

1HP Health Walk Activity Report

1. Activity Information

Start Date:	17 th October, 2024
End Date:	18 th October, 2024
Location:	Haitel Hotel Kano
Completion Status	Completed
Reporting Period:	October 2024

2. Introduction and Overview of the Project

1HP Project

The 1HP Project funded by Treatment Action Group seeks to build the community demand of short course preventive therapy among all eligible populations through leveraging on existing structures, stakeholders and healthcare services in Kano State of Nigeria by December 2024. The objectives are as follows:

- To assess the perceptions of all at risk-populations, household contacts and eligible population on the acceptability of 1HP by December 2024
- To strengthen the knowledge levels of communities and other TB champions on a community led approach of 1HP in high burden LGAs of Kano state.
- To create Community demand for 1HP among at risk-population and household contacts at the State level.
- To advocate for a scaled up and sustained 1HP through mobilization of stakeholders at the state level.

3.1 Activity Summary

Objectives of the activity, target and strategies deployed for implementation

The objective of the meeting to Validate the data submitted by the TB local government

Supervisors (TBLS), discuss on the issues on ground and way forward and how to reduce gaps between the data submitted by the TBLS and that of the partners and also see how the partners can help to improve the current TB Program in the state.

Milestones

- Team Leads Formation and Briefing (8am-8:30am): All team leads were assembled and briefed on their roles.
- Material Distribution (8:30am - 9am): T-shirts and P-caps were distributed to the volunteers.
- Campaign Execution (9:00am - 12:30pm): All teams were deployed to designated areas to carry out their tasks.
- Public Engagement (9am - 1pm): Teams interacted with the public, distributing pamphlets and providing information.
- Support and Logistics: The welfare team ensured all volunteers were hydrated and supported throughout the day by providing water, glucose, biscuits and soft drinks.
- Debriefing (8pm - 9pm): Discussions on lessons, recommendations and challenges

Required Evidence

- Team Rosters and Briefing Notes: Lists of team members and summary of briefing sessions.
- Pamphlets and Banners: Copies of the materials used.
- Photos and Videos: Visual documentation of the campaign activities.
- Interaction Logs: Notes or records of public interactions and feedback received.
- Welfare Logs: Records showing hydration and support provided to volunteers.

3.2 Results & Accomplishments

outcomes and results achieved

The health walk reached an estimated 25,000 people during the activity through:

- 2,000 Pamphlets were shared containing information on TB, TPT and 1HP.
- Door to door team mobilized almost 10,000 households
- MC team were broadcasting the information and reached an estimated 10,250 people
- The Banner team reached an estimated 5,000 people and were able to cover more than 7 kilometers cutting across 8 communities and 2 Local Government Areas.
- The State Program Manager on TB & Leprosy represented the Honorable Commissioner of Health and addressed the gatherings at strategic locations.
- Community leaders were part of the walk and they addressed their community members which led to more acceptability.

3.3 Challenges and Mitigating Strategies Deployed

Challenges and the mitigation strategies deployed

The challenges encountered are:

- The security personnel requested additional money for fueling their vehicles during the walk and also the issue of insecurity in some parts of the state which has limited our door to door volunteers to close households within a 6M radius as advised by the security agents. The mitigating strategy made by the law enforcement agents was for the volunteers to stay on one lane and to not go deep into the community, so as to be able to provide the necessary protection.
- We had an arrangement with some selected volunteers who will have defined roles at the field, but unfortunately, due to some reasons of illness, family matters and others these volunteers were not able to attend, this has made some activities to not go as planned, the team leads had to improvise and nominate members at the field to make up.

3.4 Lessons and Recommendations

(Participants' feedback, Lessons and Recommendations)

PARTICIPANTS' FEEDBACK

State Program Manager on TB & Leprosy : *"Exhilarating and exciting experience. Only God Knows how many people were reached with this very important information"*

Community Leader: *"We are very happy that you considered this location for your activity, we will provide you with all the necessary support to ensure the uptake of 1HP and the eradication of Tuberculosis in Kano and Nigeria as a whole"*

Fatima Mohammad Matsayi (Team Lead Welfare Team): *"Thank you for inviting us to this very important occasion, we know more about 1HP now, I can't believe we walked for over 7KMs. I think we can do 10"*

LESSONS

- The team learnt on the importance of having a plan B for everything, just like what happens with the absence of some volunteers who had roles to partake
- Budgeting more resources for Walk activities particularly in the area of sound system, welfare and visibility

- There is need to have more communication team members of the project to further strengthen visibility

RECOMMENDATIONS

- Social media live should be done during the walk

3.5 Participants (*GESI based on activity with segregation of Male and Female*)

<i>Number of persons involved/participated/trained in the activity</i>				
<i>Non-Disability</i>		<i>Disability Inclusion</i>		
<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	<i>Total</i>
117	137	3	1	254

4.0 Unintended Outcomes

(Describe any unintended outcome discovered during the activity implementation) You can add additional rows if required	
1.0	With The Involvement of other stakeholders such as the Federal Ministry of Health, their team of 5 played a vital role in creating awareness in the communities through the door to door team.
2.0	Successfully engaged the Nigerian Institute of Traditional Medicine during the walk and provided an additional context to them on 1HP

5.0 Next Steps

S/No.	Activity	DRI	Timeline
1.	Development of Report	Rahama	2 weeks
2.	Debrief with team leads and key	Rahama	1 week

	stakeholders		
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5.0 Annex

Photos