

# Improving the quality of family planning services in Nigeria

Since 2018, SHOPS Plus has improved the knowledge, skills, and attitudes of public and private family planning (FP) providers to deliver quality FP services in four states: Akwa Ibom, the Federal Capital Territory (FCT), Oyo, and Plateau. The 2014 Task-Shifting and Task-Sharing Policy for Essential Health Care Services in Nigeria increases access to the full range of FP methods by empowering community health extension workers (CHEWS) to provide long-acting and reversible contraceptives. However, CHEWs, doctors, nurses, and midwives did not have the skills to deliver FP services proficiently. Besides lacking technical skills on LARCs, many providers also lacked basic skills in counseling and infection prevention.



Quality of care “...refers to the way clients are treated by service providers. It includes the extent to which providers adhere to protocols and guidelines, and how they interact with clients and provide them with accurate information and appropriate services.”\*\*

Quality cultures in health facilities are built by adopting four strategies that reinforce one another: (1) improve knowledge and clinical capacity, (2) continuously strengthen practice, (3) strengthen the enabling environment and (4) build data management capacity. While creating a quality culture was not an explicit objective of the SHOPS Plus FP program in Nigeria, its comprehensive approach to improving quality from design to closeout changed provider and government stakeholder behaviors. In turn, this approach ultimately improved the quality of the client experience.

## How SHOPS Plus created a “quality culture”



### Improve knowledge and clinical capacity

In-service clinical training increases the knowledge, skills, and abilities of providers to enable them to deliver high quality FP services.

### Continuously strengthen practice



Improving the quality of external provider oversight is necessary to support providers in their practice environments so they can deliver quality services.

## Women can access high quality FP services at public and private facilities



### Strengthen the enabling environment

Strengthening the enabling environment is necessary for sustainable quality assurance.

### Build data management capacity



Improved management processes facilitates quality improvement.

\*Leisher, S. H., A. Sprockett, K. Longfield, and D. Montagu (eds.) (2016). *Quality Measurement in Family Planning: Past, Present, Future: Papers from the Bellagio Meeting on Family Planning Quality, October 2015*. Oakland, CA: Metrics for Management.



## Improve knowledge and clinical capacity

SHOPS Plus activities began with reviewing the national training curriculum with the Federal Ministry of Health. Since the curriculum was developed in 2015, SHOPS Plus updated the clinical content to align with the latest WHO guidelines. These materials were made more accessible to providers by turning them into an audio job aid accessible through their mobile phones.



The review identified room to include content to address provider attitudes, as some providers unknowingly hinder the delivery of quality services with their biases against single women, young women, and married women with no children. SHOPS Plus added gender exercises that helped create awareness of their biases to deliver quality services. Introducing this content led to positive provider behavior change.

“I always remember I don’t need to be biased. I’m here to render a service, not be biased.”

Oluwakemi Taiwo, chief nursing officer, FCT



Finally, SHOPS Plus found the curriculum did not provide enough guidance on how to teach in a way that would resonate with providers of varying skill levels. Project staff incorporated adult and participatory learning techniques to improve the modality of the training. The departure from a lecture style of learning to a more participatory style has helped providers better learn and apply the technical content.

“... the method of teaching was unique and will make you to remember for as long as you live; you will not forget in a hurry.”

Eno Idung, FP supervisor, Akwa Ibom



“Prior to the training, I used to choose [the] FP method for my clients. High-level disinfection was done haphazardly; I was not aware of the dilution formula. After the training, I had improvement in FP counseling, infection prevention practices, and the confidence to give FP on my own.”

Omolara Ogunrombi, CHEW, Oyo



## Continuously strengthen practice

SHOPS Plus observed that classroom training is not enough for a provider, especially CHEWs to be confident in the skills they were taught. Post-training follow-up existed on paper, but was rarely implemented. SHOPS Plus improved provider oversight by strengthening post-training follow-up and supportive supervision visits (SSVs). For many providers, these visits were the first time they received any kind of external oversight or support within their facilities.

### Post-training follow-up reinforces training

- Conducted by the trainer-of-training programs; may also be accompanied by local government area reproductive health/FP coordinators
- Provides continued clinical training support to build competence and confidence during the initial three months after completion of training
- Focuses on validation of clinical competence in knowledge, attitudes, and skills learned during training
- Occurs monthly for 3 months

### Supportive supervision visits offer continuous support to providers

- Conducted by teams comprised of local government area (LGA) reproductive health (RH)/FP coordinators and coaches (experienced providers) who have been trained in coaching skills
- Ensures providers achieve proficiency
- Aimed at developing an ongoing partnership between the supervisor and provider/staff to problem solve and maintain service quality
- Occurs quarterly on an ongoing basis



“The day I received the trainer for my first SHOPS Plus post-training follow-up, I was fidgeting as it was the first time receiving an external [trainer] for assessment in my facility. I later regained my confidence and responded well throughout the follow up.”

Ojomo Bunmi Esther, CHEW, Oyo



“Any problem we see, we don’t just coach. We solve it.”

Raliat Bello, FP supervisor, FCT

Gender dynamics can influence interactions between providers and supervisors, and influence a provider’s performance in the workplace. Gender-transformative supportive supervision (GTSS) is incorporated into SSVs and aims to improve provider performance, retention, and gender equity in the workplace .

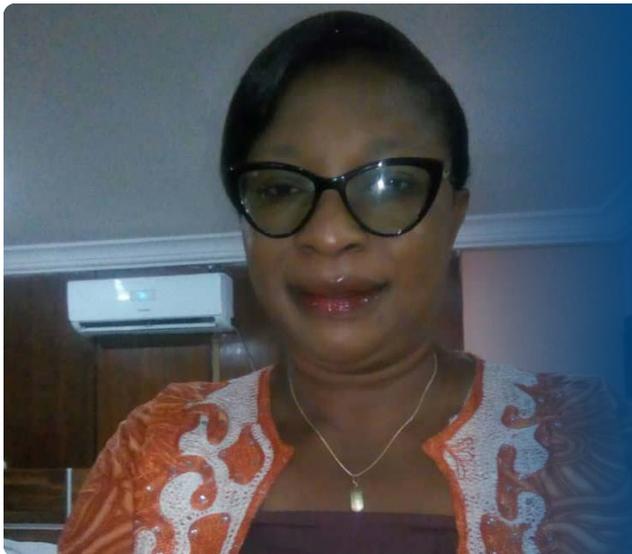
“... this GTSS training has really helped me to know that I have to be concerned about their [providers’] welfare and when they are in a good situation or good state of mind, it is then they can provide [their] best”

LGA coordinator, Oyo



## Strengthen the enabling environment

During training, SHOPS Plus provided the trainees with supplies, commodities, infrastructure (such as water and electricity), and clients for hands-on practice—everything they needed for an optimal learning environment. But during PTFU, the program and the state coordinators realized that the providers returned to a difficult reality. The providers faced daily challenges with limited commodities, weak infrastructure, and poor demand for the service. SHOPS Plus engaged state and LGA officials and communities to address these challenges.



“I met the WDC [Ward Development Committee] and presented some things that the facilities needed. This has helped the WDC to come to the aid of the facilities. This has improved services.”

Oke Modupe Oluwatoyin, LGA FP Coordinator in Oyo

SHOPS Plus trained LGA, reproductive health, and FP coordinators to conduct SSVs. Recognizing the importance of these visits to improving quality, Plateau state’s Primary Health Care Development Board funded the training of assistant RH coordinators to provide SSVs from its budget.



“We realized that training the deputy RH coordinators would help reduce the workload of the RH coordinators. So I looked at the budget and realized that we could handle this training, so I decided to fund it.”

Livinus Miakwap, executive secretary, Plateau State Primary Health Care Development Board

The program facilitated private provider’s access to FP commodities by building a public-private partnership between private providers and the state government, whereby providers could access government supplies of implants and IUDs. This allowed providers to more easily access commodities and lowered the cost for clients.



“For 11 days, I have missed tremendous patients and income but I am not regretting at it all. I mean, it’s something you cannot buy with money. It’s so huge.”

Dr. Fred Nwadiaro, a private provider in Akwa Obom, used his own money to participate in the SHOPS Plus training.



## Build data management capacity

Having quality facility-level data on FP service delivery (such as client volumes, new users, methods chosen, etc.) allows providers to make accurate commodity requisitions that can prevent facilities from having stock outs. SHOPS Plus improved the quality of data management and its reporting into the District Health Information System 2 (DHIS2).

### Data validation and review process

#### Data validation meetings

- Occur once a month for the three months after training
- LGA M&E officers and reproductive health/FP coordinators work with the providers
- Reconcile daily and monthly registers with DHIS2

#### Data review meetings

- Occur once a quarter
- Data reviewed by state M&E officers and LGA/state coordinators

#### Outcomes

- Improved provider capacity for data management and understanding of data
- Increased data accuracy and consistency between data reporting tools
- Improved engagement between facilities and LGA M&E officers for continued supervision

State officials found that these processes improved the accuracy and completeness of the data submitted by facilities reporting into DHIS2. Recognizing the importance of data validation meetings, the State Ministry of Health in Oyo replicated the process in 10 additional LGAs not supported by SHOPS Plus. Improved data collection showing verifiable, higher levels of FP service delivery led decision makers at 17 LGAs to commit an average of \$128.25 as a monthly running cost for FP services in their respective LGAs. This small but additional financial support will help equip providers to deliver quality services in their practice environment.



Improved M&E processes leading to higher and complete data helped Akande Abiodun, deputy director of Planning Research Statistics at the Oyo State Ministry of Health, improve financial support for FP services.

## Working with states to institutionalize new capacity building and quality improvement strategies

SHOPS Plus is identifying ways to ensure the trainings and approach to post-training follow-up and SSVs continue to be used by the states after the life of the project. SHOPS Plus is supporting revisions to the national training curriculum and has compiled all of the training materials into a training of trainers manual that can be used by any state or implementer in the future.



“The program has been able to establish quality cultures in health facilities by promoting teamwork and commitment to quality. This is evident in our mode of training design and delivery and the continuous support to these providers to ensure that clients receive quality services in line with national and international standards.”

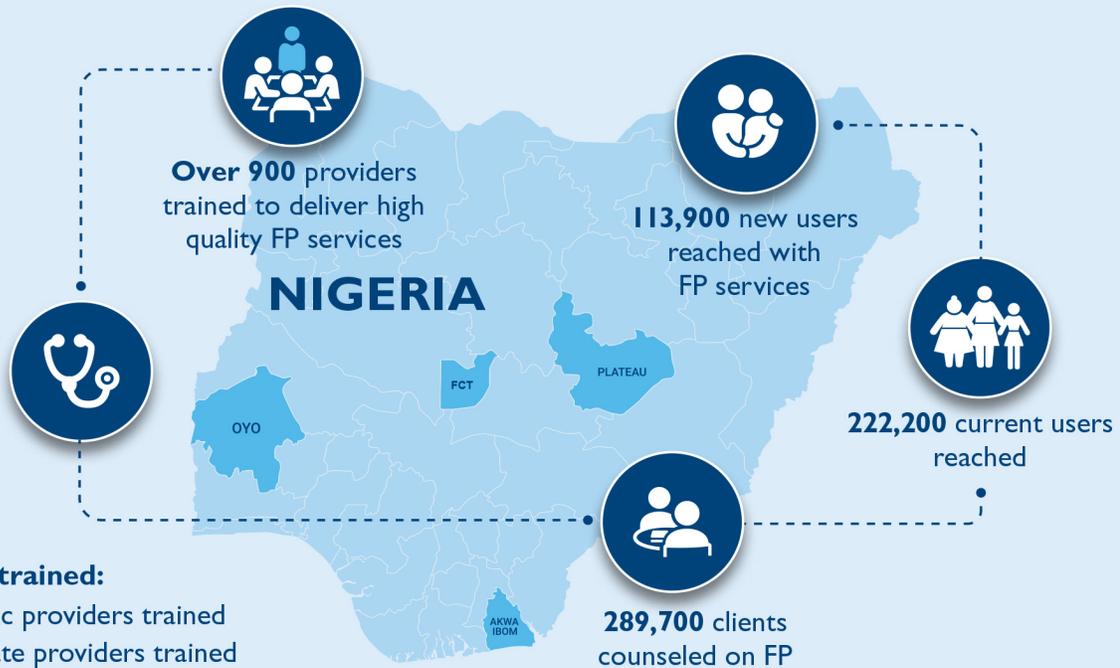
Paulina Akanet, SHOPS Plus FP director



A provider and supervisor after a successful IUD implantation at Fusa PHC, Jos.

## Impact

Improving the quality of FP services requires more than training alone. The SHOPS Plus experience highlights how quality cultures can be created and sustained in health facilities through a comprehensive approach that prioritizes the provider-client relationship.



### Providers trained:

**661** public providers trained  
**270** private providers trained

**289,700** clients counseled on FP



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