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ANNUAL REPORT
Nigeria Country Programme





Our 2018 in summary

Our interventions have led to more informed and confident populations with increased capacity to engage with relevant stakeholders and influence decision-making for better development outcomes.



612,373

Individuals directly benefited from Christian Aid Nigeria's interventions in 2018.



23

Partner and State agencies supported



15

Projects implemented



£11.9m

2018/19 budget

Our programmes strategically targeted women and other socially excluded groups located in hard-to-reach-communities.



55%



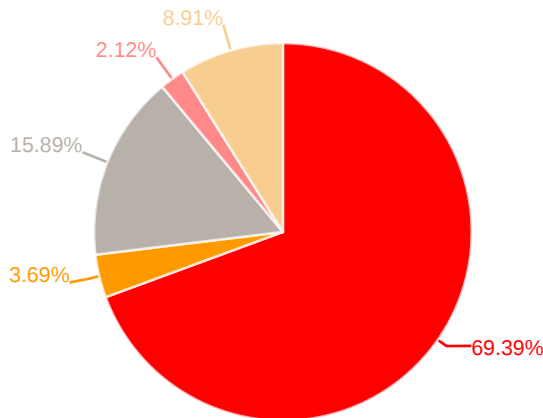
45%



14,742

Areas of Intervention

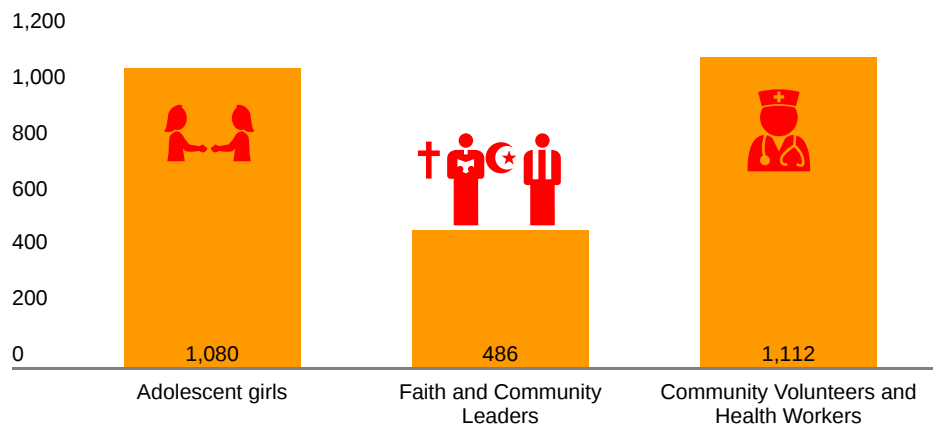
- Food
- WASH
- Capacity building and support
- Livelihood support
- Nutritional supplements



We addressed both immediate and long-term needs of the populations we serve, with the greatest need being food, for the displaced in the Northeast region of Nigeria. Other interventions in the area were livelihood support and Water, Sanitation and Hygiene services.

In other target locations, we provided capacity building and other support to communities and individuals to take ownership of their development.

Our capacity building activities targeted communities in hard-to-reach locations, while also strategically working with specific groups that are key for sustainable development.



Above: We conducted capacity building activities to meet the specific needs of key groups, in addition to those conducted for all community members in target locations.

Our Vision

A just, equitable and peaceful Nigerian society, in which poverty has been eradicated and every person is empowered to live life in all its fullness.

Our Mission

To work with local partners to empower and mobilise poor and marginalised people to meaningfully engage in their own development. We will build a 'movement for change' in Nigeria; a diverse body of like-minded people who will come together to challenge and change the systems and structures that perpetuate poverty, inequality and injustice.

Christian Aid is an international development agency working in 47 countries around the world. Since we commenced operations in Nigeria in 2003, we have worked with local communities, individuals and groups as facilitators of social development in the areas of Community Health, Accountable Governance, Gender and Inclusion and Humanitarian Response. With marginalized and vulnerable groups at the centre of our interventions, we have designed, funded, implemented and co-implemented programmes using a rights-based approach, and taking power dynamics into account, to empower communities to drive their own sustainable development and effectively engage with all stakeholders' accountability and increase in decision-making processes for development.

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Message from Country Director

For nearly two decades, Christian Aid Nigeria has partnered with national and local authorities, communities and civil society to tackle obstacles that stand in the way of providing quality health services, responsive and accountable governance and access to emergency needs and sustainable livelihood for people in conflict affected areas. The year under review has been no different in Christian Aid Nigeria's strive for remarkable impact on the poor and marginalized. Across our three programme areas, we have given hope to those in despair, made deep, inclusive and long-lasting change, and built the resilience of people affected by conflicts and disasters.

In 2018, the organization operated with a budget of over 11 million GBP, with a total of 612,373 individuals benefitting directly from our interventions in the health, governance and humanitarian sectors spread across 11 states in Nigeria. We strategically targeted women and other socially excluded groups located in very hard-to-reach-communities. Through the hybrid partnership model of working through direct implementation and local partners, we brought projects closer to communities, encouraged local ownership and participation, and built the capacity of local organisations and communities to become more resilient in tackling their own social development problems. This has proven to be a cost-effective model of delivering projects impact to the most vulnerable populations where we work.

Giving Hope in Despair: In the last year, we worked to provide life-saving interventions to under-five children in remote, hard-to-reach communities, thereby contributing to reducing under-five mortality in Nigeria. We have proven that for caregivers with under-five children in remote communities of Konshisha, Kwande, Obi and Opokwu Local Government areas of Benue State, distance should not be a death sentence. We are championing a national advocacy movement for the adoption of Community Based Health Insurance with the potential to open-up access to health services for over



Christian Aid Country Director, Charles Usie

120 million Nigerians who currently live below poverty lines and have no health insurance. Our faith actor engagement strategy is addressing harmful socio-cultural practices and underline social norms that place women and girls at disadvantage and deprive them of power to make choices and contribute to decisions that affects their lives.

Deep and Inclusive: At Christian Aid Nigeria, our intervention is mainstreamed with Gender and Inclusive programming, which means pregnant women, girls, children under 5, people living with disability, young boys are prioritized as key targets for all our interventions. We are safeguarding the rights and dignity of the people we serve and ensure that their vulnerability does not expose them to exploitation by others including us.

Long lasting change: We target long lasting change in institutions, policies, practices and beliefs. Our accountable governance approach has strengthened local communities and institutions to change the balance of power between citizen and state by influencing government plans and budgets and holding government to account to provide basic services and run inclusive governance. This is not dependent on Christian Aid or any donors, but has become a community practice to put citizens in

Christian Aid Nigeria mobilised, trained and equipped Faith Leaders with knowledge and evidence to champion the issues of adolescent girls in Nigeria. The Faith platform is a powerful institution which has one of the most influential voices in Nigeria with regards to belief and practices. Faith leaders are taking leadership on key issues facing adolescent girls as part of their regular messages to their congregation and as a key agenda item in engaging with Government at national and state levels.

Building Resilience for People in Conflict: Our humanitarian response aims to improve the conditions of persons affected by conflict and disaster by providing timely evidenced based life-saving interventions that ensures quality of life in the long term, while building livelihoods and peaceful communities in Nigeria.

We focused on two elements; emergency lifesaving assistance to communities affected by conflict and promoting recovery and community strengthening. Our interventions cut across 14 Local Government Areas in North East Nigeria. We have provided life-saving assistance, in-kind food, nutrition to children under 2 years, pregnant and lactating mothers. Christian Aid's response approach is done through partnership with local NGOs, direct Implementation and Hybrid Model (A Mix of Direct and Partnership) and through Consortia

We are holding governments accountable and supporting communities to meet the social and economic needs of the most vulnerable and marginalised populations; we are responding to the emergency needs of people and communities displaced by conflict and disasters; we are building change movement at all levels and standing in solidarity with the most vulnerable to alleviate human suffering, and restoring dignity and justice for all in Nigeria. This is who we are, this is our commitment, this is what it meant to be Christian Aid.

We would not have been able to achieve any of these without you, our donor, partner government official, my colleagues, and most importantly, our beneficiaries who opened their arms to own the process.

I want to say a big thank you to everyone who made 2018 a remarkable year for Christian Aid Nigeria.



Charles Usie,
**Country Director,
Christian Aid, Nigeria**

We are Christian Aid

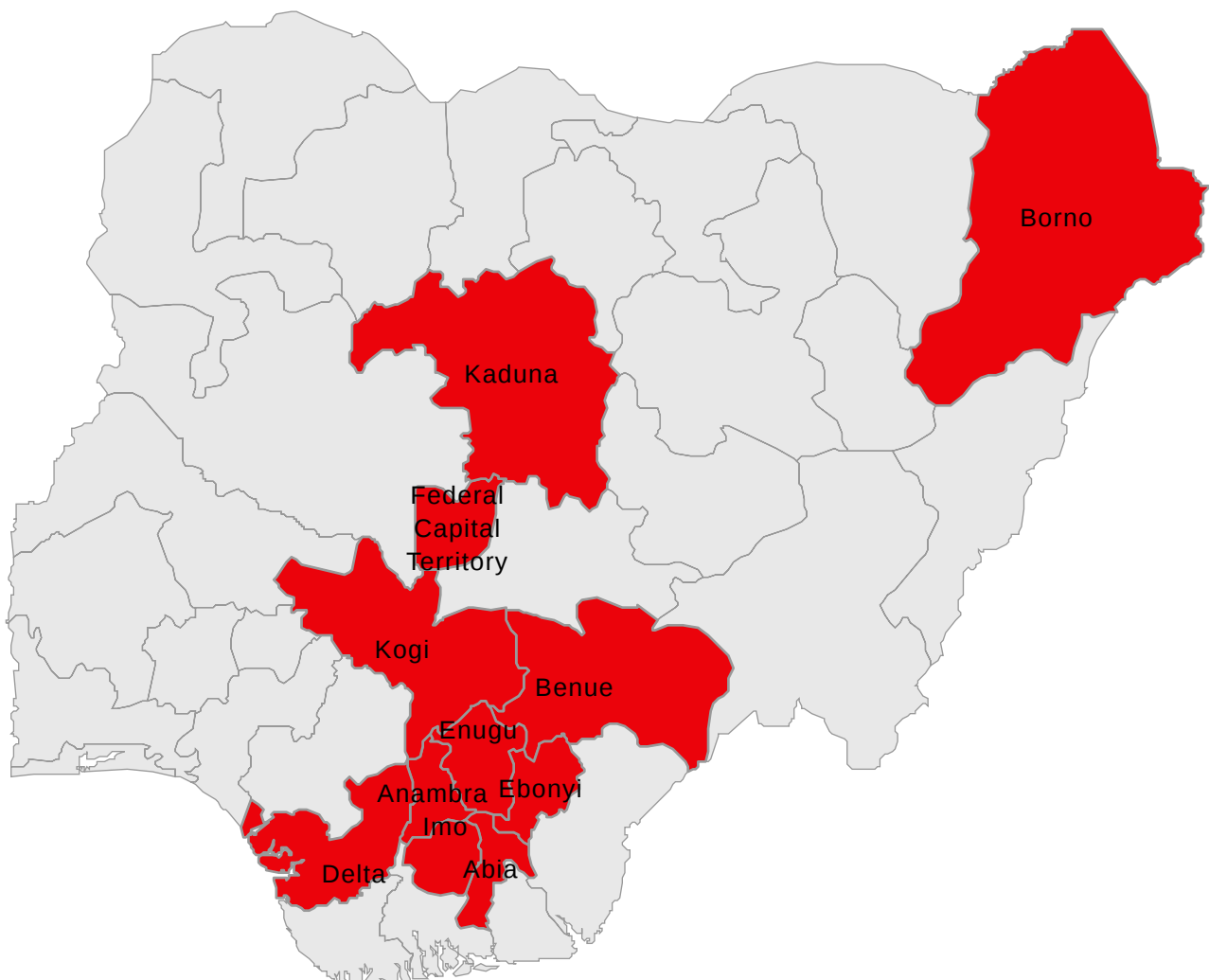
At Christian Aid, vulnerable and marginalized populations are the drivers of all that we do. We challenge systems and structures that keep people poor and seek to tip the balance of inequality in the distribution of wealth and power in favour of the poor and marginalised.

We design and implement holistic interventions through an integration of all our programme areas and expertise. Working in hard-to-reach areas, our programmes ensure that marginalised populations are empowered to take action and engage for the improvement of their own development indices, while we act as facilitators, building capacity,

changing behaviour and strengthening platforms for effective engagement with policy makers.

We deliver services in emergency situations, delivering both food and non-food items to those desperately in need. We also go beyond this to support communities to rebuild and become self-reliant.

The principles of gender and inclusion underpin all of our work, and one of the key principles in which Christian Aid operates on is the principle of “do no harm”.



States where we worked in 2018

Spotlight: Community Charter of Demand

Citizens' engagement and participation in governance processes are critical for sustaining the development of any society. These actions ensure the voices of the people are heard, and that they are able to take part in decisions about the issues that affect them. With issues of good governance being the bane of the Nigerian system for years, citizen participation is also critical in ensuring transparency and accountability in governance; key attributes of good governance, which remain critical to Nigeria's development. Christian Aid Nigeria's interventions in accountability programming have shown that these can be addressed through effective social mobilisation of citizens to participate and ask questions of their leaders.

To encourage citizen participation is to recognise citizens as active participants in driving development rather than as passive beneficiaries, and therefore places the focus on bottom-up and people centred approaches to development.

The Missing Piece

The need for citizens to effectively engage with duty-bearers in either created or open spaces of power and enhance their voices within these spaces has led to the adoption of various initiatives by civil society to institutionalize participation and citizen-state engagements. Working at the community level, these initiatives include the use of tools and platforms such as community score cards, budget forums, town hall meetings for interactive sessions between citizens and the state. However, despite being useful tools in the delivery of our governance interventions, they lacked the element of inclusion that would reflect the development needs of all members of the community, especially the marginalised.

It was therefore through lessons from the implementation of our DFID-funded Governance and Transparency Fund project that we adopted an alternative approach to working with communities to drive accountability – the Community Charter of Demand. The Community Charters of Demand approach was tested in our Voice to the People (V2P) project in Anambra State, and is currently being used as a tool for citizen-state engagements across Christian Aid Nigeria's programmes.

This approach to community participation in development serves as a mode of organising communities for collective action. It has generated interest in decision-making and governance processes, opening up to communities a possibility for driving their own development – a concept that many had never imagined was possible.

Community members have been empowered through the process of developing their charters, as it is a strategic process that involves lengthy dialogues and a recognition of the needs of the different groups within the society. Vulnerable groups are not excluded from this process, therefore giving them a sense of empowerment that their voices can be heard within the community. This sense of empowerment also occurs among the more powerful groups within the community as they find that through the process of engaging with the government, their voices are heard, and they are able to take part in governance.

In Anambra state where they were first used as tools for citizen engagement, Charters of Demand proved to be effective in ensuring inclusive development, particularly recording huge successes in participatory budgeting. The consistent use of the tool by communities led to its adoption as a State recognized participatory budgeting tool.

Promoting Best Practice and Adapting based on Learning

With the extension of the V2P project into Kaduna, it was essential to use the learning from Anambra to promote participatory and inclusive budgeting and governance. Consequently, it has also been adopted as part of the budget process in Kaduna state, and has been effective in ensuring that the LG budgets reflects the true needs of citizens at the grassroots.

As a result, 263 capital projects from Charter of Demands were incorporated in 18 LG 2018 budgets, constituting 36% of the total capital projects in the LGAs. They also constitute 71.6% of the capital projects in the Local Government Development Plans of 19 LGAs. Citizens' groups from 255 Wards have also mobilized and are tracking and monitoring the implementation of projects in their communities and are reviewing and preparing their charters for the 2019 budget.

Despite being a highly transferable approach, it was adapted in consultation with the State government and other stakeholders to suit the Kaduna context, given the markedly different socio-political contexts between Anambra and Kaduna. It is as a result of this that it is referred to as Community Development Charters in Kaduna State.

The Charter of Demand approach is self-sustaining and the role of civil society is to facilitate the process of communities coming together to identify their own needs, and more importantly prioritise these needs in a practical way for engagement with the government. It is also the role of civil society to build the capacity of community members to effectively engage with the right people concerning the right issues and at the right time if their needs are to be planned for and included in the government budget.

Our Expertise



Governance

Our governance and gender programme area seeks to improve government accountability and responsiveness to the needs of poor and marginalised people. We provide support and capacity for individuals, community and civil society groups to achieve demand-driven governance that is participatory and inclusive of all groups especially the most vulnerable and marginalised.



Health

Our health work uses a holistic, adaptable and inclusive programming approach to increase access of poor and marginalised communities to quality essential health and nutrition services. Our integrated community health approach empowers communities to improve their resilience, livelihoods and quality of life.



Humanitarian Response

Beginning as a response to the changing context of the country and rising number of poor and vulnerable people in areas affected by crisis and disaster, our humanitarian response provides on a continuous basis, immediate relief, while leveraging on opportunities to rebuild communities and establish sustainable livelihoods and improved practices.

Our Context

Our work in 2018 was impacted by high levels of corruption, government bureaucracy and inefficiencies, ethnic and religious crises and increasing emergency situations, however, through effective adaptive programming, these conditions provided opportunities for more complex interventions during the year.

Security concerns for the team and communities due to violent conflicts in some of the areas where we worked (Kaduna, Benue and Plateau States) led to delayed implementation, and in some cases a complete halt of project activities. Our team was unable to begin planned interventions in some communities in Plateau State, while in Benue State, the outright displacement of people in communities where we work, negatively impacted on the sustainability of our health work in the area.

The flooding disaster that occurred between July and October 2018 brought about emergency situations in the South-East, which also affected our work in Anambra, but provided the opportunity for our team to respond; scaling up our humanitarian response into new territory.

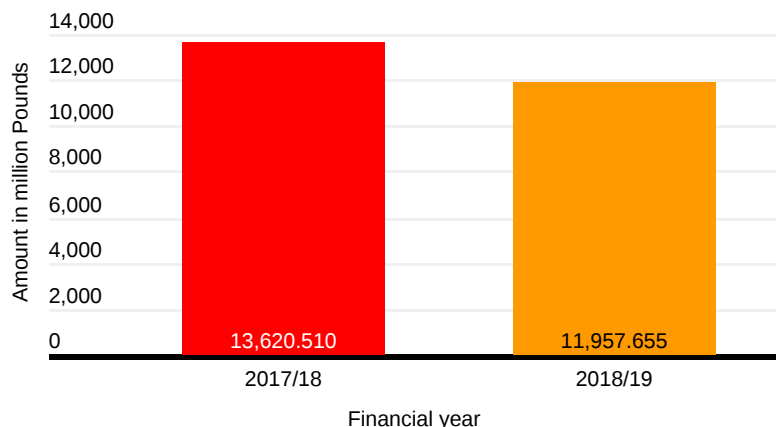
The continued insecurity in the North-East posed major challenges to our humanitarian response, as increasing migration meant that places where resources were already overstretched had to cope with higher numbers of displaced people.

Poor governance, massive levels of corruption, theft of public funds and low political will in the country continued to affect access to basic amenities, such as quality healthcare, security, education and power. Human resources for health also remained a challenge within the year and had implications on our work with the health system.

The activities that built up to the 2019 General Elections had varying degrees of impact on our plans, however, we adapted our programming to implement activities focused on emerging issues that helped marginalised groups to effectively engage for good governance.

The change we seek in Nigeria must be driven by poor and marginalised communities working with a transparent, inclusive and accountable government. This theory continues to reflect in our programme design and implementation, project locations and advocacy efforts at State and National levels.

Our Finances



2018/19 annual budget

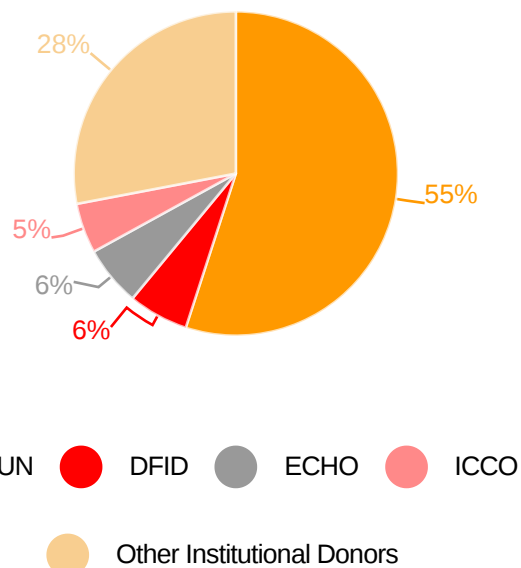
The total economy of the Nigeria remained relatively stable through the financial year although there was a slight decline in the 2018/19 as compared to 2017/18.

As the new financial year begins, new opportunities and partnerships are on the horizon and Christian Aid Nigeria remains strategically positioned to achieve its vision – an end to Poverty.

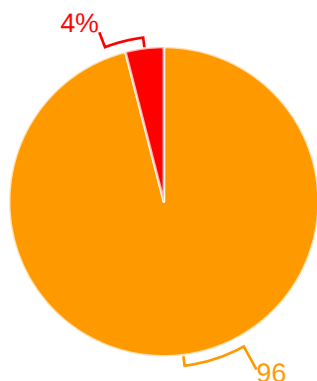
2018/19 funding

Christian Aid has maintained a mutually beneficial relationship with our key donors over the last financial year which has led to sustained funding for the organisation. Although the financial year saw the end of some of our flagship projects such as the DFID funded Voice to the People project as well as the ECHO funded project in the Humanitarian Response, it also gave rise to new opportunities particularly in our Governance and Humanitarian work.

The funding environment has remained stringent and Christian Aid Nigeria has continued to review its internal systems, processes and policies to ensure they remain robust, relevant and in line with International and Best Practices.



Above: Summary of the major funders of our work in the year under review



2018/19 budget split

Over the last 3 years, Christian Aid funding portfolio has been driven mainly by institutional (restricted) funding and this financial year was not different as institutional (Restricted) funding accounted for 96% of the overall income in the year under review.

Spotlight: Distance Not A Death Sentence

It was a cold night in Mbamende village, a remote community in Ikyurav District, Konshisha Local Government of Benue State in North-Central Nigeria. Kumasuun, Erdoo Tyokuku only daughter had developed a mild cough a day before, and it was getting worse by the hour. Tyokuku, and her husband Erdoo are poor farmers who could hardly afford decent meals for their family. As usual, Tyokuku resorted to using herbs to treat her daughter, rather than getting better Kumasuun was getting worse.

“When I woke up, I cried so much. I nearly cried my eyes out. I wanted to die. My husband tried to console me, our daughter died because of poverty. He didn’t have money to take her to the hospital”.

Before today

Concerned family members told Tyokuku the problem was malnutrition, “so we went to get the traditional medicine for malnutrition, it was applied, yet it didn’t work”. The couple was persuaded to consult another native doctor who administered a traditional medicine to Kumasuun, by the time they returned back home, Kumasuun had started vomiting and stooling blood. “We got another traditional medicine to cure the vomiting and stooling blood, but it didn’t work.

Frustrated, depressed and without money, Tyokuku decided to go to the hospital which is about 10 kilometres away with the hope that she will find someone to help pay the bills or the health workers will have compassion on her child. A good neighbour offered to convey Tyokuku and her daughter to the health facility on a motor bike, unfortunately the fuel finished in the bike conveying her to the hospital. The good neighbour had to get to the nearest village to get fuel for the motor bike, while waiting in the middle of the road, Kumassun started convulsing in her arms, she battled to keep

Kumasuun awake by shouting her name, but it was too late, Kumasuun had passed on. Tyokuku fainted, it took combined efforts of passers-by and the motor bike man to resuscitate her.

“When I woke up, I cried so much. I nearly cried my eyes out. I wanted to die. My husband tried to console me that I should stop crying that we should leave everything to God, that our daughter died because of poverty. He didn’t have money to take her to the hospital”.

Facts and figures

Tyokuku is just one out of thousands of mothers in poor remote communities in Benue State facing extreme barriers to accessing health services for their under-five children. Benue State has high child mortality above the national average, and under-five mortality is 128 per 1000 life birth in Nigeria. The above informed Christian Aid intervention to provide first-line, life-saving intervention to under-five children in remote communities, which are at least 5 kilometres away from health facilities.

The barriers faced by mothers are many: distance to health facilities, extreme poverty, harmful socio-cultural practices, infrastructural decay, inadequate skilled manpower at health facilities, flooding among others are contributing to under-five mortality in the State. Christian Aid is using Integrated

Between August 2017 and November 2018, over 200,000 children have accessed services from Christian Aid trained CoRPs.

The new reality

Community Case Management (iCCM) is an approach to bring life-saving treatment to the door-step of mothers using trained Community Resource Persons (CORPs). Christian Aid volunteers are trained and equipped with test kits, drugs for malaria, pneumonia and diarrhoea, and emergency cases are referred to cluster health facilities.

Between August 2017 and November 2018, over 200,000 children have accessed services from trained CORPs. Tyokuku now has other children, looking back, she said “now we have CORPs around us, Nduul Jacob and Asemakaha Orseer. Each time any of my child falls sick, I take them to the CORP. They test and give us drugs and when we administer the drugs, the sickness is gone. I want to thank Christian Aid because they are the ones helping us, the poor people who don’t have money to go to the hospital when our children fall sick”.

2018 Highlights



Girls in the areas we worked in Kaduna are now able to exercise their rights to choose education, rather than being forced into marriages at early ages.

Leaving behind a legacy

With the close-out of two of our high impact projects, we left behind a legacy of empowered and informed citizens with skills and confidence for effective engagement – at different levels – to attain improved individual and community wellbeing in Kaduna State and the 5 States of the South-East region (Abia, Anambra, Ebonyi, Enugu and Imo).

While the Collective Action for Adolescent Girls Initiative (CAAGI) focused on improving the choices and opportunities for adolescent girls in rural Kaduna to be able to live productive and meaningful lives, the Voice to the People (V2P) project focused on improving service delivery and government's responsiveness to the needs of the people through the rights-based approach.

Although they had different focuses, both projects ensured that communities were at the forefront of actions to change their development narratives, thereby improving awareness and building capacity to change behaviours and attitudes and take practical actions such as stopping early marriages and engaging with elected leaders to hold them accountable.

To find out more about CAAGI and V2P visit: www.christianaid.org.uk/nigeria

Movement Building

We facilitated actions that brought civil society together, building a critical mass of CBOs and FBO to take action on issues with regional and national traction. These have been key to driving multi-level (National, state and Community) and multi-sectoral changes across target locations. We also mobilized partners to pull resources together to achieve shared objectives, leading to enhanced collaboration and networking among CSOs in our target states and regions.

As part of our advocacy for improved healthcare, we brought stakeholders together to deliberate on Universal financing Health Coverage and health insurance and organized in partnership with Nigeria Health Watch, our national CSO partner, a policy dialogue with key stakeholders to critically discuss the provisions of the Basic Care Provision Fund (BHCPF) and its implications for the government and donors.

In addition, through our support to communities across different regions, the prioritized needs of communities are now being included in State and LGA budgets and development plans. Communities are engaging more consistently and effectively to ensure that their development needs are met and are building a culture of active citizenship through the participation in various governance processes as well as the monitoring of project implementation within their localities.



Working alongside other civil society organisations, Christian Aid in partnership with Nigeria Health Watch has been leading advocacy for Universal Health Coverage in Nigeria.

Inclusive budgeting for Anambra and Kaduna



The Community Development Charters were officially presented to Kaduna State's Commissioner for Budget and Planning

The Community Development Charters (CCD), an inclusive budgeting tool has been adopted in Anambra and Kaduna States as a planning tool for the annual budgeting process, as initiated by V2P.

In April 2018, we began an ECHO-funded Early Warning, Early Response project focused on flooding disaster in Kaduna, Benue and Plateau States.

Through the project, we are supporting national, sub-national and community level structures to strengthen their preparedness in managing flooding disasters and providing effective response plans that are well integrated across target states.

We have facilitated the establishment of disaster mitigation and management platforms – at State and community level – and strengthened the government structures for effective responses to flooding disasters. With the State contingency plans developed across Benue, Kaduna and Plateau, an approximate 21,210 community members are covered by early action and contingency plans in the eventuality of flooding across the three states.

and Kaduna

This tool ensures that State and Local Governments know the needs of their communities, and that these are captured as appropriate in the budget. Communities were trained to develop the charters in inclusive and highly participatory manners, and their skills and confidence built to use the charters to engage with their leaders. Our interventions across States led to increased capacity of community members and marginalised groups to effectively communicate their development needs to duty bearers and achieve the desired services.

Launch of Early Warning, Early Response Project



We have supported 27 at-risk communities in Benue, Plateau and Kaduna to become prepared for the possible occurrence of flooding through a series of behaviour change and skills-building activities, including simulation exercises.

We are also working with the National and State Emergency Management Agencies to implement improved coordination mechanisms among other relevant stakeholders to ensure effective information dissemination and behaviour change for flood prevention and response to early warning.

Investing in Local Capacities and Ownership for Disease Prevention

Christian Aid Nigeria has trained 902 Community Oriented Resource Persons (CoRPs) and equipped them with medicines and testing kits to provide lifesaving treatment in the community, rather than traveling all the way to a facility that can be hard to reach, and care givers may not have the necessary funds to afford treatment. Caregiver can now take their children to the CoPR for treatment.

The project aimed at reaching just under 200,000 children with lifesaving support from malaria, pneumonia and diarrhoea, however, over 250,000 U5 children

have accessed services from trained volunteers.

Christian Aid's unique approach is not only providing treatment services to under-five children but making a long-term investment in local capacity for diseases prevention through behaviour modification and shifting social norms that put women and children at disadvantage. Faith and community leaders were engaged, and their capacity built to address harmful socio-cultural practices that disempower women and increased disease burden for women and children.

Community Development Committee (CDCs) groups were established to initiate self-help projects for disease prevention, increase access and advocate for improved health outcomes for the community. Through a participatory approach, CDCs groups developed community action plan for engagement of community members and policy makers in addressing their peculiar challenges and their capacity to access services. CDCs group are taking responsibility for improved health outcomes for their communities, advocating to local government to provide affordable health care.



The CoRPs are helping their communities to reduce under-five deaths through community-based service provision and are accountable for health commodities under their care.



Our health programme has contributed to the reduction in morbidity and mortality of children under-5 in 4 LGAs in Benue State. The Benue State Health Insurance Bill will increase access to health services for all.

Bills Passed into Law

Our advocacy efforts along with other Civil Society Organisations led to the passing of the Benue State Health Insurance Bill on the 20th of September 2018. The Benue State House of Assembly passed the Benue Health Management Agency Bill into law.

The CAAGI project also supported advocacies that facilitated the passage of the Child Protection and Welfare Bill as a domestic version of the child Rights Act in Kaduna.

Venturing into New Territories

For the first time since we commenced operations in Nigeria in 2003, we worked in Delta and Kogi States in response to the flooding disaster that occurred between July and October 2018.

Working alongside our local partner, JDPC with extensive grassroot reach across different states, this opened up new territory to us, as we explore other opportunities to scale up our community health and accountable governance work.



Our partner staff crossing through a river to reach those in need during the flooding disaster in Delta State.





We provide urgent and immediate relief where the need is greatest

2018 Programme Impact

Our three programme areas, Governance and Gender, Health and Humanitarian Response have brought about positive changes in attitude and increase in skills and confidence of our target groups to seek sustainable development. Our targets, who are largely poor, marginalised communities living in hard-to-reach communities are better equipped with the right knowledge and skills to influence development decision making.

Governance and Gender

Our Governance and Gender programme is aimed at improving government accountability and responsiveness to the needs of poor and marginalised people. We are promoting engagement between people and government and strengthening community structures, so they are able to raise their voices and demand for accountability. We also promote inclusive participation by ensuring gender equity and the participation of women and girls in development activities, we challenge harmful socio-cultural beliefs and practices that make women and girls in Nigeria suffer systematic disadvantages. In this past year we have empowered poor and marginalised people to make informed decisions about their lives and engage meaningfully in their own development.

Our projects



Collective Action for Adolescent Girls Initiative (CAAGI)

The gender-focused project sought to improve the choices and opportunities available to adolescent girls to achieve better life outcomes by identifying and tackling the underlying social causes of gender inequality and exclusion of adolescent girls.



Improving Early Warning and Early Response Systems to Strengthen Disaster Preparedness in Nigeria's Middle Belt (E4E)

E4E is strengthening the preparedness and response actions of disaster management agencies and platforms at the community, LGA, State and National levels for enhanced coordination and management of responses to flooding disaster. The action targets 27 flood-prone communities across 9 LGAs in Benue, Kaduna and Plateau states.



Voice to the People (V2P)

In 2018, V2P continued to sustain active citizenship and responsive governance, leveraging on strategies such as Community Based Monitors, Community Charter of Demands and town hall meetings to influence government decisions and drive government accountability.



Building Early Warning for Early Response Systems (BEWERS)

The intervention improved the capacity of community members (in 3 LGAs in Kaduna State) and state actors to detect and respond early to signs of conflicts in order to prevent situations from escalating into violent clashes.



Accelerating Localisation Through Partnerships (ALTP)

ALTP is focusing on operational change for humanitarian response. The project is strengthening local and national leadership to accelerate local ownership to humanitarian response.

Key Achievements



859

Community members with increased skills and knowledge to deal with adolescent girl issues, especially as it concerns economic empowerment, education and early marriage in Kaduna State.



1,257

Community members serving as peace volunteers on the Community Peace Committees set up by the BEWERS project in Kaura LGA of Kaduna State. Their activities have contributed to the sustained peaceful coexistence and improved communication between host community members and Fulani herds men.



32,353

Community members who have sustained engagements with duty bearers and service providers using the capacity gained from the V2P project, and directly contributing to meaningful social development within their communities.



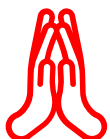
21,210

Community members in Benue, Kaduna and Plateau states covered by early action and contingency plans.



57

Disaster Management platforms including Community and State level Disaster Mitigation and Management Platforms and Search and Rescue teams set up and functional in Kaduna, Benue and Plateau states.



144

Faith actors challenging discrimination against adolescent girls in Kaduna state.

Health

Working in over 150 rural communities in Benue and Kaduna States and Abuja (Federal Capital Territory), we promote equitable social norms and access to institutions that are accountable and responsive to community priorities. We build community agency by working with our partners to empower community structures to identify and demand their development needs from duty bearers through advocacy. Our health interventions use mixed partnership models that include collaborative partnerships with development agencies, Government Ministries, Departments and Agencies (MDAs), Civil Society Organizations (CSOs), faith actors, traditional leaders and private sector.

Our projects



Partnership for Improved Child Health (PICH)

PICH is an integrated Community Case Management of Childhood illnesses (iCCM) project currently being implemented in 4 local government areas of Benue state. The project is aimed at contributing to the reduction in morbidity and mortality rates in children under the age of five (5) through increased knowledge, access and uptake of quality health services for pneumonia, malaria and diarrhea by caregivers.



The Health Legacy Strand 2 (HLS2)

HLS2 leverages on the existing PICH platform to track malnutrition cases and provide appropriate care. It is implemented through networks Community Health Agents (CHAs) who provide systematic and on-going education and CORPs who identify, classify and refer cases to health facilities for comprehensive care.



Closing the Gap to Sustainable Healthcare Access through Health Insurance (CHAIN)

This project which aims to promote universal health coverage for Nigerians is tagged #Health4allnigeria. It employs mixed advocacy strategies to motivate the State government to establish State Based Health Insurance schemes, encourage formal and informal groups to set up Community Based Health Insurance schemes and stimulate discussion and policy formation on universal health coverage by stakeholders at the national level.



Faith Leaders' Action against HIV Stigma and Discrimination (FLAHS-D)

Partnering with religious leaders as population health and social justice promotion champions. In this initiative, religious leaders, as influencers, are engaged to leverage the faith platforms to address knowledge gap, shape behaviours and challenge local practices and norms that have adverse influence on the rights and well being of the people, particularly women, girls and children.

Key Achievements



240,000+

Children under 5 have accessed lifesaving treatment for malaria, pneumonia and diarrhoea from our trained volunteers between August 2017 and December 2018.



261,591

Direct beneficiaries reached with trainings, treatment and health education in 2018 alone.



655

Malnourished children reached with supplementary feeding.



130

Community Development Committees empowered with the skills to identify and advocate for their health and development needs.



1,112

CoRPS, State level trainers for nutrition, Health Workers and Community Volunteers with skills to manage iCCM and acute malnutrition conditions



342



Faith and Community Leaders trained to identify and address harmful socio-cultural practices within their communities.

Humanitarian Response

Our humanitarian response programme aims to improve the conditions of persons affected by conflict and disaster by providing timely evidenced based lifesaving interventions that ensures quality of life in the long term, while building livelihoods and peaceful communities in Nigeria. The response is focused on two elements: emergency lifesaving assistance to communities affected by the conflict and promoting recovery and community strengthening.

Our interventions cut across 14 Local Government Areas in North East Nigeria. The lifesaving assistance involves provision of in-kind food assistance, nutrition specific assistance for children under 2, pregnant and lactating mothers. The response program through a hybrid approach of direct implementation and implementation through partners reached displaced persons in more than 60% of the whole LGAs in Borno state.

Our Projects



ACT APPEAL

The ACT Appeal Fund project was implemented by Christian Aid in partnership with EYN in Askira LGA of Borno State. The project focused on Water Sanitation through the provision of WASH Infrastructures (Boreholes, Latrine and bathhouses) and Supporting adoption of improved hygiene behaviours through systematic Hygiene promotion and distribution of hygiene kits.



Nigeria Joint Response (NJR)

Nigeria Joint Response is a consortium of 5 INGOs and 5 NNGOs funded by Dutch Ministry of Foreign Affairs (MoFA). CA has been a member of this consortium since 2016 and currently implementing fourth phase named NJR 2019. During 2018, CA reached out 33017 most vulnerable people in northeast and provided WASH, Food Security, Protection and Nutrition services and helped them sustain their life.



UN OCHA NHF

The United Nations' Office for the coordination of Humanitarian Affairs leads the coordination and management of the Nigeria Humanitarian Fund (NHF). Christian Aid implemented the Emergency WASH Assistance to IDPs, Host Communities, and Returnees in Dikwa and Monguno LGAs in Borno State from late 2017 into mid-2018. This project focused on the construction of boreholes, latrine facilities, provision of waste management tools and hygiene promotion.



WFP GFD

The United Nations' World Food Program in 2018 provided food commodities to IDPs and Host community members and nutritional supplements to children under 5, pregnant and lactating women were also given extra nutritional food ration. The project within 2018 was implemented in about 27 locations in 9 LGAs namely; Dikwa, Magumeri, Gubio, Jere, Konduga, Monguno, Shani, MMC, Mafa.



UN FAO

The United Nations' Food and Agriculture Organization provides livelihood support through distribution of agricultural inputs to IDPs and host communities by season. Within the financial year of 2018, Christian Aid implemented the Rainy Season FAO project in Hawul, Chibok, Hawul, Magumeri and Monguno, which saw Christian Aid distributing seeds (Maize, Cowpea, Sorghum, Millet, Groundnut, sesame and vegetables to beneficiaries. Christian Aid also implemented the Micro-Gardening in Dikwa and Monguno and the Dry season farming in Dikwa and Monguno.



WFP FADAMA

The United Nations World Food Program in partnership with FADAMA piloted a livelihood project that was implemented by Christian Aid. This project was implemented in four locations in MMC (Ashimeri, Molai, Kiribiri and Ndolori)

Key Achievements



251,513 beneficiaries

reached across all humanitarian activities during this reporting period



22, 048.7798 Metric Tonnes

of commodities ranging from cereals, to pulses, vegetable oil, salt, Corn Soya Blend (CSB), Plumpy sup and CSB++ for children under 5 were distributed



25 hand pumps constructed

to provide portable water to households



13 hand pump boreholes rehabilitated

to increase availability of portable water to households



90 latrines constructed

to improve community hygiene



65 dislodged latrines

to encourage continuous usage of latrines



9,664

reached with hygiene promotion messages



1,889 women

received hygiene kits

Donors in 2018



Funded by
European Union
Civil Protection and
Humanitarian Aid



OCHA

United Nations
Office for the Coordination
of Humanitarian Affairs



Food and Agriculture
Organization of the
United Nations

In 2018, some of our major donors were United Nations Agencies, European Commission's Civil Protection and Humanitarian Aid, Inter-Church Organization for Development Cooperation, Department for International Development. Other institutions were Start Funds and Highway Trust Funds,



Where to find us

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State offices

Anambra: No 7/24, House Type B7/03 Udoka Housing Estate, Awka.
Benue: House No 2 Beside House of Assembly Quarters, Nyima Layout Makurdi.
Dikwa: No. 2 Lawan Madu Street Algano Umar Residence, behind the market area,
Borno State.
Kaduna: R 30 Yusuf Iliya Street, Barnawa GRA, Barnawa.
Maiduguri: No. 14 Line F, New GRA, Borno State.
Monguno: No. C3 20 Housing Unit, Maiduguri road, Monguno LGA, Borno State.
Plateau: Plot 18928, Shaaka Gold-Base, Rayfield, Jos, Plateau State.

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Cover photo: Monica's son Sunday was tested and treated for malaria by Christian Aid trained community health volunteer on the PICH project in Benue State. Photo Credit: Christian Aid/Olusegun Oladejo

Page 1: 18-year old Blessing, a mother of 2 has returned to school while learning a skill as a result of activities of the CAAGI project in Kaduna State. Photo Credit: Christian Aid/Femi Bamigbola; Page 12: Christian Aid/Adebola Fatilewa; Page 13: Christian Aid/Nigeria Health Watch; Page 14: Christian Aid/Usman Faleye, Christian Aid/Faith Aloba; Page 15: Christian Aid/ Olusegun Oladejo; Page 16: Christian Aid/Nneoma Anieto/Christian Aid/JDPC Onitsha; Page 17: Christian Aid/Chinweuba Ezeigwe; Page 18: Christian Aid/Chinweuba Ezeigwe; Page 27: Christian Aid/Femi Bamigbola