



Partnership for Reviving Routine  
Immunisation in Northern Nigeria;  
Maternal Newborn and Child Health Initiative

# RESULTS: IMPROVED MATERNAL, NEWBORN & CHILD HEALTH OUTCOMES IN NORTHERN NIGERIA

Stronger systems : healthy women and children

PRRINN-MNCH contributed to saving the lives of 172,000 women and children

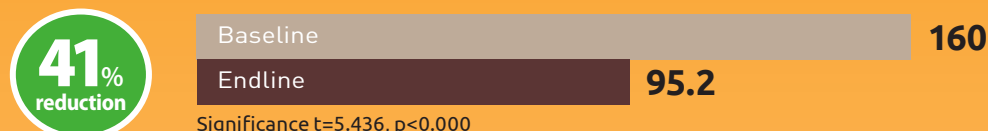
## Main findings

In representative sample surveys from a population of approximately 19 million, discernable change was seen across a range of key indicators.

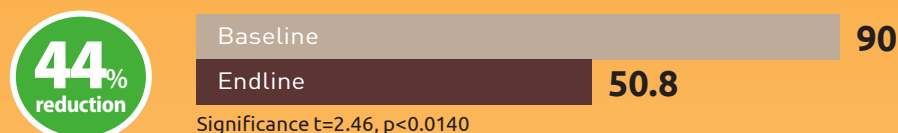
These are summarised in the tables opposite which compare data from the baseline household surveys done in 2009 with data from the endline household surveys (intervention clusters) done in 2013. Household surveys were conducted by the Mailman School of Public Health, Columbia University.

## Mortality

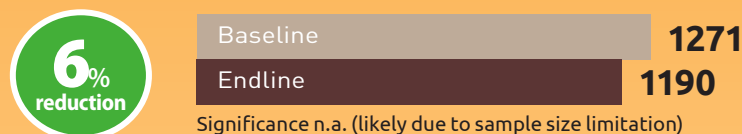
**Under-5 mortality rate:** the number of under five deaths/1,000 live births



**Infant mortality rate:** the number of infant deaths/1,000 live births

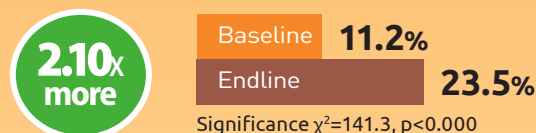


**Maternal mortality ratio:** the number of maternal deaths/100,000 live births

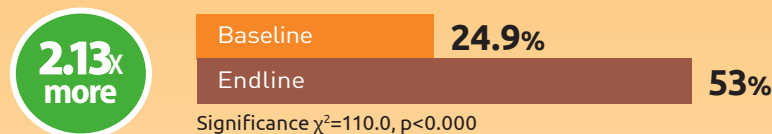


## Mother and child health

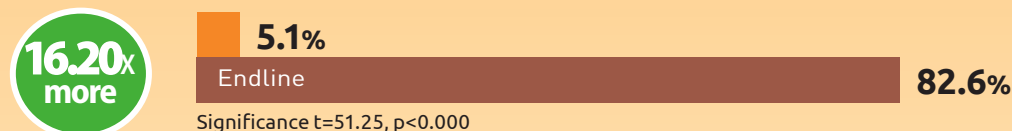
**% births attended** by a skilled birth attendant



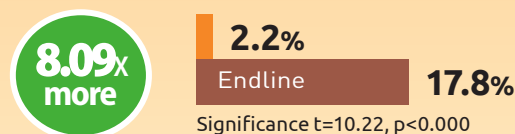
**% women receiving antenatal care** by a trained person



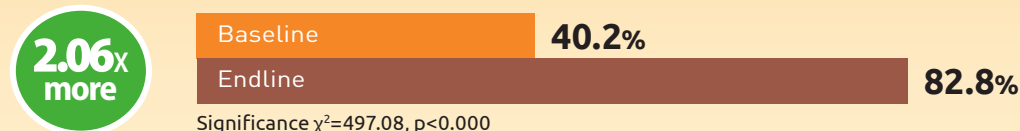
**% one year-olds that have received DPT3**



**% one year-olds that are fully immunised (all sources)**



**% women with standing permission** to take their child to a health centre





Partnership for Reviving Routine  
Immunisation in Northern Nigeria;  
Maternal Newborn and Child Health Initiative

# RESULTS: IMPROVED MATERNAL, NEWBORN & CHILD HEALTH OUTCOMES IN NORTHERN NIGERIA

Stronger systems : healthy women and children

PRINN-MNCH contributed to saving the lives of 172,000 women and children



## The programme

The Partnership for Reviving Routine Immunization in Northern Nigeria/Maternal Newborn and Child Health (PRINN-MNCH) programme combined health systems strengthening with routine immunization and maternal, newborn and child health interventions. It ran from November 2006 to July 2014.

## Its reach

Working across four northern states (Zamfara, Katsina, Jigawa, Yobe) and at federal level, PRINN-MNCH served a population of just over 19 million. These states have some of the world's worst indicators for maternal, newborn and child health. The programme assisted each state to achieve significant improvements in health indicators, by supporting many federal, state and local government health systems strengthening and service delivery initiatives, in combination with community engagement efforts.

## The results

A broad range of indicators provide strong evidence of value for money and lives saved by PRINN-MNCH. Independently verified evidence of significant programme impact includes dramatic reductions in child mortality rates, and large increases in immunization coverage. Percentage rates of women receiving antenatal care and delivering with a skilled birth attendant also more than doubled.

PRINN-MNCH delivered a range of outcomes at an estimated cost per person of £0.43 in 2013, which equates to a cost of between £16 and £33 per child life saved. The programme's comprehensive approach to health system strengthening contributed to positive change in one of the world's most difficult settings.



For more details visit [www.prrinn-mnch.org](http://www.prrinn-mnch.org) or email [info@healthpartners-int.co.uk](mailto:info@healthpartners-int.co.uk)

The PRINN-MNCH programme was funded and supported by UK aid from the UK Government and the State Department of the Norwegian Government.

The programme was managed by a consortium of Health Partners International, Save the Children and GRID Consulting, Nigeria.

