









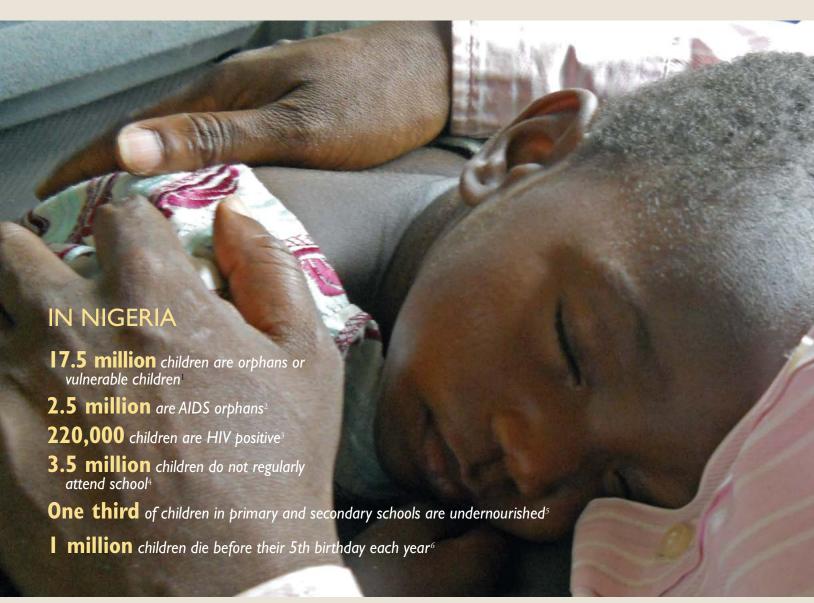
Community-Based Support for Orphans and Vulnerable Children in Nigeria (CUBS)

# COMMUNITY-BASED SUPPORT FOR ORPHANS AND VULNERABLE CHILDREN IN NIGERIA

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Orphan: A child under 18 years old who has lost one or both parents

Vulnerable child: A child who, because of birth or environmental circumstances, lacks access to the basic care and protection necessary for optimal growth and development



# Introduction

#### Millions in Need

igeria is home to 17.5 million children who are considered vulnerable due to unmet needs for food, shelter, education, protection, or care. With 3.4 million citizens living with HIV & AIDS, Nigeria has the second highest HIV burden in the world.<sup>7</sup> As a result, 2.5 million Nigerian children have lost one or both parents to AIDS.<sup>8</sup>

Photo by MUSA USMAN



Although it is customary in Nigeria for extended family and community members to care for orphans and vulnerable children (OVC), the capacity and resources of these individuals have been over extended by the growing number of vulnerable children and the complexity of their needs.

Nigeria is second only to Pakistan in the total number of people affected by conflict.

### Fragile Support Structures

In recent years, Nigeria's fragile social welfare systems have been further weakened by the nation's political instability and poverty. Families and communities have suffered from increased mortality due, not only to high HIV prevalence, but frequent tribal and religious violence and insurgency. The loss of adults, such as teachers and health workers, weakens community capacity to provide services and care for OVC. In homes where adults have died, vulnerable children often take on the role of breadwinners and caregivers. The burden of these responsibilities requires many children to forgo their education, thus leaving them unable to earn an income and vulnerable to poverty. Many children become homeless or are drawn into child labor, early marriage, or sex work. Although some government and community programs exist to support OVC, such services are sparse and often lack the financial resources and technical capacity needed for effective service delivery.<sup>9</sup>

### Strengthening Support by Layering and Integrating Care

In response to these challenges, USAID worked with the Nigerian Government to implement a five-year project that would provide realistic, long-term solutions for the nation's vulnerable children. Funded by PEPFAR, the USAID Community-Based Support for OVC in Nigeria (CUBS) project was designed to strengthen the capacity of households, communities, and support systems to meet the needs of vulnerable children, despite fluctuating donor funding and unpredictable security and economic conditions. Furthermore, the project aimed to build resilience among OVC by improving their life skills and developing their abilities to recover from past trauma and protect themselves in the future.

This vision became a reality under the leadership of CUBS' implementer, Management Sciences for Health (MSH) and its sub-contractor, Africare. Between 2009 and 2014, CUBS partnered with the Federal Ministry of Women Affairs and Social Development (FMWA&SD), State Ministries of Women's Affairs and Social Development



Figure 1. CUBS-supported Nigerian States

From 2009 to 2014, CUBS surpassed its targets and reached more than 51,200 OVC with comprehensive services and trained 16,000 OVC caregivers in income generation and parenting skills training in 11 focal states.

In addition to providing direct support to children, CUBS trained the CSOs to build on existing structures within their communities and mobilize local resources for OVC's care. Inspired by this training, the 38 CSOs formed community-based child protection committees (CPCs) tasked with identifying OVC in their communities, advocating for their care and support, and linking them to services. Each CSO recruited 10 to 15 leaders whose connections and reputation equipped them to make changes in their communities and inspire greater support for OVC. As more community members became aware of the CPCs, their membership expanded and identification of OVC in the communities improved. Over time, the CPCs' efforts contributed to improved OVC protection and care, reduced stigma and discrimination, and increased donor funding from community members, philanthropists, private sector organizations, and SMWA&SDs.

CUBS also established 46 state and local government area (LGA) OVC technical working groups (TWGs) that connect state leaders and the CSOs and CPCs. These TWGs plan quarterly meetings that members voluntarily attend to review the needs of vulnerable children in their states and develop practical solutions to address these needs.

The project's key strategies were designed to create resilient OVC and strong caregivers, communities, and support systems whose capacity and drive to help OVC would be

sustained beyond the project. To achieve this ambitious goal, CUBS worked at various levels to care for vulnerable children and create an integrated system of OVC support. Key project strategies for each level are outlined in Table 1.

Level	Strategies	Outcome		
Child	<ul> <li>Help CSOs identify and enroll OVC in their support programs</li> <li>Help CPCs identify and provide support to OVC in the form of tuition and health care waivers, safe housing, and service referrals, among others</li> <li>Work with CSOs and CPCs to reduce OVC stigma, discrimination, and isolation</li> </ul>	More than 51,200 children received care and support in six areas: food and nutrition, health, shelter and care, psychosocial support, legal protection, and education.		
Household	<ul> <li>Train CSO grantees to build OVC caregivers' capacity in household economic strengthening and parenting skills</li> <li>Help CSOs and CPCs secure in-kind donations to help OVC caregivers start or strengthen small businesses</li> </ul>	More than 1,300 caregivers received income-generating skills training and 500 started or strengthened a small business to better provide for the OVC in their care.		
Community	<ul> <li>Provide CSOs with small grants to improve OVC service delivery</li> <li>Support implementation of the Child Status Index (CSI) tool to quantify and track OVC progress</li> <li>Help the CSOs establish CPCs to inspire and guide community involvement in OVC care and support</li> <li>Build CSO and CPC operational, financial, technical, fund leveraging, and M&amp;E capacity</li> </ul>	38 CSOs and 116 CPCs gained OVC support and advocacy skills to better provide for vulnerable children and caregivers in their communities.		
System	<ul> <li>Establish links between CSOs, CPCs, LGAs, and SMWA&amp;SDs by forming OVC technical working groups that meet regularly to discuss and plan interventions to support OVC in their state</li> <li>Develop national OVC priority agendas, standard operating procedures, and M&amp;E frameworks</li> <li>Support state-level data collection and reporting on OVC</li> </ul>	46 state and LGA OVC TWGs developed the capacity to better coordinate stakeholders and provide for OVC and caregivers in their states.		

Table I. Layered Support: CUBS' System-Strengthening Approaches



hildren who grow up in Nigeria's impoverished communities often experience loss, illness, abuse, hunger, and neglect. Because every child's challenges are unique, OVC need tailored care to recover from past trauma and gain the life skills necessary to protect themselves and become resilient to future challenges.

Over the course of the five-year project, CUBS helped the 38 CSOs provide care for more than 51,200 OVC in their communities. To ensure the CSOs were correctly identifying and addressing each child's needs with customized care, CUBS trained the organizations' staff to use the Child Status Index (CSI) tool, developed by the USAID-funded Measure Evaluation project. The CSI quantifies child health and well-being in six holistic areas: *food and nutrition; health; shelter and care; psychosocial care; protection;* and *education and skills*. The CSOs measured each OVC's CSI scores every six months over the life of the project and aggregated the data to show trends in their progress. Every child received a score of 1–4 in each of the six areas, based on the following matrix:

4	Good	The child's status or situation is good; there are no concerns and no apparent risk for the child.
are some cond		The child's status or situation is generally acceptable, but there are some concerns on the part of the caregiver or care worker. Additional resources might be helpful, if available.
2	Bad	There is concern that the child's status or situation is observably not good. Additional resources or services are needed.
I	Very Bad	The child is at serious risk. Urgent attention to the child or the situation may be needed.

#### Food and Nutrition

Malnutrition is a contributing factor in over 50 percent of deaths among Nigerian children under the age of five.<sup>10</sup> The problem does not improve much with age: almost one-third of children in primary and secondary schools are undernourished.<sup>11</sup>

CUBS provided more than 10,000 children with food donations and other nutritional services, such as education on nutritional health. More than 16,000 caregivers learned homestead gardening and income-generating skills so they could afford and maintain an ample supply of nutrient-rich food to feed themselves and those in their care.



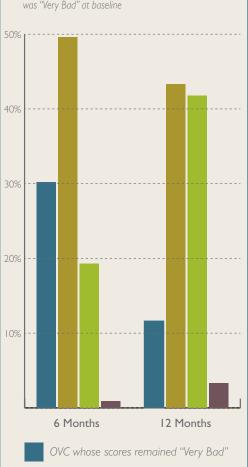
"Previously, we often didn't have anything to eat and sometimes we were sent home from school for not paying the fees. It was tough. But now, after FOSHPAD [a local CSO] has helped... going to school is not challenging. I have books, school uniforms, and sandals. And to eat is not challenging. We have relief."

— Oni Odunola, CUBS OVC beneficiary from Ekiti State

As shown in Figure 2, 70 percent of OVC of OVC whose baseline food security CSI score was "very bad" showed improved nutritional status after six months of CUBS' support, rising to 88 percent after 12 months of CUBS' support.



among those whose food security CSI score was "Very Bad" at baseline



OVC whose scores improved to "Bad"

OVC whose scores improved to "Fair"

OVC whose scores improved to "Good"

#### Health

Each day, Nigeria loses more than 2,300 children under the age of five; 70 percent of these children die from preventable diseases such as malaria, diarrhea, and HIV. Among adolescents, 73 percent report that they have difficulty accessing health care when they are sick.<sup>12</sup>

CUBS trained CSOs and CPCs to advocate for health facilities to provide free care for OVC. In 116 communities, CUBS also worked with health facility staff to designate an OVC focal person and train them in growth monitoring, health education, HIV testing and counseling, prevention of mother-to-child transmission of HIV, and basic child care skills. These efforts helped more than 28,000 vulnerable children access health care.

#### Shelter and Care

Sixty-eight percent of Nigerians live on less than \$1.25 per day and 50 percent of children reside in homes with five or more people per room and no floor material.<sup>13,14</sup>

CUBS and the CSOs worked to ensure OVC were living in dry, safe homes with at least one adult providing them consistent care and support. If a child needed shelter, the CSOs sought donations of materials and labor from community members to build a suitable home or secured discounted housing from landlords. By 2014, CUBS had provided more than 100 OVC with housing support. The project also provided more than 46,000 children who were being neglected at home with access to support groups that provided education on life skills and psychosocial counseling. More than 16,000 of their caregivers received parenting training from CUBS.

#### **Psychosocial**

With more than 217,000 annual AIDS deaths in Nigeria, many OVC suffer the loss of family members and subsequent sadness and depression.<sup>15</sup> Poverty and neglect cause many children to become insecure and impair their ability to function and thrive.

To help OVC develop emotional stability and resilience, CUBS trained CSO staff and caregivers to provide pediatric psychosocial support. The 38 CSOs created Kids' Clubs and Girl Groups that meet regularly to provide children with emotional support and training on life skills such as HIV prevention, hygeine, assertiveness, and sexual and reproductive health. Kids' Clubs and Girl Groups also host social activities such as sporting events and dance performances to give members a sense of companionship

and belonging. These groups currently have more than 40,000 members and, each year, their membership expands. As shown in Figure 3, 86 percent of OVC whose social behavior CSI score was "very bad" at baseline showed improved social behavior after six months of CUBS' support; this rose to 96 percent after 12 months of CUBS' support.

#### **Protection**

Corporal punishment and violence against children are considered normal in many Nigerian schools and homes. As a result, physical abuse is rarely reported and domestic violence is often overlooked, even by law enforcement personnel. Only 30 percent of Nigerian children under five report having their births registered and, of those, just 38 percent have a birth certificate. Without a birth certificate, citizens have no legal record of their identity or nationality, which limits their ability to access basic services, such as education and health care. 18

CUBS helped 46 OVC technical working groups (TWGs) in 11 states successfully advocate for implementation of the Child Rights Act. This federal act calls on leaders and stakeholders to prioritize the prevention and elimination of sexual abuse, exploitation, and violence toward children. Although the Child Rights Act was passed in 2003, until CUBS and the TWGs' advocacy efforts, the provisions set forth in the act were not enforced, nor were states aware of or discussing the rights of children. CUBS' success in implementing the Child Rights Act is breaking the silence around injustices toward children and giving Nigerians the confidence and legal capacity to advocate for the rights of young citizens.

CUBS-supported CSOs also taught community members to report physical and sexual child abuse. Through CPCs, the project trained more than 200 police and legal authorities to prosecute perpetrators and offer protective housing and care to children in unsafe environments. CSOs helped their beneficiaries acquire birth certificates and access legal support to obtain family inheritance. Together, CUBS, CSOs, and CPCs provided legal and social protection to more than 16,000 OVC and their caregivers.

#### Education and Skills

Over the last decade, Nigeria's rapid population growth has strained the nation's public services. With children under 18 years of age accounting for over 50 percent of the country's population, the education system is overwhelmed.<sup>19</sup> Many OVC cannot afford tuition fees or final school exams, which can cost as much as US\$100. As a result, just 61 percent of Nigerian children aged 6 to 11 attend primary school and only 44 percent of children aged 12 to 17 attend secondary school.<sup>20</sup>

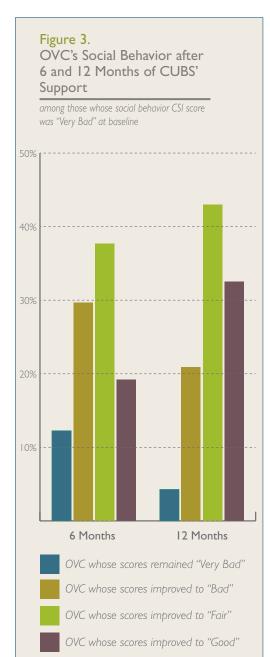




Photo by ANDREW ESIEBO

CSOs and CPCs provided educational support for more than 10,000 vulnerable children by convincing schools to waive tution fees for severely impoverished children and raising funds from local businesses, philanthropists, and community groups to help others. Advocay efforts inspired community members to donate or pay for books, uniforms, and school supplies for vulnerable children.

# Key Lesson

Although the CSI effectively measures OVC health and wellbeing, corresponding OVC support requires guidance beyond the CSI indicators. OVC program implementers should tailor care for OVC based on the child's age and location, in addition to the CSI scores.

#### **Impact**

The CSI allowed CUBS to track and assess the impact of its interventions through two indicators in each of the six areas: food and nutrition, health, shelter and care, psychosocial care, protection, and education and skills. CSI data on a cohort of 12,419 OVC showed that, after being enrolled in a CUBS-supported CSO for six months, 30 percent of the children had improved status across all 12 CSI indicators. After being enrolled for 12 months, 40 percent of the children showed improved status across the 12 CSI indicators. Although another 40 percent of children had showed "no change" after 12 months, many of the children may have regressed without CUBS' support to improve their care. These trends were consistent for all OVC cohorts and across the life of the project.



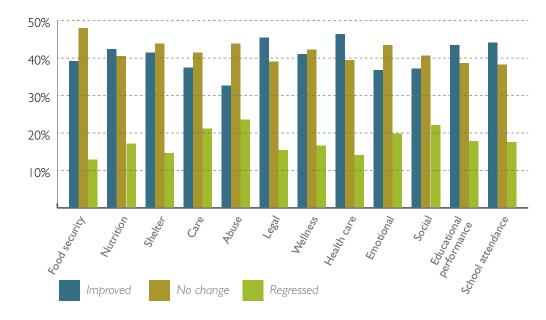


Figure 4.
CSI Outcomes among a
Cohort of OVC after 12
Months of CUBS' Support

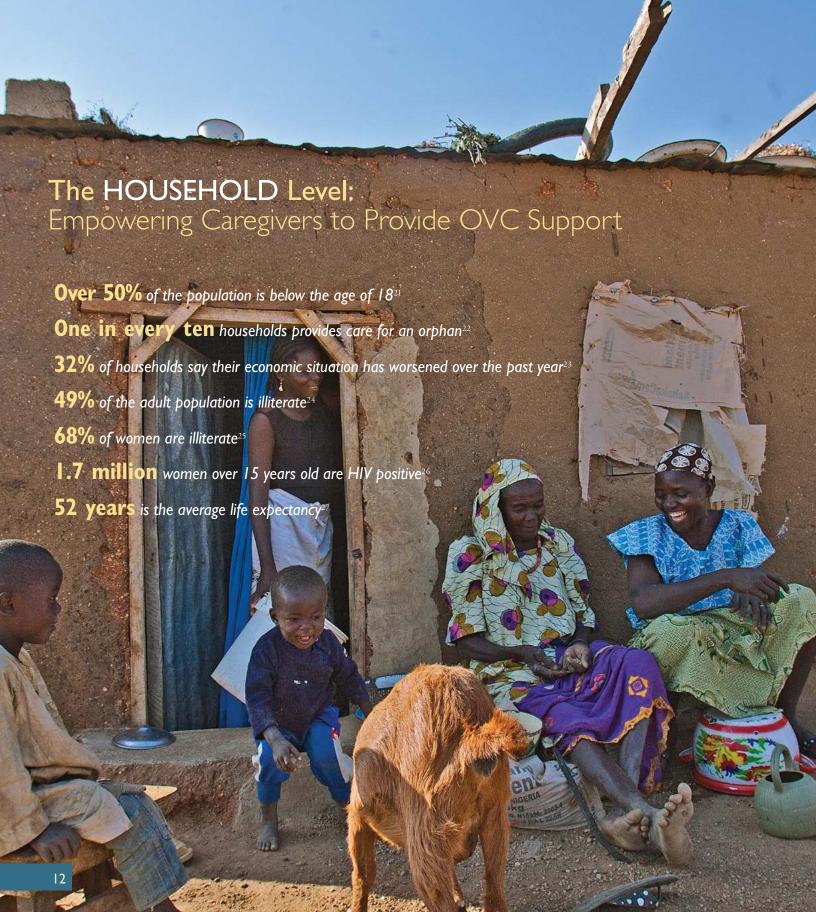
#### A Future for Femi

Femi was orphaned at the age of eight and is now living with his elderly grandmother who is too weak to earn an income. After school, Femi works at a shop, but the wages he earns are not enough to pay his for his tuition or school supplies. Until recently, Femi was malnourished and attended school in an old, ragged uniform, feeling embarrassed. He had difficulty making friends and struggled to concentrate on his school work.

Fortunately, in 2012, CUBS began working with FOSHPAD, a CSO in Ekiti State. The CSO enrolled Femi into their child support program and provided him with a new school uniform, a bag, and textbooks. He also joined the organization's Kids' Club where he built his self-esteem and learned life skills, such as personal hygiene and HIV prevention. Femi's participation in the club's football games and drama performances has improved his social skills and confidence. CUBS also taught Femi's grandmother how to provide him more nutritious meals and emotional support.

"All my life, I never carried a bag to school, and my uniform looked tattered. Today I am happy because I have a brand new school uniform and sandals, and my own bag and writing materials," said Femi.





n Nigeria, over 62 percent of people live below the poverty line and 54 percent suffer multiple deprivations including acute food shortage, low educational attainment, and poor self-esteem.<sup>28,29</sup> Female-headed households are often the most affected by poverty, as most Nigerian women have limited decision-making power and access to resources.

#### Household Economic Strengthening

In 2009, an analysis of the 38 CSOs' registers revealed that 78 percent of OVC were living in female-headed households. CUBS concluded that efforts to improve the lives of these children could not neglect the needs of their female caregivers. If CUBS could help these women increase their income and use the new earnings to improve care for OVC, the long-term benefits would be significant and sustainable.

By 2010, CUBS had initiated the household economic strengthening (HES) program to help female OVC caregivers increase their earning capacity and improve their parenting skills. CUBS trained 1,300 caregivers, who were responsible for 5,200 OVC, in small business start-up skills including business plan development, loan acquisition, competitive pricing, effective marketing, and financial management. To ensure that OVC benefitted from their caregivers' economic growth, CUBS trained caregivers on child health, hygiene, nutrition, and emotional support. In addition, CUBS provided more than 500 of the HES beneficiaries with small business start-up grants and in-kind donations (e.g., bulk supplies and equipment) that enabled them to establish or expand small businesses in industries such as farming, sewing, and hair dressing.

CUBS created sustainability of the HES activities by linking CSOs to other agencies for funding and to state ministries for training. CUBS also trained HES beneficiaries to initiate cooperatives or voluntary savings and loans associations (VSLAs). VSLAs are groups of people who pool their savings so they have a source for lending funds. Members make savings contributions to the pool, borrow from it, and repay their loans with minimal interest. Since 2009, the CSOs have formed 92 VSLAs that have enabled over 2,000 caregivers to start or expand small businesses.

### ➤ Key Lesson

Building self-reliance among OVC caregivers through parenting education and economic skills strengthening supports long-term resilience and improved health, self-esteem, and community integration among both the caregivers and OVC.



Table 2. CUBS-supported Village Saving and Loan Association (VSLA) Achievements

State	No. of VSLA	Selected VLSA Achievements			
Akwa Ibom	17				
Bayelsa	14	Provided loans to help caregivers start or strengthen small businesses			
Delta	7	■ Established the necessary registrations to legally operate			
Ekiti	10	Obtained certification through the Agricultural			
Enugu	7	Development Bank			
Gombo	5	<ul> <li>Provided financial support to help members rebuild business after they were destroyed in a fire</li> </ul>			
Imo	14	■ Successfully advocated for support from local authorities			
Kebbi	2	Collaborated with state microfinance agencies to provide financial support for OVC and business grants for OVC			
Rivers	3	caregivers			
Sokoto	0	Members' economic stability contributed to reduced			
Taraba	13	fighting over resources in OVC's homes			
TOTAL	92				



#### **Impact**

CUBS collected CSI data on 555 OVC being cared for by HES beneficiaries to determine if the HES program was having a positive impact. After six months, the CSOs' data showed that a higher percentage of OVC whose caregivers were involved in the HES program had improved scores in the CSI education and health indices than those whose caregivers were not involved in the HES program. Furthermore, the caregivers' household income had increased, on average, by 70 percent. CUBS also monitored the membership and achievements of the VSLAs to ensure they were helping caregivers meet their households' economic needs. The achievements of these groups are summarized in Table 2.

#### Gender

In many parts of Nigeria, patriarchal customs and religious norms discourage women from attending areas frequented by men. Such areas may include health facilities and public meeting places, thereby limiting women's access to medical care, education, and professional opportunities. When communities do arrange female-centered services, women are rarely consulted in the planning and design of these interventions. As a result, such activities are often offered at a time when females cannot attend or include content that does not speak to their real needs.

CUBS taught leaders to work with women when implementing community-based programs and activities, especially those designed to support OVC. As a result, community leaders developed more public education activities on topics relevant to women, such as HIV, hygiene, reproductive health, family planning, and parenting. Local women also convinced their leaders to hold these activities at times and in locations where they could more easily attend. These minor adjustments have increased female participation in community-based activities. Furthermore, more than 100 women have become members of their communities' CPCs and 50 women now hold positions in state OVCTWGs.

CUBS supported stakeholders in advocating for women and girls' rights during public rallies and international health days. During these events, campaign participants raise banners and slates reading: Stop violence against women, Stop female genital mutilation, Promote girl child education, Say no to wife battering, Stop girl child early marriage, and Educate the girl child.

For the first time in many communities, Nigerian women are empowered to speak out constructively, publically, and collectively about their right to health, education, and equality.

#### The Story of Bridget

Bridget Egesi has been the sole caretaker of her five children since her husband's death. Until recently, Bridget pieced together an income by washing laundry and cleaning cars. Unfortunately, these menial jobs did not always provide sufficient income to meet her children's basic needs.

In 2009, CUBS taught Bridget and 1,049 other caregivers in her community about children's health and emotional needs. The project team also taught the women how to start a business, track their incomes and expenses, and regularly save money.

Motivated by the training, Bridget decided to open a pharmacy. CUBS helped her write a business plan and obtain a start-up loan of 40,000 naira (US \$250), with which she rented a building and obtained a pharmacy license. Within 12 months, she had opened her pharmacy.

Bridget's business now generates enough income for her to purchase adequate food and clothing for her children. As of September 2013, Bridget was earning a daily profit of 3,000 naira (US \$19) and had been able to repay 80 percent of her loan.

"CUBS has made me realize that I can make it! The training I received helped me save and plan properly for myself, my family, and business... [I also learned to] build relationships with people who [can support] my vision and dreams," said Bridget.



Photo by ANDREW ESIEBO







igerians have traditionally come together to help vulnerable individuals and groups and many grassroots CSOs have been built as a result. Unfortunately, these organizations are not always able to meet the growing needs of their communities. In some cases, poverty impedes action, while in others, a lack of knowledge and capacity limits the organizations' impact. The result is that hundreds of children are reached, but thousands are missed.

### Organizational Development

When CUBS began in 2009, the project agreed that they would not be able to make a lasting impact on children's lives without significant community engagement to inspire local ownership, culturally-sensitive programing, and sustainable change. To achieve these goals and improve community resilience, the project team partnered with 38 CSOs in 11 states. An initial needs assessment revealed that the CSOs were suffering from high staff attrition, poor financial management, inadequate

documentation, weak technical capacity, deficient referral systems, insufficient M&E, and inadequate accountability. These operational challenges had limited the extent and impact of the CSOs' efforts.

To improve their capacity, CUBS issued OVC service delivery grants to each CSO and then trained the organizations' staff on operations management and program planning, as well as OVC care, fundraising, and M&E systems. CUBS visited each organization weekly to monitor their progress and provide further mentoring and

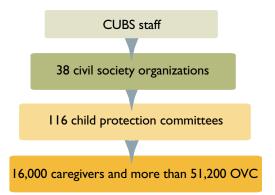
"[When] CUBS came, we were virtually on the ground and our organization was at the crawling stage. People saw OVC as outcast, people that should not be assisted. But CUBS activities and interaction with community leaders and caregivers helped people to see that OVC are part and parcel of everybody. Now everyone within the community donates to support vulnerable children."

— Olu Ogunrotimi, Executive Director of EDFHO, a CUBS-supported CSO

training. After five years, the CSOs had made significant improvements, which will help them continue to function long after the project has closed (see Figure 5 on page 21).

### Community Engagement

To support the CSOs' growth, CUBS trained the organizations' staff to build on existing structures within their communities and mobilize local resources for sustainability. Inspired by this training, the CSOs recruited over 1,200 local leaders and stakeholders to form 116 CPCs. As previously described, these committees worked alongside the CSOs to identify OVC in their communities, link them to services, and advocate for continued support.



To formalize their operations, CUBS helped the CPCs develop terms of reference and secure meeting places and financed their meetings until they were able to raise their own operational funds. They also trained the leaders in community mobilization,

"The communities have the answers within them, they just need the third eye to help them...the child protection committees are now empowered to identify problems, trouble shoot, and find the resources needed to support children."

— Grace Garnywa, CUBS' Community Care Advisor

OVC service delivery, and fundraising. As more community members became aware of the CPCs, their membership expanded and OVC identification and care improved. After four years, the CPCs reported stronger OVC service linkages, increased funding support, and greater community involvement in OVC care.

To help sustain this progress, CUBS worked with each CPC to develop a directory of organizations where they could refer OVC for care and a map of potential funders at the community, corporate, state, and international levels. The committees posted this information in their offices and regularly update the directories and maps as they discover new service sites and funding opportunities.

### ➤ Key Lesson

CPC formation generates demand for quality OVC service delivery, mobilizes resources for OVC care, reduces OVC stigma and discrimination against OVC, and inspires community ownership and involvement.



#### Improved OVC data

In 2009, CUBS' data quality assessment revealed that the 38 project-supported CSOs were not documenting information about their beneficiaries or were recording inaccurate data. The assessment also showed that many organizations were reporting data that did not match their registers or activity sign-in sheets. In response, CUBS trained the CSO staff to accurately and consistently report all OVC data using the CSI and national OVC data collection tools. By 2014, the CSOs' data availability had improved from 67 percent to 83 percent and their data validity had improved from 49 percent to 74 percent.

#### ➤ Key Lesson

Regular quality assurance exercises and strong M&E systems promote CSOs' viability by supporting accurate data collection and reporting, ensuring effective service delivery, and strengthening the availability of information that can be used for OVC advocacy and fund leveraging.

hoto by MUSA USMAN

Figure 5.
Improved CSO Capacity

CUBS trained over 30 CSO directors on operational and strategic planning and 200 staff in program management, service delivery, OVC advocacy, and M&E.

All 38 CSOs now have a Board of Directors to oversee operations and strategic planning, provide accountability, and ensure the organization's financial viability.

Formal registration has enhanced the CSOs' credibility, allowed them to open corporate bank accounts, and improved their ability to leverage funding.

CUBS trained the CSOs to advocate for financial support from community members, private organizations, and donors. CSOs all learned to develop strong proposals with realistic budgets, which enabled them to earn over 100 grants to support their programs.

With CUBS support, the 38 CSOs began meeting monthly with the other project-supported CSOs in their state to share experiences, discuss challenges, and offer mutual support through cross-training and problem-solving.

CUBS helped CSOs formalize staff job descriptions and salary structures and introduce cross training and performance management systems to enhance employee commitment and motivation. CSOs report that these efforts have improved staff performance.

	C	Capacity Area		009 eline		cus in 014	Percent Change
			No.	%	No.	%	2009–2014
	١.	CSOs registered with the Corporate Affairs Commission	8	21%	33	90%	+69%
/	2.	CSOs with governing boards	8	21%	38	100%	+79%
	3.	CSOs with operational plans	3	5%	31	80%	+75%
	4.	CSOs with organizational strategic plans	3	5%	31	80%	+75%
/	5.	CSOs with technical capacity	8	21%	36	95%	+74%
1	6.	CSOs able to self-sustain through resource-mobilization and networking	3	7%	38	100%	+93%
/	7.	CSOs involved in CSO support groups	8	21%	38	100%	+79%
/	8.	CSOs with salary structures	3	5%	33	90%	+85%
	9.	CSOs with finance policies	3	5%	38	100%	+95%
	10	. CSOs with procurement policies	3	8%	32	84%	+76%
	П	. CSOs with sustainability plans	3	8%	38	100%	+92%
	12	. CSOs with capacity improvement plans	0	0	38	100%	+100%

CUBS trained the CSOs to apply USAID's Generally Acceptable Accounting Principles to guide their use of the project-issued grants and improve their financial management systems, policies, records, and internal controls.

CUBS' trainings on needs analysis and strategic planning helped CSOs develop detailed sustainability plans that include fund leveraging, staff retention, capacity building, and community engagement strategies.



Photo by MUSA USMAN

### Community Education

CUBS trained more than 500 CSO staff, traditional rulers, religious leaders, law enforcement personnel, and CPC members to identify and address cases of physical and sexual abuse against women and children. Trainees learned how to provide timely support, make service referrals, and deal with cases without further victimizing the survivors. Many CSOs and CPCs now have partnerships with community-based law enforcement agencies and are actively engaged in the early detection and mitigation of abuse and disinheritance cases. All 11 project-supported states have seen an increase in the number of resolved disinheritance cases, reported abuse cases, and prosecuted perpetrators.

### **Impact**

CUBS tracked its CPC membership and achievements to ensure these groups were growing and actively contributing to improved OVC identification and care. Over the project lifetime, CUBS and the CSOs established 116 CPCs with over 1,200 members. A sampling of the groups' achievements is summarized in Table 3.

### Child Protection Committee Supports OVC in Dumbi\*

Dumbi community is home to thousands of OVC who struggle to access food, clothing, shelter, and health care. In recent years, a growing number of these children have started begging for money along the roadside, desperate to earn a small income to meet their needs.

In 2012, CUBS educated Dumbi community members about OVC's needs and ways to support them. These efforts inspired the community to form a CPC to help identify OVC and address their needs. The CPC also established a community food bank for OVC and solicited donations from wealthy community members to purchase school materials and medicine for 150 vulnerable children. At the CPC's request, the zonal education office and the State Ministry of Education waived school fees for several of the children and the village chief began donating a portion of the community's produce to OVC.

"Before CUBS, we found it difficult to feed [the children and], at times, [they] went to bed without eating. Now the CPC gives us food and distributes clothes to the children during celebrations. They even bought medicine for my child when he was sick and check up on us all the time," said a caregiver in Dumbi.

<sup>\*</sup>Community name has been changed.

State	No. of CPCs	No. of CUBS- supported OVC in each State	Selected CPC Achievements
Akwa Ibom	10	6,383	Helped more than 4,000 OVC obtain school
Bayelsa	27	6,690	tuition waivers
Delta	13	5,633	Helped OVC receive free clinic services Prosecuted six people for sexual abuse of OVC
Ekiti	9	3,818	Paid school examination fees
Enugu	9	4,874	Provided legal protection to OVC suffering
Gombo	6	4,462	from sexual or physical abuse
Imo	П	3,917	Funded social gatherings for OVC
Kebbi	8	3,803	Raised in-kind donations, such as clothes and educational materials
Rivers	П	4,854	Intervened in cases of child abuse and child labor
Sokoto	I	1,351	■ Monitored OVC well-being by conducting
Taraba	П	5,417	school and home visits
TOTAL	116	116 51,202	Provided nutritional support to OVC
101712		0.,_0_	<ul> <li>Successfully advocated for prevention of female genital mutilation</li> </ul>
			<ul> <li>Helped teachers form an OVC support committee, whose members make contributions to fund school materials for OVC</li> </ul>

Table 3. CUBS-supported Child Protection Committee (CPC) Achievements



"People live communal lives in Nigeria but a child that everyone takes care of will suffer because everyone thinks it's someone else's responsibility. There is a need for a formal structure so children who don't have parents are protected. We must demand that children are provided with all the rights a human being should have."

— Ijeoma Obo-Effanga, CUBS' Organizational Development Technical Advisor

SOs and CPCs are essential OVC support structures, but they cannot work alone. These groups need state and national leaders to enact effective policies, train and place professionals, and create strong governance structures to support OVC programming and enable local programs to function effectively. When CUBS began, most of Nigeria's state and national child support efforts focused on health and education and gave little attention to children's need for emotional care, shelter, proper nutrition, and economically stable caregivers. To bridge this gap, CUBS looked to social workers and OVC desk officers at the SMWA&SDs and LGAs. Although many of these professionals were eager to help children in need, most did not have the skills or resources to identify these children and effectively meet their needs. Over the years, this capacity gap had caused many OVC desk officers and social workers to resign, further weakening the OVC support system.



### The Technical Working Group Bridge

In 2009, CUBS knew that to strengthen the OVC support system, they would first need to identify influential leaders and citizens to participate in the OVC discussion. In addition to social workers and OVC desk officers, CUBS recruited representatives from CPCs, CSOs, health facilities, donor agencies, implementing partners, child protection networks, religious bodies, law enforcement agencies, and various line ministries to form 46 OVC technical working groups (TWGs) in the 11 project-supported states. CUBS trained the TWG members on OVC care and advocacy, fundraising, referrals, and M&E.

The TWGs were fully formed by 2012 and now form a bridge between communities and leaders. Quarterly state-level meetings allow CPC and CSO members to communicate their needs to the TWGs who, in turn, provide information, resources, and funds and support policy initiatives to address the communities' needs. TWGs advocate for support from the ministries, organizations, and agencies from which they

Technical Working Group Bridge

Communities
(CPCs and CSOs)

State Leaders
(LGAs,
SMWA&SDs,
FMWA&SD)

State leaders
(LGAs,
SMWA&SD)

Figure 6.
Technical Working Group
Bridge

were recruited. The TWG "bridge" keeps state leaders abreast of the OVC landscape and related community needs, while giving community leaders a voice and formal platform to advocate on behalf of their young citizens.

# ➤ Key Lesson

Well-monitored, operational OVC TWGs can support cross-sector collaboration and improve government involvement in OVC protection and service delivery.

### Policy Support for OVC Programming

To ensure OVC's needs stay in the states' spotlights, CUBS worked with the TWGs to strengthen the legal framework around OVC support. In less than five years, these efforts inspired the following OVC policy and protocol improvements:

- CUBS worked with the Federal Ministry of Women Affairs and Social Development (FMWA&SD) to update the National Priority Agenda on OVC. The revised five-year agenda draws on the most current data, research, and best practices to guide OVC advocacy and service delivery efforts. Representatives from federal ministries, USAID, donor agencies, and implementing partners worked together to ensure the National Priority Agenda was relevant and realistic. Once finalized, CUBS helped the IO SMWA&SDs adapt the agenda for their unique state contexts. State and national ministries now use the agenda to guide, coordinate, and monitor their OVC activities.
- CUBS used its OVC programming experience to help the FMWA&SD develop and pilot test national standard operating procedures for OVC programming. The project team disseminated 1,000 copies of these documents and trained staff at

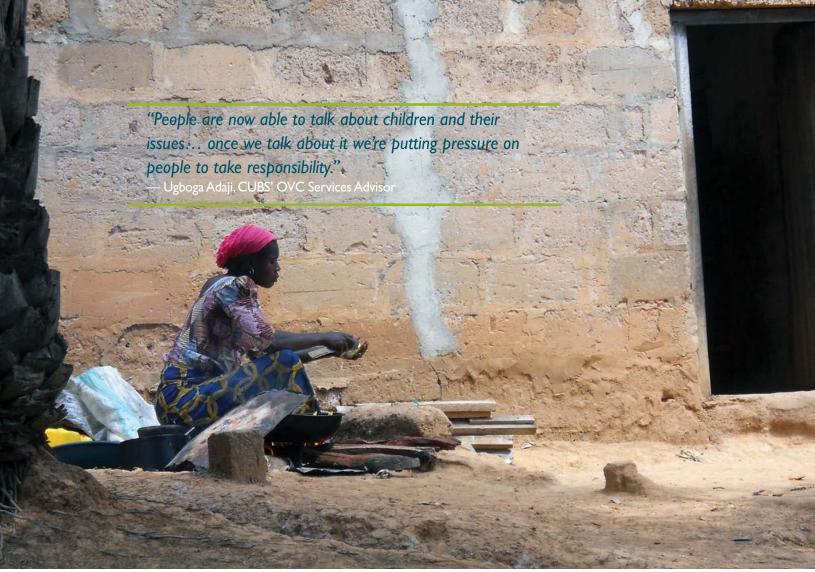


Photo by JESSICA CHARLES/MSH

### Situation Analysis Informs State-level OVC Programming

Although Nigeria has prepared a national OVC assessment report, state-level data are needed to describe OVC's unique social and geographic conditions and develop an effective response. In 2012, CUBS collaborated with the Ekiti's SMWA&SD to conduct a situation analysis on the causes of vulnerability and characteristics of OVC in Ekiti State. The 70-page report includes estimates of the number of OVC in each LGA and a description of their needs, the available services, service delivery gaps, and recommendations for OVC program and service improvements. State leaders used this report to guide the allocation and distribution of resources for OVC programming and CUBS distributed the survey to state ministries throughout Nigeria. Impressed by the utility of this resource, many SMWA&SDs have initiated similar situation analysis projects.

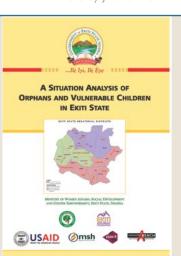


Table 4. CUBS-supported OVC Technical Working Group Achievements

State	No. of TWG	Selected TWG Achievements				
Akwa Ibom	I	Advocated for SMWA&SDs to increase budget allocation				
Bayelsa	2	for OVC service delivery				
Delta	5	Established and enforced laws to prevent street roaming and hawking during school hours				
Ekiti	5	■ Supported the rescue and rehabilitation of abused and				
Enugu	4	abandoned children				
Gombo	1	Advocated for implementation of the Child Rights Act				
Imo	16	Worked with government leaders to waive tuition fees for OVC				
Kebbi/ Sokoto	4	Provided laptops to support OVC program data collection and coordination				
Rivers	6	Worked with the International Federation of Women Lawyers to support OVC in inheritance cases				
Taraba	2	Raised funding for OVC service delivery, tuition, and				
TOTAL	46	school materials				



state, LGA, and community levels to use them to guide their OVC support activities. CUBS also established quality improvement teams to ensure accurate and consistent implementation of the standard operating procedures.

- As discussed in the section on OVC protection, the **Child Rights Act** was designed to protect Nigeria's vulnerable youth from violence, abuse, exploitation, neglect, and other ills, but had not been fully implemented. In response, CUBS helped seven SMWA&SDs establish culturally-appropriate laws and structures to operationalize the act within their states. The team also trained more than 300 police and security officers to understand the Child Rights Act and enforce its statues. These efforts are bringing child abuse, rape, domestic violence, and other sensitive issues to the forefront of national and state-level OVC discussions and inspiring advocacy and policy improvements to enhance child protection throughout the nation.
- Throughout the project, CUBS worked closely with the FMWA&SD, state ministries, LGAs, CSOs, and other stakeholders to develop and implement the National M&E Plan for OVC. The 38 CSOs and the 11 OVC desk officers in the CUBS-supported states now use this nationally-approved data collection tool to record and report all OVC service delivery data. This change has allowed for more regular and consistent data collection to inform OVC programming. To expand this progress, the FMWA&SD invited CUBS staff to train M&E officers at numerous agencies and partner organizations beyond the project-supported states.

The use of a standardized data collection and reporting systems helps leaders and programmers better understand the status of OVC and the effect of OVC services and interventions.

### **Impact**

CUBS state-level interventions contributed to the formation or strengthening of 46 OVCTWGs with more than 100 members. A sample of these groups' achievements is provided in Table 4.





# Conclusion

UBS' success was rooted in its strategy and committed stakeholders. The project was effective because its implementers understood that helping children is not an isolated activity, but one that requires broad participation, sufficient resources, and empowering systems. Today, five years after CUBS began, thousands of Nigerians are equipped to help

"I know there must be an end but we are very grateful that [CUBS] has shown us the light. They have brought people out of darkness... many are now smiling when they make sales, many children are now educated, and those who are out of school have acquired skills. We intend to assist them further by empowering them."

 Oladiran Owosho, Executive Director of FOSHPAD, a CUBS-supported CSO

vulnerable children in their communities. These caregivers, philanthropists, police, social workers, traditional leaders, OVC desk officers, and state ministers now have the capacity to work together to support and advocate for OVC.

In addition to greater stakeholder capacity and collaboration, CUBS created and strengthened social welfare structures to ensure OVC support systems are sustained and their impact continues to grow. An M&E framework and national standard operating procedures have given leaders tools to guide their efforts. CSOs and CPCs have enhanced the structures and support necessary to optimally care for OVC in their communities. OVCTWGs have provided a platform for community and state leaders to discuss, plan, and implement the most effective OVC support activities.

CUBS created resilient social welfare systems and left a solid foundation for expanding support to Nigeria's OVC and their caregivers. Although the project could not change the pain or illness that OVC have experienced, it provided tools and opportunities to help these children recover from their past, adapt to their present, and thrive in the future.

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# Index of Acronyms

CPC child protection committee

CSI Child Status Index

CSO civil society organization

CUBS Community-Based Support for Orphans and Vulnerable Children in Nigeria

FMWA&SD Federal Ministry of Women Affairs and Social Development

HES household economic strengthening

LGA local government area

M&E monitoring and evaluation

MSH Management Sciences for Health
OVC orphans and vulnerable children

PEPFAR President's Emergency Plan for AIDS Relief

SMWA&SD State Ministry of Women Affairs and Social Development

TWG technical working group

VSLA village savings and loan associations

USAID United States Agency for International Development

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