



COMMUNIQUE ISSUED AT THE END OF A 3-DAY STAKEHOLDERS' MEETING ON THE SECOND EDITION OF NIGERIA RESEARCH DAYS FOR MATERNAL NEWBORN AND CHILD HEALTH WITH THE THEME: INTEGRATION OF MENTAL HEALTH INTO REPRODUCTIVE AND COMMUNITY HEALTH: COMMUNITY MOBILISATION AND ENGAGEMENT, HELD AT ROCKVIEW ROYALE HOTEL, WUSE II ABUJA, NIGERIA, FROM 24TH TO 26TH SEPTEMBER, 2019

Preamble

As part of the efforts to implement the programme, “Moving Maternal, Newborn and Child Health Evidence into Policy (MEP)”, the West African Health Organization (WAHO) secured funding from the Canadian Institute of Health Research (CIHR), the International Development Research Centre (IDRC) and the Global Affairs Canada under the “Innovating for Maternal and Child Health in Africa (IMCHA)” Initiative to cover six ECOWAS Member States namely Nigeria, Benin, Burkina Faso, Mali, Ghana and Senegal.

The maiden edition of Nigeria stakeholders meeting on MNCH Research Days took place in July, 2018 with a resolution to make it an annual event in Nigeria. It was on this basis that this second edition was organized by the Federal Ministry of Health (FMOH), in collaboration with WAHO with the theme “**Integration of Mental Health into Reproductive and Community Health: Community Mobilization and Engagement**”, at Rockview Royale Hotel, Wuse II Abuja, Nigeria from 24th to 26th September, 2019.

The objectives of this edition are to share the research findings from the three IMCHA projects in Maternal, Newborn, Child and Adolescent Health plus Nutrition (MNCAH+N) in Nigeria; to discuss the use of the research findings in decision making in MNCH, as well as to enhance the capacity of stakeholders to use the regional evidence-based policy making guidance.

There were 79 participants at the workshop including the representative of the Honourable Minister of Health, Nigeria; the representative of the Director General WAHO; officers from the FMOH (Departments of Family Health, Planning Research and Statistics & Public Health); Federal line Ministries, Agencies and Parastatals (FMWR, NPHCDA, NIMR, NPopC); State representative (Oyo); Implementation Research Teams (from Oyo, Edo & Bauchi); the Academia, Professional

Associations (PAN, NISONM, SOGON, NANMN, SOFPON, APN, NISPID); Development Partners (UNICEF, CHAI, JHPIEGO), NGOs (PSN Africa, FOMWAN); Research Groups (NETBRECSIN, WHARC) as well as other key stakeholders in MNCH.

OPENING SESSION.

The meeting was declared open by the Honorable Minister of Health, Dr Osagie Ehanire, M.D, FWACS represented by the Director, Family Health Department, Dr Adebimpe Adebisi, who welcomed everybody and expressed optimism in the output of the meeting.

The representative of the DG WAHO in his own remarks reiterated his commitment to provide support to any project designed to impact positively on the lives of women and children in the West African sub-region.

TECHNICAL SESSIONS

Presentations and Discussions.

- *Presentations made include:*
 - Report of First edition of National Research Days: Results achieved & Lessons learnt
 - National Health Research System of Nigeria
 - Community Mobilization and Engagement
 - Presentation on Video Edutainment project and the Kunika Project in Toro, Bauchi State
 - Panel discussion on community engagement and community participation
 - Increasing access to skilled pregnancy care in rural Nigeria – Edo State
 - Evidence-based policy making guidance for West Africa
 - Situation analysis of use of evidence in decision making in West Africa
 - Recommendations on use of evidence in policy making
 - IDRC MNCH and Mental Health Projects in Ibadan, Oyo State.
 - Mental health: burden and response globally and in Nigeria
 - Scaling up care for perinatal depression for improved maternal and infant health(SPECTRA)
 - Responding to the Challenges of adolescent perinatal depression (RAPID)
 - Other mental Health projects

- Responding to the Challenges of adolescent perinatal depression with patient-centered mobile health (RAPID-mh)
- Antenatal depression and foetal growth outcomes in Jos, Plateau State
- PSN Africa community engaged approach to perinatal mood & anxiety disorders awareness and treatment.

Observations

1. The list of “Research Priorities” compiled by the National Health Research Committee has not properly captured some key MNCH issues.
2. Some policies are not informed by research, while many researches are not designed to address existing policy needs.
3. Research outputs are not shared with policy makers because of the gap between policy makers and researchers.
4. The NCH has approved 0.5% of grant sum as ethical review processing fee for research protocols at the national level.
5. Currently, there is no functional Central Medical Library in Nigeria as the one in Lagos is dilapidated.
6. There is weak capacity of policy makers on the use of evidence for policy making because of the disconnect between researchers and policy makers.
7. Evidence from the Scaling up care for perinatal depression for improved maternal and infant health (SPECTRA) implemented in 11 LGAs of Oyo State shows that capacity of primary health care providers can be built to deliver evidence based mental health care.
8. Evidence also shows that Community engagement and participation still remains the bedrock for better outcome in MNCH projects as demonstrated in the resultant zero maternal death in Etsako east LGA and Esan South east in Edo and improved spousal communication on MNCH, Toro LGA, Bauchi. However, community structures are yet to be fully incorporated in the design and implementation of other projects
9. Community health fund is a viable option to address the finance gap in access to quality service delivery.
10. There is a need to develop an implementation plan for the mental health policy which will incorporate mental health into MNCH.
11. There is no indicator on Mental health in the NHMIS
12. The National Mental Health Action Committee is not inclusive of MNCH programmes

Recommendations

1. For Federal Ministry of Health

- i) There is urgent need for appropriate linkages with the National Health Research Committee and program departments to agree on focus and need before setting research priorities for the country.
- ii) There should be an interface between researchers and policy makers to ensure research addresses priority gaps and engender proper policy making guidance. The existing MNCH Research Days, should be strengthened.
- iii) The Ministries of Health should begin to commission researches that will directly address policy needs
- iv) Future MNCH Research Day meetings should be broadened to include parliamentarians
- v) The capacity of researchers and users should be built on the areas of grantsmanship and the use of research evidence.
- vi) Mental Health Branch of the Public Health Department should work closely with the department of Planning Research and Statistics to ensure inclusion of mental health indicators in next review of NHMIS tools.
- vii) Policy briefs should be developed for each of the three ongoing implementation research projects and disseminated widely.
- viii) The National Mental Health Action Committee should be expanded to accommodate other professional bodies like PAN, NISONM and SOGON.

2. For States

Lessons learned from the three IMCHA projects in Bauchi, Edo and Oyo States are local evidence that should be presented for adoption at the next National Council Health as scalable interventions for other States.

3. For Researchers.

Researchers should begin to engage parliamentarians and policy makers at both National and sub-national levels for buy-in into researches for possible policy change and implementation

4. For WAHO & Partners

- i) Support Nigeria policy makers and researchers to build capacity on grantsmanship and use of evidence.
- ii) Support Nigeria to rebuild Central Medical Library with electronic components.

Members of the Communique Drafting Committee

1. Mrs. Tinuola Taylor (FMoH-CH) - Chairperson
2. Dr. Femi James (FMoH-NB) - Secretary
3. Mr Godwin Brooks (FMoH-DPRS) - Member
4. Dr. Kenechukwu Iloh (Rep. NISONM) - Member
5. Dr. Tunde Olatunji (ES - Oyo SPHCB) - Member
6. Dr Agatha David (Rep. NIMR) - Member
7. Dr. Vincent Adam (NETBRECSIN) - Facilitator