

**White Ribbon Alliance (WRA)** formed over a decade ago to give a voice to the women at risk of dying in childbirth. Its mission is to inspire and convene advocates who campaign to uphold the right of all women to be safe and healthy before, during and after childbirth. The Alliance helps citizens recognize their rights and hold their governments to account for commitments made to maternal and newborn health.

#### THE PROBLEM

A woman's chance of dying from pregnancy and childbirth in Nigeria is one in 13. Although many of these deaths are preventable through access to skilled birth attendants, 62% of births take place at home where women's lives are put at risk. Evidence suggests that fear of disrespect and abuse that women often encounter in facility-based maternity care plays a significant role in a woman's decision to give birth at home, and that it is a more powerful deterrent to the use of skilled care than commonly recognized barriers, such as cost or distance.

#### THE BARRIERS

In 2013, WRA Nigeria learned that while there were many cases of disrespect and abuse happening in health centers across the country, there was no written account of these incidents and thus, the government was not tracking and addressing the problem. WRA members agreed that immediate action was needed, and organized a town hall meeting to gather testimony from health workers, citizens and policymakers. In this process, four major barriers emerged: community members and health workers did not have an understanding of respectful care; there was little recorded evidence of disrespect and abuse in health facilities; there was no policy supporting RMC in Nigeria; many health centers lacked the basic amenities to support RMC.

#### THE CAMPAIGN

In 2013, WRA Nigeria launched a campaign to establish a clear national standard for respectful maternity care (RMC), rooted in international human rights. At this time there was no explicit policy in Nigeria protecting the rights of childbearing women. The campaign in Nigeria built on the work of the global White Ribbon Alliance and international partners who had developed the *Respectful Maternity Care: the Universal Rights of Childbearing Women Charter*. WRA Nigeria's campaign set out to establish RMC as a standard of practice and to embed it at all levels of the health system.

#### National level campaign

WRA Nigeria's initial focus was on building support for RMC, so that the National Council on Health, the decision-making body that establishes health service strategies for all levels of governance, would establish RMC as a standard of medical practice and officially adopt the RMC Charter. This process required building support amongst key stakeholders, persuading the Federal Ministry of Health to introduce an approval memo to the National Council on Health, then persuading the National Council on Health to officially approve the memo.

In order to persuade the Federal Ministry of Health to champion RMC, WRA Nigeria had to demonstrate the support of key stakeholders. It began by convening RMC consultations with policymakers, professional associations, regulatory bodies, civil society organizations and women's groups. To build support for the Charter, WRA Nigeria's National Coordinator held individual meetings with key stakeholders to listen and address any concerns. The Alliance also invited a professor in human rights to a meeting with key stakeholders to explain that the Charter is based on existing international and national human rights standards. During this meeting, the stakeholders reached consensus to support all articles of the Charter and issued a communiqué calling on the Federal

Ministry of Health to officially endorse the Charter and establish RMC as a standard of practice in Nigeria.

With the communiqué demonstrating support from key stakeholders, WRA Nigeria worked very closely with the Federal Ministry of Health to prepare a memo introducing RMC as a standard of practice. Once the memo was introduced, WRA needed to secure the approval of a technical committee (comprised of the Permanent Secretary of the Federal Ministry of Health, and the permanent secretaries and directors of the 36 State Ministries of Health) and the Council Members (that include the Health Minister and the State Commissioners of Health). To ensure that the memo had adequate support within the National Council on Health, WRA Nigeria held individual meetings and distributed advocacy flyers to key state commissioners of health.

Throughout the campaign, WRA Nigeria worked with the media and key champions to build political pressure for RMC so that the policy would be passed as well as to promote the new national standard once it was passed. The Alliance held a media roundtable that was well attended and resulted in an agreement to hold quarterly meetings. WRA Nigeria's Board Member and former Ministry Director of Family Health became a great champion for the campaign. She provided the National Alliance with strategic guidance, and represented WRA Nigeria in a number of media interviews and international events, including the UN General Assembly meeting in New York.

Once the policy was in place, WRA continued to unite key stakeholders at the national level to operationalize it. To date, RMC has been incorporated in the revised Life Saving Skills manual for health workers. WRA Nigeria also worked with the Federal Ministry of Health and the professional organizations to develop national RMC promotional materials.

In addition to advancing the promotion of RMC, WRA Nigeria has led efforts to monitor progress on the government's commitment to embed RMC at all levels of the health system. Each year, WRA Nigeria reports to the National Council on Health and encourages State Commissioners to join WRA in operationalizing the government's commitment.

In 2015, WRA also conducted a national citizens' hearing to allow community members to meet their government representatives and to hold them to account for promises that were made to improve the quality of care that women receive in health centers around the country. Women shared their experiences in the delivery room, and used the citizens' hearing platform to demand improvements in the system.



The Respectful Maternity Care Charter: The Universal Rights of Childbearing Women can be found on [www.whiteribbonalliance.org/campaigns/respectful-maternity-care/](http://www.whiteribbonalliance.org/campaigns/respectful-maternity-care/)

### State level campaign

WRA Nigeria played a crucial role in establishing RMC as a national standard of care, and led the efforts to operationalize this commitment. To demonstrate how this could be done at the sub-national level, WRA Nigeria persuaded the Kwara State Commissioner of Health to establish an RMC working group and pilot efforts at six target health facilities in Ilorin, the capital of Kwara State.

In 2013, WRA Nigeria began to lay the foundation for work in Kwara State by meeting with civil society organizations, journalists and key decision makers, including the State Primary Health Care Board, the Federation of Muslim Women, and the National Council for Women's Society. Together, these partners formed

a state coalition for RMC and persuaded the Commissioner of Health to lead the development of Nigeria's first state level implementation plan for RMC. During this time, WRA has convinced the First Lady of Kwara to become a champion for the RMC cause in order to promote it within Kwara and use her platform to share evidence of the success.

After the Kwara State Commissioner of Health agreed to prioritize RMC and develop an implementation plan, WRA Nigeria worked with WRA's Global Secretariat to draw lessons learned from partner organizations to develop a strategic and well-informed implementation plan. WRA Nigeria and the Kwara State RMC Working Group decided to conduct an assessment of the barriers at target health facilities to better understand the drivers of disrespect and abuse. During this time, they met with health workers and community members and used the documented shortfalls to plan a future intervention.

After the barriers assessment, WRA Nigeria and the RMC Working Group decided to build off learning from Population Council in Kenya and train RMC champions at seven target health centers.

The training of health workers was supplemented with a community meeting to discuss the role and importance of engaging citizens in monitoring disrespect and abuse, and in promoting RMC.

Throughout the campaign, WRA Nigeria also worked with the media and piloted various efforts aimed at reaching citizens and providing platforms to discuss RMC. WRA also worked with media to conduct investigative journalism and draw attention to cases of disrespect and abuse. One of the radio outlets offered to host a regular show on RMC and shape conversation around WRA Nigeria's campaign priorities. Together, they conducted a series of thirteen shows in English and Yoruba, and invited listeners to call in and share their stories and solutions. The program reached about 500,000 people in five states, and allowed WRA to collect information to persuade the government to prioritize RMC in the upcoming budget cycle.

## GOVERNMENT'S RESPONSE

In response to WRA Nigeria's campaign, the National Council on Health approved the RMC Charter, making Nigeria the first country to officially establish RMC as a standard of practice.

At the state level, the Government of Kwara is actively engaged in developing a plan to embed RMC at all levels of the health system. It has established a state level working group and is actively monitoring improvements at six health facilities. In 2015, the Government of Kwara included a specific budget line to support RMC in the state, and specifically to monitor progress on RMC.

## THE IMPACT

WRA Nigeria's campaign has helped bring RMC to the forefront of the maternal healthcare agenda in Nigeria. Progress has been made, as evidenced by the examples of change above; however, much work still needs to be done. Over the next three months, the Alliance will capitalize on its current national and state momentum to continue to put women's experiences at the heart of government's efforts, broadening the dialogue and engagement beyond RMC to include other issues directly tied to maternal healthcare, and embedding RMC within the larger quality-of-care movement—all the while sharing key lessons and insights learned along its journey with organizational peers, partners and allies.

More importantly, this campaign has improved the quality of care at health centers in Kwara. The results of these efforts are clear, as the health centers involved have already rearranged delivery beds, added separation curtains, and secured personal medical files to provide patients with privacy. Health workers within these centers are actively educating community members about RMC and ensuring that expecting women understand the level of care and respect they are entitled to in the delivery room. Although these changes were primarily directed at improving the experience of expecting mothers, everyone using the services of these health centers will benefit from the improvement.



