

Job description

Job title	COVID-19 Advocacy and Accountability Officer, Kano State
Programme	Lafiya
Post holder	Vacant
Reporting to	Kano State COVID-19 Coordinator
Responsible for	N/A
Liaison with	Lafiya Programme Team, particularly the Advocacy and Accountability Coordinator
Hours	35
Type of contract	6 months up to 31 st March 2021

Organisation and programme

Options Consultancy Services Limited was established in 1992 and is a wholly owned subsidiary of Marie Stopes International. We are a consultancy organisation providing technical and management expertise in the health and social sectors to governments and international development partners to transform the health of women and children. We provide information, expertise and influence to governments, health workers, NGOs and businesses to catalyse change so that health services can be accessed by the people who need them most.

Options ensures high quality delivery of a considerable portfolio of health and nutrition programmes on behalf of a variety of clients, globally. We work with partners to strengthen all the health systems building blocks, often focussed on improving sexual, reproductive, maternal, new-born, child and adolescent health (RMNCAH) and nutrition. Evidence, accountability and social change are important elements of our work.

Options is a core partner of the consortium delivering the Foreign Commonwealth and Development Office (FCDO) Support for Health in Nigeria - Lafiya contract, led by Palladium. Lafiya is delivered at federal level, and with a focus on targeted states (Borno, Jigawa, Kaduna, Kano and Yobe) and additional 3 States of Kastina, Lagos and Zamfara for the COVID-19 response and support. The programme will run for an initial term of up to 7 years from February 2020 to finish by January 2027 (subject to availability of funding and approvals).

The objective of Lafiya is to improve health outcomes for the poorest and most vulnerable in Nigeria through the following interlinked outcomes (1) increased resources invested in health, and prioritisation of health by the Government of Nigeria (through civil society advocacy on human capital, community accountability for health; and use of data to inform government prioritisation of health); (2) improving effectiveness and efficiency of public and private basic health services (through health system strengthening, and working with the private sector to improve delivery of affordable health services for the poorest populations); and (3) increasing the modern contraceptive prevalence rate (through addressing social norms, demographic impact analysis, and support to family planning demand creation and delivery of services).

These outcomes will be achieved through a “joined-up, One-Team” delivery of the following outputs:

- i. Output 1 “Advocacy & Accountability”: Increased demand for affordable basic health services through community accountability, and increased prioritisation of human capital (health, education, nutrition, WASH) through civil society advocacy
- ii. Output 2 “Data for delivery / health prioritisation”: Improved awareness and prioritisation by senior leadership in Government of Nigeria, using data in line with a “delivery-type” approach
- iii. Output 3 “Technical Assistance to maximise Government of Nigeria resources and efficiency”: Improved efficiency of existing resources for delivery of health services
- iv. Output 4 “Private sector”: Improved effectiveness of private sector in delivering affordable basic health services
- v. Output 5 “Demographics and Family Planning”: Supporting family planning services through demand creation and addressing social norms/behaviour change including analysis and communication of the wider impact of demographics.

Background

The Government of Nigeria confirmed its first case of COVID-19 in Lagos State on the 27th February 2020 and as 13th September 2020, the Nigeria Centre for Disease Control (NCDC) reported a cumulative total of 56177 confirmed cases out of 440248 tested samples and 1078 deaths nationally.

The NCDC activated the health focused National Emergency Operations Centre (NEOC) upon confirmation of the first case. Immediately afterwards, the ‘Presidential Task Force (PTF) for the Control of COVID19’ was inaugurated on 7 March to lead the government’s multisectoral approach to tackle the pandemic. The PTF developed and released the immediate, medium and long term Nigeria COVID-19 Multisectoral Pandemic Response Plan (NCMPRP) articulating the country’s response strategy to “*Urgently prevent community transmission through aggressive containment measures, including travel restrictions and temporary lockdown of cities, states, schools and private facilities*”. Subsequently a number of States inaugurated their response taskforces and State EOCs.

FCDO approved Lafiya 6-months’ emergency C-19 support through the Palladium component of the Lafiya programme to run from 1 April-30 September 2020 across the five core Lafiya states (Borno, Jigawa, Kaduna, Kano, Yobe States) as well as three states to which Lafiya flexed (Lagos, Katsina and Zamfara States).

Building on this experience, the Lafiya programme has transitioned into a new phase of support. This continues to align with the three objectives of the UK government to supporting Nigeria’s COVID-19 response:

- Support to the COVID-19 response in Lafiya targeted states and at national level including flexing to other states where the need is greatest
- Support to continuity and access to essential primary health services
- Support to central role of health workforce in the response

The Lafiya Programme is also aligned with the recently developed National Health COVID-19 Pandemic Response Action Plan (NHC-PRAP) and seeks to complement efforts of other partners who are supporting Nigeria’s COVID-19 response, in particular the World Bank Regional Disease Surveillance Systems Enhancement (REDISSE) and COVID-19 Preparedness and Response (CoPREP) projects.

There is a need for improved advocacy and accountability to address the following challenges faced at the state-level:

- supported states are experiencing community transmission and cases of COVID-19 continue to increase, as evidenced by available data from NCDC and Imperial College projections
- Inadequate attention has been given to continuity of essential services and reduced budget releases to routine health services.
- Implementation of BHCPF was halted before the onset of the pandemic at the time when funding was most needed to support health services including response to COVID-19
- reduced government revenue has led to the BHCPF budget being reduced by 42.6% and both federal and state governments have had to revise and reprioritize their planned spending for the coming year.

Purpose of role

The role of the COVID-19 Advocacy and Accountability Officer, Kano is to provide support and guidance on accountability issues relating to COVID-19 and health security more broadly in collaboration with the Advocacy and Accountability Coordinator and in partnership with the PERL focal person in the state.

As part of this role, the post-holder will deliver guidance and innovative approaches towards COVID-19 community preparedness and response to strengthen health systems resilience. It will also include providing strategic guidance to the CSO coalition at the state level and other CSOs for effective and efficient performance as an accountability platform.

The post is based in Kano State with possible travel within Nigeria, as agreed with their line manager.

The postholder will be expected to liaise routinely with the Lafiya State teams, and Options' colleagues to agree on the precise approaches to be used.

Main duties

Facilitate the implementation of prioritized activities as agreed with stakeholders and in line with the COVID-19 approved 2nd concept note such as:

- Strengthen the capacity of CSO situation rooms to serve as key accountability platforms for effective stewardship by government actors
- Engage existing community structures such as CHIPS, WDCs, FHCs, SLAMs and CSOs in community-based surveillance with clear communication at ward and village levels.
- Support the ongoing advocacy at national level to review the NH Act, including provisions for robust health security funding as part of UHC financing reforms.
- Support tracking of funds from all sources into the state for Covid-19 and how it is being spent (in partnership with PERL).
- Support CSOs to undertake spot checks for PHCs, secondary facilities and isolation centres to assess how Covid-19 funds are being used as well as the main funding gaps.
- Engage directly with high-level political actors at federal and state levels to encourage increased public health spending as means to tackle Covid-19 and kick-start UHC reforms.
- High-level targeted advocacy for financing a PHC-driven UHC reform that can deliver equitable access to public health services.
- Amplify demand from civil society, SLAMs and WDCs for faster implementation of BHCPF alongside the Covid-19 response in order to increase access to the basic health package.
- In collaboration with PERL, support and strengthen the capacity of CSO situation rooms across States for effective monitoring and reporting.
- Engage and advocate to state legislatures and Ministries of Finance to establish dedicated budget line for public health emergency preparedness and response

Provide guidance on accountability issues relating to COVID-19 and health security more broadly to be taken up by the Civil Society advocacy groups/platforms in collaboration with the Advocacy and Accountability Coordinator and in partnership with PERL.

- Support the ongoing advocacy at state level including provisions for robust health security funding as part of UHC financing reforms.
- Engage with high-level political actors at the federal level to encourage them to increase public health spending as means to tackle COVID-19 and kick-start UHC reforms.
- Facilitate efficiency through priority-setting and resource tracking including COVID-19 resources.
- In collaboration with PERL, build the capacity of CSOs for effective monitoring and tracking of C19 resources

Identify and support documentation of lessons that will feed into health security discussions and round table at the federal but also for state and LGA level discussions with relevant legislators and stakeholders

- Develop monthly and quarterly reports as required for program documentation and learning
- Ensure any resources or training materials developed are shared across supported states

- Identify and share lessons to feed into the lafiya programme knowledge and learning platform

Note: this job description reflects the present requirements of the post. As duties and responsibilities change and develop the job description will be reviewed and be subject to amendment in consultation with the job holder.

Signed by:	Date:
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Person specification

Criteria	Essential	Desirable
Qualifications		
An MSc or relevant qualification or related comparable experience in health economics, public health, community/primary health care, social sciences or in a relevant field.	✓	
Experience		
At least 5 years of relevant experience of working on primary health care, epidemiology in Nigeria including advocacy and accountability interventions/framework.	✓	
Experience and understanding of LGA and ward development systems, and building a resilient health system including workshop facilitation, data collection, analysis, and report writing	✓	
Previous working experience with DFID and/or other international agencies.	✓	
Experience of developing strong relationships with government officials within health and finance authorities at national, State and LGA level and with civil society organisations in Nigeria	✓	
Experience of developing the capacity of counterparts/institutions including government officials, community structures and civil society organisations	✓	
Skills and attributes		
Excellent interpersonal, written, and oral communication skills in English required, working knowledge of Hausa and other local languages preferred	✓	
Technical specialism in Health Systems Strengthening, community preparedness and response or other related area	✓	
Knowledge about the Nigerian health system at the local, state and federal level	✓	

Ability to design training materials for a diverse range of audiences	✓	
Proven ability to network and manage relationships with clients, consultants and technical resource persons	✓	
Self-starter as well as good team-worker	✓	
Demonstrated ability to contribute to technical delivery of programmes.	✓	
Demonstrated interpersonal skills that enables effective team building and problem solving.	✓	
Demonstrated ability to contribute to technical reporting and strategic development		✓
Other Requirements		
Commitment to Equal Opportunities	✓	
First-hand experience of FCDO policies and programming.		✓
Right to live and work in Nigeria	✓	