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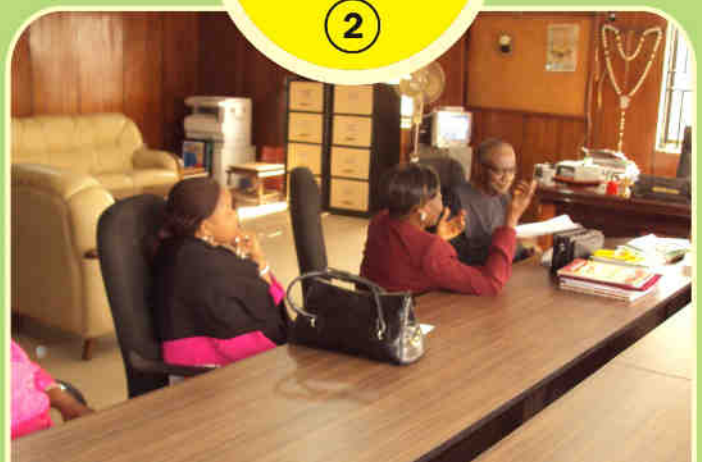
COMMUNICATING ACTION RESEARCH RESULTS TO STAKEHOLDERS: CPED RECENT EXPERIENCES

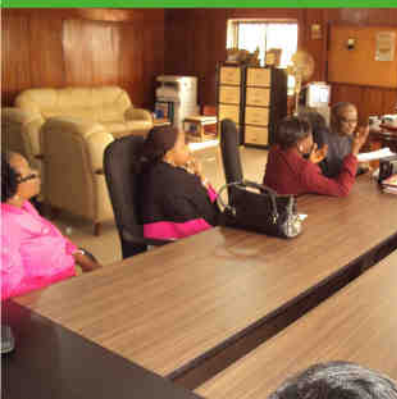
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About CPED

The Centre for Population and Environmental Development (CPED) is an independent, non-partisan, non-profit and non-governmental organization dedicated to promoting sustainable development and reducing poverty and inequality through policy oriented research and active engagement on development issues. CPED started as an action research group based in the University of Benin, Benin City, Nigeria in 1985. The action research group was concerned with applied research on sustainable development and poverty reduction challenges facing Nigeria. The research group also believed that communication, outreach and intervention programs, which can demonstrate the relevance and effectiveness of research findings and recommendations for policy and poverty reduction, especially at the grassroots level, must be key components of its action research. In order to translate its activities more widely, the Benin Social Science Research Group was transformed into an independent research and action Centre in 1998. It was formally registered in Nigeria as such by the *Corporate Affairs Commission* in 1999.

The establishment of CPED is influenced by three major developments. In the first place, the economic crisis of the 1980s that affected African countries including Nigeria led to poor funding of higher education, the emigration of academics to advanced countries which affected negatively, the quality of research on national development issues emanating from the universities which are the main institutions with

the structures and capacity to carry out research and promote discourse on socio-economic development. Secondly, the critical linkage between an independent research or think tank organisation and an outreach program that translates the findings into policy and at the same time test the applicability and effectiveness of the recommendations emanating from research findings has been lacking. Finally, an independent institution that is focusing on a holistic approach to sustainable development and poverty reduction in terms of research, communications and outreach activities is needed in Nigeria. CPED recognises that the core functions of new knowledge creation (research) and the application of knowledge for development (communication and outreach) are key challenges facing sustainable development and poverty reduction in Nigeria where little attention has been paid to the use of knowledge generated in academic institutions. Thus, CPED was created as a way of widening national and regional policy and development debate, provide learning and research opportunities and give visibility to action programmes relating to sustainable development and poverty reduction in different parts of Nigeria and beyond.

The vision is to be a key non-state actor in the promotion of grassroots development in the areas of population and environment in Africa. The overall mission is to promote action-based research programs, carry out communication to policy makers and undertake outreach/intervention programmes on population and environmental development in Africa.

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Editorial Policy of CPED's Research for Development News (CRDN)

CPED's Research for Development News (CRDN) is the official publication of the *Centre for Population and Environmental Development (CPED)*. Through this medium, CPED seeks to reach out to relevant policy makers and other stakeholders on key issues concerning development in Nigeria in particular and other parts of Africa in general.

Vision: CRDN seeks to inform, educate and report development issues and challenges as well as the progress in the research and outreach activities of the Centre for the consumption of policy makers, other stakeholders and the reading public in its quest to promote sustainable, holistic and grassroots development.

Mission Statement: To provide a medium for drawing the attention of policy makers, other key stakeholders and the general public to the issues and challenges of development and the policy response needed to promote equitable development.

Core Values: The two core values of CRDN are derived from those of CPED. The first relates to the fact that the universal ideals of intellectual and academic freedom is promoted and respected by CRDN. In this respect CRDN will remain an independent, professional and development news letter. Secondly, CRDN is a non-partisan newsletter which is not associated with any political party or organization. However, when the need arises, CRDN in its publication of CPED's research, advocacy and outreach activities will address key political issues that have considerable impact on development, especially at the local level.

Editorial Board: The Editorial Board of CRDN shall be made up of CPED's Executive Director, two professional staff of CPED and two other members from outside CPED comprising mainly of CPED Fellows.

Editorial Policy: While CRDN will report on any

development issue and the various activities of CPED, CRDN will, as much as possible, focus on a particular development theme in one edition. The theme to be addressed in a subsequent edition shall be announced for the benefit of contributors in advance.

Adverts: There shall be created in every issue, a space for advertisement. The cost of the advert placements shall be determined by the Editorial Board.

Manuscript submission: Persons interested in contributing to any edition of CRDN are welcomed to do so. Manuscripts should be original with a maximum length of five pages typewritten with double-line spacing and accompanied with biographical sketch of the author which must not be more than fifty words. Each article should be typed on A 4 paper with a margin of one inch round. Manuscripts already published elsewhere shall not be accepted.

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Editor's Note



Professor Emeritus Andrew G. Onokerhoraye, *Ph.D., OON, JP*
Editor

The Centre for Population and Environmental Development (CPED) is pleased to launch its *Research for Development News*, with support from the *Think Tank Initiative* initiated and managed by the *International Development Research Centre (IDRC)*. CPED's *Research for Development News (CRDN)* series is published twice a year in June and December. The Series will report on the research, communication and intervention activities of CPED with the major aim of informing policy makers and other key stakeholders on development issues as well as informing key stakeholders on CPED's activities on research and intervention. In this respect the editorial policy of *CPED's Research for Development News* is to focus on one major development

issue in each number of CRDN.

This June 2013 edition of CRDN is focusing on strategies which CPED has used in communicating its action research outputs and outcomes to stakeholders particularly, policy makers based mainly on the experience derived from recently concluded projects.

Professor Emeritus Andrew G. Onokerhoraye
Editor,
June, 2013

COMMUNICATING ACTION RESEARCH RESULTS TO STAKEHOLDERS: CPED RECENT EXPERIENCES

Every year considerable research is conducted in research institutions in Nigeria and findings from that research are disseminated through various academic publications. Often these findings only end up in libraries, drawers and the pages of academic journals without being effectively used by policy makers and practitioners in the country. There is a tendency for research results in Nigeria, as in many other developing countries, to be presented at international conferences to which government ministries and policy makers in the south may not have access. Consequently, the purpose of the research activity in terms of contributing to development strategies is defeated. The wider public also needs to be informed about the outcomes of research in order to understand the benefits accruing to them, their community and the country as a whole.

An example of a research project which paid considerable attention to communication and dissemination to key stakeholders which CPED implemented in recent years is the study titled HIV Prevention for Rural Youth: Mobilizing Nigerian Schools and Communities (HP4RY). HP4RY was conceived and implemented by a team of Canadian and Nigerian researchers, non-governmental organization and Edo State Ministry of Education representatives to address the pressing health problem of HIV infection in Nigeria and was funded by the Global Health Research Initiative Teasdale-Corti Team grant programme. The goal of HP4RY was to contribute to the reduction of vulnerability of rural youth to HIV by building and evaluating a research-based model that strengthened and expanded the influence of the Family Life and HIV Education initiative. HP4RY targeted youth and the communities in which they live with HIV prevention programming that addressed the gendered nature of vulnerability and risk. It translated the knowledge gained in research to enhance the FLHE programme already approved for delivery in all junior secondary schools in Nigeria and to work with communities to raise their AIDS Competence or knowledge. The goal

was to develop, evaluate and produce effective and efficacious models of interventions and intervention delivery that are sustainable and deliverable in rural Nigerian communities.

The conception and implementation of the HP4RY project recognized the importance of knowledge translation and mobilization, making them key components of the research program. A strategic approach to dissemination of research results was central to HP4RY, ensuring that individuals and institutions at all of these levels were informed of salient findings. In this way, members of the general public, community workers, researchers, staff of non-governmental organizations and State and Federal Ministries as well as Directors and Ministers were all involved in knowledge transfer and exchange.

DISSEMINATION AND KNOWLEDGE TRANSLATION STRATEGIES OF HP4RY

The HP4RY project in Nigeria recognized the value of research for policy, programme, and service development from its inception. As such, a knowledge translation and mobilization plan was incorporated during the planning stages. The incremental model described by Stephenson and Hennink (2002) was used with the participation of knowledge-using stakeholders at various stages of the project development and implementation process and attention was paid to the salient content and form of dissemination for different stakeholders and target audiences. Action-oriented knowledge was disseminated to participating schools (including teachers and principals), communities, youth in the NYSC, local agencies, education and health ministries, the NYSC Directorate, researchers, policymakers, and HIV advocacy groups. Programme packages relevant to delivery of FLHE and a community-based programme using the AIDS Competent Community framework and delivered by members of the NYSC were prepared and made available to NGOs, relevant state and federal ministries and the NYSC

Directorate. The content and methods used for knowledge transfer and exchange were targeted to specific audiences.

PARTICIPATION OF KEY STAKEHOLDERS

A first step in the incremental model is the involvement of diverse stakeholders at salient phases of the project. Such participation may include formal partnership with researchers as project team members, performance as advisors on key issues, participation in knowledge translation and exchange, action as conduits of information from the project to broader audience, and implementation of practical recommendations and outputs of the project. Depending on the level of involvement, stakeholder participation may imply a certain level of joint responsibility for decision-making, project implementation and eventual delivery and dissemination of results. Beyond such responsibilities, stakeholder participation involves empowerment by being involved in issues in which they have a stake. Stakeholder participation is beneficial to all aspects of an action research project by ensuring the needs and practical realities of stakeholders are reflected in research, knowledge translation and actions. Such participation increases the likelihood that relevant data will be collected and that interpretations appropriate to local conditions and contexts will be made. It also increases the likelihood that the actions taken based on the research evidence will reflect local needs and contexts and be feasible and sustainable. Stakeholder participation was present at all stages of the HP4RY project, from development of the letter of intent and eventual project proposal, to refinement of the research design and data collection instruments, to interpretation of research findings, translation of results into programmes and strategies, to evaluation of those programmes and strategies, and to the eventual delivery of results to a broader array of stakeholders and interested parties.

The project team included researchers with academic appointments, representatives of two NGOs (AHI and CPED) that focus their activities on sexual and reproductive health issues in Nigeria, and the AIDS officer from the Edo state ministry of education. These representatives were instrumental in identifying the types of project results and outputs that were needed

to enhance their work developing and delivering programming that targets the sexual and reproductive health of youth and the reduction of vulnerability to HIV infection. For AHI, the desired output was a scientifically rigorous evaluation of FLHE as delivered in rural schools and recommendations for strengthening the programme in this context. For the Ministry of Education, this was a rigorous evaluation of FLHE training and delivery and the factors that contribute to or impede its effective delivery in state schools. For CPED, this was development of methods, programmes and strategies to enhance the AIDS competence of rural communities.

As the project progressed, and translation of preliminary research results pointed the way to how to deliver community-based programmes to enhance AIDS competency, a fourth stakeholder became involved, the Edo State NYSC Directorate. The NYSC Directorate is in charge of the one year compulsory national service for Nigerian university graduates. It was NYSC members who were trained to work in and with communities to enhance their AIDS Competence. Although the NYSC Directorate was not involved from the beginning of the project, officers and staff in the directorate worked with project team members and staff to make this component of the actions/programmes delivered as part of HP4RY possible. They also provided information on what would be needed in a 'programme package' for continued NYSC involvement beyond the end of the HP4RY project.

Other stakeholders were involved in specific stages of the project. They included local community leaders, master trainers of teachers, youth corps members, and other NGOs and researchers in the region. Local community leaders provided crucial information for development of the community-based programming, as well as feedback on the work of youth corps members in their community, which influenced the final programme package for the community-based programme. Master trainers reviewed the knowledge gained from baseline research in schools and communities and worked with several team members to translate it for inclusion in the FLHE curriculum and teacher/principal training, as well as for inclusion in the

FLHE Programme Package. Youth Corps members provided on-going information from the communities in which they worked, as well as critical commentary on the community-based programme which they were implementing. This was also incorporated into the programme package for the community-based programme. Local NGOs and researchers reviewed research results at two stages of the project and provided advice and critical commentary based on their own research and experience.

The overall effect of the participation of the different stakeholders was that they became key players in establishing project outputs and in the dissemination and use of the research results, both by their organizations and by a wider array of knowledge users in Nigeria and beyond.

CAPACITY BUILDING OF JUNIOR ACADEMICS ON RESEARCH COMMUNICATION

HP4RY recognized the fact that effective dissemination requires dedicated human and material resources to support specialized communication skills, in addition to the resources needed for the research activity. It was in this context that several junior academics were trained and mentored in translation and communication of research results to different stakeholders. Over the course of the project they learned and acquired experience, including bringing knowledge gained from research back to community members, translating research results into components of the training for Youth Corps members, presenting research at academic conferences in the form of both oral and poster presentations, and preparing research reports for circulation to team members and the funding agency.

PRESENTATION OF RESEARCH FINDINGS TO LOCAL RESEARCHERS AND NGOS

The research component of HP4RY entailed the collection of three waves of data, including brief ethnographies in the target communities, surveys and interviews in schools at baseline, and repeated surveys and interviews in schools at two additional waves. HP4RY's dissemination strategy for research outputs

entailed the preparation of summaries of findings from each wave. Reports were produced and circulated among team members. This was followed by seminars in which results were presented to team members, project staff, representatives of the Edo state ministry of education and the state directorate of the NYSC, NGOs, the media, and other academic researchers. Presentation of the second wave of data, which comprised a first look at evaluation results for school and community programming, followed a more formal course than the first, with representatives from the University of Benin and the Edo State Ministry of education making formal presentations and other researchers also presenting their results, in addition to the presentations from HP4RY members. The target audience was expanded to include youth corps members and several community representatives. In each of these seminars there was open, animated discussion of the research findings and their implications for HIV prevention in schools and communities.

PRESENTATIONS TO PARTICIPATING SCHOOLS AND COMMUNITIES

Following baseline and the final wave of data collection, meetings were held with school and community representatives to present and discuss research findings and their implications. Participants in these meetings included teachers, heads of schools, parents, community-based civil society groups, students, and out-of-school youth. Meetings were held in each of the three senatorial districts in Edo state where the programme operated (ten communities in each senatorial district). The results, lessons learned, and the way forward as reflected in the findings of the research were presented at these meetings with the opportunity for feedback from those in attendance. The presentations were made jointly by representatives of the research team, other programme personnel, and some community members. Feedback from the audience was documented and incorporated into final reports and recommendations.

COMMUNITY-BASED PROGRAMMING

Translation and mobilization of knowledge gained in

research took place through activities undertaken by trained members of the youth corps posted to communities over a two-year period. Team members and junior academics with positions as HP4RY research staff worked to translate what was learned from the baseline research in communities and schools into community-based strategies for developing locally relevant programming to reduce youth vulnerability to HIV infection. Members of the youth corps were then trained to implement these strategies under the guidance and supervision of a staff member. Three cohorts of youth corps members were deployed to communities over a two-year period. Upon gaining the confidence of community members, the youth corps members embarked on forming what they tagged “core groups” of different age cohorts, the essence of which was to build the capacity of community members to create activities to delay sexual initiation among youth and to spread the message that HIV exists and about its consequences, transmission and prevention, to neighbouring communities. Such groups bore names such as HP4RY Club, Abstinence Club, HIV Club, Zip-up Club, Faithful Club, etc. The empowered community-based core group members engaged in activities which they felt would be beneficial to the members of their community. They staged plays on HIV/AIDS, unwanted/teenage pregnancies, parent-child communication, abuse and incest, etc. at open spaces in the target communities. Community chiefs, elders, women, youth, and children came out to witness these

activities. In some communities, the youth corps members also carried out vocational training for women and girls. This contributed to empowering the women and girls to carry out income generating activities, and to raising their self-esteem, independence and autonomy in making life decisions, including those related to behaviours that place them at risk of acquiring HIV. A total of 180 women and girls graduated from this activity in just one community and most of the beneficiaries used the skills acquired to generate income. In some communities, youth corps members negotiated with local and neighbouring health facilities to make HIV testing accessible to community members. In most communities, Youth corps members helped in the delivery of FLHE in schools and continued the lessons and activities outside of the school into the local community. While implementing these activities, youth corps members also kept a journal of activities, experiences, successes and challenges which contributed to both revised programme guidelines and the final programme package. Thus, youth corps members participated in knowledge translation and exchange at two reciprocal levels: in translating knowledge from baseline and delivering programming to communities; and in providing feedback on that programming to contribute to refinement of the programming model. Evaluation results demonstrated the strength of the contribution made by the community programming to reducing youth vulnerability to HIV infection



Group Photograph of Participant During the CPED-2013 National Workshop

EMPOWERMENT OF TEACHERS AND STUDENTS TO DELIVER FLHE

Teachers and students in 30 junior secondary schools were empowered to play key roles in the delivery of FLHE. The teachers were selected from those teaching three core subjects (English Language, basic/integrated science, and social studies) and providing guidance and counselling with the intention of integrating and infusing the FLHE curriculum into their teaching and counselling. This was carried out across the three senatorial districts of Edo state Edo South, Edo Central and Edo North. Teachers took FLHE back to their schools and delivered lessons to the students through classroom delivery, co-curricular activities, and the establishment of Anti-AIDS Clubs which they tagged "FLHE Clubs". Students from each of the junior secondary school grades 13 were also trained as peer educators to help in the messaging of HIV prevention and in extra-curricular activities. Apart from the government teachers benefiting from this programme, community teachers who complement teaching in these schools also benefited. Master trainers who were initially trained by the Edo State Ministry of Education attended refresher courses as part of the HP4RY project prior to carrying out training of teachers for FLHE. Remote schools, which are rarely included in such initiatives, have the HP4RY Project to thank for the opportunity for such training. Evaluation results confirm the contribution the school-based programme made to reducing youth vulnerability to HIV. The training has empowered students in these schools to take the lead in the spread of HIV prevention messaging and teachers now feel comfortable talking to students about sex, sexuality and HIV/AIDS.

NEWSLETTERS

HP4RY recognized that distributing a regular newsletter summarizing study findings and activities in schools and communities is an ideal way to update study participants, participating agencies, and other stakeholders. While such newsletters can involve a fair amount of work, the dissemination benefits are well worth the effort. A project newsletter was established translating results from baseline research, particularly those on sexual scripting, into strategies for use in

classrooms. Additional issues of the newsletter focused on the activities of youth corps members in communities, providing a view of what was going on in each community to youth corps members, teachers, schools, and policymakers in the education and youth service corps sectors.

KNOWLEDGE TRANSLATION FOR GOVERNMENT AND NGOS

HP4RY recognized the fact that utilization of knowledge gained from research is predicated on policymakers and other users having ready access to research findings. In a country such as Nigeria where policymakers are yet to appreciate the value of research, making research results difficult to access will further hinder the use of research outputs. Often research users in Nigeria complain that traditional communication vehicles for research findings, including conference presentations and peer reviewed publications, are not a primary information source for them. They point out that summaries of main findings communicated through other easily accessible channels are preferred. Such channels obviously allow for timely access to information and actively route documents directly to key stakeholders. HP4RY adopted the strategy of using multiple communication channels in order to reach various audiences, including policy makers, associations, advocacy groups, and the media. This justified the considerable attention paid to the use of policy briefs, newsletters, direct presentations of research results to policymakers, and the organization of workshops. The use of these dissemination channels by HP4RY also responded to the need for timeliness in the communication of research results. HP4RY put into consideration users' needs for immediate, relevant, and quality research when the policies are being developed or reviewed rather than after the policy has been conclusively formulated. This was carried out by briefing key stakeholders on the research progress and output on an annual basis during the research implementation period.

NETWORKING WITH OTHER PROGRAMMES

The opportunities provided by the implementation of another project titled 'Building Civil Society Capacity

for Advocacy on Sexual and Reproductive Health and Rights (SRHR) in Nigeria', funded by the European Commission was used to carry out the dissemination of the results of the project to ten additional states across the different geo-political zones in the country. The aim of the European Commission's funded project, which was implemented by one of the collaborating organizations, CPED, was to improve the reproductive and sexual health situation in Nigeria with a specific focus on adolescents through interventions designed to strengthen the capacity of NGOs, media personnel and youth groups to play key advocacy roles in policy dialogues. The training was designed to improve the beneficiaries' knowledge about the SRHR situation and concerns in Nigeria and empower them to publicize the problems and challenges facing SRHR as well as to advocate to governments at the federal, state and local levels to pay adequate attention to the reproductive health challenges facing Nigerians, especially adolescents.

In designing the training materials, some of the outputs of the HP4RY research provided inputs into programme content and training materials. Furthermore, the experience and output of HP4RY's youth corps activities in the communities provided inputs in the training and empowerment of adolescents in ten local government areas outside Edo State. Youth organizations in rural communities of Nigeria were not well organized or coordinated to play active roles in the promotion of the reproductive health of their peers. Youth groups and organizations were, thus, empowered to be able to play important roles in the design and delivery of reproductive health care services, especially peer education and "youth-friendly" services in their communities. The empowered NGOs have been carrying out advocacy activities on reproductive health in collaboration with trained media personnel. Free media coverage was used to get results out to as many people as possible. Using the experience of HP4RY, youth in 40 rural communities across Nigeria have been carrying out



Drama Display on HIV Prevention organised by CPED Trained out-of-School Youth in one of CPED Project Communities

peer education and youth-friendly activities on reproductive health.

REDESIGNING CPED WEBSITE FOR MORE EFFECTIVE COMMUNICATION

Facilities for the dissemination of HP4RY outputs at the CPED level were enhanced by the redesign of the CPED website. The aim of this activity was mainly to: a) make research content available especially that of studies; and b) improves the navigation tools of the website to make it more dynamic. The website now includes brief summaries of the different project activities that CPED is involved in, including HP4RY. This has resulted in an increased number of visits to the website. The website will provide a location where programme packages, reports, presentations, publications and summaries of the HP4RY project may be accessed by interested parties from anywhere in the world.

POLICY BRIEFS

The outputs of HP4RY coupled with those of other reproductive health and HIV/AIDS programmes carried out by CPED are being used to advocate for policy change on reproductive health and HIV challenges at the local, state, and national levels in Nigeria. The typical audience for a policy brief is not interested in the research/analysis procedures conducted to produce the evidence, but is interested in potential solutions based on the new evidence. These are presented in the form of CPED policy briefs which outline the rationale

for choosing a particular policy alternative or course of action in a current policy debate. CPED produced six of such policy briefs on reproductive health and youth, which were widely distributed to key stakeholders, especially government departments across the country. The policy briefs are concise and focus on how new evidence arising from the results of the different reproductive projects implemented by CPED have implications for reproductive health policy and implementation in Nigeria.

PRESENTATIONS TO EDO STATE MINISTRY OF EDUCATION AND THE DIRECTORATE OF THE NYSC

HP4RY appreciated the fact that in the context of Nigeria, the most effective means of disseminating research to policy users is through direct, interpersonal contact. In view of the critical issues examined in this project, policymakers must trust that the information

they receive is reliable and credible. In Nigeria, policymakers will often rely on personal contacts with researchers they trust. Sustained and substantive communication engenders trust. In the context of HP4RY, the points of contact included locally-based users and policymakers with jurisdictional responsibility in the topic area of the research, which, in this case, is the Edo State Ministry of Education. It was against this background that a presentation was made to the education sector in Edo state. The specific participants were set in collaboration with the state ministry of education. The focus of the presentation was on the knowledge and lessons learned that were particularly relevant to the delivery of the FLHE programme as well as methods for supplementing the basic programme to strengthen its impact. A similar presentation was planned for the Council on Education, a national body that includes representation from every state.



CPED-HP4RY Project Team Discussing Project Outcome with Commissioner for Education, Edo State

Brief Reports on CPED Activities

CPED organised a national policy workshop under the theme “Meeting the Challenges of Implementing the National Reproductive Health Policy in Nigeria: The Role of Civil Society Organisations”, in Benin City, on 4-5 February, 2013. The workshop was part of the project titled “Building civil society capacity for advocacy on sexual and Reproductive Health and Rights in Nigeria” which was partly funded by the European Commission. At the end of the workshop the following communiqué which summarised the outcome of the workshop was issued:

“The workshop was attended by 125 scholars/researchers, civil society organizations, development practitioners and policy makers and service providers from Abia, Adamawa, Akwa-Ibom, Bauchi, Cross River, Edo, Kogi, Ogun, Ondo, Rivers, Anambra, Taraba, Yobe, Osun, Kaduna and Lagos States. The workshop was organized to:

1. Critically examine the challenges of Sexual and Reproductive Health in Nigeria;
2. Critically examine the challenges of policy implementation as they have to do with Sexual and Reproductive Health; and
3. Chart the pathways for dealing with the identified challenges of Sexual and Reproductive Health in Nigeria.

In all, thirty-two (32) papers were presented in eight (8) plenary sessions. Each session was chaired by a distinguished scholar or an experienced researcher. Other scholars/participants served as discussants and rapporteurs. The workshop provided a forum for examining Sexual and Reproductive Health issues in Nigeria, the challenges in the implementation of the national reproductive health-related policies, and the role of civil society organizations in this regard.



Rapporteurs and Chairman of Session Listening Attentively During paper Presentation by scholars in CPED-2013 National Workshop

The workshop participants critically x-rayed issues bordering on the challenges of Sexual and Reproductive Health as well as those of implementation and made policy recommendations through papers that were presented in the following areas:

- (a) Key reproductive health issues and challenges in Nigeria and efforts at redressing them;
- (b) Harmful practices, reproductive rights and gender issues;
- (c) The role of advocacy in the implementation of reproductive health policies in Nigeria;
- (d) Reproductive health issues in Nigeria: religious perspectives;
- (e) Role of civil society organisations in the implementation of reproductive health policies in Nigeria;
- (f) The role of adolescent peer education and youth friendly centres/services in the implementation of reproductive health policies in Nigeria; and
- (g) Governance issues: creating necessary conditions for implementing sexual and reproductive health and rights in Nigeria

The following were the challenges identified:

- (i) Poor implementation: The workshop noted that in spite of the numerous policies on reproductive health in Nigeria, there is poor



- implementation.
- (ii) Weak legislative backing and support for the reproductive health policies: Though there are provisions dealing with several reproductive health challenges in the National Reproductive Health Policy, most of them do not enjoy legislative backing and support.
 - (iii) The workshop noted that the policy on reproductive health lacks adequate political understanding and commitments needed to address the challenges of Sexual and Reproductive Health.
 - (iv) The workshop noted the paucity of budgetary allocations and continued donor-driven funding of the implementation of national health policies and programmes.
 - (v) The workshop noted improper utilization of the limited resources allocated to Sexual and Reproductive Health policies and programmes.
 - (vi) The workshop also identified religion and culture as impeding and restricting the implementation of Sexual and Reproductive Health policies.
 - (vii) The workshop identified poverty as a major challenge to effective implementation of Sexual and Reproductive Health policies and programmes.
 - (viii) The workshop identified the vulnerable nature of adolescents regarding Sexual and Reproductive Health issues and rights.
 - (ix) The workshop looked critically at the place of language in the effective communication of Sexual and Reproductive Health issues.
 - (x) The strategic roles of Civil Society Organisations in reproductive health advocacy and service delivery were highlighted and recognized.
 - (xi) The workshop recognized Traditional Birth Attendants and the need to build their capacity in view of the role they play in Sexual and Reproductive Health issues, especially in our rural communities.
 - (xii) The workshop recognized the place of media organizations in promoting Sexual and Reproductive Health but lamented the prohibitive rates charged by most of them in delivering these services.
 - (xiii) The workshop identified leadership factors that militate against the effective implementation of Sexual and Reproductive Health policies and programmes.
 - (xiv) The workshop identified the impact of corruption in the effective implementation of Sexual and Reproductive Health policies and programmes.
 - (xv) The influence of globalization (positive and negative) in character development in adolescents' Sexual and Reproductive Health was recognized.

Recommendations of the workshop

The workshop made the following recommendations that:

- (i) Government should put in place a good plan for effective implementation of the national reproductive health policies and programmes.
- (ii) There should be strong legal backing for Sexual and Reproductive Health policies in Nigeria.
- (iii) There should be a re-orientation of political actors on the implementation of Sexual and Reproductive Health policies in Nigeria.
- (iv) There should be an increase in budgetary allocation by all tiers of government.
- (v) Further partnership between and among the private, public sectors, civil society organisations and international donor agencies, be encouraged.
- (vi) The implementation of reproductive health budget be monitored by CSOs in their various communities.
- (vii) Religious groups and traditional leaders be mobilized to participate in the implementation of Sexual and Reproductive Health policies and programmes.
- (viii) Illiteracy and youth exclusion be fully

addressed.

- (ix) Local language of beneficiaries of Sexual and Reproductive Health should be adopted for programming.
- (x) CSOs should be empowered to play a key role in improving data quality and integrity.
- (xi) Media outfits should look at advocacy of reproductive health as a social and not as commercial service.
- (xii) There should be accountability and transparency in the leadership of all relevant

ministries, departments and agencies in all tiers of government.

- (xiii) The National Health Insurance Scheme be extended to cover the informal sector, the vulnerable class and rural dwellers, so as to facilitate cheaper access to Sexual and Reproductive Health services.
- (xiv) Poverty alleviation programmes should be intensified by both state and non-state actors as a major solution to Sexual and Reproductive Health problems.”



Group Photograph of Participant During the CPED-2013 National Workshop



Participants Queue to Take Lunch in one of CPED's Stakeholders Workshops





CPED continues to make progress in the implementation of its five year strategic plan

The *Centre for Population and Environmental Development (CPED)* was selected in 2009 as one of the African Think Tanks under the Canada's International Development Research Centre (IDRC) Institutions Global Think Tank Grant Initiative. IDRC is one of the world's leading institutions in the generation and application of new knowledge to meet the challenges of international development. It is well known that IDRC has worked during the past forty years in close association with researchers in developing countries to build healthier, more equitable and prosperous societies in different countries with considerable success. The institutional grant facility to CPED is a major breakthrough in that it will provide core funding for the research, communications, intervention and capacity building of CPED and its partners.

One major output of the support for CPED under the *Think Tank Initiative* is the formulation of the five-year strategic plan. CPED's Five Year Strategic Plan seeks to consolidate and build on its modest achievements of the past ten years to make the organisation one of the most unique independent policy research institutions in Nigeria which combines policy-oriented research with communication, outreach and intervention programmes. Under the five-year programme of work, CPED activities will focus on four broad areas reflecting the objectives set for the five-year period i.e. Research; Communications and outreach; Intervention programmes; and Capacity Building of CPED and partners.

Research Activities

In 2012, CPED core research staff and associates continued research activities and published papers on each of the four research themes being addressed during the period i.e. Growth and equity in Nigeria; Conflict and Development in Nigeria's Niger Delta region; Education and Development in Nigeria; and Health including HIV/AIDS and

development in Nigeria. The targets set on the research component of the strategic plan for the first year are being achieved.

Research communications and policy linkage

The *Communications and Dissemination Plan* of CPED has been approved by the Board of Trustees with effect from January 2012. The Communication and Dissemination Plan has guided various research communication and policy linkage since then. Thus CPED has intensified disseminating its policy research results through multiple channels and formats including reports, policy briefs for policy makers, a revamped website, and an improved biannually newsletter largely for policy makers. CPED has also organised policy workshops and dialogues on socio-economic development issues, especially in the context of meeting the challenges of achieving MDGs relating to health and education. CPED has also built the capacity of local partners so as to enhance their participation in promoting policy linkage with relevant public and private agencies.

Intervention programmes on key development challenges at the local level

CPED has carried out intervention programmes with local partners on promoting grassroots stakeholders participation on development and poverty reduction, promoting good governance at the grassroots level to hold elected representatives accountable to the people that elect them, promoting human rights-based approach to development, and projects on control of the spread of HIV/AIDS, especially for rural communities.

Strengthening the institutional capacity of CPED

CPED continues to pay considerable attention to consolidate the capacity building of CPED by improving the equipment and facilities in CPED offices; Improving the governance and



management structure of CPED; putting in place clear systems for managing and appointing staff performance and dealing with promotion, progression and remuneration; revamping CPED's website with the aim of making it a key instrument in communications and outreach activities; recruiting Senior research staff to enhance the research capacity of CPED; and establishing CPED branch offices in specific parts of the country.

Empowerment of CPED partners to participate in research, policy linkage and outreach/intervention activities

CPED has continued with its programme of identifying and build the capacity of local partners in intervention project areas in different parts of the country; continuing to build network links with the empowered local partners and other stakeholders; building a contact base that allows CPED to manage its relationships with local partners efficiently and effectively; and sourcing for funds from key donors for the core activities of CPED.

CPED concludes its project on building civil society capacity for advocacy on sexual and Reproductive Health and Rights in Nigeria

After about three years of the implementation of the project entitled "Building civil society capacity for advocacy on sexual and Reproductive Health and Rights in Nigeria" the project is at its concluding phase. The overall purpose of the project is to improve the reproductive and sexual health situation in Nigeria, which has the worst indicators of sexual and reproductive health and rights (SRHR) in Africa and the second to the worst in the world, through interventions designed to strengthen the capacity of local civil society organisations to play key roles in policy dialogues on sexual and reproductive health and rights while at the same time participating in the delivery of RH care services to underserved groups and localities. The project is expected to help the target civil society organisations (NGOs) to clarify their vision, improve their organisational efficiency, increase their knowledge of SRHR, improve their knowledge of or access to policy and planning processes, improve their advocacy skills, increase their ability to deliver SRHR services and develop networks to work with key stakeholders on SRHR. The project seeks to contribute to securing the rights of women, men and adolescents in different parts of Nigeria to good reproductive and sexual health. The project has a research, intervention and policy linkage components. The three-year project initiative is funded by *European Commission*. In the last two years, the following research, intervention and policy linkage activities have been carried out.

The empowerment of the project team and other key staff/associates

(a) A 46 member Project Team composed of experts on socio-economic surveys, finance, stakeholder mobilization, NGO management, sexual and reproductive health issues and advocacy strategies have been put in place. Our interactions with some

of them show that they have relevant skills and experience to handle the schedule assigned to them in the project.

- (b) A three-day workshop was organized for the 46 Project team members to keep them abreast of the issues and challenges of implementing the Project was held on Monday 1st to Wednesday 3rd of February, 2010.
- (c) The workshop also empowered 15 other staff of CPED, ICWA and CPAP on the issues and strategies of the Project in case there is need to make changes in the project personnel.
- (d) The workshop empowered the project team members on issues such as NGO mobilization strategies in different target states; Strategies for the identification of relevant NGOs for empowerment on advocacy on reproductive health; Stakeholder mobilization strategies for State and Local Government Officials and Local Leaders at the community level; Community mobilization strategies especially for youths in the context of the target LGAs in the different states; Preparation and discussion of survey instruments for the baseline surveys; and Methodologies for the administration of baseline survey instruments;
- (e) The workshop also discussed the general principles and issues to be focused on in the preparation of the training manuals, especially Manual for the training of NGOs on organizational development and management; Manual for the training of NGOs on reproductive health challenges and issues in Nigeria; Manual for the training of NGOs on Advocacy on Reproductive Health; and Manual on Adolescents Reproductive Health and service delivery.
- (f) The 46 Project team members have remained part



of the project implementation for the past one year which is a reflection of their continuing commitment to the implementation of the Project.

- (g) Draft survey instruments and training manuals were prepared during the workshop.

Mobilisation of target groups and other stakeholders for participation in the project

From the records documented on project activities and interactions with stakeholders and target groups including beneficiaries it can be stated that mobilisation of stakeholders, target groups and beneficiaries was successfully carried out with respect to the following:

- (i) Mobilisation of State Government Officials
- (ii) Mobilisation of NGOs in the ten target states
- (iii) Mobilisation of Media Houses for participation in the project
- (iv) Mobilisation of Local Government and Health Officials
- (v) Mobilisation of target groups, beneficiaries and out-of-school youths in the target LGAs
- (vi) Mobilisation of target schools and in-school youths
- (vii) Selection of Non-Governmental Organisations (NGOs) that will participate in the implementation of the action.
- (viii) Selection of Journalists and media houses that will participate in the implementation of the action.

The successful mobilisation led to the targeting of 100 State Government Officials in the ten target states to support the action; 150 Local Government and Health Officials in the ten target LGAs mobilised to support and participate in the project; 400 NGOs were initially mobilised for participation in the project; 150 journalists in media houses and agencies were mobilised for participation in the project; 500 community leaders, target groups, beneficiaries and other stakeholders mobilised in the target LGAs for participation in the project; 300 NGOs were finally selected from the initial list compiled for participation in the project and 100 journalists were finally selected from the initial list compiled for participation in the project.

Constitution and training of State and LGA Implementation committees

- (a) 10 Local Government Project Implementation Committees with an average membership of between 5 and 10 people were constituted.
- (b) 10 Local Implementation committees with an average membership of between 10 and 15 people were constituted.
- (c) Training of the constituted state and local implementation committee members was successfully carried out.
- (d) The State and LGA Implementation Committees have been empowered to participate in the implementation of the Action.

Collection of baseline information on SRHR and capacity building needs of target NGOs

- (a) Baseline survey instruments were finalized after pre-testing in pilot NGOs and communities.
- (b) Baseline surveys of target NGOs carried out and the results analysed.
- (c) Baselines surveys of SRHR carried out and the results analysed.
- (d) The results of the analysis of the baseline surveys were fed into the training programmes of the NGOs and Journalists

Capacity building of NGOs on management, SRHR and advocacy skills

- (a) The manuals for the training activities finalised and used in the training.
- (b) The management capacity building of the NGOs focused on issues such as Establishing and registering a CSO; Mission and planning; Organisational structure and management; Human resources management and supervision skills; Leadership and communications; Programme design and management; Searching for funds; Financial management; Developing public relations; Networking with other organisations; Organisational sustainability; and Monitoring and evaluation.
- (c) Sexual and reproductive capacity building of the NGOs focused on issues such as The context of reproductive health challenges in Nigeria; Trends in pregnancies and child bearing; Family planning; Maternal health; HIV/AIDS; Abortion; Harmful practices, reproductive rights and gender issues; The National Reproductive Health Policy and Framework; and Advocacy issues on reproductive health
- (d) Advocacy issues on reproductive health capacity building of the NGOs focused on The framework for advocacy on reproductive health; Building a constituency for support; Target audiences and goals; Going public with advocacy issues on reproductive health; Enhancing your public information efforts; Dealing with the opposition.
- (e) Policy linkage with the relevant state and local governments.

Capacity building of Youth Organisations on SRHR and peer education activities

- (a) The manual for the training activities on adolescent reproductive health and peer education activities were finalised and used in the training.
- (b) The topics covered in the training workshops focused on key reproductive health issues with particular reference to adolescent reproductive health as well as peer education skills. These include; the context of reproductive health challenges in Nigeria; Trends in pregnancies and



child bearing; Family planning; Maternal health; HIV/AIDS; Abortion; Harmful practices, reproductive rights and gender issues; The National Reproductive Health Policy and Framework; Advocacy issues on reproductive health, peer education, and youth-friendly health centres.

Capacity building of Journalists on SRHR and advocacy

- (a) The manuals for the training activities were finalised and used in the training;
- (b) Sexual and reproductive capacity building of the journalists focused on issues such as The context of reproductive health challenges in Nigeria; Trends in pregnancies and child bearing; Family planning; Maternal health; HIV/AIDS; Abortion; Harmful practices, reproductive rights and gender issues; The National Reproductive Health Policy and Framework; and Advocacy issues on reproductive health;
- (c) Advocacy issues on reproductive health capacity building of the journalists focused on The framework for advocacy on reproductive health; Building a constituency for support; Target audiences and goals; Going public with advocacy issues on reproductive health; Enhancing your public information efforts; Dealing with the opposition.

Working with the empowered CSOs to carry out advocacy activities on SRHR

CPED has been working with the empowerment of the CSOs to advocate for increased attention by the three levels of government to SRHR service delivery by making appropriate resource allocations to SRHR. The objective of the advocacy activities being carried out by the empowered CSOs is to influence policy, programmes and resource allocation to SRHR services. High level meetings are being held with the specific target audiences. CSOs are also organising public events such as debates, radio and TV programmes, peaceful protests, and other events that draw attention to the challenges facing SRHR. Advocacy meetings with community leaders, elders, men and women are carried out on harmful traditional practices.

Working with the empowered journalists to carry out advocacy activities on SRHR

CPED is also working with the empowerment of journalists to carry out advocacy activities as well as public enlightenment campaigns. These advocacy and public enlightenment activities are focusing on informing the public and also lobby policy makers to respond to the challenges facing SRHR. As in the case with CSOs, meetings are being held with specific target audiences. Mass media campaign is a major strategy which some of the empowered media houses are using to promote improved SRHR policy and services in Nigeria.

Working with youth organisations to implement peer education on SRHR activities

In each target LGA the peer educators are working with CPED to carry out *promotional activities* such as discussion groups, music concerts, radio programmes, distributing flyers and hanging posters; *informational/educational activities* such as giving information to individuals or small groups in a workshop setting with the purpose of educating them on specific SRHR issues; *counselling/ orientation* such as direct, private contact with youth to learn extensively about and address their needs including negotiating skills so that adolescent women can say no to unprotected sex and reinforce their self-esteem; *community distribution of services and referrals* such as distribution of condoms, and other contraceptives, as well as referring youth to clinics or other services; and *advocacy* to youth and other stakeholders to build support for the recognition and improvement of SRHR.

Working with the empowered youth organisations to carry out "youth-friendly" reproductive health services

In view of the fact that peer education generates demands for services in the intended audience, peer education is being linked to services that provide access to condoms, medical care, and voluntary counselling and STI management. This is due to the fact that it is generally agreed that "youth-friendly" services are needed if adolescents are to be adequately provided with reproductive health care. Given that young people tend not to use existing reproductive health services, specialized approaches must be established to attract, serve, and retain young clients. Basic components include specially trained providers, privacy, confidentiality, and accessibility.

Supporting civil society coalitions building and networking activities to promote collaboration with the executive, legislature, the media and other CSOs on reproductive health advocacy activities

It is expected that CSOs' impact on advocacy for improved SRHR policies and the increase of resources allocation to RH in budgets will be enhanced if they collaborate with other organisations. This requires building networks and coalitions. Facilitation of coalitions and networking of empowered CSOs advocating for improved SRHR is being carried out by CPED in each state. This is being carried out by the regular meetings and reviews of the activities of the empowered CSOs during the project period starting from the time they were trained collectively in each state. This has formed the basis of their collaboration in advocacy activities on SRHR which is expected to continue even when the project formally ends.

Organisation of a policy workshop on SRHR in Nigeria

The policy workshop was organised under the theme "Meeting the Challenges of Implementing the National Reproductive Health Policy in Nigeria: The Role of Civil Society Organisations", in Benin City, on 4-5 February, 2013.



CENTRE FOR POPULATION AND ENVIRONMENTAL DEVELOPMENT (CPED)

Under the current five-year programme of work, CPED activities focus on four broad areas reflecting the objectives set for the five-year strategic plan period as follows:

- (i) Research;
- (ii) Communications and outreach;
- (iii) Intervention programmes; and
- (iv) Capacity Building of CPED and partners.

RESEARCH

Four research thematic areas will be targeted by CPED during the five-year period as follows:

1. *Growth with Equity in Nigeria*
2. *Conflict and Development in Nigeria 's Niger Delta Region*
3. *Education and Development in Nigeria*
4. *Health including HIV/AIDS and Development in Nigeria.*

COMMUNICATIONS AND OUTREACH

Partnership development with public and private sector/civil society organisations

INTERVENTION PROGRAMMES ON SOCIO-ECONOMIC DEVELOPMENT

Beyond action and policy oriented research and its communications activities, our mandate entails implementing intervention activities in our identified areas of policy research during the five-year strategic plan period. In this context intervention programmes that benefit largely deprived grassroots communities and other disadvantaged people are being carried out.

CAPACITY BUILDING OF CPED AND PARTNERS

CPED believes that the strengthening partner organisations including community based organisations must be a key mechanism for the achievement of its mandate during the next five years. This also includes the strengthening of CPED to be able to fulfil its mandate during the strategic plan period.

