

A Review of Ford Foundation West Africa Office's Youth Sexuality, Reproductive Health and Rights Work (2000 to 2016)

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Abbreviations and Acronyms

AHI	Action Health Incorporated
AHIP	Adolescent Health and Information Project
AIDS	Acquired Immune Deficiency Syndrome
ARFH	Association for Reproductive and Family Health
AYFHS	Adolescent and Youth Friendly Health Services
CSE	Comprehensive Sexuality Education
CLP	Community Life Project
CRH	Centre for the Right to Health
CSO	Civil Society Organization
DHS	Demographic and Health Survey
FGM	Female Genital Mutilation
FGM/C	Female Genital Mutilation/Cutting
FLHE	Family Life and HIV Education
GHON	Grassroots Health Organization of Nigeria
GPI	Girls Power Initiative
HIV	Human Immunodeficiency Virus
HMI	Health Matters Incorporated, Lagos
IAC	The Inter-African Committee on Traditional Practices Affecting the Health of Women and Children
ISERT	Ibadan Social and Evaluation Research Team, University of Ibadan
JAAIDS	Journalists Against AIDS
MMM	Medical Missionaries of Mary
NGO	Non-governmental organization
SRH	Sexual and Reproductive Health
SRHR	Sexual and Reproductive Health and Rights
ToC	Theory of Change
VVF	Vesico-Vagina Fistula
WHARC	Women Health and Research and Action Research Centre, Benin City
YSRHR	Youth Sexual and Reproductive Health and Rights

FOREWORD

I am pleased to present this report of the Ford Foundation's funding to youth sexuality, reproductive health and rights (YSRHR) in West Africa from 2000 to 2016. The Foundation's work in this area covers a period during which challenges associated with adolescent and youth sexual and reproductive health and rights in the region were at their peak, and compounded by the HIV/AIDS epidemic. The report celebrates the work of former program officers, notably, Friday Okonofua (2010-2015) and Babatunde Ahonsi (1997-2008). As will be seen in the report, the program officers worked with a wide variety of grantee organizations to address key issues around sexual and reproductive health and rights of young people in the region. Some of these issues were at the heart of global health concerns, such as HIV/AIDS, and others were very local (like capacity building for local NGOs). The purpose of this report is to document the contributions of the Foundation, through the work of its grantees, to moving the needle on YSRHR related issues in West Africa, with a greater focus on Nigeria, and to some extent, Ghana, where much of the work took place. It also seeks to document lessons learnt and key principles that can be drawn upon to inform future work.

The Foundation's support to the field of sexual and reproductive health began during the early days of its establishment in the region but intensified during the 1990s at the peak of Nigeria's HIV/AIDS epidemic. Through that period, the Foundation's funding helped to support the establishment of key organizations and networks, and enabled the establishment of the first, and only, Sexuality Resource Center in the region, the African Regional Sexuality Resource Centre, which was supported as part of a Global Sexual Health and Wellbeing Initiative with a grant of \$1 million in 2002. Furthermore, the Foundation's support enabled the development of critical capacity for policy design, as well as built the capacity of several local NGOs in the region to develop and lead sustainable work. The focus on strengthening NGOs and the mechanisms for policymaking started under Babatunde Ahonsi and continued under Friday Okonofua, with some of the greatest outcomes on strengthening civil society organizations, resulting in the development of strong NGOs working on sexual and reproductive health and rights in the region. Between 2013 and 2016, greater emphasis was placed on the need for policies that are more responsive to the needs of youth, the establishment of guidelines for addressing YSRHR issue, and better collaboration between state governments and civil society in the development of policies that respond to the needs of youth.

This report highlights the strengths of the programs supported, the main challenges faced, lessons learnt and the opportunities for future work. I am particularly delighted to see that the report covers in some detail the work that our grantees did, and their perceptions and understandings of the theory of change underpinning the work done during those years. It goes without saying that this review does not paint the full picture, and there will remain some gaps in understanding of the Foundation's contributions to this important field. Yet, it provides a valuable snapshot of the work that the Foundation did, highlighting where possible, lessons learnt and key moments. When we commissioned the report, we were conscious of and explicitly informed the consultants that we were mostly interested in the contribution the Foundation made in the field, given that we were one of several other funders that invested in this area. What is contained in this report is therefore consistent with this view of not attempting to claim the progress in the field as being solely a result of our funding.

This report could not have come at a better time, considering the changes in the global public health funding environment, the Foundation's own global programming reviews that are currently ongoing and the renewed focus of the West Africa office on the empowerment of women and girls. There is no doubt in my mind that the lessons learnt will be valuable in shaping how the

Foundation works in the region, going forward. It is also my hope that the report offers useful learning for the work of other philanthropic, bilateral and multilateral institutions working in the region, and particularly those currently focused on youth sexuality, reproductive health and rights, or others who will in the future.

I would like to thank the consultants, Adesegun Fatusi, Chimaraoke Izugbara and Peter-Kio Opirite, for producing a report that highlights the achievement of the Foundation's grantees over the period of the work. I would also like to thank Foundation colleagues: Paul Nwulu, Subarna Mathes and Joy Ehinor-Esezobor, and former colleagues, Margaret Hempel and Padma Ugbabe, for their respective contributions to shaping the development of the report and the accompanying short documentary. Finally, I would like to thank Dabesaki Mac-Ikemenjima for initiating the review that led to the production of this report and for modeling how grantmakers could responsibly exit a line of work and document lessons learned for posterity.

Innocent Chukwuma
Regional Director

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EXECUTIVE SUMMARY

Driven by a vision of social justice and a mission to reduce poverty and injustice; strengthen democratic values; promote international cooperation; and advance human rights, the Ford Foundation invested approximately \$56 million between 2000 and 2016 to improve youth sexual and reproductive health and rights (YSRHR) in West Africa. This independent review seeks to determine the contributions and achievements of this investment to the YSRHR landscape in West Africa. The review, covering the period between 2000 and 2016, broadly: (1) examined the goodness of fit and implementation of the Foundation's theory of change for its YSRHR work in the region, and (2) assessed the contributions of the Foundation's investments in advancing the field of YSRHR and promoting positive health outcomes among youth in West Africa.

Key review objectives

The key goal of this review was to address the core approaches, strategies, achievements, outcomes, and sustainability of programs and activities supported by the Foundation's investments in YSRHR in West Africa. It sought to identify successes, challenges, and lessons, and to better understand what worked, did not work, and why. Specifically, the objectives of the review were to:

- analyze the Ford Foundation's historical work on YSRHR, including HIV/AIDS, in Nigeria, and West Africa;
- interrogate the theory of change that informed the Foundation's strategy and grant-making in the region;
- ascertain the Foundation's relative contribution to the field, bearing in mind key trends at the inception and wind down of the Foundation's YSRHR work in the region;
- document the work and challenges of the Foundation's grantees and highlight lessons for current and ongoing work by the Foundation.

Methodology

The review utilized a mixed-method approach, combining qualitative and quantitative data, to assess the Foundation's influence and contribution to the field of YSRHR in West Africa. The review approach combined primary and secondary data. For most review objectives, we drew on primary data from qualitative key informant interviews (KIIs) and in-depth interviews (IDIs) with key stakeholders, including Ford Foundation's current and former grantees and staff as well as YSRHR experts in the region. Secondary data was extracted from existing records, including program-related documents and materials from the Ford Foundation and grantees; surveys; and other sources. Case studies of some grantee organizations and developments regarding some YSRHR issues are also presented to highlight critical points.

Analysis of the YSRHR grants' theory of change, mechanisms and outputs

During the period under review, YSRHR formed a substantial portion of the Foundation's portfolio in West Africa, accounting for 29% of its investments in the region. The Foundation's particular focus on youth reflected its understanding of the centrality of young people to health and development in the region as well as the importance of Sexual and Reproductive Health and Rights (SRHR) to young people's successful transition to healthy adulthood. The Foundation's high-level focus on youth and SRHR began at a time of very limited governmental and non-governmental response to the high YSRHR burden in the region. National efforts to promote youth SRHR in the region were weak, limited, uncoordinated, and poorly resourced. Then, very few capable NGOs were also working on YSRHR issues in the region. The Foundation took on the challenge of youth health and wellbeing at a most significant period.

Data from the review indicate that while grantees and other respondents' understanding of the Foundation's theory of change on YSRHR varied, they generally agreed that the Foundation sought to foster change through a two-way strategy of strengthening individual and organizational capacity to identify and implement promising and innovative interventions to improve YSRHR information and services. These interventions were reportedly anchored on four strategic pillars: (i) improving young people's access to sexual and reproductive health and rights information and education; (ii) improving the availability of, access to, and uptake of adolescent and youth-friendly health services (AYFHS); (iii) increasing access to capacity and skills development opportunities; and, (iv) facilitating, promoting and fostering YSRHR supportive policy environment. Review evidence indicated that the Foundation's grants across these strategic areas were underpinned by rigorous evidence as well as strategic and targeted policy advocacy.

Ford Foundation West Africa office invested in individuals, organizations, and innovations that held forth a promise to use evidence, advocacy, interventions, programs, and policies to positively impact the YSRHR field. The cardinal principles that underpinned the Foundation's West Africa YSRHR program included: honest engagement and exchange of ideas between grantees and the Foundation's staff; long-term funding to grantee organizations; support to leaders on the frontline of change; rigorous grantee selection processes that emphasized institutional capacity and sustainability planning; and support for grantees to appropriately network, leave "global footprints", generate learning, and stimulate robust solutions.

Ford Foundation offered its grantee organizations a variety of support to ensure that they succeed and deliver impact. This included capacity strengthening, assistance with information technology capabilities, opportunities for participation in learning forums and communities of practice, linkage with resources, institutional strengthening/building, and supportive interactions and follow-up by program officers. These enhanced the organizations' ability to deliver on their goals, and capacitated and positioned them to receive support from other grant-makers in the field.

Outcomes of the Foundation's YSRHR Grantmaking

Many positive outcomes stemmed from the Foundation's YSRHR grantmaking in West Africa. Its investments catalyzed the development and implementation of the national Family Life and HIV Education (FLHE) curriculum in Nigeria. Grantees of the Foundation, including Action Health Incorporated, Association for Family and Reproductive Health, Adolescent Health and Information Projects, and Girls Power Initiative, spearheaded policy development and advocacy efforts that led to the adoption of key policies at state and national levels as well as pioneered the implementation of FLHE in various parts of Nigeria.

These NGOs also developed and implemented programs that delivered YSRHR information and services to a wide spectrum of young people and vulnerable groups. The grantees developed key guidelines and resources that strengthened and expanded access to AYFHS in Nigeria, including the National Guidelines for the Integration of Adolescent and Youth-Friendly Health Services into Primary Health Care Facilities; the National Guidelines for Promoting the Access of Young People to Adolescent- and Youth-Friendly Health Services in Primary Health Care Facilities; and, the National Adolescent- and Youth-Friendly Job Aids for Service Providers in Primary Health Care Facilities in Nigeria. Grantees also implemented activities that supported young people's skills development in the areas of SRHR, entrepreneurship, and livelihoods. Furthermore, grantees implemented programs that improved access to vesico-vaginal fistula, post-abortion care, safe motherhood services as well as HIV treatment, care and support. The Foundation's grants facilitated significant human capacity strengthening among organizations and individuals in the YSRHR field, including public sector officials and agencies, health workers, teachers, media

practitioners, technical and managerial staff of civil society organizations, service providers, and researchers.

Several key policies and programs were facilitated by the Foundation's grantees through grants received. In addition to the National Family Life and HIV/AIDS Curriculum noted above, there was the Violence Against Persons Prohibition (VAPP) Act, the Policy on Teachers' Education in Kano and Jigawa States, and the Ondo State Strategic Framework and Action Plan for Advancing Young People's Health and Development. Other policies and programs spearheaded by the grantees focused on the prevention of child marriage, expansion of access to adolescent-friendly services; elimination of Female Genital Mutilation (FGM), widow mistreatment, and other harmful traditional practices; and the rollout, implementation, and scale up of several other initiatives.

Ford Foundation also invested significantly in institutional strengthening. Through these efforts, a large number of organizations, particularly non-state actors, were strengthened. The grantee organizations developed, among others, critical skills in YSRHR programming, resource mobilization and organizational management. Smaller organizations were strategically strengthened in terms of their technical, fiduciary, and management systems through an innovative "twinning" arrangement whereby they were paired with larger organisations to nurture and mentor them. Through that approach, the smaller organizations were positioned for future success as independent grant recipients. Overall, the institutional strengthening that resulted from Ford Foundation's support has contributed significantly to the sustainability of her grantee organizations beyond the period of the Foundation's funding and positioned them for continued leadership of the YSRHR field, thereby securing a strong platform for not only sustaining the YSRHR agenda in the present but also for the future advancement of the field.

Ford Foundation also actively supported research on YSRHR, funding both independent researchers and research institutions to generate evidence on key issues for policy and programming. These research generated evidences not only to support the programming efforts of grantees, but in their own way also contributed to improvement of knowledge within the YSRHR field and provided other actors within the field, the platform for evidence-based actions, which increased the potential for the effectiveness of the actions of these other stakeholders in both the program and policy arena.

Lessons learned

A major lesson from the Ford Foundation's YSRHR work in West Africa is that careful selection of grantees based on rigorous criteria is a critical key success factor in achieving effective results vis-à-vis the grantmaking portfolio. Another key lesson is that strategic investment in the long-term development of grantees counts for grantees to be at the cutting-edge of performance and achieve optimal impact, a critical need exists to invest in them over a period. This review also showed that flexibility in grantmaking and supportive grant-maker interaction with grantees are critical to the success and sustainability of development programming as the dynamics of development work call for a high-level responsiveness and nimbleness and is best facilitated by such flexible approaches. A further lesson learned is that investments in rigorous research and the application of research results in programming and in policy advocacy hold the key to successful interventions. The Foundation's work in the region also showed that strength-based partnerships, and strategic coalition building with critical stakeholders are critical to effective programming and policy engagement.

Recommendations

The review findings raise the need for the Ford Foundation to continue to focus on YSRHR in West Africa. Current trends in the region, including the youth bulge, the persistence of SRHR challenges, and the growing clamor for strategies to harness the demographic dividend indicated that the agenda of youth development in West Africa remains unfinished. Integrated programs that address youth health, educational, social, and economic empowerment outcomes offer opportunities to translate the Foundation's vision into concrete reality. The Foundation's unique practice of investing in human and organizational capacity is a critical legacy that underlies its many accomplishments in Nigeria in particular, and West Africa in general, and that legacy needs to be sustained. There is also need for the Foundation to: invest more in building strong movements with catalytic capacities to spur social change and drive policy action; devote more attention and effort to deepening relationships and building synergies with governments and their agencies to promote uptake and scale up of promising programs; engage more with universities and research institutions to ensure enduring capacity for research; strengthen youth participation in grant-funded programs; support the development of local philanthropy through strategic alliances with high net-worth individuals and organizations; engage experts in the review of grant proposals for improved quality and transparency, and ensure quality monitoring and evaluation of programs to facilitate learning and impact.

1. SECTION 1: INTRODUCTION

1.1. Youth Sexual and Reproductive Health in West Africa

Sexual and reproductive health (SRH) outcomes among adolescents and young people in West Africa are generally poor. The region's young people have low levels of SRH knowledge, high rates of early and unprotected sexual activity; elevated rates of multiple sexual partnerships; and heightened risks for early marriage, early and unintended pregnancy, unsafe abortion, and HIV and other sexually transmitted infections^{1,2,3,4}. Harmful practices and gender-based violence such as female genital mutilation and girl-child marriage are also common in West Africa, reflecting the poor status of females as well as an entrenched patterns of gender inequality across the region. Globally, three of the top five countries with the highest rates of child marriage are all in West Africa: Niger, Mali, and Guinea. Child marriage is also common in Mauritania, Côte d'Ivoire, and Nigeria. There were about 23 million child brides in Nigeria alone in 2017⁵. Girl-child marriage contributes significantly to the high burden of severe maternal morbidities such as obstetric fistula and maternal mortality in West Africa.

Adolescent fertility is high in West Africa. The region has the highest proportion, globally, of women aged 20 to 24 who had given birth before age 18. Niger has the highest adolescent fertility rate globally (51%), and more than a third of adolescents in four other West African countries had given birth before age 18 – Mali (46%), Guinea (44%), Sierra Leone (38%), and Liberia (38%). Overall, West Africa accounts for 15% of all adolescent births in the world⁶. In terms of the absolute number of adolescent births, Nigeria greatly outnumbers other West African countries and ranks third globally (behind India and Bangladesh) with about two million adolescent births annually⁶. Maternal mortality ratio is high in West African countries, and adolescent girls in the region have higher levels of maternal mortality compared to older women. Adolescents contribute more than a tenth of maternal mortality and severe maternal morbidity cases (including vesicovaginal fistula and other forms of obstetric fistula) in West Africa.⁷

Whilst the HIV prevalence rate is comparatively lower in West Africa (about 2%) compared to other regions in sub-Saharan Africa, about 4.5 million people are estimated to be living with HIV in West and Central Africa⁸. A total of 62,000 adolescents were infected in 2016 in West and Central Africa, translating to about 170 infections per day; this figure has remained unchanged since 2010⁹. More than half of all new HIV infections and nearly half of all AIDS-related deaths

¹ Hervish A, Clifton D. 2012. *The Status Report on Adolescents and Young People in Sub-Saharan Africa: Opportunities and Challenges*. New York, United Nations Population Fund.

² Fatusi AO, Blum RB. 2012. Adolescent Health in an International Context: The Challenge of Sexual & Reproductive Health in Sub-Saharan Africa. *Adolescent Medicine: State of the Art Reviews* 2009 (Dec), 20 (3): 874-86

³ Fatusi AO. 2016. Young people's sexual and reproductive health interventions in developing countries: making the investments count. *Journal of Adolescent Health* 2016;59(3 Suppl):S1-3. doi: 10.1016/j.jadohealth.2016.06.016

⁴ Kabiru CW, Izugbara CO, Beguy D. The health and wellbeing of young people in sub-Saharan Africa: an under-researched area? *BMC Int Health Hum Rights*. 2013; 13: 11.. Published online 2013 Feb 13.

⁵ UNICEF. 2017. Achieving a future without child marriage. Focus on West and Central Africa.

<https://data.unicef.org/wp-content/uploads/2017/10/Child-Marriage-WEB.pdf>.

⁶ UNFPA. 2013. Adolescent pregnancy. A review of the evidence. Available at: https://www.unfpa.org/sites/default/files/pub-pdf/ADOLESCENT%20PREGNANCY_UNFPA.pdf

⁷ UNFPA West and Central Africa. 2016. Improving Integrated Sexual and Reproductive Health and Reproductive Rights to build resilience in health systems in West and Central Africa.

https://wcaro.unfpa.org/sites/default/files/pub-pdf/UNFPA%20WCARO%20Improving_low_V4.pdf

⁸ Joint United Nations Programme on HIV/AIDS (UNAIDS). UNAIDS Data 2017. Geneva, UNAIDS.

⁹ United Nations Children's Fund and Joint United Nations Programme on HIV/AIDS, Step Up the Pace: Towards an AIDS-free generation in West and Central Africa, UNICEF West and Central Africa Regional Office and UNAIDS Regional Support Team for West and Central Africa, Dakar, 2017.

among young people in the region occur in Nigeria. Women and girls in West Africa are disproportionately affected by HIV and AIDS due to a combination of sociocultural and biological factors. AIDS presently constitutes the second leading cause of death among young women (15–24 years) in West Africa¹⁰. Unfortunately, due to weak economic and political systems, conflicts, low-level education, and pervasive gender inequality in the region, the response to the HIV challenge has been weak and deficient.

1.2. Background to the Ford Foundation YSRHR Program in West Africa

1.2.1 The Ford Foundation: Vision and Philosophy

The Ford Foundation believes strongly in the inherent dignity of all people. Its work is driven by a vision of social justice and the mission of reducing poverty and injustice, strengthening democratic values, promoting international cooperation, and advancing human achievement¹¹. The Foundation passionately desires and aims for “a world in which all individuals, communities, and peoples work toward the protection and full expression of their human rights; are active participants in the decisions that affect them; share equitably in the knowledge, wealth, and resources of society; and are free to achieve their full potential”¹¹. Since 1960, when the Foundation established an office in Lagos, it has invested in innovative programs that support visionary leaders in both civil society and government to expand and accelerate the pace of social change and inclusive development.

1.2.2 The Ford Foundation West Africa YSRHR Work

Over the last six decades, the Ford Foundation has invested strategically in population health, SRHR, and development in various parts of the world. The Foundation’s focus on these issues grew out of its groundbreaking work on population growth, contraceptives, and demography which dates to the 1950s and the 1960s. Towards the end of the 1980s, it shifted “from the traditional population and health framework to a more rights and gender equity-centered approach to sexual and reproductive health”. The impact of this shift on the Foundation’s work became more apparent in the wake of the global consensus reached at the 1994 International Conference on Population and Development (ICPD) in Cairo. For instance, following the ICPD, the Foundation began to explicitly incorporate the issue of sexuality in its reproductive health (RH) programming, leading efforts to develop and fund programs that support young people to learn about and openly discuss contraception, sexuality, sexual autonomy and pleasure, bodily integrity, and gender identity in Nigeria. Ford Foundation’s funding in this specific area started in the early 1990s and its YSRHR portfolio covered and addressed several substantive SRHR issues, including sexuality education, adolescent SRH services, maternal mortality, vesico-vaginal fistula (VVF) and other maternal health issues, HIV, gender-based violence (GBV), FGM, and women/girls’ empowerment.

1.3. Objectives of the review

The purpose of this review is to document the experiences, achievements, and lessons learnt from the implementation of the YSRHR program in West Africa. Specifically, the objectives of the review were to:

- analyze the Ford Foundation’s historical work on HIV/AIDS/YSRHR in Nigeria and West Africa;
- interrogate the theory of change that informed the Foundation’s strategy and grant-making in the region;

¹⁰ UNICEF. 2016. Adolescent HIV prevention. Available at: http://www.childrenandaids.org/adolescent_prevention

¹¹ Ford Foundation. Available at: <https://www.fordfoundation.org/about-us/mission/>

- ascertain the Foundation’s relative contribution to the field, bearing in mind key trends at the inception and wind down of the Foundation’s work in the region
- document the work and challenges of the Foundation’s grantees and highlight lessons for current and ongoing work by the Foundation.

1.4. Key review questions

This review addressed the following questions:

1. What are the Ford Foundation’s substantive contributions to youth sexuality work in Nigeria and West Africa?
2. Are the main recipient organizations of the Ford Foundation’s funding sustainable, are they still central, and are they likely to remain central to the field in the long term?
3. What is the status of the programs/projects seeded by the Foundation?
4. How relevant, effective, and valid was the Ford Foundation’s theory of change for its YSRHR grant-making/ strategy?
5. What were the challenges encountered in strategy and program implementation, and what lessons can be learned from the work of the Foundation and its grantees?

Overall, the review appraised the core approaches, strategies, components, operations, achievements, outcomes, and sustainability of programs and organizations that were supported by the Ford Foundation’s investments in YSRHR. It identifies successes, challenges, and lessons to better understand what worked, what did not work, and why.

1.5. Structure of the report

The report is structured into six inter-linked sections. In Section 1, we provided the background of the review, highlighting the context of the Foundation’s work in West Africa. In section 2, we articulated the assessment methodology and data sources and underscore the limitations of the review. Section 3 presented findings on Ford Foundation’s YSRHR grant-making philosophy and processes, focusing among others, on the theory of change as well as the grant-making strategies. Section 4 focused on the results of the YSRHR investment of the Foundation and examined the key outcomes of the YSRHR grant-making. In section 5, we discussed the findings of the review and provided further insights on the achievements, challenges, and gaps in the Foundation’s work. The last section (6) highlighted key lessons from the review and offers some recommendations for future work by the Foundation.

2. SECTION 2: METHODOLOGY

2.1. Technical approach of the review

The review used a mixed method approach, combining qualitative and quantitative approaches, to answer the review questions. It relied on both primary and secondary data to ensure depth and rigor of the review findings. For most questions, the review drew primarily on the qualitative data and analysis; however, for others, it used complementary quantitative data, particularly grantee and Foundation program information. This approach ensured that review findings benefit from the specificity associated with quantitative evidence and the explanatory richness and contextual value of qualitative data.

2.2. Qualitative data collection and analysis

Qualitative data were gathered through key informant and in-depth interviews with 40 key stakeholders including the Foundation's current and former grantees, civil society organizations (CSOs) working in the field of YSRHR in the region, current and former staff of the Foundation, current and former government officials, and staff of other international organizations in Nigeria (the full list of interviewees is included as appendix 1). Interview questions specifically sought respondents' knowledge of the issues which the Foundation's YSRHR work aspired to address; the Foundation's model and theory of change; the nature and quality of relationships between the Foundation's program officers and grantees; the level, types, and quality of support offered by the Foundation to its grantees; and the key achievements of grantees in the field. Other issues addressed in the interviews included: challenges faced by both grantees and the Foundation's staff; how the Foundation's support was leveraged by grantees; perceptions of the Foundation's work and funding practices; and the sustainability of achievements, programs, and work supported by the Foundation.

The interviews were conducted in English by trained fieldworkers. Interviews typically lasted an average of one hour; Nineteen of the 40 interviews were carried out by face-to-face method, while others were telephone-based. The interviews were audio-recorded and held in environs and spaces free of the attention, threat of sanctions, and pressure of non-participants. Data collection occurred between December 2017 and February 2018. Follow-up interactions to clarify interview data continued with some respondents at various times till June 2018.

2.3. Secondary data analysis

The secondary data analysis focused on existing records from the Foundation and its grantees as well as other relevant bodies. These were used to assess, among other things, grant types, size, and duration. Quantitative data were analyzed using simple percentages, proportions, and rates, and presented in tables and graphs.

2.4. Desk review

We undertook an analysis of relevant reports and documents, particularly in Nigeria, relating to the focus of the review. These include:

- Institutional documents relating to Ford Foundation's YSRHR grant-making
- Grant implementation documents, including grantees' proposals, grant narrative and financial reports;
- Information available from the website of the grantee organizations;
- Research and program-related documents relating to YSRHR, including peer-reviewed articles;
- Population and health policy documents and policy instruments.

2.5. Methodological challenges and limitations

The current review has some limitations. First, only a few of the policymakers with good knowledge about the history of investments of Ford Foundation in Nigeria were interviewed for the study. Many of them had retired and could not be reached for interview. Major staff transitions had also occurred in several of the organizations that the Foundation supported in the wake of its presence in West Africa, leading to substantial loss of institutional memory. A total of 92 grantee organizations were contacted in writing through e-mails to participate in the study, but only 26 participated despite emails reminders and follow-up phone calls.

Further, given the evident multiplicity of investments and actors in YSRHR in Nigeria during the period under review, direct attribution of results achieved during the review period to the programs funded by the Ford Foundation was not possible. Also, the lack of purposefully and clearly assembled baseline information and data for comparing changes in outcomes precluded a traditional impact review design. Finally, although we focused data collection activities among knowledgeable persons, there is a potential for recall bias given the time lag between some of the activities and the time of the review, particularly in relation to activities that took place in the early stages of the Foundations' investments. In what follows, data analyzed and presented were based on findings from the assessment.

3. SECTION 3: THEORY OF CHANGE AND GRANT-MAKING STRATEGIES

Ford Foundation invested approximately \$56 million and supported more than 92 organizations with grants to engage in diverse projects and programs relating to YSRHR. In this section, we presented findings on the YSRHR grant-making, including the underlying philosophy, the theory of change and key approaches. These findings were organized around themes related to key review questions raised in the first section of this report. We began by clarifying the guiding framework for the YSRHR investment of the Ford Foundation West Africa office (organizational philosophy and the theory of change), the strategic approach to grant-making (including the core strategies and the strategic pillars for action), and the grant-making process and patterns (including the categories and focal areas of grantmaking).

3.1. Theory of change

During the period under review, the Ford Foundation West Africa Office invested a total of US\$193million in grants and program support. The YSRHR constituted a higher proportion of the Foundation's program portfolio in West Africa during the period, accounting for 29% of these investments. For many respondents, this was justified. Youth are central to health and development and SRHR is key to their successful transition to healthy adulthood. The Foundation's high-level focus begun at a time of very high YSRHR burden in West Africa, including high levels of maternal mortality and morbidity, the persistence of FGM, rising levels of HIV and the associated factors of poor YSRHR knowledge and low access to relevant health services. During the period, national efforts to promote youth SRHR in the region were weak, uncoordinated, limited, and poorly resourced, while the social environment was also not very supportive of the YSRHR agenda. There were also very few established, reputable and high-impact non-governmental organizations (NGOs) and CSOs working in the field of YSRHR in the region. For many respondents, the Foundation's decision to take on the challenge of YSRHR was aptly timed.

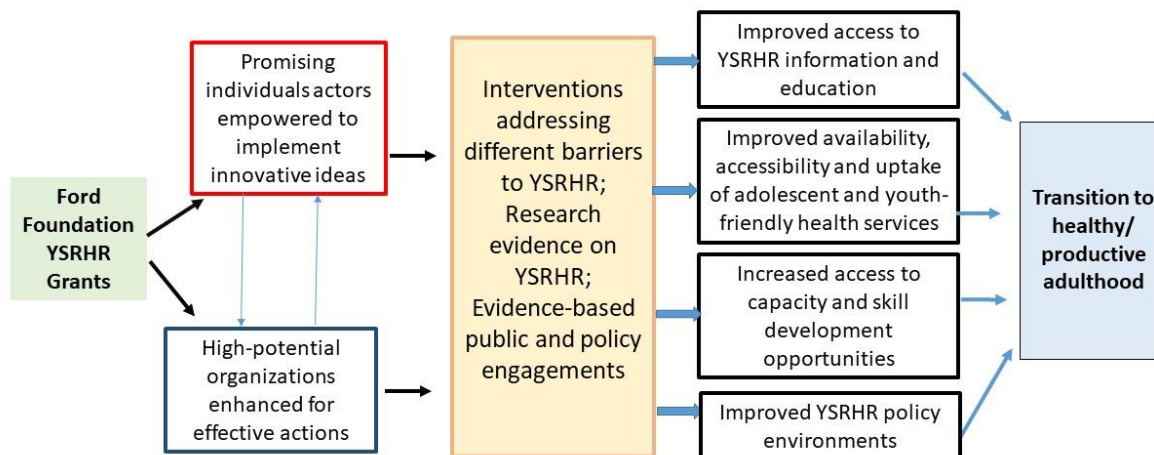
Ford Foundation's YSRHR work broadly aimed at changing the challenging picture and narrative of poor outcomes among youth in West Africa through a focused and strategic approach. However, the theory of change (ToC) that underpinned the Foundation's funding and work was implicit, rather than explicit. As such, it was not surprising that the grantees interviewed varied in their understanding of the Foundation's theory of change on YSRHR. Despite the non-explicit nature of the ToC, there was a common perception that the Foundation focused on building and supporting frontline and promising individuals and organizations/institutions to implement innovative ideas to promote and foster positive change and outcomes at individual and systems levels. Respondents understood the Foundation's 3Is (individuals, institutions and ideas) strategy which involved strengthening individual and organizational capacity to identify and implement promising and innovative interventions to improve the region's challenging YSRHR situation.

The expected outcomes of these interventions, based on the implicit ToC, are: (i) improved access of young people to SRHR information and education; (ii) improved availability of, access to, and uptake of adolescent and youth-friendly health services (AYFHS); (iii) increased access to capacity and skills development opportunities, including entrepreneurship and livelihood skills development; and, (iv) improved YSRHR-supportive policy environment. Together, these inter-linked and mutually-reinforcing outcomes aimed to improve YSRHR and ensure the eventual transition of young people to healthy and productive adulthood (Figure 1). In order to contribute to these outcomes, the Foundation supported several programs under its YSRHR program. These ranged from individual/group- and community-targeted actions, to policy engagements, and research to inform action and measure the effect of various interventions. Essentially, as the theory of change that guided the YSRHR investment was implicit. Interestingly, several

respondents noted that the Foundation’s theory of change was not always clearly documented or actively shared with grantees and that this, in some way, limited the building of a shared understanding of the changes sought through the Foundation’s investment.

Figure 1: Theory of Change for Ford Foundation’s YSRHR investment

Theory of Change for YSRHR Grant-making



In general, the YSRHR grants awarded by the Foundation over the period under review were directly related to the four strategic outcomes highlighted in the ToC. The grants supported programs and interventions focusing on adolescent reproductive health and well-being, safe motherhood, women’s sexual health, comprehensive sexuality education, HIV and AIDS, gender-based violence prevention and mitigation, and prevention of sexual and reproductive rights violation (such as female genital mutilation/cutting and child marriage). These programs were also generally characterized by a multi-sectoral, inter-disciplinary, gender equality-centered, and rights-based approach which resonated strongly with the Foundation’s “holistic and rights-focused view of SRH with particular attention to the social, political, and economic factors that affect them and the obligations of governments and significant non-state actors such as service providers and community gatekeepers to fulfill the right to reproductive health by creating conditions that enabled women, youth and men to realize this basic human right”¹².

Case Study: Responding to changing disease epidemiology; the case of HIV in Nigeria

Nigeria’s HIV epidemic and the national HIV response have gone through several phases, starting from 1986, when the first case of AIDS was officially announced in the country. The 1986-1992 period was an “era of denial and tentative actions” and witnessed very little official national

¹² Ahonsi B. 2006. Working on SRH Promotion through a Human Rights Lens in Nigeria: Some Examples from Innovative Grantmaking around HIV/AIDS. Presentation at the 2006 Sexual and Reproductive Health Learning Group (SRHLG) Meeting, New Delhi, India.

response, while the 1993-1999 period was an “era of growing awareness and health-sector driven response.” An “era of multi-sectoral response” commenced late in 1999¹³. Starting in the late 1990s, the Ford Foundation nimbly engaged with the HIV response agenda in Nigeria. It targeted investments to respond to emerging issues in HIV epidemiology and the national response to it. Some of the key issues the Foundation focused on were the low levels of HIV-related knowledge among youth, the issue of pervasive HIV stigma, young people’s limited access to HIV prevention services, treatment and care, the burgeoning prevalence of HIV among young people and women, and the lack of accountability for available HIV resources and funds.

Importantly, the programs funded by the Foundation in the various phases of the HIV epidemic in Nigeria varied according to the context of the national need in the different time periods, reflecting both flexibility and context-responsiveness in her funding and programming. Such dynamic programming outlook enabled the grantees to undertake initiatives that best responded to the different phases of the HIV epidemic in Nigeria. This placed Ford Foundation in a position to contribute appropriately in each phase and maximize its impact on the HIV epidemic at various points in time.

Table 1: Ford Foundation’s engagement with Nigeria’s changing HIV landscape

Phase of the national HIV epidemiology: Characteristics of the epidemiology and response	Main actions supported by the Ford Foundation	National response outcome
1997 – 2000		
Increase in the national prevalence from 4.5% in 1996 to 5.4% in 1999, and poor state response. There was low knowledge of HIV at the population level, high levels of low self-risk assessment, and high levels of HIV-related discrimination and stigmatization. Poor health sector response and low level of coordinated multi-sectoral action	<ul style="list-style-type: none"> • Empowerment of people living with HIV (PLHIV) and support for their involvement in national response efforts • Integrated health education and poverty reduction approaches for vulnerable groups • High impact policy advocacy work with a strong emphasis on youth and women involvement and focus in the national response 	<ul style="list-style-type: none"> • Development of the National Policy on HIV/AIDS and Sexually Transmitted Infections • Gradual improvement in the awareness of HIV at the population level • Emergence of an organizing framework for NGO coalition-building (The NGO Consultative Group) • Network of People Living with HIV/AIDS (NEPWHAN) was formed •
2001 – 2004		
Rise in the HIV prevalence to 5.8%; rising public awareness and personal risk assessment; more robust and multi-sectoral national response; more intense response on the	<ul style="list-style-type: none"> • Support for AIDS activism by PLHIV and PLHIV-serving organizations regarding access to treatment • Building national capacity for clinical monitoring and 	<ul style="list-style-type: none"> • Reduction in open stigmatization/ostracization of PLHIV • Increased visibility of PLHIV and their engagement with the national response

¹³ Fatusi AO, Jimoh A (2006): The Roles of Behaviour Change Communication and Mass Media in Controlling HIV/AIDS in Nigeria. In: Adeyi O, Kanki P, Odutolu O, Idoko JA (eds.). AIDS in Nigeria: A Nation on the Threshold. Cambridge, Harvard University Press. USA. p. 323-348.

Phase of the national HIV epidemiology: Characteristics of the epidemiology and response	Main actions supported by the Ford Foundation	National response outcome
part of CSOs and international development partners, especially regarding access to treatment advocacy and ART services.	laboratory backstopping of AIDS prevention and treatment programs; <ul style="list-style-type: none"> • Strengthening mass media engagement 	<ul style="list-style-type: none"> • Establishment of multi-sector response framework and structure, including NACA • Proliferation of development partners and CSOs in HIV response • Formation of the Civil Society Consultative Group on HIV/AIDS in Nigeria (CISGHAN) • Enhanced CSOs' engagement with the policy and strategy formulation • Establishment of a highly subsidized national HIV treatment program • Development of National HIV/AIDS Policy • Development of the HIV Emergency Action Plan • Adoption of the family life and HIV education curriculum nationally
2005 – 2008		
The first sign of stabilization and decline in the HIV prevalence (to 5% in 2003, and 4.4% in 2005; more intense public and official response; proliferation of organized PLHIV groups; and, unprecedented increase in funding support, especially from international partners	<ul style="list-style-type: none"> • Media- and PLHIV-driven monitoring and watchdog advocacy around greater accountability • Greater attention to gender equity and economic equity issues in AIDS resource flows; • Legal aids and PLHIV-centered stigma reduction activities 	<ul style="list-style-type: none"> • More robust and comprehensive HIV programming with stronger policy and strategic focus. • Significantly increased investment of international development partners into the HIV treatment program • Significantly increased access to HIV testing and ART coverage • Significant decrease in HIV stigmatization

3.1. Grant-making arrangements and geographical focus

Most of the YSRHR investments of the Ford Foundation in West Africa targeted Nigeria. This was a strategic decision, informed largely by Nigeria's large population, enormous YSRHR burden, and the Foundation's funding limitations. The Foundation strategically chose not to spread its limited resources thinly across several countries. However, the Foundation also occasionally supported relevant policy-related work and research across West Africa.

In Nigeria, the bulk of grantees supported during the Foundation's early work were in the south-western part of the country. Then, this part of Nigeria had more established NGOs and CSOs than other parts of the country. Also, Lagos, in the Southwestern region, previously the political capital of Nigeria, offered a fertile and strategic platform for policy engagement.

Grant-making was not only concentrated in the southwest region, given that the Foundation realized the need to achieve nationwide impact and deliberately and systematically identified promising organizations from other parts of the country for grant support. In many instances, the Foundation paired or twinned these new organizations with more established ones in an arrangement that sought to strengthen the former's technical, fiduciary and management systems. Under this arrangement, funding was originally provided to the mentor-NGOs for relevant project support in the hope that the mentee-organization will receive requisite mentorship and tutelage in project management, policy advocacy, networking, and financial planning, among other skills. Following weaning, some mentee-NGOs received grants directly from the Foundation. For example, Life Vanguard in Osogbo, Osun State, was twinned with the more established Association for Family and Reproductive Health (ARFH) in Ibadan. In many cases, mentee-organizations transitioned successfully into independent grantees within an average period of two years. In the few cases where the transition was unsuccessful, leadership challenges, including rapid management changes, weak financial systems and unclear organizational structures of the mentee-institutions were key reasons. In general, the organizational mentorship program expanded the reach and coverage of the Foundation's work in Nigeria considerably, facilitating the emergence of capable organizations as well as a more robust implementation of the YSRHR agenda across the country.

Many of the Foundation's grantees became leading organizations in their localities in various YSRHR-related areas. For example, Global Health and Awareness Research Foundation (GHARF) has remained in the forefront of the YSRHR agenda in Enugu State and Forward Africa, in Imo State. Similarly, Inter-gender remains one of the strongest NGOs in Northcentral Nigeria and a leading NGO on gender in the country. Thus, the twinning arrangement was an excellent and innovative capacity and institutional building strategy that midwived the emergence and stabilization of several YSRHR organizations in the country. The twinning arrangement should have been particularly strategic in growing and supporting youth-led organizations given their limited experience and technical capacity, and low potential for securing grants. Indeed, while many youth-focused organizations received support from the Foundation, little specific effort targeted them in terms of mentorship and preparation for the future.

3.2. Ford Foundation's YSRHR grant-making operational principles

Judging from the interview data, respondents identified five cardinal principles that underpinned the Foundation's YSRHR investment: These were:

- *“Grantees as partners” approach:* Ford Foundation's engaged its partners and grantees using a flexible, innovative and negotiated approach. Grantees regularly noted that the Foundation was honest in its engagement and exchange of ideas, and that its program officers approached grant-making as a collaboration with grantees. One former grantee observed that:

Ford Foundation catalyzed an enabling process through her grant-making to partners with passion, who drive the process to achieve the desired result.

Another grantee program officer pointed out that:

The thing that worked the most was that we had program officers that listened. There are funders who have a template of what they want to do and they get grantees to do it. It was never like that with the Ford Foundation.

The Chief Executive Officers (CEO) of two other grantee organizations further noted:

We are beneficiary of several grants, if I say several grants I mean if you are receiving funds from about 11 donors then you are in a good position to say which donor is the best and which one is not. The truth is that with Ford grant you are at home, when I say you are at home you just pray that they continue to fund you. If they fund you for 2 years, 3 years, the kind of freedom they give to you when it comes to monitoring, the kind of learning that they enable you to learn from your project. They do not welcome you with this pre-made mandate of we are going to do it like this; they give you this freedom to maneuver your way and generate result through things and challenges that you have overcome, and that way, you build a skill that you never plan for... One of the things Ford Foundation has been able to do was giving us an opportunity to try new things. When we started, nobody was even talking about HIV counseling or testing and ... we piloted it with Ford and we are able to now get other organization to come in.

- *Strategic focus on “long-term investment”*: Ford Foundation’s partnerships with grantees had a long-term vision. This approach involved provision of grants to enable NGOs become both financially and programmatically stable, efficient and sustainable. As reported by both grantees and a former Program Officer of the Foundation, over a dozen NGOs were supported with advisory and financial support by the Foundation to acquire multi-purpose office structures. These NGOs included Action Health Incorporated, Lagos (AHI), Adolescent Health and Information Projects, Kano (AHIP), Association for Reproductive and Family Health (ARFH), Ibadan; Girls Power Initiative (GPI), Calabar; and Women Health and Research and Action Research Centre(WHARC), Benin. Other beneficiary organizations included AIDS Alliance, Kaduna; Baobab for Women's Human Rights, Lagos; Forward Africa, Owerri; Global Health and Awareness Research Foundation (GHARF), Enugu; Health Matters Incorporated, Lagos (HMI); InterGender, Jos; Life Vanguard, Osogbo; Ogoni Youth Development Project, Bori; AAWORD, Dakar, Senegal; African Women Development Fund (AWDF), Accra, Ghana; and PROMETRA, Dakar, Senegal. In some cases, the multi-purpose office structures included resource-generating investments such as Guest Houses as was the case with AHI and WHARC. In the view of a former Ford Foundation program officer:

YSRHR issues are critical but sensitive and needs to be sustained over time to achieve the desired result. However, the potential for funding for the NGOs engaged in the YSRHR field cannot be easily guaranteed for the future. Thus, a strategic decision was taken to support some of the leading NGOs in the field that are Ford Foundation’s grantees to acquire their own permanent offices and where possible multi-purpose office that can also include some income-generating activities as a means of enhancing the potentials for the sustainability of their work.

The CEO of a former Ford grantee organization shared a similar sentiment, noting that:

Ford Foundation strongly encouraged us to acquire landed property and to erect our permanent office and a guest house alongside the office, towards ensuring the progress and sustainability of our work. The Foundation provided us with some financial support as well as technical advice to accomplish that end. The action of moving from rented spaces to our own permanent office and to be able to generate some funds consistently from our guest house has proved to be tremendously helpful to our work.

Another CEO observed that:

For me the lesson that I've learnt from FORD grant is that continuity on a particular line of focus until you see the result is key, a few persons that fund programs for 10 months, 6 months, 1 year and walk away and then when they are coming the second time they have a new focus, and then you can't be able to deduce that they have already set in the first focus, I think Ford grants if it's used on a focus, we will do a lot and that for us, two grants we got, the two and a half grants we got were all grants that were focusing on building additional block on the same focus, that way it was possible for us to reach what I'm talking now.

- *Support for leaders on the frontline:* The Ford Foundation sought to produce and support thought-leaders in the field. These leaders included NGOs, research and policy networks, as well as individuals. For instance, the Foundation's support to WHARC and its journal, the African Journal on Reproductive Health (AJRH), enabled the organization to be at the forefront of research and knowledge production in the YSRHR field in Nigeria and Africa at large. AJRH remains, till date, the leading and best-ranked journal in the field of reproductive and women's health in Africa. Other frontline organizations that were supported by the Foundation include AHI, ARFH, AHIP, and GPI, all of whom are currently leaders in the field. Many of these institutions have blossomed and developed critical capacity to address important YSRHR issues in Nigeria. For instance, the International Centre for Sexual Reproductive Rights (INCRESE), Minna, has become a leading national voice on issues affecting sexual minorities; the Center for the Right to Health (CRH) on health-related rights issues; and Positive Access Treatment Action (PATA), on access to HIV treatment and the empowerment of women living with HIV/AIDS as well as accountability for HIV funds.
- *Use of a rigorous process and strategic considerations in selecting grantees:* The Ford Foundation deliberately targeted selected organizations for support, putting emphasis on institutional capacity, governance structure, and the availability of strategic and sustainability plans.

The CEO of a grantee organization observed that:

Ford Foundation is very deliberate and painstaking in her selection of grantees. The Foundation really check you out as per your experience, record and ability to perform.

Affirming the rigor of Ford Foundation's grantee selection process, a program officer of another grantee-NGO noted:

The challenge with regards to Ford Foundation's support is getting to become a grantee. It is a tough process, but when you get to become a grantee, you are likely to be supported for many years except you do something really terrible with the funds provided or underperform in a significant way. Ford will assess your capacity, they will ask for your strategic plan and even for a sustainability plan.

A former Program Officer of Ford Foundation corroborated the above accounts noting that:

well we wanted to look for those who can make desired impact... we first of all wanted to target organizations and institutions that had the experience, what we call track record, in dealing with these issues and also

have the capacity to do it, and then those whose interest in doing this work aligns with the theory of change we developed and have integrated programs, so these are three principles.

Part of the strategic considerations in selecting grantees is illustrated in the following perspectives provided by a former Ford Foundation program officer:

On one particular occasion, we tried to bring a leading organization to work on an issue such as child marriage in northern Nigeria under a bigger organization, and then we tried to build capacity of the other organizations to be able to work on the project while at the same time tried to ensure that they implement the activities, this was a grant to ActionAid where we asked them to bring in about 3 or 4 other organizations to work on child marriage prevention and management in northern Nigeria.

- *Support to partners for local and international networking:* Ford Foundation also supported her grantees to engage in productive networking as broadly as possible and to leave “global footprints”, generate learning, and stimulate robust solutions. The CEO of one grantee organization highlighted the Foundation’s support towards capacity building by noting that the:

Creation of opportunity for staff development was something that Ford paid attention to. Ford Foundation facilitated opportunities for our staff to participate in many training to build our capacity. The Foundation also supported us to participate in many conferences and meetings in- and out-of-the-country where we had opportunities to report on our activities and showcase our work: that gave us opportunity for international visibility and networking. The staff of the Foundation also spoke on our behalf to other funders and potential partners and helped us with linkages, including those that gave opportunities for our staff to go abroad on courses.

Another CEO noted that:

Ford Foundation work pattern is a fantastic one and like I said, most times when they do things that they know is going to be beneficial to the organization that they are funding they always invite all of us to come together. One particular one that I can never forget was the involvement of Nollywood actresses and actors ... we were able to put to them that there are issues that the movies that they are doing should be focused on.

3.3. Grant implementation process and the support of Ford Foundation

The Foundation offered its grantees different forms of support to ensure that they deliver the expected impact. These included:

- *Capacity building:* Ford Foundation employed many strategies to support its grantees to develop relevant technical and management capacities. These strategies included training on fundraising and grant management, project implementation, proposal development, and grant report writing. Workshops were also organized to strengthen grantee organizations’ capacity in networking, data analysis, and presentation skills. These training workshops were often led by global and local experts.
- *Information technology support:* During the period under review, the Ford Foundation organized annual information technology training for its grantees. These training

activities sought to improve grantee organizations' capacity in information and communication technology, website administration, and digital security.

- *Learning forums and communities of practice:* The Foundation also held regular grantees' meetings to promote networking, sharing of ideas, and dissemination of learning among grantees. Such forums supported collaboration and enabled grantees to evolve into communities of practice. Grantees were supported to attend relevant national and international research- and program-related events (such as conferences, workshop, and meetings). These events enhanced the global, regional, and national presence of grantees, supported them to build international and local linkages and alliances, amplified their voices at multiple stages, and positioned them for greater impact.
- *Linkage with resources and collaboration:* The Ford Foundation team actively linked grantees with opportunities for improved performance, impact, growth, development, and access to other grants as well as with technical expertise. For example, grantee organizations were linked with Nollywood practitioners to transform their research findings into media contents to improve population-level knowledge and influence social norms and policymakers. Research-media linkages by the Ford Foundation resulted in the movie, *Zara*. The film focused on FGM and was produced by Stephanie Okereke, a leading Nigerian actress. The Foundation also supported grantees to access and utilize development opportunities such as scholarships, fellowships, grants, and capacity strengthening programs offered by other organizations.
- *Support for institutional building:* The Ford Foundation dedicated significant resources and efforts to building the institutional capacity, accounting and management systems, and technical capacity of grantee organizations.
- *Supportive interactions and follow-up by grant team:* Interviewees indicated that the Foundation staff maintained positive, active relationship with grantees, providing regular advice and guidance. Follow-ups were conducted through a variety of means including emails, phone calls, and visits.

4. SECTION 4: YSRHR GRANT-MAKING AND OUTCOMES

4.1. Analysis of the awarded YSRHR grants

This section presents an overall picture of the YSRHR grants that were awarded by the Foundation and highlights their achievements. These achievements are framed within the context of the four outcome areas in the Foundation's theory of change.

4.1.1 Analysis of YSRHR grant-making by organizations

To implement its YSRHR program, the Ford Foundation West Africa office worked with a variety of organizations and institutions, including local NGOs and community-based organizations (CBOs), international NGOs, academic institutions, networks and coalitions, regional groups, and government agencies. Decisions on the organizations for funding were made primarily by the Program Officers in charge of the YSRHR portfolio. These decisions took account of the focus and alignment of the organizations' work in relation to the Foundation's mandate, their track record, as well as the robustness of their systems including registration with appropriate government authority and availability of strategic and sustainability plans. Looking back, the considerable decision-making power of program officers in relation to the amount of grants to be made and the organizations to be supported created loopholes in the grant-making and implementation process. On the one hand, the scenario made the choice of grantee organizations to be largely dependent on the Program Officer. The quality of implementation was also largely subject to the officer's technical knowledge and strength.

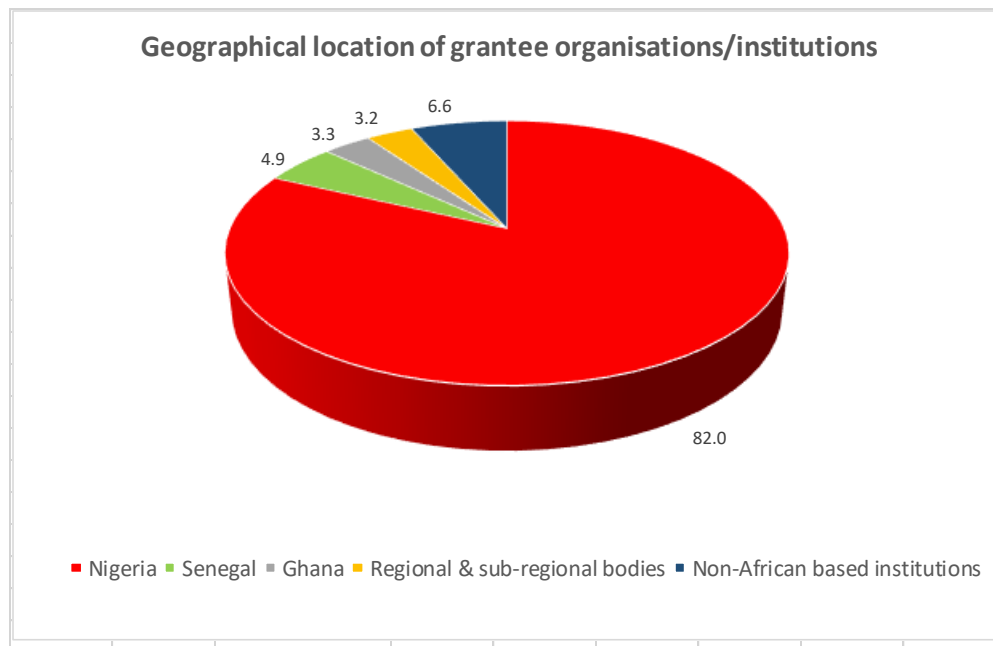
Initially, most of the Foundation's grantees were non-state actors. However, from 2008, increased attention was paid to key government institutions and establishments. This strategic shift may be understood in terms of the natural life cycle of development efforts. Whereas the earlier phase focused on promoting shifts in social norms and changes in the social environment (which NGOs and CSOs are well-suited to lead), the latter phase focused more on sustaining the gains made in the earlier phase, upscaling efforts to increase coverage of interventions, and pushing the boundary of efforts towards sustainability (all of which require governmental support and involvement). It also followed a realization that norms take a long time to change and that political support holds the key to fast-tracking structural changes. Against this background, the Foundation directly partnered with and supported the government of Ondo State. It also indirectly supported the governments of Nasarawa, Lagos, Imo, Kano, Rivers and Ebonyi States through selected NGOs to deliver YSRHR programs between 2008 and 2015. This shift embedded programs on social norms within broader contexts and entailed an implementation arrangement that is government-driven. For example, one Ford Foundation supported program in Ondo State focused on building political support for efforts to address health-compromising social norms related to adolescent and youth sexuality.

In 2002, the Foundation had 40 core SRH grantees, 30 in 2004, and 25 in 2006. A total of 18 organizations received grants from Ford Foundation in 2008, 13 organizations in 2014, and 15 in 2015. This picture shows that the Foundation initially cast its net wide to include a variety of grantees. However, as its grant-making in the region advanced, the Foundation began to focus on fewer tested-and-high-performing organizations. In a way, this reflects that the Foundation was actively reviewing its grant-making process and applying lessons learned over time. Of the 18 grantees funded in 2008, half of them (9) were still receiving grants by the 2014-16 period. Overall, organizations that were funded for the longest period were WHARC (12 grants), GHON (6 grants), Forward Africa (10 grants), Centre for Right to Health (9 grants), AHIP (9 grants), Girls Power Initiative (9 grants), ARFH (3 grants), and AHI (13 grants).

4.1.2 Analysis of YSRHR grant-making by country

More than four-fifths of the organizations that received the Ford Foundation's YSRHR grants were Nigerian-based (82.0%), 4.9% in Senegal, and 3.3% in Ghana. Organizations based outside Africa, but were working on YSRHR issues in West Africa, constituted 6.6% of grantees, while regional or sub-regional bodies received 3.2% of the grants (Figure 2).

Figure 2: Distribution of YSRHR grantee-organizations by country



4.1.3 Analysis of YSRHR grant-making by thematic areas

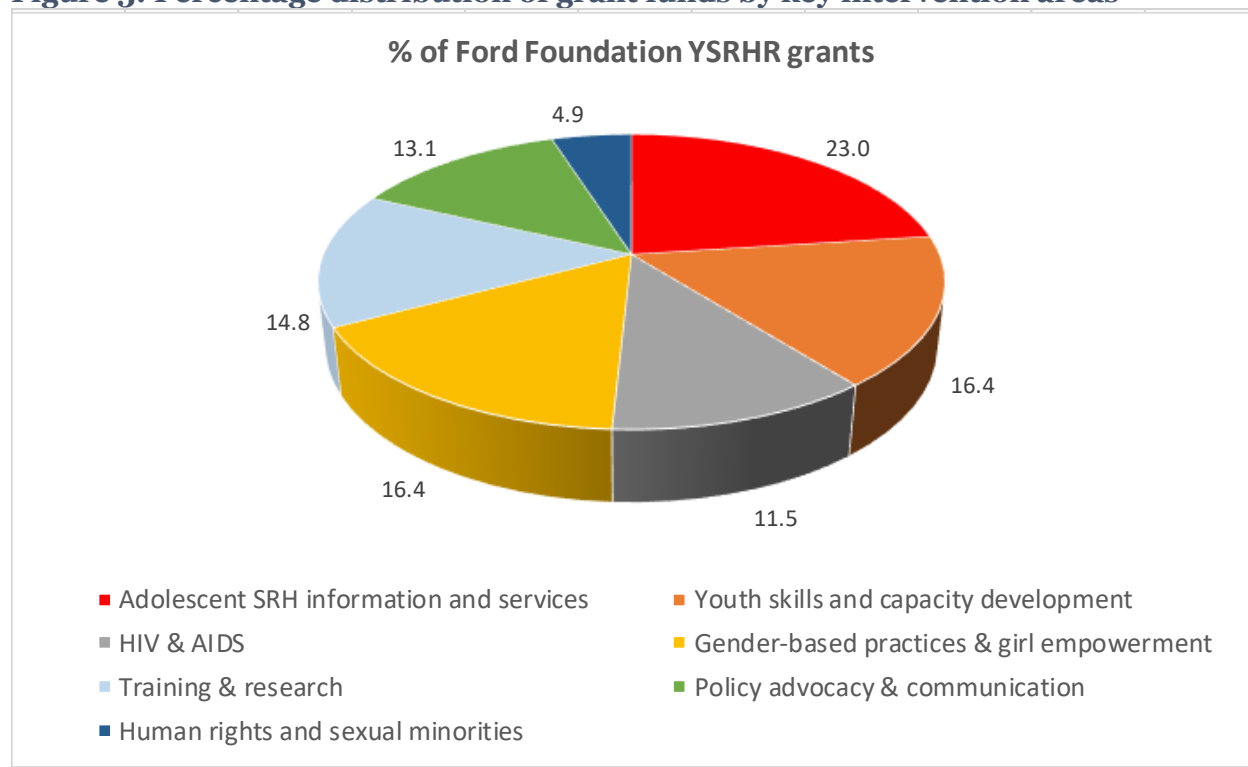
During the 16 years under focus, interventions and projects relating to adolescent SRH information and services (including sexuality education¹⁴) received the largest proportion of the Foundation's grants (23.0%) (Figure 3). Other YSRHR areas funded included youth empowerment and capacity building initiatives¹⁵ (16.4%), projects addressing harmful gender-related practices (16.4%)¹⁶; professional capacity development and research (14.8%); policy development and advocacy (13.1%); HIV-focused interventions (11.5%); and, sexual minorities and human rights issue (4.9%).

¹⁴ Sexuality education activities supported include: development of policies on comprehensive sexuality education; implementation of in-school and out-of-school sexuality education programs.

¹⁵ Youth empowerment and capacity-building initiatives included: skills building.

¹⁶ Harmful gender-related practices and enhancing female empowerment included efforts addressing female genital mutilation and girl-child marriage

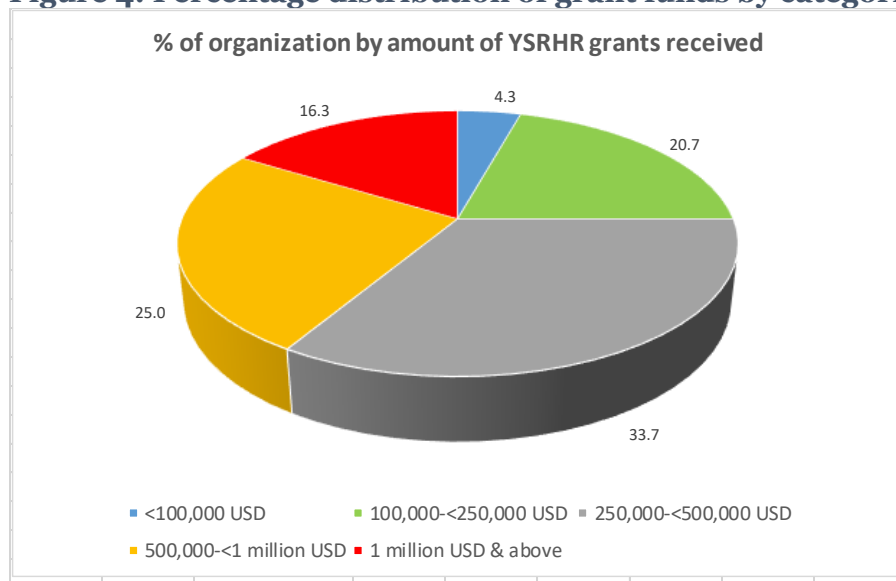
Figure 3: Percentage distribution of grant funds by key intervention areas



4.1.4 Analysis of grants by award size

As Figure 4 shows, 16.3% of the funded organizations received more than one million US dollars; 25% between \$500,001 and one million US dollars; 33.7% between \$250,001 and \$500,000; 20.7% between \$100,000 and \$250,000; and only 4.3% received \$100,000 US dollars or less. The amount and duration of the grants to the organizations also varied. The highest grant given to one organization at any point was \$3,000,000 and the lowest was \$50,000. Interview data indicate that grant amounts depended on practical implementation considerations including types of activities, the geographical reach of the proposed work, and the capacity and track record of grantees.

Figure 4: Percentage distribution of grant funds by categories of awards



4.2. Key grant outcomes

4.2.1 Access to YSRHR information and education

Through grant support to several grantees to develop and implement both in-school and out-of-school family life and HIV education (FLHE) in Nigeria and the HIV curriculum in Ghana, the Ford Foundation provided opportunities for millions of adolescents and youth to benefit from quality sexuality education. Ford Foundation's grantees were instrumental to the initiation of sexuality education in Nigeria. They spearheaded the development of the national policy and curriculum on FLHE as well as the translation of the policy to reality in terms of curriculum delivery. For instance, AHI partnered with and provided technical, financial and logistics support to the National Education Research and Development Council (NERDC)– the agency with the mandate to develop curriculum for secondary schools. AHI also actively partnered with and supported the Lagos State Government in the state-wide implementation of FLHE curriculum in schools. In the 2008/09 session alone, Lagos State reached 468,361 students in her public junior and senior secondary schools with sexuality education sessions¹⁷. The Association for Reproductive and Family Health (ARFH) championed the cause of FLHE in Oyo State. ARFH was also the first organization to introduce adolescent reproductive health (ARH) agenda into schools in North-eastern Nigeria. The Adolescent Health and Information Projects (AHIP) drove the YSRHR education agenda in Kano and Jigawa states in North-West Nigeria, and Girls Power Initiative (GPI) in Cross River State, in the South-south zone. Education as Vaccine against AIDS (EVA) was a forerunner in the use of electronic platforms to deliver the FLHE curriculum, and Community Life Project (CLP) modeled community delivery of FLHE to vulnerable out-of-school youths. Essentially, Ford Foundation YSRHR grantees pioneered youth sexuality education in Nigeria. A former Adolescent Health Program Officer at the Nigerian Ministry of Health noted:

Ford Foundation was at the vanguard of the sexuality and rights issue as concerning young people in Nigeria... they particularly brought the issue

¹⁷ Federal Ministry of Education. Nigeria: Digest of Education Statistics 2006-2010.

of ‘rights’ to the fore and championed the cause of sexuality education.... Including the policy work related to that area.

A similar observation was made by the CEO of an international development organization in Nigeria:

Ford Foundation was very strategic – the Foundation focused squarely on the issues of young people and rights – and did so in a sustained manner... funding the field consistently for so many years even when the gains were slow in coming and the organization was like a lone voice in the field. Ford Foundation was consistent and committed in her focus ...The Foundation supported many of the NGOs that pioneered the work of sexuality education for young people in Nigeria; the support of the Foundation virtually made the national curriculum on sexuality education a reality in Nigeria.

The Foundation’s support enabled several NGOs to reach a broad spectrum of focal and vulnerable population groups with relevant SRHR information and education. For example, grantees such as Journalists Against AIDS (JAAIDS) and Positive Action for Treatment Access (PATA) provided education and information on access to and use of treatment as well as positive living to people living with HIV and AIDS. JAAIDS, through its MONITOR (Monitoring Initiative to Strengthen Accountability and Monitor Implementation of the National Response to HIV/AIDS) project, also conducted nationwide capacity strengthening activities for CSOs and others in budget literacy and tracking. DEVCOMS helped advance Science and Public Health journalism in Nigeria and strengthened the capacity of hundreds of journalists and media practitioners on diverse YSRHR issues. DEVCOM also offered, among others, internships, “immersion” training and other capacity building opportunities for journalists. Many of the NGOs supported by the Foundation developed training manuals, including curriculum, and job aids to further enhance the capacities of different professionals (See examples listed in Annex II).

Case Study: Development and Uptake of the Family Life and HIV Education Curriculum in Nigeria

The story of the successful development and roll-out of the Family Life and HIV Education (FLHE) curriculum in Nigeria illustrates the far-reaching effects of Ford Foundation’s grant-making in Nigeria. The evolution and uptake of the curriculum spanned over a period.

- *Late 1980s-mid-1990s:* Several NGOs supported by the Ford Foundation engaged in the dissemination of research showing the heavy burden of reproductive ill-health among young Nigerians through multiple channels (including grassroots outreach, media campaigns, and policy dialogues). They also used research evidence to advocate for comprehensive youth sexuality education as a cost-effective, gender-sensitive and rights-based response.
- *1995-1998:* Following the establishment of a partnership between AHI and the Sexuality Information and Education Council of the United States (SIECUS), the constituency-building efforts of many NGOs led to the formation, in 1995, of a national coalition of over 80 youth-serving NGOs, key federal agencies, professional bodies, health professionals and donor agencies that helped to develop the *Guidelines for Comprehensive Sexuality Education in Nigeria* which was issued in 1996. The document set out the framework for age-appropriate, medically accurate information on a broad set of topics related to human development, RH, gender roles, relationships and intimacy, abstinence, HIV and other STIs, and contraception. Key Ford Foundation grantees such as AHIP based in northern Nigeria, AHI and ARFH in the southwest, and Girls’ Power Initiative in the south-south, were among the earliest

organizations to adapt and model youth sexuality education programs in schools and youth centres. They also spearheaded advocacy for the development and official adoption of a national sexuality education curriculum.

- *1999-2001*: AHI facilitated a process that culminated in the National Conference on Adolescent Reproductive Health in Nigeria in 1999. This historic conference formally called on the Nigerian government to develop and adopt a national comprehensive sexuality education curriculum. This call was heeded and Foundation grantees, especially AHI, supported the drafting and inclusion of the curriculum in the agenda of the 2001 meeting of the National Council on Education, the highest education policy-making body in Nigeria. The Council approved the curriculum for implementation in specified levels (upper primary, junior secondary, secondary and tertiary) of the educational system. The curriculum comprehensively covered 6 themes geared towards furnishing students with information on human sexuality and related competencies from childhood to adulthood.
- *2002-2006*: Success threw up new challenges. With its approval, the curriculum suddenly became a subject of intense, largely negative, media attention. In response to opposition to its expanded roll-out, the Nigerian government, in 2003, decided to revise the curriculum, changing its title to the ‘more acceptable’ National Family Life and HIV Education Curriculum. Topics such as contraception, masturbation, sexual orientation and sexual dysfunction were expunged from the sessions for upper primary and junior secondary schools but retained for senior secondary school level. The Foundation’s grantees and other committed actors continued working with several willing state governments to implement the curriculum.

4.2.2 Availability of, access to, and uptake of AYFHS and other YSRHR-related services

The earliest models of adolescent and youth-friendly services (AYFHS) in Nigeria were designed and tested by Ford Foundation grantees such as AHI and ARFH¹⁸. The experiences garnered from the implementation of their services informed the development of Nigeria’s first Clinical Protocol and Service Guidelines for Adolescent Health Services in 2001 with the minimum standard for adolescent-friendly services specified¹⁹. ARFH, among others, in addition to running its own AYFHS, partnered with the Oyo State Ministry of Education and Ministry of Health to develop and implement an expanded FLHE approach named Expanded Life Planning Education that integrated FLHE with the provision of AYFHS to young people in public primary health care facilities. Ondo State government, with the support of the Ford Foundation, also introduced adolescent and youth-friendly services in her secondary health facilities between 2012 and 2014. In 2013, through funding by Ford Foundation, the Planned Parenthood Global and Women Friendly Initiatives (in partnership with the Federal Ministry of Health(FMOH) and the National Primary Health Care Development Agency) successfully spearheaded the development of the *National Guidelines for the Integration of Adolescent and Youth-Friendly Health Services into Primary Health Care Facilities* and the *National Guidelines for Promoting the Access on Young People to Adolescent- and Youth-Friendly Health Services in Primary Health Care Facilities respectively*. The Foundation also supported Planned Parenthood Global to partner with FMOH and NPHCDA to develop the *National Adolescent- and Youth-*

¹⁸ Federal Ministry of Health. 2009. Assessment report of the national response to young people’s sexual and reproductive health in Nigeria.

¹⁹ Fatusi AO. *That We All may Prosper and be in Health: The Primacy, Premises, and Promises of Adolescent and Reproductive Health*. Obafemi Awolowo University Press, Ile-Ife, Nigeria. 270th Inaugural Lecture Series of the Obafemi Awolowo University, Ile-Ife, Nigeria. 2014

Friendly Job Aids for Service Providers in Primary Health Care Facilities in Nigeria in 2015.

In addition to access to AYFHS, the Foundation's grantees significantly facilitated youth access to and uptake of other crucial sexual and reproductive health services that were then relatively scarce for at-risk and marginalized groups. Examples include the grants to the Medical Missionaries of Mary which supported vesico-vaginal fistula (VVF) treatment and prevention services, IPAS which provided post-abortion care and prevention of unsafe pregnancy service, and Pathfinder which supported safe motherhood services among hard-to-reach groups and populations.

4.2.3 Capacity development

Capacity building for individuals as well as for organizations was integral to the grant-making of Ford Foundation in West Africa. Young people's access to capacity and skills development opportunities, including entrepreneurship, life skills, and livelihood skills development was significantly improved through the work of the Foundation grantees. Initiatives such as the economic empowerment program implemented by Health Matters in slum areas of Makoko in Lagos supported poor young out-of-school people in entrepreneurship and skills acquisition, equipping them with relevant trade tools and start-off funds. AHIP, with its Institute of Human Development, for example, was actively engaged in developing young people's entrepreneurship and YSRH skills through various training and economic empowerment activities. The Girls Power Initiative established in- and out-of-school clubs through which it reached and supported the development of the capacities of many young females. Young people were also beneficiaries of capacity-development and life-enhancing agenda through access to friendly youth services established by several of the NGOs supported by Ford Foundation, including AHI and ARFH. These young people were trained as peer educators to work with other young people in health service settings operated by NGOs, in school and out-of-school contexts and in drop-in-centres (such as those established and run by Youth Profile).

Educational and fellowship programs supported by the Foundation enabled many young people to build careers, expand their skills and networks, and pursue academic training. Among others, the Foundation supported young activists and professionals to participate in the Sexuality, Gender and Rights Institute held in Turkey and in other locations. Through its International Fellowship Program, the Foundation also funded some professionals and practitioners to receive training in various fields in world-class institutions. As one beneficiary, a young female YSRHR activist, noted:

I had an opportunity to participate in a 3-week Sexuality, Gender and Rights Institute (SGRI) program in Turkey in 2012 with the support of Ford Foundation. As a young feminist leader and NGO operative who has been running programs on adolescent and youth sexual and reproductive health and rights, participation in the SGRI gave me a deeper understanding and global perspective on sexuality as well as global visibility as well as an opportunity to reflect on my work and even clarified my values. The SGRI also provided me with the opportunity of bringing the unique perspective of the YSRHR work in rural Nigeria to the table and thereby contribute to the information and education of co-participants. I have also been privileged to attend some editions of the African Conference on Sexual and Reproductive Health with support on some occasions from Ford Foundation through AHI. I have grown considerably in professional terms through these exposures and my organization has also gained through my experiences and our work has achieved greater visibility and traction.

The Foundation also established the African Regional Sexuality Research Centre in 2003 as part of its “Global Dialogue on Sexual Health and Well Being” initiative. The Centre, which is housed in AHI, provides a platform for the continued development of young scholars in Africa in sexuality research and scholarship. It aims to network young researchers with more accomplished ones who serve as resource persons and role models. This initiative catalyzed opportunities for mentorship networking among promising scholars through its annual African Sexuality Leadership Program. Many of the over 100 alumni of the program have gone on to pursue graduate education in related fields. The program continues to attract fellows from all over Africa and beyond.

The capacity of other stakeholders involved in YSRHR programming was also strengthened through a range of technical, managerial, and financial skills support facilitated by the grants from the Ford Foundation. Various grantees supported service providers in the health, education and other social sectors with training and exposure to new skills and competencies. Government staff of various cadres participated in several of the initiatives driven by Ford Foundation’s grantees and received training for their different jobs and duties. Among others, grantees worked with school heads and teachers to strengthen their capacity to deliver the school-based sexuality education (FLHE) in Nigeria. An evaluation of the FLHE indicated that the knowledge of teachers on sexuality and their awareness of gender improved tremendously following training on the delivery of the FLHE curriculum. The FLHE also equipped teachers with the competencies and pedagogical skills to be more effective in delivering lessons on human sexuality and gender²⁰.

In terms of organizational capacity development, Ford Foundation employed a three-fold strategy for institutional support that involved: provision of funding and technical support for the capacity strengthening of staff and grantee organizations; twinning of smaller and less experienced NGOs with bigger and more experienced NGOs; and linking of grantees to critical development opportunities.

The Ford Foundation offered workshops to grantee organizations to capacitate them to achieve their goals and foster change in the field. These activities aimed to enable sustainability in the future when funding may have ceased. The capacity-building activities spanned critical areas such as organizational life – technical, managerial, financial, communication, and others. Technical experts were engaged by Ford Foundation to facilitate these programs. Significantly, and as an act of great foresight, Ford Foundation supported 12 organizations to acquire and develop properties, including lands for their permanent office buildings and in some cases guesthouses to sustain their program activities for the foreseeable future.

As noted earlier, Ford Foundation’s strategy of working with experienced NGOs to mentor younger and emerging ones improved NGO and CSO capacity throughout the region. Under this mentorship arrangement, for example, Life Vanguard, Osogbo, was mentored by the more established ARFH, Ibadan; and Owan Women’s Empowerment Project with the well-established WHARC, Benin. ARFH Ibadan also mentored several NGOs in Kebbi, Bauchi, and Plateau States for a period of 12-24 months.

Ford Foundation also actively networked its grantees with other funding agencies and connected them to regional and global groups of community of practice to further build their capacities,

²⁰ Udegebe BI, Fayehun F, Isiugo-Abanihe UC, Nwagwu W, Isiugo-Abanihe I, Nwokocho E. , Evaluation of the Implementation of Family Life and HIV Education Programme in Nigeria. *African Journal of Reproductive Health* June 2015; 19 (2): 79-93.

skills, and reputation. Several of the organizations' former grantees are still major national, regional, and global players in the YSRHR field as exemplified by AHI, AHIP, ARFH, and WHARC

Many other grantees have also become pioneers and leaders in their areas of technical operation, for example, the International Center for Reproductive Health and Sexual Rights (INCREASE) in the area of reproductive rights for sexual minorities; Development Communications Network (DEVCOMS) in promoting health communication and policy advocacy; Positive Action for Treatment Access (PATA) in advancing the rights and empowerment of women living with HIV and AIDS and monitoring of HIV program funding; Center for the Right to Health (CRH) on health and human rights; the Inter-African Committee on Traditional Practices Affecting the Health of Women and Children in the area of FGM elimination; and, EVA in online SRHR education and programming for young people.

4.2.4 YSRHR Policy environment

Policy advocacy and development is essential for fostering changes and achieving transformation. Youth SRHR policy development and policy advocacy were core areas of focus by the Ford Foundation. The Foundation grantees played critical roles in the development of several policies relating to YSRHR in the region. A few examples, drawn from Nigeria, where the work of the Foundation's grantees resulted in tangible changes in the policy environment are offered below.

- Enactment of new legislations outlawing FGM and widow maltreatment in several states, including Edo, Cross River, Enugu and Oyo States, due partly to the advocacy efforts of Ford Foundation grantees, with the Inter-African Committee on Traditional Practices Affecting the Health of Women and Children (IAC) particularly at the forefront of the effort. IAC is a global champion for the eradication of FGM with experience spanning more than three decades. IAC's work focused largely on the African continent where it had built partnerships with leaders at various levels, through robust advocacy. In Nigeria, among others, IAC provided technical and logistical support to the Federal Ministry of Health in the development and public presentation of the National Policy and Plan of Action for the Elimination of FGM in 2003. IAC was also actively engaged in advocacy to ensure the implementation of the policy. The organisation worked with several state governments to develop the required policy and programmatic efforts to address FGM. IAC initiated and passionately promoted the annual Zero Tolerance Day to raise awareness about female genital mutilation. The efforts of IAC resulted, among others, in the Abidjan Declaration of Commitment of 2007.
- Development of national policy documents on adolescent-friendly services: The support of Ford Foundation facilitated the development of the National Guidelines on Promoting the Access of Young people to Adolescent- and Youth-Friendly Services in Primary Health Care Facilities in Nigeria by the Women Friendly Initiative. The Foundation also supported the development of the National Guidelines for the Integration of Adolescent and Youth Friendly Services into Primary Health Care Facilities in Nigeria by the Planned Parenthood Global, as well as the development of the job aids on adolescent-friendly health services in Nigeria. Ford Foundation grantees were crucial stakeholders in the development of the National Policy on the Health and Development of Adolescents and Young People in Nigeria.
- Policy on the establishment of adolescent and youth-friendly health services in Ondo State: The partnership and funding support of Ford Foundation facilitated the political prioritization of young people's health challenges in Ondo State. Following sustained

engagement and outreach by grantees, the Ondo State government developed the Strategic Framework and Action Plan for Advancing Young People’s Health and Development. The state also rolled out adolescent-friendly health services (AYFHS) and created a budget line to fund the AYFHS program.

- Convening of Nigeria’s first national conference on community development by Community Life Project (CLP) in 2007. This conference, which also held in 2009 and 2011 was supported by the Ford Foundation. Through these efforts, CLP has become a national champion in the integration of HIV/AIDS into the Primary Health Care (PHC) system. It has also worked extensively on community-based SRH and HIV/AIDS awareness with the support of Ford Foundation.

4.2.5 Research

As part of the Ford Foundation’s strategy to support evidence driven policy and promote change in YSRHR, it actively funded research and researchers, including independent and institution-based groups (such as the Ibadan Social and Evaluation Research Team [ISERT] of the University of Ibadan), NGOs (such as WHARC and AHIP), and global institutions (such as the Takemi Program of the Harvard University, United States). The scope of studies supported by the Foundation was broad, including, for example, baseline assessment surveys of adolescent and youth-friendly health services (AYFHS), evaluations of AYFHS initiatives and the implementation of Family Life Education in Nigeria. Also funded was research on child marriage; FGM and girl child education; adolescent reproductive health; HIV care, management and budgeting in Nigeria; and gender-based violence in West Africa.

Most of these were pioneering studies in the region and served as baseline and reference points for future research. The studies provided insights that stimulated further research in the field. The evidence generated from these studies informed the development of programs, policy advocacy strategies, and policy frameworks. Ford Foundation also actively encouraged and supported grantees to strategically disseminate their studies. For example, the Foundation supported the national dissemination of research on early marriage conducted by an independent researcher in 2013/2014. It worked with the Champions for Change (C4C) in the dissemination of evidence and its use for policy advocacy and supported the 52-week training program of the Population Media Centre in Northern Nigeria.

One of the influential studies supported by the Foundation (“Mapping early marriage in West Africa”²¹), presented the trends of child marriage in the region, examined the causes of early marriage and highlighted best practices towards addressing early marriage. While the evidence of the impact of this report in programmatic and policy terms has not been systematically documented, it undoubtedly improved awareness and knowledge of the challenge of child marriage and potential interventions in West Africa, contributed to global evidence on YSRHR, and presented policy advocates with a veritable tool for engagement. This landmark report remains one of the most frequently cited studies by different development institutions working on child and early marriage in West Africa. The Foundation also supported the translation of research findings into media materials. This ensured the wide dissemination of evidence, stimulated community discussions and actions, motivated change in harmful practices and negative gender-related social norms; and sparked policy actions. An outstanding example in this regard is the film “Dry”, produced in 2014, which focused on early child marriage and the associated problem of vesico vaginal fistula. The premiere show, held in Abuja, targeted key

²¹ Walker, J. 2013. “Mapping Early Marriage in West Africa: A Scan of Trends, Interventions, What Works, Best Practices and the Way Forward.” Ford Foundation

policymakers and activists. Mobile film shows and magnet community dramas were also used by the Foundation's grantees to reach communities with key messages, facilitate dialogue, and create grassroots awareness on key SRHR issues.

Grants by the Ford Foundation to the African Journal of Reproductive Health and the Takemi Program of the Harvard University represent a unique dimension of the Foundation's work in research and knowledge production in West Africa. The Takemi Fellowship in International Health at the Harvard School of Public Health "is an interdisciplinary research program that focuses on the problems of mobilizing, allocating, and maintaining limited resources to improve health". Ford Foundation supported several highly promising mid-career scholars from West Africa to participate in the program as Fellows, enabling them to undertake and publish high-quality research on priority YSRHR issues in West Africa. Many of the Fellows have remained active in academic activities (teaching, research and knowledge production), in the development and mentoring of other scholars, and in policy engagement in the region.

Case Study: The African Journal of Reproductive Health

The African Journal of Reproductive Health (AJRH) is a multidisciplinary and international journal published by WHARC. The journal was started in 1997 and is, currently, the leading scientific outlet for reproductive health knowledge in Africa. Of the 138 journals published in Nigeria in 2005, the AJRH was ranked as the best by the National Universities Commission. AJRH published high-quality original research, comprehensive review articles, case reports and commentaries, and it is abstracted and indexed in leading health research databases such as PubMed Medline, Social Sciences, Citation Index, and African Journal, online. According to Okonofua and Omonkhua (2017):

The Ford Foundation, New York provided the first funding support for establishing WHARC and founding the AJRH. Indeed, the program officer based at the Ford Foundation's West African Office at the time, Dr. Natalia Kanem, now Assistant Secretary-General of the United Nations and Deputy Executive Director (Programme) at the UNFPA, was the major catalyst that helped the founding of WHARC and the establishment of the AJRH.

The journal has appeared regularly since its inception and has also published several special issues on YSRHR over the years. It has gone up from its original tri-annual schedule (April, August and December) to a quarterly journal, with special supplements published at various times of the year. WHARC published the journal three times a year initially (1997 to 2004), and since 2005, four times a year. By its 20th anniversary in 2017, AJRH has published 21 volumes, 72 issues, and over 1000 articles²².

The journal draws authors from both the developed and developing countries and serves as a major avenue for disseminating and sharing reproductive health and rights research findings relating to Africa. The journal's content is in both English and French languages. Its current edition (Volume 22, No. 1 of 2018), for example, contains articles on family planning, infertility, pregnancy and delivery, adolescent health, female genital mutilation drawn from Nigeria, Mali, Uganda, Kenya, and South Africa.

²² Okonofua F, Omonkhua A. African Journal of Reproductive Health at 20: Looking Back and Looking Forward. *Afr J Reprod Health*. 2017 Mar;21(1):11-17.

4.3. Unexpected/unplanned consequences of the program

The major negative unexpected consequences of the program are the pushback experienced from conservative groups and sometimes government agencies on some YSRHR-related initiatives, such as sexuality education. AHIP, for example, experienced considerable hostilities from some sections of the society in Northern Nigeria. The organization was barred from entering some communities and its staff were intimidated by some conservative leaders, communities, and stakeholders. The Foundation's grants resulted inadvertently in intensifying opposition to open discussion of sexuality in schools some settings. Some sectors of the society saw the programs that were supported by the Foundation as aimed at entrenching western attitudes and culture. Interestingly, the governments in some of these states, although they have previously partnered with several Foundation grantees, chose to stay silent in the face of the intimidations experienced by the grantees. This scenario can possibly be interpreted as the desire of such state governments to maintain a state of political correctness in an environment where significant socio-cultural and religious barriers exist with regards to issues such as youth sexuality and sexual rights. Fortunately, the oppositions experienced by the grantees in this regard were short-lived. The increasing prevalence of HIV and AIDS raised the consciousness of stakeholders about the need for youth-directed prevention intervention and softened the ground for the implementation of a school-based sexuality education intervention. Consequently, the sexuality curriculum gained wider acceptance when it was re-branded as: Family Life and HIV Education curriculum. This helped relieve the pushback from the conservatives and enabled the grantees to gain some traction with respect to school-based sexuality education interventions.

There were also failures of some of the recipient organizations to achieve desired objectives or live up to expectations. For example, two promising NGOs that benefitted from the twinning support and later transitioned into independence folded up after nearly a decade of sustained support from Ford Foundation. The organizations ran into operational difficulties after two premature leadership changes. In one case, a rural-based grantee organization was also unable to attract quality personnel to its location.

4.4. Potential for sustainability of results and impacts

Within the two years that the funding from Ford Foundation had stopped in 2016, virtually all the organizations interviewed during this review have continued to function, although not without difficulties. About two-fifths of the grantees interviewed indicated that they have had some difficulties in generating resources to continue their work or maintain its tempo. Yet, it is noteworthy that the key recipient organizations of the YSRHR grants have remained the leaders in their various areas of focus. The African Journal on Reproductive Health (AJRH) published by WHARC, as noted earlier has retained its position as a leading specialized journal on reproductive health issues not only nationally but in the African continent. The International Centre for Sexual Reproductive Rights (INCREASE), Minna remains a foremost player in capacity building and programming on sexuality and reproductive rights for sexual minorities. AHI continues to be a leader in the field of school-based sexuality education, and AHIP has continued to be the frontrunner in YSRHR policy, advocacy and programming in northern Nigeria. Till date, the Center for the Right to Health remains, perhaps, the strongest proponent and promoter of the principle of health as a fundamental human right among Nigerian NGOs. Many of these leading NGOs have demonstrated the ability to attract funding from other funders, mostly internationally.

The following insight shared by the CEO of one of the grantee organizations reflects the typical experience reported regarding the relationship between the supports received from Ford Foundation and the potential for receiving funds from other funders:

The good thing is that Ford Foundation grants enabled us to have a strong foundation and it was the grant that enabled us to also have strong institutional growth and with that we were able to leverage attention, we built our capacity and we were able to get funding from other organizations. One of these beautiful ones was that we were able to do what we call consortium; we became an organization that others could come to partner with to seek bigger grant, so there was a multiplier effect.... We did that for Society for Family Health and we did that over a 5-year period, for example.

Grantee organizations have also used innovative approaches to sustain their SRHR focus, particularly by integrating it into other platforms and programs. The CEO of one grantee organization reported that:

Sustainability is actually a difficult issue. What we are trying to do is to ensure that all our youth-related interventions that we got funding for even if they are not for SRH we integrate SRH into all of them. We have youth-funded work for empowerment...in the area of livelihood empowerment, skill acquisition, and other trainings. Each time we have such kind of funding we put sexual reproductive health and contraceptive knowledge into it, life-skill training, communication, gender: we put all of those into those packages even when the funder was especially interested in just livelihood thing, so that is how we have been doing it.

It is also noteworthy that several grantee organizations have become global players. For example, AHI has continued to feature prominently on adolescent reproductive health and youth sexuality issues in Africa and globally. AHI is also the main convener of the African Conference on Sexual and Reproductive Health, the 8th edition of which held in South Africa in February 2018, with the theme, “Advancing the Sexual Health and Reproductive Rights of Girls and Women in Africa”. AHI also remains the host of the Africa Regional Sexuality Resource Center and continues to successfully attract outstanding resource persons, scholars and practitioners. Many of the fellows trained at the Centre are currently leading key SRHR organizations and initiatives across Africa and beyond. For instance, UHAI, an LGBT organization based in Nairobi is currently led by persons trained under AHI sexuality leadership institute. ARFH has also grown considerably as a national NGO with great public health portfolio, retaining a strong focus on YSRHR although it has also expanded its activities to other priority public health areas. For example, in addition to receiving funds from the Global Funds on AIDS, Tuberculosis and Malaria (GFATM) to implement FLHE across the 36 states under round nine grants, ARFH has also received funds from GFATM for the control of Tuberculosis.

Several factors explain the success of some of the Ford Foundation grantee organizations. These include:

- a) The Foundation’s early focus on sustainability: Ford Foundation supported many of its grantees to develop and implement a sustainability plan as part of the requirements for receiving grants. The Foundation also closely monitored the grantees’ implementation, fidelity and commitment to their sustainability plans.
- b) The priority that Ford Foundation placed on capacity development and institutional strengthening and high level of technical skills positioned many of its grantees for successful partnerships with several global organizations. International development partners such as the United Nations Children’s Fund (UNICEF), Global Fund for AIDS,

- Tuberculosis and Malaria, MacArthur Foundation, and the National Urban Reproductive Health Initiative are currently funding some of the past grantees of the Ford Foundation.
- c) Strategic investment by Ford Foundation in permanent offices structures for some of the leading NGOs has resulted in their capacity to continue to generate some funds to support their activities and reduce the cost of their operations as they do not pay office rents.
 - d) Working with grantees to align their programming and activities with national priorities has ensured the continued relevance of their work.

It is important to highlight that the paucity of local philanthropy in support of YSRHR issues is a major limitation to the potential of the grantees to generate more funds to support their work. Local philanthropy would particularly have been quite helpful to the smaller NGOs that lacked the capacity to favorably compete for grants at the international scene. Such local philanthropy, if in existence, would have augmented and continued the work that Ford Foundation was doing in identifying and supporting young but promising CSOs directly and indirectly (for example, through the twinning approach).

5. SECTION 5: DISCUSSION

Over a 16-year period, Ford Foundation invested approximately \$56 million in youth sexual and reproductive and rights (YSRHR) in West Africa. This section presents our reflections on the work funded by the Foundation, its impact and sustainability.

Based on the review, we conclude that the work done by Ford Foundation's grantees resulted in substantial positive results at individual, organizational and societal levels. The Ford Foundation's grant support resulted in enhanced in-country capacity for YSRHR programming, improved access to YSRHR information, services and interventions, and engendered a more supportive policy environment. In specific terms, the work of the grantees supported by the Foundation resulted in the development of new policies, guidelines, and curricula that expanded the frontier of service delivery, and interventions' coverage as well as stimulated improved policy response. The funding from the Foundation particularly strengthened NGO actors and created opportunities for them to play significant roles in addressing key YSRHR issues and to appropriately partner, where possible, with state actors to contribute substantially towards the improvement of YSRHR situation. The efforts of the Foundation's grantees in this respect cut across a wide spectrum of the YSRHR issues, including sexuality education, adolescent SRH services, maternal mortality, VVF, HIV, FGM and other gender-based violence, and women/girls' empowerment.

While it is not possible, going by the nature of this review, to document impact in the classical evaluation sense, based on our technical considerations we adjudged the grants awarded by the Ford Foundation to have contributed substantially to reducing the burden of YSRHR and improving the overall YSRHR situation in Nigeria. On the one hand, there is a well-known logical link between the ultimate goal of improving YSRHR status and the immediate results achieved by the grant-making, namely, improved access to YSRHR information and education; improved access to adolescent and youth-friendly health services; increased access to capacity and skills development opportunities; and, improved YSRHR-supportive policy environment. This logical link, which is elucidated in the theory of change that is associated with the Foundation's YSRHR grant-making portfolio, is in tandem with extant knowledge and practices in the adolescent health field globally^{23,24}.

Secondly, the interventions by grantees defined several key moments in the trajectory of YSRHR agenda in West Africa: several of the interventions funded were of pioneering nature and provided the momentum that attracted other stakeholders to positively act towards improving YSRHR. The national sexuality education curriculum in Nigeria provides a good example of that; the Foundation's grantees initiated the curriculum development process in Nigeria, stimulated the process for national approval, and spearheaded the implementation in schools and at community levels in selected states.

Thirdly, we also note that many of the programs of the grantees had a catalytic effect in terms of providing a platform for system-wide and state/nationally-oriented actions. In the area of adolescent and youth friendly health services in Nigeria, for example, the Ford Foundation grantee organizations spearheaded the development of the following key national policy-related and program implementation guidelines in partnership with relevant government agencies: National Guidelines for the Integration of Adolescent and Youth Friendly Services into Primary Health Care Facilities; the National Guidelines on Promoting the Access of Young people to

²³ World Health Organization. 2016. Global Accelerated Action for the Health of Adolescents (AA-HA!) framework

²⁴ Patton GC, Sawyer SM, Santelli JS, Ross DA, Afifi R, Allen NB, et al. 2016. Our future: a Lancet Commission on Adolescent Health and Wellbeing. *Lancet*. 387(10036):2423-78. doi: 10.1016/S0140-6736(16)00579-1.

Adolescent- and Youth-Friendly Services in Primary Health Care Facilities; and, job aids for AYFHS.

Fourthly, we recognize that, during the period under review, Ford Foundation was a dominant donor focusing on youth sexuality and supporting non-state actors and there were very few actors involved in the YSRHR field in Nigeria and West Africa as a whole. Thus, there is a strong likelihood that the Foundation's grants contributed to the improved YSRHR status in the period under review as evidenced in the report of national surveys such as the Nigeria Demographic and Health Survey (NDHS).

As the reports of the NDHS show, Nigeria recorded improvements in YSRHR-related knowledge and behavior between 2000 and 2016. Contraceptive knowledge increased from 42.7% to 67.0% for adolescents aged 15-19 years and from 62.8% to 83.1% among youth age 20-24 years between 2008 and 2013. Similarly, the proportion of adolescents (aged 15-19) with comprehensive HIV knowledge increased from 11.4% in 2003 to 19.7% in 2008 and 22.4% in 2013, while an increase from 18.1% in 2003 to 24.8% in 2008 to 26.8% in 2013 was recorded among youth aged 20-24 years. The median age at first sexual intercourse among females also increased from 16.7 years in 2008 to 17.8 years in 2013. Furthermore, the proportion of sexually experienced young people in Nigeria using contraceptives increased from 64.9% in 2003 to 67.0% in 2013 among adolescents (age 15-19 years), and from 76.8% to 83.1% among youths (age 20-24) in the same period. In tandem with that trend, the adolescent fertility rate (births per 1000 women aged 15-19) reduced from 133/1,000 girls in 2000, 125/1,000 in 2006, to 112/1,000 in 2014²⁵.

While causality cannot be established, these positive changes in SRHR-related knowledge and behavior are likely to be linked to improved access to YSRHR information/education and services as studies have shown that exposure to appropriately delivered age-targeted sexuality education curriculum has an association with improved SRH knowledge and behavior^{26,27,28}. Studies in Nigeria have also specifically documented the positive effects of the FLHE curriculum on improved SRHR knowledge among students as well as on teachers' pedagogical approaches to curriculum delivery^{29,30}. With the pioneering efforts of Ford Foundation's grantees in the field of sexuality education in Nigeria, we, therefore, believed that the Foundation has made significant contribution to improved SRHR-related knowledge and behavior among young people in Nigeria. Ford Foundation's grantees further contributed to improved SRHR targeted at reducing the burden of maternal morbidities (for example, VVF), maternal mortality, HIV, and gender-based violence/harmful practices (for example, FGM). Furthermore, the work of several of the Ford Foundation's grantees, particularly those focusing on integrated youth health development, significantly contributed to health and economic empowerment of young people. Together, these

²⁵ Cortez R, Saadat S, Marinda E, Odutolu O. Adolescent fertility and sexual health in Nigeria: Determinants and Implications. Health, Nutrition and Population (HNP) Discussion Paper Series. 2016. Washington DC, The International Bank for Reconstruction and Development / The World Bank

²⁶ Fonner VA, Armstrong KS, Kennedy CE, O'Reilly KR, Sweat MD. School-based sex education and HIV prevention in low- and middle-income countries: a systematic review and meta-analysis. *Plos One* 2014; 9 (3): e89692.

²⁷ Haberland N, Rogow D. Sexuality education: emerging trends in evidence and practice. *Journal of Adolescent Health* 2015; 56 (1) Supplement: S15-S21

²⁸ United Nations Population Fund (UNFPA). How effective is comprehensive sexuality education in preventing HIV? Evidence Brief. UNFPA, UNFPA East and Central Africa Region. Available at <https://esaro.unfpa.org..files.pdf>

²⁹ Esiet AO, Esiet U, Philliber S, Philliber WW. Changes in knowledge and attitudes among junior secondary students exposed to the family life and HIV education curriculum in Lagos State, Nigeria. *Afr J Reprod Health*. 2009 Sep;13(3):37-46

³⁰ Wood SY, Rogow D. Can Sexuality Education Advance Gender Equality and Strengthen Education Overall? Learning from Nigeria's Family Life and HIV Education Program. New York: International Women's Health Coalition, October 2015.

contributions increase the chance for transition to healthy and productive adulthood among young people in West Africa.

A major concern in development work has been the sustainability of funded initiatives and programs. Two of the questions stated for the review reflect this concern: (i) Are the main recipient organizations of the Ford Foundation's funding sustainable, are they still central and will they likely be central to the field in the long term? (ii) What is the status of the programs/projects seeded by the Foundation? The findings from this review showed that almost all the key recipient organizations are active in the field and have retained their leadership position within the national YSRHR arena in Nigeria. However, this is not to suggest that the organizations have not experienced challenges following the cessation of the Foundation's YSRHR grants. Indeed, nearly all the grantees reported that they have experienced difficulties related to funding for their work. Not surprisingly, the well-established grantees who also received long-term funding have surmounted these challenges better than smaller and younger organizations. The well-established organizations, drawing on the capacity built during the era of Ford Foundation's funding, have been able to attract funding from other sources for their work. It is also interesting to note that the grantee organizations have continued to show strong commitment to YSRHR such that they are able to innovate and integrate YSRHR issues to their other funded non-YSRHR youth development works.

A major strategic approach used by Ford Foundation towards ensuring the sustainability of her major grantees is providing them with support – financial and advisory – to build or acquire their own permanent office accommodation, some of which also have various facilities for resource generation. While such an approach is generally uncommon within the donor community and considerable differences in opinion may exist with regard to this approach, we are strongly of the opinion that this is an innovative and forward-looking approach with high potential for ensuring significant financial stability to the grantees for the future. This approach is particularly important when one considers the high and continuously rising cost of office accommodation in most towns in Nigeria and set against the uncertainty and vagaries of grants and resourcing of non-state actors. This approach is particularly important in the field of YSRHR where there are only few committed donor agencies and with limited financial capacity, and the shifting nature of donors' priorities and focus. Thus, this approach enables the grantees to be in a more resilient position where they can readily weather the fluctuations in the YSRHR grant field, ensuring some levels of stability in their work in the field.

6. LESSONS LEARNT AND IMPLICATIONS FOR FUTURE GRANT-MAKING

This section draws together lessons from the YSRHR work of Ford Foundation West Africa office. The goal is to articulate insights for future programmatic work and action by the Foundation and other donors.

6.1. Lessons learned

Many lessons can be gleaned from the grant-making of the Ford Foundation to YSRHR programs in West Africa. These include:

- *Careful selection of grantees and grantee organizations is a key success factor.* Criteria considered in the selection of the organizations included their track record, potential foster change in YSRHR outcomes, and alignment of the organization's vision with the Ford Foundation's YSRHR agenda. In addition, certain documentations were required from grantees and these were reviewed to determine their strengths and potentials. The rigorous process of selecting grantees ensured that the best and most promising organizations received funding support. It also enabled the Foundation's staff to identify the challenges facing the grantees and to support them to address these early on.
- *Strategic investment in the development of the grantees matter for the short and long haul:* For grantees to be at the cutting-edge of performance and achieve optimal impact, a critical need existed to invest in them over a period.
- *Flexibility in programming and the quality of the relationship between the grant awarding organization/team and the grantees are important:* The dynamics of development work call for a high-level responsiveness and nimbleness and is best facilitated by flexible approaches where both grantees and funders trust each other and jointly drive an agenda. Programmatic strategies and approaches also need to change as new issues emerge. Effective donor-grantee relationships hinge on respect, joint planning, and collaborative problem-solving.
- *Strong focus on research and the use of evidence for programming and policy-making:* Investments in rigorous research and the application of research results in programming and in policy advocacy hold the key to successful interventions.
- *Robust and strength-based partnerships and coalition-building are important for optimal impact:* Building cross- multi-and intra-sectoral partnerships and coalition-building enabled the Ford Foundation to harness the strengths and capacities of various partners. This is demonstrated, for instance, in the partnerships fostered between Nollywood artistes, practitioners, NGOs. Such partnerships multiply the power of policy advocacy and support policy change. Once initiated, these collaborations also have the potential to continue to be productive in the long-term.
- *Building a strong and an active partnership with the government is imperative for long-term sustainability and sustained policy success:* While NGOs have good potential for initiating innovative and socially responsive programs, policy results cannot be sustained without active government partnership and buy-in. Ford Foundation brought this realization to bear on its programming and work, albeit in the later stages. With time, it directly engaged governments and their agencies as evidenced in its support to Ondo, Nasarawa, Lagos, Imo, Kano, Rivers and Ebonyi States to deliver YSRHR programs.

6.2. Recommendations

Drawing from the lessons highlighted above, this review reached the following recommendations:

- *Think strategically and with a focus on catalytic actions:* Considering the limited nature of available resources, it is critical for the Foundation to be more strategic in defining its focus for investment and supporting interventions that have catalytic and scalable

potentials. Deploying resources towards nurturing and enhancing the potentials and operations of local philanthropies represents a largely untapped area of potential catalytic impact. The drive towards a more strategic approach must also embrace the development of an explicit, relevant well-articulated ToC, which will be clearly communicated to all stakeholders and actively used to drive decision-making for grant-making: such would enhance coherence in technical decision-making and project implementation and enhance better alignment between grant-making decisions, grantees' efforts and the key outcomes of the grants portfolio.

- *Investing in systems strengthening*: This is another area with potential catalytic effects. It is noteworthy that Ford Foundation now has the BUILD initiative that seeks to do just these.
- *Balance upstream with downstream investments*: Effective policies are backbones for quality programming, and without good programs, policies deliver little. It is important to simultaneously address the YSRHR agenda through both policy and program interventions as the Ford Foundation did over the period under review. Finding the right balance in investments in policy and programs may be difficult, but remains critical to the success of investments that seek to promote large-scale changes. Careful choice of policies and programs for support and the prioritization of quality evidence generation are key to the optimization of impact.
- *Plan for impact evaluation from the beginning of investments and engage in vigorous documentation*: Mechanism for generating baseline data and other information that would provide the basis for rigorous future evaluation of investments need to be put in place at the very beginning of the Foundation's investments. Adequate resources need to go into evaluations and rigorous documentation of outcomes and results. This is key to using learning to facilitate action and ensure quality delivery of programs.
- *Engage experts in grant decision-making and monitoring of the implementation processes and results*. Grant-making programs with lean staff would significantly benefit from engaging experts in supporting their work and monitoring processes. For instance, the United Nations Population Fund (UNFPA) program in Nigeria, under its Fourth Country Program (1997-2001) selected organizations with technical expertise to support monitoring and backstopping of state-based programs. The Local Funds Agents Model of the Global Funds for AIDS, Tuberculosis and Malaria also uses a similar approach to promote quality program implementation.
- *Program with long-term and sustainability in perspective*: Programming with a long-term view supports, among others, the development of strategic plans with clearly and explicitly articulated theories of change and investment plans. It also ensures the selection of grantees with structures and potential for sustainability. This approach suggests, that in addition to partnering with well-established and promising NGOs, collaborations with institutions such as universities and research institutions are key.

Finally, it is evident from the review that YSRHR remains an unfinished agenda in West Africa. While some gains have been made through the Ford Foundation's support, the burden of YSRHR remains huge in the region. This burden is also likely to grow giving population dynamics in the region. This raises the need for continued strategic investments in the field of YSRHR in West Africa. As such, it is important for other actors, particularly governments in the region, to continue to build on the strong groundwork and gains of the Ford Foundation in the quest for sustainable youth development in West Africa.

Annex 1: List of interviewees

GRANTEES	PERSON INTERVIEWED	INTERVIEWEE POSITION IN ORAGANIZATION
1 Ondo State MOH	Dr Dayo Adeyanju and Dr Adekemi Kiladejo	Former Commissioner of Health and Head, AYFHS programme
2. ActionAid Nigeria	Andrew Mamudu	Head, resource mobilization unit
3. AWOLI, Senegal	Yassinen Fal	President/ Chief Executive Officer
4. CRH	Dr Stella Iwuagwu	Founder/ Chief Executive Officer
5. FLP	Kenneth Amogu	Executive director
6. JAAIDS	Olayide Akanni	Executive Director
7. CCMC_Kathy	Kathy Bonk	Executive Director
8. Kids and Teens, Akure	Martin-Mary Falana	Executive Director
9. CMD	Edna Ishaya	Executive Director
10. GPI	Comfort Ikpeme	Executive Director
11. WFI	Francis Eremutha	Executive Director
12. Takemi Fellowship, Harvard University	Dr. Jesse Bump	Program Director
13. University of Ibadan ISERT	Eze Nwokocha	Monitoring and Evaluation Coordinator
14. ARFH	Mrs. Kehinde Osinowo	Director of programs
15. DEVCOM	Mr. Akin Jimoh	Program Director
16. AHIP	Mrs. Mairo Bello	Founder/CEO
17. CLP	Mr Chuks Ojido	Deputy Director
18. HDI	Mrs Olufunso Owasonoye	Executive Director
19. HMI	Mr. Peter Ujomu	Executive Director
20. LIFE LINK ORGANIZATION	Mrs Dora Ofokwobeta	Director
21. YOUTH PROFILE	Mr John Umoh- Otoh	Program Coordinator
22. WHARC	Prof Friday Okonofua	Chief Executive Officer
23. Committee of VCs	Mr O. Adigun; Prof Ambali	Ag. Secretary-General, CVC; Consultant
24. NIGERIA POLICE FORCE	Give name	
25. AHI	Mrs Adenike Esiet	Executive Director
26. INCREASE	Mrs Dorothy Aken'ova	Executive Director

Staff (Past and Present) of Ford Foundation

1. Ahonsi, Babatunde (Past Senior Program Officer)
2. Aliu, Afishetu (Grant Manager)
3. Chukwuma, Innocent (Director, West Africa)
4. Ehinor-Esezobor, Joy (Program Assistant)
5. Mac-IkemenjimaIkemenjima, Dabesaki (Program Officer)
6. Nwulu, Paul (Program Officer)
7. Okonofua, Friday (Prof.) (Past Program Officer)

Others

1. Ayoola, Oluyemisi – Assistant Director, Gender, Adolescent, School Health and Elderly (GASHE) Division, Federal Ministry of Health, Abuja
2. Duro-Aina Titi (Dr.) – Reproductive Health Analyst, United Nations Population Fund, Nigeria
3. Kusemiju, Bola – Director of Marketing & Strategic Communications, Maries Stopes and Former Director, Johns Hopkins Centre for Communication Programs, Nigeria
4. Odeku, Mojisola (Dr) – Past National Maternal Health Focal Officer, Federal Ministry of Health & Portfolio Director, National Urban Reproductive Health Initiative (NURHI)
5. Oyeledun, Bolanle (Dr.) – Past National Adolescent Health Focal Officer, Ministry of Health & Country Director, Centre for Integrated Health Program (CIHP)
6. Shettima, Kole A. (Dr.) – Director, Africa Office, MacArthur Foundation, Abuja
7. Usibaifo Priscilla – Founder & Board Secretary, Braveheart Initiative, Igarra, and Youth Officer, The Challenge Initiative

Annex 2: Highlights of knowledge products developed through Ford Foundation's report

Peer-reviewed journal articles

- Oye-Adeniran, B. A., Adewole, I. F., Iwere, N., Mahmoud, P. (2004). Promoting sexual and reproductive health and rights in Nigeria through change in medical school curriculum. *African Journal of Reproductive Health*, 8(1):85–91. Article available at: <http://www.jstor.org/stable/3583311>
- Adeokun, L A; Ricketts, O L; Ajuwon, A. Sexual and Reproductive Health Knowledge, Behaviour and Education Needs of In-School Adolescents in Northern Nigeria *African Journal of Reproductive Health; Benin City Vol. 13, Iss. 4, (Dec 2009): 37-49.*
- Esiet, Adenike O; Esiet, Uwem; Philliber, Susan. Changes in Knowledge and Attitudes among Junior Secondary Students Exposed to the Family Life and HIV Education Curriculum in Lagos State, Nigeria. *African Journal of Reproductive Health; Benin City Vol. 13, Iss. 3, (Sep 2009): 37-46.*
- Anarfi, John Kwasi; Owusu, Adobea Yaa. The Making of a Sexual Being in Ghana: The State, Religion and the Influence of Society as Agents of Sexual Socialization *Sexuality & Culture; New York Vol. 15, Iss. 1, (Mar 2011): 1-18.*
- Udegbe, Bola I; Fayehun, Funke; Isiugo-Abanihe, Uche C; Nwagwu, Williams. Evaluation of the Implementation of Family Life and HIV Education Programme in Nigeria. *African Journal of Reproductive Health; Benin City Vol. 19, Iss. 2, (Jun 2015): 79-92.*
- Isiugo-Abanihe, Uche C; Olajide, Rasak; Nwokocha, Ezebunwa. Adolescent Sexuality and Life Skills Education in Nigeria: To What Extent have Out-of-School Adolescents Been Reached? *African Journal of Reproductive Health; Benin City Vol. 19, Iss. 1, (Mar 2015): 101-111.*
- Haberland, Nicole A. The Case for Addressing Gender and Power in Sexuality and HIV Education: A Comprehensive Review Of Evaluation Studies *International Perspectives on Sexual and Reproductive Health; New York Vol. 41, Iss. 1, (Mar 2015): 31-51.*
- Atobrah, Deborah and Akosua Adomako Ampofo. (2016). *Expressions of Masculinity and Femininity in Husbands' Care of Wives with Cancer in Accra.* *African Studies Review.* Vol 59 (10) 175-197. Available at: <https://muse.jhu.edu/article/614565/pdf>
- Atobrah, Deborah, and Albert K. Awedoba. (2017). *Men Play, Women Break the Town: Gender and Intergenerational Asymmetry in Sexual and Reproductive Worldview among the Ga of Ghana.* *Sexuality & Culture:* 1-22. Available at: <https://link.springer.com/article/10.1007/s12119-017-9426-x>
- Atobrah, Deborah. (2016). *Elderly women, community participation and family care in Ghana: Lessons from HIV response and AIDS Orphan care in Manya Krobo.* *Ghana Studies* (2016) (19) pp 73-94. Available at: <https://muse.jhu.edu/article/646103>
- Creative Methods and Youth Research in the Ghanaian Context: Lessons and Tensions for Sage Research Methods Cases (Published in Jan 2018. Available at [https://www.methods.sagepub.com/case/creative-methods-and-youth-research-in-ghana-lessons-and-tensions.](https://www.methods.sagepub.com/case/creative-methods-and-youth-research-in-ghana-lessons-and-tensions)

Other research publications

- Girls' Power Initiative (GPI). 2000. "Assessing the Impact of GPI Lessons on Adolescent Girls." Calabar, Nigeria: GPI, 2000
- Health Matters Incorporated (HMI). 2001. "Integrated Reproductive Health Project for Olayele Community, Lagos, Nigeria: Mid Project Report." Lagos, Nigeria: HMI
- Alubo, O., Oyediran, K., & Odiachi, A. 2002. "Adolescent Sexuality and Reproductive Health in Benue State, Nigeria." AHI

- Health Matters Incorporated. “Report of Reproductive Health Knowledge, Attitude, Beliefs, and Practices (KABP) Survey Conducted at Mushin.” Lagos, Nigeria: HMI.
- Nwanna C. & Ujomu P. 2005. “Adolescent Reproductive Health Behaviours in Mushin Community, Lagos State, Nigeria.” Lagos, Nigeria: Health Matters Incorporated.
- Makinwa-Adebusoye P. 2006. “Hidden: A profile of Married Adolescents in Northern Nigeria.” AHI
- Global Health Awareness Research Foundation (GHARF). 2010. “Report on the Prevalence of Rape among In-school and Out-of-school Rural Adolescents in Enugu State.” Enugu, Nigeria: GHARF.
- Education as a Vaccine (EVA). 2008. “Electronic Family Life & HIV/AIDS Education: Institutional Assessment Report Federal Capital Territory (FCT).” Abuja, Nigeria: EVA.
- Women’s Health and Action Research Centre (WHARC). 2011. “Identifying Priorities for Research and Documentation on Adolescent Sexual Reproductive Health in Nigeria.” Benin-City, Nigeria: WHARC.
- Education as a Vaccine Against AIDS (EVA). 2011. Out-of-school Youth Access to Sexual And Reproductive Health, Livelihood And Information Communication Technology. Abuja, Nigeria: EVA.
- Kids & Teens Resource Centre (K&TRC). 2012. Needs Assessment on the Sexual and Reproductive Health Needs of Young Persons in Ondo State: Increasing Young Peoples’ Access to Sexual and Reproductive Health Services. Ondo, Nigeria: K&TRC.
- Walker, J. 2013. “Mapping Early Marriage in West Africa: A Scan of Trends, Interventions, What Works, Best Practices and the Way Forward.” Ford Foundation.
- Kids & Teens Resource Centre (K&TRC). 2014. “Adolescent Youth-friendly Sexual Health Services Plan of Action—Generating Demand for Sexual and Reproductive Health Services by Young People: Information, Education and Communication Interventions.” Ondo, Nigeria: K&TRC.
- Education as a Vaccine (EVA). 2014. “Out-of-school Youth Access to Sexual Health Education and Economic Strengthening Project in Niger State: End-line Evaluation Report.” Abuja, Nigeria: EVA.
- Youth Rise. 2015. “We are People: The Unintended Consequences of the Nigerian Drug Law to the Health and Human Rights of Young People Who Use Drugs.” Abuja, Nigeria: Youth Rise.
- Education as a Vaccine (EVA). “Meeting Adolescent and Young People’s Needs for Sexual and Reproductive Health Information and Services: Successes from an Integrated Model of Youth-Friendly Health Services.” Abuja, Nigeria: EVA.
- Education as a Vaccine (EVA). “Report of Youth Consultations on Mobile Phone Applications: Opportunities for Advancing Sexual and Reproductive Health amongst Young People using Mobile Phone Solutions.” Abuja, Nigeria: EVA.

Conference Presentations

- Deborah Atobrah. Emerging Adolescent Sexual and Reproductive Behaviors in Ghana: Implications for Public Health Risks and Opportunities. Harvard Chan Poster Day, April 8th. Harvard School of Public Health, Boston, MA.
- Deborah Atobrah. Emerging Adolescent Sexual and Reproductive Behaviors in Ghana: Implications for Public Health Risks and Opportunities. Presented at the GHP Symposium: “Coming of Age: A Conference on Global Adolescent Health”. March 29th 2016, Rotunda Joseph B. Martin Conference Center, Boston, MA.
- Deborah Atobrah. Gender and Intergenerational Asymmetry in Sexual and Reproductive Behaviors in Ghana. February 4th, 2016.

- Deborah Atobrah. Sexual and Reproductive Health Matter among Young People in Ghana: A Ethnographic Study, September 4th September 2015
- Gina Oduro. Presented on the topic: ‘Globalization and child prostitution in Ghana’ at the Global Studies Series of Framingham State Universities, Alumni Room, McCarthy Centre. MA, USA. Available at <https://www.framingham.edu/about-fsu/marketing-and-communications/campus-currents/campus-currents-4-10-17.php> or <http://fsugatepost.com/2017/04/14/hearing-the-voices-of-child-prostitutes-in-ghana/>.
- Gina Oduro. Presented on the topic: ‘Why Blame the Girls?’: Examination of Contextual Factors Fueling Juvenile Prostitution in a Ghanaian Community” at the 42nd New York African Studies Association (NYASA) Conference held at the University at Buffalo, Buffalo, New York from March 31 – April 1, 2017.

Training manuals and service/program guidelines

- Action Health Incorporated (AHI). 2002. “Providing Youth-friendly Health Services.” Lagos
- Girls Power Initiative (GPI). 2003. Training Manual Level 1: Adolescent Sexuality, Sexual and Reproductive Health and Rights.” Calabar, Nigeria: GPI.
- Girls Power Initiative (GPI). 2003. “Training Manual Level 2: Adolescent Sexuality, Sexual and Reproductive Health and Rights.” Calabar, Nigeria: GPI
- Girls Power Initiative (GPI). 2003. “Training Manual Level 3: Adolescent Sexuality, Sexual and Reproductive Health and Rights.” Calabar, Nigeria: GPI
- Action Health Incorporated (AHI). 2005. “Media Resource Handbook on Family Life and HIV/AIDS Education (FLHE) in Nigeria.” Lagos, Nigeria: AHI.
- Action Health Incorporated (AHI). 2005. “Youth Making a Difference: A Handbook for School-based Anti-HIV/AIDS Clubs.” Lagos, Nigeria: AHI.
- Action Health Incorporated (AHI). 2005. “Family Life and HIV Education for Junior Secondary Schools: Students’ Handbook.” Lagos, Nigeria: AHI.
- Adolescent Health and Information Projects (AHIP). 2009. “Family Life and HIV/AIDS Education (FLHE) Curriculum for Health and Behavioral Change.” Kano, Nigeria: AHIP.
- Girls’ Power Initiative (GPI). 2009. “Foundations of Human Sexuality Education. Sexuality Education Series for Young Persons (No 6).” Calabar, Nigeria: GPI.
- Education as a Vaccine (EVA). 2013. “Learning About Living Extra Expanded For Young People Out Of School: Facilitators Manual.” Abuja, Nigeria: EVA.
- *Planned Parenthood Global* (2014). Job Aids on Adolescent and Youth Friendly Services

Policy Advocacy Materials

- *Planned Parenthood Global* (2013). National Guidelines for the Integration of Adolescent and Youth Friendly Services into Primary Health Care Facilities in Nigeria
- *Women Friendly Initiative* (2013). National Guidelines on Promoting the Access of Young people to Adolescent- and Youth-Friendly Services in Primary Health Care Facilities in Nigeria
- Ondo State Strategic Framework and Action Plan for Advancing Young People’s Health and Development