

ANNUAL REPORT 2022

www.lhinigeria.org | lifehelpersinitatives@gmail.com





AIM:

To inspire every individual to reach for their goals and aspiration in life through wholesome living.





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INTRODUCTION FROM THE EXECUTIVE DIRECTOR

MY SPEECH FOR THE YEAR COMES HERE.



WHAT WE DO

Through our intervention we empowered



Children



Women



Youth



Communities



OUR ACHIEVEMENT

Life Helpers Initiative (LHI) is a non-profit organization that seeks to empower children, youths, women and community structures through strategies such as capacity building, socio-economic development, linkages and referrals, community mobilization and advocacy targeting health, education, livelihood, gender and governance and agriculture. Within the year under review, LHI has made outstanding milestones as it continues with the implementation of PLAN BMW project in Yobe on adolescent girls and boys as well as young women and men have access to appropriate and timely sexual reproductive health right service and structures a continuous project that is been maintained as a result of the effective delivery and reporting of services to provide to its beneficiaries. UNICEF Child Protection on ending violence against women and girls in Tangaza and Binji LGAs through formation or leveraging on the existing structures, providing support to the survivors of violence in the communities. EU-ACT is a project meant to enhance women's participation in decision-making and political processes through advocacy, mentoring and capacity building. Partnering with ZOA in Relief Cash and Livelihoods Recovery for selected beneficiaries in Jere LGA of Borno state.

Also within the year, LHI secured various projects such as Integrated Health Program (IHP) to train Patent Proprietary Medicine Vendors (PPMVs) and Community Pharmacists (CPs) on timely identification and management of uncomplicated common childhood illnesses (malaria, pneumonia, diarrhea, nutrition screening), improving access to family planning services and products and referral of pregnant women/newborns and severely ill patients to

health facilities for appropriate care in Sokoto and Kebbi state, in Ebonyi to provide comprehensive child health services, especially nutrition using the food approach, and dietary diversification to address the issue of malnutrition in a facility-based approach. CARE International to implement a Health Child (Lafiya Yan Yara) Project aimed at reducing the mortality rate of children under 5, through a community-based health system-strengthening approach. DAI State2State project focusing on Increasing Citizens' participation in governance towards a better quality of services in the areas of basic education, primary health, water, sanitation and hygiene in 7 selected Local government Areas of Sokoto State. With the ultimate outcome of improving the realization of sexual and reproductive health and rights (SRHR) for adolescent girls and young women (AGYW), including vulnerable populations, in Bauchi and Sokoto states through the support of Plan ASPIRE and lastly, Alive & Thrive (A&T) project aiming at Accelerating the Scale of Maternal, Infant, and Young Child Nutrition (MIYCN) in Nigeria by FHI360.

HEALTH



The most important concept of leading a healthy life is to provide immunity strength against various diseases. The immune system is the body's natural defence mechanism to fight against foreign agents that cause harm to the body. Having a healthy body and mind is very important for overall well-being. If a person doesn't have a healthy lifestyle, it would affect the daily routine of a person. When the body gets proper nutrition, it becomes more fit and healthy, improving longevity. The healthy lifestyle of an individual determines the economic and educational growth of the community and society.

To this LHI carried out a series of program activities targeting women, youths, children and the communities by partnering with different organizations, especially donors such as PLAN BMZ, PLAN ASPIRE, Palladium/IHP, and to provide services in the areas of health. In alignment with Nigeria's Task-shifting and Task-sharing Policy, LHI trained 662 Patent Proprietary Medicine Vendors (PPMVs), 34 Community Pharmacists (CPs) and 6 attendants on timely identification and management of uncomplicated common childhood illnesses (malaria, pneumonia, diarrhea, nutrition screening), improving access to family planning services and products and referral of pregnant women/newborns and severely ill patients to health facilities for appropriate care in Sokoto and Kebbi states. Concluded the implementation of Plan BMZ in Yobe whose goal is to restore the peaceful coexistence and social cohesion of the population affected by the conflict and improve the health outcomes of women and children in selected communities/wards of Nguru, Busari and Damaturu Local Government Areas of Yobe states. LHI invested in the capacity of 195 health workers in 65 Primary Health Centers across the 13 LGAs of Ebonyi to provide comprehensive child health services, especially nutrition using the food approach, and dietary diversification to

address the issue of malnutrition in a facility-based approach. And in Yobe state, CARE International is implementing a Health child (Lafiya Yan Yara) Project aimed at reducing the mortality rate of children under 5, through a community-based health system-strengthening approach that ensures that communities have a core package of services to achieve the objectives of the project.

MNCH

It is reported that communities in rural parts of Nigeria accounts for high maternal and newborn mortality rates in the country. This is due to a number of reasons and challenges that ranges from lack of skilled healthcare personnel at rural healthcare centers, and lack of specialized equipment to inadequate knowledge on key maternal and newborn child health issues.

Thus, the availability of MNCH, knowledge for pregnant and lactating mothers and child health knowledge for health facilities service providers and engagement of relevant stakeholders in delivering quality services is of high importance as it reduces child and mother mortality and also improves the health of both mother and child. LHI partners with PLAN BMZ, Palladium/IHP, CARE Int. to strengthen maternal child health outcomes, LHI conducted capacity-building training for community health volunteers, the Model Mothers (MM), Community Health Committee (CHC) in Yobe state and PPMVS/CPs in Sokoto and Kebbi to enhance their knowledge on counselling, house to house visit and providing competence-based services in the management of childhood illnesses and family planning services in the community. Below are the outcomes of the activities conducted in the area of health within the year under review.

- **Capacity Building Training for Trainers, PPMVs & CPs:** in order to contribute to state-level reductions in child and maternal morbidity and mortality and increase the capacity of health systems (public and private) to sustainably support quality Primary Health Care (PHC) services, LHI through the support of IHP conducted 8-Days Training of Trainers on the management of uncomplicated common childhood illnesses and provision of family planning services for Patent and Proprietary Medicine Vendors (PPMV) and Community Pharmacists from 25th July to 2nd August 2022. The training enhanced their knowledge on
 1. Timely identification, classification, and treatment of uncomplicated common childhood illnesses such as malaria, pneumonia, diarrhoea and referrals.
 2. Their roles and scope in providing family planning services include informing, screening/initiating, and referring clients.

3. Improving nutrition assessment and counselling, including exclusive breastfeeding, complementary feeding, good hygiene practices, identifying signs and symptoms of malnutrition and prompt referrals.
4. On-service delivery data documentation and recordkeeping using the Community Health Management Information System (CHMIS).
5. Provide post-training supportive supervision and mentoring using the hub and spoke supervisory model to reinforce knowledge and skills.

50 trainers were trained and these trainers in turn step down the training to 662 PPMVs, 34 CPs and 6 attendants in 2 phases for the period of 8 days each in different clusters. The trained PPMVs/CPs cut across 18 LGAs of Sokoto state and 20 LGAs of Kebbi State.

Mentoring & Supportive Supervision: LHI conducted mentoring visits to IHP LDHF health facilities in selected communities Jega, Birnin Kebbi, Kalgo, Maiyama and Arewa LGA on the clinical knowledge & skills received during the training through question and answer, observation and clinical records. Also, it encourages the mobilization of women and children to have access to adequate and quality healthcare services. Likewise, the trained trainers conducted monthly mentoring of PPMVs/CPs Outlets to reinforce the knowledge acquired during the 8 days of training. The Mentors were assigned to 14-21 outlets.

Data Collection: for the purpose of reporting of quality data, 34 Data Compliance Officers (DCOs) were engaged across the 2 states namely Sokoto and Kebbi. To review the activity of the PPMVs/CPs in providing services to their clients by checking out for proper entering of services provided into all the available registered and summarized in the month summary form that will be transmitted into the ODK portal. This activity is conducted monthly in all the LGAs of implementation. A total of 30,567 clients were provided with different services by 1,259 outlets across the 2 states.

A Sensitization Forum: in order to reduce the mortality rate of children under 5 years of age a day sensitization forum was conducted with women group leaders, key traditional leaders, WDC chairmen, CHC and facility In-Charges across the 10 implementing communities/wards of Bade LGA. The sensitization meeting had in attendance the representative from the LGA Health department. The essence of the activity was to introduce the project and LHI as the implementing partner to the stakeholders, securing their buy-in and participation for effective project implementation to achieve the set objectives. The various stakeholders that were met during the sensitization meeting welcomed the concept of the project and assure the project

team of their maximum support to achieve the set objective. During the sensitization forum with women, a total of 36 women were reached; the sensitization meeting with WDCs, CHC and I/Cs have 66 participants in attendance and 10 traditional leaders were also reached.

A Day Community Sensitization on Feedback Accountability Mechanism: The activity was conducted in 22 implementing communities of 10 wards. The activity aimed at providing a method for strengthening accountability to the communities of implementation. It provides a channel for community members to easily raise questions, suggestions, their concerns about the implementation. For each community visited, a Focus Group Discussion was used as a methodology to get feedback on their choice of channels, and contributions were received from both groups (Male and Female Groups). At the end of the meeting, the community members adopted a convenient channel to convey a complaint to CARE International as well as suggestions. In most of the communities, they preferred a suggestion box.

5-Day Training on Social Analysis and Action for Care Staff and Partners: This is an approach CARE International has developed to facilitate individual and community actions that support more equitable gender norms. The training covers an introduction to Social Analysis and Action (SAA), transforming staff capacity (To self-reflect, challenge, and facilitate) which means to prepare staff using the SAA approach, creating safe spaces for us to talk, explore, reflect, learn, and trust are all key to transformative change. Essential Skills for Implementing Social Analysis and Action (SAA) and Situational Analysis in SAA which include identifying Social Barriers to Change. The SAA training was step-down to 44 Model Mothers selected from implementing communities. By using the SAA approach, creating safe spaces for the model mothers to talk, explore, reflect, learn, and trust are all keys to transformative change. The training helped to reveal alternative ways of understanding their ways of life, and how underlying social and gender norms have affected them.

2-DAYS ORIENTATION FOR COMMUNITY BASED HEALTH VOLUNTEERS. Orientation was conducted for the selected 22 Community Based Health Volunteers with the purpose to empower them with basic knowledge, skills, and competency to enable them to function effectively as an agent of health services. During the orientation, the facilitators emphasized the major activities of the CBHVs which are: Household visits, facilitation of neighborhood conversation, support in community dialogue, community health action day, and Referrals. The facilitators explained in detail the CBHVs key responsibilities and how it is related to their work.

3-DAYS TRAINING FOR COMMUNITY-BASED SURVEILLANCE (CBS). The training was conducted for Community Based Surveillance (CBS) on disease surveillance and notification (DSN) and identification of cases of priority diseases, conditions, and events. The training aimed at

strengthening the surveillance system using an integrated approach. During the training, the CBS were taken through diseases that required immediate reporting, disease conditions and events for IDSR reporting, and IDSR data reporting tools. The 44-community-based surveillance (CBS) were trained (2 per facility).

3-DAYS TRAINING FOR TRADITIONAL BIRTH ATTENDANTS (TBA): The TBA training modules last for 3 days, and the core topic is comprehensive women's health care. The training is based on the skill birth attendance training manual with a reproductive risk approach. It employs an adult methodology including exercises such as role plays reflective games and situation evaluation. 22 TBAs were trained, and each was selected from the 22 implementing communities.

ADAY ORIENTATION FOR HEALTH WORKERS ON TOOLS AND TEMPLATES: Though the facilities tend to have information systems for data collection and reporting, staff who are used to collecting the data are familiar with the tools of quality improvement. So, we invited health workers from different units of the Primary Health Care Centre to participate in the use of the data tools. During the orientation, the 22 participants present their current tools used at the facilities where each health worker participated. Common tools presented are master register, health service card, outpatient register, immunization register, referral/transfer Slip, and defaulters/Discontinuation Tracking Slip.

CHILD STATUS ASSESSMENTS FOR THE 22 COMMUNITIES AND ESTABLISH A CHILD REGISTER: The assessment was conducted at Bade LGA with the engagement of enumerators. A day orientation was conducted for the enumerators to enhance their knowledge on data collection and community engagement. 7,213 data was collected across the 10 implementing wards of Bade Local Government Area. 74.21 percentage of children are fully immunized, 18.61 percentage are partially immunized, and 7.18 percentage are never immunized. This shows that there is increase in number of children immunization in the implementing communities, while for the partially immunized children are either waiting for the immunization process or couldn't meet up with schedules due to ignorance, lack of transportation, among others. 2151 Pregnant women were recorded across the implementing communities, only 1891 is registered for ANC; 92.68 percent of women that just gave birth have received PNC services while 7.2 percent have did not attend PNC.

2-DAYS TRAINING FOR THE COMMUNITY VOLUNTEERS ON FAM: As part of implementation practice Feedback Accountability Mechanism (FAM) is to be set-up and to ensure effectiveness in the implementation of the Lafiya Yan Yara (Healthy Child) project, efforts are being made to set up Feedback Accountability Mechanism (FAM). Earlier on, during the entry activities, we held a sensitization and a FAM assessment

which provided unique insights and information that reflects the preferred way as well as identification and selection of the community volunteers who will ensure complaint/feedback are acknowledged, attended to as well as feedback received. To successfully do this, the 10 community volunteers were identified and selected from the 10 wards of Bade LGA and were trained on the Feedback Accountability Mechanism (FAM).

WEEKLY COMMUNITY DIALOGUE WITH MODEL MOTHERS AND COMMUNITY VOLUNTEERS: To continually support the model mothers, regular supportive supervision was carried out monthly by the technical team who participated in the weekly dialogue session conducted by model mothers. The team visited 22 communities and provided technical support to 44 model mothers (2 per community). The team closely observe and provided appropriate feedback to the model mothers at the end of each session. The 22 community volunteers, continued to carry-out house-to-house visits, providing timely counseling to the mothers of children under 5 and lactating mothers.

SUPPORTIVE SUPERVISION FOR WEEKLY H2H VISITS AND COMMUNITY-BASED SURVEILLANCE: The supportive supervision for weekly House to House visits and sensitization to the CBS was conducted monthly to know whether CBS are carrying-out their activities as agreed to track and monitor their achievements. Therefore, an H2H visit was conducted to various locations to sensitize households on conditions that need rapid attention and to identify features that can pose a risk of disease to the community.

RADOM FILED VISIT: A random field visits were conducted to implementing communities monthly to support community members, CBHVs, Model mothers, and the CBS. This is to monitor and assess progress and effectiveness of their work within the community. The monitoring teams observed that the communication was clear and smooth within the CBHVs, Model mothers, and CBS. Notable in these communities is strong communal support for one another. Discussions with community members demonstrated that the project is highly relevant. Members of the community reported incoherent before the intervention and currently because of the group discussions and meetings held with them by CARE International/Life Helpers Initiative, this have strengthened their relationship.

QUARTERLY STAKEHOLDERS MEETING: The quarterly stakeholder's review meeting was organized for the stakeholders such as Traditional leaders, LG PHCC Departments, Facility In-charge, and religious leaders to know the progress the Lafiya Yan Yara (Healthy Child) project is making in Bade LGA. During these meetings, brief on the outcomes from each of the implementation engagement were shared, data infographics and analysis were being presented to address gaps and seek for their support as the leaders. The stakeholders mentioned the positive changes noted within their community since the implementation of the project.

MONTHLY REVIEW MEETING WITH COMMUNITY BASED SURVEILLANCE: Community-Based Surveillance is individuals who keep an eye and watch on disease occurrences in the community to take necessary action to avoid the spread of the disease to others (outbreak). During the meetings, the 44 Community Based Surveillance (CBS) reported the outcomes of their surveillance within the month. The CBS conducted sensitization on the following topics

- Sensitizing the community on the importance of accessing and utilizing health facility services.
- Educating households on health conditions that rapid attention.
- Identifying priority diseases under surveillance.
- Identifying diseases earlier before they become severe and referring patients to health facilities for investigation and correct treatments.

At the end of each month, each CBS submits weekly data and monthly reports.

COMMUNITY-BASED OUTREACH: An outreach was conducted in some of the implementing communities to support health facilities, to sensitize women of reproductive age, and women with children under 5 on the important of immunization, Anti-Natal Care (ANC), Family Planning (FP), hospital delivery and Post-Natal Care (PNC). With the support of midwife and Community Health Extension Workers (CHEW), ANC session was conducted where those who received antenatal care for the first time were advised to continue the ANC at their facility, and children under 5 who were presented with symptoms of malaria and acute respiratory were given treatment.

REVIEW MEETING WITH THE MODEL MOTHERS, TBAs & CBHVs. The monthly review meetings with the model mothers, TBAs and CBHVs were conducted in Gabarwa and Gashua. The meetings aimed at retrieving feedback on the dialogue sessions conducted within the month with community women to addresses the social norms and negative practices that affected child health and women within the community focusing on different topics facilitated by the MMs. The TBAs reported their activities for each of the months and strengthened on services required from them regarding deliveries. And also, the 22 CBHVs reported on their H2H activities conducted with the topics focusing on ANC, Malaria, Hygiene Promotion, Immunization, Family Planning, Disease Prevention, Maternal risk signs, Diarrhea, and Child abuse. The CBHVs referred identified pregnant women for ANC, children under 5 for immunization, and breast-feeding mothers for family planning at the health facility. On PLAN BMZ project 75 trained Community Health Volunteers (16 – Male, 59 – Female) conducted house-to-house visits, identified pregnant women were referred for ANC, women who newly gave birth were referred for PNC and young parents were counseled on family planning at their various communities.

Within the year six (6) review meetings were conducted with Community Health Volunteers at various communities (Dapchi, Mairi, Maisandari, Dabule, and Dumsai) before the close-out of the project, during this meeting 75 Community Health Volunteers gave reports on their weekly activities conducted, Adolescent girls and boys were also counseled on SRHR, life-building skills, and referrals were made for them to access services at the Adolescent Youth-Friendly Health Center (AYFHC) in the PHC. The review meeting was also used in addressing some identified gaps, and challenges and the way forward was discussed.

3-DAYS EMERGENCY PREPAREDNESS PLANNING & CAPACITY BUILDING WORKSHOP FOR CARE AND PARTNERS STAFF: LHI staff participated in 3 days capacity building workshop for CARE staff and Partners. The training was facilitated by CARE International staff. The training objective is to equip staff and partners on emergency preparedness planning, and the process involve in humanitarian response in CARE International. Participants were taking through CARE emergency toolkits for them to understand the CARE mandate and procedures through the CET toolkit online training. Gender in Emergency was discussed as the facilitators enlighten us on GBViE, as the participants are strengthened to integrate GiE and GBViE in humanitarian programming as well as on the use of GBViE tools.

MALARIA

In support of the US President's Malaria Initiative for States (PM I- S) project in Zamfara State, LHI is providing training and mentoring services to selected General Hospitals and Primary Health Centers in 8 targeted LGAs, providing opportunities for rapid scale-up for improved service delivery and strengthening of health systems through a better human health resource to reduce under-five and maternal mortality by delivering quality services for the prevention and management of malaria and its complications. The overall goal of PMI-S is to strengthen the capacity of frontline Healthcare providers and the LGA PHC team to plan, implement, monitor, and report on quality malaria services including malaria case management, integrated community case management, malaria data quality improvement activities, drugbased prevention (IPTp and SMC) and systems support in eight (8) challenging LGAs in Zamfara. Below are the outcomes of activities conducted under this project.

Orientation meeting with Field staff and Management team on Malaria management services: The orientation meeting took place in LHI office Zamfara on 12th October 2022. The meeting aimed at providing orientation for the field officers on what is expected from them and how the MSH

project is. Presentation on code of ethics, rules and regulation, and attitudes of a true ambassador of the noble LHI was done by the ED. The participants were further taking through the general overview of PMI-S project, its objectives, expected outcome and deliverables. He also stressed that, payment and retention of the participants is strictly based on performance. In attendance were 16 field officers and LHI Team.

Training of Field officers on Malaria case management and NHMIS: The 3 days training took place from 19th -21st October 2022 at Taula hotel & Apartment Gusau. The training equipped the LHI LGA field officers on general malaria services specifically case management and data management. The training was delivered through didactic and hands-on sessions with group exercises and post-training assignments for participants. It is expected that the training will ultimately result in improved malaria services in Zamfara State. The participant's capacity was built on malaria case and data management, and mentoring strategies. A total Number of sixteen (16) personnel were trained consisting of 12 male and 4 female. The average score of the participant pretest and posttest were 60% and 73% respectively.

Mentoring and supportive supervision to the health facilities: The visit is a monthly activity that is meant to provide technical support to the field officers activities across the implementing facilities to ensure that activities are in line with project goal and objectives.

NUTRITION:

Through the grant under contract, LHI invested in the capacity of 195 health workers in 65 Primary Health Centers across the 13 LGAs of Ebonyi to provide comprehensive child health services, especially nutrition using the food approach, and dietary diversification to address the issue of malnutrition in a facility-based approach. Our efforts galvanized and strengthened greater community collaboration through the community-based volunteers, and the Ward Development Committees whose better understanding of the issues around malnutrition supports the mobilization of community members to utilize the health facilities enhanced male participation in nutrition, and equally provide the basis for the support of nutrition through the food bank in many communities.

We were able to enroll more MAM and SAM cases across the LGAs as well as tracked and recovered about half of the enrolled cases of MAM and SAM across the communities in different LGAs. We observed considerable changes in the behavioral attitude towards nutrition service provision at the facility, changes in the perception and opinions at the community level, and very good and commendable changes at the household level vis-à-vis the strategies we used in reaching out, identifying malnourished under 5 children, in referrals for services and tracking of the enrolled SAM and MAM.

Below were the activities conducted on nutrition within the year under review.

Engagement and Orientation of Key Technical Persons: The needed key technical personnel were fully engaged in the project and a one-day project-based orientation was held to understand the project goals, and objectives as well as strategies of implementation and monitoring, and evaluation strategies. Present were the Technical Manager, State Team Lead, M & E Officer, and Finance Officer. And in support of the project, we engaged a Data Officer.

Orientation of the identified and selected trainers: Even though LHI had a pool of experienced trainers in the state who took part in the Child Health Training using the LDHF, we conducted a selection process, interviewing as well as an internal orientation was subsequently conducted for the selected trainers. In total, 30 trainers were engaged in the project implementation. They shall be working in 2 phases – conduct step-down training for the health workers at the selected facilities and carry out after-training mentoring and supportive supervision. By project design, after the training, 17 of them were disengaged but for the depth of work required after the stepdown, LHI decided to work with all the trained persons, whom we referred to as Health Nutrition Officers among whom were 5 supervisors.

The meeting had different presentations in line with the agenda and the major key highlights were:

- An overall brief of IHP and the Ebonyi State Program Overview (TO6)
- Terms and Conditions of the Grant Agreement
- Technical Overview of the Nutrition – milestone/deliverables
- Indicators and Targets
- Reporting – milestones submission process and templates
- Reporting – Templates – narrative report and mentoring report.
- Plans for LHI Start-up

Some other details during the meeting were

- The Recipe Book, its progress, and when the hardcopy would likely be ready while the softcopy would be shared with LHI

- The tentative dates of the 4-day Training of Trainers shall be the last week of April and the 3-day Stepdown training at the facility shall be in the 2nd week of May
- LHI should communicate any PHC that has a high-security risk
- LHI is ready, has all the needed staff on ground and other materials needed are in process of being procured.
- IHP is looking into how best to support the new facilities selected with needed equipment.
- Human Resources for Health remains a challenge and key advocacy shall continue to the state actors
- Registers, tools, and templates have been, are being, and would continue to be provided for the facilities
- There is a robust M & E support that IHP is leading, and such would continue to be in place

Interactive Meeting with NYSC/NYSC Medical & Health CDS and BAN leadership: As part of our strategic and systemic sustainable approach and exploratory thrust, we held an interactive meeting with the National Youth Service Corps where we met with the State Coordinator through her representative and shared with him the project's overall goals and objectives as well as the focus of the food-based approach, its strategies, and the key role NYSC can play. We agreed that there was a need to meet and interact with the Medical and Health CDS Corps' executive team members, which we did on the 7th of May, 2022. During the meeting, the PD/ED took them through the overview of IHP, its goal, and objectives; LHI's role, and the food-based approach. There was a discussion on the role the CDS can play in a sustainable manner, and what needed to be done which included

- Orientation of current membership on nutrition and food-based approach
- Support with needed utensils and materials
- Support for logistics to ensure the drive is well institutionalized in the CDS system and activities

The CDS Executive members expressed delight in the opportunity to add the issue of nutrition to the program focus since they work on malaria, and HIV/AIDS among others. A date for the orientation will be communicated, which we followed until we were told we needed to have their national headquarter approve such strategic programming.

We held an interactive meeting with Breakthrough Action Nigeria, State Coordinator and we shared the project strategy and approach. Following extensive discussions around the roles their Community-Based Volunteers can play, we agreed that because BAN is limited to certain LGAs and wards,

and they are not present in some of our locations, it is simply easier for their CBVs to only refer any malnourished children and the caregiver to the facilities and we shall take over from there rather than developing any parallel inter-relationship that can bring a few complications in reporting

3-day Training of Trainers (TOT): LHI facilitated the 3-day training of trainers which was organized by IHP and designed to improve the understanding of the trainers on food-based approach to nutrition as well as support their skills and standardize the adopted approaches for addressing and preventing malnutrition through food-based. Participants were drawn from 30 selected Trainers, 13 Nutrition Focal officers from the LGAs and members of the State Nutrition Committees members, IHP Staff, 6 key personnel from Life Helpers Initiative, and a member of Community Health Influencers, Promoters and Services (CHIPS), Nutrition Officer from Breakthrough Action, a sister partner of IHP. In total, 66 persons were in attendance during the training.

Adult training methodology was used, which include brainstorming sessions, discussion, group work, and presentations using flip charts. Field Trip and Practical food preparation demonstration using available, affordable local food materials. Question and answer sessions to ensure that the trainers understood the topics with emphasis on the use of the training manual.

In line with the criteria, the minimum at the Pre-test was 70% and after the post-test was taken by all participants, the minimum was 95%. In all 13 LGA focal persons and 30 trainers participated in the training of which 31 were females and 12 males

3 days of Step-down Training: The 3 days of step-down training took place from the 16th to the 31st of May 2022. The training was conducted by the 30 trained and certified Health Nutrition Officers who had earlier participated in the Training of Trainers. This step-down training was held in 3 batches within the period. The purpose of this training was to strengthen the health workers' knowledge, skills, and ability to deliver a quality food-based nutrition approach in a sustainable model for the benefit of moderately acute malnourished and severely acutely malnourished children under 5 and the caregiver in the various capacity and to prevent moderate malnutrition of children, improve dietary diversity and micronutrient consumption through food-based nutrition counselling and education. The training deployed adult learning methodology, with active facilitation and participation as well as a hands-on practical session for all the content using the available job aids, health equipment of weight and height measurement as supplied during the Child Health training, the chart booklet of the integrated management of childhood illnesses, role-playing using the food recipe book and the food demonstration of location-specific food contents which are easily accessible, available and cheap that can promote the nutritional status of children under 5 and their households as well as support in recovering and preventing MAM. locally. In all, a total of 195 health workers' knowledge and skills were strengthened.

Orientation for WDC Members on Nutrition Intervention in Ebonyi State: Building a strong sustainable coalition on addressing malnutrition through a food-based approach, there was a need to create awareness among the community leadership. The interactive orientation took place on a senatorial basis. This ensured a peer connection mechanism is put in place within the local government and zone. These meetings were held at Central on the 8th of June 2022 at EZZA SOUTH LGA H/Qs; Ebonyi North Senatorial zone was on the 9th of June at Abakaliki LGA H/Q and for the Ebonyi South, it was on the 10th of June 2022 at Afikpo North LGA H/Q. In all, 99 WDC leaders were present

Major highlights of the orientation:

- Nutrition and Malnutrition status in Ebonyi
- Classification of Food, IYCF, and EBF.
- WASH.
- The roles of WDCs in nutrition intervention
 - Developing male engagement channels
 - Supporting facilities with a food bank
 - Building community coalition on food, farming of nutritious food through the household garden

In conclusion, from the 1-day orientation, there were major outcomes the WDC leaders agreed to

- ❖ Hold a WDC meeting with other members of the committee to communicate with them on the nutrition project.
- ❖ Hold meetings with other stakeholders such as the traditional ruler, women, and men groups to discuss the nutritional needs in the community.
- ❖ Support health workers and CBVs to hold and during outreaches, group meetings, and interactive sessions in schools, churches, and marketplace, to promote issues around helping to identify MAMs and SAMs.
- ❖ Initiate moves towards the establishment of Food Banks by raising contributions and support for very poor families who have children identified as MAM or SAM but cannot feed themselves.

- ❖ Encourage home gardening in families and amongst women groups.
- ❖ Support to provide help to transport vulnerable caregivers to the health facilities as the need arises.

All throughout the project, the WDC as a body was our critical partner. We carried them along in the consultations with different groups in support of the malnourished children and bring a facility-based community succor such as the food bank. We held a series of one-on-one meetings with the leader and group meetings with the enlarged group. As a close-out process, we had an interactive session with the WDCs and health workers to share the successes recorded, challenges experienced, and way forward.

Facility-Based Nutrition activities, Outreaches and Group Discussions with Food demonstrations and illustrations: In achieving our set out goals following the capacity building training for the on-charges, we mapped out with them that every opportunity shall be used to reach out to caregivers and potential malnourished children, and these are

- **Facility-based Activities-** With our support, the health workers integrated nutrition child health services to every aspect of the facility clinical services with such channels such as the use of ANC, Immunization Days, and other clinical opportunities to identify malnourished children, enroll them into the program, or maximize the platform to educate the mothers and other caregivers on nutrition, food, and its contents, dietary diversification as well as food demonstration and illustrations using locally available, accessible, and affordable foods to enhance their knowledge of these nutritious foods as well as how to better use it for the benefit of their children. The use of the MUAC tape and taking the height and weight of a child became one of the essentials to do whenever there is an opportunity to do so. The use of the recipe book enhanced the food illustration exercise where mothers are educated and counseled on IYCF, EBF, food contents, and dietary diversification for the children as complementary feeding or as support for the malnourished status. There were also food demonstrations which further promotes and reinforced learning.
- **Group Discussion/Outreaches with food demonstrations and illustrations:** Along with the health workers and CHVs, we planned and conducted a total of 388 group discussions with food demonstrations and illustrations across the 65 facilities/communities. These were held in the clustered communities -rural and semi-urban areas of the wards, reaching a total number of 9840 women/caregivers and providing nutritional services for a total of 19447 children who had the MUAC tape used on them, or had their parents/caregiver enlightened on food and dietary diversification. An average of 15 women or more attended various locations within the catchment area of the health facility. This was also carried out in churches or socio-cultural groups. One of the interesting outcomes of this activity was that it supported the extension services of the

facility and positioned the facilities as a friendly center, engaging and interacting with the women and other community members – education, clerking and profiling children, and documenting in facility registers as well as requesting them to bring their profiled children to the facility

The meetings were held using the recipe book for food illustration where there could not be a food demonstration. And in other sessions, we had food demonstrations. In some of the group meetings conducted by the CBVs, one of the unique innovations deployed was that the CHVs with some women leaders of the groups in their targeted communities, brought forth various local nutritious, available, and affordable local recipes within their immediate reach, and samples of such food items prepared for practical enlightenment with the support of the recipe book. These sightings made much difference as they associate fondly and knowingly with the food during these group meetings.

Children were equally fed at the facility as part of the ways of ensuring that the children eat, it serves as a guide to the parent in a live-role-playing scenario. Each malnourished child that are attended to at the facility was further served appropriately with Vitamin A, and some were treated for underlying illnesses using the child booklet

These meetings were carried out within a community, and/or after church services because of the one-on-one sensitization visits held by the in-charges and CHVs to a targeted group of the community.

In all, a total of 193 group discussion sessions with food demonstrations and illustrations were held, far above our milestone deliverables of 105 sessions. This was because of 2 major factors, which are we maintained the 30 HNOs/trainers rather than reducing them to 13 and we strongly felt that within the short time left of the project period, we would not be able to make much impact if we do not accelerate deliverable activities which had food demonstrations across the different communities of the 13 LGAs, reaching a total of 4052 women/mothers and 5689 children.

- **House-to-House Visits:** Each facility has 2 CHVs. And along with the health workers, we re-mapped the communities and settlements being served by the facilities and asked that the CHVs shall use 3 days a week to do home visits to identified mothers, lactating and nursing mothers and those with under 5. During the visits, they shall identify the children under 5, use the MUAC tape to quickly assess, do nutrition education and counselling, and when a case of MAM or SAM is identified, they refer and ensure such a caregiver and the child assess services. They were also required to identify groups of women either social, cultural, or religious in their respective mapped-out communities, know their time

schedules for meeting and meet with them, share on malnutrition, ways of curbing the menace, healthy food through the appropriate use of local recipes and keeping a clean environment as a seasonal precaution to opportunistic childhood infections.

Subsequently, all CBVs conducted house-to-house visits as well as held nutrition education and enlightenment sessions with various women groups and churches. During the house-to-house visits, the CHVs, using the MUAC tape identify any suspected MAM and SAM, provide intact counselling on feeding which is appropriate for the age, and such will now be referred to the facility for further profiling and care. The Health Nutrition Officers randomly supported the visits especially when there were reports of caregivers with a malnourished child who refused to be referred to the facility

We worked with 195 Primary Health Centers workers from the 65 facilities (3 per each of the 5 selected PHCs) from the 13 LGAs along with 130 Community-Based Volunteers, 2 per each of the facilities and these key drivers through a facility-based approach layered in

- Integrating nutrition into all clinical-based service provision
- Deploying community-based volunteers connected to a health facility for house-to-house visits and follow-up visits for tracking
- Organise extension services through outreaches and group meetings

In total, we enrolled 1787 MAM and 516 SAM during the program as documented at the facilities. The table shows the impact of the project on the identification of malnourished children in the state

Table 1: State-wide Analysis SAM and MAM

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**Table 2: Summary
Record of
Senatorial Zone of
MAM & SAM**

S/NO	LGA	GMP Implementation Record ending October	
		MAM	SAM
1	ABAKALIKI	122	49
2	AFIKPO NORTH	151	53
3	AFIKPO SOUTH	139	34
4	EBONYI	119	34
5	EZZA NORTH	115	46
6	EZZA SOUTH	161	79
7	IKWO	140	14
8	ISHIELU	117	40
9	IVO	143	27
10	IZZI	174	45
11	OHAOZARA	109	26
12	OHAUKWU	176	41
13	ONICHA	121	28
	TOTAL	1787	516

S/NO	LGA	GMP Record ending Oct 2022	
		MAM	SAM
1	North zone	591	169
2	Central Zone	533	179
3	South zone	663	168
	Total	1787	516

Table 3: Total number of Malnourished Children per LGA

Table 4: Summary of SAM and MAM

S/NO	LGA	CUMULATIVE		CUMULATIVE MAM & SAM TOTAL				
		MAM	SAM					
1	ABAKALIKI	122	49	171	516			
2	AFIKPO NORTH	151	53	204		Number of MAM enrolled	1787	
3	AFIKPO SOUTH	139	34	173	131	Number of MAM recovered	782	
4	EBONYI	119	34	153	143	Number of MAM progressing	130	
5	EZZA NORTH	115	46	161				
6	EZZA SOUTH	161	79	240	8	Number of MAM retrogressing	36	
7	IKWO	140	14	154				
8	ISHIELU	117	40	157	1	Number of SAM wasted		
9	IVO	143	27	170				
10	IZZI	174	45	219				
11	OHAOZARA	109	26	135				
12	OHAUKWU	176	41	217				
13	ONICHA	121	28	149				
	TOTAL	1787	516	2303				

Table 5: Summary of follow-on service

TOTAL TRACKED	1231
TOTAL UNTRACKED	1072

malnourished children reached for

The Food Bank: This was an idea to bridge the gap of food availability at the facility for demonstration and emergency clinical intervention and support to the malnourished children at the facility or even to support them in the immediate for indigent families. The concept had received support in some communities/facilities and none in many others. Throughout the implementation, it remained active on the platform of donations.

Mentoring & Supportive Supervision: During the year, the technical team along with the 30 Health Nutrition Officers conducted random, structured, and strategic mentoring and supportive supervision of all 65 facilities. In the beginning, especially after the step-down training, it was a weekly time committed to continuously mentor and support and subsequently it became twice in a month specifically while leveraging on other activities to carry out supervision. And toward the end of the implementation, we used this platform to retrain the health workers and remind them key issues. All 65 IHP-supported HFs were reached, strengthening the knowledge of facility health workers and CBVs. Using the child health manual and the sick child chart as an additional guide, the health workers were taken through the processes again and the documentation.

EDUCATION



The quality of basic education in northern Nigeria is extremely poor, leading to low demand and unacceptably low academic performance. Less than 30 per cent of school-aged children are estimated to have basic literacy and numeracy skills, and many struggle with the consequences of health, poverty and social-cultural practices inimical to educational participation. Despite the state of emergency declared on education which reportedly gave birth to a Basic Education Policy which made access compulsory and even provided opportunities for the girl child to complete her education most of the parents in the northern state do not take seriously education of their children, especially girl child even the present government put in place different agencies of government saddled with the roles and responsibilities in education and this includes Ministry of Education, State Universal Basic Education Board, Female Education Board and the Local Government Education Authority. Much investment was reportedly made in providing infrastructure, teachers training and recruitment as well as educational materials to enhance the quality of education in Nigeria.

LHI carried out some activities that galvanized and strengthened the various community structures such as Ward Development Committees, the School-Based Management Committee (SBMC), the Community-Based Management Committee (CBMC), the Mothers Association (MAs), working closely with the LGA Education Secretary, State Universal Basic Education Board (SUBEB), Rural Water, Sanitation Agency of Nigeria (RUWATSAN) and other Ministries, Department, and Agencies of government in the state while implementing State2State project in Sokoto state. Follow-up sustaining learning centers in Sakadaka communities of Gada LGA in Sokoto state.

Most of the activities conducted on education are LHI based programs which are report in the LHI based section

GOVERNANCE



Participatory governance is one of the key hallmarks of the democratic system and the core of its foundational pillars, however, experience showed that it is one of the most difficult to practice because of various underlying factors from the people in government and the governed. The different aspects of the activities were carried out to drive the core essentials in a functional governance system and provide platforms for citizens' engagement and participation in governance and project implementation.

Life Helpers Initiative with technical and financial support from the USAID State2State achieved considerably increased citizens' participation in governance for better quality service delivery to the benefit of the masses in the targeted communities of Binji, Tambuwal, Wurno, Sokoto North, Yabo, Sokoto South, and Gwadabawa LGAs.

LHI continuously implements the BMZ project through the financial support received from Plan International aimed at improving the protection of young girls and boys from violence, abuse, neglect and exploitation, promoting economic rehabilitation and empowerment and promoting effective participation empowerment and leadership in Mairi and Maisandari of Damaturu LG, Dumsai and Dabule of Nguru LG and Dapchi of Bursari LGAs of Yobe State”. In Sokoto state implementing UNICEF Child protection component of Spotlight Initiative project aims at ending violence against women and girls in Tangaza and Binji LGAs through the formation or leveraging on the existing structures, providing support to the survivors of violence in the communities. Through EU-ACT implementing a project on enhancing women’s participation in decision-making and political processes through advocacy, mentoring and capacity building in Sokoto state.

BASIC PARTICIPATION FOR MARGINALIZED GROUP

QUARTERLY PEER EDUCATORS REVIEW MEETING: The review meeting with the Peer Educators was supported twice this year across the five implementing communities (Dapchi, Mairi, Maisandari, Dabule, and Dumsai) and 50 Peer Educators (16 Male and 34 Females) participated. The Peer Educators shared experiences facilitated during their sessions, using the BOOMs manual as a guide. During these meetings, the Peer Educators’ facilitation performance is reviewed. Also, refresher training was conducted on some of the difficult topics they could not facilitate. Peer Educators across the implementing communities make referrals to the peers to the Adolescent Youth-Friendly Health Center (AYFHC). The meeting received progress and challenges feedback with profile solutions.

Facilitate natural resource that causes conflict in communities: The activity was conducted in selected communities of Damaturu, Potiskum and Gujuba LGA. Relevant stakeholders which include Traditional rulers, religious leaders, Women leaders, Youth leaders and people with disabilities were present alongside a state representative from the Ministry of Environment. In attendance were 157 – Males and 53 - females making a total of 210. The activity was done to identify Natural disasters and how it is been managed in other to avoid conflict and promote peaceful coexistence amongst community members, also discussed with community members and suggest possible way forward in addressing existing conflict in the community.

Focus Group Session: Building from the grassroots requires consultation and secure the interest of the beneficiaries at the grassroots. To drive that grassroots’ interest and participation, a focus group discussion was conducted. The objectives of the FGD are;

- a. To interact with the leaders of different groups and their leaders, listening to their opinions and sharing with them about the project
- b. To help better crystallize their needs and develop a media content focus to air the people’s voices.
- c. To map out the development committee in the ward

From January 25th through to 5th of the February 2022, LHI team mobilized and conducted 75 focus group discussions in the wards of the 7 LGAs (Yabo, Tambuwal, Sokoto South, Sokoto North, Wurno, Gwadabawa & Binji). This 1-day focus group discussion (FGD) had a minimum of 10 persons in each ward, gender-segregated with women, youth, and people living with disabilities. This activity provided an opportunity to share the key objectives of the project, and our strategies and activities to ensure the project objectives were achieved. To guide the discussion, a questionnaire was developed, covering different service areas of education, security, health WASH & Infrastructure. The FGD insight helped to identify communities needs and priorities and harvest their ideas and opinions. A total number of 753, key leaders across different strata of the community were in attendance out of which are 514 male, 239 Females, and 75 PWDs.

Interactive Session in Developing Media Strategy and Content: In our continuous effort to build a strategic media thrust, LHI facilitated a 2-day interactive session on media strategy and contents, that took place from the 1st to the 2nd of March 2022. The session was to help in creating an implementable structure for the various issues of concern, the opinions received at the Focus Group Discussion sessions and some of the other ideas we have. The sessions had media practitioners as participants along with selected community leaders, and women. The 2 media thrust are “Voice of Possibilities” (a concept where community members from all different walks of life and location are provided with the opportunities to share their opinions on different social issues of development through a pre-recorded voices were aired during any of the talk show sessions or as a paid jingle advert), and the weekly radio talk show program, tagged, ‘WeSpeak’ (in hausa means, Muyi Magana). “WeSpeak” is a radio program aired weekly on Garkuwa FM Sokoto, aimed at creating awareness and increasing citizens' participation in governance towards a better quality of services in the areas of basic education, primary health, water, sanitation, and hygiene in the selected local government areas of Sokoto State. During this interactive media content framing meeting, where 10 participants were present, the LHI team provided a background of the project, its goal and its objectives, and the role media can play in driving inclusive citizens’ participation in decision-making and local governance. LHI laid out the criteria for selecting Garkuwa FM and the media team which included the Jikan Babi recording studio and the media and project team members. LHI team lead in his address stated that the media play a strong and critical role in the project because it gives voice to the people while providing a platform for citizens to demand accountability from elected and administrative government officials and their agencies as we sought to have a participatory governance system.

Using all the inputs during the FGD, the suggested topics during the session, LHI developed all the topics for the radio sessions, presenters/possible guests, and the structure/program format. These topics to be discussed during the airing covered different thematic areas - health infrastructure, education, WASH & security of S2S project. In attendance, were 10 persons (5 Male & 5 Female) among which there was 1 PLWD.

Radio Program Airing: The Radio Program (WeSpeak), and ‘Voice of the People (VoP)’ are flagship radio-based activities that provided the platform for citizens to air opinions, herald voices, and provide opportunities for government officials to respond. In producing the program, LHI conducted field information gathering, which is small rapid research at the community level to document people’s thoughts and opinions. The radio program is a one-hour weekly session, aired on Garkuwa FM between 9 am and 10 am but during the fasting, it was aired between 11 am and 12 noon every Tuesday, and where there were constraints, the program was aired on Monday. It’s a platform that creates room for accountability and feedback, for people’s views and opinions to be heard; The phone session of the program provided the opportunity for the people at the grassroots to air their views about the kind of service being rendered and calls to the government to step up in improving a quality service delivery. The program was aired the month of March to October 2022 and was aired 36 times. The radio program had about 55 guests two or one each week, with an average of 10 callers every week. The guest consists of the WDC leaders, teachers, lecturers, health workers, and government representatives. We had more male guests than females because of time availability issues. The program discussion centres on topics focused agreed on during the 2 days of media strategy development and are on Education, Wash, Critical Infrastructures, Security, Education, and Health.

GOVERNANCE EDUCATION

BI-ANNUAL SENSITIZATION SESSION WITH 5 FEMALE AND MALE LOCAL & RELIGIOUS LEADERS AND TRADITIONAL HEALERS: The session was facilitated by LHI staff and trained Male champion/Female Role model across various implementing communities, Dabule, Dumsai, Mairi, Maisandari, and Dapchi. 5 traditional leaders, 10 Male and Female traditional healers (Wazamai and Ngwarzoma), and 5 women leaders across the 5 implementing communities, 17 Male and 10 Female were in attendance. The objective of this activity was to use the session to sensitize them on SRHR, harmful practices and engage them to support positive norms that promote SRHR for adolescents in their communities. The participant’s knowledge was enhanced and questions was raised based on the norms and traditional practice mentioned to be harmful, (like female genital mutilation, early marriage/force marriage and gender base violence) these questions was addressed by the facility in-charge/Health Promotion Officers.

Sensitization visits to LG Council, traditional leaders, media houses, and MDAs: As part of the entry phase of the project implementation and to provide a viable and positive ground to achieve the State2State project goal and objectives, LHI conducted sensitization visits to various stakeholders from January 15th to February 10th 2022 to the LG Chairmen, District Heads in the selected 7 LGAs (Yabo, Tambuwal, Sokoto South, Sokoto North, Wurno, Gwadabawa & Binji) of Sokoto State, Media houses and other major elected officials and other government officials in MDAs such as RUWASSA, NOA, MOE, and other state ministries as well as key district leaders.

The 1-day sensitization visit to these stakeholders had the following objectives

- To introduce state2state project activities in the state & LGA to the relevant stakeholders
- To state the roles of LHI and the stakeholders towards achieving the project goal.
- To seek the support and buy buy-in the stakeholders

During these strategic visits, stakeholders were intimated on the objective of the intervention. The team also solicits their support and buy-in for a smooth implementation of the project and ensures its outcome. By the end of the visits, all the stakeholders attest to the timeliness of the intervention and also accepted their roles and responsibilities. A total of 20 visits were conducted to the state, LGA stakeholders, and, District Heads were conducted, reaching a total of 39 persons (6 Female and 33 Male) during the sensitization exercise.

Community Mobilization, Advocacy, Negotiation, and Media Training: The strength of the citizens is premised on their knowledge, skills, and their ability to creatively engage. To rightly position the citizens to effectively engage and demand accountability, LHI facilitated a 2-day capacity building training on community mobilization, advocacy, negotiation, and media for selected leaders from Tambuwal, Yabo, Sokoto South, Sokoto North, Gwadabawa, Wurno, and Binji LGAs. The training is aimed at;

- a. Building the participants' capacity to develop community action plan.
- b. Providing them with the pre-requisite knowledge and information as well as skills to navigate the cadres of service delivery points.
- c. Develop advocacy strategy, media engagement, and negotiation

The training has in attendance 3 representatives from each of the WDCs which included the chairmen, women leaders, and others from the 75 LGAs of the 7 LGAs. The training centered on principles and strategies of community mobilization which provided these leaders with the requisite knowledge

and skills in developing and building community understanding and coalition on social ideas, overcoming partisan sentiments for the good of the people, and building the trust bridge. The key contents around advocacy and negotiation were understanding issues, message framing and identifying. And mapping stakeholders in the power corridor, adopting the right methodologies and strategies while the use of media focused on the advantages, channels and optimal use of media messages. The knowledge exposure and skill of the participants enhanced the key roles that they play in the communities, ownership, and sustainability of our efforts and in ensuring that they are well prepared for the critical engagement to ensure services in the various sectors such as education, health, water, sanitation and hygiene, and environment are of quality and can serve the people.

Some of the immediate outcomes of the training was the change in the attitudes of the leaders, who expressed willingness to continue to engage on community issues. The level of awareness and discernment not to play partisan politics with their social needs was instant and going forward, every aspect of the project implementation was owned and led by them. The other was the visible improvement in their self-confidence and self-esteem, speaking more boldly and factually because of how they were empowered with the knowledge we shared with them.

There were practical role playing and scenario demonstrations which was designed to support and enrich their knowledge which included ways of harnessing local resources to strengthen service delivery, ways, and strategies in building a message, and how to carry out advocacy to the policymakers for effective service delivery, developing and framing media messages among other things. The training was held at the different LGA from the 22nd of February to March 1st 2022. Overall, 147 males, and 76 females made a total of 223 out of which 20 were PLWD, and 1 is female. 94 of these participants are less than 29 years of age.

One of the key outcomes of the training in all the LGAs was the formation of the 7-man cohort. This cohort was saddled with the responsibility of leading the advocacy drive of the local government area, following up, and providing feedback to their colleagues during the community scorecard.

Gender and Social Inclusion Town Hall Meeting: It is not just about being heard but being heard constructively and in a focused manner. This is the foundation of this interaction on gender and social inclusion which was designed in a town hall meeting format. It was the first among the series of town hall meetings LHI conducted under the project, a part of the channel for the marginalized groups – women, youths, and people living with disabilities, to link up with various duty bearers in the arms of government, share their thoughts and opinions and receive feedbacks. Across the implementing State2State's LGAs of Tambuwal, Gwadabawa, Yabo, Binji, Sokoto South, Sokoto North & Wurno Sokoto from the 21st through the 29th of March 2022 using the LGA Conference Hall, we facilitated the interaction between community members who were leaders of youth, women, and PLWD across each of the 75 wards, of the 7 LGAs. Also in attendance were LGA Council Representatives, and representatives from the Ministry

of Women Affairs, the Agency for Disability, the Ministry of Youth & Sport, SoSMEDAN, and the Ministry of Social Welfare and Community Development are all in attendance. The LGA Council Representatives are the Executive Chairmen/the Vice Chairman and 3 Councilors.

In all the LGAs, it was observed that many of these community leaders were meeting and interacting with the relevant government officials for the first time, and such an enabling environment created by this meeting became an opportunity for the marginalized group to critically present their issues and how best to meet their needs. Several issues were considered including the reasons why they are being marginalized, not consulted and service delivery is not tailored towards their specific needs. Some of the service delivery issues include not having youth-friendly health service, very limited special schools in Sokoto and it is in the state capital, most health facilities do not consider physically-challenged clients, and access to information, and access to poverty-reduction programs.

The meeting was a straight, formal, non-partisan, and interactive session with the council members and the MDAs representatives. The meeting achieved its focus as the Council members declared there, they would do as much as they can to provide an enabled platform for inclusion. Overall, the total number of participants across the LGAs was 288, of which 186 are male and 102 were Female, and of these numbers, 75 were youths and 68 were PLWD.

Bimonthly Community Scorecard with WDC Chairmen: Often than not, providing feedback to elected or administrative government officials is sometimes considered sentimental, and baseless opposition rhetoric. To ensure that the community leaders and the people are on the right track, following the training on community mobilization and advocacy, LHI developed and adopted the community scorecard template and provided an orientation for them on it. LHI also guided the WDCs on the way and manner it should be administered. In each ward, WDC organized its monthly community meeting where they have interactions around different issues of the community and on a bi-monthly basis, are required to hold Community scorecard sessions across all key service areas of interest at the LGA level. The meetings were attended by the key leaders of the wards. Discussions and outcomes from this session equally feed into the advocacy drive by the selected leaders. Overall, the activity had 225 WDC chairmen (224 males and 1 female) in attendance. The designed tool in the form questionnaire covered the intervention areas as a guideline for the activity. It has a rating/score from 1 to 5 which are excellent, very good, good, fair, and poor.

During the activity, the WDC chairmen were able to use the rating template to assess the quality-of-service delivery in their various communities. This rating cut across the school and Health Facilities (HFs) structures, the availability of Health Workers (HWs) and teachers, learning materials, and drug availability in both schools and HFs. In the area of WASH, are there WASHCOM in the communities, availability of a source of water supply, and toilet facility?

The various outcomes of these bi-monthly scorecard sessions were carried into the strategic mentoring and planning meetings where the selected WDC leaders were mentored and further exposed to how to develop their advocacy plans, frame messages, and even mobilize resources within to enable them to receive support from key stakeholders thereby resulting into improved quality of services provided at the HFs, in the educational environments and improve wholesome living through adequate water supply and provision of toilets in public places.

Bi-monthly Strategic Mentoring and Planning (SMP) Meeting: To strengthen the community leaders to have the enabling skills and strategy to contribute to quality service delivery, during the lifetime of the project, we conducted three (3) bi-monthly strategic mentoring and planning meetings with the 7-member cohort from each of the LGAs. The 7-member cohort was part of our project strategy to ensure ownership and sustainability. These were selected by the trained community leaders during the advocacy training to the process on behalf of the LGA. The activity was an avenue to review the documented outcomes from the scorecard session per LHA, crystallize the concrete issues of concerns and needs, map out the plans, identify the relevant stakeholders whether within the community or government, and design with the strategical goal, likely outcomes, and next likely action. One unique approach is that the subsequent SMP meeting reviews the previous action and develops a follow-up strategy to meet with the government, political and relevant agencies, and stakeholders to discuss their issues in the targeted areas of health, education, WASH, and security. The strategic meeting ride on the outcome of the town hall meetings and WDC bi-monthly community scorecard follow-ups. This strengthens the selected 7 Cohort capacity on advocacy to develop a plan for visiting relevant government agencies and ministries to help bridge the gap identified in their community schools, and health facilities and improves water sanitation and hygiene in their community/ward. The combined attendance for the meetings held was 147 persons (110 male and 37 female) and 2 PWD were in attendance. The meeting provided the selected 7 cohort members with the right informant and insight into issues that are needed to be addressed and how they can be done while also serving as a platform for the cohort to share what they have been doing and how they do it.

2 DAYS ORIENTATION FOR WOMEN LEADERS ON POLITICAL PROCESSES AND VOTER REGISTRATION PROCESS

48 Women leaders across the 23 Local Government were trained on civic education focusing on governance and democracy, their right and responsibilities as citizen. Voter education, their right and responsibilities as voter, electoral cycles, eligibility, where and how to register. as a result of the orientation training most of the women group leaders paid an advocacy visit to their Local Government Chairmen/ INEC office soliciting mobility for women who could not exercise their right due to lack of fund to transport themselves to INEC office. A total of 15 focus group discussion and 10 key informants' interview was conducted with women from different age bracket, youth and people with special needs and their opinion were factored into the program were collated.

A 1 WORKSHOP FOR FEMALE PREACHERS ON WOMEN'S PARTICIPATION IN POLITICAL AND DECISION-MAKING PROCESSES

The workshop focused on what the religion says about women's participation in politics and decision-making processes stating the roles women can play and the opportunity given to them during the time of the Holy Prophet. The scholars shared there with the participants that Islam permits women to exercise their right to vote and be voted for, to engage in politics, to have a job and even run a business. did not say a woman cannot hold a position but rather she should not hold positions (superior head) such as President, Governor rather she can be a representative. Women are permitted to lead or participate in politics so long they will abide by the rules, principles, and conduct of Islamic teachings, dress properly in such a way that they will not cause problems to the society. They were informed that Muslim women engaging in decision making is not a new phenomenon, during the time of the prophet, women's views were listened to and respected generally. 3 women-preachers were selected as agents of change and to develop sermon guide

The following were considered during the interactive session

- Why are religious institutions not supporting women's participation
- Where did the few women that got involved go wrong?
- major challenges
- why are men institution not allowing women?

WOMEN SITUATION ROOM RADIO TALKSHOW LAUNCH

As part of the strategic move and drive, to use radio airwave constructively for the benefit of women and as a channel to provide a needed platform, we organized a one-day launch of the Women Situation Room

The activity had in attendance the Commissioner of the Ministry of Women and Children Affairs, Director Women Affairs, the Leadership of Women in Colleges of Education, Role models, Women Group Leaders, SUG President of Usman Danfodiyo University, Treasurer and Vice President of Student Union of College of Education and different media houses. The launch of the radio talk show was used to create further awareness and also to explain the rationale, purpose and focus of the show which is essentially to heighten attention on various women-based issues ranging from electoral processes,

inclusive party politicking, accountability leadership, women network and solidarity building as well as showcase key achievements and accomplishment women has recorded while in general, getting the populace enlightened on the importance of women participation in decision making using different topics.

2 DAYS INTERACTIVE SESSION FOR THE DEVELOPMENT OF MONTHLY RADIO PROGRAM (WSR) AND BIMONTHLY SESSIONS.

In the course of our intervention a 2days interactive session was carried out, the session was used to develop the monthly radio program and the quarterly program, tagged (WOMEN SITUATION ROOM). The Participants brainstormed and discussed the purposes of the activities and what will be achieved the best way and approaches, as well as a topic or focus, suggestions were made on how the radio program will be, the radio station to be used, the messages and the resource person. Below are topics suggested and used for the radio talk show Women Situation Room.

- Women in Politics – Nigeria & Sokoto
- Women and their political ignorance
- Equal opportunity for women/PLWD participation in politics
- Breaking the intraparty dynamics
- Harnessing men's support
- The Power Factor - Building a positive relationship
- Societal challenge – cultural, Religious (Repeat via Jingle
- Money Giant
- The violent tendencies and their impact.

The talk show was aired for nine months. The first radio show was used as background narration, interviews & interactions, and the use of, Vox-Pops, this was used to set to the mind of the people and introduced the program properly. While subsequently, the program was 10 minutes interview with a female personality, discussion seasons 20 minutes, 25minuets for phone-in and answers.

A 1-DAY QUARTERLY SESSION TO DEVELOP OR REVIEW ADVOCACY GUIDE

As we attempt to be driven a measurable advocacy, 23 women across the 23 local government and some selected role models were trained

In order to strengthen their knowledge, a refresher was carried out on the topic below

- What advocacy is
- The strategies used in advocating for an issue
- Who allies and target are and their roles?

The guide was developed from the challenges women faced in political and decision making, target and allies were also identified. The issues highlighted included

- Cost of forms
- Selection of credible candidate
- Time and venue of meeting
- Candidate schemed or compromise
- Societal challenges
- Discriminating women in politic
- Women not heading institutions
- Limited opportunities for female in tertiary institutions which is also a learning and training ground

At the end of the session an advocacy guide was developed based on the issues highlighted by the women and advocacy visit will be conducted to all the relevant stakeholders. It is on this that the visits shall be premised on.

QUARTERLY WOMEN SITUATION ROOM WITH ROLE MODEL AND YOUNG WOMEN ON CAMPUS

The situation took place in College of Education, college of nursing and midwifery and Umaru Ali Shinkafi Polytechnic with young women, the situation was to mobilize younger women and mentor, support and build their confidence on active participation in decision making. The student capacity was built on self-confidence. They understood self-confidence as believing in themselves, trusting their own judgment, capacity, or capabilities. That self-confidence

has to do with them as women valuing themselves and feeling worthy regardless of any imperfection and for them to overcome it, they should always believe in themselves, value whatever decision they make, be willing to take risks and go the extra mile to achieve the desired goal without fear of being judged. Self-confidence is vital in almost all aspects of their lives; they were advised to break the vicious circle and do not allow themselves to fall under people who are likely to achieve less because of a lack of self-confidence. Linking it to their participation in politics, they were urged to have the confidence that they can participate without fear of being stigmatized or fear of losing. The following topics were discussed.

PUBLIC SPEAKING

They were informed that public speaking is good in education, business, and public activities in general. For them to excel in their career, there is the need for them to be good in speaking publicly. They were informed of many ways to learn public speaking, and how to practice using different methods such as practicing in front of the mirror, in front of family or friends and colleagues.

EXPERIENCE SHARING

One of our role models who is also a person with special needs shared experience on how despite being physically challenged she was able to become someone in life, she mentioned all the challenges she faced while studying but faith, confidence, belief and being resilient made her who she is today. As the Assistant zonal manager covering Sokoto, Kebbi and Zamfara State, she never allowed her situation to bring her down. She encourages the student to be resilient, believe in themselves everything is possible.

Below is the link to activities carried out

HIGH LEVEL ADVOCACY

Selection of State and Federal Project for Monitoring: The selection was done randomly with other CSO's and the Director from Ministry of Budget and Economic. The following projects were selected from each ministry:

Ministry of women, children and social welfare:

- Construction of day care Centre at Gusau
- Construction of new structures and upgrading the new one's

Ministry of Health:

- Expansion of existing facilities and development of 7-year clinic within Yerima Bakura specialist hospitals.
- To provide additional structures and facilities in women and children hospital.
- Renovation and equipping of clinic in Zamfara state ongoing.
- Renovation of Kaura Namoda general hospital Zamfara north senatorial district.

Ministry of water Resources:

- Constructions of Dam in Zamfara state ongoing.

Ministry of Environment:

- Erosion control with drainage at Furifuri town {Bungudu LGA} Zamfara state.

Agency of Nomadic Education:

- Renovation of three {3} zonal nomadic schools.

SRRBDA:

- Renovation of abattoirs in Gummi/Bukkuyum Federal constituency Zamfara State.

The selected projects were monitored and during the monitoring activity some projects are ongoing while some are abandoned.

Interactive Session with LGA: Bridging the gap between the governed and policymakers at the grassroots level of government which is the local government area has been one of the banes to development and is one of the issues that the State2State project seeks to address. While this promotes participation, it also ensures transparency and accountability. Following the outcome of the FGD sessions at the wards level, LHI organized 1- day interactive session from the 16th - 24th of February 2022 for both LGA council officials which comprised the LGA Chairmen, Vice Chairmen, secretary of the 7 LGAs (Yabo, Tambuwal, Sokoto South, Sokoto North, Wurno, Gwadabawa & Binji) as the case may be, Ward elected councilors and the people's representatives through the Ward Development Committees leadership which included Traditional leaders, Ward Development Committee Chairmen and women leaders across the 75 wards of the 7 LGAs. The session gave the Ward representatives an opportunity and avenue they have been

waiting for to present their issues to the council members. Using the interactive session platform, the ward representatives were able to express their needs around WASH, health, education, and infrastructure. During the interactive session, a total of 304 persons (222 males. 82 females) were in attendance. The representatives from the LG Council and the Ward Development Committee representatives had a robust discussion where the council members assured the citizens of their involvement in the decision-making process and governance

At the end of the meeting, in each of the LGA, the council chair or its representative, acknowledged that the meeting has brought out salient issues especially the need to provide opportunities to interact with the citizens, listen to their needs, receive their ideas, opinion, and provide them with feedback on their activities and plans. And these, the council chairman/representatives and the other MDA representatives promised to look into them and act accordingly.

Town Hall Meeting on Education: Working actively in achieving the goal and objectives of the S2S project, LHI conducted a one-day Town Hall meeting on education with the ministry/agencies such as SUBEB, SAME, Ministry of Education, and LGEA in the 7 LGAs which are; Tambuwal, Yabo, Binji, Sokoto South, Wurno, Sokoto North, and Gwadabawa that are championing the course of education in the state and community representatives (SBMC, CBMC, Mothers Association) on 1st -9th June 2022 at the LGA secretariat halls. The meeting sought to have a system of increasing access to basic education by vulnerable children and fewer privileges in all the communities and thereby strengthening education governance to ensure all needed infrastructures are being provided to aid learning. The total participant in attendance was 255, of which 88 were females and 167 males.

The key objectives of the town hall meeting were to create enabling environment where citizens can provide their views on the quality of education in their communities, the need for their involvement in decision-making process that will improve the education system and provide the channel to give and receive feedback and make use of it for quality service delivery.

The meeting also helps in getting the community members to be involved in the decision-making process that will shape the educational system in the state following the state of emergency declared on education by the government which gave birth to the Basic Education Policy, which sought to make access compulsory and even provided opportunities for the girl child.

Townhall meeting on infrastructure development: Many of the 75 communities in the 7 LGAs of S2S project implementation in Sokoto State are rural or semi-urban, which are inland communities and settlements, and are mostly laden with the burden of poor infrastructure. They are hard-to-

reach areas with no accessible road networks, many with no proper public toilets in their market areas, and no electricity, and all of these, their standard of living is impacted. The community members must be carried along in the critical discussion that can support the government's efforts to address their needs, especially through the various relevant stakeholders such as the Ministry of Budget and Economic Planning, Ministry of Works, RUWASSA, Ministry of Water Resources, and Ministry of Finance. In this respect, a one-day town hall meeting on infrastructural development and public works was facilitated by LHI across the 7 LGA of implementation to ensure government and influential persons have status feedback and provide government plans to either provide and/or improve the present service being delivered quality life of living. The town hall meeting took place from the 3rd to the 9th of August at the various LGA with 267 (182 Males and 85 Females and 75 persons living with disabilities) in attendance. The meeting exposed the MDAs to the needs of the community members and what better decisions to take to improve on services delivered to the people. While the community report was extensive especially for access feeder roads that the people sought government intervention and in response, promise to present the need to the state during the next budget preparation.

Random Supportive Supervision: Setting up a new order does take time, effort, and follow-up. This understanding was essential for us following the capacity strengthening training conducted for the WDC leaders from the 75 wards of 7 LGAs of Gwadabawa, Sokoto South, Sokoto North, Wurno, Binji, Tambuwal, and Yabo LGAs and setting them on the path that can strengthen their community coalition as well as help them to contribute towards improving the quality of service delivery, we conducted random supportive supervision that supports the WDC's monthly meeting and the Community score card meetings. The monthly meetings took place at the ward level and are led by the various committee chairmen to specific issues of social development across the different sectors of their society; discussed what has been done and what to do to ensure that effective, adequate, and appropriate steps are taken. LHI's role during this supervision is to observe and add value to the discourse where necessary. This also helped to assert the influence of the leaders and enrich their coalition-building. At the scorecard sessions, which took place every other month at the LGA level, we carry out the role of a neutral arbiter that helped them crystallize the core issues and be able to present their findings objectively. So, we conducted bimonthly random supportive supervision to selected wards to assess their achievement towards the development and improve service delivery in their communities. The total number of participants in attendance was Male 127, Females 31, and people living with a disability 6 (Males 5 and Female, 1). During the meeting observations, corrections were made where necessary, and guided on how to bridge the gaps identified during the meeting and the advocacy visit to the stakeholders.

ADVOCACY VISITS TO RELEVANT GOVERNMENT AND POLITICAL STRUCTURES

One of the key strategies of this project implementation is advocacy- a high-level interaction with key decision-makers to turn the tide and begin to promote new ideals of social inclusion and women's participation. To achieve this, we identified different gatekeepers in different corridors of power and through the selected role models and women leaders, shared with them, persuading them to changes in the unwritten policies, cultures and biases. Advocacy visits were paid to the Inter-party Advisory Council, Sokoto South Local Government, Dean of Student Affairs Usman Danfodiyo University, Provost College of Nursing and Provost Shehu Shagari College of Education, Rector Umaru Ali Shinkafi Polytechnic, the influential District Heads of Gwadabawa and Kilgori, who are also King-makers and the Vice-Chancellor Usman Danfodiyo University. The advocacy team included:

In the team at various times, we had the Commissioner of Women and Children Affairs, Director, Women MoWCA, Role Models, Women Group Leaders, and Media along with LHI staff. At the different visits, different specific issues were presented and discussed but in summary, here are a few notable issues presented:

- Cost of forms for women willing to contest for the political position should be reduced
- Women should not be given free nomination forms
- Women willing to contest should not be compromised or schemed out
- Time and Meeting Venue for Women should be conducive
- Women should be included among party exco from ward, Local Government and State level
- Capable women should be appointed as women leaders
- The use of male and female as political thuggery should be abolished
- Female student should be given the opportunity to hold the office of president of any association rather than being vice or financial secretary
- Women should be given the opportunity to head units or department
- Make learning environment conducive for persons with special needs
- Female Desk officer where female students can report any form of harassment
- Discrimination against women in student union politics
- Lack of male stakeholders' support
- Open Declaration of their support for women in governance/politic

In their feedback, the stakeholders who were visited promised to look into all that was presented, and where it was needed, solutions will be provided. In their own responses, the district heads encouraged the women to mobilize women, create awareness and also support any woman that wants to be involved

in politics while on the other hand, they will mobilize for male support for them. They advised that any woman willing to participate should be from a reputable family background that will make it easier for them to request male support for them. They stated that their palace is always open to us whenever we need their advice and support.

All the stakeholders visited appreciated the effort of the donors and the implementer, stating that the project came at the right time for that fact that they are looking for mentors who will assist in building the capacity of their female students to be able to take leadership positions whenever the opportunity avails itself. On the issue of the Students Union government, both the leadership at the College of Nursing and the College of Education mentioned that the institutions over a long period of time could not conduct student union elections due to the crises they had experienced in the institution stating that all positions are appointive. And that they always ensure that a female is deputy but are now open to considering a female as the head as we were assured that the institution will consider our plea. Worth noting in all the institutions visited was

- There was a request that we should help to develop the public speaking ability of the female as many shy away from speaking in public due to lack of confidence
- Welcome the idea of holding the Women Situation Room on campuses as the interactions will support the female
- Gave their supports to and open doors

GENDER BASED VIOLENCE / CHILD



Mapping and assessment of State community-based child protection structures, including community surveillance

As part of the entry phase activity, the team together with the surveillance team conducted mapping and assessment of community child protection structures in Bini and Tangaza Local Government where we identified the existing and dormant ones cataloguing who is doing what in a given geographical area. Service mapping was done as the first step to establishing an effective referral pathway. Detailed information about the services available and establishing referral protocols. The structures Identified include

- Male champion
- Surveillance team

- LGEA
- General Hospital
- Social workers/case workers
- NURTW
- Youth Groups
- Okada riders
- Farmers Association
- Mentors/Peer Educators
- Mother Association
- Awaiting Women
- Village Saving and Loan Association
- 100 Women Group
- Religious and traditional leaders
- CAN
- FOMWAN
- Religious Sect (JNI.JIBWIS)
- Black Smith
- Miyyeti Allah
- Mason
- *Vigilante*

These structures have their knowledge and skills improved for better, effective services and were able to carry out their duties diligently because their capacity was strengthened in case management, maintaining the highest standard of confidentiality, supporting children and their families within the communities and their extended household, and fighting stigma wherever and whenever. They were also taken through engagement techniques such as being emphatic when engaging a survivor, the use of active responding skills to indicate active listening, being non-judgmental, treat all information as confidential. A total of 60 persons (15 female and 45 male) from the 2 implementing Local Governments.

REVIEW MEETING WITH CASE WORKERS

To deepen mentoring, peer learning, collaboration and reporting mechanism, we held a monthly review meeting with community case workers. These monthly meetings had in attendance representative of the Nigeria Police, NCDSC, Religious group (FOMWAN CAN), Health Worker (MCH) Coordinator, Education Officer, Male -Champion, 100-Women Group Leader, Social-Welfare Officer, Surveillance Team Coordinator. During these meetings, we consider issues of new and existing cases, filling of the case management forms and tools, access to justice, service provisions and coordination among all the actors. The meeting was used to look at emerged or emerging challenges, discussed solutions and agreed on the way forward. These review meetings have promoted strong synergy among them as each actor takes responsibility for supporting survivors and their families. We retrieve case forms and upload such into CPMIS. During the project implementation, a total of 207 Cases were identified, documented and reported to the Local Government social welfare department and the Ministry of Women and Children Affairs using the monthly data collection tools.

Engagement of Religious and Traditional, community leaders for the issuance of statements and a public communiqué on their commitment to end violence against women and girls, GBV/HPs and to increase women's role and gender equality in the State

In a quest to mitigate gender inequality and address violence against women and girls such as domestic violence, sexual assault and harassment, child, early and forced marriage, harmful traditional practices, female genital mutilation which affects women and girls from childhood to old age, we had an interactive session with the community religious, traditional leaders across the 20 wards of Binji and Tangaza local government. Key statistics of GBV was shared with the local government, several underlying factors contributing to the menace which include arbitrate roles of the traditional and community leaders specially to cover up cases and pacify the violated and her family and possible actions that they can take to address the issue. 40 leaders made a verbal commitment stating in strong terms their willingness and commitment in ending violence against women and girls and measure were put in place. The 40 leaders expressed their commitment through their verbal statements, stating in strong terms their willingness and commitment in ending violence against women and girls and the measures they plan to put in place to address gender inequality and harmful practices as well as gender-based violence women and girls face.

MEDIA Thrust

Media continue to be a viable channel of strengthening awareness and those who are actively involved can also be heard. During the implementation, 2 activities were carried out a youth campaign and radio talk shows.

A total of 4 radio talk shows were carried out. In order to strengthen the public communicate that the religious and traditional/community leaders issued out during their engagement, we focused on the contents of the statement as contained in a public communicate to end violence against women and girls, GBV/HPs, and to increase women's role and GE (girls' enrolment). The first radio talk show focused on the Effect of domestic violence and gender-based violence against girls and women. Participants which included 1 religious' leader, 1 traditional leader, 1 school principal and 1 women leader elaborated more on issues of domestic violence in Sokoto State and their communities that is Binji and Tangaza, ways in which such issues can be addressed, and action taken regarding such issues and their stance. The format of the discussion on air, which audience had the opportunities to call and contribute was followed by the 2nd talk show focused on the effect of child/family abandonment and ways to stop issues of child/family abandonment in the community, re-echoing their stance in the communicate that men cannot neglect their family for any reason. The third talk show focused on girl child Education and enrollment. The importance of education was discussed, as ways to create awareness on such, and action to be taken regarding parents that won't let their girl child go to school.

The last talk show was on the 10th of December marking the 16 Day of Activism. With a focus on the effect of harmful traditional practices. The participants listed out some traditional practices that have brought about a lot of setbacks in their communities, especially to women and children. Furthermore, they stated ways such can be eradicated,

Media Campaign

The surveillance teams with the support of the traditional/ religious leaders, Youth and W of Binji and Tangaza LGAs conducted a campaign on ending violence against women and girls by sensitizing the community, and members on the danger or effect of violating the right of vulnerable persons I.e women and girls. This was done in different sectors which comprises of:

- Binji Jumu'at Mosque every Friday sermon
- Sensitization at Maikulki Market

- Sermon at Binji ECWA church
- Women gathering in Binji/Jamali respectively
- Government Secondary School Binji

The issues discussed were rape, the importance of enrollment of girls in school, maintaining marriage order, providing job opportunities to women, contribution to case reporting by the public, and the effect of violence/harmful practices. The activities were life-changing as the church members were happy to have such awareness. The leaders said this won't just be kept within but shared during youth meetings, at the market square a good number of people were captured meeting the targeted audience, as the youth did a demonstration and also traditional performances to get the people's attention before the awareness. The school were not left out in the awareness creation as the major target is also the young people, the turnout was great and many students share knowledge on the issue of GBV and some harmful traditional practices in their community and some were glad as this platform was one of the media that change their parents and community members mindset on the issues of girlchild education and today they stand as beneficiaries of such positive impartation. How to report cases was not left out during the campaign, and the campaign is said to be with great value and also benefit especially to the community at large. 800 hundred persons were reached out against the target of 600 for the quarter. A total number of 5720 persons including the last quarter campaign.

SENSITIZATION AND CAPACITY BUILDING OF RELIGIOUS LEADERS ON GENDER INEQUALITY AND VIOLENCE AGAINST WOMEN AND GIRLS THROUGH THE STEPPING STONES METHODOLOGY

The meeting with the Religious and Traditional leaders is said to be a very important and integral part of achieving the goals of this project due to the value and respect attached to these set of people in the communities. The religious leaders are to support the project in sensitizing and creating awareness to the people speaking from a religious perceptive about the need to eradicate or bring to an end all forms of violence against Women, Children and Girls including harmful practices done against them in their various communities using stepping stone methodology as a preventive measure. The most senior religious/traditional leaders from all the communities in Binji and Tangaza Local Government were selected, during the meeting, the leaders highlighted the different forms of violence they are aware of and is peculiar to their community. Each community picked the most pressing forms of violence in their community which form the topic of discussion. The dialogue looked at

- Root causes both primary and secondary of the chosen form of violence
- Its health effects on the child and the community

- The needs of the children in the community
- Practical solution to this violence

At the end of every session, the leaders developed an action plan that would be implemented in their community. They would be monitored by the surveillance team and project team. The leaders suggested a palm plate be developed with verses from the holy that would share during their step down or any gathering.

ENGAGE AND STRENGTHEN YOUTHS AND MEN CHAMPIONS/NETWORKS TO PROMOTE GENDER EQUITABLE NORMS AND END VAWG/HP USING STEPPING STONE METHODOLOGY

As part of the project implementation strategies, driving an awareness campaign among different groups of interest, age and gender was one of the methods to reducing the incidence of gender-based violence. The team together with the surveillance team identified and selected different groups and networks that would increase the depth of our reach to create an effective platform for community advocacy against VAWG/SGBV/HP and promote gender equitable norms and values in the community.

The selected groups are

- Farmers association
- Vigilante
- Youth groups
- NURTW
- Okada rider association
- Male champions
- Traditional council
- Religious leaders' council
- Surveillance team leaders
- Peer educators' coordination/ mentors
- Mother Associations

The network/association leaders were drawn from the 20 wards in both Binji and Tangaza and each LGA. Dialogue was centered on the most pressing forms of violence in their community looking at their root causes, the effect and the role they could play in promoting gender equitable norms and advocating against VAWG/SGBV/HP in their communities. A workplan was developed by each network which form part of their activities for the months

MONTHLY SURVIVOR'S FORUM

The forum provided the survivors with the opportunity to share experience, receive counselling and to offer them the necessary support and services on how to cope, be resilient and be able to bounce back in the society. During the implementation period under review, survivors were taken through life skills which includes, Negotiation skills, Value, Self-esteem, leadership, communication skills, decision making, assertiveness, menstrual hygiene and menstrual cycle, What, does a girl experience during menstruation, Challenges girls face during menstruation Personal hygiene

207 survivors were also provided with different services including psychosocial support, medical services, educational support, legal assistance, life skills support, health education, provision of re-usable pads and Nutrition education/counselling

The caregivers were provided with psychosocial support services, parenting skills and income generating activity, the meetings helped the parents/caregivers in better understanding of the impact of VAWG/C on their children and how they can help support the survivors at home. 30 caregivers

DOCUMENT REPORTED CASES USING THE PRIMERO MOBILE AND TRANSMITTING HARD COPY TO MOWCAS

Following the various integrated approach being deployed during the period of implementation, a total number of 207 cases were reported by the response team/caseworkers. All the 207 reported cases during the implementation were documented using PRIMERO and all hard copies were taking to Ministry of Women Affairs. The survivors' details were updated on kobo collect with the following

- Information of vulnerable child and vulnerable child and date of reporting
- Information of care giver and who reported the case
- From where the case was reported
- Where the incidence Happened
- Who has documented the case
- Information about alleged perpetrator (the person who committed Violence against the Child)

- Child protection concerns
- Services received by the child
- Referral of the child case

Status of the case

SOCIAL ECONOMIC /DEVELOPMENT



In the northern states of Nigeria, the Boko Haram, banditry, and herdsmen insurgency led to heightened levels of displacement and food insecurity. While humanitarian access is improving, most displaced families still rely on vulnerable host communities for basic needs like food, shelter, clothing, etc. This has put already impoverished host communities under pressure, leading to increased exposure to food insecurity. Lootings and fear of attacks have prevented many farmers from working on their farms in the communities, consequently leading to loss of harvest and productive assets and lots more. There was no means of livelihood to sustain them due to the insurgency they experienced, therefore making them vulnerable to hardship. To them, life is meaningless because they had lost almost everything they worked or lived for.

To this effect, LHI, in its program activities developed key activities around life skills capacity building, vocational skills, financial education, cash transfer, training and provision of livelihood to group savings and loan activity to combat the financial challenges confronting the households. In partnership with the Food and Agriculture Organization of the United Nations, LHI conducted a series of activities to improve livelihood and enhance the resilience to Humanitarian Crises, climate variability and the change of vulnerability in various identified communities in Borno State.

The Village Savings & Loan Group is one of the sustainable, efficient common ground and cost-effective platforms, supporting and improving the vulnerable, very poor, low-income earners and smallholder farmers in many inner, rural and peri-urban communities. Averagely, each group were self-selected between 15-25 members and runs on an agreed time cycle in which members save an agreed fee on a weekly basis and collect loans to either improve their income-generating activities or support the well-being of one another, socially. With the support of the Food and Agriculture Organization beneficiaries, Life Helpers set up 123 GSLAs in Bakassi IDP, Agric village, Gongulong communities, Bama LGA, Shuwari camp, EYN CAN Camp, and Teachers village camp with existing beneficiaries of FAO. In implementing these activities, we modified and designed activities to meet the needs and situations of each class and group of beneficiaries.

In partnership with ZOA that its proposed response aimed at providing cash transfers to support families to purchase food and fuel from the functioning markets. In 2022, activities implemented involved by LHI were the Set-up of 16 Demo plots and monitoring, Life skills training for business beneficiaries, Review meeting with business volunteers and extension workers was carried out, Cash disbursement, Verification of business beneficiaries and Distribution of Business kits, meeting with country director, Mentoring and Monitoring of GSLA Groups, Training of 100 new beneficiaries on GSLA methodologies, Distribution of seedlings and First Circle Share-out.

LIVELIHOOD

Distribution of farm tools and seedlings: In the month of August, LHI team supported ZOA in conducting a distribution of farm tools such as water can, hoes, rake, boots, and seedlings (cucumber seedling, lettuce seedling, pumpkin seedling, spinach seedling, okra seedling) to both old and new micro garden beneficiaries (701 & 43) and 8 extension workers. Also, mosquito nets were distributed to the extension workers and each micro garden beneficiaries in order to surround the demo plots and home gardens to prevent animals from invading the plot.

Review meeting with business volunteers and extension workers: In the year 2022 a review meeting was held with the extension workers and business volunteers at LHI office where basically issues encountered during the first implementation phase of the project were discussed and the volunteers and extension workers were reminded of their roles and responsibilities while carrying out their duties diligently on the project effectively and timely. Also, the volunteers were strengthening on effective communication, timely reporting and the use of reporting tool.

Set-up of Demo plots and monitoring: In Gongulong community of Borno state, demo plots were established in the 16 implementing wards to enable beneficiaries participate in their weekly sessions and also reduce crowd to promote understanding of topics shared and discussed during the sessions. So far, reports coming in from the beneficiaries is evident in their various homes as the individual gardens are in good shape likewise the demo plots. Some individuals have been selling their garden produce such as sorrel, okra, spinach, pumpkin, cucumber and tomatoes worth 7000 naira and above. There have been enormous success stories since these demo plots were established including home gardens where the beneficiaries practice what they have learnt so far from the demo plots.

Cash Transfer Program

Cash Distribution: In 2022, cash was disbursed accurately for the selected beneficiaries using their voucher cards and ZOA vendors. It was a 4-month activity and it was ensured that each beneficiary entitled to the cash was not left out.

Disbursement of seed grants to each of the cluster groups was carried out following the business plan drafted by each group. Items needed for start-up were purchased. The items are grains, cattle and grinding machines depending on their business plan. The below table shows the disbursement.

Table 6. VSLA (BRIEF SUMMARY)

S/No	GROUP	Male	Female	Amount
1.	Hamdala	0	50	345670
2.	Askira	0	50	341510
3.	Mallam Meleri	0	50	334800
4.	Alheri 1	0	49	328430
5.	Zaman Lafiya 4	0	49	307910
6.	Haske Alheri	0	50	380200
7.	Nasara	0	50	334580
8.	Zaman Lafiya 2	0	49	281160
9.	Murna	0	50	322310
10.	Kilakil	0	50	269750

11.	ZOA	0	49	282170
12.	Lafiya 3	1	49	319850
13.	Zaman Lafiya 1	0	50	353620
14.	Bamatsala	0	50	336160
15.	Gabdori	0	50	300350
16.	Taimoko	0	50	304750
17.	Alheri 2	0	50	324800
18.	Alheri 3	0	50	378490
19.	Zaman Lafiya 3	0	49	308060
20.	Maidadi	0	50	376318
21.	Hadikai	0	50	163530
22.	Godiya	0	50	351160
23.	Hamdala	2	48	345670
24.	Askira	1	49	341510

Group Savings

VILLAGE SAVINGS AND LOAN ASSOCIATION GROUP SHARE-OUT: A good number of the groups had their share-out within the year under review as they begin another cycle almost immediately, the cycle that varies from 9 – 12 monthly depending on the groups agreed constitution. The group saved NGN 9,971,459.00 and the total loan NGN 801,300.00 which were repaid. 40 groups in both Potiskum and Damaturu LGA had their first circle share-out leaving 5 groups still in their first circle. In Borno state, on ZOA project share-out for nineteen GSLA groups was conducted. So far, out of the share out carried out, some groups have a sum of 350,000 while others have 280,000.

MENTORING OF VILLAGE SAVINGS AND LOAN GROUPS: After the training, the groups selected a meeting date, some of the groups planned to meet weekly while others biweekly. LHI provided supportive supervision to the groups during their meetings. The meeting gives every member the opportunity to bring their savings and fines as documented in their constitution, occasionally the secretary read the constitution to the group to remind

them. Some groups gave out loans for individual businesses which were recovered at the due date. All savings and loans are recorded by the record keeper.

Within the year 2022, the GSLA groups that are functional in Bakassi camp and Teachers village camp relocated back to their various LGAs and some of the relocated beneficiaries have set up their meetings in places like Gwoza LGA, Baga and Marte. Other locations situated in Maiduguri such as Agric village, Gongulong community, Shuwari camp, and EYN CAN Camp do conduct their meetings on a weekly basis. As usual for any formed group, a number of beneficiaries have been dismembered due to financial constraints, distance and unforeseen circumstances the groups have been dissolved. During the course of the savings activity which takes place weekly and bi-weekly, groups were taught various life skills topics (topics like ‘‘creativity and innovation, Leadership and influence, my money and my savings, managing conflict, Decision making and Self-awareness’’) to enable them to focus on the goal of the GSLA. The topics emphasized the need for beneficiaries to have in-depth knowledge of their new environment and plans on how to create a comforting zone for themselves by adopting what they are been taught thereby putting it into practice. For the GSLA groups, ledgers were checked, errors were noted on the ledgers regarding the cash book, loan and net worth procedures and corrections were made. 22 groups invested in the group business of bags of beans, sorghum, maize and rice using their savings gathered through the start-up and they have been practicing giving loans and paying back with service fees.

Table 7. Shows the number of groups and membership

S/N	LGA	Community	Name of Group	Male	Female	Total
1	Potiskum	Boriyel	Alheri Group (Boriyel)	0	20	20
2	Potiskum	Bogocho	Alfarma (Bogocho)	18	12	30
3	Damaturu		Mashallah YBC	0	30	30
4	Damaturu		Alheri Group	0	27	27
5	Damaturu		Salama Group	0	29	29

Verification of business beneficiaries and Distribution of Business kits: In the year 2022, the beneficiaries that showed interest in businesses were verified and prepared for training on Life skills before each start-up kits were given to each individual, business items such as Petty items, Soup items,

Dan-wake, potatoes, yam, food items, firewood, Turaren wuta, clothes, Moi-Moi, grinding machine and Rice were given to them. The distribution was documented house to house with interesting pictures to showcase the beneficiaries' mood as they each gladly collected their items. They were encouraged on the need to ensure they use the skills shared with them during the life skill training to boost the businesses and have a good turnover. Each beneficiaries who were given the items were well informed of the idea that they are being piloted to ensure the project objectives is met. Officers and volunteers were assigned to a number of beneficiaries for the purpose of monitoring to ensure the business is on track to achieve the purpose. So far, it was observed that the business is going on fine while some beneficiaries were noticed to have deviated from the initial business to other items that fetch them more profits, their attention was drawn to the need to focus on their intended business as reported by the Monitoring officers. Also, a tracking template was developed by the M&E to help in tracking the progress of the Businesses.

CONDUCT SURVEY ANALYSIS: following a one-day training on survey analysis conducted by ZOA team, survey analysis was carried out to identify synergies and opportunities for improved programming between ZOA and LHI through the grand bargain commitment of localization and nexus approach suggest linkage for future collaboration and partnership in line with ZOA strategies frame. The survey was conducted in 16 wards in Gongulong community, and the targeted beneficiaries are 85- Host community members, and 155- IDPs, a small group was also formed with key community members in order to conduct FGD consisting of 14 beneficiaries (7 &7) each from Host community and IDPs.

Business/Financial Education Counseling & Training

GSLA training: In the Month of March 2022 100 newly identified beneficiaries were formed into GSLA groups after being enlightened on the requirements of GSLA and its methodologies. Also, a date was fixed for the GSLA training where 86 card-carrying and non-card-carrying beneficiaries were trained. The training was aimed at educating the beneficiaries on how to save money at the same time invest in businesses that can generate profit instead of remaining idle and dependent on what their husbands bring home. After the training, the 86 beneficiaries were classified into two groups (43 each) and given passbooks and GSLA kits which comprises of 4purse, 4rubbers, 1 ledger, 1 pen, 1 mental box, 1 ink stamp, 1 stamp pad, 1 pencil, 3 padlocks and 1 ruler.

Life skills: 45 VSLA groups with a total of 1044 members were trained on Life-skill in Yobe state. The Objective of the activity is to guide the groups on how to generate more income on their Savings, to be able to have a budget on how to best spend their income and utilize business opportunities and to help members develop a simple and realistic plan to save money for the goal either big or small. The participants were taken through core life skills which are Self-awareness, Empathy, Critical thinking, Creative thinking, Decision making, Problem thinking, Effective communication, and

Creating thinking while in Borno the identified and verified 68 beneficiaries were trained on Life skills covering ‘the 7ps of Marketing, the marketing plan, business idea and business plan, the beneficiaries were enlightened on the importance of this life skill training with questions and answers.

EXPERIENCE SHARING: The meeting was conducted with officials of 18 VSLA groups in Damaturu LGA and some selected VSLA group members from Potiskum LG, 42 people were in attendance (M: 1 F: 41). The participants share their experience on group business they invested, the challenges encounter and successes in term of profit recorded within the period of investing. The method deployed was shared as how they have used loans received to boost their business.

As a result of Covid-19 pandemic worsened the plight of many families, driving them further into poverty. Life Helpers Initiative with support from Victim Support Fund distributed food packages to vulnerable households, who were facing greater difficulties with losses of income, higher inflation rates, and high cost of living which in turn made the very low living of these mostly peasant farming families and small ruminants keepers have harder times in managing their very little income. In some cases, ended in losses of lives and breadwinners, mental health challenges, health complications, and even higher malnutrition among children under 5 to have immediate and needed relief from the myriads of thoughts of how to cope with the pressure of feeding and catering for the household members. 10 households were selected from each community, and these include

- Female-headed household (mother) or an older child shall be prioritized for selection as beneficiary.
- Person with special needs
- Households/beneficiaries that are not able to cater for their basic needs/daily nutritional requirements, including the aged, and orphaned.
- Beneficiaries affected by insecurity
- Victim of terrorism
- Person with special needs
- Orphans/ old age

- Survivor of gender-based violence

The 250 bagged items were distributed to the beneficiaries. The items distributed are

1. 10kg of rice
2. 7.5kg of maize
3. 2 sachets of salt
4. 2.5litres of oil
5. 5kg of beans

250 beneficiaries benefited from the food items: 125 in each of the LGAs and the breakdowns are

1. Binji- 55 male heading households
70 female heading households
2. Tangaza-62 male heading households
63 females heading households

LHI BASED ACTIVITIES



HEALTH

SENSITIZATION ON MATERNAL AND NEW-BORN CHILD HEALTH: As a part of the LHI-based activity, Sensitization and awareness sessions on maternal and new-born child health-related issues were conducted in the month of May and August in some selected communities of Girei and Song LGAs of Adamawa State and Bauchi, Tafawa Balewa, and Alkaleri LGAs of Bauchi State. The activity targets primary health care centres and women who attend weekly antenatal care visits. The sensitization sessions were conducted at primary health care centres. This activity aims to sensitize pregnant women and lactating mothers on MNCH topics that will aid in improving the health of mothers, new-borns leading to improved health of the community. Women were sensitized on maternal health issues such as the importance of attending antenatal care sessions, why prenatal, antenatal and postnatal care are important, the benefits of good nutrition for pregnant women, why adequate rest is important, Good hygiene practices, healthy lifestyles, the importance of family planning and exclusive breastfeeding, Importance of immunization, use of LLIN, Regular checks of Blood Pressure, weights & height measurements. The women were also educated on how to prepare baby food such as tom-brown from Maize, Soybeans and groundnut and Soya Milk. A total of 78 women were reached with 29 in Sangere, 4 in Dakri, 20 in Jabilamba and 25 in Salama Housing PHCs. Furthermore, the community-led structures were guided and sensitized on the importance of resource and community mobilization which will assist in implementation of their activities such as drug revolving funds (DRF), Emergency transport systems, etc.

NUTRITION

COMMUNITY SENSITIZATION ON NUTRITION: LHI conducted community sensitization on nutrition with pregnant women, lactating mothers, youths and community leaders in 6 wards of 3 LGA namely Kurum PHC of Bogoro LGA, Zwall and Lere PHC of Tafabalewa LGA and Dott, Wandu and town maternity PHC, a total of 282 people was reached (M: 31 F: 251). At the course of the meeting the participants were sensitized and encouraged on exclusive breastfeeding and hygiene practices, preventions of malnutrition and food therapy and child illness such as infectious diseases that immunization takes care of (diarrhea and Pneumonia). The topics were facilitated by the facility in charge in the locations visited, at the end of the meeting, participants were equipped with the right knowledge to live a healthy lifestyle.

GENDER-BASED VIOLENCE AND CHILD PROTECTION

ORGANIZATION OF PEACEBUILDING ACTIVITIES: The activity was carried out across in the implementing communities where LHI staff supported Conflict Resolution Committee to organize peace building activities/event that addresses issues that causes conflict in the community. This activity was conducted on quarterly bases and revolves around Dialogue session with key stakeholders addressing identified issues that causes conflict, also games/sports were carried out to reconcile various groups and promote togetherness in the communities. Over Hundreds of community members were reached through these activities and conflict issues were address during these activities at various implementing communities.

SUPPORT IN THE IMPLEMENTATION OF THE MEDIATION COMMITTEE'S ACTION PLAN: The activity was done to support the Conflict Resolution Committee (CRC), during the implementation of the action plan we were able to track progress to ensure it has been carried out in line with the objectives and time frame, also technical support was provided in implementing the plan for a positive result.

Training of GBV Peer Educators on The Prevention and Response to Gender-Based Violence: Gender-based violence, such as sexual violence and harassment, child marriage, intimate partner violence, emotional abuse, female genital mutilation etc. pose adverse effects on individuals who have experienced it or are at risk of experiencing it. Gender-based violence knows no boundaries as it occurs everywhere and that includes homes, schools, workplaces etc. it is also recognized that the prevalence of GBV in communities and school-related GBV in schools prevents children from learning. Girls are likely to be absent from school because of sexual harassment and boys likely because of bullying, and emotional and physical assault. Life Helpers Initiative recognizes that the prevalence of GBV is a pandemic that requires immediate action and as part of our vision to ensure a safe and fulfilled life for everyone, LHI Adamawa office within the year 2022 conducted the training of GBV peer educators in four (4) selected secondary schools within Yola-South and Song LGAs. The schools include Aliyu Musdafa College Yola, Government Day secondary school Sangere Bode,

Government day secondary school Murke and Government day secondary school Jabilamba Song LGA. A total of 40 students and 8 teachers were trained across the schools. The training was conducted with the aim of raising students' awareness of gender-based violence prevention, response and promoting new behavioural gender attitudes among young generations. The students were trained to become GBV peer educators with responsibilities that include sharing their newly obtained knowledge and creating awareness on GBV prevention and response across their schools and communities.

REVIEW MEETING/SUPPORTIVE SUPERVISION WITH GBV PEER EDUCATORS: Following the training of GBV peer educators that was conducted from the previous year and within the year, the team conducted four (4) review meetings and supportive supervision visits to the selected schools. The visit aimed to follow up with the students regarding their plans and commitment towards creating awareness of GBV within their schools and communities. The visit was also conducted to provide supportive supervision during their school sensitization activity and to provide coaching and mentoring where it required support. This activity was conducted across the seven (7) schools that were trained.

GENDER-BASED VIOLENCE AND CHILD PROTECTION CASE MANAGEMENT: Within the year, LHI received and managed a total of four (5) child protection cases and one (1) GBV case. 1 CP case was referred to the state sexual assault and referral centre for medical support, the human right and Nigerian police for legal support and these supports were received. Two (2) CP case was referred to the following organizations and received the following support: ROHI Provided 1 dignity kit for the mother, Doctors on call Initiative provided medical support(surgery) for the baby with a defect, UNICEF supported with dignity kits, Sare Aid Initiative provided Nutrition support (food items, tom brown for the children) and Agaji Global Unity Initiative supported with WASH dignity kits. The GBV case was referred to Agaji Global unity foundation and restoration of hope initiative (ROHI) where the survivor accessed dignity kits. for the child protection case, the child's mother received coaching on positive parenting and the effects of child labour on a child's development and general well-being.

EDUCATION

Education Support Service:

LIFE SKILLS TRAINING: Life Skills are said to be the abilities that help us adapt to and behave positively so that we can deal effectively with everyday challenges. Life skills are significant because they give adolescents and young people more control to improve their life. As part of LHI Education program, the Adamawa office conducted life skills training in the month of October and November 2022 for students in Aliyu Musdafa College Yola and Bulunku Community of Zamfara State. 62 students were selected from the senior classes in this school and have been trained in some

life skills lessons that include communication, expression, and decision-making. The students are slated to undergo more training sessions on life skills topics such as self-awareness, empathy, critical thinking, creative thinking, problem solving and interpersonal relationship. Following the completion of these training sessions, the students will graduate, and a new badge of students will be enrolled.

Monitoring and Supportive Supervision of G4G & He4She. The monitoring was conducted in the month of January-March 2022. The activity of G4G and HE4SHE activities as well as Children enrolled by federal ministry of Education were monitored Maidatsi model primary school Kotorkoshi LGA & Dan Sokoto and Maidatsi MPS Bungudu. It was observed that the girls and boys enrolled into schools are punctual. During the interaction the children were able to explain the importance of education in their lives and that of their families. Most of the girls have transited to Junior Secondary School. Average of 26 girls were met during the visits.

Focus Group Discussion: The activity was conducted at Teachers training and development Centre Gusau, on 23rd & 24th September 2022 with the purpose of interacting with the girls on 4 pillars which are Participation, Development, Survival and Protection. The meeting was organized by State of the Nigerian Girls Summit (SONGS) in collaboration with Plan International, UNICEF and other donor partners. 25 in school and 25 out of school youths were interacted with on the challenges confronting them in Education, their Right and how they were treated in their respective communities as Girls, where most of the responses we got from them, all of them does not even know their right as a girl, they are experiencing Gender Based Violence.

EDUCATION

Access to basic education and education governance

LHI team in Bauchi conducted sensitization visit with community-led structures in some selected communities of Kobi, under 5, Tashan Babaye, Miri, Yalwa Domiciliary in Bauchi LGA, Town Mat, Tafawa Balewa LGA, Kafin Madaki, Zalanga Ganjuwa LGA and Gokaru, Gwaram in Alkaleri LGA, a total of 87 people were in attendance (M: 45, F: 42). The women were sensitized on the importance of basic access to education. Also, the community-led structures were enlightened on the importance of resource and community mobilization which will assist in basic access to enrolment, retention, completion and transition.

SOCIO-ECONOMIC DEVELOPMENT

Conducted sensitization visit with community members at Kobi, Under 5, Tashan Babaye, Miri, Yalwa Domiciliary in Bauchi LGA, Town Mat, Tafawa Balewa LGA, Kafin Madaki, Zalanga Ganjuwa LGA and Gokaru, Gwaram in Alkaleri LGA, in attendance were (M: 45, F: 42) making a total of 87

persons. The women were sensitized on socio-economic development to improve their livelihood by encouraging them to identify and join an existing Village Savings and Loan Association (VSLA) in their community, they were also told the benefits and importance of being part of the group, in addition people without any source of income were encouraged to learn a trade/skill (beads making, sewing, tie & dye, etc.) from the established groups. Some with group savings misconceptions were also enlightened

CROSS CUTTING ISSUES

LCBC-DIMS-CSO SURVEY/ASSESSMENT: The Lake Chad Basin Commission-DIMS CSO Survey/assessment was conducted in April 2022 at the LHI Adamawa office. The assessment was conducted by IMMAP. The assessment entails collecting the organization's information. This information included the organization's profile, list of board of trustees, EFCC SCRUML certificate, proof of membership to CSO coalitions etc.

Multi-sectorial need Assessment exercise by IOM and UNOCHA: LHI Adamawa office participated in a 2-day training that was organized and facilitated by IOM and UNOCHA and aimed to train partners on GPS arrow, Avenzar and QGIMS software that is to be used for Multi Sectorial Need Assessment survey in 21 selected LGAs of the Adamawa state. The Multi-sectorial need assessment aims to assess the needs of individuals by sectors including but not limited to protection, WASH, FSL, Housing, Agriculture, Health, Nutrition, Education, Peace Building etc. Following the training, LHI's M&E officer and Program support staff participated in a 28-day Multisectoral need assessment exercise that was conducted across the 21 LGA in the state and the reports were shared with IOM and UNOCHA

STAKEHOLDERS FORUM

LHI staff participated in the monthly GBV sub-sector meeting held at the Women Development Center Yola and the BAY states partners sector meeting held on zoom. Partners shared updates on their activities and challenges encountered.

Partnership Meetings

LHI staffs participated in different meetings with partners and stakeholders across the 8 states of residence. Capacity building enhances the knowledge of LHI to work in the core areas of project/partners/donor's interest to achieve the target goals. Below are the meetings attended

- Training on Disability Inclusion and Awareness: the training took place in Sokoto from 1st-4th April 2022 where the partners and stakeholders' knowledge were enhanced on gender and gender inclusion, having the knowledge about PWD and how they should be addressed.
- 3-days meeting on stakeholders' sensitization on SSHDP II joint annual review/mid-term review (2020-2021) and qualitative data collection from 11th-13th May 2022 at Sokoto Guest Inn.
- State2State Pause and Reflect quarterly meetings
- Sustainable Entrepreneurship and Life Skills by Save the Children International.
- Mental Health and Psychological Support and Child Protection (MHPSS& CP) by Save the Children International.
- Case Management and referral Pathways by Cooperazione Internazionale.
- Child Protection Case Management by Save the Children International.
- Household Economic Analysis (HEA) by Save the Children International.
- TOT on Village Savings and Loan by Save the Children International.
- High level policy dialogue on Reintegration of survivors and Ex-combatant in yobe state, Organized by international alert.
- EU Program review meeting with staff and Partners, organized by save the children international.
- Sustainable Entrepreneurship and Life Skills by Save the Children International.
The training was aimed at empowering facilitators with the knowledge of life skills and entrepreneurship to in turn step it down the various targeted locations. What are life skills, and its components was explained vividly as well as what entrepreneurship is and characteristics of an entrepreneur. Other topics discussed were Business, 5Ps of marketing mix, etc.
- Mental Health and Psychological Support and Child Protection (MHPSS& CP) by Save the Children International. The aim of the training is to enable participants.
 - to Understand the basic concept of child protection.
 - Know the definition of child protection and related terms.
 - Know definition of sexual Gender based violence (SGBV), related terms and different types of GBV.
 - Understand the core principles of GBV.

- IHP planning and review meeting
- Case Management and referral Pathways by Cooperation International.
The purpose of the training is to enhance participant's knowledge on case management and the referral pathways. At the end of the training, a session for questions and answers was done.
- Child Protection Case Management by Save the Children International.
The training began with the question 'Who is a Child?' then followed by the actual definition of it after which Child protection and case management was explained in detail. Protection concerns were raised as well as how to manage such scenarios when it occurs in our individual neighborhood.
- Household Economic Analysis (HEA) by Save the Children International.
- TOT on Village Savings and Loan by Save the Children International.
The training was on the VSLA methodology. The definition of VSLA was given and, the procedures of the savings meetings, loan meetings and share outs were explicitly explained to everyone.
- High level policy dialogue on Reintegration of survivors and Ex-combatant in Yobe state, Organized by international alert.
- EU Program review meeting with staff and Partners, organized by save the children international.
- Civil Society legislative Advocacy centre (CISLAC) in collaboration with international alert with support from European Union organized a training on high level policy dialogue on Reintegration of survivors and Ex-combatant in Yobe state.
- Participated in USAID MOMENTUM safe Surgery in Family Planning and Obstetrics where the following reviews was done.
- Participated in Young Leathers Network Safe to School Project where the following review was done.
- Participated in Engagement with civil society organization (CSOs) for tuberculosis (TB) domestic resources mobilization (DRM) where the following review was done.
- Participated in CSOs work plan at BASNEC Bauchi where the following review was done.
- Participated on familiarization meeting with Bridge Connect and George Town Global health Nigeria at BASNEC office Bauchi State
- State Stakeholders Consultative Forum on Ageing (BASSACFOA) International Day of Older Person

CHALLENGES

- Lateness in disbursement of funds by donors/partners
- The devalue of naira affected programming
- Increase in price of commodities which is against the initial budget
- The security issues posed threat to program implementation

LESSONS LEARNT

- The openness and transparency of Life Helpers Initiative gave it an edge over competitors
- Staff capacity is constantly enhanced through online courses, knowledge-sharing sessions (KSS) and other partners' programs.
- Community structures were able to do improve and recorded desired result as a result of LHI capacity building and mentoring
- The training of PPMVs/CPs helped them to know the limit at which they can provide health services to children and necessary steps to take in providing family planning to clients.

ANNEX

SUCCESS ON PROJECTS

Care International

- The Model Mother at Zango (Hadiza Muhammed Audu), reported in the month of July that there were pregnant women in her group who during their previous pregnancy, gave birth at home by a traditional birth attendant but have now agreed to have their next birth in the health facility. This was as a result of dialogue session conducted on home and hospital delivery had exposed them to different opinions and provided an opportunity to reflect on their own attitude. This time, in honor of their new knowledge, had their safe delivery at home by the midwife at Zango PHCC because Zango PHCC is under construction, and it has no labor room. During the visit by the project staff, the women shared their experience on how the labour went, and a safe delivery was conducted successfully unlike the previous one received by the TBA. There was not much pain after delivery and post-partum blood was expelled. The babies and the mothers were in good health.

- Halima Musa Asiya is a housewife of 30 years who doubles as a Model Mother and a twin mother living at Garin Lamido of Sabon Gari ward of Bade Local Government Area of Yobe State, Nigeria. When asked Halima, Halima suffered in her house for too much work without having someone that will help her in the house despite being a lactating mother of twins, and her husband neither help nor assisted her at home due to social norms. Her husband always thinks and is convinced that men never work at home. It's the duty and responsibility of the housewife to do every work at home.

The intervention of CARE International in partnership with LHI implementing the Healthy Child (Lafiyan 'Yan Yara) Project whose goal is to reduce the mortality rate of children under 5. The Model mothers were trained on Social Analysis and Action (SAA) with the aim to engage community members through dialogue sessions to address social norms and practices that negatively affected individuals and the community.

Having trained Halima on SAA, she briefed her husband about the training and how the SAA could positively change the social norms that negatively impacted the lives of individuals and society at large. During the briefing, Halima Facilitated a session using the SAA tool (Pile sorting) with her husband where they both identify and critically reflected on the gender roles and decision-making in the household. After critical thinking and reflection, they both suggested how things might be done differently. The husband found the session interesting and said, "the SAA challenged my own attitude and commonly held belief".

Thank God! the outcome was positive. Halima's husband had really been of help to his wife by doing some house chores, supporting individual, and family well-being, and reducing hectic work at home.

Presently, Halima was happy. She can wake up in the morning and find almost everything in accordance and most of the hectic work is done by her husband in the house. The caring husband can now cook, wash clothes, and prepare the children for school unlike before.

State2State Project

- Change is the result of all true learning and education is that great weapon of change that change the world. The classrooms and schools are an entrance into the world, not an escape from it, which brings about the need for more classrooms and schools in some communities like Huchi ward (Gwadabawa). Hachi model primary school as of 2020 till date is one among the schools in Gwadadawa that have more population of students The WDCs saw the need and paid an advocacy visit to Hon. Abdullahi Balarabe a member of the house of assembly, pleaded on behalf of the community members and the school, for a need to build additional classrooms to enable a good learning process and encourage

the community to enroll their children in school. During the visit he said he believes that this will ease the burden of the teachers as they will have few students to take care of, applauding the WDC for being the voice of the people and taking a bold step by contributing to the development of the community and improving the educational system. Due to that visit Hon. Abdullahi Balarabe, donated funds, and a block of three classes were built in Huchi model primary school as part of his constituency project. All thanks to the State2State project and the radio programs aired weekly giving people the opportunity to inform the WDC and government on the present condition of their community and what needed to be done. That also helped the information process for the community to the WDCs on time.

- Sarkin Musulmi B is a ward under Sokoto North LGA with a large population and has only One PHC which women use to access services. In the last 1 year, their PHC borehole isn't working, and no action to take. But because of State2state intervention in line with an indicator of (No of People trained on Gender and social inclusion) LHI conduct a day town hall meeting on Gender and social inclusion where we invited WDC, 100 Women Group, Village Head to discuss the area of services delivery which Health is included. After the meeting, the community structures were able to carry out an advocacy visit to the Dan Madami Isa (Commissioner for Rural Development) requesting to repair the PHC borehole, which he did, and even purchase a new generator for the PHC water pumping and used for generating electricity in the PHC.

FAO Project

LHI Basics

Japhet Ibrahim in Yobe state shared that he has a friend who physically abused his girlfriend and was planning to rape her. When Japhet came to the knowledge of this, he immediately met his friend and sensitized him on what GBV is, and the consequences of it to both the perpetrator and the survivor. He informed his friend that he will go to prison if he goes ahead to implement his plan. On getting this knowledge, his friend changed his mind and apologized for his actions and plans.

Hear our Stories

Nafisat' Story

Nafisat is a 12-year-old who lives in Binji LGA of Sokoto state. Subjected to hawking by her family in order to support the family's means of livelihood, Nafisat was raped and left to die by her perpetrator. Identified by the gender-based/child protection surveillance team in Binji, Nafisat was referred and taken for proper medical care at the Nana Khadija Sexual Assault Referral Centre. In their quest for justice for Nafisat, her parent reported the case to the Nigerian Security and Civil Defense Corps (NSCDC). The perpetrator on hearing the news took to his heels and left the town. However, he is currently on the wanted list by security agencies in the State.

Nafisat was then enrolled by the Community Based Surveillance team where she attends the EU-UN Spotlight Initiative supported survivor forum put in place to encourage survivors build resilience and give life a second chance

She is gradually recovering from the trauma and shock she experienced from the event through engaging in psychosocial support services she enjoys at the safe space. In her words: *“This group has helped me to develop great self-confidence and courage to go back to school. I now thrive for a better life. All thanks to EU-UN Spotlight Initiative and the Life Helpers Initiative (LHI) team for giving me a new beginning and also the teaching we get monthly has helped me to know how to stay safe and secure.”*

Hassana Stories

All hopes seemed dashed for **Hassana** a 15-year-old from Tangaza LGA who was raped by an unidentified man on her way to source for firewood in the bush.

After the sad incident, **Hassana** was rushed to the Nana Khadija SARC for medical care. She was immediately attended to and the case was reported to security agencies. The long search for the perpetrator is still on as she was unable to identify the perpetrator. **Hassana** was however referred to LHI by the surveillance team at the community to be part of the monthly survivor's forum.

Hassana has braced up to face the realities of times, and her mental health has greatly improved through the EU-UN Spotlight Initiative survivor's forum. She has enrolled in school and in her Senior secondary year now. In her words: *“I want to be a lawyer, to be able to give justice to survivors like*

me. I am forever grateful for this training that builds in me a new hope and confidence, I feel free and also loved. Thank you, EU-UN Spotlight Initiative”.

Hadiza’s Story

Hadiza is a 17-year-old survivor of female genital mutilation and domestic violence. She was diagnosed with fistula at age seven after she was badly injured by the blades of the traditional bed attendants who performed the genital mutilation. Life became unbearable for Hadiza who faced discrimination and neglect from her family and friends. Her condition greatly affected her performance in school as she was constantly despised by her school mates. She decried that going to school became a nightmare for her so much that she cherished isolation.

In her words: *“I was doing so well in school, but my classmates complained bitterly that I was smelling urine and they won’t seat with me. **“The Brilliant Smell”***



Being a product of a broken home, Hadiza was neglected in her condition by her father and stepmother who constantly tortured her physically and mentally.

The narrative changed when Hadiza’s mother took her to the hospital to seek medical help where she received free repair by fistula foundation with support from the EU-UN Spotlight initiative.

Like many survivors who were successfully repaired, Hadiza now has a second chance to life. Her dream is to go back to school and study to become a medical doctor to repair fistula patients for free.

In Hadiza’s words; “My greatest wish is to go back to school, I want to become a doctor in future, I want to be part of the people who provide help for women and girls especially fistula survivors. I want to also take good care of my parents. All thanks to EU-UN Spotlight Initiative, I now have my life back”.

Fatima’s Stories

Fatima is a 30-year-old Fulani woman from Zamfara State who lost her parent at the age of 10 years and started living with her uncle who married her off to her first husband (a Fulani herdsman) at the age of 16. 3 years later, Fatima got pregnant but suffered prolonged labour for 3 days at home without help until her neighbours heard her cry and rushed her to the nearest hospital. She delivered a stillbirth and macerated through the Caesarean section.

The husband who was away during the happenings that led to her fistula condition sent her a divorce letter which threw her into depression, anxiety, and stress. On discharge from the hospital, Fatima returned to her uncle’s place where she stayed for years before being married to another Fulani man whom she had a daughter. The man passed away.

In her words: *“At age 19 my entire life changed totally and I was psychologically disturbed. I started a new life in my uncle’s house where I was isolated from everybody. I was given a separate room where no one would come to check on me. I cried bitterly every day and begged Allah to take my life”*.

Things took a new turn when information from the radio reached Fatima that there would be a free fistula repair campaign in one of the fistula repair centers organized by Fistula Foundation Nigeria. She was taken to the centre with the help of her uncle and an examination reviewed that she had a complex fistula that requires surgeries in stages. Haven lived with fistula for 15 years of her life, Fatima went through four stages of fistula repairs from which she had the last one earlier this year by Fistula foundation with support from the EU-UN Spotlight Initiative.

Fatima is now happily married, stands as a fistula advocate in her community and has been empowered through Ministry of Women and Children Affairs with various skills such as sewing, shoe making, and how to rear animals with support from EU-UN Spotlight initiative which has improved her livelihoods and mental health. Fatima now generates income from the empowerment program and is living a stable and fulfilled life with her family.