Dear Reader,

Welcome to the first-ever edition of the CGPP Nigeria Newsletter. CORE Group Partners Project (CGPP) is a USAID-funded project supporting the Government of Nigeria to eradicate polio, strengthen community capacity to address priority zoonotic diseases, and improve the uptake of COVID-19 vaccines through raising awareness at the community level. From 2017 to date, CGPP has continued to grow in leaps and bounds from implementing only polio eradication interventions, to a wider portfolio that includes the Global Health Security and COVID-19 interventions across the five focal states of Borno, Yobe, Kaduna, Kano, and Katsina.

From 2017 to date, CGPP has vaccinated over 3,343,374 children under 5 and reached over 2,356,238 households with convergent messages that have been life-changing on various key health issues using the house-to-house visit. Some key innovations include Iftar and Rubdugu supportive supervision. We’ve also pioneered the use of very innovative community-level awareness-raising tools like streamers and danglers which have proved useful in engaging communities to buy into and allow the vaccination of eligible children with the oral polio vaccine.

For COVID-19 awareness raising, CGPP pioneered the use of a motorized campaign which has led to 3,636 eligible adults being vaccinated for COVID-19 in this fiscal year so far. Our goal as a country program is to use our secretariat model to become a powerhouse of quality primary health care delivery at the community level.

I hope you enjoy this maiden edition of the CGPP Nigeria’s monthly newsletter, a new series of regular communications about what is happening in the project every month. This is meant to deliver high-level overviews of CGPP Nigeria. If you want to know more, our quarterly report can be requested.

I invite you to join us, share our newsletter, and support us in achieving the greatest impact the secretariat model can have on health and well-being. We would like to thank our donor USAID, partners, stakeholders, and government agencies that have contributed towards achieving our collective goals.

Best wishes,

Dr. Samuel Usman
CGPP Nigeria Secretariat Director
USAID MISSION ENGAGEMENT TO ENHANCE PROJECT OUTCOMES
CGPP with support from USAID and MEL Support Activity organized a MEL Capacity Building National Training of Trainers. A total of 21 participants from the CGPP Secretariat and 3 implementing partners were trained. These were trained as trainers and will further cascade the training to the lower levels. Capacity building is at the core of the CGPP secretariat model which is implemented across all 9 countries where CGPP currently operates. Monitoring, evaluation, and learning is critical to enable the sustenance of quality standards, accurate reporting, and effective dissemination of project data.

PROVISION OF TECHNICAL ASSISTANCE IN THE OUTBREAK RESPONSE TO FOCAL AND NON-FOCAL STATES
With funding from USAID, CGPP has consistently provided technical assistance in the outbreak response to circulating variant poliovirus type 2 (cVPV2) across its 5 focal states. During the outbreak response, CGPP community volunteers were deployed to sensitize and mobilize households for the campaigns while the senior supervisors from CGPP were deployed to ensure every eligible child was vaccinated. Through this, CGPP has vaccinated over 3,343,374 under-5 children in its focal states.

NIGER REPUBLIC - CROSS-BORDER ACTIVITIES
Zouley, a VCM with CGPP moved from house to house to sensitize households in Dan-Laro village with CCGPP, developed flip charts containing key messages on polio vaccines, routine immunization, and malnutrition. She transferred the knowledge (she had previously gained through health trainers CGPP supported in Niger) through community awareness efforts she conducted. The training focused on the key messages of Psycho-social First Aid, gender standards, and malnutrition responses which enabled her to ensure that the vaccination status of children as well as the search for insufficiently vaccinated cases and suspected cases of AFP during the follow-up mission of the community mobilizers of the Action Dev was prioritized. CGPP Niger, with its global goal to contribute to polio eradication by increasing population immunity and enhancing surveillance for acute flaccid paralysis (AFP) in Maradi and Diffa, is supporting community actors in the efforts to strengthen AFP case detection & reporting as well as case detection of other infectious diseases.

BEHAVIORAL COMMUNICATION CHANGE
CGPP Nigeria has employed a unique social behavioral approach to encourage participation in vaccination services, the CGPP’s Volunteer Community Mobilizers have continuously reached out to caregivers during social and religious gatherings, to vaccinate children under five years old, mobilize mothers and caregivers of newborns to present the babies for Oral Polio Vaccine (OPV) at birth. The VCMs move house to house with CGPP-developed communication materials containing key messages to raise awareness on the benefits of polio vaccines, routine immunization, ante-natal care visits, and the use of mosquito-treated bed nets, especially by pregnant women. CGPP through its activities at the community level has been playing a key role in countering myths and misconceptions people have about vaccines, recognizing men’s role as heads of households and decision-makers, and influential religious leaders as conversers for polio vaccination engaging these men through its community dialogue and sensitization sessions.
COVID - 19 RESPONSES

CGPP implemented a COVID-19 response across the five focal states in 2019 and is currently implementing a short-term COVID-19 response in Kano state with a special focus on risk communication and community engagement (RCCE) to raise awareness and improve uptake for the vaccine. The strategies used for the short-term response are factored into the current COVID-19 response to improve acceptance, uptake, and effectiveness. The SCALE 3.0 project aims to increase the reach and effectiveness of COVID-19 vaccination messaging and community engagement by utilizing a focused, intensified, and integrated vaccination campaign approach. The project is also assisting the National Immunization Technical Advisory Group, State Emergency Operations Centers, and Vaccination Technical Working Groups at the subnational level in driving and optimizing vaccination efforts with a focus on integration and accountability. The project comprehends supporting high-level advocacy to relevant stakeholders (particularly religious and traditional leaders) and the optimization of vaccination teams incentivized by performance, as well as the operationalization of additional teams and supervisors, with the goal of enhancing the integration of CGPP immunization work (OPV, COVID-19, etc.) vaccination efforts with that of other immunization programs implemented by other partners, is very effective and provides excellent results.

In Kano, CGPP conducted 18,543 house-to-house mobilizations on COVID-19, sensitized 21,023 people across three LGAs, and implemented supportive supervision. An estimate of 15,533 people were reached during the outreach motorized campaign, sensitization of 87 traditional leaders on COVID-19, and conducted eight Rubdugu supportive supervision sessions in Dambatta, Ungogo, and Nasarawa LGAs. Five supervision data collections and validations were implemented with a total of 1,601 individuals vaccinated in January.

CHANGING THE NARRATIVE OF WOMEN ACCESSING HEALTH FACILITIES IN RURAL AREAS

By Daleen Shamaki

My perception and behavior have changed to a positive one in terms of accessing health care. I must commend CGPP’s continued effort in changing the narrative of home delivery and defaulting in receiving vaccines for routine immunizations, which has influenced women in my community in health-seeking behavior. I will ensure that my child will be immunized with all the RI antigens in due time and will also help in sensitizing other pregnant and nursing mothers.

—Amina Yahaya

“Most women in my community prefer to deliver their children at home due to how most of the health facilities here are charging high costs of money for ANC and other services from us. The barriers for my fellow women in this community in using health facilities are as a result of distance, misinformation, poor health service has also contributed to a lot of us preferring home delivering than going to hospital due to cultural differences,” says Amina Yahaya a pregnant woman from tsumiya yamma, Gawuna Ward of Nassarawa LGA in Kano state. In improving women’s maternal health, CGPP’s volunteer community mobilizers (VCMs) in hard-to-reach areas have been employing social mobilization as a way to promote health awareness that empowers women’s groups with knowledge in accessing health services. Additionally, they have shown how women groups can mediate various interest groups to build environments that support and promote health and development processes like service provision, infrastructure, human resource development, preventive interventions, and advocacy for health, leading to increased knowledge on, control over, and ownership of health interventions. CGPP’s VCMs uses a flip book, interpersonal skills, and share scenarios on how prenatal screening and diagnosis have played a part in reducing the frequency of maternal death, miscarriages, birth defects, low birth weight, neonatal infections, and other preventable health problems. The effect of the sensitization changed Amina’s perception completely towards accessing healthcare services during pregnancy. She came to understand that the constant headache she was suffering from was actually a danger sign and needed medical help, not normal pregnancy symptoms as she had previously thought. The VCM kept tracking Amina until she delivered.

Amina’s experience of care during delivery was a positive one, as she shared with other pregnant women the importance of accessing healthcare services. She believes CGPP’s shared knowledge will go a long way in decreasing birth complications, maternal death, and AFP cases in her community, “Ina godiya sosai kuma ina godiya ga Allah da ya bani rai, ni da jaririna muna cikin koshin lafia. Ina so in godewa Core Group dasu ka taimaka min da kuma gamsar da ni na fara zuwa ziyanar ANC da cikakken bayani akan alluran rigakafi. Naj kwarin guwa har zuwa lokacin haihuwata, ban taba samun juna biyu da ba babu matsala kamar wannan karon ba. Zanji kukari in shawarci sauran mata masu juna biyu da su rika ziyartar wuraren kiwon lafia domin kiyaye matsalolin da suka shafi haihuwa. Ina kum su in ttabatar muku da cewa za’ayiwa yarona rigakafi da dukkan alluran rigakafi yau da kullum akan lokaci kuma za’ayiwa min wajen wayar da kan sauran mata masu juna biyu da masu shayarwa,” says Amina Yahaya.

(translation above in pull-out quote)
ON GLOBAL HEALTH SECURITY IN NIGERIA

The recent reemerging infectious disease has been a major public health problem that has become a threat to both animal and human origins. A number of factors have contributed to the spread of zoonotic disease, including the exponential growth in the human population, increased contact with both wild and domesticated animal species, and increased demand for animal protein for consumption. CGPP is implementing the Global Health Security (GHS) activities across the five project locations in order to fast-track and support key priorities in: zoonotic diseases, surveillance, risk communication, community involvement, and outbreak response and emergency planning.

CGPP, through its field staff, reached an estimated 147,458 caregivers (138,999 females, 8,459 males) who were visited and sensitized during active case searches on PZDs.

In Kano State eight transit nomadic herders were sensitized by the CGPP VCMs on PZDs along the Fulani route in Gwanda and Kore Ward of Dambatta LGA and also 24 advocacy visits to traditional/religious leaders and community members on PZDs across the three focal LGAs was conducted with an overview of zoonotic diseases, identification, active community surveillance on PZDs, and reporting. An advocacy visit to Abattoir Manager, Funtua LGA in Katsina State was conducted to solicit his collaboration and support towards achieving the goal and objective of the GHS program. During the visit, the discussion points were centered on: bovine tuberculosis cases in slaughtered animals, the plan to replicate One Health committee at the LGA level, RCCE, and supporting the state to strengthen community-based surveillance for PZDs.

In Kaduna, VCMs sensitized 12,001 households reaching 25,185 caregivers at the focal wards on the CGPP PZDs, key household practices, environmental sanitation, and other childhood diseases. Convergent messages were also provided at 169 compound meetings with 931 persons in attendance. Within this first quarter, 9 (7 humans, 2 animals) PZD alerts were detected citing the PZDs and the importance of environmental hygiene.

Lassa fever, rabies, bovine tuberculosis, and highly pathogenic avian influenza (HPAI) have been identified as priority zoonotic diseases (PZDs).

In Yobe, 344,232 house-to-house mobilizations were conducted by VCMs across 450 settlements reaching 582,809 caregivers across the focal settlements on PZDs and how to prevent themselves, from conta In Kaduna, VCMs sensitized 12,001 households reaching 25,185 caregivers at the focal wards on the CGPP PZDs, key household practices, environmental sanitation, and other childhood diseases. Convergent messages were also provided at 169 compound meetings with 931 persons in attendance. Within this first quarter, 9 (7 humans, 2 animals) PZD alerts were detected citing the PZDs and the importance of environmental hygiene.

The percentage of OPV3 coverage among children 12-23 months displayed in the bar chart across Kaduna, Yobe, Kano, Katsina and Borno state shows an increase cumulative total of 80% in Q1 of FY23. This is higher than the coverage achieved in Q4 which was 65.5%. The increase in Q1 can be attributed to intensified Advocacy, Communication, Social Mobilization (ACSM), and immunization systems strengthening activities such as household sensitization and mobilization of caregivers on the benefits of routine immunization, line listing, and reconnection of RI defaulters to health facilities for RI services, compound meetings, and strong supportive supervision across all the five CGPP focal States despite rising insecurity.

The percentage of Penta 3 coverage among children 12-23 months across the five project locations as shown in the chart with an increase with a total of 80% in Q1 of FY23. This is higher when compared to Q4 coverage of 65.5%. The increasing trend in Q1 is attributed to intensified Advocacy, Communication, Social Mobilization (ACSM), and immunization systems strengthening activities such as household sensitization and mobilization of caregivers on the benefits of routine immunization, line listing, and reconnection of RI defaulters to health facilities for RI services, compound meetings, and strong supportive supervision across all the five CGPP focal States despite rising insecurity.

The percentage of children 12-23 months who received all the antigens (BCG, HBV & OPV (4 doses), pentavalent vaccine (3 doses) measles and yellow fever vaccine) across all the five project states as shown in the chart in Q1 of FY23 with a total of 71%. This was achieved through mobilization of caregivers, reconnection of RI defaulters for RI services across all the five focal states in spite of rising insecurity across the country.

Data Source: CGPP Nigeria VCM Register
UPCOMING PLANNED ACTIVITIES

- Develop and commence utilization of new user-friendly VCM register.
- Step down of GALS trainings.
- Support the validation and printing of community-base surveillance strategic plan.
- Conduct Internal DQA.
- Conduct gender analysis.

OUR PRESENCE IN NIGERIA

ABOUT CGPP NIGERIA

CORE Group Partners Project (CGPP) is a USAID-funded project supporting the Government of Nigeria to eradicate Polio, strengthen community capacity to address priority zoonotic diseases, and improve the uptake of COVID-19 vaccines through raising awareness at the community level. CGPP Nigeria coordinates and supervises program activities in challenging hard-to-reach, and insecure areas of Five northern polio high-risk states of Borno and Yobe in the North East and Kaduna, Katsina, and Kano in the North West. The project’s polio work covers 26 Local Government Areas (districts) in the five focal states. It plays an essential role in promoting civil society's expertise in Nigeria’s polio eradication efforts through community-level promotion of immunization and case detection. CGPP Nigeria supports community-based surveillance, outbreak response, and enhanced immunization systems through 1,173 active community volunteers (female Volunteer Community Mobilizers) who raise awareness and reduce misinformation, non-compliance, and vaccine rejection. During FY20, USAID awarded additional non-polio funds for the project to support COVID-19 and GHSA in Nigeria.

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