Extension Workers

The PHC did not meet the required standard

0% Nurse/Midwives

The PHC did not meet the required standard

0% Health Attendants

The PHC did not meet the required standard

Service Delivery



# **100%** Ante-natal Care

The PHC offers antenatal care service **0%** Delivery Rooms

The PHCs does not have delivery rooms in their facility **0%** Maternity/ Lying-in ward

The PHC does not have maternity / lying-in ward



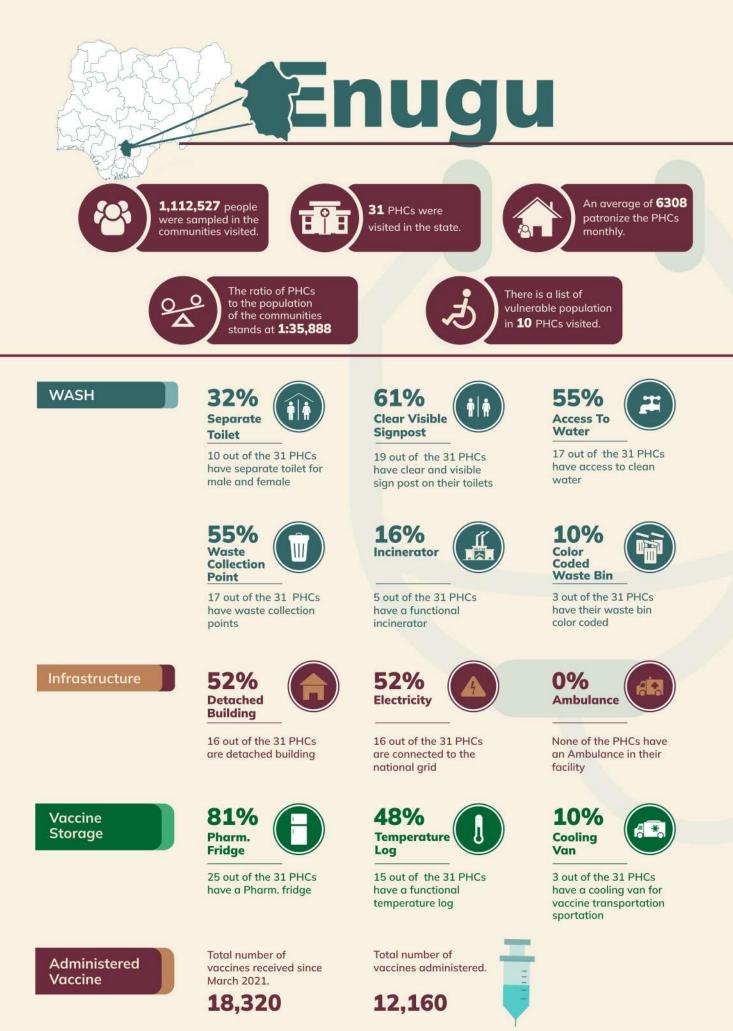
#### **0%** Ward Development Committee (WDC)

The PHCs does not have a WDC 0% Laborator

The PHC does not have a functional laboratory



The PHC does not have an in-patient ward







9 out of the 31 PHCs Met the required standard

> 19% Pharmacy Technicians

6 out of the 31 PHCs met the required standard

#### 52% Community Health Officer

16 out of the 31 PHCs met the required standard

#### **0%** Junior Community Health Extension

Workers

None of the 31 PHCs met the required standard

**3%** Nurse/Midwives

1 out of the 31 PHCs met the required standard

# 42% Health

Attendants

13 out of the 31 PHCs met the standard for number of health attendance

#### Service Delivery



# 84%

Ante-natal Care

26 out of the 31 PHCs offer ante-natal care service

# **38%** Delivery Rooms

13 out of 31 PHCs have delivery rooms in their facility

#### **58%** Maternity/ Lying-in ward

18 out of the 31 PHCs have maternity / lyingin ward



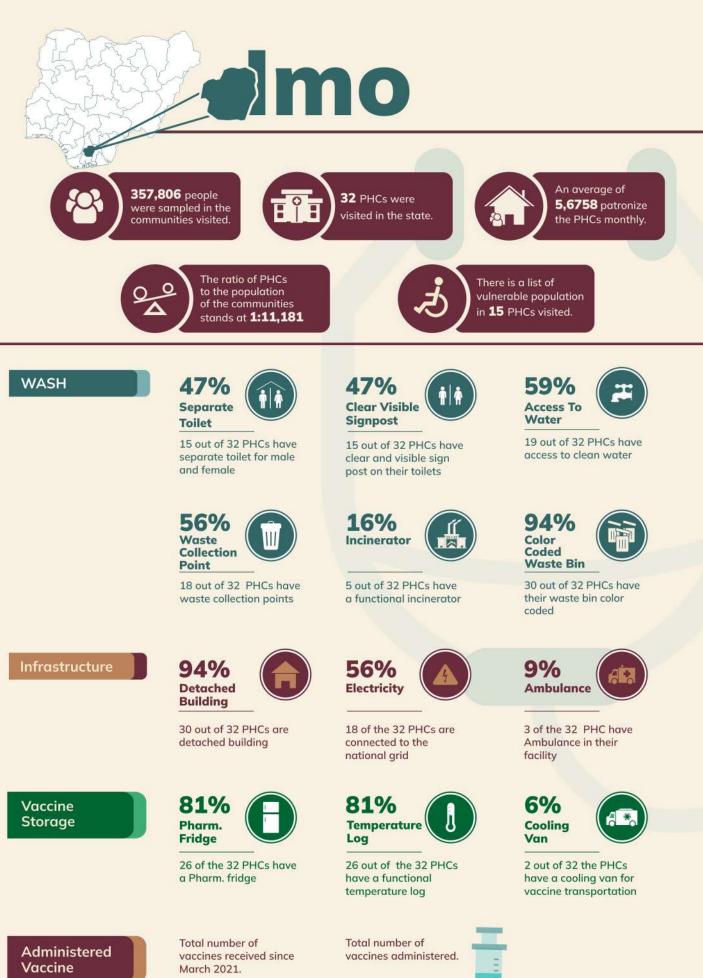
#### **39%** Ward Development Committee (WDC)

12 out of the 31 PHCs have a WDC 16%

5 out of the 31 PHCs have a functional laboratory

#### 61% In-patient ward

19 out of the 31 PHCs have an in-patient ward



1,776

2,311

PG | 71





6 out of 32 PHCs Met the required standard

9% Pharmacy Technicians

3 of 32 PHCs met the required standard **44%** Community Health Officer

14 of the 32 PHCs met the required standard

0% Junior Community Health Extension Workers

0 out of 32 PHCs met the required standard

9% Nurse/Midwives

3 of 32 PHCs met the required standard

> 34% Health Attendants

11 out of 32 PHCs met the standard for number of health attendance

Service Delivery



# 84%

Ante-natal Care

27 of 32 PHCs offer ante-natal care service **19%** Delivery Rooms

6 out of 32 PHCs have delivery rooms in their facility **59%** Maternity/ Lying-in ward

19 out of 32 PHCs have maternity / lying-in ward



### 63% Ward Development Committee (WDC)

20 out of 32 PHCs have a WDC 53% Laborator

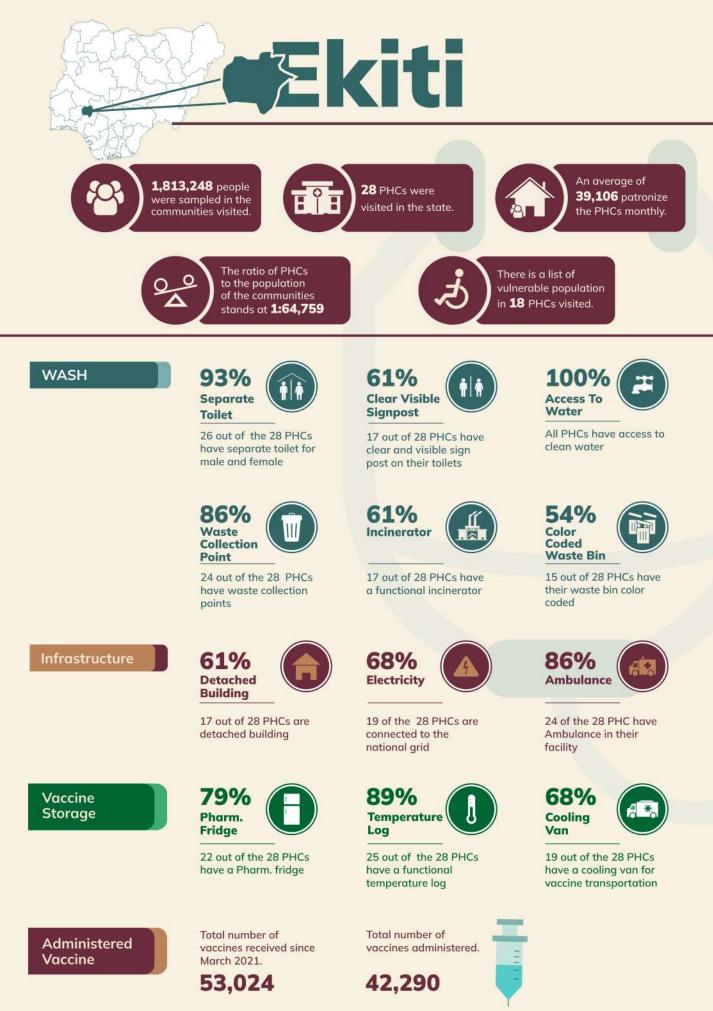
17 out of 32 PHCs have a functional laboratory



15 out of 32 PHCs have an in-patient ward











25 out of the 28 PHCs met the required standard

> 89% Pharmacy Technicians

25 of the 28 PHCs met the required standard

100% Community Health Officer

All 28 PHCs met the required standard

**14%** Junior Community Health Extension Workers

4 of the 28 PHCs met the required standard

29% Nurse/Midwives

8 of PHCs met the required standard

86% Health

Attendants

24 out of 28 PHCs met the standard for number of health attendance

Service Delivery



## 93% Ante-natal Care

service

26 out of the 28 PHCs offer ante-natal care **39%** Delivery Rooms

11 out of the 28 PHCs have delivery rooms in their facility **46%** Maternity/ Lying-in ward

13 out of the 28 PHCs have maternity / lyingin ward



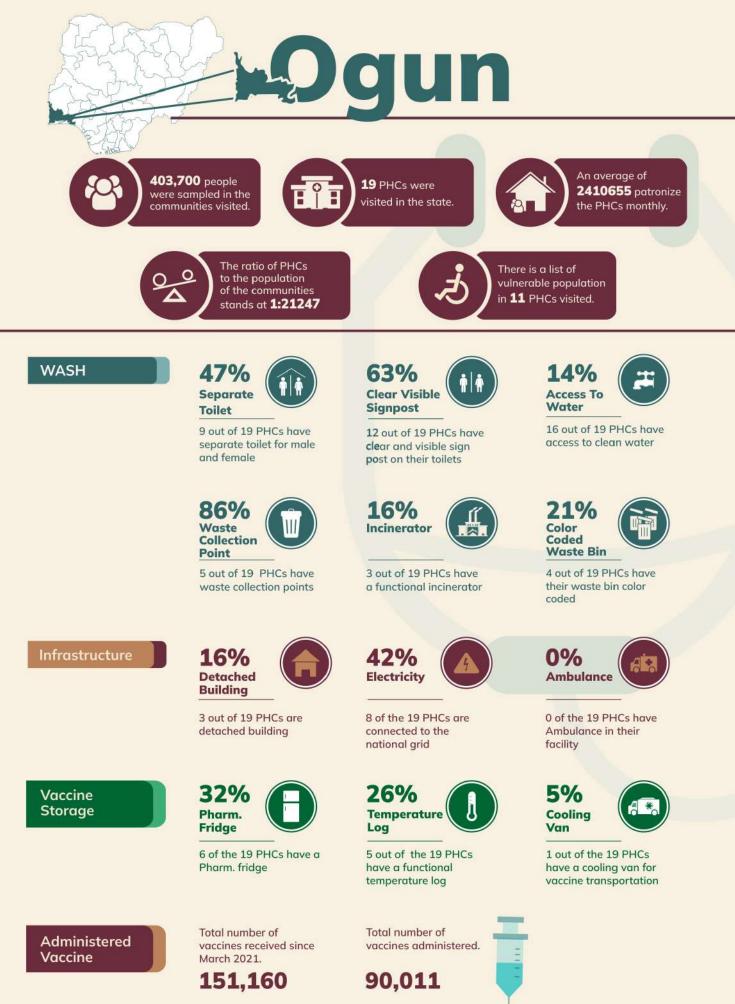
#### **18%** Ward Development Committee (WDC)

5 out of 28 PHCs have a WDC 57% Laborator

16 out of the 28 PHCs have a laboratory

14% In-atient ward

4 out of 28 PHCs have an in-patient ward





100%
Medical office

All of the 19 PHCs Met the required standard

74% Pharmacy Technicians

14 out of 19 PHCs met the required standard

**79%** Community Health Officer

15 of the 19 PHCs met the required standard

0% Junior Community Health Extension Workers

0 of the 19 PHCs met the required standard

5% Nurse/Midwives

1 of 19 PHCs met the required standard

> 26% Health Attendants

5 out of 19 PHCs met the standard for number of health attendance

Service Delivery



# 74%

Ante-natal Care

14 of 19 PHCs offer ante-natal care service 58%

**Delivery Rooms** 

11 out of 19 PHCs have delivery rooms in their facility 53% Maternity/ Lying-in ward

10 out of 19 PHCs have maternity / lying-in ward



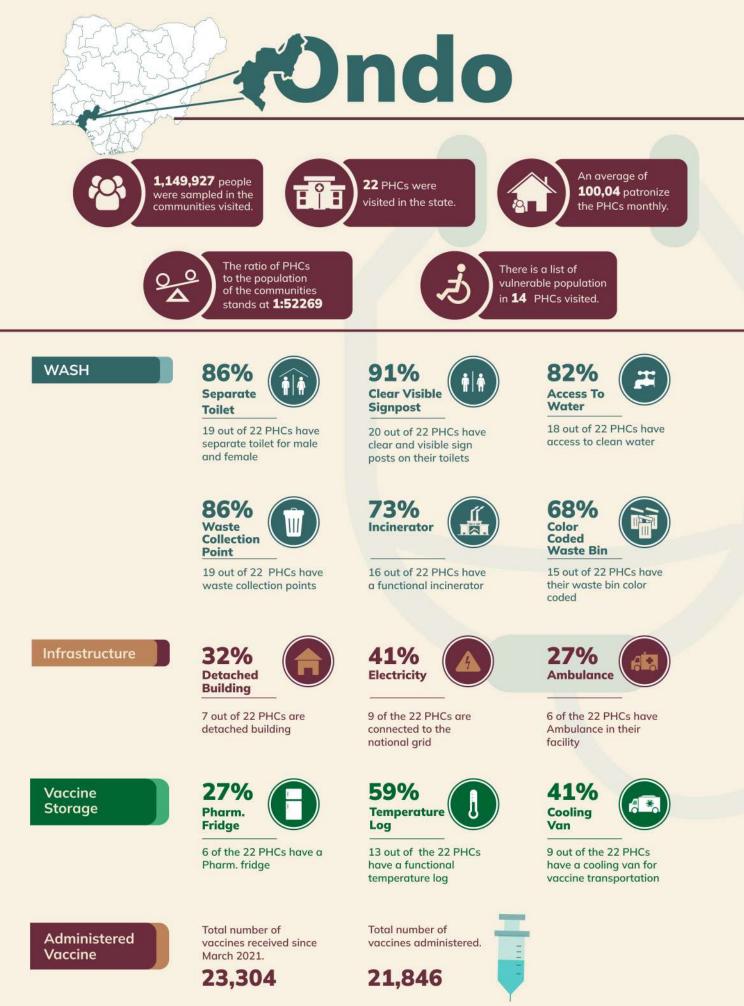
#### **37%** Ward Development Committee (WDC)

7 out of 19 PHCs have a WDC 47%

9 out of 19 PHCs have a functional laboratory

42% In-patient ward

8 out of 19 PHCs have an in-patient ward







10 out of the 22 PHCs Met the required standard

> 59% Pharmacy Technicians

13 out of 22 PHCs met the required standard

73% Community Health Officer

16 of the 22 PHCs met the required standard

5% Junior Community Health Extension Workers

1 of the 22 PHCs met the required standard **14%** Nurse/Midwives

2 out of the 20 PHCs met the required standard

82% Health Attendants

18 out of 22 PHCs met the standard for number of health attendance

Service Delivery



## **100%** Ante-natal Care

All of the 22 PHCs offer ante-natal care service 68% Delivery Rooms

15 out of 22 PHCs have delivery rooms in their facility

95% Maternity/ Lying-in ward

21 out of 22 PHCs have maternity / lying-in ward



# **45%**

Ward Development Committee (WDC)

10 out of 22 PHCs have a WDC

91% Laborator

20 out of 22 PHCs have a functional laboratory

82% In-patient ward

18 out of 22 PHCs have an in-patient ward in their facility

## Challenges

- Insecurity and conflict-prone regions played a significant role in limiting access to several communities in the South-South, South-East and North-Central. Two Champions were physically assaulted while on the field collecting data.
- In certain States like Borno, Abia, Delta, Ebonyi and Sokoto, staff of PHCs were reluctant to divulge any information due to concerns of lash back from supervisors which could lead to undue queries or loss of jobs.
- In South-South Nigeria, FollowTheMoney champions expressed an inability to access remote communities as certain communities could only be accessed using boats.
- In Lagos, Edo and Oyo States, there was an absolute lack of access to PHCs alluding to red tape.

## Recommendation

#### Full Commitment to Open Data Protocols/Requirements

Access to data is a key component of the Open Government Partnership (OGP). With Nigeria as a signatory to the OGP, it is binding on its Ministries, Department, and Agencies (MDAs) to become transparent, participatory, inclusive, and accountable by proactively disclosing public information in their easy-to-consume formats. It casts a bad light on the government when citizens are not granted access to public information on request as was our experience during the course of gathering data on Primary Health-Care Centers (PHCs) in several states. Our evidence suggests that all tiers of government have not fully committed to rebuilding citizens' trust in government processes by providing access to public data for social accountability and citizen-led oversight functions.

# Routine Monitoring and Evaluation to ensure Compliance with Standards and Regulations

The State Primary Healthcare Development Agency has to be diligent in monitoring PHCs within their jurisdictions to ensure adherence or compliance with standards. This is one of the ways to guarantee effective and efficient public health response systems knowing the vulnerability of health systems and supplies to corruption and sharp practices. Routine monitoring also strengthens professionalism and workplace ethics by engendering the consciousness that misconducts by facility managers are intolerable and punishable. Emphatically, relapses bordering on the attitudes of health personnel can be appropriately addressed by routine monitoring and supervision.

#### Vaccine Equity

When it comes to effective responses to epidemics or pandemics, no one is safe until everyone is safe. In one of CODE's reports titled "Vaccine Equity in Africa", we assessed the inequitable rollout of COVID-19 vaccines around the world. This inequality combines head-to-head with cultural biases that affect vaccine uptake in African communities. As such, this further highlights the imperative and urgency for Federal Health Agencies as well as their state counterparts to intensify vaccine adoption awareness efforts, even beyond COVID-19. In the spirit of leaving no one behind, emphasis can be placed on people at the grassroots level, the marginalized populations, to ensure equity in the distribution and access to vaccines.

#### Equipment & Personnel

One perennial deficiency of Primary Healthcare administration in Nigeria is inadequate manpower and outdated infrastructure in service delivery. Most times, health facilities are found in irreparable conditions, especially at the grassroots where the bulk of the population resides. One fundamental level of commitment to repositioning and strengthening service delivery is an agenda to reconstruct and rehabilitate old and dilapidated healthcare facilities. Upon reconstruction and rehabilitation, concerns about personnel can also be addressed. But first, to hire the required medical team, there should be functional buildings and equipment they can work with.

#### Constitution of Ward Development Commities (WDCs)

As part of the health systems strengthening approach, a WDC is a community accountability mechanism which brings together staff from government healthcare facilities and members of the community who use the facility. WDCs meet regularly to allow beneficiaries and staff to discuss issues around services and to come up with solutions for how to address them. This social accountability mechanism allows community participation in decisions affecting healthcare in their community.

In places or occasions where citizens submit reports to the Local Council Monitoring and Evaluation Units, such reports should serve as evidence to indict or sanction defaulting PHCs and facility managers. But most importantly, such reports should help in ensuring better health services for the people.

## Contributors

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Imo	Dr. Chigoziri Akudo Osuji	
Abia	Ugochukwu Favour	
Anambra	Ujunwa Eugenia Ananwude	

## State Of Basic Amenities

Image: Second	
Betwee last of PHC bases   Dest bis   Is betwee last of phC bases   Dest bis   Is betwee last of phC bases   Are these waste   Are these waste     Opplaizion of Average monthly Ratio of PHC storm-wluerable people in the lis is databas   Ocl-   Internalis   Internali	Column8 Delivery area Column1 lying ward Column2 Laboratory Column3 ward Column3 Fridge Column2 ture log van Column4
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And 0 2/12 34 1/42 34 1/42 35 6 7 6 7 6 7 7 6 7 7 6 7 7 6 7 7 6 7 7 6 7 6 7 7 6 7	100%   1   17%   0%     100%   12   52%   17   74%   18   78%   13   57%   11   48%   9   39%   2   9%
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