Dear Partners,

I am pleased to present to you the third edition of UNFPA in Nigeria.

In this era of change, UNFPA, the United Nations Population Fund, has made tremendous progress in gathering political support and commitment to improve access to quality health care services for pregnant women and the abandonment of female genital mutilation in Nigeria. These commitments were reflected in the series of events that occurred in this quarter. One of which is the pronouncement of a new maternal health ambassador – Dr. Linda Ayade, the wife of the Governor of Cross River State, and the domestication of the end FGM campaign in four of six high burden States.

The highlight of this edition however, is the graduation ceremony of school girls from the girl empowerment project, in Ilaje community, a slum in Lagos State. With 5 million out of school girls in Nigeria, the project was a platform to give girls access to education outside the classroom so no one is left behind. Details of this intervention and more can be read within the pages of this newsletter.

I trust you will find this edition insightful. For comments, questions or inquiries about our activities, do not hesitate to call 09053779641 or email nigeria.rep@unfpa.org

Cordially,

Ratidzai Ndhlovu
UNFPA Resident Representative
120 OUT OF SCHOOL GIRLS LIBERATED FROM THE SLUMS

“Eyin o lori re da (where are the fortunate people)? Awa re O (we are here)” was the greeting resonating throughout the graduation ceremony of 120 out of school girls from the girl empowerment project, in Ilaje community, Lagos State. The girls were beneficiaries of the AHI/UNFPA supported project “Expanding Access of Slum Dwelling Out-of-School Girls to Sexual and Reproductive Health (SRH) and Family Planning (FP) Services set out to educate out of school girls on their sexuality and reproductive health and to empower them with livelihood skills to take them out of the slums and fulfill their potential.

The graduation ceremony was euphoric and laced with an atmosphere of gratitude. Beneficiaries and their loved ones adorned smiles on their faces, laughed and danced at any moment they could. A beneficiary, Gloria, shared her story with us. “I dropped out of school at Grade 5 and was forced into trade by my grandmother” she said. At age 13, she learnt to prepare roasted fish and to bargain with interested buyers, many of whom may have been more interested in her than the fish being sold. By age 17, she had lived her whole life in the slum with little hope of liberation until now. Gloria was enrolled in the empowerment project and was one of the 120 girls, who received livelihood skills and business startup kits that should help take them out of the slums. These kits include fabricated ovens for those who learnt catering, cosmetic products for those who learnt cosmetics and beading materials for those who learnt hand crafts. The livelihood skills was an entry point for comprehensive sexuality education.

In his address, Mr. Koffi Kouame, the Deputy Representative of UNFPA said “with 5 million out of school girls in Nigeria and Lagos State with the highest burden of 2 million, the project is a platform to give girls access to education outside the classroom so they are not left behind. In essence, we believe that the ability of all girls to fulfill their potential will contribute significantly to the success of the 2030 sustainable development goals”.

The graduation ceremony was a call to action to all policy makers, development partners and interested stakeholders to work to ensure that all girls, regardless of their status, age or communities, are empowered to access education in and out of the classroom.
"Midwives are the first eyes to see and the first hands to hold our future" said Mr Stephen Sobhani, a key note speaker at the inaugural midwifery conference in Nigeria. The conference which was held in commemoration of the 2016 International day of the Midwife was hosted by UNFPA, the United Nations Population Fund and the Well being Foundation (WBF) together with the National Association of Nigerian Nurses and Midwives (NANNM).

The two-day conference with the theme, Maternity Matters: The First International Midwifery Conference, Abuja ‘Every Birth Counts’ was a platform to discuss health development in Nigeria, raise awareness on maternal, newborn and child health including the roles Midwives play and best practices to address the challenges they face. The conference echoed the responsibility that policy makers, health professionals and relevant stakeholders have in improving maternal and neo-natal health in the country through improving the status and profession of the midwives.

Speaking at the conference, Ms Frances Day-Stirk President of the International Confederation of Midwives (ICM) emphasized the importance of midwifery in Nigeria “The roles midwives play in saving lives are invaluable. They are assets especially in Nigeria, a country with a maternal death ratio of 57 per 100,000 live birth, one of the highest in the world”.

“We cannot be silent in addressing the present challenges faced in harnessing the full potential of Midwives in Nigeria” said Ratidzai Ndhlovu, the UNFPA Representative. She noted that challenges facing midwifery training and practice in Nigeria include , the critical shortage of midwife tutors, these challenges stem from weak institutions, maldistribution and limited number of midwives across the country. Ms. Ndhlovu called for effective strategies around the three cardinal principles of human resource for health - production, deployment and retention.

In response to some of these challenges and in celebrating Nigeria Midwives, UNFPA as part of the 2016 event, donated midwifery training equipment worth $200,000 USD to 11 additional midwifery schools across the states of Borno, Yobe, Imo, Ogun and Federal Capital Territory (F.C.T). This is in addition to other capacity building exercises and equipment donated yearly to all 98 midwifery schools in the country. In 2015, all 98 institutions offering midwifery training in Nigeria received family planning training kits and midwife tutors were trained on long acting reversible contraceptives with direct support from the Fund.

The event brought together policy makers, health care workers, NGOs, local and internationally speakers in the field of midwifery and maternal/neonatal health and other stakeholders.
At the flag-off ceremony of the 2016 Maternal New-born and Child Health (MNCH) Week, held on 18 April, in Ikom, Cross River State, the Wife of the President, Her Excellency (H.E) Mrs. Aisha Muhammadu Buhari launched two platforms for the acceleration of the reduction of maternal and child mortality and morbidity in the State. One was the launch of the Future Assured initiative and the second was the launch of the Mediatrix Development Foundation. The event also marked the Commissioning of the renovated comprehensive primary health centre, Ekayip Ikom, the distribution of UNFPA reproductive health kits to the primary health centre and safe delivery kits to visibly pregnant women.

In her opening address, H.E Mrs. Aisha Muhammadu Buhari said “The platforms launched today, are initiatives undertaken to support the efforts of the Cross River State Government to improve access to quality health care services, especially at the community and grassroot level”. She went on to commend Dr. Linda Ayade, the Wife of the Governor of Cross River State for initiating the Mediatrix Foundation and for choosing to be a Maternal and child health ambassador for the State. H.E Dr. Linda Ayade in her remarks called for more interventions in correcting the dismal trend of maternal and child deaths in the state, pointing out that women still patronize unskilled birth attendants, prayer houses, and churches despite the free health programmes made available to them.

The UNFPA Assistant Representative, Mr. Adonri reiterated UNFPA’s commitment to the Government in delivering a world where every childbirth is safe and in improving the health outcome of women and neonates in the State.

UNFPA NIGERIA INVESTS IN MIDWIFERY PRE-SERVICE TRAINING TO SCALE-UP FAMILY PLANNING SERVICE PROVISION

UNFPA conducted a needs assessment of midwifery schools with findings of shortage of anatomical models including implant, IUD training kits and self-reported gaps in the hands-on skills of midwife tutors on implant insertion. In response, a training was organized on Long Acting Reversible Contraceptives (LARC) for 98 tutors from all the midwifery schools in the country. Tutors also received IUD and implant insertion/removal kits as part of the intervention, many (upto 65%) of whom had only seen the Jadelle® implant for the first time. Through this intervention, the Fund has built the capacity of tutors who with monitoring, supportive supervision and follow-up have the potential to cascade the training to about 3,000 students annually for the next four years. Such investments in midwifery pre-service education will create the multiplier effect that is greatly needed to rapidly scale-up MNCH and Family planning services in many countries.
“In a community where I advocate for the abandonment of female genital mutilation (FGM), pregnant women are abandoned during childbirth. Hajiya (I never got to know her real name) was a victim. She was neglected and ridiculed as a warning to every uncut female. I can still hear the abuses thrown at her, the mockery, the warnings, the curses, and the scorn. I ran forward to help as she was in pain but I was too late. She had been in labor for two days.”

– Gift Abu, an activist in Nigeria.

Female genital mutilation (FGM) comprises all procedures that involve altering or injuring the female genitalia for non-medical reasons and is recognized internationally as a violation of the human rights of girls and women.

In Nigeria, female genital mutilation (FGM) is habitually carried out on babies within 8-40 days of birth, adolescents or youths as a passage to adulthood and pregnant women prior to childbirth. About 3 in 10 women between the ages of 15-49 have been subjected to a form of FGM in the country, putting the prevalence rate at 24.5% according to the 2013 Nigeria Demographic and Health Survey. This number is declining but is still unacceptably high. It varies across states, among ethnic groups and according to the level of poverty and education of girls and their mothers. In Nigeria, the practice of FGM is mainly prevalent in 5 high burden States - Ebonyi, Ekiti, Imo, Osun and Oyo.

The practice of FGM is a social norm that is perpetuated by deeply engrained cultural beliefs and myths that instill fear in the minds of the people. “Every woman will be afraid of barrenness, segregation or death if she was raised to believe that FGM means the fulfillment of womanhood” said Dr. Comfort Momoh, a UK-based activist. She explained that changing these perceptions require an intensive campaign that includes a strategy for community dialogue, mobilization and behavioral change. We need to amplify the truth about FGM, that it is an abuse against girls and women, scars them for life, violates their reproductive health and rights, and leads to many harmful health consequences including severe childbirth complications and.

Sustainable Development Goal 5 which focuses on achieving gender equality and the empowerment of all women and girls, contains a specific target calling for to the elimination of FGM and other harmful practices that violate girls’ rights and prevent them from fulfilling their full potential. The United Nations Population Fund (UNFPA) together with UNICEF, leads the largest global programme for the abandonment of FGM in 17 Countries in Africa, including Nigeria.

UNFPA is working with governments, partners and other UN agencies to directly tackle FGM and many other challenges that violate rights and hold back young people. Till date, significant progress has been made. Examples include, (i) UNFPA’s support of the Violence against Persons Prohibition Bill that was enacted into law in 2015, to prohibit the practice of FGM in the country; (ii) the recording of the existence of 250 babies who have remained unmutilated for 402 days, a feat unheard of, in Osun State, one of the high burden States (76.3% prevalence rate), where the practice is carried out on babies within 40 days of birth.

“We are all activists and female genital mutilation must end. We are committed to this cause and we need to make sure that women like Hajiya never have to suffer like this,” says Ratidzai Ndhlovu the UNFPA Representative.
At 76.3%, 71.2%, 69.7%, 55.6%, and 48.8%, Osun, Ekiti, Oyo, Ebonyi and Imo States respectively are the five highest prevalence of Female Genital Mutilation in the Country. As part of the UNFPA/UNICEF strategy to promote the abandonment of the practice, a national response towards the acceleration of the abandonment of FGM was launched by Her Excellency (H.E) Mrs. Aisha Muhammadu Buhari, the Wife of the President alongside wives of the State Governors. During the ceremony, a pledge was made to domesticate the national response to the States by institutionalizing State laws that prohibit violence against persons, actively implement these laws and initiate activities at the grass root and community levels to discourage the practice.

The wives of the Governors are making good on this promise. The State Campaigns started in November 2015 with Osun leading the way. In 2016, the campaigns were intensified as three other States declared the abandonment of FGM. Here is the recap.

On 17 May, 2016, Oyo State hosted a high level meeting on the abandonment of the practice. During the ceremony, His Excellency (H.E), the Governor, Senator Abiola Ajimobi enjoined the State law makers to ensure the passage of the Violence Against Persons Prohibition Bill into law. On 10 June, 2016, Ekiti State launched its campaign. A 2 year strategic action plan, the blueprint for FGM elimination programing in the State was developed. On 3-6 July, 2016, Ebonyi State rolled out a 2 day campaign to raise awareness on the elimination of FGM. Ebonyi is one of the few States that has an existing law on the abolition of harmful traditional practices such as FGM but it is not fully enforced. The Commissioner of Police, Chief Judge of the State and H.E the Governor, Engr. Dave Umahi pledged support to this cause and reiterated the commitment of State Authorities to ensure that perpetrators are caught and punished.

Imo and Osun State are warming up for their campaign and we are believe that with the increasing level of political support and commitment in the country, the practice of Female Genital Mutilation will soon be History!
Zainab Baubau, a 32-year-old fistula patient, recalls the pain and complications related to the death of her infant son 19 years ago during childbirth. At the age of 12, she developed obstetric fistula and has lived with the condition ever since. She is one of the 6412 women and girls who have benefited from the free fistula repair surgeries provided by UNFPA. Zainab shares her story through the tears of time lost and hope found.

After having endured 48 hours of labor, her suffering was compounded by the events that followed. “I had prolonged obstructed labor, struggled with eclampsia, was unconscious for two weeks at the hospital and only survived to hear the sad news of my still birth and this illness”. She was left feeling alone with an undignified life that was no longer hers.

Obstetric fistula is a condition that affects millions of women worldwide, but is most prevalent in developing countries. It is a childbirth complication caused by obstructed labor. It occurs when the tissues between the woman’s vagina and her pubic bone are damaged by continuous pressure from the infant’s neck trapped in the birth canal. The damaged tissue later falls off resulting in a hole through which the woman continuously leaks urine or faeces or both.

In Nigeria, it is estimated that up to 800,000 women are currently living with fistula and approximately 20,000 new cases occur each year. As part of the global Campaign to End Fistula, UNFPA in 2005 launched the “Fistula Fortnight” in Nigeria. It was a ground breaking initiative that was aimed at expanding treatment options for the women and girls suffering from the condition. It also supported the implementation of facility and community based interventions to enable prevention of obstetric fistula and mobilize indigent women and girls to access free treatment and rehabilitation services.

UNFPA has achieved remarkable success in the focus areas of its fistula programming in Nigeria. It has supported free surgical repairs for 6,412 women and girls living with fistula, with a current success rate of 97%. A total of 52 doctors and 94 nurses were trained to repair both simple and complex fistulae. In addition, comprehensive surgical equipment including fistula repair kits were procured and supplied to 9 General Hospitals and 3 National Obstetric Fistula Centers to support routine provision of fistula repair surgery. A total of 463 community educators/mobilizers (128 males and 335 females) were trained to provide counseling services to women (and their spouses) living with untreated fistula. In addition, 40 social workers were trained to support women by providing necessary pre-and post-operative psychosocial counseling services to clients in the treatment and rehabilitation centres.

Hauwal Mohammed, a 35-year-old fistula survivor, is also a beneficiary of the UNFPA vocational skills acquisition and empowerment programme. At age 16, she was forced to drop out of school due to an arranged early marriage. She has lived with the illness for 10 years after several failed attempts at surgical repair. She felt unworthy because everything she touched was considered dirt. “If I touch a plate they will discard it. I cried a lot” she said. Beyond the repair, Hauwal was empowered to become economically independent and is now a proud tailor running her business. Hauwal is one of many who have been helped to regain their dignity.

UNFPA has supported the economic rehabilitation of 357 patients whose fistulae were successfully repaired. In addition, 418 survivors with fistula deemed inoperable, were the beneficiaries of social reintegration through skills acquisition training sessions and provision of start-up kits.

Obstetric fistula is preventable, and can be avoided by delaying the age of first pregnancy; ensuring skilled birth attendance at all births and providing timely access to obstetric care for all women who develop complications during delivery. Just like in other parts of West and Central Africa, UNFPA will not stop until fistula is history in Nigeria and it ends within a generation.
Delivering a world where every pregnancy is wanted, every childbirth is safe and every young person’s potential is fulfilled.