



Project Aisha TBA Preliminary Assessment and Mapping Lagos

Preliminary Assessment and Mapping of Traditional Birth Attendants (TBAs)

A preliminary mapping and assessment of Traditional Birth Attendant (TBA) practices was carried out in Epe and Ifako Ijaiye to support preparations for Project Aisha. The exercise aimed to:

- Identify TBA practices suitable for engagement.
- Understand the current realities of service delivery.
- Assess the availability of data, regulatory frameworks, and operational readiness at the community level.

The findings provide initial evidence to guide the design and scope of a detailed baseline assessment

How we identified the TBAs

We began by sourcing an initial list of Traditional Birth Attendants (TBAs) from Community Health Officers (CHOs) in both LGAs, in collaboration with the Lagos State Traditional Medicine Board (LSTMB). While this provided a useful starting point, it did not fully capture the situation on the ground—particularly in Epe. To address this gap, we applied a snowballing approach, working closely with community guides familiar with long-standing informal providers. This method expanded our reach beyond officially listed TBAs and led to the identification of additional practitioners who were active in their communities but absent from formal regulatory records and not submitting service data.

Initial Assessment Overview

In February 2023, the first assessment was conducted across both LGAs, covering a total of 35 TBA sites. In Epe, 18 sites were identified—10 (56%) were registered and 8 (44%) were unregistered. In Ifako Ijaiye, 17 TBAs were assessed, with 15 (88%) registered and 2 (12%) unregistered.

Reporting practices varied significantly: 10 of 18 sites in Epe (56%) and 5 of 17 in Ifako Ijaiye (29%) were not submitting service data at the time of assessment. This gap limits visibility into maternal outcomes and referral actions.

This initial assessment provided the foundation for broader mapping efforts, which subsequently uncovered additional unlisted TBAs.

February 2023 TBA Assessment - Quick Insights

Coverage: 35 TBA sites across both LGAs

Epe: 56% registered (10/18), 44% unregistered (8/18), 56% not reporting

Ifako-Ijaiye: 88% registered (15/17), 12% unregistered (2/17), 29% not reporting

Follow-up Assessment

In October 2023, a second assessment was conducted across 26 TBA sites. This round focused on verifying the status of previously identified practices, confirming their eligibility for engagement, and refining the list of TBAs suitable for inclusion in Phase 2 planning.

LGAs	Registered TBA Practices	Unregistered TBA practices	Total
Epe	13	5	18
Ifako-Ijaiye	8	0	8
Total	21	5	26

Findings in Epe

A total of 18 TBA practices were assessed in Epe, comprising 11 female-led and 7 male-led sites. Of these, 13 (72%) were registered, while 5 remained unregistered. Among the registered practices, 2 were not submitting routine service data. The assessment revealed a mixed landscape of long-standing formal providers and informal, community-trusted practitioners operating outside formal supervision and reporting systems—underscoring the need for stronger oversight and improved data visibility.

Findings in Ifako Ijaiye

Eight TBA practices were assessed in Ifako Ijaiye. All were female-led, formally registered with the Lagos State Traditional Medicine Board (LSTMB), and consistently submitting service data. Compared to Epe, the TBA environment in Ifako Ijaiye is more structured, with stronger alignment to regulatory and reporting systems.

Cross cutting issues observed

Unregistered TBA activity remains a significant system-level gap, particularly in Epe. Across both assessment rounds, additional unregistered providers were identified outside the official regulatory listings, highlighting incomplete visibility of the TBA landscape. In total, 13 unregistered practices—7 in Epe and 6 in Ifako Ijaiye—were discovered during the broader mapping process, despite not appearing in Lagos State Traditional Medicine Board (LSTMB) records.

Preliminary Assessments at a Glance



Key Challenges

- The presence of unregistered TBA practices, particularly in Epe, limits regulatory oversight.
- Weak documentation and inconsistent data reporting among some TBAs, reducing the quality of monitoring and evaluation.

Recommendations

- Facilitate the registration of unregistered TBAs through the Lagos State Traditional Medicine Board (LSTMB) to ensure they operate within a monitored and accountable system.
- Strengthen data management capacity through targeted training, coaching, and the introduction of simplified reporting tools for consistent use.
- Establish a referral pathway that encourages TBAs to collaborate more closely with Primary Health Care (PHC) facilities for timely referrals and follow-up.

Conclusion

This assessment provides a clearer understanding of the current TBA landscape in both LGAs and what is required for safe, collaborative engagement in Phase 2. Most registered TBAs are willing and able to participate, offering a strong foundation. However, addressing informal practices, improving data quality, and reinforcing regulatory mechanisms will be critical to ensuring maternal care within TBA settings is safer, more transparent, and aligned with the goals of Project Aisha.