



AMURT FOUNDATION 2017



EBONYI STATE, NIGERIA - PRIMARY HEALTH CARE,
MATERNAL HEALTH & WATER PROJECTS

AMURT OVERVIEW

AMURT's mission is to help improve the quality of life for the poor and disadvantaged people of the world, and those affected by calamity and conflict. We encourage and enable individuals and communities to harness their own resources for securing the basic necessities of life and for gaining greater economic, social and spiritual fulfilment, while honouring their customs, language, and religious beliefs.

AMURT (Ananda Marga Universal Relief Team) is one of the few private international voluntary organizations founded in India. Since its inception in 1970 its original objective was to help meet the needs of the affected population after disasters. Over the years AMURT has established teams in thirty-four countries, to create a network that can meet disaster and development needs almost anywhere in the world.



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MAKING PRIMARY HEALTHCARE WORK

AMURT is building a sustainable and replicable model for meeting the primary healthcare needs of rural communities through a partnership involving the communities, grassroots organizations, private sector and government.



AMURT EBONYI TIMELINE

| | |
|------|---|
| 2010 | AMURT starts work in Nigeria and choses Ebonyi State as first project area. Three health centers opened in Abakaliki Local Government Area. |
| 2011 | AMURT Water & Sanitation Program starts in Abakaliki LGA. First staff quarters and clinic borehole constructed. First doctor employed by AMURT. |
| 2012 | AMURT signs Memorandum of Understanding with Ebonyi State Government and opens 2 health centers in Ikwo. First ambulance deployed in Offia Oji Health Center. |
| 2013 | Partnership strengthened by increase in government employment of health workers. New staff quarters and boreholes for health centers. |
| 2014 | Free Delivery Program starts. AMURT starts work in Ohaukwu LGA with boreholes. Maternal Health Promoters created. |
| 2015 | Akparata Health Center opens in Effium, Ohaukwu. AMURT responds to cholera outbreaks. Economic Empowerment for women started. Expansion of Offia Oji Health Center. |
| 2016 | Inikiri Health Center opens in Effium, Ohaukwu. AMURT starts family planning campaign. Upgrading of side-labs in each health center. AMURT expands water project to Ezza North LGA. |
| 2017 | Odeligbo Health Center upgraded to CEMONC (Comprehensive Emergency Obstetric and Newborn Care Center). Mgbalukwu Health Center opens in Isu, Onicha Local Government Area. AMURT extends water projects to Iwo and Izzi local governments |



PROJECT AREAS and HEALTH CENTERS



| LOCAL GOVT. AREA | HEALTH CENTER | YEAR OPENED |
|------------------|---------------|---------------|
| Abakaliki | Gmelina | Sep 2010 |
| | Offia Oji | Nov 2010 |
| | Ephuenyim | Nov 2010 |
| Ikwo | Elugwu Ettam | Feb 2012 |
| | Odeligbo | Jun 2012 |
| | | |
| Ohaukwu | Akparata | Apr 2015 |
| | Inikiri | October 2016 |
| Onicha | Mgbalukwu | November 2017 |

For each health center AMURT defines a 'project area' of about 20 surrounding villages for outreach, monitoring and health education activities

ANTE-NATAL CARE



Ephuenyim Health Center ante-natal day

AMURT's priority is to make comprehensive ante-natal services available in the rural areas. With attendance rising up to 200 in one day, 2 to 3 doctors are made available to see all the women. Four portable ultrasound machines are available and scanning is free. The focus is on identifying women who are at high risk of complications and doing follow-up to ensure a safe delivery. The number of new ANC attendance rose by 17 % in 2017. All the mothers are tested for Malaria, Hepatitis B, Hepatitis C, venereal diseases and HIV. Other lab tests are done on indication. During ANC days, AMURT also provides family planning counseling, routine drugs, tetanus vaccine, preventive treatment for malaria and mosquito nets. The quality of the ante-natal care at the centers attract many women from outside the project area.



Odeligbo Health Center ante-natal day

| Health Center | From Project Area | Outside Project Area | 2017 ANC |
|---------------------|-------------------|----------------------|-------------|
| Odeligbo | 428 | 769 | 1207 |
| Elugwu Ettam | 148 | 153 | 301 |
| Offia Oji | 621 | 88 | 709 |
| Ephuenyim | 659 | 594 | 1252 |
| Gmelina | 251 | 201 | 452 |
| Akparata | 371 | 167 | 538 |
| Inikiri | 344 | 285 | 629 |
| TOTAL 2017 | 2831 | 2257 | 5088 |

ODELIGBO HEALTH CENTER UPGRADE



The operating theatre at Odeligbo during CS

In August 2017 Odeligbo Health Center in Ikwo was upgraded to a CEMONC center (Comprehensive Emergency Obstetric and Newborn Care). A total of fifteen cesarean sections were carried out in 2017. We also did three bilateral tubal ligation surgeries. The expanded services attracted many patients from far outside the project area and resulted in all twenty beds being occupied on most days. MCSP provided support through training programs for doctors, midwives and health workers, as well as equipment for newborn care. Odeligbo has now established itself as among the highest functioning hospitals in Ebonyi State.



The first mother and baby to have C.S. at Odeligbo



The pediatric ward at Odeligbo Health Center

DELIVERIES



Triplets and two pairs of twins on the same day at Odeligbo Health Center

We now have nine midwives resident in the AMURT assisted health centers. 1559 mothers from within the project areas qualified for free delivery in 2017. 1021 women from four health centers, received refund of their ante-natal fees after giving birth in the health center by meeting the criteria of regular attendance during ante-natal days and pregnant women support group meetings. 133 deliveries, or 5.7 % of total births, were referred to tertiary hospital due to complications. A total of 95 deliveries, or 4.1 % of all births, were by caesarean section. The 77 % average facility delivery in AMURT project areas, is significant compared to Nigeria's national rate of 37.5 % a rural average of 27.6 % facility deliveries.

| HEALTH CENTER | PROJECT AREA | OUTSIDE PROJECT AREA | TOTAL | FREE DELIVERIES |
|-------------------|--------------|----------------------|-------------|-----------------|
| Odeligbo | 292 | 231 | 523 | 258 |
| Elugwu Ettam | 107 | 32 | 139 | 111 |
| Offia Oji | 411 | 25 | 436 | 400 |
| Ephuenyim | 428 | 56 | 484 | 387 |
| Gmelina | 114 | 34 | 148 | 100 |
| Akparata | 190 | 28 | 218 | 168 |
| Inikiri | 161 | 72 | 233 | 133 |
| Mgbalukwu | 2 | 0 | 2 | 2 |
| Referral birth | | | 133 | |
| TOTAL 2016 | 1705 | 478 | 2316 | 1559 |

| HEALTH CENTER vs. HOME DELIVERIES – PROJECT AREAS ONLY | | | | | |
|--|---------------------------|----------------------|----------|------------------|----------------------------|
| Name of Health center | Health Center + referrals | Other Health Centers | Home TBA | Total deliveries | Health center deliveries % |
| Odeligbo | 298 | 4 | 49 | 351 | 86 % |
| Elugwu Ettam | 117 | 0 | 19 | 136 | 86 % |
| Offia-oji | 422 | 8 | 72 | 502 | 86 % |
| Ephuenyim | 446 | 14 | 102 | 562 | 82 % |
| Gmelina | 123 | 3 | 152 | 278 | 46 % |
| Akparata | 197 | 10 | 56 | 263 | 79 % |
| Inikiri | 166 | 15 | 79 | 260 | 67 % |
| Total | 1769 | 54 | 530 | 2353 | 77 % |

MATERNAL NEAR MISSES and COMPLICATIONS

MATERNAL NEAR MISSES

| | Ante-partum Hemorrhage | | Post Partum Hemorrhage | | | Other emergencies | | | | |
|--------------------------|------------------------|-----------------|------------------------|-------------------|------------|-------------------|-------------------------|------------|-----------------------|-------|
| | Placenta Abruptio | Placenta Previa | Uterine Atony | Retained placenta | Laceration | Ruptured Uterus | Eclampsia Pre-Eclampsia | Meningitis | Crisis after abortion | Total |
| Managed in Health Center | 4 | 1 | 7 | 1 | 7 | 1 | 5 | 0 | 3 | 29 |
| Managed by referral | 9 | 3 | 2 | 1 | 1 | 4 | 3 | 1 | 0 | 24 |
| TOTAL | 13 | 4 | 9 | 2 | 8 | 5 | 8 | 1 | 3 | 53 |

Note: A Maternal Near Miss (MNM) is an event in which a woman comes close to maternal death but does not die.

OBSTETRIC COMPLICATIONS MANAGED IN THE HEALTH CENTERS

| | Ante-partum Hemorrhage | | Post Partum Hemorrhage | | | Other complications | | | |
|--------------------------|------------------------|-----------------|------------------------|-------------------|------------|-------------------------|--------------------|--------|-------|
| | Placenta Abruptio | Placenta Previa | Uterine Atony | Retained placenta | Laceration | Eclampsia Pre-Eclampsia | Breech Twin Breech | Others | TOTAL |
| Managed in Health Center | 4 | 2 | 27 | 17 | 15 | 24 | 36 | 64 | 189 |

Note: others includes; Severe malaria/Anaemia in pregnancy, Meningitis, Previous C/S, PROM, Puerperal sepsis, shoulder dystocia, post date, foetal macrosomia, cord prolapse, prolonged labour, IUGR, etc.

In 2017, the number of births with complications in AMURT assisted facilities was 361 or 15.6 % of the total deliveries.

AMBULANCE SERVICE



Two AMURT ambulances bringing gunshot victims on 9th May



28 men with gunshot wounds referred by ambulance 8-10th May

| HEALTH CENTER | Obstetric | Non-obstetric | Emergency Referrals |
|-------------------|------------|---------------|---------------------|
| Odeligbo | 32 | 34 | 66 |
| Elugwu Ettam | 18 | 13 | 31 |
| Offia Oji | 13 | 41 | 54 |
| Ephuenyim | 33 | 37 | 70 |
| Gmelina | 20 | 3 | 23 |
| Akparata | 16 | 11 | 27 |
| Inikiri | 11 | 9 | 20 |
| TOTAL 2017 | 143 | 148 | 291 |

In the rural areas, when medical emergencies occur, transport is hard to come by. AMURT has four ambulances serving seven rural health centers, with drivers standing by around the clock every day. The ambulances are used exclusively for the transport of patients. FETHA (Federal Teaching Hospital Abakaliki), along with St. Vincent, Ndubia and Mile Four Hospital, are used as referral centers. A health worker accompanies every ambulance referral and assists with registration, investigations, drugs and life saving interventions. During the communal conflict at Offia Oji, two AMURT ambulances were put in service, and around 50 men with gunshot wounds were carried to FETHA free of charge.

MATERNAL & NEONATAL MORTALITY

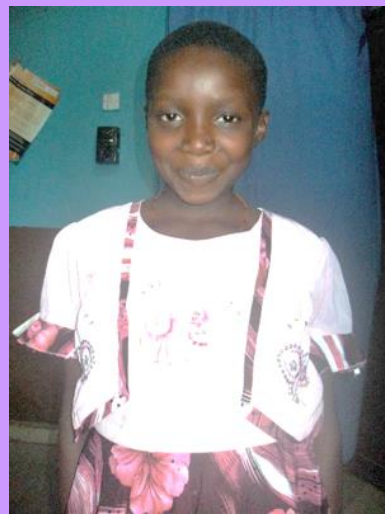
| MATERNAL MORTALITIES 2017 | | | | |
|---------------------------|---------------|-----------------|------------------|-------|
| | Health Center | Referral Center | Chemist TBA Home | TOTAL |
| Post Partum Hemorrhage | 3 | 0 | 1 | 4 |
| Ruptured Uterus | 1 | 0 | 0 | 1 |
| Other | 0 | 0 | 3 | 3 |
| TOTAL | 4 | 0 | 4 | 8 |

In the AMURT project areas, the maternal mortality rate for 2017 is 215 per 100000 live births, compared to Nigeria's national rate of 576.

| NEONATAL MORTALITIES 2017 | | | |
|---------------------------|---------------|-----------------|-------|
| | Health Center | Referral Center | TOTAL |
| Asphyxia | 4 | 6 | 10 |
| Low birth weight | 0 | 1 | 1 |
| Sepsis | 2 | 1 | 3 |
| Congenital malaria | 1 | 0 | 1 |
| Others | 1 | 2 | 3 |
| TOTAL | 8 | 10 | 18 |

| NEONATAL DEATHS AT BIRTH 2017 | | | |
|---------------------------------------|---------------|-----------------|-------|
| | Health Center | Referral Center | TOTAL |
| IUFD (baby died before labour) | 23 | 7 | 28 |
| Still birth (baby died during labour) | 16 | 7 | 25 |
| After Caesarean Section | 1 | 13 | 14 |
| TOTAL | 40 | 27 | 67 |

EMERGENCY and SURGERY ASSISTANCE



Before & after – a girl treated for nephrotic syndrome at Akparata .



Newborn jaundice case referred.



Born without anus. Successful surgery

AMURT project areas are in the remote regions of Ebonyi State. The population is mostly comprised of farmers with few financial resources. AMURT administers an emergency fund to help ensure that no lives are lost due to lack of financial means. Obstetric and newborn cases provide most of the emergencies. In 2017, fifteen children had life saving surgeries sponsored by AMURT. Ninety children suffering from malnutrition were treated and recovered in the health centers with AMURT support. 65 of them were from families displaced by the war in Offia Oji. AMURT sponsored the surgical repair at the National Obstetric Fistula Center in Abakaliki for eight women suffering from uterine prolapse.

| CATEGORY | AMOUNT |
|--------------------------------------|---------------------|
| Obstetric emergency referrals | N 8,175,540 |
| Babies and Children referrals | N 1,930,450 |
| Child surgeries | N 1,500,120 |
| Other emergency referrals | N 276,780 |
| Uterine Prolapse repair | N 777,950 |
| Assistance in health centers | N 1,711,220 |
| Offia Oji War Relief | N 6,967,086 |
| TOTAL 2017 | N 21,339,146 |



Malnutrition – before and after.

OFFIA OJI WAR RELIEF



First aid Offia Oji 8th May



Gunshot victims Ephuenyimi 9th May



Repairing Offia Oji Health Center



Fleeing the violence 16th August

On 8th May a communal war spread to Offia Oji project area. Offia Oji and Ephuenyim Health Centers provided first aid to gunshot casualties as AMURT staff personally made emergency blood donations and saved many lives. Two AMURT ambulances shuttled up and down carrying over 50 victims to the Federal Teaching Hospital in Abakaliki. AMURT provided support to victims that needed surgery. As the conflict escalated in August, more than 1500 families fled the conflict area, finding shelter in internal villages. The IDPs (Internally Displaced Persons) driven away from their homes, farms, and source of livelihood, suffered as malnutrition and disease spread among their children. AMURT responded with free medical care for 2,063 children from September through December. Sixty severely malnourished children were treated in AMURT assisted health centers. The AMURT team visited the displaced families in their homes to assess the children. More than 200 families received food aid. In the course of the fighting Offia Oji Health Center was destroyed by fire in a hostile attack. The dedicated health workers of Offia Oji operated a temporary clinic in a school. As the security situation improved, AMURT repaired the health center and it reopened in December.



Malnourished child treated at Ephuenyim Health Center



Assessing IDP children for malnutrition



Family food aid at Egwuagu

LABORATORIES and BLOOD TRANSFUSIONS

| HCT TESTING | # |
|----------------------------|------|
| Total tested | 6539 |
| Positive | 23 |
| | |
| PMTCT | |
| Total tested | 5088 |
| Positive | 30 |
| Mothers on therapy | 26 |
| Mothers on referral | 2 |
| Positive mothers delivered | 14 |

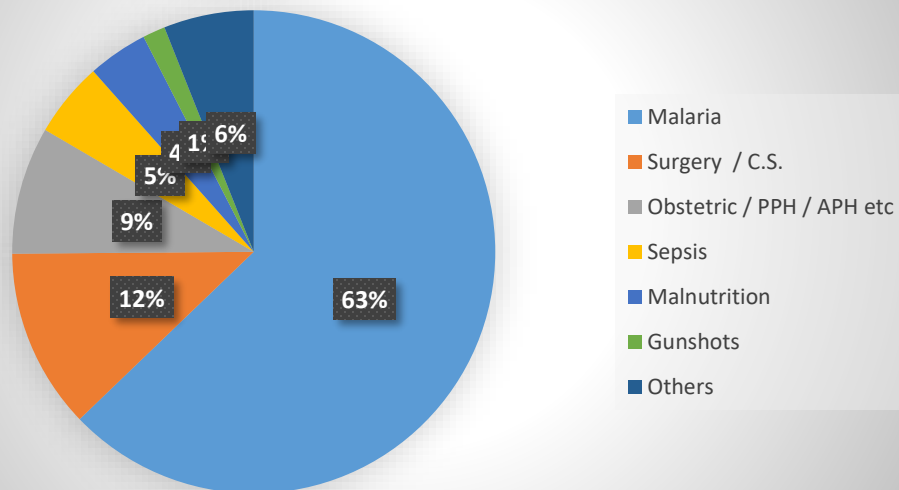


Laboratory at Odeligbo Health Center



Donating blood to save life Gmelina Health Center

Reasons for Blood Transfusions



Each of the AMURT assisted health centers has a laboratory where most of the laboratory departments like Chemical Pathology, Haemathology, and Microbiology are well represented and tests within these departments carried out efficiently, at a low rate. A lab scientist is available on all clinic days to conduct medical lab investigations and facilitate lifesaving. On ante-natal days the laboratories conduct routine investigations such as urinalysis, blood grouping, MP, PCV, HIV, hepatitis B & C, and VDRL tests for the pregnant women. More than 90% of the pregnant women are screened at first visit and further tests carried out when requested by the doctors.

NEW PROJECT AREA



The health center is spacious with over 20 rooms.



Pregnant women for ANC on the opening day



Staff at Mgbalukwu Health Center



Community meeting preparing for the opening of the health center

On 23 November, AMURT opened a new health center at Mgbalukwu, Obeagu Ward, Isu Community in Onicha LGA . AMURT had received an invitation from the Isu community in 2016. After surveying the area, the site was selected based on criteria of need. Meetings were held in all the villages of the ward. Maternal health promoters were elected. The community mobilized themselves and took responsibility for all the labour on the renovation and structural fortifications of an old clinic building that had been constructed for the health center in 2013, but never used. AMURT provided the construction materials before furnishing and equipping the new health center. The government was able to post six health workers and AMURT sent additional staff to assist. The health center is doing very well.

COMMUNITIES IN PRIMARY HEALTH



Elugwu Ettam Management Committee training



Elugwu Ettam Mgmt Committee



Community meeting at Obeagu Ward

The key to effective primary healthcare in rural areas lies in community participation. In accordance with the national policy in Nigeria, AMURT strives to establish strong community management in all the health facilities it assists. Through good management of the Drug Revolving Fund the management committee can ensure that essential drugs and supplies are always available in the health center. With a modest mark-up on drugs, the health centers can cover operating expenses like cleaning supplies, cleaners, fuel, and crucially save money for maintenance and repairs. All the AMURT assisted health centers have been able to save funds for expansion and upgrades. AMURT encourages the recruitment of local health workers and inclusion of Community Resource Persons in the health center personnel. This approach helps in communication and enables easier patient follow-up and more outreach programs. The result is stronger bonds between patients and the health center, leading to increased patronage. With an empowered community as the leading partner, we have taken a big step towards sustainability.

MATERNAL HEALTH PROMOTERS



Teaching pregnant women at Ephuenyim

As part of AMURT's criteria for the free delivery program, the women in each village elect a maternal health promoter from amongst themselves. They conduct monthly pregnant women support group meetings and work closely with health workers from the health center. Their responsibilities include identifying pregnant women, educating and guiding expectant mothers, and monitoring pregnancies and deliveries. As community based volunteers, they ensure that the program is well anchored at the grassroots, and play a key role in promoting safe motherhood in communities. In 2017, the maternal health promoters took the lead in organizing health rallies to create awareness, acceptance and access for family planning in the rural villages.



Gmelina Health promoters at rally



Newly elected health promoters at Mgbalukwu



Elugwu Ettam Health promoter

| HEALTH CENTER | MATERNAL HEALTH PROMOTERS |
|-------------------|---------------------------|
| Odeligbo | 22 |
| Elugwu Ettam | 16 |
| Offia Oji | 22 |
| Ephuenyim | 20 |
| Gmelina | 15 |
| Akparata | 22 |
| Inikiri | 20 |
| Mgbalukwu | 22 |
| TOTAL 2017 | 159 |

FAMILY PLANNING



Odeligbo family planning counseling



Gmelina implant



Training of FP focal persons at AMURT



Gmelina health talk

Ebonyi state's population is growing at a rapid pace. The state fertility rate is 5.3 births per woman, while in the remote villages where AMURT works many women have 8, 10 or even more children. Through village meetings, the AMURT health education team has raised the awareness and acceptance of the health benefits of child spacing. In the AMURT assisted health facilities, the rural population now has access to counselling and a variety of contraceptive options. AMURT does this through a variety of work, including: PPLARC (Post-Partum Long Acting Reversible Contraceptive), improved and intensified health education during ANC and immunization, counselling of all newly booked woman in ANC and during immunization, visits of special clients (community based family planning) by our trained Family Planning Focal Persons) and intrapartum counselling by our midwives based in the centers. In 2017, 261 women accessed injectable contraceptives, an increase from 114 in 2015) and 836 chose implants up from only 16 in 2015. We did 16 IUCDs and 4 bilateral tubal ligation. Hundreds more chose natural birth spacing methods. Long held cultural beliefs have evolved to place health first

| | Barrier methods | | Pills | Progestaron only pill | | Injectables | | Implant | | | Bilateral tubal ligation | Natural method | | | Total # counselled | # of new Acceptors of FP commodity | # of revisi |
|------------|-----------------|---------------|-------------|-----------------------|------------|--------------|-----------|---------|----------|----|--------------------------|----------------|----------|------|--------------------|------------------------------------|-------------|
| | Male condom | Female condom | Post coital | Xluton | Microgynon | Depo provera | Noristera | Jadel | Inplanon | | | LAM | Billings | | | | |
| Offiorji | 8 | 0 | 1 | 5 | 0 | 4 | 0 | 25 | 29 | 0 | 0 | 226 | 0 | 298 | 486 | 284 | 4 |
| Ephuenyim | 68 | 1 | 3 | 8 | 13 | 26 | 0 | 57 | 64 | 0 | 0 | 211 | 2 | 453 | 963 | 412 | 41 |
| Gmelina | 47 | 0 | 0 | 6 | 1 | 49 | 19 | 34 | 31 | 0 | 0 | 72 | 0 | 258 | 403 | 199 | 60 |
| Odeligbo | 246 | 3 | 2 | 10 | 22 | 35 | 0 | 115 | 106 | 5 | 2 | 55 | 8 | 610 | 1325 | 459 | 102 |
| Elugwu ett | 32 | 2 | 0 | 5 | 4 | 55 | 21 | 47 | 50 | 7 | 0 | 24 | 2 | 249 | 394 | 182 | 62 |
| Akparata | 3 | 0 | 0 | 0 | 14 | 28 | 4 | 65 | 71 | 0 | 0 | 78 | 0 | 263 | 436 | 236 | 25 |
| Inikiri | 8 | 0 | 0 | 1 | 9 | 19 | 1 | 78 | 64 | 4 | 1 | 55 | 0 | 240 | 417 | 277 | 12 |
| | 412 | 6 | 6 | 35 | 63 | 216 | 45 | 421 | 415 | 16 | 3 | 721 | 12 | 2371 | 4424 | 2049 | |

HEALTH RALLIES



Health talk at Enwemiri health rally, Akparata.



World malaria day rally Elugwu Ettam.



Promoting child spacing Agwugwu, Akparata



Cultural display Inyemagu, Akparata.



Cultural dance Nkaliki, Gmelina.



Drumming and dancing Ndiokenyi, Gmelina.

Health Rallies are full day events organized by the maternal health promoters and village youth leaders. They combine health talks and educational dramas with cultural displays like dance, drumming and masquerades to create a festival atmosphere. In 2017 AMURT mobilized 10 health rallies in Akparata and Gmelina project areas. The health rallies provide opportunities for questions, answers and a dialog between the community and the health center. An additional 40 village outreach meetings were held. Family planning was the focus for AMURT health education in 2017.

REPRODUCTIVE HEALTH FOR YOUTH



The teen club leaders of the of IN2K program made an impact on their peers



Games and drama, song and dance, helped to attract the youth to knowledge

In AMURT's project areas in Ebonyi state we have seen a high rate of teenage pregnancies. Many young girls are forced to marry much older men. Female Genital Mutilation continues in some remote villages. The cause is a combination of harmful traditional practices and lack of access to knowledge. In 2017 AMURT started a pilot program to empower youth with awareness and knowledge of sexual health. The program is called 'I NEED TO KNOW' or IN2K for short. In the Ephuenyim project area, in Okpuitumo Ndeagu community, village youth were recruited and trained as peer educators on reproductive health. The program, carried out through village teen-clubs in 10 villages, has the vision to educate, influence and equip young minds, 14-19 years. Over 400 teenagers have been reached by this programme, with many positive testimonies.

BOREHOLES FOR SAFE WATER



Installation at Amoosu village



WASHCOM installing borehole at Ohiariji



Borehole installed at Inikiri Zone 2

Many rural villages in Ebonyi State still rely on rivers and ponds for their drinking water. In 2017, AMURT drilled 17 boreholes as these communities were able to have access to safe water for the first time. All the beneficiary villages paid 5 % of the cost of their borehole as their contribution. Priority was given to remote villages without any source of safe water. Ohaukwu LGA got 11 new boreholes, Ivo got three, Izzi LGA got 2 and Onicha got 1. The AMURT WASH team repaired 26 broken boreholes and made follow up visits to all the villages where boreholes had been drilled by AMURT since 2011.

| BOREHOLES DRILLED 2011 - 2017 | | | |
|-------------------------------|-------------------|------------------|-------|
| Local Govt Area | Village Boreholes | Clinic Boreholes | Total |
| Abakaliki | 39 | 3 | 42 |
| Ohaukwu | 46 | 2 | 48 |
| Ikwo | | 2 | 2 |
| Ezza North | 5 | | 5 |
| Onicha | | 1 | 1 |
| Ivo | 3 | | 3 |
| Izzi | 2 | | 2 |
| Total | 95 | 8 | 103 |

WASHCOM TRAINING



WASHCOM training at Ogbodo village



Newly trained WASHCOM members at Ngujiola, Izzi



Casting platform for borehole Ngujiola, Izzi

After the assessment and identification of villages for the WASH program, AMURT conducts a one day sensitization program for the whole community. On this day the villagers elect 12 men and women to be their Water, Sanitation & Hygiene Committee. They also identify the exact preferred location for the drilling of the borehole. The WASHCOM training covers maintenance and repair of boreholes, and each village gets a toolbox with all tools necessary to repair their borehole. The training also covers protection of water sources, hygiene and sanitation, and critical health issues like family planning, female genital mutilation and Lassa fever.



The water flows at Umuntumuna village

TRAINEES & SCHOLARSHIPS



*Amarachi and Fidelia
Ephuenyim Health Center*



*Amarachi
Odelogbo Health Center*



*Scolastica & Emilyanne
Offia Oji Health Center*



*Precious, Friday, Blessing and Cynthia
Elugwu Ettam Health Center*



Francesca celebrates her matriculation

In coordination with local leadership, AMURT recruits Community Resource Persons from the local project areas to help ensure 24 hour service in the health centers. The presence of locals on the staff has been crucial in strengthening the bond between the health centers and the communities. It has contributed to increased community confidence and higher patronage. The local staff easily organize outreach programs and when needed follow up on pregnant women with home visits. The local staff has been reliable in being at their posts and doing their best for their own people. AMURT offers a scholarship program to give the most talented and committed of these community volunteers the opportunity to become qualified health workers. At the start of 2017, seven candidates were in school on AMURT scholarships. Through employment and support for further education, AMURT has given dozens of young rural women, and some young men, a career and opportunity to serve their communities. Capacity building is a key factor for increased self reliance of primary health care in the rural areas.

HEALTH CENTER STAFF

| Health Centre Staff Category | Offia Oji | Ephuenyim | Gmelina | Odeligbo | Elugwu Ettam | Akparata | Inikiri | Mgbalukwu | Total |
|--------------------------------|-----------|-----------|---------|----------|--------------|----------|---------|-----------|-------|
| Government – permanent workers | 1 | 4 | 1 | 3 | 3 | 2 | 0 | 6 | 20 |
| MIDWIVES | 1 | 1 | 1 | 2 | 1 | 1 | 1 | 1 | 9 |
| CHEWS/JCHEWS/EHO | 2 | 5 | 4 | 6 | 4 | 5 | 8 | 2 | 36 |
| HEALTH ATTENDANTS | 14 | 9 | 4 | 8 | 4 | 4 | 2 | 1 | 46 |
| TRAINEES | 2 | | 2 | 2 | 4 | 2 | 2 | | 14 |
| CLEANERS | 4 | 2 | 1 | 3 | 3 | 3 | 2 | 2 | 20 |
| CASHIERS | | | | 1 | 1 | 1 | 1 | | 4 |
| AMBULANCE DRIVERS | 1 | | 1 | | 1 | 1 | | | 4 |
| TOTAL | 25 | 21 | 14 | 25 | 21 | 19 | 16 | 12 | 153 |



Rita and Juliette at Gmelina



Esther at Offia Oji



Uloma, Ebere + Faith at Odeligbo



Mary Jane at Odeligbo

ECONOMIC EMPOWERMENT



Gmelina women's enterprise group



Training of group at Offia Oji

Through the health centers, AMURT encounters many women who are the sole breadwinners in their families. Most are widows; others have husbands who are disabled. Local traditions continue to place widows at a big disadvantage. In the economic empowerment program, indigent women come together to cooperatively manage a revolving credit scheme. Interest free loans are made available to the women to start their own businesses. After two months, they start paying back 10 % monthly. After one year the loan is fully paid back. Every month while a new member is empowered by the group. AMURT provides basic training in business planning and bookkeeping.



Assessment for new members Elugwu Ettam

| PROJECT AREA | Members | Empowered |
|--------------|---------|-----------|
| Odeligbo | 43 | 40 |
| Ephuenyim | 28 | 28 |
| Offia Oji I | 30 | 25 |
| Offia Oji II | 11 | 10 |
| Elugwu Ettam | 21 | 18 |
| Gmelina | 23 | 22 |
| Total | 156 | 143 |

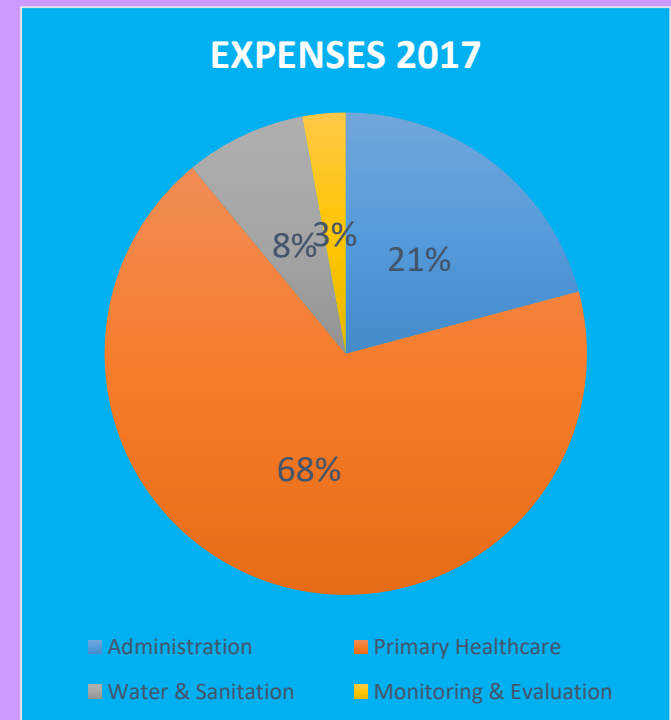
AMURT STAFF



Sitting left to right: Perpetua – midwife Offia Oji, Ibiam – program officer, Afuluenu - economic empowerment, Chinwendu -health education, Maryanne – midwife Akparata, Norah – family planning, Lilian – health worker, Stephen – office assistant, Daniel – chief lab scientist. Standing left to right: Lawrence – driver Effium, Martha – office manager, Rita – head midwife, Dr. Clifford – doctor Ikwo, Dr. Christian – doctor Ekumenyi, Nnache – head driver, Dr. Omogo -doctor Effium, Paul – construction manager, Dr. Agu – medical director, Chukwu – WASH manager, Agatha – midwife Inikiri, Dr. Serge – doctor Mgbalukwu/refferals, Marvelous – driver Ekumenyi, Sunday – driver construction. Back row left to right: Florence – office assistant, Mary – midwife Elugwu Ettam, Ogbonna – M&E manager, Chica – lab scientist, Peter – driver Ikwo, Ejike – driver WASH, Anayo – lab scientist Effium.

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CONTACT INFORMATION

Corporate Office:

42 Burma Road, Apapa, Lagos, Nigeria

Field Office:

26 Onwe Road Extension, Abakaliki, Ebonyi State, Nigeria

Postal address:

PO BOX 1382, Abakaliki, Ebonyi State, Nigeria

Email: nigeria@amurt.net

Telephone: +234-81-3306-7130

Web-site: www.nigeria.amurt.net

Facebook Page: AMURT West Africa

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AMURT Global Coordinating Office:

2502 Lindley Terrace, Rockville,
MD 20850 U.S.A.

