



# Annual Report 2023



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# Meet Our Team

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## Our Founders



**PROF. O. A. LADIPO**  
(MB.BCH, FRCOG, FMCOG, FWACS, OON)

*PRESIDENT EMERITUS & CO-FOUNDER, ARFH*



**CHIEF (MRS) GRACE EBUN DELANO**  
(BA, MSC, FWCN, FIHS)

*VICE PRESIDENT/ED & CO-FOUNDER, ARFH*

## Board Chairs



**PROF. ADEYEMI OLU ADEKUNLE**  
(MB,BS, FWACS, FICS, FMCOG)

*CHAIR, BOARD OF TRUSTEES, ARFH*



**DR. JEROME ONOME MAFENI**  
(BDS, MPH, MSC)

*CHAIR, BOARD OF DIRECTORS, ARFH*

## Leadership



**DR KEHINDE OSINOWO**  
**PHD PUBLIC HEALTH, M.SC PUBLIC HEALTH (UK), PGD, WACN, RN, RM**

*CHIEF EXECUTIVE OFFICER, ARFH*



**DR KOLAPO OYENIYI**  
**B.SC, MBBS, MPH, FRSPH**

*DIRECTOR OF PROGRAMS*



**MR. TOPE KAZEEM**  
**MSC, MBA, FCA**

*DIRECTOR OF FINANCE*

# Vision and Mission

## VISION

To be a model non-governmental organisation working towards an African continent, free of disease.

## MISSION

- To collaborate with Government and other strategic partners in designing and implementing innovative and high impact programmes for improved health and well-being of individuals and families in Africa.

# Message from the CEO



A Year of Impact: ARFH's Achievements and Commitment to Health Advancement in Nigeria

I am delighted to present Association for Reproductive and Family Health's Annual Report for the year 2023, highlighting the impactful strides we have made in our mission to enhance the health sector of Nigeria. This report serves as a testament to ARFH's commitment to improving the lives of individuals across diverse states, communities, and hard-to-reach areas.

In the past year, ARFH has tirelessly worked towards complementing the efforts of the Nigerian government, implementing projects that address critical health issues. Our initiatives span family planning, TB, HIV, Cervical cancer and HPV vaccine, OVC, Malaria, Nutrition, and Capacity building of health workers. Through these endeavors, we have sought to bring about positive change and make a lasting impact on the health and well-being of various communities.

One of the significant achievements of 2023 is the successful implementation of various projects, reaching individuals in remote areas and making a tangible difference in their lives. Our dedication to improving maternal and child health, preventing the spread of infectious diseases, and fostering community development remains unwavering.

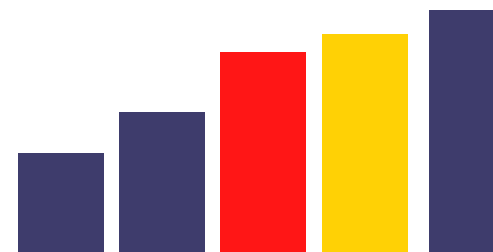
I am pleased to announce the appointment of a new Director of Programs, Dr. Kolapo Oyeniyi whose expertise and leadership will undoubtedly contribute to the continued success of ARFH. This addition to the ARFH team strengthens our resolve to adapt, innovate, and excel in our mission.

As we reflect on the past year's accomplishments, let us renew our commitment to the vision and mission of ARFH. Together, we will continue to create a healthier and more resilient Nigeria.

Thank you for your unwavering support and belief in the transformative power of accessible and quality healthcare.

Best regards,

**DR (MRS) KEHINDE OSINOWO**  
**Chief Executive Officer**



# Quantifying Our Impact in **6** 2023

## ICHSSA-2 Project

**122,132** | **5,199**

Beneficiaries served  
across Lagos, Edo and  
Kwara States

HIV+ children linked and  
retained on ART across  
Lagos, Edo and Kwara  
States

## ACE 4 Project

**41,000**

Pregnant women tested for  
HIV

## CDC SPEED Project

**86** | **16,632**

VSLA groups established  
across Delta, Ekiti and  
Osun states

caregivers and  
beneficiaries reached with  
financial literacy

## Global Fund GC6 TB Project

**98,352**

TB cases were diagnosed  
and notified which is 248.4%  
of our target for 2023.

**98,284**

of the notified TB patients  
were enrolled in care  
which is 99.9% of the total  
TB cases diagnosed.

## CODSaiN Project

**258,677** | **83,437**

Total DMPA-SC uptake at  
the end of yr. 1 of  
implementation

women on Self-  
Injection

## (PMI-S) project Task Order 3

**119**

health facilities in six Oyo State  
LGAs have implemented enhanced  
malaria care, achieving 100% testing,  
treatment, and ACT distribution for  
impactful results.

## Spotlight Initiative

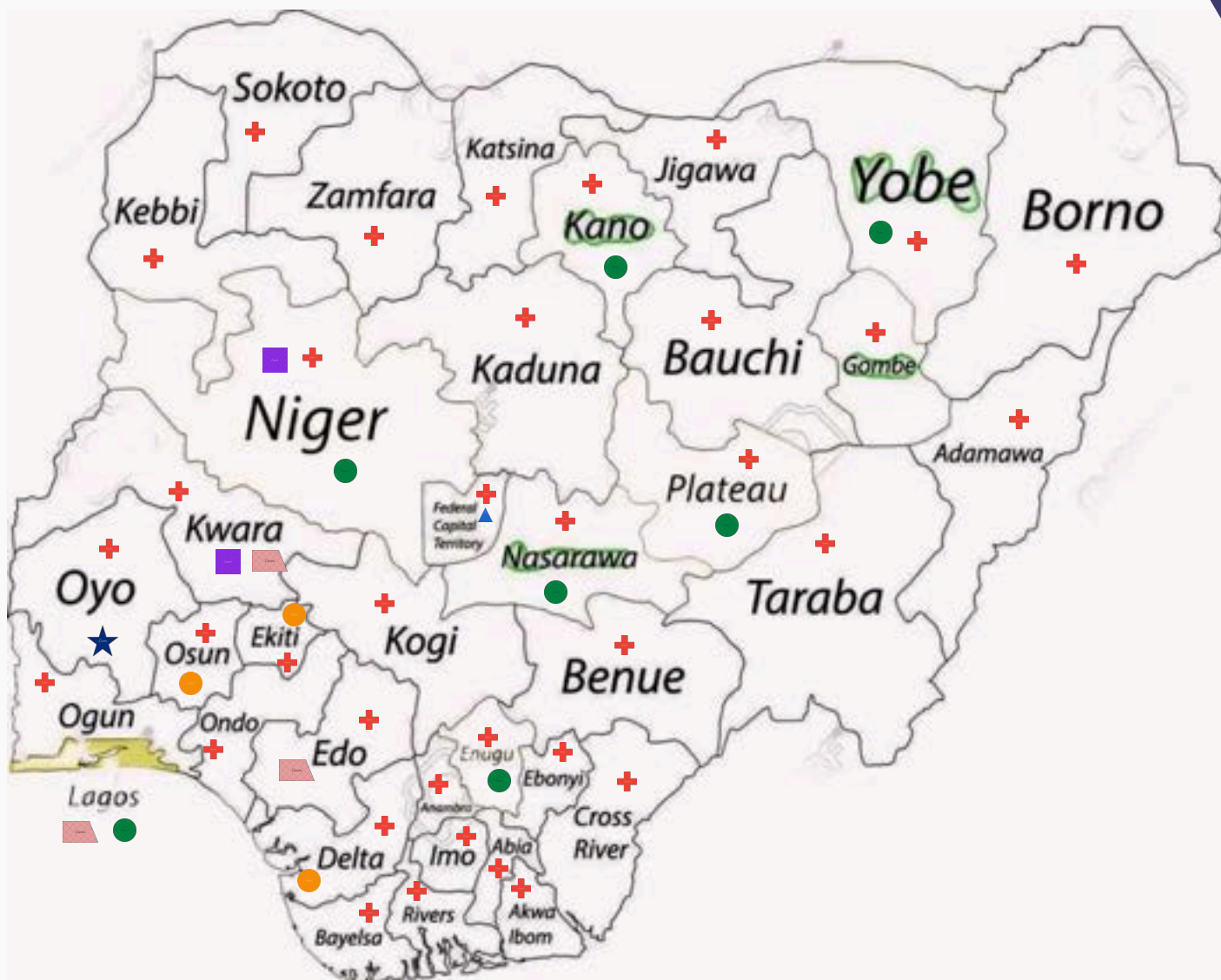
**57** | **36,610**


Schools in FCT  
sensitized on GBV

students were  
sensitized on SRGBV in  
FCT Schools


# Project Coverage and Reach

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 Community Oriented DMPA-SC Self Injection Acceleration in Nigeria (CODSAiN) Project ( Enugu, Gombe, Kano, Lagos, Nasarawa, Niger, Plateau and Yobe States )

 Integrated Child Health and Social Services Award (ICHSSA 2) (Edo, Kwara and Lagos States)

 TB Project ( Anambra, Delta, Kaduna, Kano, Kogi, Katsina, Nasarawa, Osun, Oyo, Rivers and Sokoto) and the Federal Capital Territory (FCT) and Community DRTB treatment in all the states except Lagos

 Accelerating Control of HIV Epidemics in Nigeria (ACE-4) Project (Kwara and Niger States)

 Sustainable Programs for HIV Epidemic Control and Equitable Services Delivery (SPEED) project ( Delta, Ekiti and Osun States)

 US President's Malaria Initiative for State (PMI-S) project Task Order 3 (Oyo State)

 Spotlight Initiative ( Federal Capital Territory-FCT)

# BMGF Funded CODSAiN Project

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## Project Overview



Following evidence-based achievements recorded in the implementation of the Resilient and Accelerated Scale-up of DMPA-SC/Self-Injection in Nigeria (**RASuDiN**) project, the Association for Reproductive and Family Health received a follow-on grant award from the Bill and Melinda Gates Foundation (BMGF) to implement Community- Oriented DMPA-SC/Self Injection Acceleration in Nigeria (**CODSAiN**)". This initiative is designed to improve access and reduce unmet needs for family planning services, most especially in Hard-to-Reach (HTR) communities.

The **primary objective of the project** is to enhance the acceptance and availability of family planning services, bridging gaps in unmet needs and missed opportunities. This is centered on the community scale-up of DMPA-SC and self-injection (SI) as an integral part of self-care within the broader contraceptive method mix. The project is strategically designed to optimize service delivery channels, utilizing a dual mechanism to balance the Demand and Supply implementation lens approaches. The project delivery strategies entail the enhancement of a framework for optimizing the efficient utilization of both healthcare facilities and community-based distribution (CBD) models through the engagement of community-based organizations in the four new project states.

Through the CODSAiN project, ARFH is expanding the CBD model more robustly and efficiently to 4 new BMGF's focal states, while retaining and consolidating the gains of the RASuDiN project in 4 previous states (Enugu, Lagos, Niger, and Plateau). The 8 selected states in the CODSAiN project include **Enugu, Gombe, Kano, Lagos, Nasarawa, Niger, Plateau, and Yobe**. The new focal states were selected based on data-driven decision-making of unmet needs for family planning in the states; Gombe (16-20%), Kano (16-20%), Nasarawa (21-25%), and Yobe (21-25%) [NDHS 2018). The blueprint for implementation in these new states hinges on the engagement of community-based organizations (CBOs) to coordinate the state-level implementation. These efforts are being complemented by the involvement of the State Primary Health Care Board/Agency, the LGA health educators, and CHIPS/CORPS for generating demand.

## CODSAiN Project Locations: 8 states



-  Sustained states (Enugu, Lagos, Niger and Plateau)
-  New states (Gombe, Kano, Nasarawa and Yobe)





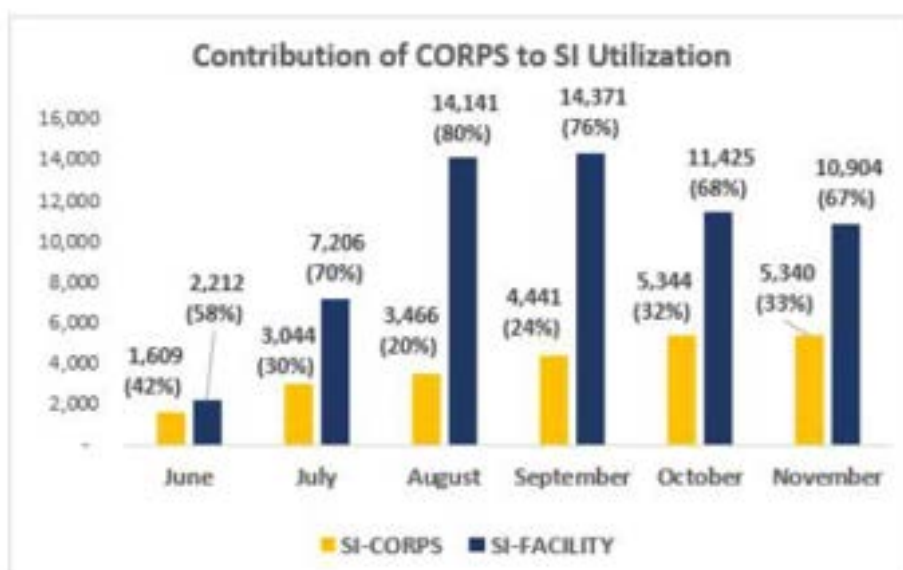
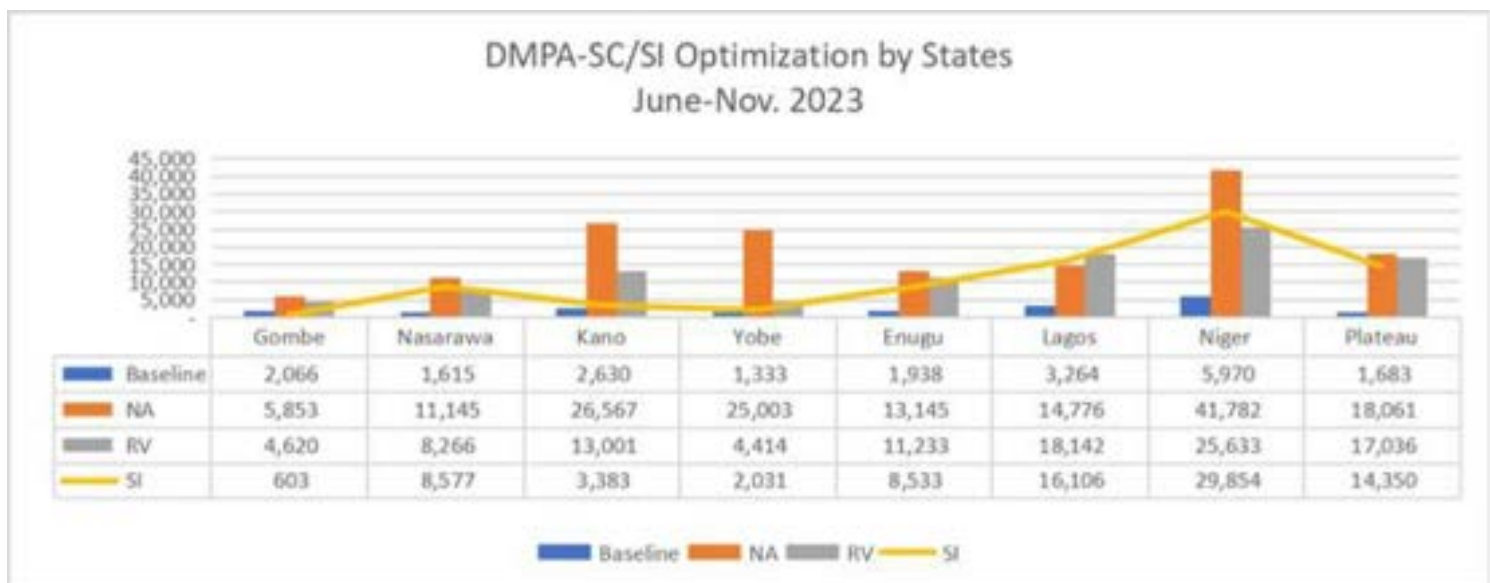
## Milestones (2023)

In the first half of the year, our focus was on co-creation and strategic advocacy activities, engaging stakeholders at Federal, state, LGA, and community levels. These efforts aimed to secure buy-in, creating an enabling environment for state ownership and sustainability. Inception activities included landscape assessment, selection of Community-Based Organizations (CBOs), and an Organizational Capacity Assessment Tool (OCAT) to evaluate CBOs' capacity.

A comprehensive training program was conducted for **4,427** healthcare providers across four newly targeted states, ensuring synergy between demand and supply aspects. Facility healthcare workers and community health extension workers were trained from April to June 2023, enhancing their competency.

Service delivery saw a remarkable increase, with clients opting for DMPA-SC and self-injection rising from **20,499** (baseline) to **258,677** by November 2023. Notably, **32% (83,437)** were self-injection clients. This achievement can be attributed to the project's culturally sensitive approach and CBD model in delivering family planning services at the healthcare facilities and directly within the communities themselves.

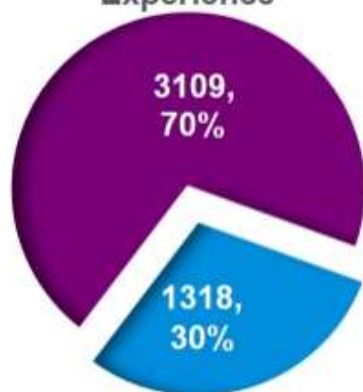
### Breakdown of Optimization by States



## Key lessons learned

- Engagement of CBOs: The use of community-based organizations with nexus at the local governments and the communities to enhance demand generation for DMPA-SC/SI uptake was instrumental to improved demand generation and effective project coordination and coverage. This improved uptake from 20,499 at baseline to 258,677 at Nov 2023.
- Enhanced Community Outreach and Services: The use of CHIPS/CORPs played a pivotal role in increasing the demand generation, counseling, and service delivery of DMPA-SC/SI. This was achieved through:
  - Door-to-door delivery of DMPA-SC and self-injection services by the CORPS/CHIPS who were equipped with adequate PT strips, BP apparatus CODSiAN Jackets, and bags.
  - Engagement of the health promotion unit at the state Primary Healthcare for integrated family planning messages into the health promotion activities of the state government to ensure program sustainability.
- Integration of community outreaches into Special occasions within the community: Leveraging any form of activity will help increase demand generation within the LGA, such as weddings, burials, birthdays, and other social activities.
- Engagement of Inter-Faith forum: This was essential for states like Kano, Gombe, and Yobe because of their religious inclination, and to obtain the buy-in of religious leaders/Gatekeepers in the uptake of DMPA-SC/SI.
- Government-Led Project Implementation: Demonstrating government ownership and leadership, the project adopted a cost-effective approach by maximizing available resources, state-level structures, and operational systems. These resources were harnessed as part of the government's counterpart contribution to the project implementation. This strategy not only minimized project costs but also reflected the government's genuine commitment to project sustainability.
- Sustaining mCPR Gains: Sustenance of mCPR (modern Contraceptive Prevalence Rate) gains achieved through DMPA-SC/SI by expanding Family Planning (FP) to Hard to Reach Areas in the new states and inclusion of Demand Generation activities for modern Contraceptives into other state-level DG activities. success is attributed to the project's culturally sensitive approach and the CBD model, delivering family planning services at healthcare facilities and directly within communities. The achievement reflects increased awareness, accessibility, and utilization of DMPA-SC and self-injection, showcasing the project's impact on reproductive health outcomes.

Distribution of trainees by Level of Experience



■ Limited Experience ■ Experienced

A total of **4,427** healthcare providers were trained across 128 clusters within 85 LGAs in the four new states. The trainees include **3,109** experienced participants (with prior experience in FP Services) and **1,318** participants with limited experience (CORPS). Two healthcare providers from the selected facilities (providing family planning services) were selected and trained.





CORPs giving health talk in Plateau State



A Client giving self-injection in Lagos State



A physically challenged woman being provided with FP services by CODSAIN CORPs in Niger State

258,677

Total DMPA-SC uptake at the end of yr. 1 of implementation



A CORPs Engaging women at ANC to use DMPA-SC in Plateau state



CHIPS Agents meeting with Community leader before Outreach at Kurti, Tamale Deba LGA, Gombe State



FAHCI CBO Executive Director conducting an outreach in a hard to reach community in Nasarawa State



MEL Officers conducting SSI at a facility in Yobe State

83,437

women on Self-Injection



Outreach at Kurugu Kwana LGA, Gombe State



Advocacy visit to Commissioner for health Yobe state during SSI visit to the state



A client injecting herself in Plateau State



A client injecting herself in Plateau State



DMPA-SC:SI being administered to a client in Niger State by a CORP



Community and Religious leaders' engagement in Kano State



A client injecting herself in Igbosetti LGA, Enugu State



A CORP during a mobilization outreach at OPI Market, Nsukka LGA, Enugu State



Using the cluster meeting to refresh providers on DMPA-SC:SI in Oji River LGA, Enugu State

# USAID funded ICHSSA-2 project

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## Project Overview

The Integrated Child Health and Social Services Award (ICHSSA) is a 5-year project funded by the United States Agency for International Development (USAID) with a Cooperative Agreement Number- 720 -620-20-CA-00004, being implemented by the Association for Reproductive and Family Health (ARFH) in a consortium with FHI 360 and Project Hope, working in partnership with 10 sub-recipients community-based organizations (CBOs) implementing in 40 USAID-supported priority LGAs in Lagos, Edo and Kwara States. ICHSSA 2 implements through 5 CBOs in Lagos State, 3 in Edo State, and 2 in Kwara State. FHI 360 and Project Hope have exited the project having completed their tenure on the ICHSSA 2 project.

Previously, the ICHSSA 2 project had ten sub-recipient community-based organizations (CBOs) implementing in Lagos State but as we entered this FY 23 with limited resources and expansion to Kwara State, the CBOs were reduced to five.

The overall goal of the ICHSSA 2 Project is to mitigate the impact of HIV/AIDS on vulnerable children and their households in Lagos, Edo, and Kwara States, through multi-prong approaches.

## Project Performance

During the year under review, the Integrated Child Health and Social Services Award (ICHSSA 2) Project sustained program implementation in Lagos, Edo, and Kwara States. ICHSSA 2 provided need-based and age-appropriate Services to **122,132** beneficiaries in the three intervention states of Lagos, Edo, and Kwara. A total of **109,716** were reached through the OVC\_SERV comprehensive model in Lagos, Edo, and Kwara States while **12,416** adolescent boys and girls aged 9-14 years were reached through the OVC\_SERV preventive model (Ebi-alayo and No Means No) in Lagos and Edo State. Of the **109,716** beneficiaries served through the OVC Comprehensive program, **67,014** children 0-17 years old, **4,684** 18-20 years, and **38,018** caregivers across the three states. **5199** of the **67,014** children 0-17 years served reported HIV positive status and are all on treatment, **60,168** reported HIV negative status, **1,622** reported no HIV status and **25** children do not require HIV test based on risk assessment. Overall, 98% of the OVC 0-17 reported known (positive or negative) HIV status with only 2% reporting no known HIV status.

Cumulatively, in the three states [Lagos, Edo, and Kwara] of the ICHSSA 2 Project, the OVC\_SERV performance achievement is **107%** [**122,132** achieved of the target of **114,085**] for OVC\_SERV (both comprehensive and preventive). In Lagos State, the OVC\_SERV comprehensive performance achievement is **122%** [**71,729** achieved out of **58,590**]. In Edo State **103%** [**19,761** achieved out of **19,143**] likewise in Kwara State **101%** [**18,226** achieved out of **18,081**] State. For the OVC\_SERV(Preventive) through the Sinovuyo (Ebi-alayo) and No Means No approach across the three states, the performance achievement is **69%** (**12426** achieved of the target of **18271**) in the FY23Q4.

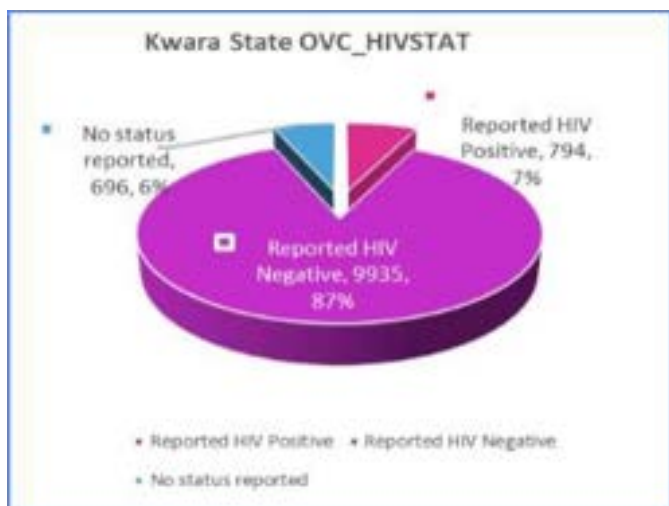
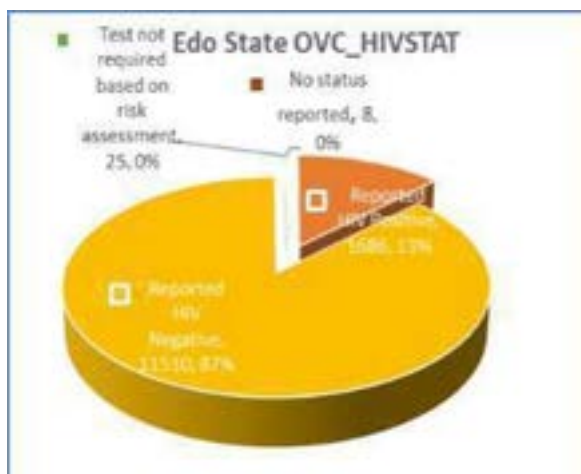
**In the three intervention states; Lagos, Edo and Kwara, 67,014** children 0-17 years served comprise **5,199** reported HIV Positive, **60,168** who reported HIV negative status, **1622** who reported no HIV Status while **25** children do not require a HIV test based on HIV risk assessment. This means that **98%** of children enrolled on the project across the three states reported known HIV status with **2%** reporting unknown status, the majority of whom are HEI less than 18 months with negative DBS results without a final outcome determined yet.

**122,132**

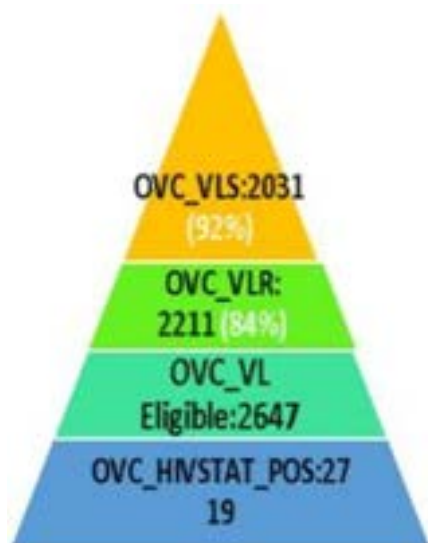
**Beneficiaries served  
across Lagos, Edo and  
Kwara States**

**5,199**

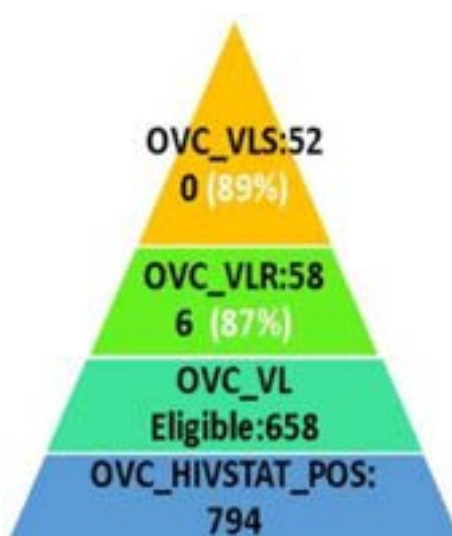
**HIV+ children linked and  
retained on ART across  
Lagos, Edo and Kwara  
States**



Cumulatively, in Lagos, Edo and Kwara State for FY23Q4, out of the **4797**(Lagos: **2,656**; Edo: **1492**; Kwara:**658**) CALHIV eligible for VL, **4,144** (Lagos:**2,211**– **84%**; Edo:**1347** – **88%**; Kwara;**586** – **87%**); have documented viral load results) while **3,803** (Lagos:**2031** – **92%**; Edo:**1252** – **93%**; Kwara:**520** – **89%**) of those who had documented VL were virally suppressed.



Lagos State VL Cascade



Kwara State VL Cascade



Edo State VL Cascade

A total of **36,398** children 0- 17 years enrolled on the ICHSSA 2 project in Lagos have a birth certificate. This represents **86%** of the children served by the project in the state during the reporting period. In Edo State, a total of **11,570** have a birth certificate which represents **88%** of children actively served on the Project in the State. The number of children with birth certificates on the project in Kwara now stands at **6,869** which represents **60%** of children currently served by the project. It also shows great improvement in the collaborative effort with the Nigerian Population Commission in providing this essential service for OVC on the project when compared with the achievement from FY23 Q1.

## Milestones

Our achievements for the period under review have been quite impactful as seen below under the 4 areas of focus of the ICHSSA 2 Project.

### Healthy

- **1,043** (M:522; F:521) adolescents accessed the AYFC for OTZ Club Meetings where HTS and SRH services were provided across supported facilities of the project.
- **37, 817** (M-16,779, F- 21,038) OVC were reached with nutritional education and counseling across the 3 project states
- Emergency Nutritional Support: 10 (M=4; F=6) malnourished children.
- **21,056** (M-10620, F-10436) adolescents received SRH services.
- Health insurance: 3507 enrolled both premium and waiver
  - o Premium enrolled (Total:2 507-Lagos=1000; Edo=1507),
  - o Waiver: 1507 enrolled in Edo,
- **3** Emergency Health Support for beneficiaries
- WASH:18403 (M:8,079; F:10,324) through the caregivers' fora, home visits, and other community platforms.
- CXCA\_SCRN: PLHIV screened **104** with 14 referrals; non-PLHIV:149 with no referral.

### SAFE

- **16,661** were reached (Lagos - 11,174; Edo - 2997 and Kwara – 2490) with 10 hours of gender norms intervention facilitated through adolescents and caregiver's fora
- **2,928** screened for gender-based violence, a total of 152 survivors were identified [Physical -2, and Emotional-150] and all 152 were provided counseling and psychosocial support

### SCHOOLED

- **48,340** (Lagos:32,356; Edo: 7985; Kwara:7999) children aged (5-17 years) were reached with educational services like enrollment back to school, tracking school attendance, progression, and performance.
- **5** OVC (3Female 2Male) were enrolled in various skill acquisition activities in the following areas; tailoring, hairdressing, truck driving, vulcanizing, and mechanic
- **30** children enrolled in the ECCD program

### STABLE

- **119** VLSA Meetings held with 1,977 (M- 71, F-1906) members
- Savings for the period – N29,666,650
- **N10,434,850** loan was given
- **N31,137,76** Share out at the end of FY23

## Mental Health ToT for ICHSSA-2 project staff by Heartland Alliance #16 Days of Activism Against GBV



**No Means No Instructor Training for both Boys and Girls in Lagos**

## Success stories

### “I Feel Empowered”: Supporting the Key Populations Community to Thrive in Nigeria

Rihanna is a 27-year-old Trans woman who resides in Lagos. Rihanna experienced severe economic problems, much as every other member of the Key Populations, particularly after she lost all her money and her cosmetics store due to demolition. This was made worse by the constant harassment, rejection, and insults she endured from her family, friends, and law enforcement officials who didn't support her new identity as a woman.

Nobody understood me when I said, "I always feel like a woman trapped in a man's body." She fell into depression and felt alone until she encountered Gift, one of the ICHSSA-2 project's community case managers engaged by Chamagne Foundation, who registered her on the Integrated Child Health and Social Services Award, which is funded by USAID and implemented by the Association for Reproductive and Family Health (ARFH).

Rihanna experienced love for the first time and a sense of belonging among a group of people who understood and accepted her new identity without stigmatizing or discriminating against her. She exhaled a sigh of relief and felt hopeful about her identity.

Needs analysis was done as part of the empowerment process for Rihanna to better understand her business interests and abilities. She reaffirmed her desire to restore her makeup company, a skill she has developed. With the assistance of USAID, ARFH provided Rihanna with the new makeup equipment and kits she needed to re-launch her career. She currently earns around \$30 from her business per customer, saves a portion of it, purchases 4 more makeup kits, and receives recommendations for home services from other consumers based on her experience and the satisfaction of her clients. Currently, Rihanna caters to three additional family members using the money she receives from her business. Ten additional trainees who are learning to become professional makeup artists were also being trained by her.

Rihanna later founded the Harmony Caregiver Foundation, a registered transgender-led, human rights organization that works to advance the rights and amplify the voice of the Trans population in Nigeria. Even among the Key Pops, the plight of Trans individuals is often overlooked. I sincerely hoped that Trans people would have a voice and would not experience what I went through. I intend to take the lead in advocating for other Trans people's rights.... Rihanna said.



Rihanna with her makeup kits with latest tools provided to her by USAID supported ICHSSA-2 project, ARFH. Photo Credit: ICHSSA-2 project, ARFH



Presentation of Makeup kits to Rihanna by the President Emeritus of ARFH, flanked by USAID team and ICHSSA-2 CoF. Photo Credit, ICHSSA-2 Project, ARFH

Promoting inclusive economic policies and programs that address the needs, rights, and health of the marginalized populations segment is essential for achieving an HIV-free generation. By empowering and facilitating access to HIV care and support services for vulnerable children and KP members who are at risk of HIV, the ARFH ICHSSA-2 initiative continues to achieve intended results through its proven community-based approach.

Rihanna expressed her immense gratitude to USAID and ARFH, in her words **“ICHSSA-2 project really transformed my life, empowered me, gave me hope, and helped me develop resilience in expressing my true identity”**. The ICHSSA-2 project is focused on mitigating the impact of HIV/AIDS on Orphans and Vulnerable Children and their families including key populations.

## Building Economic Resilience of Households through Village Savings and Loans Association (VSLA)



ICHSSA-2 Program Officer- HES & PPP- Ms Kemi Obalisa (2<sup>nd</sup> Left) with members of Omolere VSLA, Zumuratu, Ajeromi Ifelodun LGA, Lagos State. Photo Credit: ICHSSA-2 Project, ARFH

As a result of cultural barriers and gender inequalities, some women have experienced financial stress and hardship, in accessing funds for petty businesses and providing support to the family sustainably. The Village Savings and Loans Associations (VSLA), offer opportunities for financial literacy training and easy access to funds at mutually agreed rates, of not more than single-digit interest.

The Omolere Village Savings and Loan Association (VSLA), a communal savings group was established at Zumuratu, Ajeromi Ifelodun Local Government Area, Lagos with the support of USAID-funded Integrated Child Health and Social Services Award (ICHSSA-2) project, being implemented by Association for Reproductive and Family Health (ARFH). Omolere which means “Child Heritage” was founded by just 10 members to bring women together to cultivate a savings culture and use those savings as investment capital. In addition, VSLA enables members to pool their resources and access basic financial services including small loans as needed.

ARFH through its Community Case Managers trained the members on financial education and approved VSLA modules 1 to 7 consisting of the rules guiding the effective running and sustenance of a VSLA. Members meet once a week to save money and buy one to five shares at a predetermined price over eight to twelve months. During the first year, the group's membership grew to over 25 women, because of acceptance and increasing trust in the group. The Association progressed to establish two more groups in the Ajeromi LGA communities of Olusola and Apanpa.

The Omolere VSLA received help from ARFH in the form of communal rental business items (chairs, tables, canopies, and drums) to enable income-generating activities, owing to the group's resourcefulness, trust, and viability. The group held its annual share-out event, sharing accrued savings and interests of over N500,000 among its members when it reached the 9-month cycle. Three group members also received business startup materials valued at N120,000.

The excited VSLA's Secretary, Mrs. Jumoke Olowoporoku, stated that-  
“Following ARFH's training and assistance with the VSLA approach, we were inspired to establish credibility and manage a productive VSLA. We firmly believe that women's financial security depends on their ability to access funds and invest wisely. We are all contented and making progress as a group”.

Today, the Omolere VSLA group is involved in the process of registering with the Local Government. In the long term, they hope to move from informal activity to more formal financial services. Savings and loans are essential for women to manage unforeseen situations and strengthen household economic resilience.

### Engagement with Lagos State University for the Institutionalization of Para-social workforce certification program







## Key lessons learned

- Regular meetings with treatment partners (ACE-6 and KP Care 2 HALTD/GTE) will give room for proper feedback and improve the integration of OVC with the treatment program.
- Closer engagement with facilities to monitor the retrieval and update of viral load results
- Regular data triangulation with the treatment IP provides a platform for to timely identification of issues and quality service provision and follow-up on children and caregivers who are HIV positive
- Using data to track program performance and support program planning guides equitable resource allocation and effective supportive supervision to enhance project results.
- HES intervention is most effective when layered with multiple interventions to move a household from the provision to the promotion level. This compounding effect outperforms stand-alone intervention.
- Regular data triangulation of data with the treatment IP provides a platform for the timely identification of issues and quality service provision and follow-up on children and caregivers who are HIV positive

As part of efforts to share best practices and contribute to the body of knowledge, the ICHSSA-2 project recently published a research article in the Journal of AIDS and HIV Research titled: **“Triggers of sub-optimal HIV viral load suppression amongst vulnerable children on ART in parts of Lagos State Nigeria: Experience of USAID supported ICHSSA-2 project”**.

Link: <https://academicjournals.org/journal/JAHR/article-full-text-pdf/DFD933A71734>



•ARFH partnered with Lagos State University to train 40 Case Managers as Para-Social Workers, with Support From USAID

# Global Fund GC6 TB Project

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## Project Overview

Nigeria has the 6th highest burden of Tuberculosis (TB) globally and the highest in Africa with an estimated 440,000 TB cases annually. In 2022 only 285,600 of the estimated 479,000 were notified. Also, childhood TB case notification is low at 7% and likewise, Drug-Resistant Tuberculosis (DR-TB) remains a consistent challenge with only 3,981 (45%) of DR-TB patients diagnosed out of an estimated 15,000 cases in 2022. To overcome the low indices in the TB control programme, the National Tuberculosis, Buruli Ulcer and Leprosy Control Program (NTBLCP) instituted the Active Case Finding (ACF) strategy which is implemented by the Association for Reproductive and Family Health (ARFH) seeking to increase TB case notification.

The ACF strategy is being implemented in the urban slums of eleven states (Anambra, Delta, Kaduna, Kano, Kogi, Katsina, Nasarawa, Osun, Oyo, Rivers, and Sokoto) and the Federal Capital Territory (FCT). The strategies combine TB prevention, diagnosis, and treatment services that are accessible, equitable, and specific to the gender needs and cultural contexts of the target population regardless of the individual's socioeconomic status. It also involves community engagement, health education, and awareness, stigma and discrimination reduction.

The Global Fund (GF) is the leading donor for TB control in Nigeria. The NTBLCP served as the Principal Recipient (PR), while ARFH was the sub-recipient (SR) implementing the GC6 ACF and Community Programmatic Management of Drug-Resistant TB (CPMDT) in 35 states plus the FCT (excluding Lagos). Both the ACF and CPMDT components were implemented through a well-coordinated collaboration with community-based organizations (CBOs), trained Community TB workers (CTWs), community volunteers (CVs), and treatment supporters (TS). Also, the State TB program was supported by ARFH to ensure prompt access to high-quality, patient-centered DR-TB diagnosis, treatment, and follow-up services. Social and transport support was provided to patients and their treatment supporters



Health talk at Almajiri School in Gezawa LGA and sensitization of CORP Members at NYSC Camp, Kano State

The milestones achieved in 2023 are as follows:

**1,098,784**

households were visited  
in 11 states and the FCT

**3,844,841**

household members  
were educated on and  
screened for TB

**1,031,707**

presumptive TB cases  
were identified in the  
households visited

**98,352**

TB cases were diagnosed  
and notified which is  
248.4% of our target for  
2023.

**98,284**

of the notified TB  
patients were enrolled in  
care which is 99.9% of  
the total TB cases  
diagnosed.

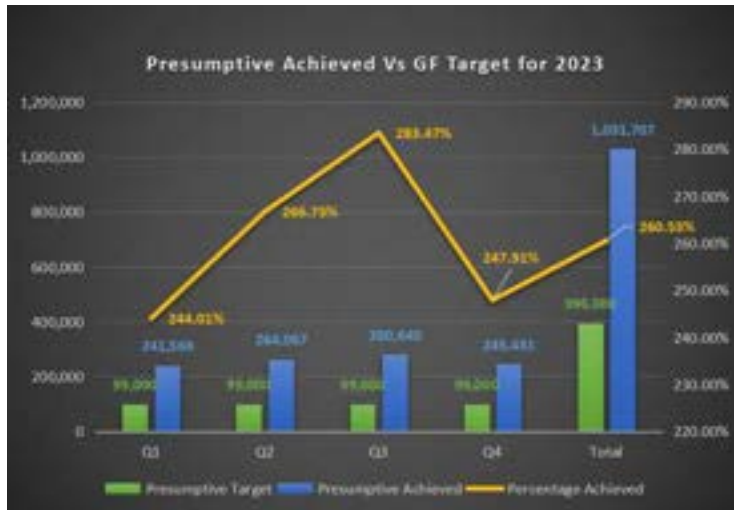
- **1,031,707** presumptive TB cases were identified in the households visited and in the community which is **260.5%** of our target for 2023 and **1,019,369** of them were tested for TB (**98.8%** of the total presumptive).
- There was an overall **82.5%** utilization of molecular tests (GeneXpert, TB LAMP, and Truenat) for diagnosis of TB in the 12 states which is a significant improvement from the previous years and has contributed towards an increase in DR-TB case detection.
- There were **2,839** DR-TB cases notified in 2023 which was **118.5%** of the target (the target for DR-TB patients in 2023 was **2,396** for 35 states and the FCT). This achievement was only possible due to the increased use of molecular tests in TB diagnosis. The number of DR-TB patients placed on treatment in all six (6) zones was higher than the target notification for the zones.



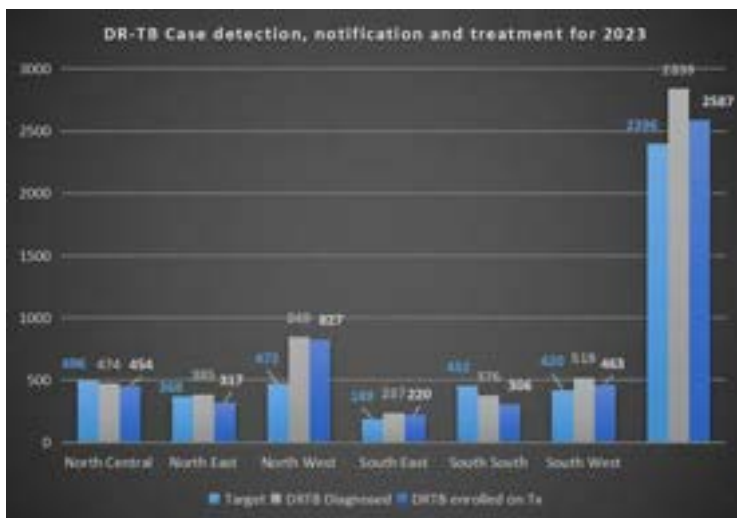
Sensitization by CBO staff at a School in Oyo State



House-to-house Active Case search at Hayin Rafi, Bagwai LGA, Kano State



### Achievements of GF Target for Presumptive and Positive TB Cases in 12 ACF States in Q1 to Q4 2023



### Achievement of DR-TB case detection, notification and treatment in the Six Geopolitical Zones in 2023

#### Success stories

Recruiting TB survivors as CTWs was a good choice as this helped to improve both presumptive TB and TB case findings e.g. In Kaduna state in Q1 2023, 20% of the TB cases diagnosed were by CTWs who were TB survivors and likewise in Nasarawa state in the same quarter, the CTW that reported the highest number of positive TB cases was a TB survivor.

#### Key Lessons Learned

1. TB Active Case Finding (ACF): Emphasizing the critical role of ACF, particularly through house-to-house initiatives, proved instrumental in surpassing targets for presumptive and positive TB cases in 10 out of 12 ACF states.
2. Engaging TB survivors: Leveraging the experience and influence of TB survivors as ambassadors significantly contributed to the success of TB active case finding, enhancing both case identification and retention.
3. Data Management Practices: Implementing rigorous routine data capturing, verification, and validation processes played a pivotal role in holding Community-Based Organizations (CBOs), Community Treatment Workers (CTWs), and state teams accountable. This proactive approach ensured that reported patients were genuine, preventing the inclusion of fictitious data and ultimately improving program performance.

## Awards received

The President Emeritus Prof O.A Ladipo was given an award by the NTBLCP for his contribution to the health system in Nigeria and most importantly ARFH's contribution to the TB program in Nigeria.

## Other project activities

- The lead CBOs across the 35 states and the FCT distributed palliatives to DR-TB patients during the recession of 2023. The palliatives went a long way to assist the patients with their nutritional needs and improve DR-TB treatment adherence and DR-TB treatment outcomes.
- The lead CBOs in the 35 states and the FCT and the State Adhoc Officers of the 12 ACF states actively participated in activities during World TB Day (24th of March 2023), National Childhood TB Testing Week (22nd to 26th of May 2023) and the National TB Testing Week (14th to 20th of August).
- Global Fund TB meeting with NTBLCP and partners where the modalities for the upcoming grant cycle 7 (2024-2026) proposal were drafted.
- ARFH actively participated in the Global Fund GC7 grant negotiation meeting from 4th to 15th September 2023 at Fraser Suites and Ajuji Hotels Abuja, Nigeria.
- ARFH actively participated in the GC7 Pre-implementation Stakeholders Meeting organized by the PR IHVN from the 18th to the 21st of December 2023 at Ritz Continental Hotel, Abuja, Nigeria.



Activities during the National Childhood TB Testing Week in Katsina (L) and Nasarawa (R) States



Distribution of Palliatives by SHEAD Osun (L) and RUSDI Kano, the Lead CBOs in both states to DR-TB patients

# ACE 4 Project

## Summary of ARFH's ACE-4 Project Implementation (2023)

ARFH, a consortium partner in the ACE-4 Project, collaborates with USAID and CCCRN to achieve HIV epidemic control in Kwara and Niger States. Responsible for TB/HIV, Prevention of Mother to Child Transmissions (PMTCT), and Cervical Cancer Prevention, ARFH signed a sub-agreement on February 28, 2022, marking the project's initiation on April 1, 2022.

In 2023, ARFH focused on TB/HIV collaborative activities to reduce the burden of Tuberculosis (TB) among People Living with HIV (PLHIV) and vice versa. Key objectives included establishing joint management mechanisms and delivering integrated services. Implementation started after addressing significant gaps in screening, collaboration, TPT initiation, and reporting.

### Key Actions Taken:

- Engaged State TB Programs for support and collaboration
- Conducted landscaping to identify gaps and address issues
- Trained staff across facilities, audited TPT initiation, and used electronic data for monitoring
- Established TB/HIV Points of Contact, supported clinics, and conducted on-the-job mentorship
- Optimized screening, GeneXpert, and adopted new modalities
- Facilitated joint supervision with State TB Programs and monthly meetings with TB/HIV consultants.

**Results:** ARFH successfully met and exceeded targets for all TB/HIV indicators, ending FY 23 on a positive note, and showcasing the project's impactful outcomes.

ARFH was able to end FY 23 which commenced on 1st October 2022 and ended on 30th September 2023 on an impressive note as targets were met and surpassed in all TB/HIV indicators as shown in the charts below;



### ARFH's ACE-4 Project - PMTCT Progress (2023)

The ACE-4 Project, supported by USAID, prioritizes Preventing Mother-to-Child Transmission (PMTCT) activities in Kwara State. Addressing programmatic gaps, only 10-20% of antenatal care sites offer PMTCT services, impacting HIV-positive pregnant women. In 2023, ARFH assigned the PMTCT/CECAP portfolio and collaborated with the consortium to enhance PMTCT services across 20 health facilities in 10 LGAs.

#### Key Activities:

- Activated 19 Traditional Birth Centres, 7 Private Health Facilities, and 16 Primary Health Centres in a Hub-Spoke arrangement.
- Conducted a 3-day PMTCT Scale-Up Training for TBAs, PHCs, and PHFs.
- Facilitated State PMTCT TWG Meetings and Community PMTCT Cluster Meetings.
- Provided training on the Management of HIV-Exposed Infants and Pediatric ART.

The ACE-4 Project focuses on capacity building and innovative strategies to enhance PMTCT service coverage and quality. The involvement of Traditional Birth Attendants and health facility operators aims to improve access to HIV testing, linkage to care, and the elimination of mother-to-child transmission in underserved communities.

#### State PMTCT TWG Meetings

Quarterly PMTCT Technical Working Group (TWG) Meetings in Kwara State bring together Consultant Clinicians, Directors, Deputy Directors, and program managers from various units and implementing partners. These sessions serve as a crucial think tank supporting PMTCT implementation, fostering collaboration among stakeholders in both formal and informal private sectors.



Cross-sectional picture showing the participants during one of the ePMTCT Cluster Meetings



PMTCT/CECAP Specialist giving an update on community PMTCT during one the TWG meetings

#### HEI and Pediatric ART Training

A 3-day training engaged 28 healthcare providers, including Clinicians and PMTCT/Pediatric Champions from 20 facilities and SMOH. The goal was to enhance capacity in managing HIV-exposed infants (HEIs) and Pediatric Care and Treatment.

##### Objectives:

- Understand PMTCT concepts related to HEIs
- Grasp the monitoring algorithm and diagnosis for HEIs
- Appreciate the concept of HEI management
- Understand pediatric-optimized regimens
- Collaboratively establish a minimum care, treatment, and support package for CALHIV
- Document service provision accurately in forms and registers
- Develop a post-training plan for implementation across supported sites.

#### Community PMTCT Cluster Meetings

These gatherings serve as a vital platform for stakeholders in the Prevention of Mother-to-Child Transmission of HIV. Participants share best practices, discuss challenges, and promote collaboration at the community level. The focus is on identifying gaps, validating data, and offering technical assistance to enhance the quality of PMTCT services in the community.



Pic showing TB/HIV Advisor during one of the sessions



The PMTCT/CECAP Specialist facilitating a Session during the Training on the Management of HEIs and pediatric ART

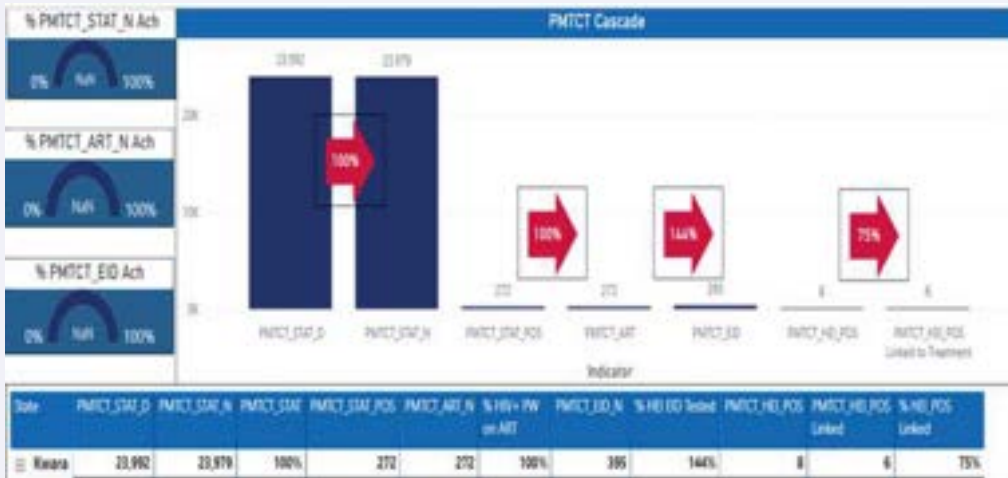


Prof Ajenifuja putting the participants through the thermal ablator

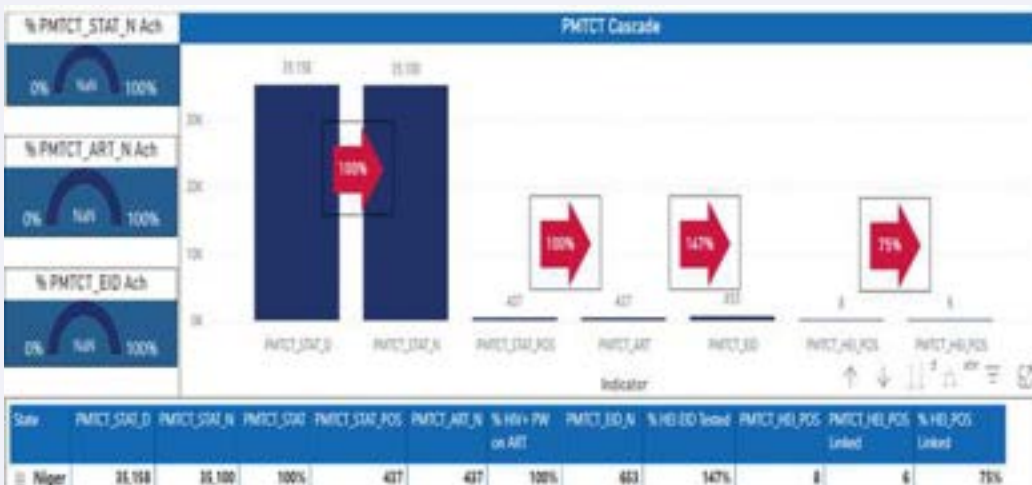


Group photograph with some participants during the training

### Kwara State PMTCT Performance



### Niger State PMTCT Performance



41,000

Pregnant women tested for HIV



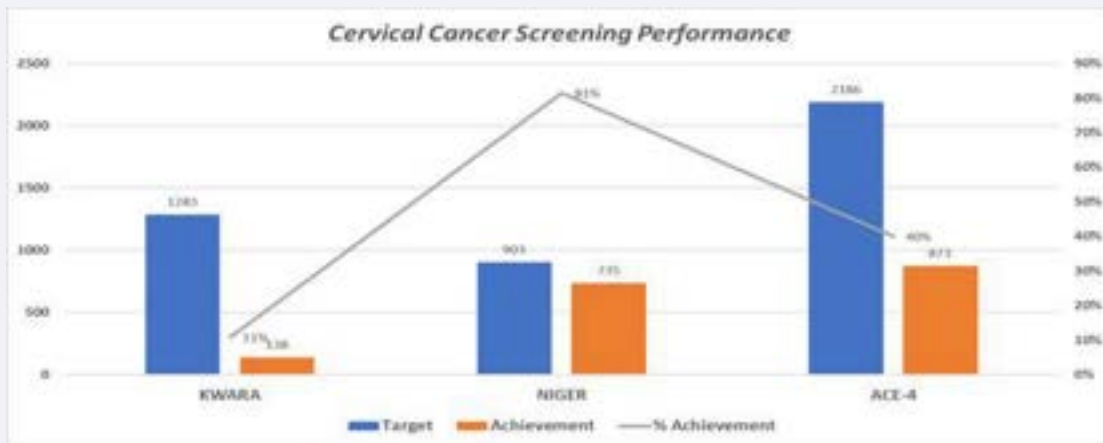
INDICATORS	KWARA			NIGER			ACE-4		
	Target	Achievement	% Percentage	Target	Achievement	% Percentage	Target	Achievement	% Percentage
PMTCT_STAT(D)	33970	23992	71%	11285	35158	312%	45255	59150	131%
PMTCT_STAT(N)	33631	23979	71%	11172	35100	314%	44803	59079	132%
PMTCT_STAT_POS	896	272	30%	212	437	206%	1108	709	64%
PMTCT_ART	890	272	31%	112	437	390%	1002	709	71%
PMTCT_EID	869	395	45%	116	653	563%	985	1048	106%
PMTCT_EID_POS	0	8	-	-	8	-	0	16	-
PMTCT_EID_POS_ART	0	8	-	-	8	-	0	16	-

**Cervical Cancer Prevention on ACE-4 Project**

Cervical cancer, a significant health concern globally, particularly in Nigeria, affects millions of women. ARFH, within the ACE-4 project, addresses this issue collaboratively. With an estimated 40 million Nigerian women at risk, the focus is on preventing cervical cancer, especially among Women Living with HIV and AIDS (WLHIVs) who face higher risks.

ARFH raises awareness, provides counseling, and educates women on healthy lifestyle choices. The cervical cancer prevention program includes screening for pre-cancerous lesions, supported by the CCCRN-led ACE-4 project. Visual Inspection with Acetic acid (VIA) is conducted across 10 facilities in Kwara and 15 in Niger State. The 'screen-and-treat' approach ensures immediate treatment for positive cases.

USAID's support enables ARFH to supply thermal ablation machines for treatment, reducing barriers to care. In 2023, healthcare workers in the deployed facilities were trained. Full-scale screening commenced in October 2024 across 23 supported facilities. The positive impact achieved in this short period is outlined in the following chart.



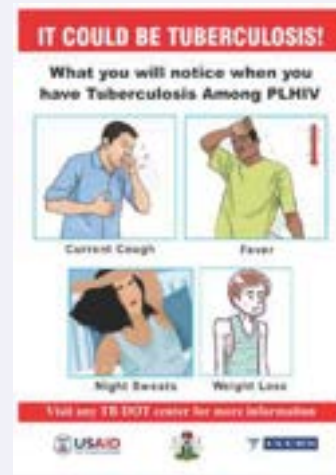
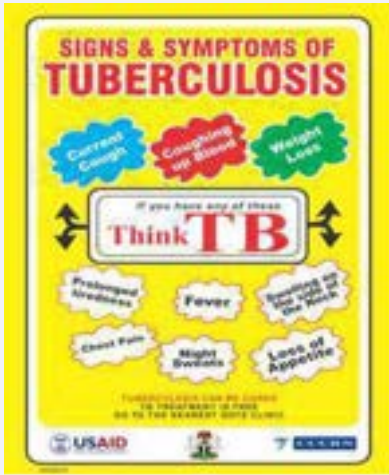
**Thermal Ablator Training (ACE-4 Project)**

In the quest for Cervical Cancer Prevention for Women Living with HIV/AIDS (WLHIV), the ACE4 project prioritizes early detection and treatment. Using Visual Inspection with Acetic acid (VIA) as the screening test, facilities lacked resources for WLHIV treatment in Kwara and Niger States. USAID's contribution of 23 Thermal Ablation machines (8 for Kwara, 15 for Niger) addressed this gap.

To ensure safe and effective usage, a one-day "Thermal Ablator Training for HealthCare Workers" was organized on July 18, 2023, in Kwara and Niger States. This training equipped 23 healthcare providers from supported facilities, covering eight in Kwara and 15 in Niger States, with the necessary knowledge and clinical skills for the prevention and management of cervical pre-cancerous lesions.

**Printing of IEC Materials for TB/HIV Collaboration**

To enhance information communication and bolster the knowledge of Adhoc Staff in TB screening, the Management approved the production of adapted Information, Education, and Communication (IEC) Materials. Four variations covering TB screening, TB signs and symptoms, and TB infection prevention and control were printed. These materials were distributed to all supported facilities in Kwara State, strategically placed in key locations, and displayed at the workstations of the ART Team and TB DOT Clinics.



Samples of the IEC Materials Produced on the Project in February, 2023



Planning Meeting with State TB Programme to Conclude Plan for the Commemoration of 2023 World TB Day



Pictures showing the Theme of 2023 World TB Day and the community sensitization activity



Picture showing TA Session with Adhoc Staff in Sobi Specialist Hospital, Ilorin



Pic. Showing the team with the oldest TBA in Kwara State

# ECEWS SPEED Project

ARFH, as a consortium partner on the Sustainable Programs for HIV Epidemic Control and Equitable Services Delivery (SPEED) project funded by the US CDC, collaborates with prime partner ECEWS and other organizations in Delta, Ekiti, and Osun States. The primary goal is achieving epidemic control, targeting specific sub-populations by age and gender.

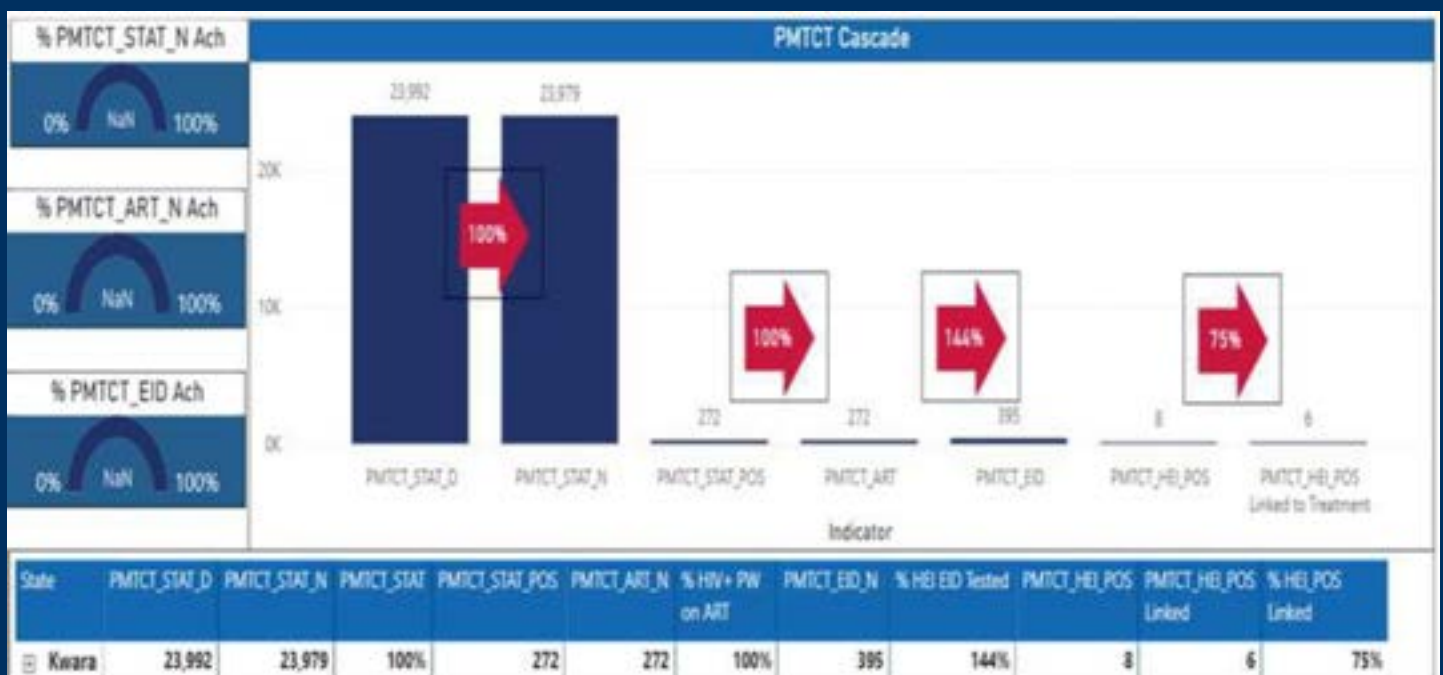
**Focus Areas:** ARFH provides technical support for the Orphans and Vulnerable Children (OVC) component, emphasizing enhanced service delivery in case management, community services, household economic strengthening (HES), and strategic information. Nine community-based organizations work with healthcare facilities to provide comprehensive care and support services across communities.

**Achievements:** During the reporting period, efforts intensified to identify, enroll, and assess eligible households, ensuring a structured household care plan. Quality services included caseload management, realignment, and technical assistance to CBOs and Case Managers. Collaborative efforts with the National Population Census improved birth certificate issuance.

**Milestones:** There were significant accomplishments, including enhanced coordination among partners, improved collaboration among state OVC and treatment teams, quality service delivery, and better performance documentation. Key achievements involved a project flag-up and review meeting, guided technical support, improved team cohesion, capacity strengthening, structured supervision, and on-site mentoring for impactful OVC care and support services across the three states.

## ARFH's Contributions to the SPEED Project

1. Project Onboarding: ARFH, the first consortium partner, provided crucial technical support at the project head office and across three states. This included start-up activities, work plan development, active participation in program management meetings, advocacy for the ECEWS SPEED project, and ground-breaking activities.

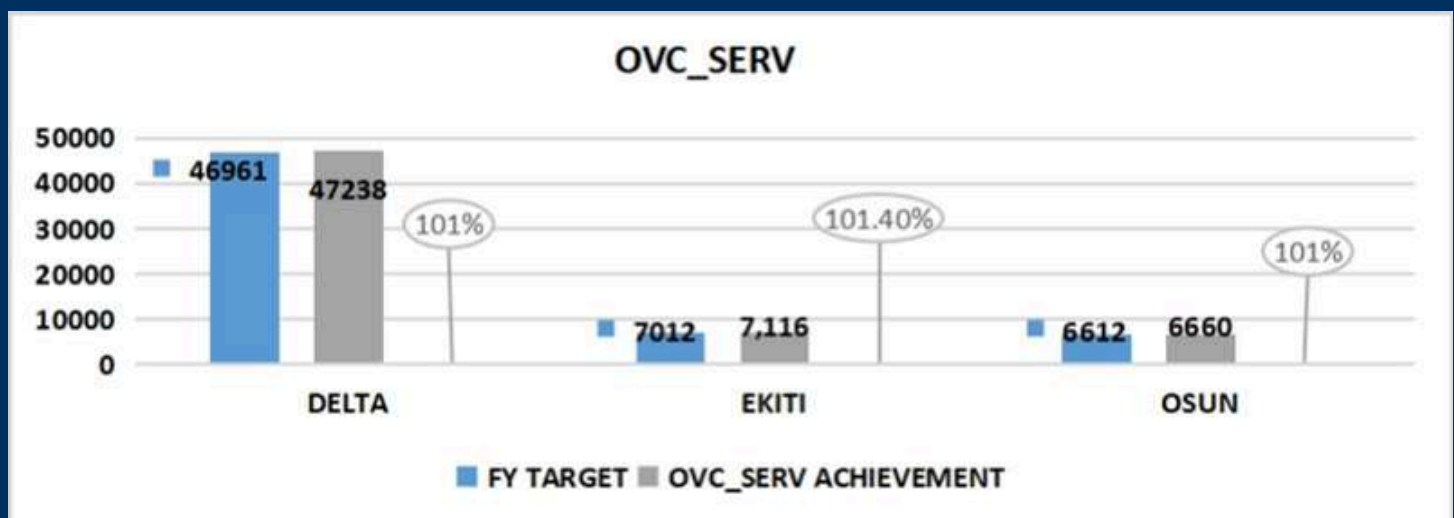


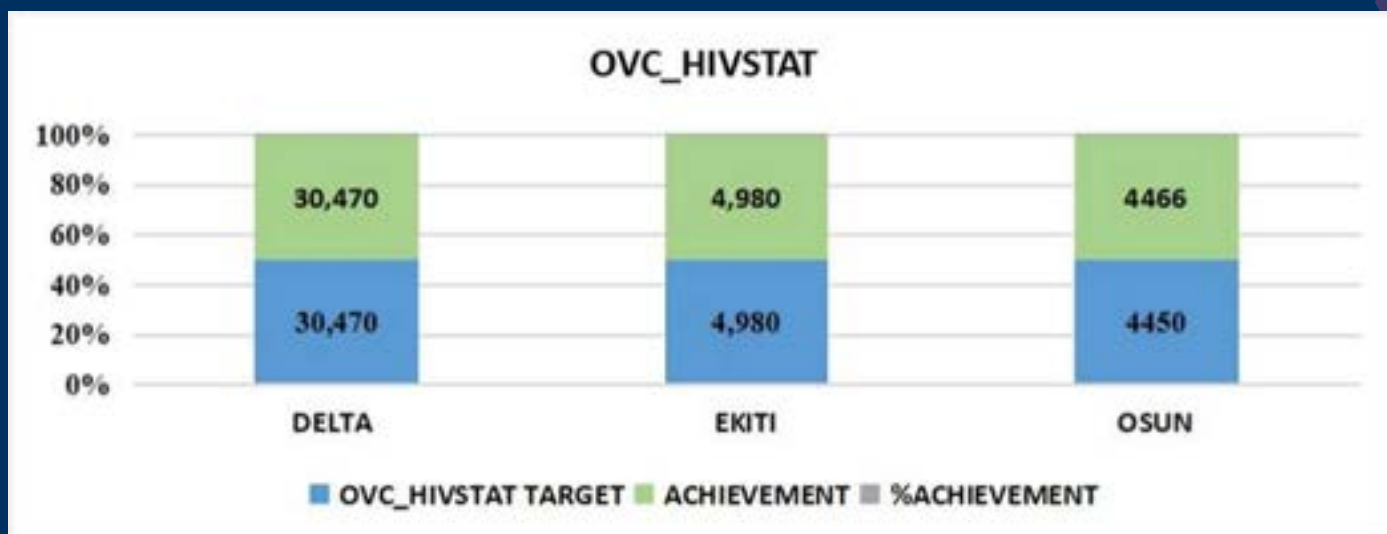
**2. Technical Assistance:** ARFH consistently delivered high-quality technical guidance to state project staff, CBO partners, and case managers. This encompassed capacity building, hands-on mentoring, and supportive supervision. Key achievements in case management and community services included:

- Establishment of community structures (Caregiver’s forum, Adolescent and kids’ clubs)
- Training 193 participants in case management
- Strengthening capacity for effective communication and collaboration with stakeholders
- Enhancing technical skills for the implementation of OVC HIV program goals
- Improving documentation from 10% to an impressive 90% across the board

**3. Strategic Information:** ARFH's SI team, in collaboration with the Director SI, led Data Quality Assurance (DQA) and Data Validation across states. Weekly virtual mentoring supported quality documentation, and NOMIS and NDR lite training enhanced CBO M&E officers' capabilities in data management and reporting. Noteworthy achievements included the update of registers and data triangulation, verification, tracking, and monitoring of treatment records, and the production and distribution of MIS tools to CBO partners for service documentation.

State	FYTarget	Current ly Enrolle d	OVC_S ERV	% OVC_ SERV Achie veme nt	FY Target	OVC_HIV STATAchi evement	% HIVSTAT Achievem ent
Delta	46,961	47,238	47,238	101	30,470	30,470	100
Ekiti	7,012	7,116	7,116	101	4,980	4,980	100
Osun	6,612	6,662	6,660	100	4,450	4,466	100





### ARFH's Household Economic Strengthening (HES) Program

ARFH contributes to the economic well-being of households, reducing vulnerability to HIV/AIDS through Household Economic Strengthening (HES). In the reporting period, 79 state project staff, CBO partners, and case managers received training on HES intervention processes, particularly using Child-Optimized Financial Education (COFE) to enhance money management skills for caregivers of vulnerable and HIV-affected children.

#### Key Achievements:

- Conducted COFE training for **79** participants (44 females, 35 males)
- Established 86 VSLA groups across three states with a total share value of **#5,459,052** and **#1,886,380** cash in box
- Distributed **#1,129,070** as social funds and **#938,500** as loans to VSLA members
- Reached **16,632** caregivers and beneficiaries with Financial Literacy, including skill acquisition for **143** adolescents
- Supported **365** households for Income-Generating Activities (IGA) empowerment
- Benefited **206** individuals from conditional cash transfer (CCT)

These efforts aim to ensure household stability and economic empowerment, contributing to the overall success of the program across the three states.

#### A Story of Hope

**Overview:** In Osogbo, Osun State, a tale of hope unfolded for 7-year-old Mariam Adebayo, a physically challenged girl living with HIV under the care of her grandmother. Mobility constraints hindered Mariam's attendance at a specialized school due to financial constraints.

**Intervention:** During the review period, intense advocacy for Public Private Partnership in Osun state resulted in the donation of a wheelchair for Mariam, enabling her return to school. Furthermore, ARFH procured school uniforms, bags, and sandals, and covered Mariam's school fees. To uplift Mariam's household, a crowdfunding campaign by the ARFH HES Officer raised N150,000, empowering Mariam's grandmother, Kudirat Popoola.

**Empowerment Impact:** Kudirat, previously unengaged in income-generating activities, received funds to start a foodstuff business. This family-centered intervention aimed at holistic support for both Mariam and her grandmother.

**Outcome:** A follow-up update revealed Mariam's regular attendance at school, adherence to medications, and the positive progress of the household business. The continuous monitoring ensures sustained progress in both education and business, showcasing the success of this family-focused intervention.

### Success Story: Local Economic Transformation, Osun State

**Overview:** ECEWS SPEED initiated a groundbreaking mission to address economic challenges in Osun State by establishing Village Savings and Loan Associations (VSLA).

**Intervention:** Seven VSLA groups were strategically established in marginalized communities, fostering structured saving and lending practices, and dismantling financial barriers.

**Impactful Programs:** Training empowered **147** VSLA members with financial literacy skills, creating a collective fund for accessible credit. This initiative catalyzed economic diversification and inspired success stories.

**Transformation:** ECEWS SPEED's intervention granted financial inclusion, empowering individuals and elevating local economies beyond traditional sectors.

**Empowerment and Progress:** Access to credit and savings unlocked economic potential, expanding enterprises and fostering success stories. The initiative serves as a guiding light for similar endeavors across Nigeria.

This transformative journey showcases the power of grassroots endeavors and community synergy in propelling economic and social advancement.



VSLA intervention in Olorunda Community



VSLA Intervention in Ila Community

### Success Story: Delta State

**Overview:** In Delta State, a struggling mother of seven faced economic challenges, heavily relying on a small soap business for survival.

**Intervention:** Through Household vulnerability assessment, HES intervention, and financial education, the family's economic situation was transformed.

**Impact:**

- The husband secured a menial job, improving financial stability.
- The caregiver received IGA support, transitioning from retail soap buying to manufacturing and selling to retailers.
- The expanded business enhanced economic strength, addressing financial difficulties and supporting the children's re-enrollment in school.

This success story in Delta State reflects the positive impact of targeted interventions, turning a once challenging situation into a hopeful and thriving one.

### Ekiti state: Overcoming Challenges and Building Resilience:

Mrs. Adesua Funmilayo is a widow and a mother to four children. She was stigmatized and maltreated by her husband's family members who took away three (3) of her and some of her late husband's properties used for business. The emotional breakdown increased when her last child, an eight-month-old baby took ill and became severely malnourished (weighing 3.5kg). She was identified at the facility where she takes her ARV, subsequently enrolled into the OVC program, and empowered with twenty-five thousand naira (#25,000) to start the "cooked noodles (Indomie)" business. Her child was provided with a nutritional emergency (Baby food and a complimentary adequate diet).



### KEY LESSONS LEARNED:

- Continual technical support, brainstorming discussions, and daily reporting feedback mechanisms have greatly enhanced team performance and increased project deliverables.
- Competencies demonstrated by the workforce following the case management training attest to significant improvement in project deliverables.
- Hands-on mentoring of CBO staff and case managers, including regular supportive supervisory visits to facilities in collaboration with treatment partners has contributed immensely to achieving project objectives.



ARFH TA OVC and team during case management training in Delta State



Pre-training planning meeting of facilitators and ARFH OVC state team in Delta State



IGA empowerment, Ekiti



Mobilization and Formation of new VSLA group in Iwo LGA, Osun state



Empowerment of start-up material for beneficiaries in Ekiti State

# US President's Malaria Initiative for State (PMI-S) project Task Order 3

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## Project Overview

The Association for Reproductive and Family Health (ARFH) is one of the four grantees engaged to implement the "US President's Malaria Initiative for State (PMI-S) project in Oyo State, implemented by Management Sciences for Health (MSH) with funding from the United States Agency for International Development (USAID). The project's primary goal is to support the Government of Nigeria to reduce malaria morbidity and mortality in Oyo State. ARFH is contributing to this goal by working in the six most inaccessible/hard-to-reach Local Government Areas (LGAs) in Oyo State through improved facility monitoring and clinical mentoring of health workers. The LGAs are Atisbo, Ibarapa North, Irepo, Iwajowa, Oorelope, and Olorunsogo.

## MILESTONES/ACCOMPLISHMENTS

The objectives of the Grant Under Contract (GUC) are to improve the quality and access to comprehensive malaria case management services, improve data quality interpretation and use, and improve drug-based prevention and treatment approaches (IPTp), at the 119 health facilities in the six selected LGAs through Routine health facility-based monitoring, clinical mentoring, data review and triangulation visits to 111 primary health facilities and 8 secondary health facilities in the six Local Government Areas of implementation in Oyo State ( **Iwajowa, Atisbo, Oorelope, Ibarapa North, Olorunsogo and Irepo**)

Staff capacity was enhanced through training, and the ARFH team conducted supervisory and monitoring visits to provide support. Additionally, collaboration with the community ward development committee was established to mobilize community members to access malaria services at the facility. Partnerships were fostered with the Local Government Area (LGA), State, and other implementing organizations. ARFH continued its efforts through Collaboration with community stakeholders established to encourage effective utilization of the facilities. Provision of technical support to health workers through mentoring and on-the-job training on data validation and correction to ensure good data quality, to address identified gaps, and to collaborate with stakeholders to address/ resolve identified challenges have been the ARFH priority to achieve the set objectives.

There was also improvement in the utilization of health facilities for antenatal services by pregnant women due to strategies developed by the ARFH project team, facility staff, and community stakeholders. The strategies include community outreaches/ mobilization, male involvement to educate pregnant women on the importance of IPTp uptake, the use of LLINs, and environmental sanitation.

## Notable achievements

- Improved knowledge of health workers on malaria case management as seen in the reduction of errors in conducting RDTs
- Reduction in drug administration and documentation errors
- Through collaborative efforts spearheaded by ARFH in partnership with stakeholders, significant strides have been made in enhancing the utilization of select facilities.
- Maintaining **100%** malaria testing, treatment rate, and ACT given in the implementing LGA.
- Increased client flow starting from May 2023, fever testing rate in February data shows **2,913** clients seen, and November data shows **4,498** clients seen for fever cases. The month with the highest client flow is August with **6,171**. This data shows that the strategies developed (male involvement, community sensitization, religious leaders' involvement, and engagement with WDC) contributed to the increase in client flow to the health facilities across the 6 implementing LGAs.
- Re-activation of the Local Government Ward Development Committee (WDC) in the community.
- Re-opening of five abandoned Health Facilities as a result of ARFH project team intervention



### Persons with Fever (Jan-Dec 2022 Vs 2023)



### JAN - DEC 2023 (Testing Rate & TPR)



### Treatment Rate (JAN - DEC 2023)



## SUCCESS STORIES

Male involvement has led to husbands coming with their wives to access malaria treatment and IPTp uptake during ANC services.



Opening of the abandoned PHC (Abule Bello PHC, Ibarapa North)

Opening of the abandoned PHC (Abule Bello PHC, Ibarapa North) the patients seen for the beginning month 44 out of which 11 were positive for malaria.



# Spotlight Initiative

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**Spotlight Initiative**  
To eliminate violence against women and girls



*Activity 4.2.11: Utilize sports, arts (including drama), and other creative mechanisms to support the long-term recovery of women and girl survivors of VAWG/SGBV/HP. Specifically, ARFH was expected to facilitate a school-related gender-based violence (SRGBV) sensitization campaign and reach out to survivors in selected secondary schools in the FCT- Abuja using the Spring Manual.*

About 31% of girls aged 15-24 years have experienced physical violence since the age of 15 years while 5% of adolescent girls (aged 15-19) and 6% of young women (aged 20-24 years) have experienced violence during pregnancy. Also, 8% of adolescent girls (aged 15-19) and 10% of young women (20-24 years) have ever experienced sexual violence while 3% of adolescent girls and 6% of young women experienced sexual violence in the past 12 months before the 2018 NDHS. However, only about 30% of AGYW aged 15-24 years who had ever experienced physical or sexual violence sought help to stop the violence.

Despite the growing interest in alleviating the burden of VAWG in Nigeria, the public health concern continues to be a growing situation and has become a reality for many Nigerian women and girls (Spring Manual).

School-related GBV is also a concern as this is on the increase. School-related gender-based violence (SRGBV) is a phenomenon that affects millions of children, families, and communities and occurs in all countries in the world. It can be defined as acts or threats of sexual, physical, or psychological violence occurring in and around schools, perpetrated as a result of gender norms and stereotypes, and enforced by unequal power dynamics (UNESCO 2016).

The Spotlight Initiative therefore supported ARFH to sensitize a minimum of 35,000 students in the FCT on GBV and to establish girls GBV clubs in 20 schools.

Objectives of the activity are:

- Provide access to quality services and tools (**Spring Manual**), that will support piloting the effects of psychosocial rehabilitation (e.g strengthening resilience, building confidence, and promoting social inclusion) in support of the long-term recovery of girl survivors of SRGBV in the FCT - Abuja.
- Orientation meeting with relevant school administrators, Gender officers, counsellors, and other stakeholders.
- GBV sensitization campaign in at least 20 secondary schools in FCT-Abuja reaching out to a minimum of 35,000 students.
- The establishment of the GBV clubs in 20 selected schools.

Staff from ARFH and NYSC Anti-AIDS club members visited a total of **57** schools for gender-based violence sensitization. **36,620** students comprising **15,820** boys and **20,800** girls were reached through different mediums. All the schools have existing gender-based clubs but which were no longer functional. ARFH assisted **17** focal schools in enhancing and establishing clubs, offering them Spotlight Initiative branded souvenirs.



## IMPLEMENTATION STRATEGIES

Objectives	Strategies	Activities
<p>Orientation meeting with relevant school administrators, Gender officers, counsellors, and other stakeholders.</p>	<p><b>Advocacy</b></p> <p><b>Capacity Strengthening</b></p>	<ul style="list-style-type: none"> <li>• An advocacy visit was conducted to the FCT Education secretariat and UBEC secretariat which led to collaboration by the two establishments and approval to enter schools.</li> <li>• Capacity strengthening was conducted for 30 selected staff of the Education secretariat, UBE Board, school administrators, gender officers, counsellors, and other stakeholders to identify &amp; support GBV survivors as well as the recovery process using the Spring manual.</li> <li>• Their capacity was also strengthened to run the GBV club in schools.</li> </ul>
<p>GBV sensitization campaign in at least 20 secondary schools in FCT-Abuja reaching out to a minimum of 35,000 students.</p>	<p><b>Sensitization</b></p> <p><b>Community mobilisation</b></p> <p><b>Collaboration</b></p>	<p>Sensitization was conducted in 57 schools to educate students on GBV using school general &amp; gender Assembly and other school platforms. The International Technical Guidance on Sexuality Education was a major guide in this conduct.</p> <p>Teachers and school heads were engaged in a day dialogue meeting to support the identification &amp; care for gender survivors and the formation/strengthening of girls' gender clubs in schools.</p> <p>ARFH collaborated with the FCT NYSC Anti-AIDS club where the members were trained and deployed to work with ARFH staff in reaching schools. This was necessary because of the requirement for adequate manpower to reach all the schools within the contract period.</p>

Provide access to quality services and tools (Spring Manual), that will support piloting the effects of psychosocial rehabilitation (e.g. strengthening resilience, building confidence, and promoting social inclusion) in support of the long-term recovery of girl survivors of SRGBV in the FCT - Abuja.	IEC	A soft copy of the Spring manual and the Spotlight initiative supported Teachers Handbook on ASRH was provided to trained teachers for use in school-based implementation and running of the gender clubs.
The establishment of the GBV clubs in 20 selected schools.	Project Sustainability	<ul style="list-style-type: none"> <li>Formation and inauguration/strengthening of GBV club to ensure efforts continuity.</li> </ul>
Monthly monitoring and evaluation of school clubs.	M&E	Supportive supervision was conducted to selected schools by the NYSC corps members and ARFH.



Group photograph of participants at the Stakeholders Orientation Meeting



The Gender Officer of the FCT UBEB, Dr. Taminua addressing participants during the orientation meeting

# 57

Schools in FCT sensitized on GBV

### Recommendations of the Stakeholders

The stakeholders were tasked with providing recommendations for the prevention of SRGBV in schools. The following recommendations were made:

- Nigeria should adopt the Jamaica model where girls were taught the act of martial arts to be able to protect themselves from abuse.
- The need to engage with religious institutions for them to mainstream discussions on putting a stop to both GBV and SRGBV was stressed by participants.
- The importance of all schools having a code of conduct in dealing with SRGBV was stressed.
- Naming and shaming could be a way of reducing SRGBV. All schools should start this practice no matter how little the violence may be
- Establishment of a gender desk office with trained officers in each school.
- Though the Nigeria Police was said to have been trained this has not cascaded to a good collaboration with schools on the issue of arrest and prosecution of perpetrators of GBV against students. There is a need for the government and civil societies to address this.
- The need for parent-child communication to be introduced to Parents-Teachers Association meetings in all schools.
- Conduct regular and mandatory training programs for teachers and school staff on recognizing signs of SRGBV, promoting gender equality, fostering safe and inclusive learning environments, and responding appropriately to incidents of violence.

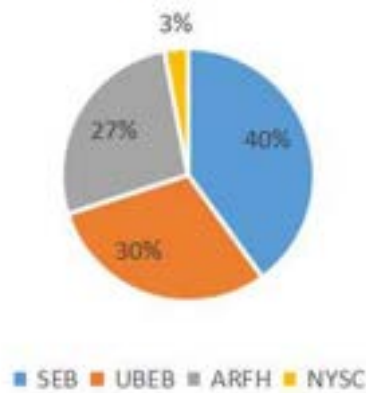
### ORIENTATION OF SCHOOLS' GENDER OFFICERS, COUNSELLORS, ETC. ON SRGBV:

Another activity conducted on this contract was an Orientation meeting with relevant school Administrators, Gender Officers, Counsellors, and others. Participants were selected from the 20 schools where the gender clubs were either strengthened or established. The training was held on 01-06-2023. An initial assessment of the participants conducted through Google Forms revealed a very weak knowledge of SRGBV therefore the orientation meeting was designed as a training programme to strengthen their capacity to run gender clubs in their various schools.



Group photograph of participants at the training of school administrators/gender

Distribution of Participants



# 36,610

students were sensitized on SRGBV in FCT Schools

### SENSITISATION OF STUDENTS ON SRGBV/GENDER CLUB REVITALISATION

A total of 36,610 students comprising 15,820 males and 20,790 females were reached with messages on school-related sexual gender-based violence/GBV, what they are about, where to seek help if violated, how to prevent violence and the need for boys to display their maturity by standing against gender-based violence. NYSC anti-AIDS community development service and ARFH staff conducted sensitization in 57 schools. 70.1% of these were schools under UBEB and 29.9% from SEB. Different forms like assembly ground and gender assembly among others were utilized to reach the students. The students were allowed to ask questions and engage with the facilitators after the sensitization. Below is the list of schools and the number of students reached per school by type of school.

#### Establishment of Gender Clubs in the 20 Secondary Schools in FCT

Regarding ARFH's responsibility to follow up with the gender officer/G&C teacher in 20 secondary schools in FCT that underwent training on School-Related Gender-Based Violence (SRGBV) during the training session for school coordinators and gender officers on Thursday, June 1, 2023, we have completed the visits to 17 out of the 20 schools to assess the establishment of gender clubs. This achievement stems from the training session.

Throughout the training, the gender officers developed a work plan covering essential topics to be discussed with students during the gender club sessions. This plan was implemented during the last term of the academic session. Of the 17 schools we followed up with, all have successfully established and are running their gender clubs which are held twice a month alternatively.

However, challenges have arisen due to the transfer of teachers from one school to another and the busy schedules involved in placing students who are just resuming the new session. Consequently, the gender officers have limited time to engage with the student. Despite this, it's worth noting that all schools conduct a mandatory gender assembly once a week, and topics from their termly work plan are discussed on different occasions.



sensitization on school-related gender based violence

**CHALLENGES**

- The project duration and take-off time was close to the examination period in the schools. This led to the exclusion of students in terminal classes from the sensitization, as SS3 students were writing their school certificate examination and the JSS3 students were writing their Basic school certificate examination.
- Removal of fuel subsidy which led to an increase in transport fare placed a lot of pressure on ARFH as an organization because participants of the Stakeholders meeting and orientation meeting from far schools had to be paid three times the amount budgeted for their transportation so was the cost for transportation to schools for sensitization and monitoring.

**LESSONS LEARNED**

- A lot of school administrators are oblivious of what constitutes school-related gender-based violence therefore are not doing anything to punish offenders.
- There are school administrators with willing hearts to support victims of GBV to seek justice but are frustrated by the system. There is therefore a need to support such administrators to know where they can access the required support.



# Visual Highlights of 2023



ARFH CEO Dr. Kehinde Osinowo participated in a high-level advocacy event focused on revised national policy on population and sustainable development



Prof. Ladipo President Emeritus of ARFH at the launch of the 2023 State of the World Population Report



ARFH Holds Constructive Dialogue With Senator Ipalibo Harry-Banigo On Nigeria's Healthcare Landscape



Interactive session with the Hon Minister of Health, Prof Ali Pate, CON, where he presented his "Nigeria's Health Sector Development Blueprint"



ARFH CEO Dr. Kehinde Osinowo and the new Executive Director of Johns Hopkins Center for Communication Programs, Debora Freitas Lopez



Dr. Kehinde Osinowo, CEO of ARFH at RTI's office in Washington DC exploring new avenues for partnership and collaboration



# Strategic Partnership Meetings in 2023



Road walk on ending violence against women and girls in Lagos



Participants at the closing ceremony of spotlight initiative



ARFH's OVC Team on the SPEED project with ARFH CEO and ECEWS CEO at the ECEWS SPEED start up meeting



Global fund team and partners paid a visit and had a meeting with ARFH on the Global fund GC7 grant cycle



MSH paid a working visit to ARFH on possible partnership



ARFH and RTI



ARFH and SFH staff after strategic meeting



ARFH and RTI staff after a partnership meeting



ARFH explores collaboration with Heartland Alliance



Meeting with Options Consultancy for possible partnership



Meeting with Plan Int'l for possible partnership



ARFH explores collaboration with VIAMO



ARFH and Johns Hopkins Center for Communication Programs



Meeting with FHI 360 for possible partnership



Advocacy meeting and visit to Yobe state Commissioner for Health



Nairobi summit anniversary

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