

The Zamfara state basket fund

A transparent and efficient funding option to improve health services

The challenge: regular funds issue for healthcare

In 1990, Nigeria reached a universal immunisation coverage rate of 81.5% for all antigens. This success has since been eroded by supply and demand challenges throughout the health system. The national fully immunised coverage rate for children dropped to 42% in 2006, while in Zamfara state it fell to 11%. Absence of guaranteed funding to finance critical recurrent activities is consistently cited as a key challenge for PHC services, particularly routine immunisation in Zamfara.

The response: basket fund leads to increased immunisation

The Zamfara Basket Fund is an innovative pooled funding mechanism that provides predictable funds to finance crucial recurrent PHC activities with transparent disbursement and efficient use safeguards. The pilot phase (October 2009 to March 2010) was supported by PRRINN-MNCH to address three challenges:

- Poor coverage of routine immunisation services
- Inadequate release of resources and poor use of released funds
- Challenges of coordinating different sources of funding for PHC

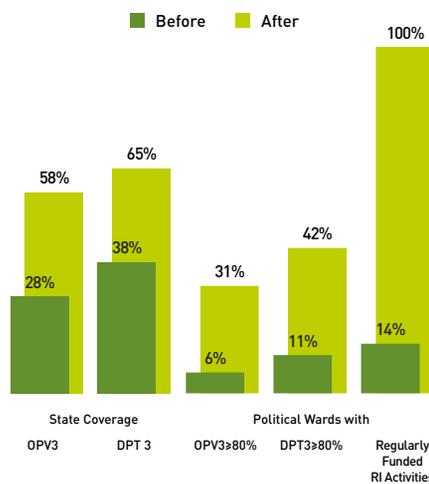
Key Messages: The basket fund is an effective way of financing healthcare initiatives in a sustainable way. This is particularly important for recurrent activities such as routine immunisation.

- 1** Children fully immunised coverage rate in Zamfara state had fallen to 11% – well below the national average.
- 2** The Zamfara basket fund with support from PRRINN-MNCH provided an innovative pooled funding system for recurrent primary health care.
- 3** Child immunisation greatly increased and the system is now state policy in Zamfara. Yobe state is also considering its own basket fund.

The results:

Fig 1: Routine immunisation indicators before and after pilot phase

All indicators had improved by the end of the pilot phase.



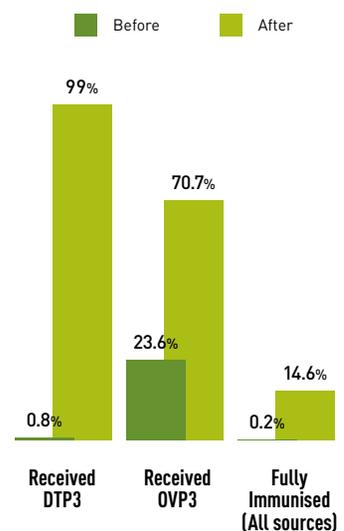
Surveys before and after the pilot phase of the basket fund showed significant increases in many immunisation indicators.

The success of the immunisation services in Zamfara was also corroborated by the results of national and household surveys. The 2010 NICS survey (see The challenge) showed that the fully immunised coverage rate has

improved from about 11% in 2006 to 61% in 2010; and the household surveys (HHS) showed similar improvements.

Fig 2: Zamfara – Percentage of 1 year old children immunised

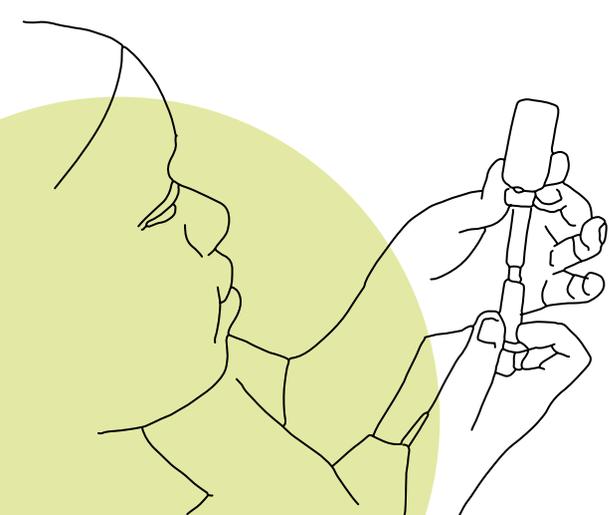
Comparison of baseline and endline household surveys (HHS)



All indicators had improved by the end of the pilot phase.

Regular funding from the basket fund led to huge increases in immunised children.

THIS DOCUMENT IS ONE OF A SERIES OF KNOWLEDGE SUMMARIES THAT DRAW ON THE ACTIVITIES, RESULTS AND LESSONS LEARNED FROM THE PRRINN-MNCH PROGRAMME



Activities supported by the fund include:

- Vaccine distribution
- Generator and cold chain maintenance
- Outreach services
- Community mobilisation
- Supportive supervision by state and LGA integrated supervision teams
- Data quality assessments

Contributions from the Nigerian government and international development partners, including GAVI, were channelled through the fund. The basket fund receives contributions from the state, 14 LGAs and partners in an agreed ratio of 20%, 70% and 10% respectively.

As shown, most immunisation indicators have improved. The increases are attributable to the basket fund because:

- There were no other state-wide interventions that would have significantly affected the results
- The immunisation-related activities supported by the funds are broad health system strengthening activities, as

recommended by the Reaching Every District (RED) strategy, known as the Reaching Every Ward (REW) strategy in Nigeria.

Use of the fund has contributed to improved efficiency of immunisation systems, regular monthly supervision visits in all LGAs and improvements in data collection.

Administrative procedures/ checks and balances

A key achievement was the establishment of effective administrative procedures and robust checks and balances for the basket fund:

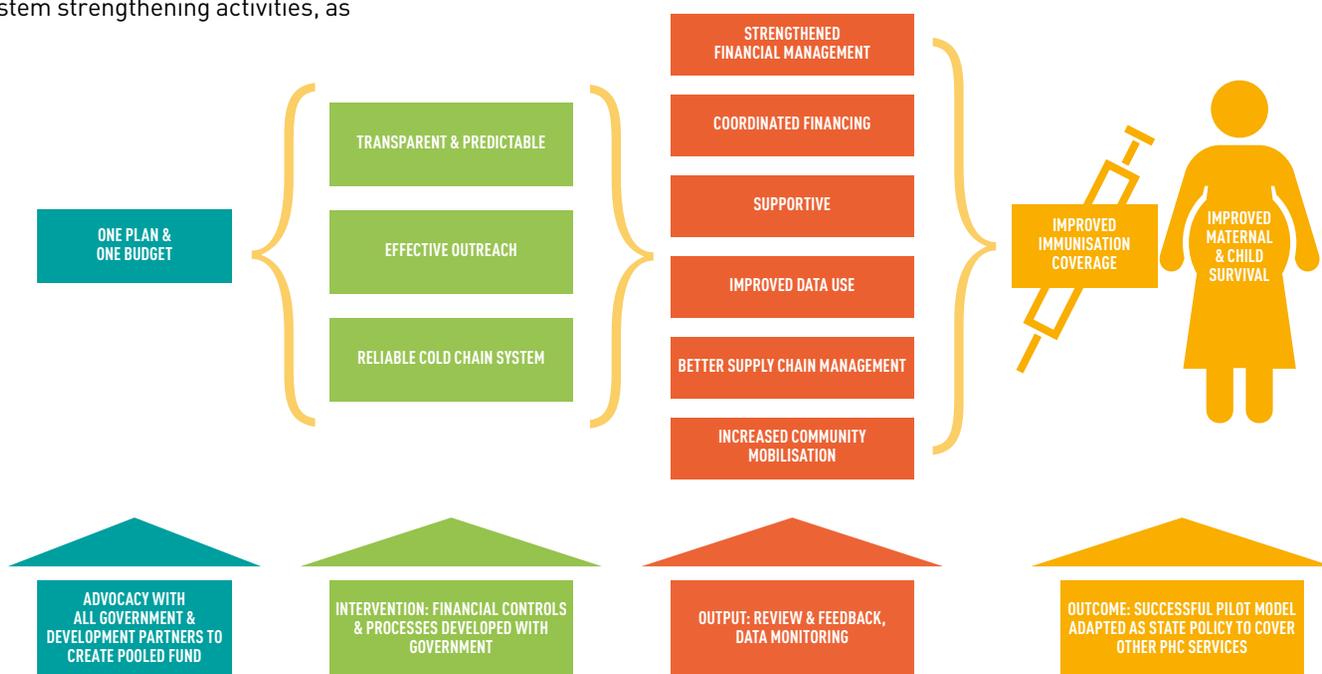
- Pooled account with three sets of signatories before funds can be released
- Individual LGA accounts with joint signatories maintained by each LGA
- Monthly fund disbursal from LGA finance clerks directly to beneficiaries
- Monthly fund retirement by finance clerks and endorsement by LGA chairmen/director of PHC and future funds are released subject to the retirement of previous funds

- Compliance monitored by the state technical team
- Fund disbursement and expenditure information publicly available

Conclusion: how the basket fund supports MNCH PHC services

The basket fund is now policy in Zamfara state. It has been expanded to cover other PHC services such as polio campaign activities, payment of the LGA allowances of midwives as part of the Midwives Service Scheme, community management of acute malnutrition (CMAM) and community engagement (CE) activities.

The basket fund has been recommended by an assessment team from WHO Geneva, the DFID mid-term review team that assessed the activities of the PRRINN-MNCH programme and by UNICEF. They all recommended it to other states in Nigeria. In 2013, approval was secured from the executive governor of Yobe state to institutionalise a basket fund for PHC activities in that state.



The PRRINN-MNCH programme works with federal, state and local governments and local communities to improve the quality and availability of maternal, newborn and child health services.

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



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