



SUPPORTING RURAL GIRLS INTO HIGHER EDUCATION AT HEALTH TRAINING INSTITUTIONS

An innovative and cost-effective approach to training rural girls helps to generate more community health workers in Katsina state

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The Challenge

In rural areas, the number of girls who leave school with sufficient qualifications to attend health training institutions is low. Moreover, the lack of community understanding and misconception of girl-child education presents a serious challenge for the production of quality female health workers that originate from the rural communities. Poor financial capacity of parents to pay for education, including health training, encourages them to marry off their daughters as soon as possible.

In the health training institutions, inadequate spaces for the girls and a scarcity of female tutors to serve as role models discourages both the female students and their family members from sending them to the schools. Moreover, the number of student places available is restricted by the inability of the health training institutions to achieve full accreditation. The places that are available are more likely to be filled by students from urban areas.

“We have been searching and applying for school but could not get any. But God helped me get [on] the FYP. I hope God will see us through it successfully. The FYP is an important milestone in my life.”

FYP Student

The Response

The Women for Health programme addressed these challenges by formulating the Foundation Year Programme (FYP) for rural female students who lacked the required credit to gain direct entry into Health institutions. The course was designed to make up for the accreditation deficiencies of students as well as prepare them for further study.

The Women for Health programme focused on providing high quality training and ensuring a supportive learning environment for the FYP students. It also provided financial and moral support and suitable accommodation for its students.

The Women for Health programme established rapport with various rural communities across the state. Presentations of FYP objectives were made during community forums, and discussions on sponsorship and bonding held with parents and guardians of selected students. The unprecedented awareness created triggered a massive response in supporting the students with finances, materials and moral support. The rural populace involved saw the wisdom in having their own resident health providers who could deal with cases of maternal complication, child mortality and sundry challenges without recourse to travelling to the state capital or any of the General Hospitals in the Local Government Area Headquarters.

“I cannot measure the happiness I will get if I made my papers and get admitted into the HTI. What makes me happy is because I am about to become a midwife and be helping my people and myself. It has been my childhood dream, “Zaka samu daukaka sosai” I gain improved status and recognition”

The Results

The FYP has indeed built the capacity of the students and increased their self-esteem and self-confidence. Many students claim that the FYP certificate is a dream achieved. They can display their certificate like other graduates. They emphasize their role and usefulness to their community, roles they hope to play for the rest of their lives. They now act as role models in their communities and are called upon to help make important decisions.

The chart below summaries the results for the students enrolled in the first cohort of the FYP.

“I consider myself lucky for being part of FYP because my community respect me and feel I am an asset to them, they look up to me with high expectations”

Hauwa Rabiou Musa



Table 1: Distribution of FYP students

No of students enrolled	No LGAs where the students came from	No of students that gained entry to the HTI s	No of students that gained entry to Community midwifery	No of students enrolled in a preparatory programme
Bridging First and second cohort				
60	22	32	20	8
40	28	12	19	9
Preparatory First and second cohort				
45	20	19	0	10
15	13	0	0	14

Implications for policy makers

- The low cost and effectiveness of the FYP training approach means that it is affordable and replicable, by governments and for even the poorest families of students
- Once a critical mass of girls are train as health workers community will have enough female health workers that can manage our facilities at rural level.



Key Words: rural students, Foundation Year Programme, affordability

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