LESSONS LEARNT & RESULTS
FROM THE SCALE-UP OF
LEARNING ABOUT LIVING
NIGERIA 2009-2011

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Learning about Living Extra is specifically made for young Nigerians who never went to school or dropped out of school at some point.
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<td>AAN</td>
<td>ActionAid Nigeria</td>
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<td>AIDS</td>
<td>Acquired Immune Deficiency Syndrome</td>
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<td>ARFH</td>
<td>Association for Reproductive and Family Health</td>
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<td>ARH</td>
<td>Adolescent Reproductive Health</td>
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<td>BFW</td>
<td>Butterfly Works Netherlands</td>
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<td>CEO</td>
<td>Chief Education Officer</td>
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<td>CSO</td>
<td>Civil Society Organisations</td>
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<td>CSR</td>
<td>Corporate Social Responsibility</td>
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<td>ED</td>
<td>Executive Director</td>
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<td>EVA</td>
<td>Education as a Vaccine against AIDS</td>
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<td>FCT</td>
<td>Federal Capital Territory, Abuja</td>
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<td>FLHE</td>
<td>Family Life and HIV/AIDS Education curriculum</td>
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<td>FMoE</td>
<td>Federal Ministry of Education</td>
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<td>FMoH</td>
<td>Federal Ministry of Health</td>
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<td>GPI</td>
<td>Girls’ Power Initiative</td>
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<td>GSM</td>
<td>Global System for Mobile communications</td>
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<td>HIV</td>
<td>Human Immuno-deficiency Virus</td>
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<td>ICT</td>
<td>Information and Communication Technology</td>
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<td>Information, Education and Communication material</td>
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<td>LaL</td>
<td>Learning about Living</td>
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<td>M&amp;E</td>
<td>Monitoring and Evaluation</td>
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<td>MDG</td>
<td>Millennium Development Goal</td>
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<td>NACA</td>
<td>National Agency for the Control of AIDS</td>
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<td>NCCE</td>
<td>Nigeria Commission for the Colleges of Education</td>
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<td>NERDC</td>
<td>Nigerian Educational Research &amp; Development Council</td>
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<td>NGO</td>
<td>Non-Governmental Organisation</td>
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<td>OLPC</td>
<td>One Laptop Per Child</td>
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<td>OWUK</td>
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<td>PTA</td>
<td>Parent Teacher Associations</td>
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<td>Rhema Care Partners International</td>
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<td>SACA</td>
<td>State Agency for the Control of AIDS</td>
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<td>School Management Committee</td>
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<td>State Ministry of Education</td>
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<td>SMS</td>
<td>Short Message Service</td>
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<td>SRH</td>
<td>Sexual and Reproductive Health</td>
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<td>STI</td>
<td>Sexually Transmitted Infections</td>
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<td>SUBEB</td>
<td>State Universal Basic Education Board</td>
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<td>VAS</td>
<td>Value Added Service</td>
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<td>WHO</td>
<td>World Health Organisation</td>
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<td>WSWM</td>
<td>World Starts with Me</td>
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<td>YARAC</td>
<td>Youth Adolescent Reflection and Action Centre</td>
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ACKNOWLEDGEMENTS

The Learning about Living Nigeria project, a multi stakeholder project based on collaboration across multiple sectors has involved the contribution of a wide range of people. While we are not able to acknowledge everyone who has had an input into ‘LaL’, we would like to thank some key players.

The donor organisations, which have provided funding for the project’s development and implementation: The John D. And Catherine T. MacArthur Foundation whose Nigeria office staff led by Dr. Kole Shettimma, have continued to be supportive; Oxfam Novib Netherlands whose West Africa Bureau team have been also funded the replication of the LaL in Senegal and Mali; special thanks to the Nigeria Programme Officer, Gertjan Van Bruchem for his continued interest and support in the development and sustainability of the LaL Nigeria project. Butterfly Works Netherlands, who are also co-developers of the concept, and lead on the design and development of the eLearning platform; and the David and Lucille Packard Foundation who provided funding for LaL’s extension and initial pilot into Northern Nigeria.

Our key LaL partners who have been involved in the development and implementation of the project: for their commitment and flexibility which they have brought to bear on the project. To the Country Director and staff of ActionAid Nigeria; the Executive Director, Mrs Adenike Esiet, and staff of Action Health Incorporated (AHI) Lagos; the Chairperson, Professor Bene Madunagu and staff of Girls’ Power Initiative (GPI) Calabar; Mrs. Grace Osakue, the Coordinator of GPI Benin, Uyo and Asaba; the Executive Director, Mrs. Kemi Agarau and Sylvia Ekponimo, Team Leader Mobile programme and staff of Education as a Vaccine (EVA); the Executive Director, Hajia Mairo Bello and Staff of AHIP; Mr. Usman Abubakar of AHEAD, Bauchi; RHEMA Care Partners, Port Harcourt, Fantsaum Foundation Kafanchan. The results reported in this document are a consequence of their work.

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INTRODUCTION

Learning about Living (LaL) was conceived in 2006 by OneWorld UK and Butterfly Works, Netherlands, working with key stakeholders in the youth sexual and reproductive health field in Nigeria. The programme was conceived in response to the results of a scoping study that showed a need for innovative use of Information and Communication Technology (ICT) to address sexual and reproductive health (SRH) and HIV prevention among young people in Nigeria.

A two-year pilot followed the feasibility study, from 2007 to 2009, designed to test the concept. The pilot proved very successful, with targets achieved and surpassed. A three-year scale up phase was subsequently designed with the project partners, to extend the gains and reach of the project across Nigeria.

During the five years covering the pilot and scale up, we have documented a number of important lessons in the process of initiating, planning, implementing, and going to scale, as well as monitoring the project. These developments for the period of the initial test of the programme were well documented in the Lessons Learnt document produced in 2009 following the pilot. With the scale up phase now complete, we have produced this document as an addition to the initial report, covering the project scale up, and to share the results and impact of the final evaluation.

The ambitious targets set for the scale up phase as in the pilot, were achieved and, in some areas, surpassed. In the two main components of the project intervention, the eLearning environment and the mobile services, the project expanded; from 16 schools and one youth centre in three pilot locations in Nigeria to 221 schools and 7 youth centres in 19 states, reaching a cumulative number of 105,000 students and young people. On the mobile service, currently over 12,000 questions are received every month via the free SMS service available on all the major telecom platforms in Nigeria. Cumulatively, the platform has received over 400,000 questions since the project launched in November 2007.

Since the introduction of the LaL concept in 2007, there has been an increase in interventions using digital media – especially mobile phones – for projects targeting marginalised communities and young people. As with the initial report, it is intended that the experiences and processes highlighted here will be of interest not only to the programme’s current stakeholders, but also to organisations engaged in, or interested in implementing similar projects in Nigeria or elsewhere. The LaL concept has been identified as a potentially powerful tool for addressing sexual and reproductive health (SRH) issues in Senegal, Morocco, Mali and Egypt, where the programme is being implemented or set to be implemented, each having benefited from the lessons learned from LaL Nigeria.

‘Learning about Living’ (LaL) is a cross media project designed to empower young people with accurate, timely, and non-judgmental information about sexual and reproductive health, helping them to make well-informed and positive decisions about their personal health and relationships.

LaL assists in addressing SRH problems among young people through a digital version of the national Family Life and HIV/AIDS Education (FLHE) curriculum, and an additional out-of-school version for older youth in the communities. The innovative and interactive eLearning environment ‘eFLHE’ dissolves traditional boundaries by providing young people with a route to reliable SRH information, negating much of the stigma associated with asking adults or the risks of receiving inaccurate information from peers.

A supporting mobile service (MyQ) takes advantage of the uptake of mobile telephones in Nigeria, allowing young people to anonymously text or call trained counsellors free, for their SRH questions. LaL has used eFLHE and MyQ to extend both the reach and the impact of SRH education in the last five years in Nigeria.
Accurate and non-judgmental information about human sexuality is often unavailable to youth and adolescents in most African societies. Nearly one third of Nigeria’s population is between the ages of 10 and 24. As a result, tens of millions of young people are more vulnerable than they need to be, especially in the age of HIV/AIDS. Unaware of the risks, young people face a devastating range of direct and indirect threats to their life chances.

Girls are especially vulnerable. Young women in Nigeria face a devastating combination of sexual health threats, including HIV/AIDS, unplanned pregnancy, which often leads to unsafe abortions, and indirect threats to their wider wellbeing caused by rampant gender inequality. In sub-Saharan Africa, 61 percent of adults and 75 percent of young people infected with HIV are female. Girls aged between 15 and 24 are approximately twice as likely as boys of the same age to be infected with HIV/AIDS, and just one in five can correctly identify ways to prevent infection. Of those girls who are aware of the dangers, many feel unable to protect themselves because of societal pressures – for example: the pressure to get pregnant means that condom use is virtually non-existent within marriage.

Over 1.3 million unintended pregnancies occur annually in Nigeria and well over half of these result in abortions; fifty-five percent of Nigerian women who have abortions are under 25 years old. Studies estimate that of the 54,000 reported deaths each year from pregnancy-related complications, over 40 percent are due to unsafe abortion. One survey found that 10 percent of Nigerian women who have
In Sub-Saharan Africa, 75% of young people infected with HIV are female.

Abortions are hospitalised due to complications; teenage girls are reported to account for up 80 percent of these cases. Even when young women are fortunate enough to survive an unsafe abortion, they often experience complications with some long-term consequences such as pelvic inflammatory disease and infertility.

Despite this widespread suffering, cultural and religious traditions mean that, until recently, young people were not encouraged to access information on issues relating to their sexuality and reproductive health.

Nigeria’s strong civil society sector had already recognised the increased incidence and prevalence of HIV/AIDS and urgency in addressing issues of adolescent reproductive health. These groups started a critical intervention through producing a national sexuality education curriculum for young people aimed at promoting awareness of and preventing HIV/AIDS: the Family Life and HIV Education (FLHE) Curriculum. It was a major milestone in promoting youth sexuality education in Nigeria. The FLHE curriculum is designed to provide the information and life skills necessary to foster behavioural change to young people in schools. It was the culmination of efforts of organisations in Nigeria committed to comprehensive adolescent SRH education and services for young people.

OneWorld UK, Butterfly Works and key partners in Nigeria grasped the opportunity of using innovative and interactive digital media to promote and extend the FLHE curriculum within, and beyond, classrooms – empowering young Nigerians to gain access to accurate sexual and reproductive health information.

**OUR RESPONSE**

The mission of LaL is ‘to leverage cross-media ICT innovatively to promote sexuality education, gender empowerment and life skills among young people.’ The overarching goal of the project is to contribute to the reduction in prevalence of SRH issues, HIV/AIDS and gender violence among young people by improving access to accurate and appropriate information through ICT.
It seeks to achieve this by:

1. Utilising information and communication technology (ICT) to equip young people in Nigeria with the relevant skills to enable them make informed decisions about their sexual health, prevent HIV/AIDS and gender based violence, and associated mortality and morbidity especially regarding maternal mortality

2. To improve discussion and information on reproductive health education and reduce socio-cultural tendencies that lead to reluctance about discussing these issues with young people

3. To increase gender equality by reducing the prevalence of and offering positive alternatives to gender constructs that assume male superiority and the acceptability of violence against women in the Nigerian society.

Two core implementation strategies were specifically designed: an eLearning system used in schools and community centres, and a supporting mobile phone service which is accessible from across the country.

The eLearning system: An innovative and interactive eLearning component designed by Butterfly Works is based on a participatory approach to teaching sexuality education and life skills. The content of the FLHE curriculum – adapted by AHI - is communicated directly to adolescents using illustrated ‘info cartoons,’ to help young people reach a truly comprehensive understanding of SRH topics. A number of digital peer educators, aged 10-21, use youth-friendly language to deliver the lesson topics, providing an emotionally ‘safe’ route to accurate information for both teachers and students, enabling issues of SRH to be explored in a virtual space that is free from traditional social pressures.

AHI’S EXPERIENCE WORKING WITH eFLHE

Developing the content material for the eFLHE programme demanded that AHIL’s Material Development Team be as creative as possible with translating technical information into the more visual format of LaL. However, that hard work all paid off when we saw how excited the young people in our project schools were as we introduced them to this new form of interactive learning with animated cartoon characters. It has also been a useful tool for teachers with updating their lesson notes and making learning materials more accessible to their students in a variety of ways i.e. via paper print, CDs or the internet.

Feedback from evaluation indicates that students look forward to the eFLHE classes as teachers engage students at different times during class sessions - to read the ‘info cartoons’, do a ‘make’, ‘quiz’ or ‘discuss’ activity. The eFLHE learning tool has increased active classroom participation among students and brought about positive changes in teacher-student relationships.

Although unavoidable infrastructural hitches were faced during project implementation, timely intervention by OWUK and LSMOE’s ‘Eko Project’ through the provision of laptops and projectors to schools ensured that the eFLHE project could continue. AHIL appreciates the Lagos State Ministry of Education’s support with releasing Master Trainers, carrier subject teachers and HIV/AIDS Desk Officers for training workshops and monitoring activities. We are also grateful to One World UK for this partnership opportunity that has significantly contributed to promoting young people’s wellbeing in Nigeria.

Warm regards,
Adenike O. Esiet, Executive Director, AHI
The eLearning environment

The eFLHE has over 25 pre prepared lessons covering the themes in the FLHE: human development, relationships, personal skills, HIV infection and society and culture, with additional ‘emerging’ topics such as gender violence, leadership skills and more information on human rights standards introduced in 2011. The programme can be installed on computers or accessed online so that teachers, students and parents can engage with SRH issues via its info cartoons.

A dedicated section for teachers provides them with learning resources and materials removing from the teacher the burden of producing instructional aides and making their preparation easier. Following the initial pilot in 16 schools in FCT Abuja, Lagos and Cross River, the project was subsequently scaled up into 19 states across the country since 2009.

Several additions to the eFLHE were developed during the scale-up and led by Butterfly Works:

1. A north version piloted in Bauchi State with FOMWAN and AHEAD (available at www.learningaboutliving.org/North)
2. An out-of-school version developed with Girls Power Initiative Calabar (available at www.learningaboutliving.org/forall)
3. A teachers training aid: a ‘do-it-yourself’ DVD with a north and south version, giving a digital tutorial on the proper way to teach the eFLHE for teachers and trainers.

The mobile phone service: Two services were developed to support and provide follow-up to the work being done in schools, building on growing preference for and use of mobile phones among young people. First, a confidential question and answer service called ‘My Question’ (MyQ) allows young Nigerians to get anonymous assistance from trained counsellors, based in Abuja-based partner Education as a Vaccine (EVA). Second, mobile phones are used to run a monthly competition called ‘My Answer’ (MyA), which encourages teenagers to engage with SRH issues by offering them a chance to win prizes for correctly answering key questions about their health. This mobile component extends LaL beyond schools and community centres – empowering young Nigerians to gain access to SRH information on their own terms.

THERE ARE ESTIMATED TO BE MORE THAN 88 MILLION MOBILES IN NIGERIA.
MyQuestion (MyQ)

LaL offers a 3-in-1 service whereby young people can ask questions via SMS, voice call or via the internet. SMS in particular offers the chance of anonymity for those questions on sexuality that young people may not feel comfortable discussing out loud, or which may arise during the eLearning experience or in their personal lives. The questions can be answered by experienced local NGOs and allows for a database of Frequently Asked Questions to be built up.

FIGURE 1: HOW THE MOBILE SERVICE WORKS

MyAnswer (MyA)

MyA is a monthly competition service that allows young people to engage more with SRH issues. Every month, a question is publicised and young people get a chance to respond through their preferred medium. The answers that the young people provide to the questions give an indication of their level of knowledge for the topic, and can help identify knowledge gaps in different settings.

Enhancements and additions to the mobile platform have continued during the scale-up phase, in order to take advantage of the growing fascination with social media sites such as Facebook in Nigeria and broaden the offerings for young people. An interactive mapping of all the functional youth service centres in Nigeria was also introduced to the mobile platforms website with online chat available with counsellors soon to be completed.
SUMMARY OF PILOT

Steps to Starting

The concept that vital SRH information could be channelled to young Nigerians via an eLearning programme and mobile phone service was born out of the previous experiences of OneWorld UK (OWUK) and Butterfly Works (BFW) Netherlands. To explore how the experience of OneWorld UK and Butterfly Works in other ICT-related initiatives could be adapted and implemented in Nigeria, research was undertaken for a feasibility study into the current issues and how they could be addressed. This study brought together participants from government, civil society and telecom companies.

“TECHNOLOGY IS WHAT DRIVES EVERYTHING. WE NEED TO RE-POSITION OURSELVES.” (Professor John Idoko, Director General, NACA)

The initial 2006 scoping study concluded that although a number of issues would need to be addressed with challenges and limitations to overcome, ICT would add value to current services through improved access to culturally sensitive information for young people and there was willingness by stakeholders to explore this potential. The conclusion of the scoping study was to propose an eLearning package in order to support the FLHE curriculum. An SMS service for young people would be connected to the peer educators’ toolkit allowing follow-up questions to be asked anonymously and answers obtained through mobile phones.

Having established the clear opportunity to use the power of ICT and bring to life the national curriculum, and with such good groundwork laid by the government and civil society organisations especially in promoting and providing adolescent reproductive health education/services, working with a partnership of civil society organisations and the government was a ‘sine qua none’ to achieving the goals of the project.

THE POWER OF ICT BRINGS TO LIFE THE NATIONAL CURRICULUM.

Discuss and learn about communication skills, HIV/AIDS, family, gender, finding help and many other topics important to young people today.
The partnership underpinning LaL spans civil society, government and corporate spheres:

CIVIL SOCIETY

- OneWorld UK (OWUK) – Conceptual design, project management and mobile platform development
- Butterfly Works Netherlands (BFW) – Conceptual design & development of eLearning platform and training resources
- ActionAid Nigeria (AAN) – Strategic partner
- Action Health Incorporated (AHI) – Chief editor for factual content for eFLHE & implementing partner, Lagos State
- Education as a Vaccine (EVA) – Lead in mobile service & implementing partner, FCT Abuja, Nassarawa and Benue States
- Girls’ Power Initiative (GPI) – Lead in out of school centres & implementing partner, Cross River State

Following the pilot, other partners joined the project to extend the eFLHE across the country:

- Adolescent Health Education and Development Centre (AHEAD) – Lead in Bauchi State
- Adolescent Health and Information Projects (AHIP) – Implementing partner Jigawa and Kano States
- Federation of Muslim Women’s Association of Nigeria (FOMWAN) – Lead on content development for Northern version
- Girls’ Power Initiative (GPI) Benin, Uyo and Asaba – Lead implementing partner in Edo, Akwa Ibom and Delta States
- RHEMA Care Partners – Lead implementing partner in Rivers State
- Fantsuam Foundation- Out of school centre, Kafanchan, Kaduna State

GOVERNMENT

- The Federal Ministry of Education (HIV/AIDS Unit) – Strategic partner and key stakeholder
- The Federal Ministry of Health (ARH Unit) – Advisory
- The Nigerian Educational Research and Development Council (NERDC) – Advisory
- The National Agency for the Control of AIDS (NACA) – support for eFLHE and Mobile

PRIVATE SECTOR INVOLVEMENT

- Vas2Nets – mobile value added service provider
- MTN Foundation -- period of the pilot
Looking back to where we started in 2006 and the somewhat impossible challenges and aims we set ourselves, it’s really with great pleasure that we can now see how far the project has come and indeed it’s potential still going forward.

The first year of co-creating the program in 2007 was especially intense for us as the education designers of the eLearning program. We can safely call it a rollercoaster of challenges and rewards. The size and diversity of Nigeria, the number of young people we wished to reach, the sensitivity of the subject matter combined with the technical challenges led to many brain cracking sessions with partners. Between April 2007 and November 2007 we managed to co-design and test the characters, the cartoons, the lessons and the technical system to be able to run without the internet, on paper, and be easy to use for teachers and students. We are thankful to OneWorld UK for their facilitation of this collaborative process, to AHI for the collaboration with them and their younger members in writing the cartoons and GPI and EVA for their invaluable inputs in those early stages.

So now it only remains to see how many young people have been able to engage with the eLearning contents and the participatory teaching methods, we note with pride that students look forward to the eFLHE classes. Going forward we thank the Ministries of Nigeria for taking on the program and incorporating it in their ongoing efforts.

Very rewarding for us are of course the three new versions which we have co-developed, to name, the Northern version, the ‘For all’ version with GPI and ‘Out of School’ version with EVA, which is being finalised as we speak. The original eLearning version has also been revised and updated to complement the newer version of FLHE. In the meantime thanks again our longstanding working partnership with One World UK, for facilitating these rewarding partnerships from the Netherlands to Nigeria.

Yours sincerely,
Emer Beamer, Director, and Merel van der Woude, Education Designer, Butterfly Works

The programme showed immense potential not only for expanding the reach of the national Family Life and HIV/AIDS Education (FLHE) curriculum, but also for bridging the gap between teachers and the material, making it easier for teachers to tackle difficult or highly sensitive topics with their students:

‘…This is a wonderful experience; learning about FLHE through ICT is what I term ‘FLHE MADE EASY’. There is nothing like getting involved in the learning process and I believe young people will easily get hooked on this new revolution. FLHE rules…’

(David, Teacher)

“eFLHE has brought a new dimension to teaching in Secondary Schools in Nigeria… Teachers are now using electronic teaching and it started with eFLHE.”

(Gideon, Teacher)

The e-FLHE programme appealed to teachers and young people alike. Students loved the ease of use and the gain in ICT skills, while teachers loved the simplicity of the platform and the added information, tips and tricks for using e-FLHE in class.

“The eFLHE training has inspired me a lot, I am more equipped to resist peer pressure to have unnecessary sex. From the lesson on puberty and adolescence, I know and appreciate that the changes I feel are normal.”

(Nelson, Student)

The mobile services, co-created and implemented with youth-led organisation Education as a Vaccine (EVA), took off quickly, demonstrating the importance of immediate access to confidential, non-judgmental and accurate information on sexual and reproductive health and HIV prevention for young people in Nigeria.
The success of both the eFLHE and the mobile programmes provided a strong base for scaling up access to both services over the three years to come in the scale-up phase. In order to improve on the lessons learnt in the pilot, OneWorld UK and partners chose to look to improving their systems: focusing on management, training, and collaboration along with well-planned and executed monitoring and evaluation to measure the impact of the programme on the users and the implementers alike. The participatory approach to programme planning used to such benefit in the pilot was to be expanded in the scale-up, leaving the ownership of the LaL-Nigeria programme fully in the hands of local partners by the end of 2011.

KEY RECOMMENDATIONS FOR SCALE-UP

Given the tremendous progress made in developing an interactive multimedia platform for sexual and reproductive health information for young people in Nigeria during the two-year pilot, ambitious goals for the following three-year scale-up phase were set. These goals focused on solidifying and consolidating the gains made in the pilot, as well as expanding the reach of both the eFLHE and mobile platforms. Working with the steering committee, implementing partners, and the external evaluator, OneWorld UK identified four priority strategic areas for scale-up:

1. **New Schools, New States, New Users**
   Scaling up of both eLearning and mobile platforms and implementation within the existing states into new schools and, in line with the recommendations of the External Evaluation, into new states and geopolitical zones, along with expansion of the mobile platform onto additional telecommunications networks.

2. **Increased and Improved Trainings**
   Building the capacity of teachers and trainers through additional and improved trainings, as well as increasing NGOs’ and government agencies’ capacity to implement and incorporate the LaL platforms as part of current and future projects.

3. **Advocacy and Publicity**
   Advocacy on the local, state, and national level through trainings, meetings, conferences, and publicity to improve platform reach and further engage government and NGO stakeholders.

4. **Improved Partnerships for Sustainability and Growth**
   Deepening established alliances and forming new networks to further extend the work and leverage sustainable successes from LaL in order to catalyse future interventions.

The Scale-up phase focused on expanding the reach of both the eFLHE and mobile platforms while formulating a clear exit strategy for OneWorld UK, leaving a vibrant and sustainable LaL programme in the hands of local stakeholders. As the successful pilot had fully demonstrated the validity of the programme model, the strongest risks for the Scale-Up were in the sustainability and transfer of project control. OneWorld UK chose to mitigate and plan for these particular risks by engaging all stakeholders in a participatory planning process to develop a comprehensive exit strategy, as well as focusing more energy on in-country advocacy and cross-sectoral integration with other government and development initiatives for health and education.
The Participatory Approach

OneWorld UK is committed to a participatory approach built on four key values: social justice, empowerment, ethical practice, and sustainability. The LaL programme is designed not to create new content or replicate existing projects, but to use ICT and mobiles to expand the reach of the already strong, inspiring work of the Nigerian civil society organisations for and with young people. Through a vibrant dialogue amongst the members of the steering committee, made up of non-governmental organisations, government representatives, and key stakeholders active in the field of sexual and reproductive health and human rights, the LaL programme was designed, implemented, and guided fully through a coalition model of governance and decision-making. Credit for the success of the LaL-Nigeria programme thus is fully and equally shared by the implementing partners, co-designers, and steering advisors across all levels and areas of interest.

In order to ensure sustainability and relevancy, ownership of the project had to be first and foremost in the hands of the partners. The first element of the scale-up phase, in April 2009, was a workshop with all partners, HIV Desk officers from the pilot states, and some pilot teachers to collectively design the new phase of the project. At this workshop we relied on a monitoring and evaluation specialist to facilitate the design of a jointly-agreed logical framework and progress indicators which could support ongoing learning through project implementation and assessment. By working with a shared project plan that covered all elements: expansion, alliances, advocacy and partnerships, the scale-up was able to work from the start towards a sustainable exit strategy that would leave a good base of knowledge for the partners interested in carrying on.

RESULTS FROM SCALE-UP

In Phase II, the project sought to expand the LaL platform in two areas and set targets for this. First, through the promotion of the eFLHE programme to more schools and out-of-school centres in at least three existing and six new states in the country, with implementation in at least 90 schools and six youth centres and 200 effectively trained master trainers stepping down training to an additional 800 teachers. Through this, the eFLHE platform could reach at least 45,000 new students in schools and 2,500 young people through out-of-school centres in Nigeria. At the same time, OneWorld UK continued negotiations with telecommunications providers in order to facilitate free-to-user SMS services on at least three major telecomm networks in Nigeria.
**FIGURE 2: LAL BY THE NUMBERS, SCALE-UP PHASE**

<table>
<thead>
<tr>
<th></th>
<th>Pilot</th>
<th>Scale Up Y1</th>
<th>Scale Up Y2</th>
<th>Scale Up Y3</th>
<th>Cumulative</th>
<th>Targets</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>eFLHE</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Students reached</td>
<td>8,553</td>
<td>22,071</td>
<td>22,880</td>
<td>48,604</td>
<td>102,108</td>
<td>45,000</td>
<td>exceeded</td>
</tr>
<tr>
<td>Out-of-school youth reached</td>
<td>240*</td>
<td>461</td>
<td>1,152</td>
<td>982</td>
<td>2,835</td>
<td>2,500</td>
<td>exceeded</td>
</tr>
<tr>
<td>Schools implementing</td>
<td>16</td>
<td>41</td>
<td>53</td>
<td>129</td>
<td>239</td>
<td>90</td>
<td>exceeded</td>
</tr>
<tr>
<td>Youth centres implementing</td>
<td>1</td>
<td>3</td>
<td>3</td>
<td>0</td>
<td>7</td>
<td>6</td>
<td>exceeded</td>
</tr>
<tr>
<td>Master trainers trained</td>
<td>22</td>
<td>259</td>
<td>197</td>
<td>543</td>
<td>952</td>
<td>200</td>
<td>exceeded</td>
</tr>
<tr>
<td>Teachers trained</td>
<td>308</td>
<td>140</td>
<td>189</td>
<td>851</td>
<td>1,488</td>
<td>2000</td>
<td>not reached</td>
</tr>
<tr>
<td>Peer educators trained</td>
<td>30</td>
<td>79</td>
<td>246</td>
<td>558</td>
<td>913</td>
<td>1000</td>
<td>not reached</td>
</tr>
<tr>
<td>NGO staff trained</td>
<td>35</td>
<td>41</td>
<td>45</td>
<td>19</td>
<td>140</td>
<td>60</td>
<td>exceeded</td>
</tr>
<tr>
<td>Ministry officials trained</td>
<td>21</td>
<td>24</td>
<td>6</td>
<td>22</td>
<td>73</td>
<td>18</td>
<td>exceeded</td>
</tr>
<tr>
<td>College lecturers trained</td>
<td>0</td>
<td>77</td>
<td>43</td>
<td>40</td>
<td>160</td>
<td>Not set</td>
<td>exceeded</td>
</tr>
<tr>
<td>States</td>
<td>3</td>
<td>4</td>
<td>4</td>
<td>8</td>
<td>19</td>
<td>9</td>
<td>exceeded</td>
</tr>
<tr>
<td><strong>Mobile</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SMS Messages sent to MyQ</td>
<td>60,440</td>
<td>94,646</td>
<td>98,354</td>
<td>145,504</td>
<td>398,944</td>
<td>270,000</td>
<td>exceeded</td>
</tr>
<tr>
<td>SMS Messages sent to MyA</td>
<td>4145</td>
<td>6,776</td>
<td>8,209</td>
<td>6,873</td>
<td>26,003</td>
<td>Not set</td>
<td>exceeded</td>
</tr>
<tr>
<td>Repeat users of MyQ services</td>
<td>7808</td>
<td>11,031</td>
<td>12,472</td>
<td>19,377</td>
<td>50,688</td>
<td>Not set</td>
<td>exceeded</td>
</tr>
<tr>
<td>Voice calls to hotline</td>
<td>6,916</td>
<td>7,402</td>
<td>4,864</td>
<td>3,707</td>
<td>22,889</td>
<td>Not set</td>
<td>exceeded</td>
</tr>
<tr>
<td>Trained counsellors</td>
<td>2</td>
<td>6</td>
<td>4</td>
<td>8</td>
<td>20</td>
<td>Not set</td>
<td>exceeded</td>
</tr>
</tbody>
</table>

*This figure included students as in the pilot report*
eFLHE Expansion

From the almost 9,000 young people reached in 16 schools and 1 youth centre at the end of the pilot, by the end of the scale-up in January 2012, over 105,000 young people directly via partners in 221 schools and 7 youth centres in 19 states were accessing accurate, non-judgmental information on sexual and reproductive health while improving their ICT and life skills through the LaL e-learning platform. LaL was able to far surpass nearly all of the targets set for the eFLHE at the end of the pilot phase, with notable successes in a few particular areas.

Thanks to the increased focus on advocacy and more stakeholder partnerships, the eFLHE system was integrated into more trainings by partners, government, development agencies, and teacher colleges. Working with the National Commission for Colleges of Education (NCCE), an initial crop of lecturers were trained as master trainers in December 2009, with the aim to incorporate eFLHE training into the curriculum for future teachers, greatly reducing one of the major barriers to sexuality education: teacher discomfort with the subject material. This initiative, new in the scale-up phase, resulted in 160 trained lecturers at Colleges of Education across the country, laying a solid groundwork for sustainable use of the eFLHE platform in schools.

“WITH THE MANDATE IN eLEARNING AND COMPUTER LITERACY FOR ALL TEACHERS IN SCHOOLS, THE eFLHE INNOVATION HAS COME AT THE RIGHT TIME; eFLHE MAKES TEACHING EASIER FOR TEACHERS AND LEARNING FUN FOR STUDENTS.” (Dr. Ezinma Uzuegbunam, Deputy Director HIV unit, Federal Ministry of Education)

Additionally, working with partners alongside NACA and the Federal and State Ministries of Education in participating states ensured that all government sponsored trainings on FLHE included the eFLHE platform by training Ministry representatives as master trainers, as well as connecting ministries to implementing partners as resources.

FLHE AND THE GLOBAL FUND

One particular partnership with the Ministry of Education bears highlighting: the incorporation of the eFLHE into the FLHE trainings supported by the Global Fund for AIDS, Tuberculosis, and Malaria (Global Fund). Finalised in 2010, this agreement between Association for Reproductive and Family Health (ARFH) as the Principal grant recipient and the FMOE as the sub recipient and lead implementing partner greatly expands the reach of the eFLHE platform, gains which we have only begun to see at the close of OneWorld UK’s management of the project at the end of 2011. In the first year of Global Fund-sponsored teacher trainings in Nigeria, eFLHE was able to reach an additional 1,173 teachers and 80 master trainers in 331 schools, ensuring that an additional 18,924 young people received eFLHE lessons across the country. As the Global Fund sponsored trainings scale up over the next years, we will expect to see the FLHE and where possible the eFLHE, rolled out to over 20,000 teachers in 4,000 schools across all 36 states and the FCT, taking LaL to a national scale. By incorporating eFLHE into national teacher training programmes, LaL is contributing to changing the face of sexual reproductive health education in Nigeria, bringing together human rights, life skills and sexual and reproductive health information with ICT to fundamentally improve the lives of young people.
We have seen increasingly positive feedback and results from both students and teachers:

‘It has helped me appreciate and understand myself the way I am’ (Odigwe, Student)

Teachers have repeatedly told us that eFLHE makes FLHE easier to teach, and that their students love the youth-friendly language, colourful interactive format, and easy access to information. Both teachers and students report more comfort with and knowledge of not only SRH topics and HIV prevention, but also with ICT and computer skills.

‘… I found out that learning about [the] computer and its use is not something difficult after all and I want to appreciate the opportunity given to me by AHI and other organizations that sponsored the program. The use of e-FLHE would make teaching easier and less burdensome. The information on the LAL program is captivating and will keep the young people busy and well informed.’ (Angel, Teacher in Lagos State)

Mobile Platform

Given the enthusiastic uptake of the mobile platform during the pilot, we set ourselves the tasks of making it available at no-cost to the user on more networks and improving response time. More counsellors were trained in how to use the back-end content management system to respond to questions. By the end of the scale-up phase, the mobile platform was available on all the major mobile networks in Nigeria: MTN, Airtel, Glo and Starcomms, with a rotating staff of twelve counsellors answering over 100,000 questions per year, the majority within 24 hours. In year three of the Scale-Up alone, with limited publicity beyond word of mouth before 2011, the MyQ services received 145,405 messages via SMS, email, and webform. By the end of March 2012, the total number of questions received over the four years of the LaL mobile platform was 414,329. While some questions were repeated, unclear, or incomplete, counsellors have still provided responses to over 300,000 questions over the lifespan of the LaL programme, providing unprecedented access to information to young people in Nigeria.

Additionally, the number of repeat users has grown along with the project; the number of young people coming back to use the service again and again shows a level of trust in the information we are providing.
which gives us confidence in the ongoing need for and success of the mobile initiative. Over the four years of the MyQ service, 50,688 users have relied on us to help them gain access to information repeatedly, and 70% consistently tell us that they have taken the information they got from our services to their friends, classmates and families. When we look to measure our impact, both of these measures are important milestones for success.

As questions poured into the MyQ system, counsellors reported back that many young people were texting in search of advice on when, where, and how to seek out sexual and reproductive health services. In order to respond to young people with confidence, the local counsellors requested an audit of youth friendly health services in Nigeria, to ensure that all referrals made by EVA staff lined up with the project’s non-judgmental, rights based approach to young people’s health. In order to best serve young people, OneWorld UK commissioned an external evaluation of the available youth friendly services in Nigeria, complete with a multi-category grading system for services based on availability, cost, and attitude of providers.

This evaluation and a shortened grade ranking were provided to counsellors and the full report made available to all project partners and stakeholders: as local partners take the work of LaL forward, the health services evaluation will be a valuable tool in advocacy campaigns to improve young people’s access to health services. Most importantly, though, a map of available youth friendly health services with their grades is available online for all young people (www.myquestion.org).

The MyA competition service also expanded, growing from a little over 4,000 responses in year one to nearly 7,000 in year four.
EVA's experience with the use of mobile phones for sexual reproductive health programming started in 2005 when the organization was selected by NACA to manage one of the National SRH & HIV/AIDS hotlines. When OneWorld UK, introduced the SMS & email components in 2007, it was easy to sail through as staffs already had capacity in the area of telephone counselling. From 2007 till date, the service has gradually expanded from about 2,000 questions being received monthly to over 12,000 monthly in 2012; this has been largely due to the tireless effort of the counsellors and technical experts at OWUK.

Publicity was carried out through various means including radio jingles, bulk SMS as well as handbills/stickers distributed through partner organizations. An evaluation of the clients’ satisfaction (including their ability to access the service as well as the quality of service provided) over the years indicated that an average of 72% said they were satisfied.

The organization’s experience and achievements managing MyQuestion service has set it apart as a “mobile phones expert”. This was demonstrated when the project was recognized by the National Youth Network on AIDS (NYNETHA) as “Most Outstanding Youth Initiative to Combat HIV and AIDS” during the 5th National Conference on AIDS, May 2010. Additionally, in 2010/11 the project team was selected to lead on the mobile component of the NYSC/UNICEF “Intensifying HIV Prevention Among Out Of School Youth in Akwa-Ibom, Cross River, Kaduna, and Gombe States Project”.

As part of expansion plans, the team is working with OneWorld UK on exploring the use of social media – Facebook and web chat to reach more young people. This is to give young people a chance to express themselves more and also have opportunity for in depth interaction with the counsellors.

Kemi Akinfaderin-Agarau, Executive Director, EVA
The slower rate of growth for the MyA service may be reflective of the small number of prizes available to the winners, as we only have enough airtime to reward 20 young people chosen at random from the hundreds who respond accurately each month. When asked as part of the end-of-project evaluation, many young people told us that they had stopped taking part in the MyA competition because they didn’t receive the free airtime despite getting the response correct. Going forward, OneWorld UK and EVA have begun to re-strategise new ways of incentivising young people to engage with the competition, including new online interactive structures, as this is a valuable way of assessing the level of SRH knowledge among young people.

We have consistently looked for ways to expand the reach of the mobile platform to more and more young people, and to reach young people where they congregate.

Additional enhancements to the mobile platform include a web widget which can be simply and quickly plugged into any partner site, freeing us from having to attract young people to any individual webpage to ask their questions quickly, confidentially, and free of cost. Capitalising on the growing social network’s reach in Nigeria, the project is expanding to include Facebook by developing a question and answer application that allows young people to engage more freely with the information services, as well as the opportunity to pass along information and promote the service across their existing communities of friends. Launched at the end of the Scale-Up phase, it is our hope that this new form of outreach will continue to expand young people’s access to confidential, accurate and non-judgmental sexual and reproductive health information for years to come.
CHANGES IN KNOWLEDGE, ATTITUDES AND PRACTICES

"There have been demonstrable improvements in the knowledge base and attitudes of young persons across a range of proxy indicators on sexuality, HIV/AIDS, and gender-based violence."
(Independent Evaluation, 2012)

In order to measure success, LaL needed to not only expand our reach to more young people, but also to demonstrate an ability to effectively catalyse change in young peoples knowledge and behaviours. Baseline, middle-of-project, and end-of-project evaluations have continuously charted changes in young people’s knowledge and attitudes pertaining to sexual and reproductive health, HIV prevention, and gender equality. Young people who interacted with LaL across platforms showed improvement across all proxies: knowledge on sexuality and HIV/AIDS, communication skills and confidence in discussing sexual and reproductive health, and attitudes towards and incidence of gender based violence.

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Baseline</th>
<th>End of Project</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knowledge: People living with HIV can remain healthy for years.</td>
<td>62%</td>
<td>76%</td>
</tr>
<tr>
<td>Knowledge: Girls have the right to refuse any kind of unwanted sexual advances including touching</td>
<td>81%</td>
<td>91%</td>
</tr>
<tr>
<td>Attitude: Have you ever talked to your parents about sexual issues?</td>
<td>27%</td>
<td>40%</td>
</tr>
<tr>
<td>Attitude: Can you talk to your friends about sexual issues?</td>
<td>44%</td>
<td>68%</td>
</tr>
<tr>
<td>Behaviour: male students who reported recently threatening a female peer</td>
<td>15%*</td>
<td>14%</td>
</tr>
<tr>
<td>Behaviour: female students who reported having been threatened by a male peer</td>
<td>25%*</td>
<td>23%</td>
</tr>
</tbody>
</table>

*Measurements on gender based violence behaviours were added to the midline evaluation, so changes in these percentages represent a single project year.

In the scale-up phase, new strategies were employed to further improve the delivery of the LaL system. We engaged in concerted advocacy to identify new partnerships and strategic collaboration, we strengthened and deepened our existing collaboration with implementing partners, and we improved our monitoring and evaluation systems to be more responsive to users needs and concerns. All three strategies paid dividends in boosting the success of the LaL programme in Nigeria.

The LaL programme also encountered challenges, which we feel well placed to make a few recommendations on how to appropriately plan for in future interventions. In the spirit of the health promotion ideals on which LaL is founded, we have roughly categorised our lessons into three general areas: Knowledge, Attitudes, and Practices.
Knowledge Lessons

To ensure strong collaboration amongst partners as well as the local ownership required for sustainability needs near constant, open and transparent information sharing amongst all stakeholders. OneWorld UK’s role has been to maintain open lines of communication and facilitate collaboration between implementing partners, steering committee members, and other stakeholders. In order to do so, we have made an effort to share reports and evaluations in a timely manner, a system which we’ve continued to improve over time in Nigeria as well as in our successive LaL projects in Senegal and Morocco.

“LaL implementing partners all report a high degree of satisfaction. The evaluation team noted that the partners had all continued to work harmoniously and constructively, using each other’s strengths to good effect.” (Independent Evaluation, 2012).

Additionally, OWUK has tried to capitalise on every opportunity for on-ground collaboration and experience-sharing between partners and stakeholders. This can take place at regular steering committee meetings, by providing for one to one collaboration on trainings, development of additional content, or site visits. Maintaining a friendly, collegial relationship between implementing partners and stakeholders through a transparent information system and collaborative partnership model is absolutely crucial to guaranteeing the ongoing success and sustainability of the project.

FEEDBACK FROM PARTNERS

“The relationship has been very cordial and mutually beneficial. EVA has gained experience and recognition in the use of information and communication technology (ICT) for development in the country.”

“This project and partnership has assisted GPI to enhance her relationship with the Cross River State Ministry of Education in implementing the Family Life and HIV/AIDS Curriculum in Secondary Schools in the State.”

OWUK also encountered challenges in the development of high-quality, accurate, and culturally sensitive content for our e-learning environments. In the pilot, we worked with a key organisation in the south of Nigeria, Action Health Inc., to develop the eFLHE curriculum, drawing on their expertise with the national FLHE standards and established success in developing sexuality education materials. When the time came to develop add-on curricula for out-of-school young people and for the more conservative north, we once more turned to established leaders in the respective areas.

While the development of different characters and images for the northern e-learning platform was accomplished easily, the revision of the content and the addition of new topic areas for the more conservative north proved more challenging. Despite the high educational quality and respectful content of the curriculum developed by northern partner FOMWAN working with AHL, we continue to face resistance from school officials, teachers, and parents uncomfortable with the FLHE subject matter generally. Striking an appropriate balance between content revision and additional training and outreach has proven to be mandatory for the expansion of the eFLHE programme in northern Nigeria.
The programme has also helped to attract more students to the school. For example, students from northern Nigeria now constitute about 10% of the student population and this is traceable to the programme as it talks about cultural issues as well" (Amina, Teacher in Lagos State).

The out-of-school curriculum, with its added focus on issues of gender and human rights, proved much more successful. Butterfly Works working directly with Girls’ Power Initiative in Cross River state to develop key lessons from their out-of-school youth centre curriculum, we were able to greatly expand the availability of information on human rights and gender equality issues in the “LaL For All” platform. The strength of the additional lessons brought another unexpected success for LaL’s eFLHE efforts as a whole. In the recent review of the curriculum, NERDC decided to adopt new content and with our already developed LaL out-of-school platform, we could quickly expand the eFLHE for in-school-use so it was suitable for the Global Fund supported trainings on FLHE because of this expanded curriculum and in this way we ensured continued support for this vital information in schools for all young people through this trainings.

In order to reach our stated gender equality goals, the LaL Nigeria programme required a concerted effort on the part of all stakeholders to create a system and develop content which could effectively challenge the gender stereotypes and expectations which contribute to inequality. The eFLHE platform lends itself well to these efforts – by working with strong local partners Action Health Inc. and Girls’ Power Initiative on the in- and out-of-school e-learning curricula, respectively, we were able to ensure that powerful messages about gender equality and human rights permeated the content available through LaL.

“My friend in class reported a case of a boy who was harassing her and I advised her to report to the teacher whenever he comes up with such act and ever since my friend told the boy she was going to report him to the teacher, he never harassed her again” (Blessing, Student)

Incorporating the promotion of gender equality via the mobile platform, however, required more careful planning and a revision of our expectations. Strategy sessions with EVA yielded some clear steps which included engaging gender based organisations, publicity messages targeting the female population and radio spots to support these. In addition, EVA performed research among young women in 6 states of Nigeria in late 2011 to explore the gendered dimensions of access to mobiles and internet and determine young women’s preferences for using MyQ and MyA and the results proved quite revealing. The primary
factor in determining use was cost, while young women also identified “shyness” and secrecy as barriers to seeking out health information.

“Some people they have heard but they are too shy to call for anybody to hear their problems” (Young Woman aged 15-25).

Also, while young women overall have a high level of access to mobile phones, social and cultural barriers, such as the need to ask for permission to use the phone or fear of sharing confidential information via the phone still limit their use of the service. More work still needs to be done on the unequal gender expectations in order to address young women’s access to health information and services and reduce their particular vulnerability.

Another ongoing struggle for the mobile platform has been to balance the need for privacy and confidentiality with our desire to comprehensively document our demographic reach. Across our LaL programmes in Nigeria, Senegal, and Morocco, we have preferred to favour privacy, collecting demographic information only from those users who are willing to provide it voluntarily. Thanks to the large number of users who are willing, though, we are reasonably confident in our ability to estimate the reach. Adding these measurements to the demographics collected by the external evaluation team gives us a comprehensive and clear picture of the young people we are reaching.
While we still see more young men than women accessing our services, specific outreach to young women and increased work on gender equality within the LaL programme and by partners has significantly reduced the gap. Amongst young people ages 16-25, who make up 67% of the MyQ service users, young women are beginning to outpace young men, 51% to 49% (an improvement from 30%-60% in the previous years).
Attitudes

Many of the challenges in the content development and dissemination of the LaL platform were also challenges in the attitudes and biases we encountered. Whether it was a school head who was resistant to including sexuality-related topic areas in his curriculum, or parents worried about allowing their children to access information on sexual and reproductive health, or encountering previously unexplored assumptions and social stigmas within ourselves, our counsellors and our partners, attitudes towards information are heavily influential in ensuring project success.

For the mobile platform, MyQ and MyA, the scale-up phase showed us the importance of planning for sustained interaction with the counsellors, providing them with access to an independent expert for more challenging questions, and allowing opportunities to come together, refresh and reflect, and share their own personal challenges with each other. The project’s commitment to working with local young people as counsellors as well as beneficiaries means that extra effort and attention was given to supporting project staff to explore their own attitudes and opinions about challenging or controversial sexuality issues. Annual refresher trainings for counsellors instituted as an integral part of the scale-up, combined with the pilot phase’s strong local counselling coordinator and independent medical expert, allowed the MyQ system to provide accurate, non-judgmental, and culturally relevant responses to young people’s questions.

**ONE COUNSELLOR’S EXPERIENCE**

MyQuestion service has helped me appreciate the importance of sexual and reproductive health information, especially for young people. Working as a counsellor on this service has made me realize that most adolescents have very poor knowledge on reproductive health issues; they’re experiencing a lot of changes as they develop and have burning questions but more often than not, have no one to provide them with accurate and non-judgmental answers.

When I came on board 3 years ago I was shocked at the different myths & misconceptions on SRH issues expressed by young people via the service; these were issues I took for granted and assumed “everybody knows these things”. Sometimes, I got very emotional when reading through the questions sent in by young people; however this made me more passionate - I walked, talked and dreamed “MyQ”! Each time I replied a question or counselled via voice call, I felt a little bit of the “burden” taken off. In spite of several challenges, the experience has been very gratifying. It’s been great working with the entire team at One World UK and look forward to more rewarding partnerships!

Sylvia Ekponimo, Project Manager, Mobile, EVA

The project also encountered barriers in the attitudes of teachers, school administrators, and parents to their sexuality education e-learning platform. Outreach and advocacy with communities and schools by partners eased the process of rolling out the eFLHE considerably, and teacher trainings and the use of teachers as master trainers to step-down to other teachers in their schools with the support of the school heads, helped overcome teacher’s reluctance to approach the content. After trainings, feedback from many teachers was that the eFLHE system actually made it “easier for them to teach the more controversial or embarrassing subjects,” giving them a way to overcome their own anxiety while also facilitating their students’ access to information.
“There are many things I didn’t even know as a teacher that I now know – the way body anatomy is illustrated is clearer to me compared with the way it is in Biology.” (Akin, Teacher in FCT)

“The package has put to rest some of the challenges we in the second and third level were having. You do not need to start packing and carrying flipcharts about during lessons. Information is handy and easy to reach. Girls learn with so much fun. The diagrams are self explanatory and they speak life to the issues being addressed. [The] language used is also very simple for everyone to understand.” (Emilia, Facilitator, GPI Calabar)

One area that still needs improvement, however, is in engaging parents in their children’s SRH education. LaL partners have a key opportunity to use the strength of family relationships in Nigeria to broaden their scope and open a wider dialogue on health and values between young people and their families. One gratifying finding from the end of project evaluation of the mobile platform was that an average of 70% of the young people who received information from the mobile service took that information back to their friends and families.

Similarly, young people who had access to the eFLHE platform in schools or youth centres overwhelmingly reported more comfort in talking with their parents and friends about sexual issues: by the end of the project, nearly half of the young people surveyed reported that they had approached their parents for advise or information about their sexual and reproductive health, compared with only a quarter at the beginning of the scale-up phase.

**Practices**

Nigeria, like many low- to middle-income countries, presents challenges to the logistical planning of ICT programmes. Irregular and unreliable electric power, low levels of computer literacy, frequent teacher turnover, or educational strikes and school closures all had to be overcome to ensure LaL’s success. Lack of power and frequent disruptions in the school year required us to maintain patience and flexibility in both planning and implementation, and to have available back-up plans for eFLHE delivery.

In many cases, we found that irregular access to electric power could be overcome by providing materials in printed formats along with CDs and DVDs, or through purchasing and donating laptops and projectors to the implementing schools with low-cost alternate source of power like inverter batteries. We invariably encountered immense generosity and cooperation amongst the schools heads and government partners, who were pleased to support the project through donations of inverters, fuel for generators, or computers and projectors.
Disruptions in the school year and frequent teacher transfers made it challenging to ensure continuity over time. In response, we focused on a strategy of training an average of four teachers per school as master trainers of their peers, then supporting step-down trainings to other teachers in the school to prevent fall-out from possible transfers. Like the projectors, this turned out to have positive results as well – as teachers were unexpectedly transferred from school to school, they took their training with them, expanding our reach and influencing their new head teachers to implement eFLHE in their new schools.

This strategy also paid off when the FLHE topics were spread across the school curriculum, from the original two subjects (integrated sciences and social studies) to more than ten subjects, creating a need for more teachers in each school to be trained on and to be comfortable with the eFLHE platform.
Management

On the programme management side, we’d like to highlight two particular practices that contributed to the success and sustainability of the LaL Nigeria programme. First, the use of low-cost counsellors through the national youth service programme: while there are inherent benefits to employing young people as counsellors as well as peer educators, ensuring high-quality non-judgmental counselling with an annual staff turnover requires clear and transparent planning. The employment of a strong counselling supervisor and retention of independent local medical and sexual and reproductive health experts as on-call advisor have both proven invaluable to maintaining a high level of service. Creating space for frequent consultation with the counselling supervisor, experience-sharing workshops, refresher trainings and topic-specific sessions on arising issues has been vital to project success, which has informed our planning and practices in subsequent LaL programmes. Additionally, on-going formative evaluation of SMS responses allowed OneWorld UK and mobile implementing partner EVA to maintain quality counselling and improve our understanding of young people’s SRH needs.

Most crucial, though, for project success has been the ability of OneWorld UK, implementing partners, and stakeholders to maintain a vibrant, collaborative, country-wide partnership amongst diverse organisations and interests. Frequent and transparent reporting, availability of check-ins between OneWorld UK’s Nigeria Programme team and individual organisations, and regular steering and advisory committee meetings, monitoring visits with partners to schools and one on one meetings between OneWorld UK staff and partners have all contributed to an atmosphere of collegial collaboration. The time devoted to the project by each collaborating organisation and agency has been invaluable, and the unique combination of local expertises available within this group of partners has ensured that we have been able to deliver a strong, sustainable empowerment programme for the young people of Nigeria.

SUMMARY OF LEARNING OBJECTIVES FROM LAL

1. Technology provides a “safe space” for young people to get accurate information about sensitive topics (reproductive health) without the social taboos.

2. Technology should be appropriate and tailored: we use a suite of appropriate technological approaches to communicate based on our users’ preferences – we use available technology to meet young people where they are, not where you’d like them to be!

3. A multi-sectoral partnership, bringing top-level government, private sector, and civil society stakeholders’ together under one umbrella, can provide long-term payoffs in cost, reach, and ultimately in project sustainability.
SUMMARY OF RECOMMENDATIONS FROM PILOT

- Management: A participatory approach to management is required in each location/state; on a state level, formation of a state project management committee that will incorporate key line ministries and organisations working in the state is recommended.

- Training: Adequate training of teachers and master trainers who can step down the trainings to more teachers in schools is imperative.

- Collaboration: Proper collaboration across sectors and between institutions ensures smooth implementation and sustainability of the project.

- Flexibility: in implementation is required as infrastructure differs in each area; this ensures the students (and teachers) benefit from the project

- Advocacy is key to ensure all stakeholders are supportive of the project which makes for smooth implementation

- Monitoring and Evaluation: Proper documentation should be available to record and measure outcomes and for replicability by other organisations and in different locations.

In preparation for the Scale-Up, a workshop was organized with all stakeholders to develop a detailed and holistic plan for the new phase, with uniform indicators and reporting structure. The summary of lessons learned and recommendations from the pilot were considered extensively in developing the process. In concluding, we would like to examine our performance in the Scale-Up phase against these recommendations. We are gratified to see these key recommendations incorporated into the scale up of FLHE across the country.

Management: The participatory approach to the programme management highlighted as a key success factor of the pilot continued throughout the scale-up phase. The steering group was expanded to include new partners and stakeholders in each of the new locations where the project was scaled up. The sharing in these sessions yielded positive impacts as organisations learned from each other and strategies adapted in a systemised and prompt way.

Attempts to support the establishment of a project management committee (PMC) in states where LaL partners led the work only materialized in two states - Bauchi and Cross Rivers state in the second year of the scale-up. As this structure is now being supported through the FME, a PMC has been inaugurated in all the states and FCT. With LaL partners involved in each state where they work, this will remain a critical strategy to ensure continued support for FLHE implementation on the local level.

Training: The focus on improved training and capacity building proved successful. In addition to the agreed format of training master trainers to step-down to more teachers in each school, government officials continued to be trained, as well as staff of NGO partners. As the nationwide roll out of the FLHE continues, more and more teachers will be trained in all the states by the Master trainers. In addition, the inclusion of FLHE in the NCCE structure will ensure that in the years ahead, all graduates from the Colleges of Education across the country are equipped to teach sensitive SRH subjects as in the FLHE topics. Also, the
Quite a few times along the way I wondered if we had bought off more than we could chew; if we had set far too ambitious targets. It looked like the challenges kept pouring in and seemed unending: the strikes in the first year, the worsening power situation in the country, the slow pace of setting up the PMC on and commencing implementation in some schools, the quick turnover of counsellors necessitating new trainings, etc. We wondered over and over again, “are we really making a difference – to the work of the partners, in the lives of the young Nigerians, to the work of these organisations and care-givers?”

By the end of the first year of the Scale-Up phase, the last steering group meeting was sober; it was a far drop from the high of the first workshop to commence the scale up phase. But then a phone call from a teacher, an email and expressions of gratitude from a partner, a text coming in on the platform from a young girl seeking an answer to her SRH dilemma – and I would say, “Yes, it’s all worth it.”

This project could not have been possible - I say it all the time - without the partners; their passion was exemplary. The huge hugs from Prof. Madunagu and her effusive appreciation all the time; the ‘pep talk’ from Mrs. Esiet, the long hours into the night with Kemi and the team at EVA, strategising on the mobile service offerings and thinking about the sustainability of the service; our partners were just brilliant! It also helped that Gertjan Van Bruchem in Oxfam Novib was extremely supportive and quick to respond to each new request that would enrich the programme.

The experience of working with different organizations across sectors, each bringing their strength to bear on the project, the opportunity to learn from their experience in the past, has contributed to make LaL what it is. The flexible approach based on OWUK’s ethos allowed us to let the project develop a natural life of its own.

We have achieved quite a bit – together – and that is the key word, ‘together’. This is not just in terms of quantitative numbers, but I hope that as all the partners have touched my life (our lives), we have also impacted theirs. It has been an enriching experience coordinating the LaL Nigeria project with my colleagues, especially Catherine Okereke in the last 4 years. First, as Nigeria is my ‘home country’, and growing up in Nigeria, I was faced with the same challenges in obtaining SRH information (we didn’t dare dream of youth-friendly services).

My personal prejudices were also challenged. The questions on the mobile platform made me question my ‘liberal’ prejudices against my assumed ‘culture’. In the end, as we say in LaL, ‘Fact rules – just give them the facts and allow them make their own decision’. As we replicate LaL in different countries, we take this same experience knowing that the tech interventions have to develop a life of its own based on the local context and appropriate technology. I feel better placed after five years of development and implementation in Nigeria to replicate in any country across Africa. Almost no challenge, as peculiar as it may be, is new to me having experienced it at one time or the other in Nigeria.

The strong and constant support from the Ministry of Education ensured that the opportunity to extend the FLHE across the country (with ARFH through the Global Fund) included the eFLHE and could not have been timelier for us and for all the organizations that have been working in this area for years. We could not have hoped for a better sustainability structure. The knowledge that all the hard work building and developing the platforms in the past years will continue with this much government led support; its more than I dared to hope and dream for back when we started.

To the partners especially, I simply say, thank you.

I leave with a quote from OWUK’s CEO Anuradha Vittachi who is so passionate about issues the LaL seeks to address to understand how we work and why I feel so gratified about the work of the past few years, and the future direction of LaL Nigeria:

“I think they (people) need most of all to understand our philosophy of syntropy: of coordination and catalysis - being a catalytic change agent, joining the dots and making a whole that is greater than the sum of the parts - rather than operating as a topdown change agent where WE have to do and provide EVERYTHING, and the whole is limited to the sum of our own energies.
We work in a way that attracts others’ energies INTO the system, like a solar panel or a wind turbine does, so that we can do far more with little”.

Anuradha Vittachi, Founder and CEO, OneWorld UK
staff of GPI working with BFW were trained on content for eLearning environment and EVA staff had their capacity built on the content management system of the eLearning environment which will enable them make future changes to the eFLHE curriculum when required in future.

Collaboration: The collaborative nature of the LaL structure and the impressive results has shown that working together, with each organization bringing their strength to bear, creating a catalysing effect with more lasting impact than if each organization sought to do it on their own. The formation of the PMC will hopefully help actualize this in the coming years.

“It IS POSSIBLE TO ACHIEVE WHAT WE DESIRE IF WE COLLABORATE; THE LEVEL OF ACHIEVEMENT NOW IS A RESULT OF COLLABORATIVE WORKING.” (Bene Madunagu, Chair, GPI)

Flexibility: The flexible approach in implementing in each local area was a ‘sine qua none’ given the diverse nature of the country. The open approach of the steering group meetings, and the quarterly report from each partner helped OWUK adopt and support location specific strategies to ensure the learning culture promoted by the project ensured that flexibility in terms of incorporating feedback from the field was instrumental to the success in different areas.

Advocacy: In terms of advocacy, the partners led this on the local level, in each state and schools prior to implementation, supporting OWUK to lead at the national level. This proved beneficial to the implementation process with teachers supported on the state and school level.

One area that could have done with more intervention is in the area of advocacy to the parents. Involving parents in the SRH of their children should be looked into for future projects, providing an additional channel of support.

Monitoring and Evaluation: One of the key strategies for the Scale-Up was a robust M&E structures that would adequately measure impact and document the process for replicability. This detailed attention to documentation has helped in the replication of LaL projects in four other countries.

Following the initial monitoring and evaluation workshop at the onset of the new phase, one of the partners reported after the three-day workshop that “this has been so beneficial to us and enriched our knowledge in developing log frames, work plans and indicators to measure outcomes; what we have learnt here will also be useful to our other projects.”

The annual monitoring and evaluation during the scale up year – baseline, midline and end of project – as well as the report produced on the assessment of Youth Friendly Health Centres and Services across the country, have all added to the body of evidence on SRH issues for young people in Nigeria.

As an immediate next step, funding is being sought to extensively analyse the questions received on the mobile platform, which provides a rich database, to examine the real needs of young Nigerians – across different ages, locations and gender – in their own voice.

In the future, EVA who will continue to implement the mobile platform is putting structures in place to ensure the information from the service will be disseminated to local stakeholders periodically.
With the structures in place to ensure the LaL project is sustained due to the Federal Ministry of Education/ARFH led implementation of the FLHE supported by the Global Fund, the NACA support and continuation of the Mobile platform by EVA with funding from Oxfam Novib, the LaL project is set to continue to empower young Nigerians with vital SRH information to make positive decisions about the health.

ENDNOTES
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7 Ibid.

8 Stanley K. Henshaw et. al. (2008) ‘Severity and cost of unsafe abortion complications treated in Nigerian Hospitals’, International Family Planning Perspectives, Volume 34, Number 1, March


10 Guttmacher 2008

11 EVA (2012) Girls’ Access: Mobile Phones and Reproductive Health Services: Opportunities and limitation for using mobile phones to expand access to sexual and reproductive health information and services for adolescent girls and young women in Nigeria, Abuja: EVA
Appendix 1: Typical Teacher Training Schedule during the scale up phase.

I. A 4 day eFLHE stand alone training for FLHE trained teachers:

- Day One: Computer appreciation for teachers, to familiarize teachers with the computer
- Day Two: Overview of the lessons and how to deliver a lesson using eFLHE; demonstration of a lesson and skill building on facilitation and experiential learning techniques.
- Day Three: Hands-on teachers’ micro-teaching and group work on challenges and ways to minimise them.
- Day Four: More micro teaching and group work on school plans and next steps

II. eFLHE integrated training in the Global Fund supported training for teachers coordinated by FME and ARFH

- Introduction to the electronic version of FLHE (eFLHE)
- Demonstration on how to deliver the electronic version of FLHE in the class.
- Feedback and comments from participants
- Participant(s)practicum using the CD
- Feedback and comments
- Demonstration on the electronic version of FLHE in the class
- Participant(s)practicum using the CD
- Feedback and comments
- Installation of the eFLHE program on a computer system
- Practical installation by Facilitator
Appendix 2: Profile of organizations involved during the scale up phase

OneWorld UK
OneWorld pioneers internet and mobile phone applications that the world’s poorest people can use to improve their life chances, and that help people everywhere understand global problems - and do something about them.

Butterfly Works
Because of the centrality of e-learning in this initiative, Butterfly Works, was invited to bring their expertise to the project. Butterfly Works a foundation based in the Netherlands and working globally, uses co-creation as method to improve the lives of young people, through interactive learning and talent building.

Action Health Incorporated
Action Health Incorporated (AHI) is a non-profit, non-governmental organization established in 1989. AHI’s mandate is to advance young people’s sexual and reproductive health and rights in Nigeria. AHI works with young people, local communities and opinion leaders including parents, policy makers, local, state and national government to catalyze change in the prevailing poor health status of young people in Nigeria.

Education as a Vaccine
Education as a Vaccine is a non-profit organization created in 2000 to improve the health and development of children and young people. EVA envisions a Nigeria where children and young people reach their full potential, and we work to build and implement innovative and sustainable mechanisms for improved quality of life for vulnerable children and young people.

Girls’ Power Initiative
Girls’ Power Initiative (GPI) Nigeria is an independent, not-for-profit, nonsectarian, nonpartisan, non-governmental organization. GPI was founded in 1993 and started executing comprehensive sexuality education programs and other related activities in 1994. Since then, GPI has reached over 300,000 girls aged 10-18 directly and indirectly with information about their rights, their bodies, their responsibilities and life management skills. GPI is currently located in Edo, Cross River, Delta and Akwa Ibom states, with it’s national headquarters in Calabar, Cross River.

AHEAD
AHEAD Centre is a non-governmental, non-political, non-religious and not-for-profit making organization that was established in January 2006 and registered with Corporate Affairs Commission Abuja Nigeria as Incorporated Trustees in January 2007 with registration number IT/22802. The organization was established to identify and address the problems and needs of young people and women, so that they can be empowered to realize their potentials and be able to contribute meaningfully to the improvement of the standard of living of their Communities and the socio-economic development of the Nation.

Rhema Care Integrated Development Centre
A registered faith-based, pro-poor, not-for-profit non-governmental development organisation established in 2005 as a direct social response to the colossal challenges, critical needs and gross inequalities created by poverty, illiteracy, injustice, diseases, discrimination, disasters, conflicts and lack of opportunities plaguing the developing world in general and the African continent in particular.

Adolecent Health and Information Project
AHIP, a youth focused Non-Governmental Organization was established in 1989 and commenced implementation of young people’s program in 1992. The Organisation Later expanded its focus to include women. The major focus areas are development, health, social and economic issues as it relates to young people and women in Northern Nigeria. AHIP has three state branches in Kano, Bauchi and Jigawa and implements projects in 12 Northern states. AHIP has Mentored over 100 NGOs and has Partnered with NGOs and Government in 12 Northern states to do youth based programs. Over the years, AHIP has been managing 4 multi-trade vocational centres in three states targeting the educationally deprived and economically disadvantage young people and women.

**ActionAid Nigeria**

ActionAid is an international anti-poverty agency whose aim is to fight poverty worldwide. Formed in 1972, for over 30 years we have been growing and expanding to where we are today - helping over 13 million of the world’s poorest and most disadvantaged people in 42 countries worldwide. The ActionAid Nigeria programme commenced operations in January 2000 with the establishment of its country office in Abuja.

**Fantsuam Foundation**

Fantsuam Foundation (www.fantsuam.org) was founded in 1996 by a group of Nigerian professionals in the UK diaspora who recognized the need to empower community members, particularly women, to find means of employment and income and meet their own development needs. Working in 50 communities across 7 Local Government areas in Kaduna State.

**The Association for Reproductive and Family Health (ARFH)**

ARFH is a non governmental organization established in 1989 and committed to enhancing the quality of life, reproductive health & rights of individuals and communities in Nigeria and elsewhere in Africa. The mission of the organization is to initiate, promote and implement in partnership with other organisations sustainable sexual & reproductive and family health and other contemporary public health information and service for adults and youths. ARFH is the principal recipient of The Global Fund in order to support nation wide training on FLHE.

**Nigerian Educational Research and Development Center (NERDC)**

NERDC was established by decree 53 of 1988 as a think-tank of Government on educational matters. Its vision is to build and sustain a culture of strategic educational research and development that will inform the formulation and effective implementation of policies in education as well as in other related sectors of the economy.

**The Federal Ministry of Education (FME)**

The Federal Ministry of Education has been vested with the overall responsibility for laying down national policies and guidelines for uniform standards for all levels of education in Nigeria as enshrined in various statutory instruments, notably the National Policy on Education, the Education Decree No. 16 of 1985 and the 1999 Constitution of the Federal Republic of Nigeria. The HIV/AIDS unit are leading on the national roll out of the implementation of the FLHE in Nigeria with the support of the Global Fund through with ARFH.

**The Federal Ministry of Health**

The Federal Ministry of Health is a Nigerian ministry whose mission is to develop and implement policies and programs and undertake other actions to deliver effective, efficient, quality and affordable health services.
Appendix 3: Contributors to the LAL Nigeria project during the scale up phase

1. EVA FCT -
Miss. Sylvia Ekponimo
Mr. David Sabo
Mrs. Fadekemi Agarau
Miss. Chinyere Akpa

2. EVA Benue -
Miss. Lucia Giember
Miss. Bambo Satimehin

3. EVA Nasarawa -
Polycarp Kyaave

4. AHI
Miss. Nelly Onwordi
Miss. Damilola Obinna
Mrs. Nike Esiet

5. AHEAD
Mr. Usman Abubakar
Mallam Sale Ibrahim Abdullahi

6. GPI Calabar
Mrs. Ndodeye Bassey
Miss. Emilia Eyo
Prof. Bene Madunagu

7. GPI Uyo
Mrs. Florence Obaika
Mrs. Grace Ubang Effiong

8. GPI Asaba
Mrs. Ehita Fatima Aikpitanly
Miss. Priscillia Iyeke

9. GPI Benin -
Mrs. Grace Osakue
Mr. Ese Amadasun

10. ARFH
Mr. Oladeji Adeyemi
Mr. Yemi Atibioke
Prof. O. A. Ladipo

11. AHIP Kano
Hajiyi Mairo Bello
Hajiyi Bahijatu Bello Garko
Mrs. Omotayo Adesina

12. AHIP Jigawa
Miss Aisha Ahmed

13. Fantsuma Foundation
Mr. Kelechi Micheal
Prof Dada

14. Rhema Care International Partners
Mrs. Kelechi Ejemson
Miss. Priscilla Benyi

15. NACA
Dr. Akudo Ikpeazu
Miss. Mercy Egemba
Prof. John Idoko

16. NERDC
Dr. Kate Nwuko
Mrs. Stella Nwankwo

17. FME
Dr. Ezinma E. Uzuegbunam
Mr. Julius Ameh
Mrs. Biddy Offiah
Mrs. Nnorom

18. NCCE
Dr. Alex Maiyanga
Mrs. M Olokun

19. Desk Officers
FCT – Mrs. Victoria Aleogena
Ogun State – Mrs. Oladeji
Bauchi – Hajiyat Fati Bappah

20. Others
Lagos – Lamidi Hakeem – Chief Education Officer Lagos State Ministry of Education
Calabar – Mrs. Ninka Takon – Director School Services
HIV & SUBEB desk officers in Lagos, Cross Rivers, Bauchi, Rivers, Sokoto and Benue States
M&E Consultant - Dr. Abdulkareem Lawal
Mobile Database - Dr. Tunde Segun
## Appendix 4: Implementing Schools and State during the scale up phase

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<th>Acronym</th>
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<th>Number of schools</th>
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