
Nigeria (Bauchi, Enugu, Oyo) Family Planning and Reproductive Health Survey 2002

Health Facility Survey Results

MEASURE Evaluation Technical Report Series, No. 16B

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Executive Summary

This report presents findings from a health facility survey conducted by MEASURE *Evaluation*, as part of the evaluation of the USAID-supported VISION Project. One of the objectives of the VISION Project is to increase the quality and capacity of family planning services in three Nigerian states: Bauchi, Enugu, and Oyo. This report presents data that will be used as a baseline against which changes resulting from the VISION Project will be measured. The findings of this study may also help refine the implementation strategies pursued by the VISION Project.

The report is divided into five chapters. Chapter I provides background information on the availability and access to health services in Nigeria, the role of the VISION Project, and the objectives and methodology of the health facility survey. Chapter II presents information on characteristics of facilities, including the qualifications of facility staff and the types of services they provide. Chapter III provides information on family planning service provision, including whether facility staff have received training in family planning service delivery and the supply of different family planning methods. Chapter IV describes the provision of STI and HIV/AIDS services at facilities, including how diagnoses of STIs are made at facilities and mechanisms for partner notification. Chapter V presents information on the provision of post-abortion care services. Key findings of the report are discussed below.

The facility survey covers hospitals, health centers, family planning (FP) clinics, pharmacies and patent medicine stores (PMS). A total of 271 facilities were surveyed. About 85% of the facilities are in Oyo, 10% in Bauchi, and 5% in Enugu. Most facilities (91%) surveyed are located in urban areas. Hospitals comprise 18% of all facilities, while pharmacies/PMS comprise 67% of all facilities. The remaining 15% consist of “other” facilities (e.g., health centers and family planning clinics).

Facility Characteristics

- Nine out of 10 facilities provide family planning services, 5 out of 10 provide STI/HIV/AIDS services, and 1 in 5 provide postabortion care services.
- Nine out of 10 facilities have a waiting area, but only half have amenities such as electricity, telephone, or tap water.
- The percentage of facilities with ongoing supervision plans varies: 36% of hospitals and 54% of health centers and family planning clinics reported having an ongoing supervision plan.
- Facilities with ongoing supervision plans are more likely than facilities without supervision plans to have better infection control and waste disposal practices.

Family Planning Services

- At the time of the survey, over 90% of family planning providers at hospitals, 81% at other facilities such as health centers and family planning clinics, and 32% at pharmacies/PMS had received training in family planning counseling. Providers at hospitals were more likely than providers at other facilities (e.g., health centers, family planning clinics, pharmacies/PMS) to have received clinical training (e.g., IUD insertion, mini-lap, non-scalpel vasectomy) in family planning.
- The male condom was available at 90% of the pharmacies/patent medicine stores and was available at 74% of the hospitals and other facilities surveyed. Other contraceptive methods such as hormonal methods are more likely to be available at hospitals, health centers, or family planning clinics. Hospitals are more likely than facilities such as health centers or family planning clinics to have the equipment and supplies to provide family planning.

STI and HIV/AIDS Services

- Over 50% of hospitals and over 30% of other facilities such as health centers and family planning clinics conduct tests for syphilis and gonorrhea.
- About 30% of hospitals and 8% of other facilities offer VCT.
- Over three-quarters of hospitals and other facilities (such as health centers, FP clinics) have confidentiality protocols for HIV/AIDS testing (91% and 76%, respectively).
- Over 50% of facilities such as health centers and FP clinics and 35% of hospitals always contact partners of patients with STIs or conduct follow-up with STI patients.

Postabortion Care Services

- About 70% or more of facilities providing postabortion care services have the recommended equipment and supplies available to provide those services.
- About 8 out of 10 facilities that provide postabortion care services routinely treat STIs and about half of the facilities that provide postabortion care offer counseling and testing for HIV/AIDS.

Chapter I. Introduction

Nigerian Context

Large geographic regional disparities in availability and quality of services and resources characterize the Nigerian health sector. In general, the majority of health services are located in the southern states while many northern states have more limited access to comprehensive health care (NPC, 2000). Both the public and private sectors provide a full range of health services at varying costs to the population. Many Nigerians also consult “chemists,” patent medicine stores, traditional birth attendants (TBAs), and herbalists who often provide basic health services as well as medications. There is a large network of private faith-based health care organizations providing services throughout Nigeria.

Availability and Access to Health Care

Increasing the availability and access to health care services is a priority for the Nigerian government. The objective of the national health policy plan, adopted in 1988, is to provide the population with access to primary health care services as well as to secondary and tertiary care, as needed, through a functional referral system (NPC, 2000). The health policy plan defines the roles and responsibilities of the three tiers of the public health system, as well as of private and nongovernmental organizations (NPC, 2000). Health services are organized as follows (Motherland Nigeria, 2003; NPC, 2000):

- **Primary**
The provision of health care at this level is largely the responsibility of the Local Government Area (LGA) with support from state ministries of health. Types of facilities at this level include health posts, health centers, clinics, and private medical practitioners.
- **Secondary**
This level of care provides specialized services to patients referred from the primary health care level and is the responsibility of

the state government. Specialized services may include out-patient and in-patient services at hospitals for general medical, surgical, pediatric, and community health services. Secondary health care is available at the LGA level of the state. Supportive services such as laboratory, diagnostic, blood bank, rehabilitation, and physiotherapy may also be available at this level. Private hospitals also provide services at this level.

- **Tertiary**
This level of care, provided by teaching hospitals and other specialist hospitals, offers specialized referral services to the primary and secondary levels of the health care delivery system. Both the federal and state governments are responsible for services at this level. Specialist hospitals also provide services at this level.

The Nigerian government considers the provision of primary health care services for all as crucial for improving the health of Nigerians. Such services include but are not limited to health education, reproductive health including family planning, maternal and child health care, provision of essential drugs, and disease control.

Efforts to Increase Access to and Quality of Health Care Services

Several donors have been working with the Nigerian Ministry of Health (MOH) to improve access to and the quality of health care services throughout Nigeria since 1999.¹ The World Bank through the Health Systems Development Project is helping the Nigerian government improve the delivery of basic health care services as well as the availability of essential and generic drugs in health facilities (World Bank Project Data, 2001). The United States Agency

¹ Between 1993 and 1999, many donors worked primarily through local NGOs or private facilities because of the political instability at the government level.

for International Development (USAID) / Nigeria's reproductive health (RH) program has focused its efforts on increasing the use and availability of quality family planning services (USAID, 2002). USAID/Nigeria's RH program includes training, capacity building, contraceptive logistics, contraceptive social marketing, behavior change communication (BCC), and the development of public-private partnerships. These activities are designed to improve the demand for, access to, quality, and capacity of family planning and reproductive health (FP/RH) services (USAID, 2003). Through the USAID-supported VISION Project, a FP/RH project active in three Nigerian states (Bauchi, Enugu, and Oyo), these key areas and activities are being addressed.

The VISION Project and MEASURE Evaluation's Role²

In September 2001, USAID/Nigeria awarded EngenderHealth and its partners a three-year, US\$10 million contract to assist USAID in developing a strategic framework for the future of its FP/RH program in Nigeria. Collaborating partners under VISION include Johns Hopkins University/Center for Communication Programs (JHU/CCP), Intrah, and Population Services International (PSI)/Society for Family Health (SFH).

The VISION Project aims to establish models of high-impact, high-performing FP/RH service delivery networks, to be built on public-private partnerships in selected LGAs in Bauchi, Enugu, and Oyo states. At present, the VISION Project is implemented in 15 selected LGAs, five each in Bauchi, Enugu, and Oyo states (see Table 1.1 for a list of LGAs by state). The three states in which the VISION Project operates differ from each other not only in terms of languages spoken, ethnic groups, and religion, but also in terms of access to and availability of health services. The current timeline for project im-

plementation is February 2002 – September 2004.³

The VISION Project aims to contribute to USAID/Nigeria's Strategic Objective 4 (SO4): increased use of family planning, HIV/AIDS, and child survival services. Specifically, the project objectives include

- Increasing **demand** for FP/RH, HIV/AIDS, and child survival services;
- Increasing **access** to and availability of FP/RH services and commodities;
- Improving the **quality** of FP/RH, HIV/AIDS, and child survival services; and
- Increasing the **capacity** of FP/RH, HIV/AIDS, and child survival service delivery systems.

MEASURE *Evaluation* (M2)/Tulane University is the external evaluator for the VISION Project⁴. Given the nature of the VISION Project, M2/Tulane, in consultation with VISION collaborating partners USAID/Nigeria and M2/UNC and M2/ORC/Macro, developed and implemented a household survey and a facility survey: Results from the household survey provide data for constructing indicators at the individual level (e.g., indicators related to information on individual knowledge of and demand for FP/RH issues and services);⁵ results of the facility survey provide information necessary to measure indicators related to access, types of services offered, and quality of services at the facility or Service Delivery Point (SDP) level (e.g., contraceptive availability).

This report describes the results of a baseline facility survey that was conducted as part of an external evaluation of the VISION family planning and reproductive health project.

³ Originally, VISION Project activities were scheduled to begin in September 2001, and to run for 30 months. Because of the events of September 11, 2001, the start of project activities was delayed until February 2002.

⁴ Given the funding cycle for the MEASURE *Evaluation* Project, it was decided that the baseline survey for the VISION evaluation would be conducted under the current phase of M2 but that the final evaluation may be conducted by another project (since the current phase ends in December 2003).

⁵ Agha et al. 2003.

² Agha, Escudero, Keating and Meekers. 2003. Nigeria (Bauchi, Enugu, and Oyo) Family Planning and Reproductive Health Survey. MEASURE *Evaluation* Technical Report Series, No. 16. Carolina Population Center, UNC.

Facility Survey Objectives

These are the specific objectives of the baseline facility survey:

- 1) To collect quantitative data related to availability and quality of services among all public and private health service delivery points (SDPs) within the same 15 LGAs as the baseline household survey in Bauchi, Enugu, and Oyo states (see Agha et al., 2003);
- 2) To obtain data that will be used as a baseline against which to measure changes over time resulting from the VISION Project's interventions; and
- 3) To provide data for the refinement of strategies for VISION Project activities, as well as for other reproductive health programs in the region.

For the purpose of this survey, service delivery points included public and private primary, secondary, and tertiary facilities, patent medicine stores, and pharmacies.

Methods

After conducting a competitive bidding process according to USAID/Nigeria requirements, M2/Tulane contracted the Center for Research, Evaluation, and Resource Development (CRERD), a local research organization based in Ile-Ife and affiliated with Obafemi Awolowo University (OAU), Nigeria, to implement both the household and facility surveys in the 15 LGAs where the VISION Project operates. CRERD, in consultation with M2/Tulane, was responsible for sampling design, data collection (including recruiting and training of the field survey teams), data entry, and data cleaning. M2/Tulane, while responsible for all aspects of the baseline, developed the questionnaires, assisted with training of the supervisors and survey teams, conducted data analysis, and wrote the survey reports.

Census of Health Facilities

To measure to what extent the respondents of the household survey have access to different types of health facilities, the sampling plan for

the facility survey was linked to the household survey (Agha et al., 2003). Specifically, a census of all types of facilities was taken in the reference enumeration areas (EA), that is, in each enumeration area selected for the household survey. Thus, the reference EAs are identical to those in the household survey, and were selected as follows. The household sample was collected using a multi-stage stratified sample. In each state, 40 enumeration areas were randomly selected. The number of EAs per LGA was selected with probability of selection proportional to the population size (PPS) of the LGA. A list of EAs in the project LGAs was obtained from the State Office of the National Population Commission (NPC). From this list, the required number of EAs in each LGA were selected through systematic random sampling. In addition to these reference EAs, all contiguous EAs were included in the sample. In the contiguous EAs, a census was taken of only the secondary and tertiary level of facilities. The assumption underlying this decision was that people are more likely to travel a long distance to reach a hospital or other large facility located outside their EA, than they are to travel such a distance to obtain services from a smaller facility.

A total of 271 facilities were surveyed. Table 1.1 presents the number of facilities surveyed by state and LGA.

Questionnaire Development

M2/Tulane, in consultation with all VISION collaborating partners, developed the questionnaire.⁶ The facility questionnaire was adapted from the Service Provision Assessment (SPA) instrument (ORC/Macro, 2002), and included sections on general health facility administrative procedures, equipment, materials, education and qualifications of providers, infection prevention procedures, family planning services, STI/HIV/AIDS services, postabortion care (PAC) services, and a checklist of selected essential medications. The questionnaire was translated into the three major local languages of the three VISION states (Hausa, Ibo, and

⁶ See Appendix A for a copy of the survey instrument.

Yoruba), and then back-translated into English. The questionnaire was interviewer-administered by paramedical personnel.

Geographic coordinates were collected using the Garmin eTrex® and downloaded using GPS Utility. For cross-checking purposes, interviewers also recorded the geographic coordinates on each questionnaire.

Training of Survey Teams

Training of field staff was conducted in two stages. First, supervisors received centralized training at OAU. Subsequent regional trainings of the field teams were held in each of the three states. Field survey teams were recruited from each state; interviewers were all paramedical personnel (e.g., nurses, doctors, midwives, etc). CRERD led all the trainings. M2/Tulane staff attended the training of supervisors and the first regional training of the Enugu data collection teams. Training consisted of a question-by-question review of the questionnaire, review of the sampling methodology, instruction in the use of the hand-held navigational units (e.g., Garmin eTrex®), role plays, and pretests of the questionnaire.

A total of 30 interviewers (10 interviewers per state, 2 interviewers per LGA) and 6 supervisors (2 per state) administered the facility surveys.⁷

Data Collection

Data collection began immediately after each regional training (Oyo state was first, followed by Enugu and Bauchi), and lasted from November 11 to December 10, 2002. To encourage cooperation, Dr. Adetunji, Director of the VISION Project, wrote a letter of introduction which explained the purpose and timing of the survey and which the supervisors presented to the Chairman of each LGA as well as to some local village heads before the implementation of the survey. Interviewers administered Section 1 of the questionnaire (general information) to the most senior health worker responsible for out-

patient services present at the facility or, in the case of PMS or pharmacies, to the most senior staff person responsible for providing services. For the sections of the questionnaire related to the provision of specific services (e.g., family planning, STI/HIV/AIDS, and postabortion care), the interviewers administered the questionnaire to the most senior staff member present at the facility that provided that specific type of service. (In many cases this turned out to be the same person who responded to Section 1.)

To reduce nonresponse and reporting biases, interviews were conducted either in the facility manager's office or in the service provision area when no other staff were present. In an effort to maintain confidentiality during the interview, if the facility manager's office was unavailable and other staff were in the service provision area, the interviewer selected another area within the facility (or directly outside the facility) where no one could hear the interview being conducted.

Fieldwork was complicated by difficulties in identifying the exact boundaries of some EAs. Either the descriptions on the hand-drawn EA maps did not seem to match the current physical terrain, or major construction and development had rendered the descriptions obsolete. The EA maps were provided by the NPC and date back to the 1990 Census. Not only have many areas changed topographically since then, but redistricting in the late 1990s caused some LGAs to be split in two. As a result, it was occasionally unclear which EAs were contained within current LGA boundaries. These issues were resolved with the assistance of local partners (e.g., VISION).

Limitations

As with all cross-sectional surveys, this survey is subject to response and recall biases. Self-reported data may reflect a perceived desirability of responses rather than actual knowledge or practices, leading to the potential for response bias. Responses to questions related to events in the past (such as training events attended, number of supervisory visits in the last six months, for example) were subject to recall bias.

⁷ See Appendix B for the list of interviewers and supervisors.

We conducted a census of all types of health facilities within the (household) selected EAs in an effort to ensure that, at the end of the VISION Project, it would be possible to make inferences relating interventions at the facility level to results at the population level. However, because of the difficulties mentioned above in identifying the exact demarcation of the EA boundaries, it is unclear whether all the existing health facilities were captured. CRERD did not obtain maps of the contiguous EAs; thus, it was impossible for the survey teams to determine the boundaries of the contiguous EAs. Consequently, it is impossible to determine whether the contiguous EAs captured all secondary and tertiary facilities. This issue is further complicated by a coding error that made it impossible to distinguish between facilities in the reference and contiguous EAs.

Because the survey sample was restricted to the 15 LGAs targeted by the VISION Project, the results from this survey may not be representative of health facilities in Enugu, Oyo, and Bauchi, nor of other Nigerian states.

Overview of Bauchi, Enugu, and Oyo States

As can be seen from Map 1, the three states where the VISION Project operates are located in different regions of Nigeria. According to the 2000 MOH database, Oyo has the greatest number of health facilities.⁸ This is consistent with the findings presented in subsequent chapters of this report.

Bauchi

Bauchi state is located in the northeastern part of Nigeria and is less densely populated than either Enugu or Oyo states (because the state is geographically larger). The population in Bauchi is concentrated in the major urban centers within the state, but particularly in Bauchi LGA, the state capital. The predominant language is Hausa, but English as a second language is widely spoken in urban areas (CRERD, 2002).

⁸ When referring to state level data throughout this report, we are referring to the data for the five VISION LGAs per state.

According to the Nigerian MOH, there are approximately 210 health facilities in the five VISION LGAs, of which 206 are primary health care facilities and 4 are secondary facilities. There are no tertiary facilities within the five VISION LGAs (FMOH, 2000). The VISION facility survey included a total of 26 facilities in Bauchi.

Enugu

Enugu state is located in the southeastern part of Nigeria. The average population density of Enugu is high at 268 people per square kilometer. (The average national density is 96 people per sq. km.) However, in urban areas the population density ranges from 300 to 600 per sq. km. The predominant language is Ibo, but English and Pidgin are also widely spoken (CRERD, 2002).

According to the Nigerian MOH, there are approximately 260 health care facilities within the five VISION LGAs, of which 189 are primary health care facilities, 67 are secondary health care facilities, and 3 are tertiary facilities (FMOH, 2002). A total of 14 facilities were captured in the VISION facility survey.

Oyo

Oyo is located in the southwestern part of Nigeria and is one of the most urbanized states in the country. Ibadan is located in Oyo state and is arguably the most populated city in Nigeria. The predominant language is Yoruba, but English is also widely spoken.

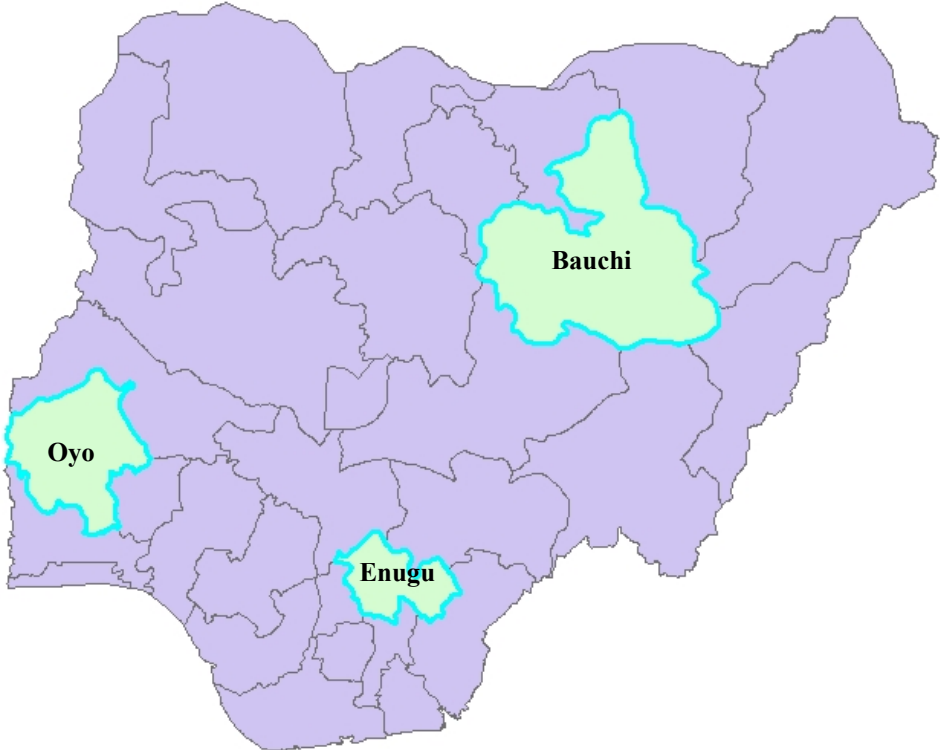
According to the FMOH, there are approximately 273 health care facilities in the five VISION LGAs, of which 266 are primary health care facilities and 7 are secondary facilities. There are no tertiary facilities within the five VISION LGAs (FMOH, 2002). The VISION facility survey included 231 facilities.

Since the reliability and accuracy of the MOH listing is unknown (both because of errors and because of changes made after the report was prepared), we were unable to estimate the extent of over/undersampling, and did not make any correction for it.

Table 1.1 Population, number of EAs and health facilities by LGA

	1991 Population Size	Number of Selected EAs	Number of Health Facilities Surveyed
Bauchi			
Alkaleri	174,861	9	4
Bauchi	356,923	17	13
Giade	92,294	4	4
Kirfi	83,010	4	3
Tafawa Balewa	126,436	6	2
Total Bauchi	833,524	40	26
Enugu			
Enugu East	174,431	10	7
Enugu North	153,033	9	3
Igbo Eiti	138,401	8	2
Nkanu West	102,945	6	2
Udenu	111,647	7	0
Total Enugu	680,457	40	14
Oyo			
Afijio	82,792	6	18
Ibadan S.West	277,047	19	167
Ibarapa East	65,897	4	31
Ogbomoso South	65,959	4	12
Orire	103,611	7	3
Total Oyo	595,306	40	231
TOTAL		120	271

Map 1. VISION States: Bauchi, Enugu, and Oyo



Chapter II. Facility Characteristics

A total of 271 facilities were included in the sample. About 85% of the facilities are in Oyo, 10% in Bauchi, and 5% in Enugu. Most facilities (91%) in the sample are located in urban areas. Hospitals comprise 18% of all facilities, while pharmacies/PMS comprise 67% of all facilities. The remaining 15% consists of “other” facilities such as health centers and family planning clinics (not shown). Throughout this report, “other facilities” refers to health centers and family planning clinics, unless otherwise noted. This chapter presents information on the types of services provided at the different health facilities, amenities available, staff background, infection prevention and control procedures, supervision, and community outreach.

Service Provision

Table 2.1 shows the percentage of facilities that provide family planning, STI/HIV/AIDS, and postabortion care (PAC) services. About 90% of facilities provide family planning services and/or distribute family planning products. Nearly all facilities in Oyo and about half of the facilities in Bauchi provide family planning services. Urban facilities are more likely than rural facilities to provide family planning (91% vs. 79%). A total of 94% of pharmacies/PMS, 83% of hospitals, and 82% of other facilities provide family planning. STI/HIV/AIDS services are provided by just over half of all facilities, with 60% of facilities in Oyo and 15% in Bauchi providing these services. Facilities located in urban areas are more likely to provide STI services than those in rural areas (58% vs. 21%). In terms of provision of STI services, 87% of hospitals, 66% of other facilities, and 44% of pharmacies/PMS provide such services.

Only 1 in 5 (21%) facilities provide PAC services. Facilities in Oyo are more likely than those in Bauchi (23% vs. 15%) to provide PAC. Urban facilities are more likely to provide PAC: About 23% of facilities in urban areas, compared to only 4% in rural areas. A total of 75% of hospitals, 42% of other facilities, and 3% of

pharmacies/PMS reported that they provide PAC services.

Because pharmacies/PMS typically do not have specific staff responsible for providing health services, questions about staff background, facility amenities, infection prevention and control procedures, community outreach, and supervision were asked only of clinics, health centers, and hospitals (88 out of 271 facilities).

Facility Amenities

Figure 2.1 shows the percentage of these facilities with a waiting area and other amenities. As can be seen, most facilities have a waiting area (91%) and about half have electricity (56%). A total of 48% of facilities have a telephone or short wave radio and 45% have tap water.

Staff Background

Several facilities have more than one trained staff member of each type (e.g., nurse, physician, midwife, among others).⁹ Figure 2.2 shows the percentage of hospitals, FP clinics, and health centers with at least one provider of each type. More than 7 out of 10 hospitals and 4 out of 10 other facilities have an auxiliary nurse. About 9 out of 10 hospitals and 2 out of 10 other facilities have at least one physician. Nearly 7 out of 10 hospitals and 4 out of 10 other facilities have a nurse/midwife and about half of hospitals and 1 in 4 other facilities have a nurse. Nearly half of FP clinics and health centers have at least one community health worker, while 1 out of 10 hospitals have the same. Family planning clinics and health centers tend to rely on community health officers. Three out of 10 FP clinics and health centers have community health officers, while 1 out of 10 hospitals reported the same.

⁹ For example, out of the 50 facilities that had doctors, 33 had only one doctor, while 17 had two or more doctors. For simplicity, we report on the number of facilities that had at least one staff member of each type.

Infection Prevention and Control Procedures and Supervision

Figure 2.3 shows the infection prevention procedures that facilities follow to sterilize syringes and needles. Most hospitals, FP clinics, and health centers (74%) use disposable syringes, 12% boil syringes and needles, and 8% use an autoclave.

Figure 2.4 shows disposal of contaminated waste by facilities. About 6 out of 10 facilities burn contaminated waste or items such as bandages that are not re-used, by burning the waste in an incinerator (33%), by burning the waste in an open pit (8%), or by burning and burying the waste (20%). About 1 in 3 facilities discard contaminated waste, either by throwing it in an open pit (23%) or by throwing it in a pit latrine (7%).

Nearly half of the hospitals, FP clinics, and health centers surveyed (44%) have an ongoing supervision plan (not shown). Figure 2.5 shows infection control and waste disposal practices by these facilities' supervision status. Those facilities which have an ongoing supervision plan are more likely to use disposable syringes (84% vs. 68%) and more likely to burn their waste items (70% vs. 55%).

Figure 2.6 shows facilities' ongoing supervision plans, infection control, and waste disposal practices. A total of 36% of hospitals and 54% of other facilities have ongoing supervision plans. There is little difference between hospitals and other facilities in the use of disposable syringes and burning of waste items. About 7 out of 10 facilities use disposable syringes and 6 out of 10 facilities burn waste items.

Only 18% of the facilities surveyed reported receiving a visit from a supervisor in the 6 months prior to the survey. However, of the facilities that received a visit, over 80% reported that the supervisor checked their registers and discussed problems with staff. Over 60% of the facilities that received a supervisor's visit in the previous 6 months reported that the supervisor discussed problems and technical matters and observed service provision. Slightly more than

half (54%) of these facilities reported that the supervisor met with staff individually.

Community Outreach

Figure 2.7 shows community orientation of hospitals, FP clinics, and health centers. About 13% of hospitals reported that they know the size of the population their facility serves, while one-third (32%) of other facilities (e.g., FP clinics and health centers) reported the same. Meetings between managers and community members occur at 34% of the hospitals surveyed and at 49% of the other facilities surveyed. Over half of other facilities have an outreach program, while 19% of hospitals reported having such a program.

Collecting information on client needs/opinions varied by facility type. Figure 2.8 shows responsiveness to client needs. A total of 68% of hospitals have a procedure for reporting client opinion; 27% of FP clinics and health centers have such a procedure. A total of 60% of hospitals and 32% of FP clinics and health centers surveyed reported that they had made changes in the three months before the survey in response to client opinions.

Table 2.1 Percentage of facilities that provide any family planning, STI/HIV/AIDS, PAC services or commodities

	Family Planning	STI/HIV/AIDS	Post-abortion care	n
State				
Bauchi	46.2	15.4	15.4	26
Enugu*	(92.9)	(42.9)	(7.1)	14
Oyo	95.1	59.7	23.0	226
Location				
Urban	91.3	57.9	23.1	242
Rural	79.2	20.8	4.1	24
Facility type				
Hospital	83.0	87.2	74.5	47
Other	81.6	65.8	42.1	38
Pharmacy/PMS	93.9	43.6	3.3	181
	90.2	54.5	21.4	266

* The percentages for Enugu are in parentheses due to the small number of cases (n=14).

Figure 2.1 Percentage of hospitals, clinics, and health centers with waiting area and amenities (n=84)

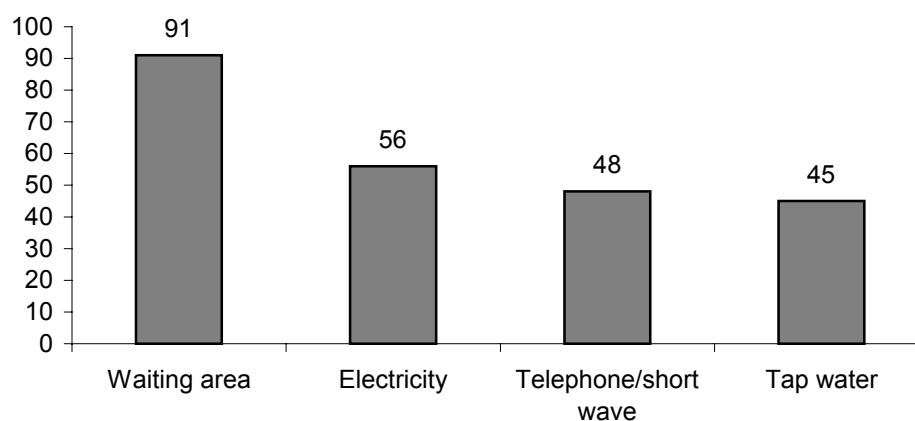


Figure 2.2 Percentage of facilities with at least one provider of each type

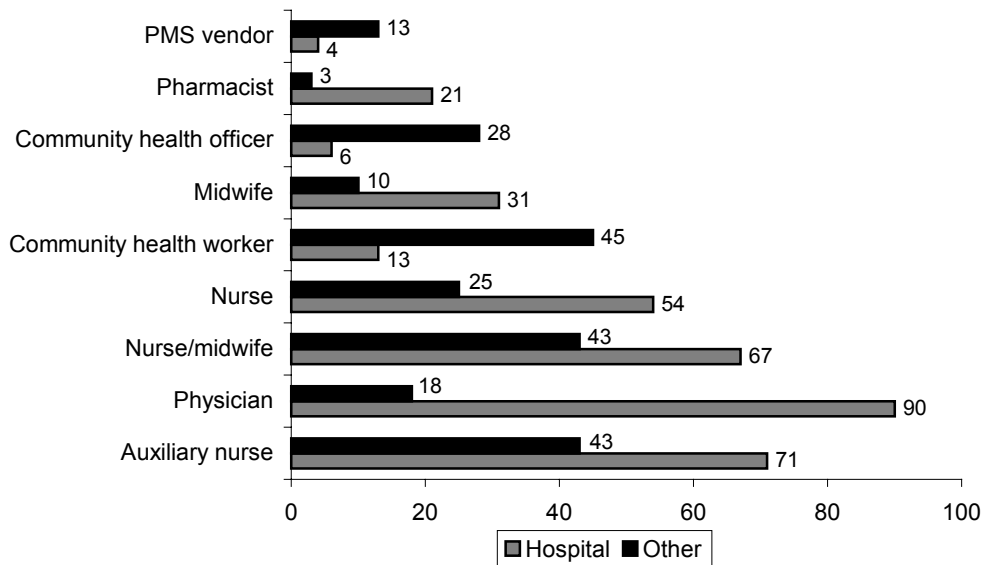


Figure 2.3 Percentage of facilities that practice infection prevention procedures for syringes and needles (by type of procedure)

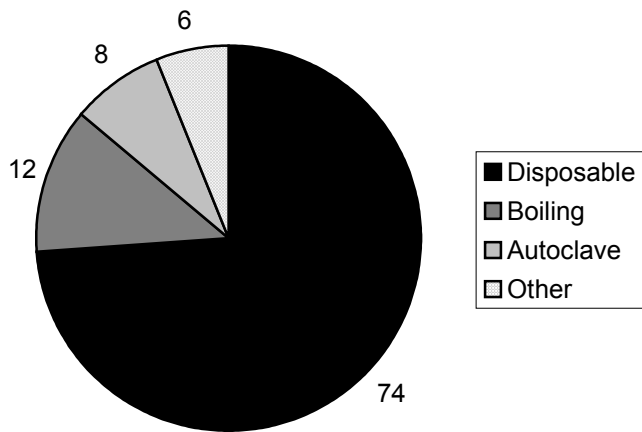


Figure 2.4 Percentage of facilities that dispose of contaminated waste (by disposal procedure)

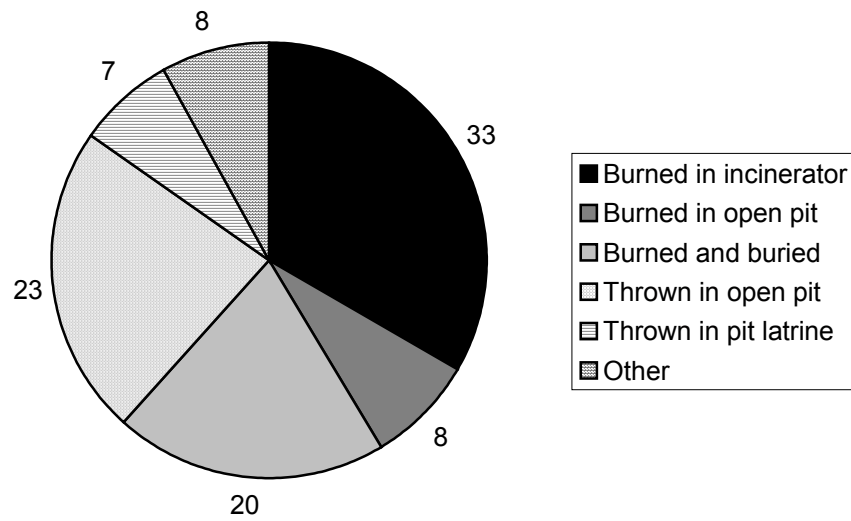


Figure 2.5 Percentage of facilities with/without ongoing supervision plans by infection control and waste disposal practices

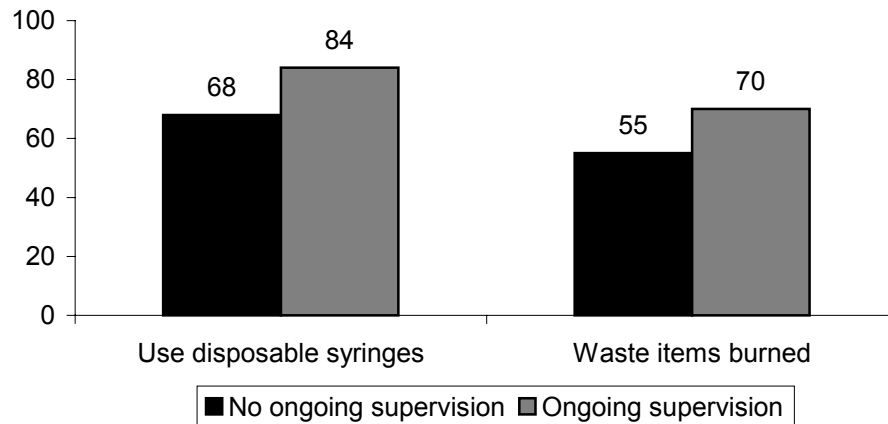


Figure 2.6 Percentage of hospitals and other facilities with/without ongoing supervision plans that use disposable syringes, burn waste items

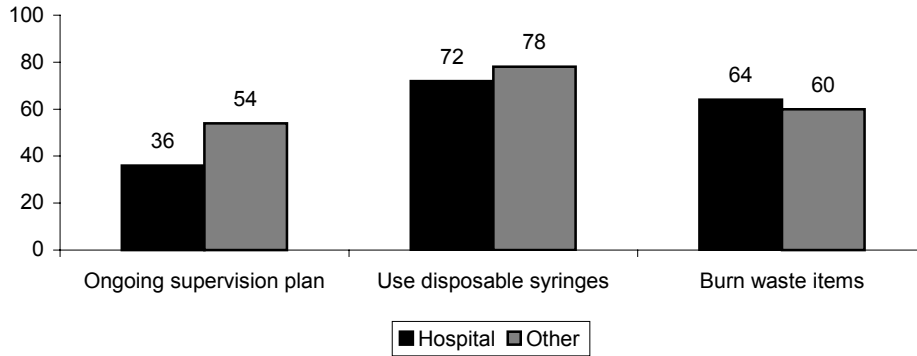


Figure 2.7 Percentage of hospital and other facilities that have some form of community orientation

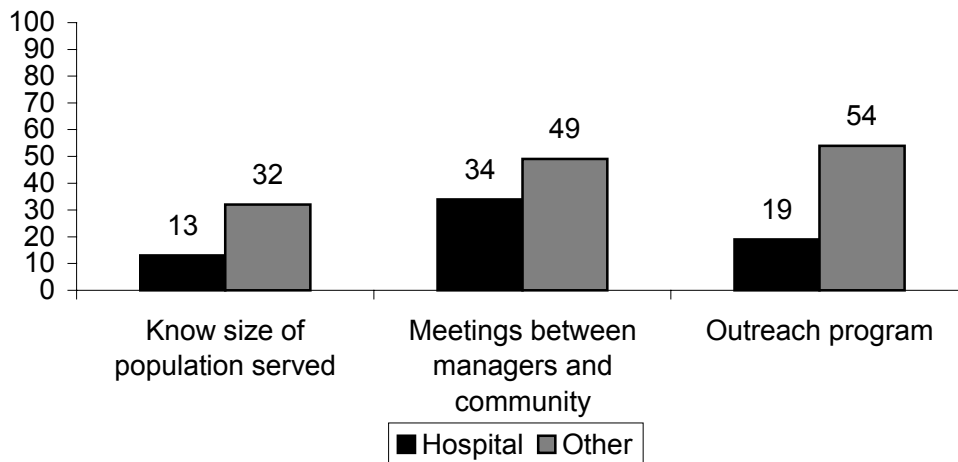
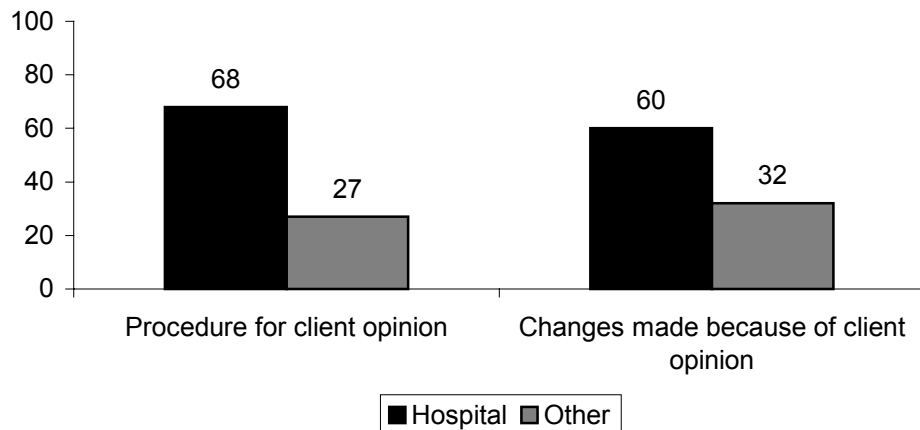


Figure 2.8 Percentage of hospitals and other facilities that are responsive to client opinion



Chapter III. Family Planning Services

This chapter presents information on facilities that provide family planning (FP) services, including the types of training received by staff, availability of family planning products and educational materials, FP materials, record keeping, storage of contraceptives, and supervision.

Nearly 9 out of 10 of all facilities surveyed, or 240 facilities, provide family planning services or commodities. A total of 215 of these facilities are in Oyo, 12 in Bauchi, and 13 in Enugu. About 16% of facilities providing family planning are hospitals, 13% are “other” facilities (e.g., health centers or family planning clinics), and 71% are pharmacies or patent medicine stores (not shown).

Figure 3.1 shows the percentage of facilities that were providing family planning services or products on the day of the survey. About half of hospitals, 1 in 3 other facilities, and nearly 3 out of 4 pharmacies were providing family planning services or products on the day of the survey.

Training

Figure 3.2 shows the percentage of providers who have ever received in-service family planning training. More than 80% of providers at hospitals and other facilities and 32% of pharmacists/PMS vendors received family planning training. A total of 85% of hospitals reported having received training in IUD insertion, while 58% of other facilities and 11% of pharmacists/PMS vendors reported the same. A total of 49% of hospital and 19% of other facilities received training in mini-laparotomy; 31% of hospitals and 23% of other facilities have been trained in no-scalpel vasectomy; 39% of hospitals and 26% of other facilities have been trained in providing implants. Only one or two percent of pharmacists/PMS vendors reported having received training in mini-laparotomy, in no-scalpel vasectomy or in providing implants.

Figure 3.3 shows the percentage of providers who had received training in STI diagnosis and

in PAC at the time of the survey. About 7 out of 10 providers at hospitals, 1 in 3 providers at other facilities, and 1 in 10 pharmacists/PMS vendors had received training in STI diagnosis; about 7 out of 10 providers at hospitals, 1 in 4 providers at other facilities, and 1 in 25 pharmacists/PMS providers reported they had received training in PAC.

Availability of FP Products and Educational Materials

Figure 3.4 shows the various hormonal methods provided at facilities that provide family planning. About 80% of hospitals and other facilities and 52% of pharmacies/PMS surveyed provide the combined pill. About half of hospitals and other facilities provide the progesterone pill, while 1 in 5 pharmacies/PMS provide this type of pill. About 8 out of 10 hospitals, 9 out of 10 other facilities, and 1 in 5 pharmacies/PMS provide Depo-provera. More than half of hospitals and other facilities provide Noristerat, while 1 in 10 pharmacies/PMS provide it. About 1 in 10 hospitals and other facilities provide implants; fewer than 1 in 20 pharmacies/PMS provide implants. About half of hospitals and 1 in 3 other facilities and pharmacies/PMS provide emergency contraception. A total of 87% of hospitals, 55% of other facilities, and 9% of pharmacies/PMS reported that they provide IUDs.

Figure 3.5 shows the percentage of facilities that provide various barrier methods and counseling for natural methods. Nine out of 10 pharmacies/PMS and 7 out of 10 hospitals and other facilities provide the male condom. About 1 in 5 hospitals, 1 in 7 other facilities, and 1 in 20 pharmacies/PMS provide the female condom. A total of 32% of hospitals, 7% of other facilities, and 13% of pharmacies/PMS provide the diaphragm. Foaming tablets are provided by 34% of hospitals, 29% of other facilities, and 18% of pharmacies/PMS. Counseling about natural FP methods is provided by 82% of hospitals, 68% of other facilities, and 27% of pharmacies/PMS surveyed.

Figure 3.6 shows the percentage of facilities that had stock-outs of various FP methods at the time of the survey (among those outlets that normally stock the method). The level of stock-out was highest for Noristerat and lowest for the male condom: Noristerat was out of stock in 29% of facilities and the male condom in 4% of facilities. About 20% of facilities that provide the progesterone pill, Depo-Provera, and foaming tablets reported that these methods were not in stock at the time of the survey.

Figure 3.7 shows the percentage of facilities that have visual aids or books/pamphlets on family planning and STI/HIV/AIDS. A total of 82% of hospitals, 61% of other facilities, and 10% of pharmacies/PMS have visual aids or pamphlets about family planning. About 7 out of 10 hospitals and other facilities have STI/HIV/AIDS materials, while 1 in 25 pharmacies/PMS have such materials.

Family Planning Materials (Equipment)

Figure 3.8 shows the percentage of facilities that have various items to provide family planning services. All hospitals have at least one table/stool for gynecological examination, hand-washing items, water for hand-washing, and a decontamination solution. Nearly all hospitals have a working spotlight source and clean gloves and 9 out of 10 hospitals have a Sharps container. About 8 out of 10 other facilities have hand-washing items, water for hand-washing, and clean gloves. About 7 out of 10 other facilities have a decontamination solution, 6 out of 10 have a Sharps container, and 5 out of 10 have at least a table/stool for gynecological examination. Only 1 in 3 other facilities have a working spotlight source.

Record-Keeping, Storage, and Supervision

Figure 3.9 shows the percentage of facilities that maintain a register for family planning consultations and the percentage that maintain individual client records. About 6 out of 10 hospitals, 7 out of 10 other facilities, and 1 in 16 pharmacies/PMS maintain family planning registers. About 9 in 10 hospitals, 7 out of 10 other facili-

ties, and only 1 in 25 pharmacies/PMS maintain individual client records.

Figure 3.10 shows the percentage of facilities that store contraceptives correctly and the percentage that had contact with a supervisor in the last six months. Correct storage of contraceptives is very high in general, with more than 9 out of 10 hospitals, other facilities, and pharmacies/PMS keeping contraceptive methods off the ground and protected from the sun. About 6 out of 10 other facilities, 5 out of 10 hospitals, and 3 out of 10 pharmacies/PMS had had contact with a supervisor in the six months prior to the survey.

Figure 3.1 Percentage of family planning facilities in which family planning services were being provided on the day of the survey

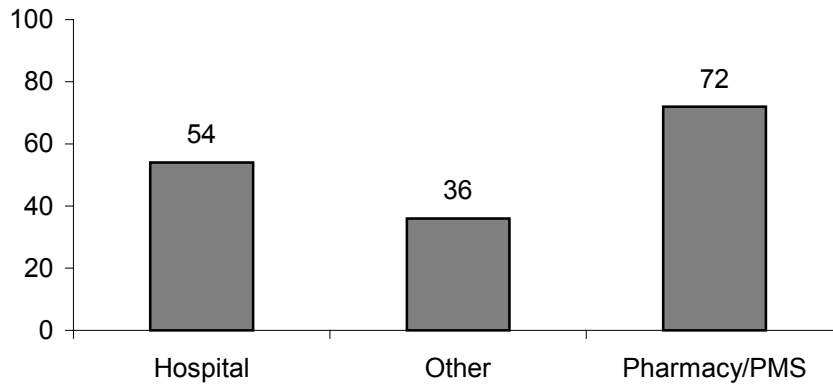


Figure 3.2 Percentage of family planning providers who ever received in-service family planning training

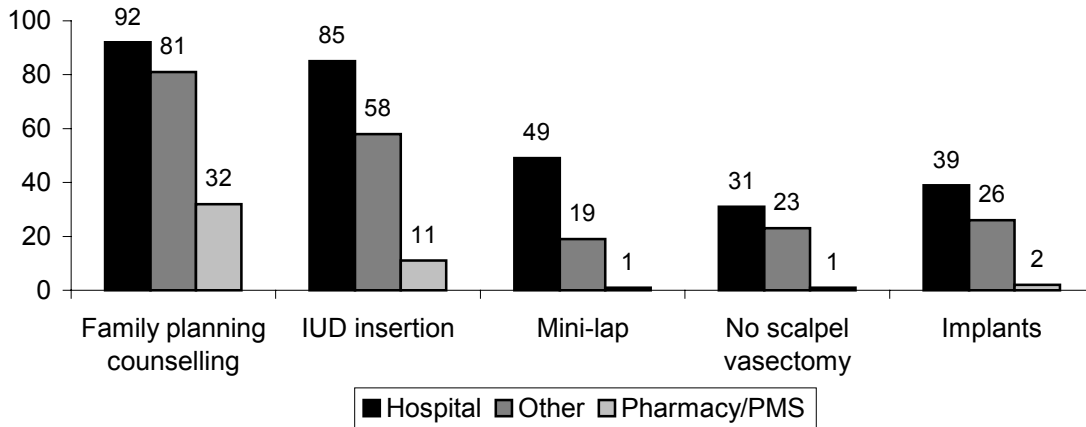


Figure 3.3 Percentage of family planning providers who received in-service STI diagnosis & postabortion care training

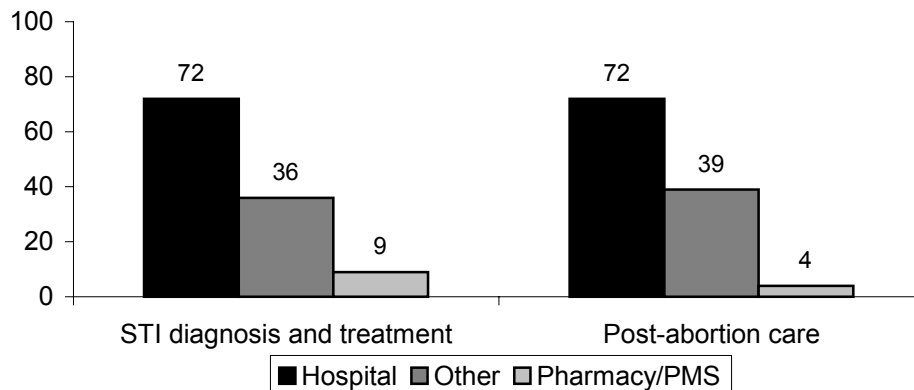


Figure 3.4 Percentage of family planning facilities that provide various hormonal methods

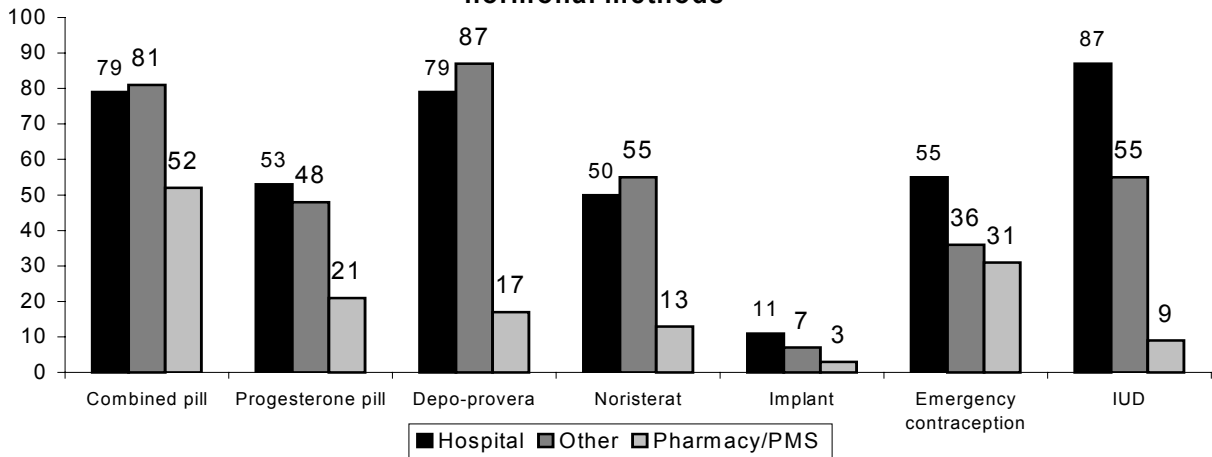


Figure 3.5 Percentage of family planning providers who provide barrier methods or counseling for natural methods

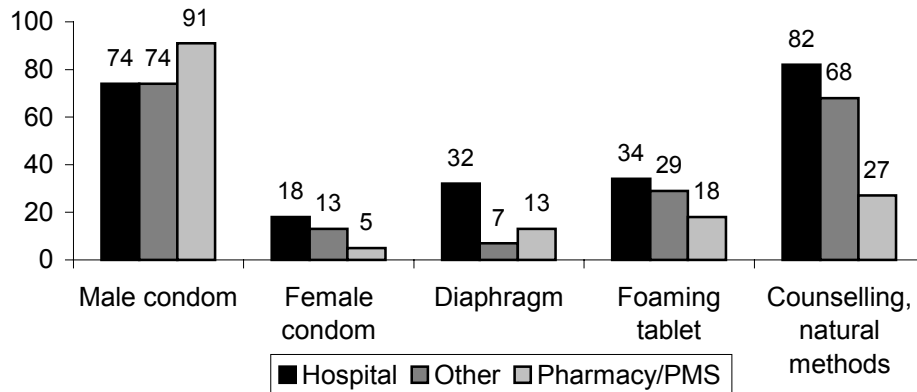


Figure 3.6 Percentage of facilities that provide specific FP methods that did not have that method in stock

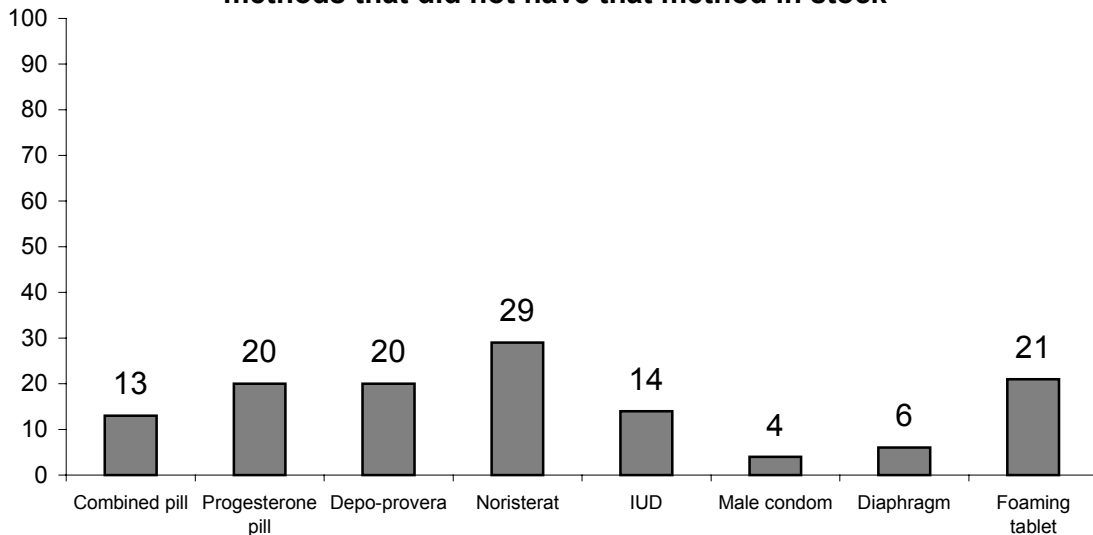


Figure 3.7 Percentage of facilities that have visual aids or books/pamphlets on family planning and STI/HIV/AIDS

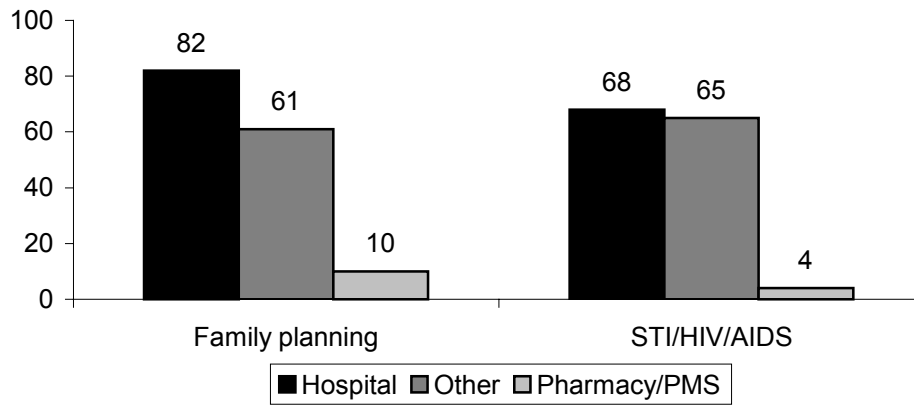


Figure 3.8 Percentage of facilities that have various items to provide family planning services

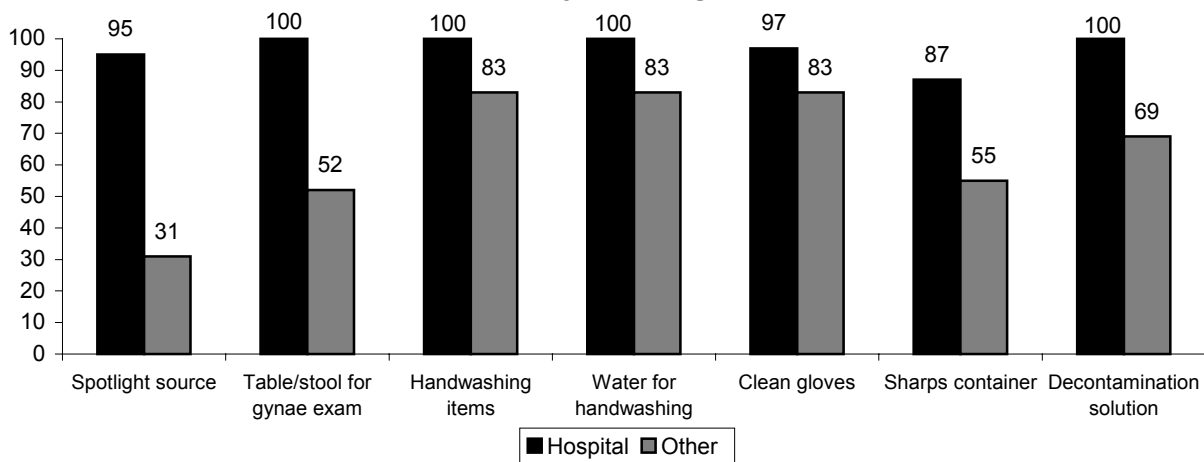


Figure 3.9 Percentage of facilities that maintain a register for family planning consultation and percent that maintain individual client records

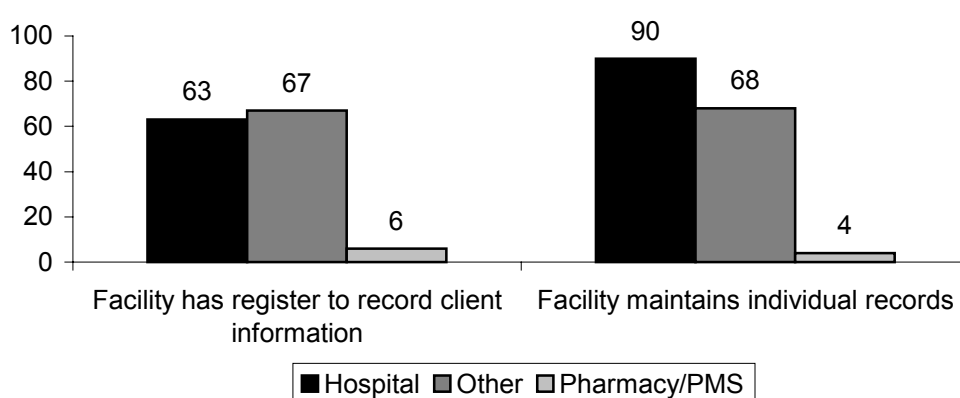
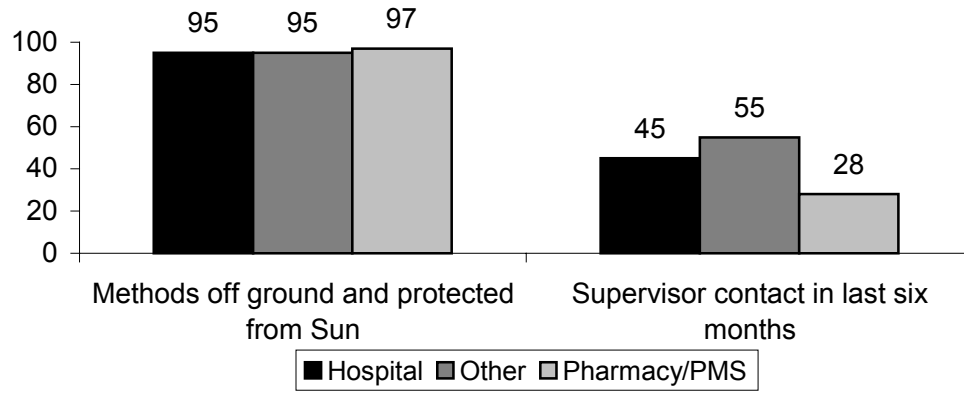


Figure 3.10 Percentage of facilities that store contraceptive methods correctly and percent that had supervisor contact



Chapter IV. STI and HIV/AIDS Services

This chapter presents information on the number and type of facilities that provide STI and HIV/AIDS services and/or commodities, availability of guidelines for diagnoses and treatment for STIs, record-keeping, types of STI tests conducted, VCT, confidentiality, consent and notification procedures, and supervision.

STI and HIV/AIDS Service Provision

Nearly 54% of all facilities, or 145 facilities, provide STI/HIV/AIDS services or commodities. Of the 145 facilities offering STI and HIV/AIDS services, 141 specifically offer STI services or commodities. About 30% of facilities that offer STI services are hospitals, 18% are “other” facilities (i.e., health centers or family planning clinics) and 52% are pharmacies or patent medicine stores (not shown).

Figure 4.1 shows the percentage of STI facilities that offered STI services/commodities on the day of the survey and the percentage that had visual aids or pamphlets for teaching about STIs/HIV/AIDS. A total of 63% of hospitals, 59% of pharmacies/PMS, and 28% of other facilities offered STI services/commodities on the day of the survey. A total of 72% of hospitals, 64% of other facilities, and 8% of pharmacies/PMS had visual aids or pamphlets for teaching about STIs/HIV/AIDS.

Availability of Guidelines for Diagnosis and Treatment

Figure 4.2 shows whether guidelines for diagnosing STIs/HIV are available in the counseling or service provision area. About 7 out of 10 hospitals and 6 out of 10 other facilities have clinical guidelines for diagnoses and treatment of STIs; 6 out of 10 hospitals and 3 out of 10 other facilities have guidelines for using the syndromic approach for STI diagnosis and treatment; 4 out of 10 hospitals and 1 out of 10 other facilities have guidelines for diagnosing HIV/AIDS; 1 out of 3 hospitals and 1 out of 10 other facilities have clinical guidelines for treating HIV/AIDS.

Figure 4.3 shows how diagnoses of STIs are made in the facility. Hospitals are more likely than FP clinics and health centers to make syndromic (44% vs. 32%) or etiologic (62% vs. 40%) diagnoses, whereas FP clinics and health centers are more likely to make clinical diagnoses of STIs (84% vs. 67%).

Tests for STIs and HIV/AIDS, TB, and VCT

Figure 4.4 shows the types of STI tests conducted in facilities. More than half of hospitals and 1 in 3 other facilities conduct syphilis tests or collect specimens to test for syphilis to send elsewhere; about 6 out of 10 hospitals and 4 out of 10 other facilities conduct gonorrhea tests or collect specimens to test for gonorrhea elsewhere; about half of hospitals and 1 in 3 other facilities conduct or collect specimens for the tuberculosis sputum test; 1 in 3 hospitals and 1 in 4 other facilities conduct or collect specimens for HIV/AIDS tests.

Figure 4.5 shows the percentage of facilities that offer VCT. About 1 in 5 facilities offer VCT, with 30% of hospitals and 8% of other facilities providing VCT.

Record-Keeping

Figure 4.6 shows the percentage of facilities that record STI consultation information: 61% of hospitals, 40% of other facilities, and 16% of pharmacies/PMS.

Confidentiality, Consent, and Notification Procedures

Figure 4.7 shows facilities that have confidentiality and informed consent protocols for STI/VCT/HIV testing. About 91% of hospitals and 76% of other facilities have confidentiality protocols. A total of 74% of hospitals and 60% of other facilities have informed consent protocols.

Figure 4.8 shows whether facilities have active or passive partner notification or follow-up. About 41% of facilities always contact partners or conduct follow-up, 25% sometimes contact partners or conduct follow-up, and 13% ask clients to inform or bring their partner in for testing/counseling. About 21% of facilities have no mechanism for partner notification.

Figure 4.9 shows the percentage of facilities that always contact partners or conduct follow-up and the percentage of facilities that submit reports to the Ministry of Health or a public health agency about STI cases diagnosed. About 35% of hospitals and 52% of other facilities always contact partners or conduct follow-

up. A total of 21% of hospitals and 32% of other facilities submit reports of STI cases to the Ministry of Health or to a public health agency.

Supervision

Figure 4.10 shows the percentage of facilities that had a supervisory contact in the six months prior to the survey. In 26% of hospitals, 24% of other facilities, and 21% of pharmacies/PMS, a supervisor had spoken to the provider or observed their work.

Figure 4.1 Percentage of facilities that offered STI services on the day of the survey & percent of facilities that have visual aids/pamphlets for teaching about STI/HIV

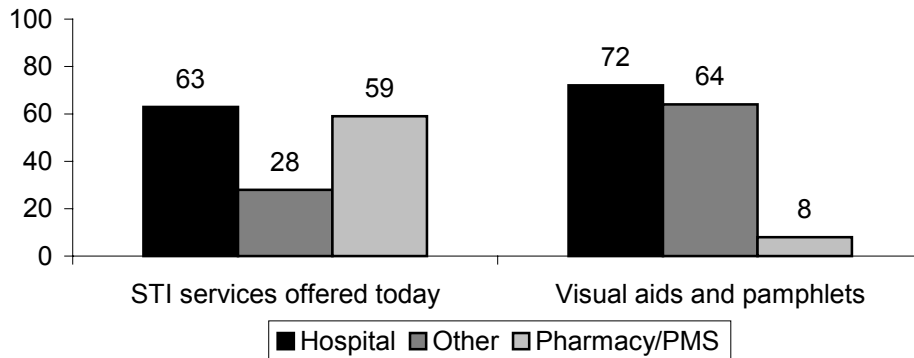


Figure 4.2 Percentage of facilities with guidelines for diagnosis and treatment STIs/HIV

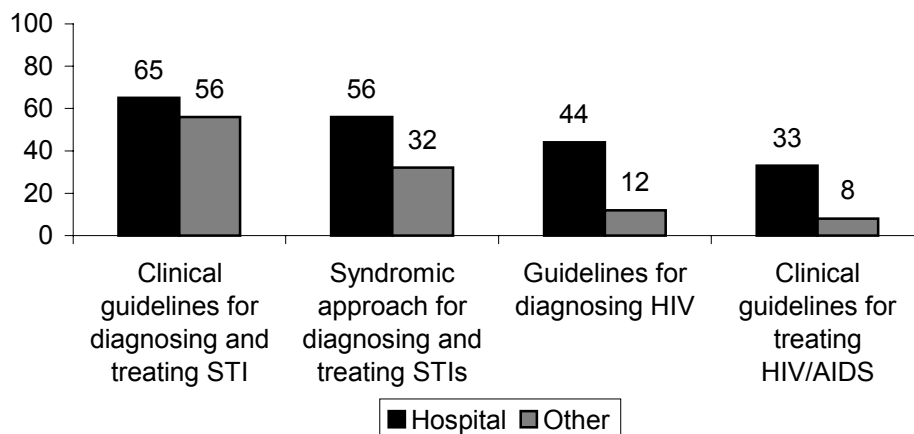


Figure 4.3 Percentage of facilities that diagnose STIs based on syndromic, etiologic, or clinical factors

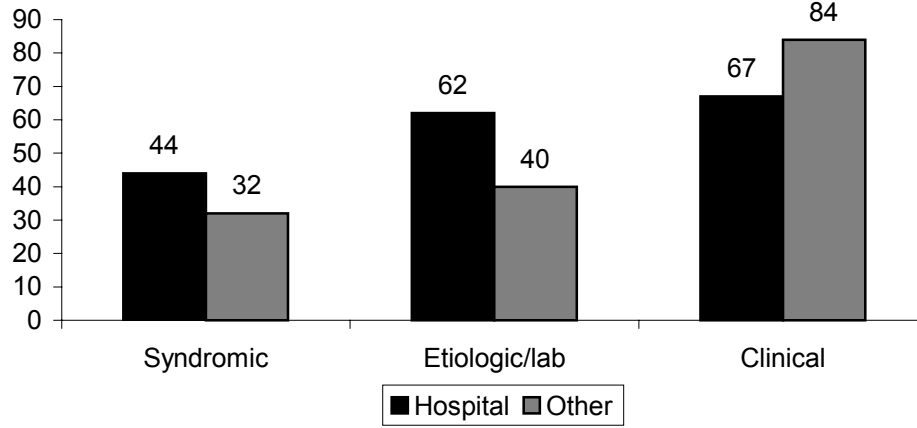


Figure 4.4 Percentage of facilities that conduct tests for various STIs and TB

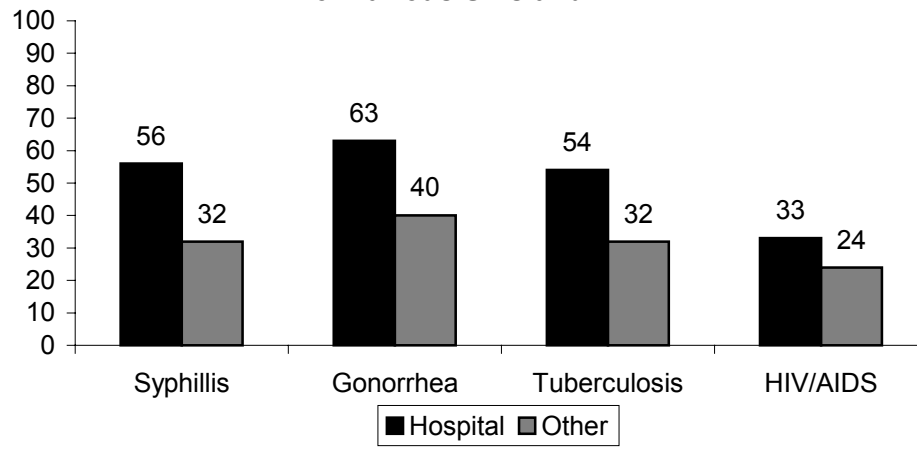


Figure 4.5 Percentage of facilities that offer VCT

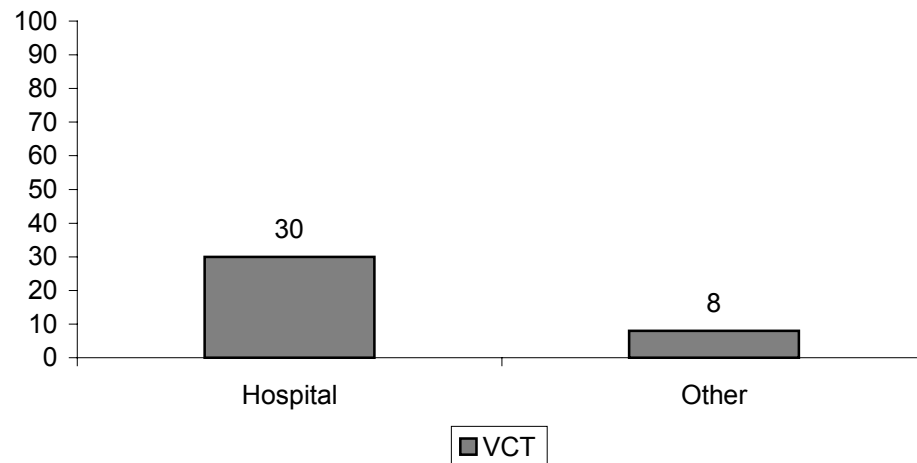


Figure 4.6 Percentage of facilities that have a register to record STI consultation information

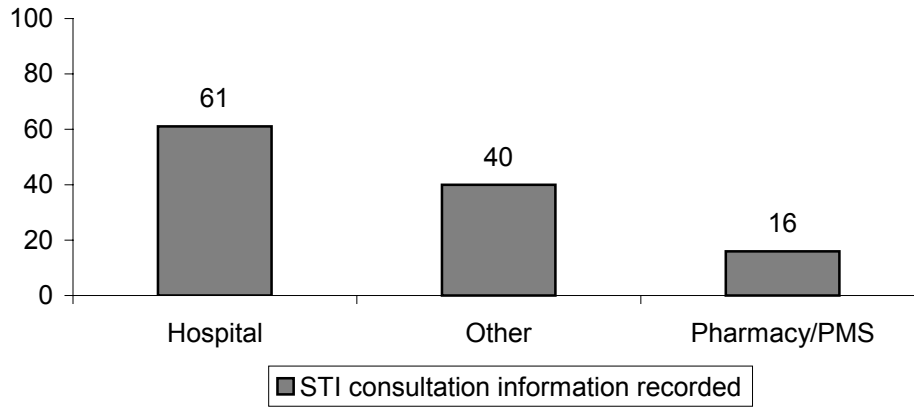


Figure 4.7 Percentage of facilities that have confidentiality & informed consent protocols for HIV/AIDS testing

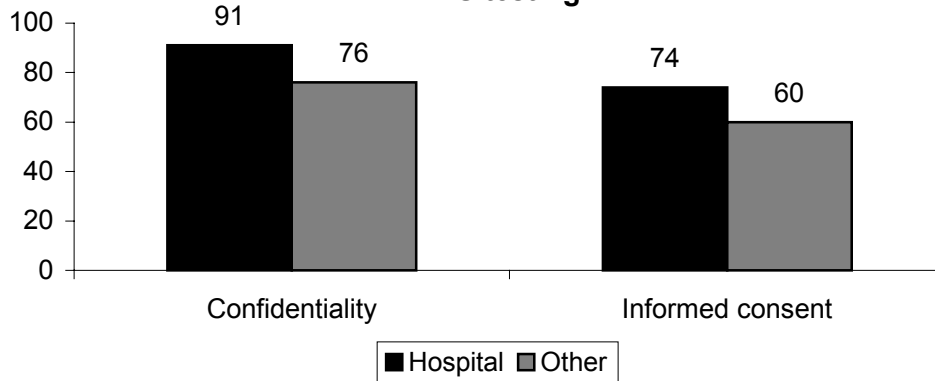


Figure 4.8 Percentage of facilities with active or passive partner notification or follow-up

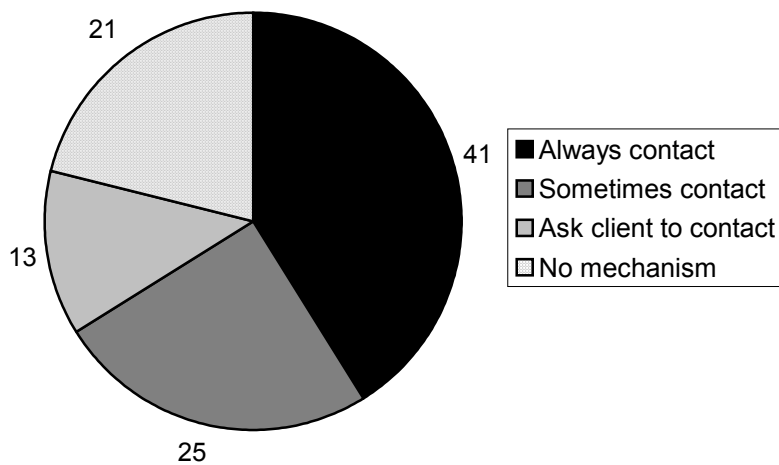


Figure 4.9 Percentage of facilities that always contact partners or follow up & percent that submit reports to MOH

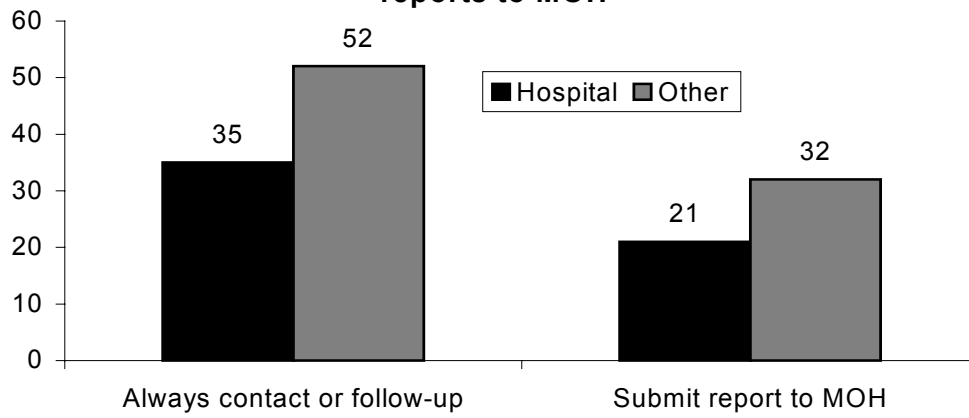
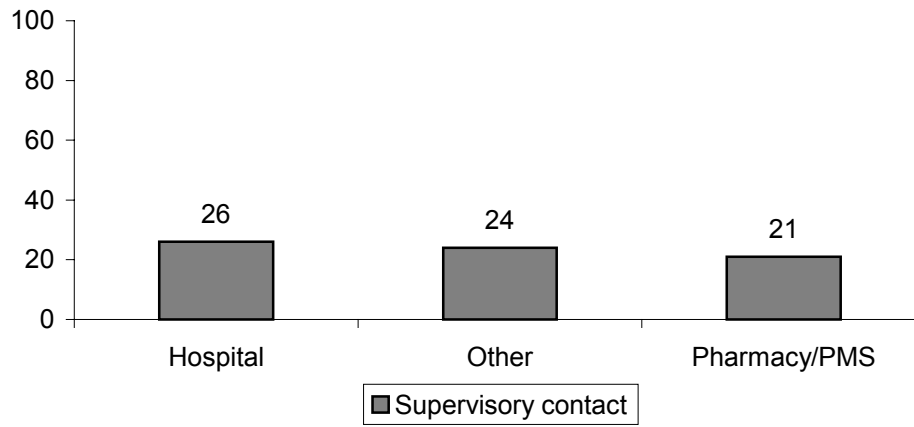


Figure 4.10 Percentage of facilities that had contact with a supervisor in the previous six months



Chapter V. Postabortion Care

This brief chapter presents information on facilities that provide PAC, availability of equipment and supplies for PAC, availability of protocols, and provision of FP and STI services to PAC clients.

Provision of PAC

About 1 in 5 facilities, or 57 facilities, provide PAC services. Thirty-five of these facilities are hospitals, 16 are “other” facilities (i.e., health centers or family planning clinics), and 6 are pharmacies/patent medicine stores (not shown).

Figure 5.1 shows the percentage of these facilities that were providing PAC services on the day of the survey and the percentage that maintain a register to record information on PAC clients who receive treatment. Slightly more than 4 in 10 facilities provide postabortion care services, and 4 in 10 facilities maintain a register on PAC clients.

Equipment and Supplies for PAC

Figure 5.2 shows the percentage of facilities providing PAC services that have equipment and supplies available for PAC. The majority of facilities have the equipment and supplies available for PAC. Nine out of 10 facilities have an examination couch, sponge holding forceps and Mackintosh; 8 out of 10 facilities have tenaculums, cervical dilators and dressing towels; 7 out of 10 facilities have manual vacuum aspiration kits, sharp curettes, and sterilizing drums.

Availability of Protocols and Guidelines

Figure 5.3 shows the percentage of facilities providing PAC services that have protocols and guidelines on PAC and the percentage that provide family planning services. About half of PAC facilities have protocols and guidelines on PAC.

Provision of FP and STI Services to PAC Clients

Most PAC facilities provide family planning counseling and contraceptive methods: 97% of facilities that provide PAC also provide family planning counseling and 86% provide contraceptive methods.

Figure 5.4 shows the percentage of facilities that provide various family planning methods to PAC clients. Most facilities provide the pill (79%), the injectable (74%), the male condom (72%), and the IUD (61%) to PAC clients.

Figure 5.5 shows the percentage of facilities that routinely treat STIs and the percentage that routinely offer counseling and testing for HIV/AIDS. About 83% of facilities that offer PAC services routinely treat STIs and 49% offer counseling and testing for HIV.

Supervision

A supervisor had spoken to the provider or observed him/her in the six months previous to the survey in a total of 23% of the facilities that provide PAC (not shown).

Figure 5.1 Percentage of PAC-providing facilities that provided PAC services on day of survey and percentage that maintain register on PAC clients

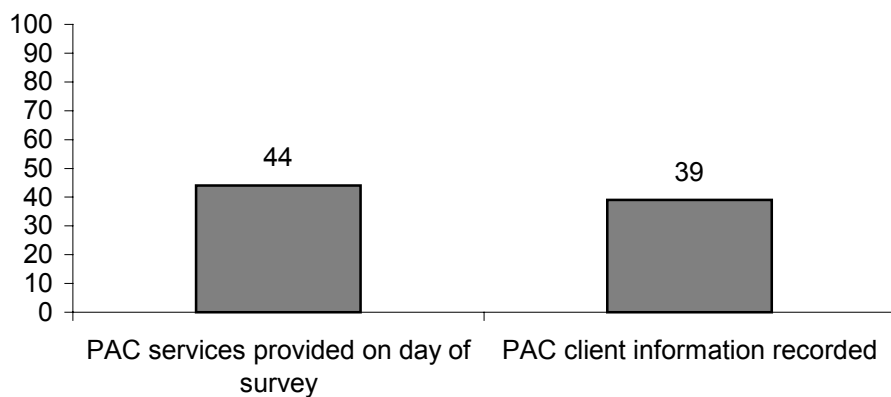


Figure 5.2 Percentage of facilities providing PAC services that have equipment and supplies available for postabortion care

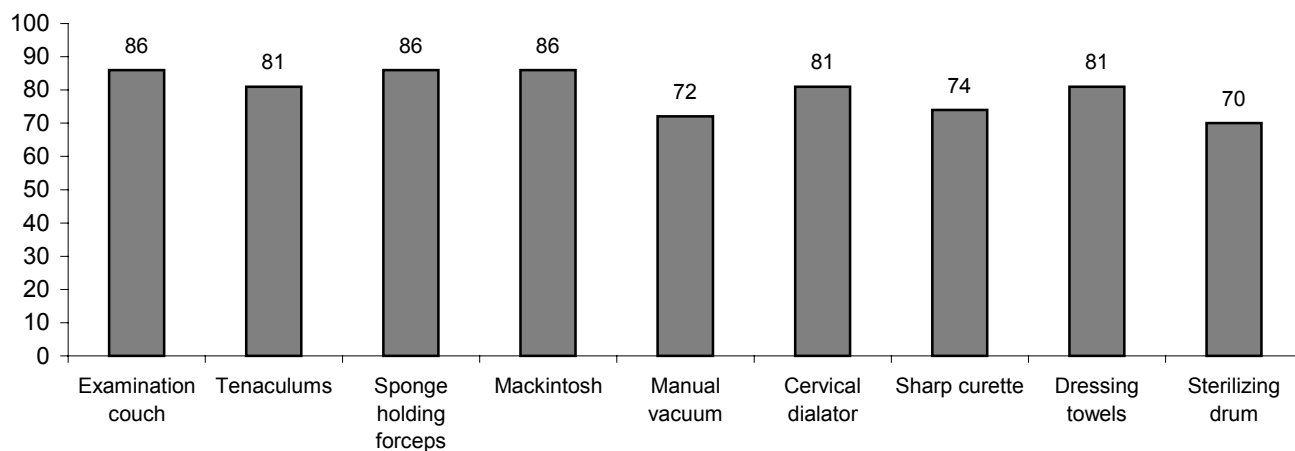


Figure 5.3 Percentage of facilities that have protocols and guidelines on PAC and percentage that provide FP counseling and contraceptive methods

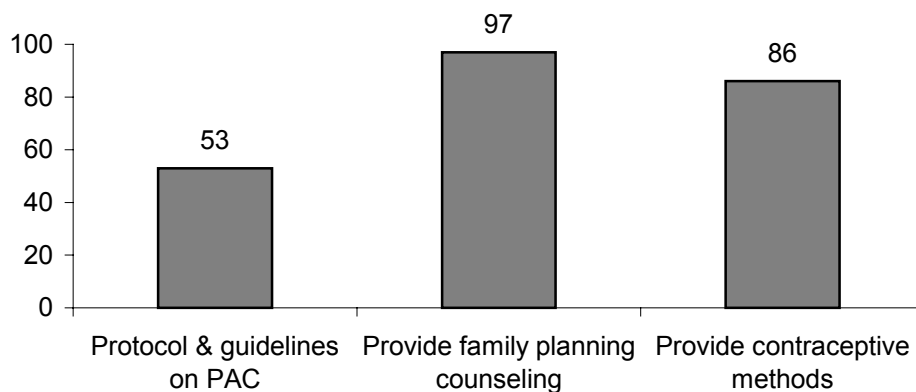


Figure 5.4 Percentage of facilities that provide various family planning methods to PAC clients

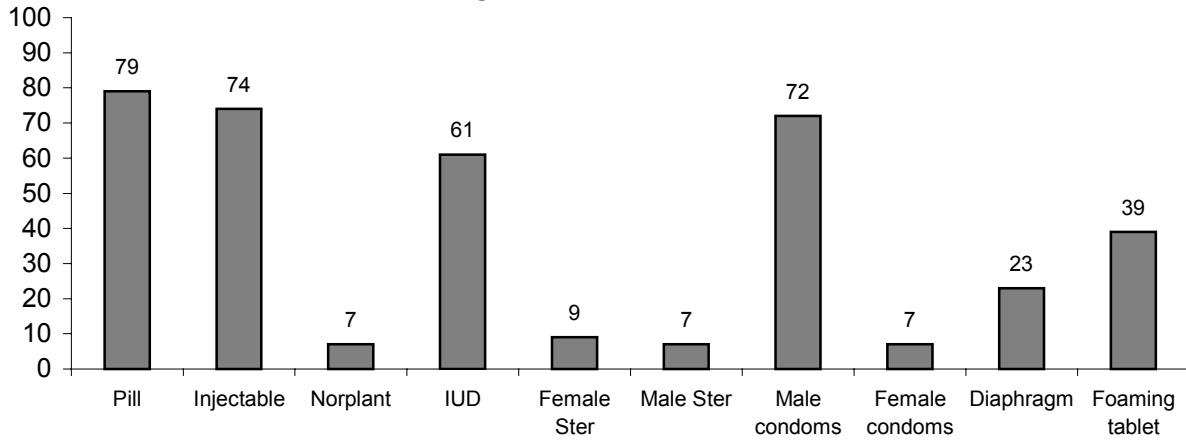
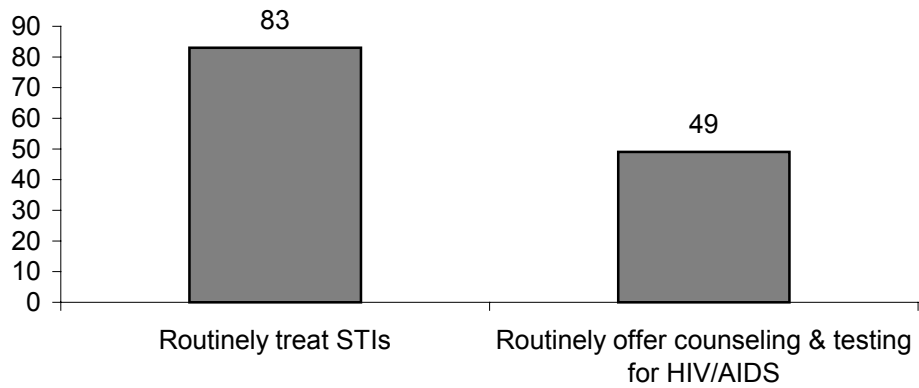


Figure 5.5 Percentage of facilities that routinely treat STIs and percentage that routinely offer counseling and testing for HIV/AIDS



References

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Appendix A – Facility Questionnaire

**MEASURE EVALUATION BASELINE SURVEY FOR VISION PROJECT 2002
FACILITY QUESTIONNAIRE**

IDENTIFICATION						[] [] []	
LOCAL GOVERNMENT AREA	Bauchi		Enugu		Oyo		[] []
	Alkaleri	1	Enugu East	6	Afjio	11	
	Bauchi	2	Enugu North	7	Ibadan S.W.	12	
	Giade	3	Igbo Efiti	8	Ibarapa East	13	
	Kirfi	4	Nkanu West	9	Ogbom. So.	14	
	Tafawa Balewa	5	Udenu	10	Orire	15	
COMMUNITY/WARD _____							
ENUMERATION AREA			[] [] []				
NAME OF FACILITY _____							
TYPE OF FACILITY						[] []	
PUBLIC SECTOR		PRIVATE SECTOR					
Teaching Hospital		1	Prvt. Hospital	6			
Govt. Hospital		2	Prvt. Health Center/Materntiy	7			
Govt. Health Center/Maternity		3	Prvt. FP Clinic	8			
FP Clinic		4	Prvt. Doctor	9			
Other Public		5	Pharmacy	10			
			PMS	11			
			Other Private	12			
LOCALITY OF FACILITY	Urban	1				[]	
	Peri-urban	2					
	Rural	3					

INTERVIEWER VISITS				
	1	2	3	FINAL VISIT
DATE	_____	_____	_____	DAY [] [] MONTH [] [] YEAR [] [] [] []
INTERVIEWER'S NAME	_____	_____	_____	NAME [] [] [] []
RESULT*	_____	_____	_____	RESULT [] []
NEXT VISIT: DATE	_____	_____		TOTAL NO. OF VISITS []
TIME	_____	_____		
RESULT CODES: 1 COMPLETED 4 REFUSED 7 OTHER _____ (SPECIFY) 2 NO ONE AVAILABLE 5 PARTLY COMPLETED 3 POSTPONED 6 INCAPACITATED				

SUPERVISOR	OFFICE EDITOR	KEYED BY
NAME _____ [] []	[] []	[] []
DATE _____ [] []	[] []	[] []

Facility Survey GPS Log

CHECKLIST

- TURN GARMIN ON
- WAIT UNTIL ACCURACY AT LEAST WITHIN 15 METERS (NO MORE THAN 15 METERS)
- PRESS *PAGE* BUTTON UNTIL YOU REACH *MENU* SCREEN AND SELECT **MARK**
- SAVE WAYPOINT
- RECORD ALTITUDE
- COPY WAYPOINT POSITION FROM THE *WAYPOINT* PAGE
- PRESS *PAGE* BUTTON TO REACH *MENU* SCREEN AND SELECT *WAYPOINT*
- VERIFY THAT COORDINATE IS LISTED
- TURN UNIT OFF

POSITION			
GPS UNIT NUMBER.....			[][][]
WAYPOINT NUMBER			[][][]
ALTITUDE (ELEV)			[][][][][][]
LATITUDE (N/S)	N/S/W/E	DEGREES	DECIMAL DEGREES
	[]	[][]	[][][][][]
LONGITUDE (W/E)	[]	[][][]	[][][][][][]

Consent and Type of Services Provided at Facility

NO.	QUESTIONS AND FILTERS	CODE CLASIFICATION	SKIIP																														
100A	<p>FIND THE MANAGER OR MOST SENIOR HEALTH WORKER RESPONSIBLE FOR OUTPATIENT SERVICES WHO IS PRESENT AT THE FACILITY. FOR PMS/PHARMACY, FIND THE MOST SENIOR STAFF RESPONSIBLE FOR PROVIDING SERVICES. READ THE FOLLOWING GREETING:</p> <p>Hello. I am working with the Centre for Research, Evaluation Resources and Development on a MEASURE <i>Evaluation</i> Project. We are carrying out a survey of health facilities that provide reproductive health services with the goal of finding ways to improve service delivery. We would be interested in talking to you about this facility and your experiences in providing health services. Please be assured that the information is completely confidential. The interview will not take much of your time. We are asking for your help to ensure that the information collected is accurate. If there are sections where someone else is the most appropriate person to provide information, we would appreciate your introducing us to that person. You may choose to stop the interview at any time.</p> <p>Do you have any questions for me? Do I have your agreement to participate?</p> <p style="text-align: center;">_____ INTERVIEWER'S SIGNATURE (Indicates respondent's willingness to participate)</p> <p style="text-align: center;">_____ DATE</p>																																
100B	May I begin the interview?	YES 1 NO 2	→ STOP																														
100C	RECORD THE TIME (START OF INTERVIEW)	HOUR..... [][] MINUTES [][]																															
101A-C	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">A) Does this facility provide any of the following services or commodities?</td> <td style="width: 33%;">B) Do you (manager) personally provide SERVICE?</td> <td style="width: 33%;">C) Which of the remaining services are provided by others?</td> </tr> <tr> <td> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td></td> <td style="text-align: center;">YES</td> <td style="text-align: center;">NO</td> </tr> <tr> <td>1) Family Planning</td> <td style="text-align: center;">1->B</td> <td style="text-align: center;">2</td> </tr> <tr> <td>2) STI/HIV/AIDS</td> <td style="text-align: center;">1->B</td> <td style="text-align: center;">2</td> </tr> <tr> <td>3) Postabortion Care</td> <td style="text-align: center;">1->B</td> <td style="text-align: center;">2</td> </tr> </table> </td> <td> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>1) Family Planning</td> <td style="text-align: center;">205</td> </tr> <tr> <td>2) STI/HIV/AIDS</td> <td style="text-align: center;">305</td> </tr> <tr> <td>3) Postabortion Care</td> <td style="text-align: center;">405</td> </tr> </table> </td> <td> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>1) Family Planning</td> <td style="text-align: center;">200A</td> </tr> <tr> <td>2) STI/HIV/AIDS</td> <td style="text-align: center;">300A</td> </tr> <tr> <td>3) Postabortion Care</td> <td style="text-align: center;">400A</td> </tr> </table> </td> </tr> </table>	A) Does this facility provide any of the following services or commodities?	B) Do you (manager) personally provide SERVICE?	C) Which of the remaining services are provided by others ?	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td></td> <td style="text-align: center;">YES</td> <td style="text-align: center;">NO</td> </tr> <tr> <td>1) Family Planning</td> <td style="text-align: center;">1->B</td> <td style="text-align: center;">2</td> </tr> <tr> <td>2) STI/HIV/AIDS</td> <td style="text-align: center;">1->B</td> <td style="text-align: center;">2</td> </tr> <tr> <td>3) Postabortion Care</td> <td style="text-align: center;">1->B</td> <td style="text-align: center;">2</td> </tr> </table>		YES	NO	1) Family Planning	1->B	2	2) STI/HIV/AIDS	1->B	2	3) Postabortion Care	1->B	2	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>1) Family Planning</td> <td style="text-align: center;">205</td> </tr> <tr> <td>2) STI/HIV/AIDS</td> <td style="text-align: center;">305</td> </tr> <tr> <td>3) Postabortion Care</td> <td style="text-align: center;">405</td> </tr> </table>	1) Family Planning	205	2) STI/HIV/AIDS	305	3) Postabortion Care	405	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>1) Family Planning</td> <td style="text-align: center;">200A</td> </tr> <tr> <td>2) STI/HIV/AIDS</td> <td style="text-align: center;">300A</td> </tr> <tr> <td>3) Postabortion Care</td> <td style="text-align: center;">400A</td> </tr> </table>	1) Family Planning	200A	2) STI/HIV/AIDS	300A	3) Postabortion Care	400A		
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<p>FIRST COMPLETE ALL SECTIONS CIRCLED FOR MANAGER, THEN COMPLETE ANY OTHER SECTIONS THAT ARE CIRCLED. IF PMS/PHARMACY, SKIP TO Q107</p>			<p>PMS/PHARMACY → 107</p>																														

Section 1. General Information

NO.	QUESTIONS AND FILTERS	CODE CLASIFICATION	SKIIP
102	Routinely, how many days each week is the facility open?	NUMBER OF DAYS <input style="width: 20px; height: 20px;" type="text"/> DON'T KNOW..... 8	
103	What time is the facility scheduled to open and close? USE MILITARY TIME TO COMPLETE THE TIMES. IF OPEN 24 HOURS, RECORD 24:00 IN OPEN.	OPEN: <input style="width: 20px; height: 20px;" type="text"/> : <input style="width: 20px; height: 20px;" type="text"/> CLOSE: <input style="width: 20px; height: 20px;" type="text"/> : <input style="width: 20px; height: 20px;" type="text"/>	
104	In what year did this facility open?	YEAR OPENED <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> YEARS OLD <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> DON'T KNOW..... 9998	
105A-J	Now I have some questions about the staff who provide services . How many regular staff of each type does this facility have?		
	QUALIFICATION	TOTAL NUMBER	
	A) PHYSICIANS/SPECIALISTS (E.G., OB/GYN)	PHYSICIAN <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	
	B) NURSE/MIDWIFE	NURSE/MIDWIFE <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	
	C) NURSES	NURSE <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	
	D) MIDWIVES	MIDWIFE <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	
	E) AUXILLIARY NURSES	AUX NURSE <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	
	F) COMMUNITY HEALTH OFFICER (CHO)	CHO <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	
	G) COMMUNITY HEALTH EXTENSION WORKER (CHEW)	CHEW <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	
	H) PHARMACIST	PHARMACIST <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	
	I) PMS VENDOR	PMS VENDOR <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	
	J) OTHER(S) _____ (SPECIFY)	OTHER <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	
106A	SUM THE NUMBER OF STAFF REPORTED IN 105A-J AND ENTER TOTAL.	TOTAL..... <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	
106B	CHECK 106A: Just to make sure that I have this right: you have in TOTAL _____ Staff working at this facility who provide services. Is that correct? YES <input style="width: 20px; height: 20px;" type="checkbox"/> NO <input style="width: 20px; height: 20px;" type="checkbox"/> → PROBE AND CORRECT 105A-J AS NECESSARY.		

NO.	QUESTIONS AND FILTERS	CODE CLASIFICATION	SKIP																		
	ALL RESPONDENTS																				
107	Do you have an estimate of the size of the population living in the area served by this facility? IF YES: How many people is that?	CATCHMENT POPULATION <table border="1" style="margin-left: auto; margin-right: auto;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> NO CATCHMENT AREA..... 99995 DON'T KNOW 99998																			
	IF PMS/PHARMACY, SKIP TO Q136		PMS/PHAR MACY→136																		
108	Does this facility routinely admit inpatients for treatment?	YES 1 NO 2	→110																		
109	Does this facility have beds for overnight observation?	YES 1 NO 2																			
110	Does this facility have a formal system for reviewing management or administrative issues?	YES 1 NO 2 DON'T KNOW 8	→113A →113A																		
111	How often do formal meetings to discuss the facility management/administrative issues take place?	WEEKLY 1 MONTHLY 2 QUARTERLY 3 SEMI-ANNUALLY 4 OTHER 5 (SPECIFY)																			
112	Is an official record of meetings maintained? IF YES, ASK TO SEE SOME RECORD (MINUTES/NOTES) FROM THE MOST RECENT MEETING	YES, RECORD OBSERVED 1 YES, NOT SEEN 2 NO RECORD MAINTAINED 3																			
113A	Are there any ROUTINE meetings about facility activities or management issues that include both facility managers and service providers?	YES 1 NO 2 DON'T KNOW 8																			
113B	Are there any ROUTINE meetings about facility activities or management issues that include both facility managers and community members?	YES 1 NO 2 DON'T KNOW 8																			
114A	Does this facility have any system for determining client opinion about the health facility or services?	YES 1 NO 2 DON'T KNOW 8	→117A →117A																		
114B	Which of the following systems does the facility have for determining client opinion? 1) Suggestions box 2) Client survey form 3) Client interview 4) Other system	<table border="1" style="margin-left: auto; margin-right: auto;"><thead><tr><th></th><th>YES</th><th>NO</th></tr></thead><tbody><tr><td>1) SUGGESTION BOX</td><td>1</td><td>2</td></tr><tr><td>2) CLIENT SURVEY FORM</td><td>1</td><td>2</td></tr><tr><td>3) CLIENT INTERVIEW</td><td>1</td><td>2</td></tr><tr><td>4) OTHER</td><td>1</td><td>2</td></tr></tbody></table>		YES	NO	1) SUGGESTION BOX	1	2	2) CLIENT SURVEY FORM	1	2	3) CLIENT INTERVIEW	1	2	4) OTHER	1	2				
	YES	NO																			
1) SUGGESTION BOX	1	2																			
2) CLIENT SURVEY FORM	1	2																			
3) CLIENT INTERVIEW	1	2																			
4) OTHER	1	2																			
115	Is there a procedure for reporting on client opinion?	YES 1 NO 2																			
116	In the past 3 months have any changes been made in the program as a result of client opinion? IF YES, DESCRIBE THE CHANGES MADE.	YES _____ (SPECIFY) 1 NO 2 DON'T KNOW 8																			
117A	Does this facility have an outreach program, that is a program where facility staff visit communities/wards on a regular basis to provide services?	YES 1 NO 2 DON'T KNOW 8	→ 118A → 118A																		
117B	Which of the following services are included in your outreach program? READ THE POSSIBLE RESPONSES.	<table border="1" style="margin-left: auto; margin-right: auto;"><thead><tr><th></th><th>YES</th><th>NO</th></tr></thead><tbody><tr><td>1)SCHOOL HEALTH PROGRAM</td><td>1</td><td>2</td></tr><tr><td>2)FP COUNSELING/PROVISION</td><td>1</td><td>2</td></tr><tr><td>3) STI/HIV/AIDS PREVENTION</td><td>1</td><td>2</td></tr><tr><td>4) IMMUNIZATION</td><td>1</td><td>2</td></tr><tr><td>5) OTHER _____ (SPECIFY)</td><td>1</td><td>2</td></tr></tbody></table>		YES	NO	1)SCHOOL HEALTH PROGRAM	1	2	2)FP COUNSELING/PROVISION	1	2	3) STI/HIV/AIDS PREVENTION	1	2	4) IMMUNIZATION	1	2	5) OTHER _____ (SPECIFY)	1	2	
	YES	NO																			
1)SCHOOL HEALTH PROGRAM	1	2																			
2)FP COUNSELING/PROVISION	1	2																			
3) STI/HIV/AIDS PREVENTION	1	2																			
4) IMMUNIZATION	1	2																			
5) OTHER _____ (SPECIFY)	1	2																			

NO.	QUESTIONS AND FILTERS	CODE CLASIFICATION	SKIP
118A	Does this facility have a formal relationship with traditional birth attendants (TBAs) in which training or other types of support are provided to the TBAs?	YES 1 NO 2 DON'T KNOW 3	→119A →119A
118B	Is there any documentation available on the TBA program, e.g. lists of affiliated TBAs or TBA training records?	YES, DOCUMENT SEEN 1 YES, DOCUMENT NOT SEEN 2 NO DOCUMENTATION 3	
119A	When was the last time a supervisor from OUTSIDE this facility visited the facility?	WITHIN THE LAST 6 MONTHS 1 MORE THAN 6 MONTHS AGO 2 NEVER SUPERVISED FROM OUTSIDE FACILITY 3	→120 →120
119B	The last time that a supervisor from outside the facility visited, did the supervisor: 1) Check some registers/books? 2) Discuss problems? 3) Discuss policy/administrative issues? 4) Discuss technical protocols/practices/issues? 5) Hold an official staff meeting? 6) Observe individual staff providing services? 7) Meet with staff individually? 8) Do anything else?	1) CHECKED REGISTERS 1 2) DISCUSSED PROBLEMS 1 3) DISCUSSED POLICY 1 4) DISCUSSED TECHNICAL MATTERS 1 5) HELD STAFF MEETING 1 6) OBSERVE SERVICE PROVISION 1 7) MEET WITH STAFF INDIVIDUALLY 1 8) OTHER _____ (SPECIFY)	YES NO 2 2 2 2 2 2 2 2 2 2 2 2 2 2
120	Does this facility have an ongoing supervision plan?	YES 1 NO 2 DON'T KNOW 8	
121A	Is there a standard form used for clients referred to other facilities?	YES 1 NO FORM USED 2 REFERRAL FACILITY 4 DON'T KNOW 8	→122 →122 →122
121b	Does the referral form have a section requiring client information explaining the reason for the referral?	YES 1 NO 2 DON'T KNOW 8	
122	How often does this facility have electricity? Always, often, sometimes, or never?	ALWAYS 1 OFTEN 2 SOMETIMES 3 NEVER 4	
123	Does this facility have a working generator and fuel for it?	YES 1 NO 2 DON'T KNOW 8	
124	What is the most commonly used source of water for the facility at this time?	TAP 1 PROTECTED WELL/BOREHOLE 2 UNPROTECTED WELL 3 RIVER/LAKE /POND 4 WATER VENDOR/TANKARD 5 OTHER _____ (SPECIFY) 6 NO WATER SOURCE 0	
125	Is this water source available on-site?	YES, ON-SITE 1 NO 2	
126	Does the normal source of water for this facility vary seasonally?	YES 1 NO 2 NO NORMAL SOURCE 3	
127	Is there a waiting area for clients, where they are protected from sun and rain?	YES 1 NO 2	
128	Is there a toilet (latrine) in functioning condition that is available for use by clients?	YES 1 NO 2	
129	Does this facility have a working phone or short-wave radio?	YES 1 NO 2	→131

NO.	QUESTIONS AND FILTERS	CODE CLASIFICATION	SKIP
130	Is there a phone or short-wave radio within five minutes time from the facility that staff can use in an emergency? IF YES: Is that phone or short-wave radio available 24 hours a day?	YES, AVAILABLE 24 HOURS 1 YES, NOT AVAILABLE 24 HOURS 2 NO, NONE WITHIN 5 MINUTES..... 3	
131	Now I would like to ask you some questions about the infection prevention procedures that this facility follows. What is the method most commonly used for sterilizing syringes and needles?	DRY HEAT STERILIZATION 1 AUTOCLAVE..... 2 STEAM STERILIZATION 3 BOILING 4 CHEMICAL 5 OTHER 6 USE DISPOSABLES ONLY 0	
132	What is the most commonly used method for sterilizing other medical equipment (e.g., surgical instruments)?	DRY HEAT STERILIZATION 1 AUTOCLAVE..... 2 STEAM STERILIZATION 3 BOILING 4 CHEMICAL 5 OTHER 6 (SPECIFY) NONE 7	
133	How does this facility dispose of potentially contaminated waste and items that are not reused (e.g. bandages, syringes)?	BURNED IN INCINERATOR 1 BURNED IN OPEN PIT 2 BURNED AND BURIED 3 THROW IN TRASH/OPEN PIT 4 THROW IN PIT LATRINE 5 OTHER 6	
134	INTERVIEWER: ASK TO SEE PLACE USED FOR WASTE DISPOSAL	WASTE VISIBLE, <u>NOT</u> PROTECTED 1 WASTE VISIBLE, PROTECTED 2 NO WASTE VISIBLE 3 WASTE SITE NOT INSPECTED 8	
135	ASSESS GENERAL CLEANLINESS OF FACILITY -A FACILITY IS CLEAN IF THE FLOORS ARE SWEEPED, COUNTERS/TABLES ARE WIPED AND FREE FROM OBVIOUS DIRT OR WASTE.	FACILITY CLEAN..... 1 FACILITY NOT CLEAN 2	
ALL RESPONDENTS MUST ANSWER THE REMAINING QUESTIONS BELOW IN THIS SECTION			
136	Now, I'd like to ask you some questions concerning your training and experience. In what year did you start working at this facility?	YEAR..... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
137	How many years in total of primary and secondary education did you complete?	YEARS..... <input type="text"/> <input type="text"/>	
138	What is your current technical qualification	PHYSICIAN/SPECIALIST 1 NURSE/MIDWIFE 2 NURSE 3 MIDWIFE 4 AUXILLIARY NURSE..... 5 CHEW 6 CHO..... 7 PHARMACIST..... 8 OTHER 96 (SPECIFY)	
139	What year did you graduate with this qualification?	YEAR..... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> NO YEAR OF GRADUATION/NA.....9998	

NO.	QUESTIONS AND FILTERS	CODE CLASIFICACION	SKIP
140	<p>Now, I would like to ask you what you think is the most important issue which you feel need to be addressed for you to improve your work?</p> <p>DO NOT READ LIST. CIRCLE ONLY ONE RESPONSE FOR THE MOST IMPORTANT ISSUE.</p>	<ul style="list-style-type: none"> a) MORE STAFF1 b) TREAT STAFF BETTER.....2 c) PAY BETTER3 d) MORE TRAININGD.....4 e) MORE FEEDBACK ON STAFF PERFORMANCEE.....5 f) MORE/BETTER EQUIPMENT OR SUPPLIES.....6 g) EMERGENCY TRANSPORT FOR PATIENTS7 h) BETTER PHYSICAL ENVIRONMENT.....8 i) BETTER SECURITY.....9 j) OTHER.....96 <p style="text-align: center;">(SPECIFY)</p>	
GO TO Q101			→101

Section 2. Family Planning Services

NO.	QUESTIONS AND FILTERS	CODE CLASIFICATION	SKIP																																																						
200A	<p>INTRODUCE YOURSELF AS FOLLOWS.</p> <p>Hello. I am representing working with the Centre on Research, Evaluation Resources and Development on a MEASURE <i>Evaluation</i> Project. We are carrying out a survey of health facilities that provide reproductive health services with the goal of finding ways to improve service delivery. We would be interested in talking to you about this facility and your experiences in providing health services. This section should take between 10 – 15 minutes to complete. Please be assured that the information is completely confidential. You may choose to stop the interview at any time.</p> <p>Do you have any questions for me? Do I have your agreement to participate?</p> <p style="text-align: center;">_____ INTERVIEWER'S SIGNATURE (Indicates respondent's willingness to participate)</p> <p style="text-align: center;">_____ DATE</p>																																																								
200B	May I begin the interview?	YES1 NO2	→ STOP																																																						
201	In what year did you start working at this facility?	YEAR..... <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>																																																							
202	How many years in total of primary and secondary education did you complete?	YEARS..... <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>																																																							
203	What is your current technical qualification?	PHYSICIAN/SPECIALIST 1 NURSE/MIDWIFE 2 NURSE 3 MIDWIFE 4 AUXILLIARY NURSE 5 CHEW 6 CHO 7 PHARMACIST 8 OTHER 96 <p style="text-align: center;">(SPECIFY)</p>																																																							
204	What year did you graduate with this qualification?	YEAR <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>																																																							
ALL RESPONDENTS																																																									
205	For how many years in total have you provided family planning services or products? (May be from another facility) IF LESS THAN ONE YEAR, RECORD "00".	YEARS..... <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>																																																							
206A-B	<p>ASK THE FOLLOWING QUESTION FOR EACH SPECIFIC SUBJECT: Have you ever received any in-service training in (SUBJECT)? IF YES, Did you receive this training in the last 12 months?</p> <p>1) Family planning counseling? 2) IUD insertion? 3) Mini-laporotomy? 4) No-scalpel vasectomy? 5) Implants (e.g., Norplant)? 6) STI Syndromic Management? 7) Other, STI diagnosis and treatment? 8) Postabortion Care (PAC)? 9) Other _____ ? (SPECIFY)</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2"></th> <th colspan="2">206A. EVER TRAINED</th> <th colspan="2">206B. LAST 12 MONTHS</th> </tr> <tr> <th>YES</th> <th>NO</th> <th>YES</th> <th>NO</th> </tr> </thead> <tbody> <tr> <td>1) FP COUNS</td> <td>1</td> <td>2</td> <td>1</td> <td>2</td> </tr> <tr> <td>2) IUD</td> <td>1</td> <td>2</td> <td>1</td> <td>2</td> </tr> <tr> <td>3) MINI-LAP</td> <td>1</td> <td>2</td> <td>1</td> <td>2</td> </tr> <tr> <td>4) NSV</td> <td>1</td> <td>2</td> <td>1</td> <td>2</td> </tr> <tr> <td>5) IMPLANT</td> <td>1</td> <td>2</td> <td>1</td> <td>2</td> </tr> <tr> <td>6) STI SYND</td> <td>1</td> <td>2</td> <td>1</td> <td>2</td> </tr> <tr> <td>7) OTHER STI</td> <td>1</td> <td>2</td> <td>1</td> <td>2</td> </tr> <tr> <td>8) PAC</td> <td>1</td> <td>2</td> <td>1</td> <td>2</td> </tr> <tr> <td>9) OTHER</td> <td>1</td> <td>2</td> <td>1</td> <td>2</td> </tr> </tbody> </table>		206A. EVER TRAINED		206B. LAST 12 MONTHS		YES	NO	YES	NO	1) FP COUNS	1	2	1	2	2) IUD	1	2	1	2	3) MINI-LAP	1	2	1	2	4) NSV	1	2	1	2	5) IMPLANT	1	2	1	2	6) STI SYND	1	2	1	2	7) OTHER STI	1	2	1	2	8) PAC	1	2	1	2	9) OTHER	1	2	1	2	
	206A. EVER TRAINED			206B. LAST 12 MONTHS																																																					
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8) PAC	1	2	1	2																																																					
9) OTHER	1	2	1	2																																																					
207	How many days in a week are family planning services or products provided at this facility?	# DAYS <input style="width: 20px; height: 20px;" type="text"/>																																																							
208	Are family planning services or products being provided today?	YES1 NO2																																																							

NO.	QUESTIONS AND FILTERS	CODE CLASSIFICATION			209B) Is this method in stock?		SKIP
		YES	NO	DON'T KNOW	YES	NO	
209A-B	Which of the following methods of contraception are provided at this facility?						
	1) Combined oral pill	1→B	2	8	1	2	
	2) Progesterone only pill	1→B	2	8	1	2	
	3) IUD/Coil	1→B	2	8	1	2	
	4) Injectable Depo Provera (1 every 3 months)	1→B	2	8	1	2	
	5) Injectable Noristerat (1 every 2 months)	1→B	2	8	1	2	
	6) Implant (e.g., Norplant)	1→B	2	8	1	2	
	7) Diaphragm/cap	1→B	2	8	1	2	
	8) Male condom	1→B	2	8	1	2	
	9) Female condom	1→B	2	8	1	2	
	10) Foaming tablets/spermicides	1→B	2	8	1	2	
	11) Emergency Contraception (e.g., after sex pill)	1→B	2	8	1	2	
	12) Counseling about natural family planning	1	2	8			
IF 209A.8 IS NO, GO TO 211							IF 209A.8 IS NO → 211
210A-B	Now I would like to ask you about the brand of condoms that this facility provides.				210B) Is this BRAND in stock?		
	Which of the following condom brands are available at this facility?	YES	NO	DON'T KNOW	YES	NO	
	1) COOL	1→B	2	8	1	2	
	2) GOLD CIRCLE	1→B	2	8	1	2	
	3) TWIN LOTUS	1→B	2	8	1	2	
	4) ROUGH RIDER	1→B	2	8	1	2	
	5) DUREX	1→B	2	8	1	2	
	6) ROMANTIC	1→B	2	8	1	2	
	7) EXOTICA	1→B	2	8	1	2	
	8) INTIMATE	1→B	2	8	1	2	
	9) NO LOGO	1→B	2	8	1	2	
	10) OTHER (SPECIFY)	1→B	2	8	1	2	
211	Are the contraceptive methods <u>off the floor</u> and protected from water?	YES 1 NO 2 DON'T KNOW 8					
212	Are the methods protected from the sun?	YES 1 NO 2 DON'T KNOW 8					
IF PMS/PHARMACY, SKIP TO Q215A							PMS/PHARMACY → 215A
213	Does this facility have a ROUTINE system for taking physical measurements for FP clients prior to the consultation (e.g., weight and blood pressure)?	YES 1 NO 2 DON'T KNOW 8					
214	ASK TO SEE WHERE COUNSELING FOR FAMILY PLANNING IS PROVIDED AND INDICATE THE SETTING.	PRIVATE ROOM 1 ROOM WITH OTHER PEOPLE W/ SEPARATING BARRIER 2 ROOM WITH OTHER PEOPLE AND NO VISUAL BARRIER 3					
ALL RESPONDENTS							
215A	Are any of the following visual aids for teaching available in the counseling or service provision area ?	YES	NO	DON'T KNOW			
	1) Different family planning methods	1	2	8			
	2) Visual aids for teaching about STIs	1	2	8			
	3) Visual aids for teaching about HIV/AIDS	1	2	8			
	4) Model for demonstrating use of condom	1	2	8			
	5) Posters on family planning	1	2	8			
	6) Visual aids for teaching about breast cancer exams	1	2	8			

NO.	QUESTIONS AND FILTERS	CODE CLASIFICATION			SKIP
		YES	NO	DON'T KNOW	
215B	Are any of the following information booklets/pamphlets available for clients to take home?				
	a) On family planning?	1	2	8	
	b) On STIs?	1	2	8	
	c) On HIV/AIDS?	1	2	8	
	d) On breast cancer?	1	2	8	
	e) On cervical cancer?	1	2	8	
215C	Are any of the following service delivery protocols available?	YES	NO	DON'T KNOW	
	a) Standards of Practice (SOP) for Family Planning Service in Nigeria	1	2	8	
	b) Guidelines for Management of Syndromic Diagnosis and Treatment of STIs	1	2	8	
	c) Infection prevention wallchart	1	2	8	
216	Is there a register where family planning consultation information is recorded?	YES1 NO2 DON'T KNOW8			→218a →218a
217	How recent is the date of the most recent entry?	WITHIN THE PAST 7 DAYS1 > 7 DAYS2			
218A	How many TOTAL clients (new and continuing) received family planning services during the previous twelve (12) completed months?	NUMBER OF FP CLIENTS	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
218B	IF DATA NOT FOR 12 MONTHS, INDICATE NUMBER OF MONTHS REPRESENTED	DON'T KNOW9998	MONTHS OF DATA..... <input type="text"/> <input type="text"/>		
219	Are individual client cards/records maintained? IF YES, ASK TO SEE A BLANK CARD/RECORD.	YES, OBSERVED CARD1 YES, CARD NOT SEEN2 NO INDIVIDUAL CARDS3			
IF PMS/PHARMACY, GO TO 237					PMS/PHARMACY → 237
220	Are clients routinely treated for STIs or are clients referred to another provider or location for STI treatment?	ROUTINELY TREATS STIS.....1 REFERS TO OTHER PROVIDER /LOCATION2 NO TREATMENT PROVIDED3 DON'T KNOW.....8			
221	Are antenatal care clients routinely counseled about family planning?	YES.....1 NO.....2 DON'T KNOW.....8			
222	Are postpartum clients routinely counseled about family planning	YES.....1 NO.....2 DON'T KNOW.....8			
ASK TO SEE THE ROOM WHERE EXAMINATIONS FOR FAMILY PLANNING CLIENTS ARE CONDUCTED. FOR THE FOLLOWING ITEMS, CHECK TO SEE IF THE ITEM IS IN THE ROOM WHERE THE EXAMINATION IS CONDUCTED OR IN AN IMMEDIATELY ADJACENT ROOM.					
223	IF SAME EXAMINATION ROOM HAS ALREADY BEEN OBSERVED, NOTE FOR WHICH MODULE THE ROOM WAS ASSESSED:	FP COUNSELING.....1 STI.....2 POSTABORTION CARE.....3 NOT PREVIOUSLY SEEN4			→225A →226A →226A
224	DESCRIBE THE SETTING FOR THE EXAMINATION ROOM	PRIVATE ROOM.....1 ROOM WITH OTHER PEOPLE W/ SEPARATING BARRIER.....2 ROOM WITH OTHER PEOPLE AND NO VISUAL BARRIER.....3			

NO.	QUESTIONS AND FILTERS	CODE CLASSIFICATION			SKIP
		YES	NO	DON'T KNOW	
225A-G	Does this facility have the following items to provide family planning services?				
	a) A working spotlight source (flashlight or examination light accepted)	1	2	8	
	b) Table and stool for gynecological exam	1	2	8	
	c) Hand-washing items (soap and towel)	1	2	8	
	d) Water for hand-washing	1	2	8	
	e) Clean gloves	1	2	8	
	f) Sharps container	1	2	8	
	g) Decontamination solution for clinical equipment	1	2	8	
226A-D	OTHER EQUIPMENT				
	A) Blood pressure gauge	1	2	8	
	B) Stethoscope	1	2	8	
	C) Weighing scale	1	2	8	
	D) Sterile needle and syringe	1	2	8	
227	Does this facility offer mini-laparotomy female sterilization under anesthesia?	MINI LAP OFFERED.....1 MINI LAP NOT OFFERED.....2			→229
228A-O	Does this facility have the following equipment and supplies available and in working order for mini-laparotomies?	YES	NO	DON'T KNOW	
	a) Tubal hook	1	2	8	
	b) Uterine elevator	1	2	8	
	c) Forceps baby babcock	1	2	8	
	d) Retractor	1	2	8	
	e) Sponge holding forceps	1	2	8	
	f) Kockers forceps (long)	1	2	8	
	g) Straight artery forceps 5"	1	2	8	
	h) Vaginal speculum	1	2	8	
	i) Dissecting scissors	1	2	8	
	j) Blunt dissecting forceps	1	2	8	
	k) Toothed dissecting forceps	1	2	8	
	l) Needle holder	1	2	8	
	m) Kidney dish	1	2	8	
	n) Round body needle	1	2	8	
o) Cutting needle	1	2	8		
229	Does this facility offer No Scalpel Vasectomy?	NO SCALPEL VASEC OFFERED.....1 NO SCALPEL NOT OFFERED.....2			→231
230A-D	Does this facility have the following equipment and supplies available and in working order for No Scalpel Vasectomy?	YES	NO	DON'T KNOW	
	a) Vas dissecting forceps	1	2	8	
	b) Extracutaneous ringed forceps	1	2	8	
	c) Small angled dissecting scissors	1	2	8	
	d) Needle and syringe (5cc)	1	2	8	
231	Does this facility offer the IUD or Norplant?	YES.....1 NO.....2			→237
232	Does this facility have the following supplies for both procedures:	YES	NO	DON'T KNOW	
	a) Sterile gloves	1	2	8	
	b) Antiseptic solution (e.g.Iodine)	1	2	8	
233	Does the facility offer the IUD?	IUD OFFERED..... 1 IUD NOT OFFERED 2			→235
234	Does this facility have the following materials for the IUD:	YES	NO	DON'T KNOW	
	a) Speculum	1	2	8	
	b) Sponge holding forceps	1	2	8	
	c) Uterine sound	1	2	8	
	d) Tenacula	1	2	8	
	e) Sterile IUD kit which includes Tenacula and uterine sound	1	2	8	
235	Does this facility offer Norplant?	NORPLANT OFFERED..... 1 NORPLANT NOT OFFERED 2			→237

NO.	QUESTIONS AND FILTERS	CODE CLASSIFICATION			SKIP
		YES	NO	DON'T KNOW	
236A-E	Does this facility have the following materials for Norplant:				
	a) Local anesthetic (e.g., lidocaine)	1	2	8	
	b) Sterile syringe and needle	1	2	8	
	c) Any forceps for grasping implant (artery forceps/ hemostat/ tweezers / mosquito forceps)	1	2	8	
	d) Scalpel with blade	1	2	8	
	e) Minor surgical kit with scalpel, blade, and some forceps for grasping implant	1	2	8	
ALL RESPONDENTS MUST ANSWER THE REMAINING QUESTIONS BELOW IN THIS SECTION					
237	Now, I'd like to ask you some questions about supervision. In the last six months, have you had a supervisor speak with you about your family planning work or observe your work?	YES1 NO2 DON'T KNOW.....8			→ 240 → 240
238	How many times in the last six months has your family planning work been supervised?	NUMBER OF TIMES	<input type="text"/>	<input type="text"/>	
239A-G	What did your supervisor do the last time he/she supervised you?	YES	NO	DON'T KNOW	
	a) Check your records/reports	1	2	8	
	b) Observe your work	1	2	8	
	c) Provide feedback on your performance	1	2	8	
	d) Provide updates on administrative or technical issues related to your work	1	2	8	
	e) Discuss problems you have encountered	1	2	8	
	f) Discuss job expectations	1	2	8	
	g) Anything else (SPECIFY)	1	2	8	
240	What is the most important issue that you feel needs to be addressed to improve your work in family planning? DO NOT READ LIST. CIRCLE ONLY ONE RESPONSE FOR THE MOST IMPORTANT ISSUE.	a) MORE STAFF 1 b) TREAT STAFF BETTER.....2 c) PAY BETTER3 d) MORE TRAININGD4 e) MORE FEEDBACK ON STAFF PERFORMANCEE5 f) MORE/BETTER EQUIPMENT OR SUPPLIES.....6 g) EMERGENCY TRANSPORT FOR PATIENTS7 h) BETTER PHYSICAL ENVIRONMENT8 i) BETTER SECURITY.....9 j) OTHER96 (SPECIFY)			
GO TO Q101					101

NO.	QUESTIONS AND FILTERS	CODE CLASIFICATION			SKIP
		YES	NO	DON'T KNOW	
312A-B	Does this facility have protocols on the following:	YES	NO	DON'T KNOW	
	a) Confidentiality Protocol for STI, VCT, HIV/AIDS clients?	1	2	8	
	b) Informed Consent Protocol for STI, VCT, HIV/AIDS testing?	1	2	8	
313	Does the facility normally perform partner notification or follow-up? IF YES, IS THIS EVER ACTIVE (FACILITY CONTACTS PARTNERS) OR ONLY PASSIVE (FACILITY ASKS CLIENT TO BRING/INFORM PARTNERS)	YES, EVER ACTIVE..... 1 YES, SOMETIMES ACTIVE..... 2 YES, ONLY PASSIVE..... 3 NO..... 4			→315 →315 →315
314	Do you have a form/referral form or register where clients for active follow-up are listed? IF YES, ASK TO SEE.	YES, FORM SEEN..... 1 YES, REGISTER SEEN..... 2 YES, FORM/REGISTER NOT SEEN..... 3 NO FORM/REGISTER..... 4			
ALL RESPONDENTS					
315	Is there a register where STI consultation information is recorded?	YES..... 1 NO..... 2 DON'T KNOW..... 8			→318A →318A
316	Does the register indicate a specific type of STI diagnosed?	YES..... 1 NO..... 2			
317	How recent is the date of the most recent entry?	WITHIN THE PAST 7 DAYS..... 1 > 7 DAYS..... 2			
318A	How many people received STI services or products at this facility in the last 12 months?	NUMBER OF STI CLIENTS.....	<input type="text"/>	<input type="text"/>	
318B	IF DATA NOT FOR 12 MONTHS, INDICATE NUMBER OF MONTHS REPRESENTED	DON'T KNOW..... 998 MONTHS OF DATA.....	<input type="text"/>	<input type="text"/>	
IF PMS/PHARMACY, SKIP TO Q321A					PMS/PHARMACY → 321A
319	Do you submit an official report externally (usually to the MOH or a public health agency) which indicate the numbers and types of STIs diagnosed? IF YES , is the report generated from consultation records or from the laboratory?	YES, CONSULTATION..... 1 YES, LABORATORY..... 2 YES, BOTH..... 3 NO..... 4			
320	ASK TO SEE WHERE COUNSELING FOR CLIENTS WITH SUSPECTED STI'S IS PROVIDED AND INDICATE THE SETTING.	PRIVATE ROOM..... 1 ROOM WITH OTHER PEOPLE W/ SEPARATING BARRIER..... 2 ROOM WITH OTHER PEOPLE AND NO VISUAL BARRIER..... 3			
321A-J	Are any of the following available, in the counseling or service provision area?	YES	NO	DON'T KNOW	
	VISUAL AIDS FOR TEACHING				
	a) About STIs	1	2	8	
	b) About HIV/AIDS	1	2	8	
	c) Model for demonstrating use of condom	1	2	8	
	INFORMATION BOOKLET/PAMPHLET FOR CLIENT TO TAKE HOME				
	d) On STIs	1	2	8	
	e) On HIV/AIDS	1	2	8	
	f) Are there Condoms present in the room?	1	2	8	
	SERVICE DELIVERY PROTOCOLS				
	g) Clinical guidelines for diagnosing and treating STI?	1	2	8	
	h) Guidelines for using syndromic approach for diagnosing and treating STI's	1	2	8	
i) Guidelines for diagnosing HIV/AIDS?	1	2	8		
j) Clinical guidelines for treating HIV/AIDS? (e.g. opportunistic infection, anti-retroviral therapy)	1	2	8		
IF PMS/PHARMACY, SKIP TO Q347					PMS/PHARMACY → 347

NO.	QUESTIONS AND FILTERS	CODE CLASIFICATION			SKIP
ASK TO SEE THE ROOM WHERE EXAMINATIONS FOR STIs ARE CONDUCTED. FOR THE FOLLOWING ITEMS, CHECK TO SEE IF THE ITEM IS IN THE ROOM WHERE THE EXAMINATION IS CONDUCTED OR IN AN IMMEDIATELY ADJACENT ROOM.					
322	IF SAME EXAMINATION ROOM HAS ALREADY BEEN OBSERVED, NOTE FOR WHICH MODULE THE ROOM WAS ASSESSED:	FP1 POSTABORTION CARE2 NOT PREVIOUSLY SEEN3			→325A →325A
323	DESCRIBE THE SETTING FOR THE EXAMINATION ROOM	PRIVATE ROOM1 ROOM WITH OTHER PEOPLE W/ SEPARATING BARRIER2 ROOM WITH OTHER PEOPLE AND NO VISUAL BARRIER3			
RECORD WHETHER OR NOT THE FOLLOWING ITEMS REQUIRED FOR STI EXAMINATION ARE AVAILABLE IN WORKING CONDITION AT THIS FACILITY.					
324A-G	FACILITY AND EQUIPMENT	YES	NO	DON'T KNOW	
	a) Spotlight source (flashlight or examination light accepted)	1	2	8	
	b) Table and stool for gynecological exam	1	2	8	
	c) Hand-washing items (soap and towel)	1	2	8	
	d) Water for hand-washing	1	2	8	
	e) Clean gloves	1	2	8	
	f) Sharps container	1	2	8	
	g) Decontamination solution for clinical equipment	1	2	8	
325A-E	OTHER EQUIPMENT				
	a) Speculum	1	2	8	
	b) Swab sticks	1	2	8	
	c) Microscope	1	2	8	
	d) Slides	1	2	8	
	e) Reagents	1	2	8	
326	Now I want to ask you specifically about any services related to HIV or AIDS. Does this facility offer any services related to HIV/AIDS?	YES1 NO2			→346A
327	Does this facility offer voluntary counseling and testing (VCT) for HIV?	YES1 NO2			→333
328	Are VCT services offered in a special clinic or through general outpatient services?	SPECIAL CLINIC1 GENERAL OUTPATIENT2 OTHER6 (SPECIFY)			
329A-G	When a VCT client is found to be positive for HIV, indicate how often clients are referred elsewhere or services are provided by the facility for the following:	SERVICE PROVIDED	REFERRED	NO SERVICE/NO REFERRAL	DON'T KNOW
	a) Medical treatment and follow-up	1	2	3	8
	b) Diagnosis for TB	1	2	3	8
	c) Home-based care services	1	2	3	8
	d) Counseling on prevention of mother-to-child transmission	1	2	3	8
	e) Family planning service	1	2	3	8
	f) PLWHA (Persons Living With HIV/AIDS) support group	1	2	3	8
	g) Other social services	1	2	3	8
330	Is there a register where VCT client information is recorded? IF YES, ASK TO SEE REGISTER. DATE AND RESULT OF TEST SHOULD BE INDICATED FOR THE REGISTER TO BE VALID.	YES, REGISTER SEEN1 YES, REGISTER NOT SEEN2 NO REGISTER KEPT3			→332a →332a
331	How recent is the date of the most recent entry?	WITHIN THE PAST 7 DAYS1 > 7 DAYS2			
332A	How many people received VCT services in the last 12 months?	NUMBER OF VCT CLIENTS	<input type="text"/> <input type="text"/> <input type="text"/>		
332B	IF DATA NOT FOR 12 MONTHS, INDICATE NUMBER OF MONTHS REPRESENTED	DON'T KNOW998 MONTHS OF DATA	<input type="text"/> <input type="text"/>		

NO.	QUESTIONS AND FILTERS	CODE CLASIFICATION			SKIP		
FOR EACH OF THE FOLLOWING HIV/AIDS RELATED SERVICES, INDICATE IF THE FACILITY PROVIDES THE SERVICE, REFERS ELSEWHERE, OR DOES NOT PROVIDE THE SERVICE OR REFERRAL.							
333A-H	TYPE OF SERVICE	PROVIDES SERVICE			Refer else where	Noservice/ no referral	Don't Know
		Out Patient	In Patient	Both out and in			
	a) Tuberculosis diagnose & treatment	1	2	3	4	5	8
	b) Opportunistic infections/diagnose & treat	1	2	3	4	5	8
	c) Palliative (management of pain and terminal care)	1	2	3	4	5	8
	d) Family planning services	1	2	3	4	5	8
	e) Counseling on prevention of mother to child transmission	1	2	3	4	5	8
	f) Psycho-social services	1	2	3	4	5	8
	g) Counseling/training for home care	1	2	3	4	5	8
h) Anti-retroviral Therapy	1	2	3	4→335	5→335	8→335	
334A	How many clients received antiretroviral therapy during the last 12 months?	# CLIENTS W/ ANTIRET. TX.....			<input type="text"/>	<input type="text"/>	<input type="text"/>
334B	IF DATA IS NOT FOR 12 MONTHS, INDICATE NUMBER OF MONTHS REPRESENTED	DON'T KNOW..... 998			MONTHS OF DATA.....		
335	ASK TO SEE WHERE CONSULTATION FOR HIV/AIDS CLIENTS IS PROVIDED AND INDICATE THE SETTING.	PRIVATE ROOM 1 ROOM WITH OTHER PEOPLE W/ SEPARATING BARRIER 2 ROOM WITH OTHER PEOPLE AND NO VISUAL BARRIER..... 3 SAME ROOM AS STI CLIENTS..... 4					
336A-J	Are any of the following available, in the counseling or the examination room?	YES	NO	DON'T KNOW			
	VISUAL AIDS FOR TEACHING	1	2	8			
	a) About STIs	1	2	8			
	b) About HIV/AIDS	1	2	8			
	c) Model for demonstrating use of condom	1	2	8			
	INFORMATION BOOKLET/PAMPHLET FOR CLIENT TO TAKE HOME						
	d) On STIs	1	2	8			
	e) On HIV/AIDS	1	2	8			
	f) Are there Condoms present in the room?	1	2	8			
	SERVICE DELIVERY PROTOCOLS						
	g) Clinical guidelines for diagnosing and treating STI?	1	2	8			
	h) Guidelines for using syndromic approach for diagnosing and treating STI's	1	2	8			
	i) Guidelines for diagnosing HIV/AIDS?	1	2	8			
	j) Clinical guidelines for treating HIV/AIDS? (e.g. opportunistic infection, anti-retroviral therapy)	1	2	8			
ASK TO SEE THE ROOM WHERE EXAMINATIONS FOR HIV/AIDS CLIENTS ARE CONDUCTED. FOR THE FOLLOWING ITEMS, CHECK TO SEE IF THE ITEM IS IN THE ROOM WHERE THE EXAMINATION IS CONDUCTED OR IN AN IMMEDIATELY ADJACENT ROOM.							
337	IF SAME EXAMINATION ROOM HAS ALREADY BEEN OBSERVED, INDICATE FOR WHICH MODULE THE ROOM WAS ASSESSED:	FAMILY PLANNING..... 1 POSTABORTION CARE 2 NOT PREVIOUSLY SEEN..... 3			→ 340 → 340		
338	DESCRIBE THE SETTING FOR THE EXAMINATION ROOM	PRIVATE ROOM..... 1 ROOM WITH OTHER PEOPLE W/ SEPARATING BARRIER 2 ROOM WITH OTHER PEOPLE AND NO VISUAL BARRIER 3					

NO.	QUESTIONS AND FILTERS	CODE CLASIFICATION			SKIP
		YES	NO	DON'T KNOW	
339	Are any of the following available, in the examination room or immediately adjacent?	YES	NO	DON'T KNOW	
	a) Hand-washing items (Soap, Towel)	1	2	8	
	b) Water for hand-washing	1	2	8	
	c) Clean gloves	1	2	8	
340	Does this facility have protocols on the following?	YES	NO	DON'T KNOW	
	a) Confidentiality protocol for HIV/AIDS Clients?	1	2	8	
	b) Informed consent protocol for HIV/AIDS Clients?	1	2	8	
	c) Written protocols for referrals for HIV/AIDS clients for care and support services?	1	2	8	
341	Is there a register where information for HIV/AIDS clients receiving treatment is recorded?	YES1 NO2 DON'T KNOW8			→343a →343a
342	How recent is the date of the most recent entry?	WITHIN THE PAST 7 DAYS1 > 7 DAYS2			
343A	How many people received HIV/AIDS services (excluding VCT) in the past 12 months?	NUMBER OF HIV CLIENTS	<input type="text"/>	<input type="text"/>	
343B	IF DATA NOT FOR 12 MONTHS, INDICATE NUMBER OF MONTHS REPRESENTED	DON'T KNOW998	<input type="text"/>	<input type="text"/>	
344	Does the facility have a mechanism to follow-up on referrals? IF YES, ASK TO SEE RECORD OR FORM RELATED TO FOLLOW-UP MECHANISM. IF NO REFERRALS ARE MADE BECAUSE THIS IS REFERRAL FACILITY, INDICATE "4".	YES1 NO2 REFERRAL FACILITY4 DON'T KNOW8			
345	Does the facility have a list of care and support services to which clients can be referred? IF YES, ASK TO SEE LIST.	YES1 NO2 DON'T KNOW8			
346A-F	Does this facility conduct the following tests for STIs? IF NOT: Are specimens collected to be sent elsewhere, is the client sent elsewhere or is the test not performed at all?	CONDUCT TEST	COLLECT SPECIMEN TO SEND ELSEWHERE	SEND CLIENT ELSEWHERE	TEST NOT UTILIZED
	a) Syphilis? (VDRL)	1	2	3	4
	b) Gonorrhoea?	1	2	3	4
	c) Sputum test for Tuberculosis	1	2	3	4
	d) HIV/AIDS?	1	2	3	4
	e) CD4 Count? (HIV)	1	2	3	4
	f) HIV Viral Load?	1	2	3	4
ALL RESPONDENTS					
347	Now, I'd like to ask you some questions about supervision. In the last six months, have you had a supervisor speak with you about your STI/HIV/AIDS work or observe your work?	YES1 NO2			→350
348	How many times in the last six months has your STI/HIV/AIDS work been supervised?	NUMBER OF TIMES <input type="text"/>			
349A-G	What did your supervisor do the last time he/she supervised you?	YES	NO	DON'T KNOW	
	a) Check your records/reports	1	2	8	
	b) Observe your work	1	2	8	
	c) Provide feedback on your performance	1	2	8	
	d) Provide updates on administrative or technical issues related to your work	1	2	8	
	e) Discuss problems you have encountered	1	2	8	
	f) Discuss job expectations	1	2	8	
	g) Anything else (SPECIFY)	1	2	8	

NO.	QUESTIONS AND FILTERS	CODE CLASIFICATION	SKIP
350	<p>What is the most important issue that you feel need to be addressed to improve your work in STI/HIV/AIDS?</p> <p>DO NOT READ LIST. CIRCLE ONLY ONE RESPONSE FOR THE MOST IMPORTANT ISSUE.</p>	<p>a) MORE STAFF.....1</p> <p>b) TREAT STAFF BETTER.....2</p> <p>c) PAY BETTER.....3</p> <p>d) MORE TRAINING.....4</p> <p>e) MORE FEEDBACK ON STAFF PERFORMANCE.....5</p> <p>f) MORE/BETTER EQUIPMENT OR SUPPLIES.....6</p> <p>g) EMERGENCY TRANSPORT.....7</p> <p>h) BETTER PHYSICAL ENVIRONMENT...8</p> <p>i) BETTER SECURITY.....9</p> <p>j) OTHER _____.....96</p> <p style="text-align: center;">(SPECIFY)</p>	
CHECK Q101			→ 101

Section 4. Postabortion Care

NO.	QUESTIONS AND FILTERS	CODE CLASIFICATION	SKIP
400A	<p>INTRODUCE YOURSELF AS FOLLOWS.</p> <p>Hello. I am representing working with the Centre on Research, Evaluation Resources and Development on a MEASURE <i>Evaluation</i> Project. We are carrying out a survey of health facilities that provide reproductive health services with the goal of finding ways to improve service delivery. We would be interested in talking to you about this facility and your experiences in providing health services. Please be assured that the information is completely confidential. You may choose to stop the interview at any time.</p> <p>Do you have any questions for me? Do I have your agreement to participate?</p> <p style="text-align: center;">_____ INTERVIEWER'S SIGNATURE (Indicates respondent's willingness to participate)</p> <p style="text-align: center;">_____ DATE</p>		
400B	May I begin the interview?	YES 1 NO 2	➔ STOP
401	In what year did you start working at this facility?	YEAR <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>	
402	How many years in total of primary and secondary education did you complete?	YEARS <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>	
403	What is your current technical qualification	PHYSICIAN 1 NURSE/MIDWIFE 2 NURSE 3 MIDWIFE 4 AUXILIARY NURSE 5 CHEW 6 CHO 7 PHARMACIST 8 OTHER 96 <p style="text-align: center;">(SPECIFY)</p>	
404	What year did you graduate with this qualification?	YEAR <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>	
ALL RESPONDENTS			
405	For how many years in total have you provided postabortion care (PAC) services? IF LESS THAN ONE YEAR, RECORD "00".	YEARS <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>	
406	How many days in a week are PAC care services provided at the facility?	# DAYS <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> NO REGULAR SCHEDULE 9	
407	Are PAC care services being provided at the facility today?	YES 1 NO 2	
408	Is there a register where information for PAC clients receiving treatment is recorded?	YES 1 NO 2 DON'T KNOW 8	➔ 410A ➔ 410A
409	How recent is the date of the most recent entry for PAC?	WITHIN THE PAST 7 DAYS 1 > 7 DAYS 2	
410A	How many clients received PAC services during the previous twelve (12) complete months?	NUMBER OF PAC VISITS ... <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> DON'T KNOW 9998	
410B	IF DATA NOT FOR 12 MONTHS, INDICATE NUMBER OF MONTHS REPRESENTED	MONTHS OF DATA <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>	

NO.	QUESTIONS AND FILTERS	CODE CLASIFICATION			SKIP
ASK TO SEE THE ROOM WHERE PAC SERVICES ARE CONDUCTED AND CHECK IF THE FOLLOWING ITMES ARE AVAILABLE AND IN WORKING ORDER.					
411	IF SAME EXAMINATION ROOM HAS ALREADY BEEN OBSERVED, NOTE FOR WHICH MODULE THE ROOM WAS ASSESSED:	FAMILY PLANNING 1 STI 2 NOT PREVIOUSLY SEEN 3			→413 →413
412	DESCRIBE THE SETTING FOR THE ROOM	PRIVATE ROOM 1 ROOM WITH OTHER PEOPLE W/ SEPARATING BARRIER 2 ROOM WITH OTHER PEOPLE AND NO VISUAL BARRIER 3			
413	Does this facility have the following equipment and supplies available and in working order for postabortion care? a) Examination couch b) Tenaculums c) Sponge holding forceps d) Mackintosh e) Manual vacuum aspirations kit f) Cervical dilator g) Sharp curette h) Dressing towels i) Sterilizing drum	YES 1 1 1 1 1 1 1 1 1	NO 2 2 2 2 2 2 2 2 2	DON'T KNOW 8 8 8 8 8 8 8 8 8	
414	Does this facility have protocols and guidelines on PAC?	YES 1 NO 2 DON'T KNOW 3			
415A-C	Does this facility provide any of the following PAC family planning services: a) Counseling b) Provision of contraceptive methods c) Other _____ (SPECIFY)	YES 1 1 1	NO 2 2 2	DON'T KNOW 8 8 8	
416A-K	Which types of family planning methods are provided by this facility to PAC clients? a) Male condoms b) Female condoms c) Foaming tablets/spermicides d) Diaphragm e) Oral contraceptive (combined or progestin only) f) Injectable (combined or progestin only) g) IUD h) Norplant i) Female sterilization j) Male sterilization k) Other _____ (SPECIFY)	YES 1 1 1 1 1 1 1 1 1 1 1	NO 2 2 2 2 2 2 2 2 2 2 2	DON'T KNOW 8 8 8 8 8 8 8 8 8 8 8	
417	Does the PAC provider(s) routinely treat STIs or are clients referred to another provider or location for STI treatment?	ROUTINELY TREATS STIS 1 REFERS TO OTHER PROVIDER /LOCATION 2 NO TREATMENT PROVIDED 3			
418	Does the facility routinely offer to provide voluntary counseling and testing for HIV/AIDS for PAC clients?	YES 1 NO 2 DON'T KNOW 3			
419	Now, I'd like to ask you some questions about supervision. In the last six months, have you had a supervisor speak with you about your PAC work or observe your work?	YES 1 NO 2			→422A
420	How many times in the last six months has your PAC work been supervised?	NUMBER OF TIMES <div style="display: flex; justify-content: space-around; width: 100px;"> <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> </div>			

NO.	QUESTIONS AND FILTERS	CODE CLASIFICATION			SKIP
421A-G	What did your supervisor do the last time he/she supervised you? a) Check your records/reports b) Observe your work c) Provide feedback on your performance d) Provide updates on administrative or technical issues related to your work e) Discuss problems you have encountered f) Discuss job expectations g) Anything else (SPECIFY)	YES 1	NO 2	DON'T KNOW 8	
		1	2	8	
		1	2	8	
		1	2	8	
		1	2	8	
		1	2	8	
		1	2	8	
422	What is the most important issue that you feel need to be addressed to improve your work in PAC? DO NOT READ LIST. CIRCLE ONLY ONE RESPONSE FOR THE MOST IMPORTANT ISSUE.	a) MORE STAFF.....1 b) TREAT STAFF BETTER.....2 c) PAY BETTER.....3 d) MORE TRAINING.....4 e) MORE FEEDBACK ON STAFF PERFORMANCE.....5 f) MORE/BETTER EQUIPMENT OR SUPPLIES.....6 g) EMERGENCY TRANSPORT.....7 h) BETTER PHYSICAL ENVIRONMENT .8 i) BETTER SECURITY.....9 j) OTHER96 (SPECIFY)			
ALL RESPONDENTS GO TO 500					→ 500

INTERVIEWER'S OBSERVATIONS

TO BE FILLED IN AFTER COMPLETING INTERVIEW

COMMENTS ABOUT RESPONDENT(S):

COMMENTS ON SPECIFIC QUESTIONS:

ANY OTHER COMMENTS:

SUPERVISOR'S OBSERVATIONS

NAME OF THE SUPERVISOR: _____ DATE: _____

EDITOR'S OBSERVATIONS

NAME OF EDITOR: _____ DATE: _____

Appendix B – Supervisors and Fieldworkers¹⁰

OYO SURVEY TEAM	
<p>SUPERVISORS</p> <ol style="list-style-type: none"> 1. Okeronbi Wale 2. Adelokun Olusegun 3. Adeyeye Opeyemi 4. Babatunde Akeem 5. Olanrewaju F.O 6. Dr. I.I. Adeoye 7. Adeyemi Olusola 	<p>FIELDWORKERS</p> <ol style="list-style-type: none"> 1. Akinloye Oyetunde 2. Adekunle Solomon 3. Odiba Augustine 4. Ogunbayo Funmilola 5. Olanrewaju Frank 6. agboola Modupe 7. Ale A.V 8. Oyeboade A.A 9. Akinbiyi K.O 10. Olasode Iyabo 11. Adewolu Titi 12. Joseph Toyin 13. Aloba Abisodun 14. Akande Sunday 15. Oladoju M.T 16. Mojinyinola R.A 17. Aderinto I.A 18. Oladokun J.S 19. Kolawole O.I 20. Onawola R.M 21. Oguntokun N 22. Adetola A. I 23. Asanlu K.O 24. Mkainde Jumoke 25. Olasunkanbi B.E 26. Oladipo J.A 27. Afonja A.A 28. Ayannusi S.A 29. Atilola M.O 30. Adeniyi I. 31. Olatunji Wahab 32. Adetibigbe M.A 33. Salako H.O. 34. Adefioye P.I 35. Ayinde B.O

¹⁰ The list of individuals includes supervisors and fieldworkers who implemented the health facility as well as the household surveys.

ENUGU SURVEY TEAM**SUPERVISORS**

1. Sina Bamiwuye
2. Adisa Titus
3. Chris Okemgbo
4. Okunneye Wale
5. Egbe C.E
6. Ezeh Martins
7. Ejim Patricia

FIELD WORKERS

1. Victory Eseohen J.
2. Abiodun Jones A.
3. Nkechi Eucharia O.
4. Sitria Abanah
5. Onigbo Jane
6. Ugwuanyi Charles
7. Dare Oduwole
8. Sonny Adeoye
9. Ohis Adeoye
10. Mba Chinwe
11. Onyia Crescent
12. Ezema Gladys
13. Ezeh paul
14. Efidi Edith
15. Udoh Francis
16. Mrs. Nwobodo
17. Nnenna Ide
18. Okoye Joanes
19. Japhet Ilo
20. Okereke K.C.
21. Olenyi Ngozi
22. Ozoh Augustina
23. Ukwueze Jonas
24. Okafor Lazarus
25. Ada Egwuibe
26. Phina Okafor
27. Ene Sitvester
28. Joe Martin
29. Ohia Caro
30. Adenuga Shola
31. Iberekuru
32. Eloke Chizobam
33. Dr. Onuora
34. Florence Chukwu
35. Chuckwuma Obi

BAUCHI SURVEY TEAM**SUPERVISORS**

1. Sani Ali Gar
2. Mr. Ajala
3. Christy Pawa
4. Orimogunje Pelumi
5. Shola Asa
6. Mr. Ajibola
7. Mr. Adelodun
8. Mr. Dami Anthony

FIELD WORKERS

1. Sadiz Yusuf
2. Idris B. Musa
3. Nagyal Iliya
4. Halima Jatau
5. Catherine Wakili
6. Saratu Bukar
7. Abubakar Isah Baraza
8. Bilhatu Izang
9. Janet Yerima
10. Mary Adebisi
11. Rabo Islifanus
12. Sukar Kanawa
13. Rahila Dutse
14. Na'omi Yarda
15. Hajiya Tijani
16. Sani Yinusa
17. Musa Moh'd U.
18. Abububakar D. I
19. Regina Wakama
20. Asabe Simon
21. Hajara Moses
22. Rebecca Adamu
23. Stella Yusuf
24. Hajiya Hadiza
25. Elmina Maina
26. Ayo Alabi
27. Mayowa Adesina
28. Gbenga Ajayi
29. Christy Adeyefa
30. Paul Daniel
31. Jummai Joshua
32. Abigail Yusuf
33. Sarah Yakubu
34. Lois E. Daniel
35. Daniel Gadzama