



FEDERAL REPUBLIC OF NIGERIA

NIGERIA'S

**2ND AND 3RD COMBINED COUNTRY PERIODIC
REPORT ON THE IMPLEMENTATION OF THE AFRICAN
UNION CHARTER ON THE RIGHTS AND WELFARE OF THE CHILD**



**FEDERAL MINISTRY OF WOMEN AFFAIRS
AND SOCIAL DEVELOPMENT, ABUJA**

FEBRUARY 2014



PREFACE

The well-being of children in any nation is very important and it is an inevitable foundation for the successful human development of that country. Available records indicate that over half the children in the developing world especially in the sub Saharan Africa still live without basic services, protection and essential commodities critical for their survival and development. The deprivations and threats faced by children constitute a major obstacle to the achievement of the Millennium Development Goals which are all highly relevant to children, especially Poverty Reduction, Achieving Universal Primary Education, Reduction in Child Mortality, Improvement of Maternal Health, Combating HIV/AIDS, Malaria and other Diseases, and Ensuring Environmental Sustainability.

However, the reform programmes of the current administration in the country has created a positive and conducive programming environment for children through accelerated programmes, increased investments in children developmental issues, and allocation of better resources to reach the targets of the Millennium Development Goals. In reordering priorities and strengthening public management, no group deserves greater attention than the country's estimated 65.72 million children. There is therefore an enormous improvement in the reception of government to the plight of women and children and a lot of efforts have been made through setting up of legal frameworks, institutional arrangements and several programmes and initiatives to translate the provisions of the African Union (AU) Charter on the Rights and Welfare of the Child into reality and to ensure its effective and practical implementation.

It is against this background, that this combined Second and Thrid Country Report seeks to highlight the general and specific measures adopted in the implementation of the African Union (AU) Charter on the Rights and Welfare of the Child since year 2007. The Report identifies priorities for further action, as well as the difficulties and challenges encountered in promoting and protecting rights of children guaranteed under the Charter.

It is my hope that the distinguished members of the AU Committee of Experts on the Rights of the Child will appreciate the progress made so far, and the positive changes recorded in this report and support Nigeria's efforts to sustain this momentum in the overall interest of the Nigerian child.

HAJIA ZAINAB MAINA, MFR, FCIA

Honourable Minister of Women Affairs and Social Development

Federal Republic of Nigeria, Abuja

February, 2014

ACRONYMS

AIDS	-	Acquired Immune Deficiency Syndrome
ANPPCAN	-	African Net Work for Prevention and Protection of Child Abuse and Neglect
ARI	-	Acute Respiratory Infection
ARV	-	Anti-Retro Viral
AUCRWC	-	African Union Charter on the Rights and Welfare of the Child
CBN	-	Central Bank of Nigeria
CBO	-	Community Based Organization
CDW	-	Child Domestic Workers
CEDAW	-	Convention on the Elimination of All Forms of Discrimination Against Women
CRA	-	Child's Rights Act, 2003
CRC	-	Convention on the Rights of the Child
CREASUP	-	Child Rescue and Survival Project
CRL	-	Child's Rights Laws
CRIB	-	Child Right Information Bureau
CSM	-	Cerebro–Spinal Meningitis.
CSO	-	Civil Society Organization
CWIQ	-	Core Welfare Indicator Questionnaires
CYPA	-	Children & Young Persons Act
CYPL	-	Children and Young Persons Law
ECOWAS	-	Economic Community of West African States
EFA	-	Education For All
EPI	-	Expanded Programme on Immunization
EPR	-	Emergency Preparedness and Response
FCT	-	Federal Capital Territory
FGM	-	Female Genital Mutilation
FMINO	-	Federal Ministry of Information and National Orientation
FME	-	Federal Ministry of Education
FMF	-	Federal Ministry of Finance
FMOH	-	Federal Ministry of Health
FMWA	-	Federal Ministry of Women Affairs
FOS	-	Federal Office of Statistics
GER	-	Gross Enrolment Ratio
HI	-	Hearing Impaired
HIV	-	Human Immuno – Deficiency Virus
HSS	-	Health Sentinel Survey
IDP	-	Internally Displaced Persons
ILO	-	International Labor Organization
IMPAC	-	Massive Promotion and Awareness Campaign
IMR	-	Infant Mortality Rate
IOM	-	International Organization for Migration
ITN	-	Insecticide Treated Nets
JAMB	-	Joint Admissions and Matriculation Board
LEA	-	Local Education Authority
LGA	-	Local Government Areas
LGCRIMC	-	Local Government Child Rights Implementation and Monitoring Committee
MFCT	-	Ministry of Federal Capital Territory
MICS	-	Multiple Indicators Clusters Survey

MR	-	Mentally Retarded
NACCRAN	-	National Council of Child Rights Advocates of Nigeria.
NACHIFEST	-	National Children Festival Art and Culture
NAFDAC	-	National Agency for Food, Drugs and Administration Control
NAPTIP	-	National Agency for the Prohibition of Traffic in Persons
NBS	-	National Bureau of Statistics
NCRIC	-	National Child Rights Implementation Committee
NDHS	-	National Demographic Health Survey
NDRP	-	National Development Response Plan
NEEDS	-	National Economic Empowerment and Development Strategy
NEMA	-	National Emergency Management Agency
NFE	-	Non- Formal Education
NER	-	Net Enrollment Ratio
NGO	-	Non-Governmental Organization
NHMIS	-	National Health Management Information Systems
NLSS	-	Nigeria Living Standard Survey 2003/2004
NHRC	-	National Human Rights Commission
NPC	-	National Planning Commission
NPHCDA	-	National Primary Health Care Development Agency
NPI	-	National Programme of Immunization
NPopC	-	National Population Commission
NSAD	-	Nigerian Sports Association for the Disabled
OAU	-	Organization of African Unity
OPV	-	Oral Polio Vaccine
ORS	-	Oral Re-hydration Salt
ORT	-	Oral Re-hydration Therapy
OVC	-	Orphans and other Vulnerable Children
PC	-	Physically Challenged
PHC	-	Primary Health Care
PTF	-	Petroleum Trust Fund
RHS	-	Recommended Home Solution
SAGEN	-	Strategy for Enhancement of Girls' Education in Nigeria
SCRIC	-	State Child Rights Implementation Committee
SEEDs	-	State Economic Empowerment and Development Strategy
SEMA	-	State Emergency Management Agency
SEMC	-	State Emergency Management Committee
SNID	-	Sub-National Immunization Days
SCREAM	-	Supporting Children's Rights through Education, the Arts and the Media
SUPEB	-	States Universal Primary Education Board
UNCRC	-	United Nations Committee on the Rights of the Child
UNDP	-	United Nations Development Programme
UNICEF	-	United Nations Children's Fund
VH	-	Visually Handicapped
VPD	-	Vaccine Preventable Disease
WOFEE	-	Women Fund For Economic Empowerment
WHO	-	World Health Organization
WHOPES	-	World Health Organization Pesticide Evaluation Scheme

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PART ONE

Introduction

1.1 Background and Period of Coverage

Nigeria as a member of the African Union ratified the *African Union (AU) Charter on the Rights and Welfare of the Child* (AUCRWC) on 23rd July 2001. By implication, Nigeria is under obligation to submit periodic reports on progress made in the implementation of the Charter to the African Committee of Experts on the Rights and Welfare of the Child, as stipulated in its Article 43, paragraph 1, of the African Charter on the Rights and Welfare of the Child which states that:

“Every State Party to the present Charter shall undertake to submit to the Committee through the Secretary-General of the Organization of African Unity, reports on the measures they have adopted which give effect to the provisions of this Charter and on the progress made in the enjoyment of these rights”.

- (a) Within two years of the entry into force of the Charter for the State Party concerned; and
- (b) Thereafter, every three years; and Article 43, paragraph 2, further states that:
“Every report made under this Article shall:
 - (a) Contain sufficient information on the implementation of the present Charter to provide the Committee with comprehensive understanding of the implementation of the Charter in the relevant country; and
 - (b) Shall indicate factors and difficulties, if any, affecting the fulfilment of the obligations contained in the Charter.

Nigeria, having ratified the Charter in July 2001, submitted the Initial and First Country Periodic Report in 2006. It was subsequently defended in November, 2008 **and recommendations were made by the Committee.**

This combined 2nd and 3rd Report, therefore, highlights and reports on the measures adopted and progress made so far in the implementation of the Charter from 2007 to 2012. It outlines priorities identified for action, as well as the difficulties encountered in guaranteeing the rights provided for in the Charter.

The African Committee of Experts on the Rights and Welfare of the Child stipulated in the guidelines for the report writing process that:

'a state party that has already submitted to the UN Committee on the Rights of the Child may use elements of that report for the AU Charter report,the report shall, in particular highlight the areas of rights that are specific to the Children's Charter, and must specify the action taken by the State Party in response to any recommendations made to it by the Committee and or the UN Committee on the Rights of the Child.'

Against this background, this report draws extensively from the terms and content of the country's *3rd and 4th Country Periodic Report* submitted to the UN Committee on the Rights of the Child in May 2008. It also incorporates the country's response to the issues - Concluding Observations raised by the AU Committee of Experts after the defence of Nigeria's initial and first periodic report of AU Charter implementation.

1.2 Demographic Situation of Nigeria

1.2.1 Geography and Administrative Structure

Nigeria lies between 4°16' and 13°53' North latitude and between 2°40' and 14°41' east longitude and has a land area of 924,000 sq. Km; one of the largest in Africa. The geography varies greatly from tropical rainforest in the South to dry savannah in the North which is flat and sparsely vegetated. Nigeria is hilly and mountainous in the South East, along the border with Cameroon and also in the centre where the Jos Plateau rises to 5,000 feet above sea level. Nigeria is bordered to the West by the Republic of Benin, to the North by the Republic of Niger, to the North East by the Republic of Chad, to the East by the Republic of Cameroon, and to the South, by the Atlantic Ocean. The



FEDERAL MINISTRY OF WOMEN AFFAIRS AND SOCIAL DEVELOPMENT

Call for Memoranda

1. The Federal Ministry of Women Affairs and Social Development is currently compiling Nigeria's combined 2nd and 3rd Periodic Report on the Implementation of the African Union (AU) Charter on the Rights and Welfare of the Child (AUCRWC) which is to be submitted to the AU Committee of Experts on Child Rights.

2. In view of the above, this advertisement is placed to invite Federal, State and Local Government establishments, the Academia, Development Agencies, Media Organizations, NGOs, Civil Society Groups, concerned individuals, and the general public to forward their memoranda on the implementation of African Union (AU) Charter on the Rights and Welfare of the Child to which Nigeria is a signatory.

Inputs are expected to include reports, statistics, data, impact assessment of programmes, social reforms, positive and negative outcomes of interventions, legislation and projects undertaken from 2006-2013.

Completed reports (along with copies of relevant legislation, statistical data and relevant benchmarks for monitoring progress) should be sent based on the clusters as stated hereunder:

General Provision of the Charter	Relevant AUCRWC Article
General Measure of Implementation	1 and 43
Definition of the Child	2
General Principles	3,4,5,7,12 and 20
Civil Rights and Freedom	6,7,8,9,10 and 16
Family Environment and Alternative Care	16,18,19,20, 25 and 27
Basic Health and Welfare	5,13,14,20 and 26
Education, Leisure and Cultural Activities	11 and 12
Special Production Measures	15,16,21,22,23,25,26,27 and 30

1. In addition, submission of reports on measures and the best practices that have positively enhanced the situation and well being of children at the National, State or Community levels are welcome.

2. All submissions must be typed and forwarded by hand, postal or electronic mail not later than 10th December, 2013 to:

African Union (AU) Charter on the Rights and Welfare of the Child (AUCRWC)

Periodic Report Secretariat

C/o Director, Child Development

Federal Ministry of Women Affairs

Federal Secretariat Complex, Shehu Shagari Way,

P.M.B.229, Garki-Abuja

E-mail Addresses: raligaladima@yahoo.com, fmwasdcd@gmail.com and

hajjuabdulkadir@yahoo.com

3. Copy of the AUCRWC may be accessed on UNICEF's website www.unicef.org.

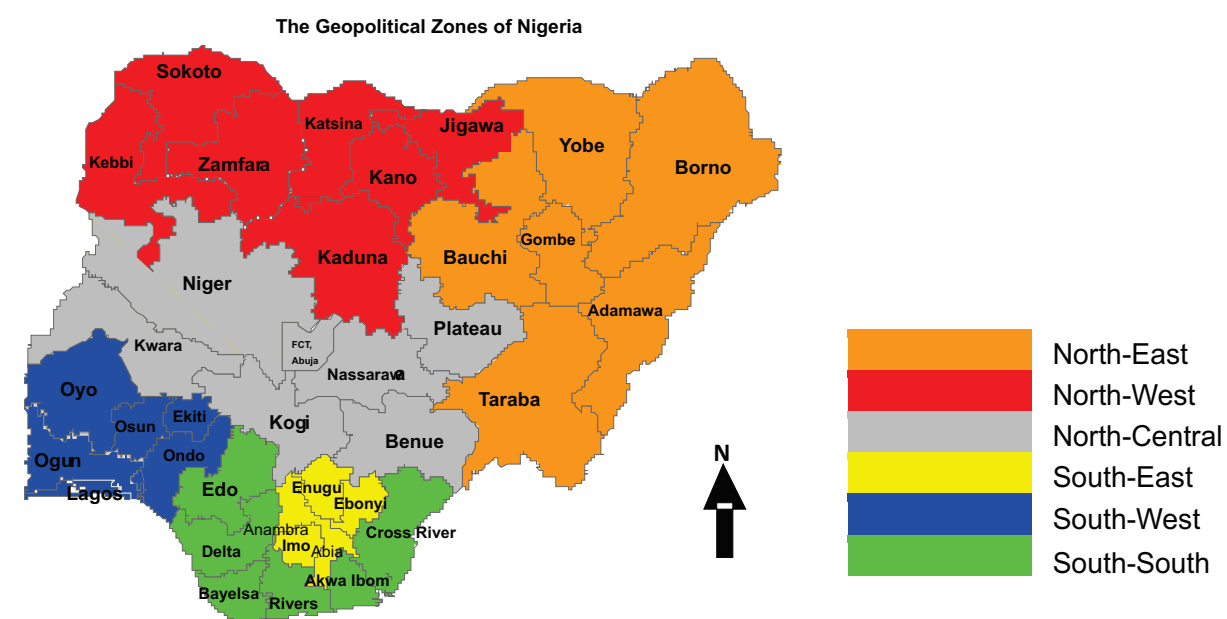
For further clarification or enquiries, please call 08033162611.

average rainfall ranges from about 500 mm/year in the North to over 2,000 mm/year in the South.

Under the current constitution, adopted in 1999, the presidency appoints a Federal Executive Council, this comprises the President, Vice President and current Ministers and Ministers of State from each of Nigeria's 36 states and the Federal Capital Territory. The executive is accountable to the bicameral National Assembly. The Assembly, comprising the 109-seat Senate and the 360-seat House of Representatives are elected by universal suffrage for a four-year term. The Federal Government operates at the apex of the governance structure. States and Local Government Areas (LGAs) operate the second and third-tiers respectively.

For operational convenience, the country has been divided into six geopolitical zones: North- East, North-West, North-Central, South East, South-West and South-South. The country has about 250 ethnic groups and 500 indigenous languages, there are two major religions Christianity and Islam. As the second largest economy in Sub-Saharan Africa and accounts for 41 percent of the region's GDP.

Figure 1—Federal Republic of Nigeria: States and Zones



1.2.2 Population of Children

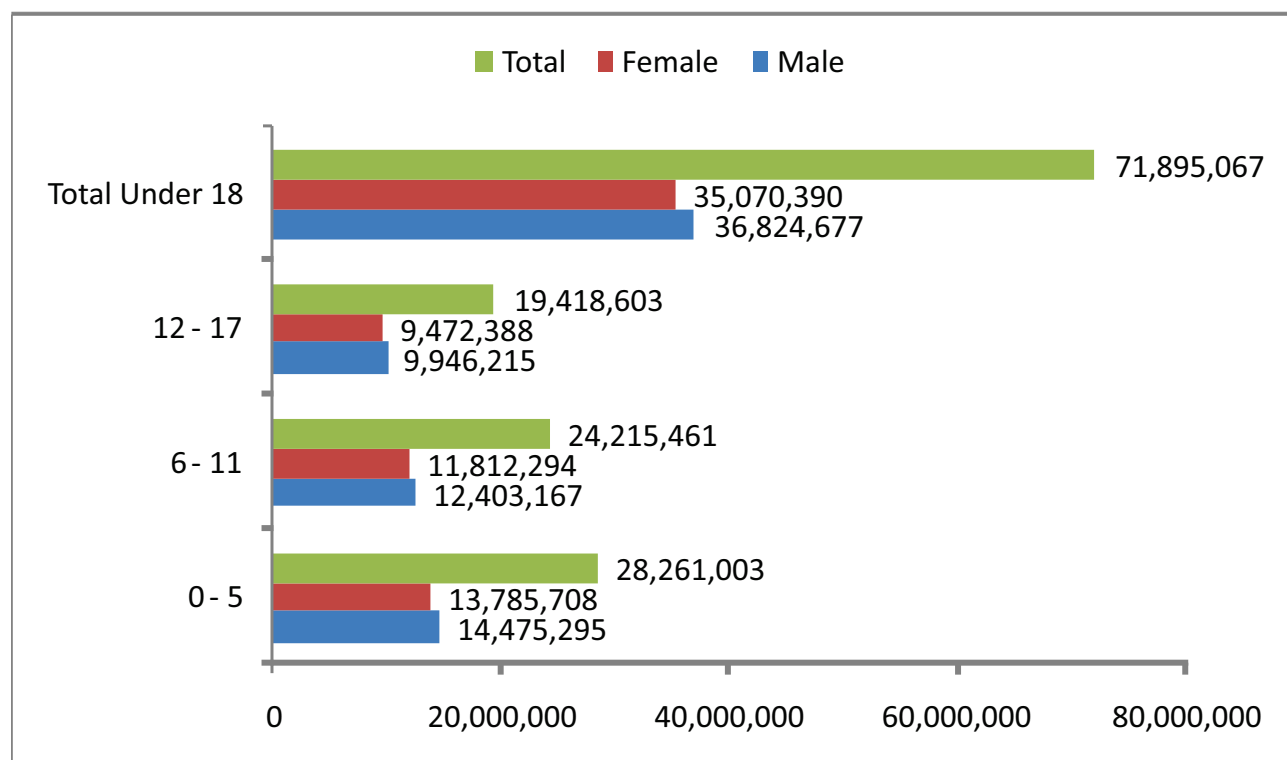
Nigeria has a total population of over 140 million (NPopC, 2006) with an annual growth rate of 3.2% in 2007. Taking the definition of a child in the Charter, and as affirmed by the **Child's Rights Act 2003**, as anyone under the age of 18, children make up approximately 72 million of the population based on Nigeria's 2006 Census. Table 1 below disaggregates children's population by gender and three different age groups.

Table 1—Population of Children by Age Groups (millions)

Age	Male	Female	Total
0-5	14,475,295	13,785,708	28,261,003
6-11	12,403,167	11,812,294	24,215,461
12-17	9,946,215	9,472,388	19,418,603
Total Under 18	36,824,677	35,070,390	71,895,067

Source: NPopC – Median Variant Projections from 2006 Census

Figure 2: Population of children by age groups (millions)



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**Table 1a: - Summary Table of Findings on Child Issues in Nigeria:
Multiple Indicator Cluster Surveys (MICS 4) and Millennium Development Goals (MDG)
Indicators, Nigeria, 2011.**

Topic	MICS4 Indicator Number	MDG Indicator Number	Indicator	Value	
CHILD MORTALITY					
Child mortality	1.1	4.1	Under-five mortality rate	158	per 1,000
	1.2	4.2	Infant mortality rate	97	per 1,000
NUTRITION					
Nutritional status	2.1a	1.8	Underweight prevalence: Moderate and Severe (- 2 SD)	24.2	percent
	2.2a		Stunting prevalence: Moderate and Severe (- 2 SD)	34.8	percent
	2.3a		Wasting prevalence: Moderate and Severe (- 2 SD)	10.2	percent
	2.6		Exclusive breastfeeding under 6 months	15.1	percent
	2.7		Continued breastfeeding at 1 year	79.3	percent
	2.8		Continued breastfeeding at 2 years	34.5	percent
	2.12		Introduction of solid, semi-solid or soft foods	32.9	percent
Breastfeeding and infant feeding	2.4		Children ever breastfed	95.5	percent
	2.5		Early initiation of breastfeeding	22.9	percent
	2.6		Exclusive breastfeeding under 6 months	15.1	percent
	2.7		Continued breastfeeding at 1 year	79.3	percent
	2.8		Continued breastfeeding at 2 years	34.5	percent
	2.9		Predominant breastfeeding under 6 months	69.9	percent
	2.10		Duration of breastfeeding	18.3	months
	2.11		Bottle feeding	18.7	percent
	2.12		Introduction of solid, semi-solid or soft foods	32.2	percent
	2.13		Minimum meal frequency	24.1	percent
	2.14		Age-appropriate breastfeeding	34.6	percent
	2.15		Milk feeding frequency for non-breastfed children	30.1	percent
Salt iodization	2.16		Iodized salt consumption	79.8	percent
Vitamin A	2.17		Vitamin A supplementation (children under age 5)	65.2	percent
Low birth weight	2.18		Low-birth weight infants	15.2	percent
	2.19		Infants weighed at birth	25.7	percent
CHILD HEALTH					
Vaccinations	3.1	4.3	Tuberculosis immunization coverage	61.7	percent
	3.2		Polio immunization coverage	46.1	percent
	3.3		Immunization coverage for diphtheria, pertussis and tetanus (DPT)	42.6	percent
	3.4		Measles immunization coverage	49.2	percent
	3.5		Hepatitis B immunization coverage	34.0	percent
	3.6		Yellow fever immunization coverage	40.4	percent
Tetanus toxoid	3.7		Neonatal tetanus protection	55.2	percent
Care of illness	3.8		Oral rehydration therapy with continued feeding	27.9	percent
	3.9		Care seeking for suspected pneumonia	39.7	percent
	3.10		Antibiotic treatment of suspected pneumonia	45.4	percent
Solid fuel use	3.11		Solid fuels	74.5	percent

Topic	MICS4 Indicator Number	MDG Indicator Number	Indicator	Value	
Malaria	3.12	6.7	Households with at least one ITN	40.1	percent
	3.14		Children under age 5 sleeping under any mosquito net	18.6	percent
	3.15		Children under 5 sleeping under insecticide-treated nets (ITNs)	16.4	percent
	3.16		Malaria diagnostics usage	7.9	Percent
	3.17	6.8	Anti-malarial treatment of children under 5 the same or next day	29.4	percent
	3.18		Anti-Malarial treatment	44.6	percent
	3.19		Pregnant women sleeping under insecticide-treated nets (ITNs)	16.9	percent
	3.20		Intermittent preventive treatment for malaria	19.5	percent
WATER AND SANITATION					
Water and sanitation	4.1	7.8	Use of improved drinking water sources	58.5	percent
	4.2	7.9	Water treatment	4.1	percent
	4.3		Use of improved sanitation	31.0	percent
	4.4		Safe disposal of child's faeces	52.3	percent
	4.5		Place for hand washing	48.0	percent
	4.6	Availability of soap	61.5	percent	
REPRODUCTIVE HEALTH					
Contraception and unmet need	5.1	5.4	Adolescent birth rate	89	per 1,000
	5.2	5.3	Early childbearing	28.6	per cent
	5.3		Contraceptive prevalence rate	17.5	percent
	5.4	5.6	Unmet need	19.4	percent
Maternal health	5.5a	5.5	Antenatal care coverage with at least once by skilled personnel	66.2	percent
	5.5b		Antenatal care coverage at least four times by any provider	56.6	percent
	5.6		Content of antenatal care	51.5	percent
	5.7	5.2	Skilled attendance at delivery	48.7	percent
	5.8		Institutional deliveries	45.1	percent
	5.9		Caesarean section	4.7	percent
CHILD DEVELOPMENT					
Child development	6.1		Support for learning	65.4	percent
	6.2		Father's support for learning	37.2	percent
	6.3		Learning materials: children's books	6.0	percent
	6.4		Learning materials: playthings	38.1	percent
	6.5		Inadequate care	39.9	percent
	6.6		Early child development index	60.9	percent
	6.7		Attendance to early childhood education	42.6	percent
EDUCATION					
Education	7.1	2.3	Literacy Among young women	65.6	percent
	7.2		School readiness	44.8	percent
	7.3		Net intake rate in primary education	43.8	percent
	7.4		Primary school net attendance ratio (adjusted)	70.1	percent
	7.5	2.1	Secondary school net attendance ratio (adjusted)	54.2	percent
	7.6		Children reaching last grade of primary	96.5	percent
	7.7	2.2	Primary completion rate	85.4	percent
	7.8		Transition rate to secondary school	74.0	percent
	7.9		Gender parity index (primary school)	0.94	ratio
	7.10		Gender parity index (secondary school)	1.00	ratio

PART NINE

Conclusion

The Combined 2nd and 3rd Country Periodic Report has attempted to capture in graphic detail, efforts made by Nigeria towards the attainment of the objectives of the AUCRWC regarding the well-being of the Nigerian child. Essentially, the general measures adopted by the country to effectively comply with Article 1, which include institutional, legislative and policy frameworks as well as budgetary provisions during the current reporting period have been reported. It is apparent from the facts contained that since the last report, Nigeria has made remarkable progress in her bid to promote and protect the interest of the Nigerian child.

With the enactment of CRLs in 23 states, and several other states making spirited efforts to do the same, chances are that in the nearest future the contention over minimum age for the child will be completely resolved across the country. This is because the provisions of the CRA are comprehensive. The guiding principle for dealing with children's issues remains that at all times the best interest of the child should be paramount.

By specific provisions of the CRA, Nigeria has undertaken to work towards the elimination of discrimination against children with respect to their participatory rights and has thus established a normative framework for children's participation. The formation of the National Children's Parliament in 2000 is a clear demonstration of this. With 36 functional chapters, this forum has provided the Nigerian child a useful platform for free expression on all issues of national life. Lobby groups, children's clubs, newsletters and magazines have also become popular channels for children's participation.

It is hoped that the planned survey by the Ministry of Women Affairs on physically and emotionally challenged children will provide data for planning interventions so as to minimize their exclusion. Government is also demonstrating visible commitment to birth registration through short and long term strategies.

As presented in the series of statistical analysis, achievements recorded in the area of rescue of victims, conviction of traffickers, sensitizations and awareness creation and series of agreements signed with countries and the recent elevation of Nigeria status of TIP from Tier 2 to Tier 1 by US rating, the report have as shown tremendous progress being made towards tackling the scourge of child trafficking by the country. The overall performance of the various organizations and agencies involved in combating child trafficking has been tremendous due to the cooperation of relevant stakeholders and donor agencies in achieving the objectives of the fight against child trafficking.

The information on fulfilment of education rights for children shows the progress made in the area of promoting gender equality, quality of learning in areas of special and gifted children, girl-child education, basic and junior secondary enrolment, retention and completion, and teacher professionalism. It also enumerated the efforts which the different arms of government, international donor agencies and CSOs are making in the areas of second chance education and integrating of the traditional Almajirai Children Qur'anic education into the formal school system.

Though substantial progress has also been made in the areas of gender equality, nomadic education, provision of teaching and learning materials, community participation in education, teaching in mother tongue, construction of schools and provision of learning facilities, lack of adequacy of teachers, adequate funding, accessibility of schools by children in rural areas remain a big challenge to the country.

The report drew extensively from statistical data, reports and surveys conducted by NBS, UNICEF, NAPTIP, Federal Ministries of Education, Health, Women Affairs and Social Development.

to sing the two stanzas of the national anthem and to recite the National Pledge.

The National youth Service scheme is in place and is used as a platform to train young people on respect and service to the Federal Republic of Nigeria, to promote national unity and to reduce tribal/religious differences.

The provisions of the Charter, Article 31, domesticated in the CRA, section 19, are therefore not new to Nigerian parents and children. **In line with the provisions of the Charter, the Child's Rights Act, 2003 makes provision for the responsibilities of children as follows:**

(1) Every child has responsibilities towards his/her family and society, the Federal Republic of Nigeria and other legally recognised communities, nationally and internationally.

(2) It is the duty of a child; subject to his/her age and ability and such other limitations as may be contained in this Act and any other law, to-

- (a) Work towards the cohesion of his/her family and community;**
- (b) Respect his/her parents, superiors and elders at all times and assist them in case of need;**
- (c) Serve the Federal Republic of Nigeria by placing his/her physical and intellectual abilities at her service;**
- (d) Contribute to the moral well-being of the society;**
- (e) Preserve and strengthen social and national solidarity;**
- (f) Preserve and strengthen the independence and integrity of the Federal Republic of Nigeria;**
- (g) Respect the ideals of democracy, freedom, equality, humaneness, honesty and justice for all persons;**
- (h) Relate with other members of the society, with different cultural values in the spirit of tolerance, dialogue and consultation;**
- (i) Contribute to the best of his/her abilities, at all times and at all levels, to the promotion and achievement of Nigeria, African and world unity; and**
- (j) Contribute to the best of his/her abilities, at all times and at all levels, to the solidarity of the African people and the human race.**

8.15 Challenges

- Low participation of traditional and religious leaders in child protection issues.
- Inadequate funding to implement protection, prevention and rehabilitation programmes.
- Capacity gaps of police officers to provide protective services for child victims of abuse, violence and exploitation.
- Inadequate number of child shelters/holding shelters and remand homes across the country.
- Slow judicial process, hindering quick access to justice of victims and prosecution of traffickers.
- Low public and private partnership involvement on programming for child protection issues.
- Inadequate resources and support to social welfare officers to care for and support children who are victims of abuse and injury.
- Minimal commitment and involvement of State and Local Government officials in the fight against child trafficking.

Topic	MICS4 Indicator Number	MDG Indicator Number	Indicator	Value	
CHILD PROTECTION					
Birth registration	8.1		Birth registration	41.5	percent
Child labour	8.2		Child labour	47.1	percent
	8.3		School attendance among child labourers	76.1	percent
	8.4		Child labour among students	47.1	percent
Child discipline	8.5		Violent discipline	90.8	percent
Early marriage	8.6		Marriage before age 15	17.6	percent
	8.7		Marriage before age 18	39.9	percent
	8.8		Young women age 15-19 currently married or in union	20.2	percent
	8.9		Polygyny	33.6	percent
	8.10a		Spousal age difference		
	8.10b		Women age 15-19 Women age 20-24	52.2 43.9	percent percent
Female genital mutilation/ cutting	8.11		Approval for female genital mutilation/cutting (FGM/C)	21.8	percent
	8.12		Prevalence of female genital mutilation/cutting (FGM/C) among women	27.0	percent
	8.13		Prevalence of female genital mutilation/cutting (FGM/C) among girls	19.2	percent
Domestic violence	8.14		Attitudes toward domestic violence	45.6	Percent
HIV/AIDS, SEXUAL BEHAVIOUR					
HIV/AIDS knowledge and attitudes	9.1		Comprehensive knowledge about HIV prevention	23.1	percent
	9.2	6.3	Comprehensive knowledge about HIV prevention among young people (women age 15-24 years)	22.5	percent
	9.3		Knowledge of mother- to-child transmission of HIV	49.7	percent
	9.4		Accepting attitudes towards people living with HIV	9.0	percent
	9.5		Women who know a place where to be tested	61.0	percent
	9.6		Women who have been tested for HIV and know the results	11.4	percent
	9.7		Sexually active young women who have been tested for HIV and know the results	9.1	percent
	9.8		HIV counselling during antenatal care	48.4	percent
	9.9		HIV testing during antenatal care	28.5	percent
Sexual behaviour	9.10		Young women who have never had sex	62.6	percent
	9.11		Sex before age 15 among young women	15.8	percent
	9.12		Age-mixing among sexual partners	39.3	percent
	9.13		Sex with multiple partners	2.8	percent
	9.14		Condom use during sex with multiple partners	34.3	percent
	9.15		Sex with non regular partner (women age 15-24 years)	32.4	percent
	9.16	6.2	Condom use with non-regular partners (women age 15-24 years)	47.4	percent
Orphaned children	9.17		Children's living arrangements	8.8	percent
	9.18		Prevalence of children with at least one parent dead	6.6	percent
	9.19	6.4	School attendance of orphans	79.9	percent
	9.20	6.4	School attendance of non-orphans	79.5	percent

1.3 Preparatory Process for the 2nd and 3rd Combined Periodic Report

The FMWA&SD being the coordinating ministry responsible for ensuring compliance with the African Committee of Experts' recommendations and the implementation of the provisions of the Charter, employed a participatory approach that drew the attention of all stakeholders to the rights of the child through constructive dialogue which included:

- A process that ensured full ownership by the Federal and State Ministries of Women Affairs and Social Development as the ministry in charge, and active participation of key stakeholders namely, officials of State and Federal Ministries, the National Bureau of Statistics, National Agency for the Prohibition of Trafficking in Persons and Other Related Offences (NAPTIP), the Academia, Children's Parliament, members of Civil Societies, NGOs, UN Agencies, particularly UNICEF, in order to produce a comprehensive and timely report;
- Involvement of other UN Agencies to provide technical inputs with respect to their mandates and the questions of the guidelines that belonged to their programme of cooperation;
- Ensuring that a precise time frame planned for the report writing was followed and respected; and
- Ensuring that the issues raised by the African Committee of Experts on the initial and 1st Country Periodic Report and appropriate responses are integrated into the 2nd and 3rd Country Periodic Report.
- Annex 1 of this report provides information on the detailed work plan followed to complete the report writing process.

- Investigations of over 900 child trafficking cases completed, while 132 cases have been filed in different courts across the country.
- 64 culprits have been convicted and are serving different jail terms for TIP offences in Nigeria.
- With the support of SIDA and UK Nat Com, UNICEF facilitated the establishment of the following:
 - 7 Youth Resource Centres to provide health, skills, leaning, legal support and information to young people in Edo, Delta, Kano, Akwa - Ibom, Sokoto, Ebonyi and Imo States.
 - 8 Transit shelters established in Kano, Benin, Akwa-Ibom, Abuja, Sokoto, Lagos Enugu and Maiduguri.
- Situation Analysis and Assessment of child trafficking trends was completed in 22 endemic States.
- With the assistance of the Italian Government, a Monitoring Centre was established while ILO/PATWA, donated a V- SAT to NAPTIP to improve documentation, reporting and communication with partners in and out of the country on child trafficking.
- USAID in collaboration with ABA-Africa assisted on Inter-connectivity between the 6 zonal offices, Police and Immigration with V-SAT. Also VPN (Virtual Private Network) to secure the networks, Centralized Database on TIP was connected to NAPTIP and Solar panel to power the National Monitoring Centre- NAPTIP for 24 hours.
- 3 Data analysts were trained on Database Administration in Turin on SIDA Software Training – Italian UNODC/UNICRI donated Project.
- Officers from NAPTIP Zonal Office were also trained on the connective, database administration and networking using SIDA Software.
- With the support of UNODC, National Task Force on TIP was established to ensure the implementation of the approved National Plan of Action (NPoA) on TIP.
- An NGO Forum and a Tourist Operators network have also been established in Kano Zone
- Rescue, recovery and reintegration of about 3,638 victims was recorded across the country in collaboration with NAPTIP and Community members
- 1,600 market women at Idi-Iroko and 1,700 Muslim worshipers at the Central Mosque, Seme were exposed to the various techniques and strategies employed by traffickers in luring victims
- 408 Law Enforcement officers from Nigeria Immigrations, Nigeria Police, Security services, Naval and Marine departments, and the Nigerian Army acquired skills on the new trends of child trafficking
- The Country Response to Trafficking in Persons, particularly in women and children was finalized to ensure coordinated intervention for rescue, repatriation and rehabilitation and reintegration of child survivors of trafficking.
- Support for the hosting of the 7th Nigeria/Benin Republic Consultative Meeting on Country Response to TIP in Lagos on the implementation of Nigeria/Benin Joint Plan of Action and Abeokuta / Zakpota Plan of Action on Child Trafficking.
- Furnishing of Enugu Shelters by UNICEF as assistance to victim of trafficking.
- Supply of sports equipment to 7 Shelters by UNICEF as victim support for recreation.

8.14 Responsibilities of the Child (Article 31 (S.19 CRA)).

In line with African values and the culture of collective responsibility for the family and societal cohesion, the Nigerian child is assigned responsibilities and roles in accordance with his or her age. Different cultures and traditions recognise the contributions of children and the necessity for their participation in the family upkeep and community development. In almost all Nigerian homes, a child is taught early in life to do domestic chores and duties such as dish and cloth washing, sweeping, light farm/agricultural work within the family. In addition, the culture of respect for parents and elders is part and parcel of the Nigerian way of life.

At the policy level, the National Policy on Education (2004) introduced civic education into the Basic Education curriculum, emphasising the roles and responsibilities of school children to their families and society and promoting a sense of patriotism in the children. Under this curriculum, schools are to ensure that every child is taught and made

educational sector, the media, representative of women groups, vigilante groups and children representatives, jointly participated in public enlightenment and awareness campaigns on the dangers, implications and prevention of child trafficking amongst in –and- out of school children in Gumel, Maigatari, Mallam Madori, Dutse and Hadejia LGAs.

- (l) Enlightenment campaigns were conducted in Takum, Sardauna, Wukari, Bali and Kurmi LGAs in Taraba State and in Maiduguri Metropolitan Council, as well as in Ngala, Bama, Mobbar and Kukawa LGAs in Borno State. Ministry of Women Affairs in collaboration with NAPTIP Kano zonal office further sensitized 300 in - and - out of school children and young people on the dangers of child trafficking.
- (m) Child Rights Watch Groups were established in 12 Focus Local Government Area (FLGA) in 4 states, Abia, Imo, Ebonyi and Enugu. Membership consists of Traditional Rulers, Social Workers, Teachers and School Pupils. Over 2000 Community Members were sensitized on the ills of TIP which had yielded positive results and cases of child abuses are being reported to NAPTIP.
- (n) Awareness Creation was carried out for Caregivers, Maternity and Private Clinic Owners, Church Founders and Traditional Rulers in 7 FLGAs of Abia state on Child Trafficking and other protection issues. About 800 persons benefited from the sensitization program. IEC materials on the issues of trafficking for illicit adoption were also distributed.
- (o) A 2-day interactive session among stakeholders on TIP was held at Owena Hotels, Akure, Ondo State. Stakeholders used the forum to appreciate the efforts of the Judiciary in the fight against human trafficking and recommended the need for the judiciary to handle TIP cases with dispatch so that victims are not traumatized further by the judicial process.
- (p) In addition, through several in-house training events organized for its departments (Counselling and Rehabilitation, Public Enlightenment and Planning Research and Statistics) in the reporting period, NAPTIP focused on counselling and other skills to enhance support given to trafficked persons. The agency also worked with the Nigeria Police Anti Trafficking Unit and the Nigeria Immigration Service Anti-Trafficking Unit to organize and provide in-house training for their officers.
- (q) As at July 2009 the following achievements of NAPTIP in collaboration with some UN Agencies like UNICEF, ILO, and UNODC were recorded:

- Increased rescue, recovery and re-integration of children and arrest of traffickers across the country. Joint border sensitization with the Republic of Benin (Ministry of Family & Social Services and NAPTIP) on the ills of Child Trafficking and the setting up of a community watch group in both countries resulted in rescue, repatriation and rehabilitation of 33 Beninese children.
- Over 1 million children had access to general information on the dynamics of trafficking through sensitization and awareness campaign.
- 3,803 young person's had access to vocational training, life skills and counselling on child trafficking issues
- 65 Officers from Counselling and Rehabilitation department in the Head Office and zones were trained on psycho-social therapy for Care Givers in Abuja and Jos. The department graduated and provided life management skills to 27 victims of human trafficking in Yala Local Government of Cross River State in 2009.
- 2,100 duty bearers and right holders in 5 States had improved knowledge and understanding on current trends in child trafficking.
- International cooperation agreements signed between Nigeria - Belgium, Switzerland, The Netherlands, Luxemburg, Spain, Italy, Benin and U.K
- Capacity building provided by UNICEF, ILO, UNODC for the Police, Immigration and NAPTIP officers on improved investigation techniques

Nigeria's Efforts to Address the Principal Areas of Concern and Implement the Recommendations Made in 2008 by the African Union Child Rights Experts Committee in Respect of the Initial and First Country Report

PRINCIPAL AREAS OF CONCERN AND RECOMMENDATIONS

1. The committee calls upon the State party to focus on the remaining states and to report on efforts made and results achieved in the domestication of the charter in its next periodic report. Without a legal framework that defines the rights and obligations towards the well being of the child, enforceability of the rights of the child becomes a challenge.

Response 1: Update report on efforts made in the domestic implementation of the Charter in Nigeria:

- i. Witnessed increase in the no. of States that have adopted the CRA, 2003 from 19 to 22; States that their legislatures had passed subject to Governors' assents are now 2; and 12 States are at various drafting, review and wider stakeholders' consultation stages.
- ii. The Federal Government under the Federal Capital Territory, Abuja Administration, has recently passed the Child Rights (Enforcement Procedure) Rules, 2013.
- iii. The Federal Ministry of Women Affairs and Social Development, has developed and published in 2009 a National Plan of Action on the implementation strategies of the Child Rights Act: 2009-2015.
- iv. The 12 remaining states mentioned in item i above do have an operative, though old, children and Young Persons Laws dealing with juvenile justice Administration pending the adoption of the CRA, 2003.
- v. One of the key challenges in the on-going sensitization and awareness campaign on the above efforts is the nature of our Constitutional Federalism, which requires, among other things, continuing Federal-States' multi-stakeholder consultations/dialogue on matters, such as children, not within the Exclusive Legislative list of the Federal Government.
- vi. See Figure 1 below, Map of Nigeria on the current status of the CRA adoption by states.

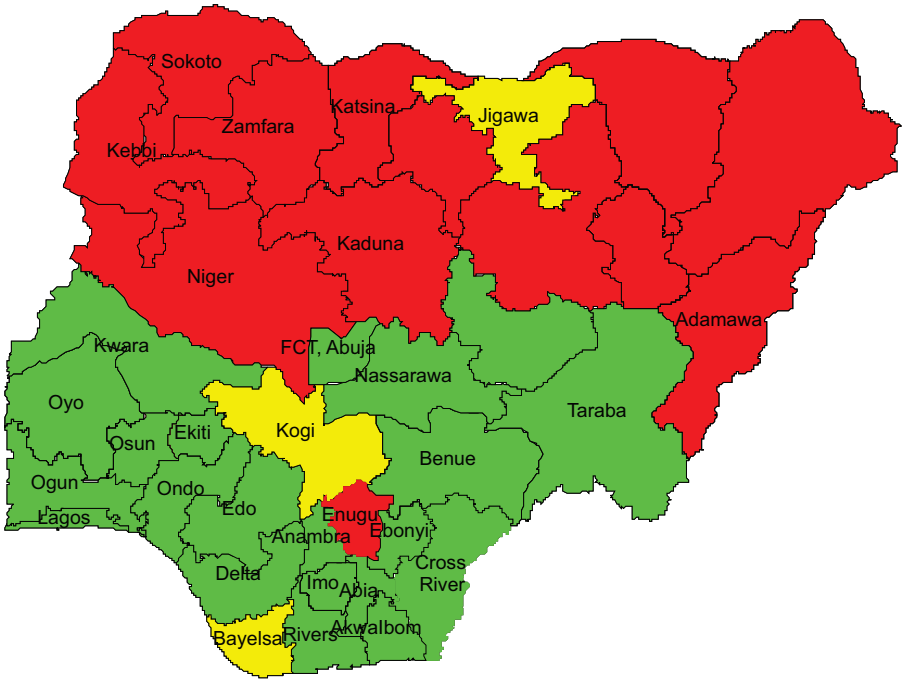


Figure 3: Map of Nigeria: States that have passed States that have not passed States that have passed but no governor's assent

2. The Committee expresses concern in the contradictions and inconsistencies created by the application of the statute law, policy and customary practices. For instance the Child Right Act and the Constitution clearly define the age of majority as 18 years and entrench the fundamental rights of a child. However there is a rampant early child marriage especially in the rural areas where the median age of marriage for a girl is 15 years. It is noted in the 2003 National health survey about 35.8% of teenagers aged 15-19 years were already mothers.

Response 2: - Nigeria has made appreciable progress in addressing the factors responsible for the rampancy of early/child marriage through the following strategic plans, initiatives and collaboration with relevant development partners/donor agencies and Civil Society Organisations (CSOs): -

- Sustained awareness campaign by CSOs, UNICEF, Federal and State Ministries of Women Affairs on the impact of Early marriage on the development, survival and participation rights of children/women;
- National strategic intervention/conditional cash transfer programmes in ensuring reduction in household income poverty;
- National Strategic Plan of Action on Girls'/Women's access to education and increase in Girl-Child's school enrolment, attendance, retention and completion rate as a responsive measure to limit early marriage in Nigeria.
- Hence, contrary to the earlier cited 2003 National Demographic Health Survey Report, all the existing authoritative national survey reveal two significant trends: - proportional decrease of women getting married by age 15 and increase in the age of marriage nationwide. For example, the 2008 National Demographic and Health Survey Table 2 shows the percentage of women and men who have married by specific ages, and the median age at first marriage by current age.

The results show that almost half (46 percent) of women age 20-49 were married by age 18, and 58 percent were married by age 20. The proportion of women getting married by age 15 decreases from 30 percent among women currently age 45-49 to 12 percent among those age 15-19, while the median age at first marriage increase from 17.3 years among women age 45-49 to 19.8 years among women age 20-24. These two findings provide evidence of an increase in age at marriage in Nigeria over the past generation. A comparison with results from the 2003 NDHS survey indicates that the median age at first marriage among women age 20-24 has increase from 19.1 to 19.8 years.

The lower panel of Table 2 below shows the distribution of age at first marriage among men. Men marry considerably later than women. About one in four women age 25-49 (24 percent) were married by age 15 compared with less than 1 percent of men. Only 13 percent of men age 25-49 had married by age 20, compared with 60 percent of women. By age 25, only 39 percent of men were married.

- 200 officers from NAPTIP, Lagos and Enugu zonal offices, law enforcement officers, and immigration officers were equipped with improved skills to work effectively in the area of prevention, arrest, reporting and prosecution of child traffickers, repatriation and reintegration of trafficked victims.
- 213 law enforcement officers comprising NAPTIP, Police and Immigration officers acquired skills on trafficked victim support and are contributing to the overall support for victims of child trafficking in Adamawa, Taraba, Kano, Jigawa, Yobe and Borno States.
- 1,150 Nigeria Police officers in the anti human trafficking units and juvenile welfare desks were equipped with improved knowledge on standardized rehabilitation procedures for the care and support of 990 abandoned babies and child survivors of trafficking from Borno, Edo, Plateau and Lagos States.
- Production of a manual on Trafficking in persons infused into the Police Training Curricula has strengthened the capacity of the Nigeria Police to deliver protection services to the vulnerable children and women, facilitate the arrest, prosecution and conviction of traffickers.
- 2,100 duty bearers including media executives, parents, market women leaders, NURTW members, children and 520 right holders in Plateau and in 23 LGAs in Lagos, Ondo and Ogun States acquired better understanding of the current trend in child trafficking and its dangers and are providing support towards its prevention in the states.
- Anti-trafficking networks established in 44 LGAs spread across Adamawa, Taraba, Kano, Jigawa, Yobe and Borno states are actively promoting awareness on child trafficking with prompt response to incidents of child trafficking including facilitation of family tracing and reintegration.
- 50 CSOs acquired improved skills to provide recovery and protection services to victims of trafficking, Abuse and labour.

(f) Further, in 2006, about 10,568 duty bearers and right holders including traditional/community leaders, religious leaders and groups, market men and women, community members, in and out of school children in five States (Kano, Jigawa, Borno, Adamawa and Taraba) had improved knowledge on the menace of child trafficking, exploitation/child labour and abuse and these are demonstrating commitment and support towards the prevention of child trafficking at all levels in their States.

(g) In addition, 1,790 school children from the Southern Nigeria endemic States were exposed to the various techniques and strategies employed by traffickers in luring victims and are now in a better position to make informed decision when faced with offers from traffickers.

(h) Quiz competition on child trafficking phenomenon and other protection issues was used as a didactic/informative methodology to impact the knowledge of 114 children from these endemic states and in particular Uyo in Akwa Ibom State.

(i) 31 Law enforcement agents, teachers, School Based Management Committee members and officers of the UNICEF focal Local Government Areas were all equipped to provide a protective environment for children in these States through the monitoring and investigative technique programmes they were exposed to.

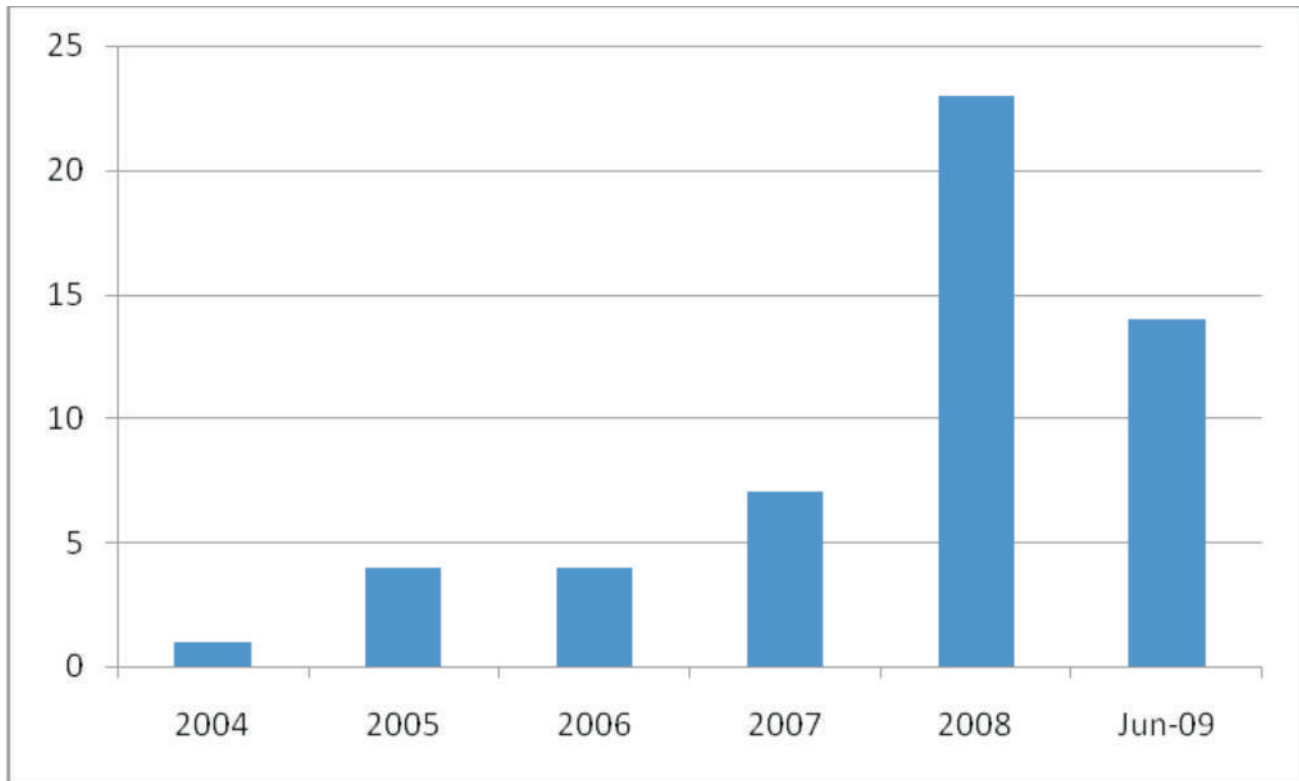
(j) In Kano State, a total of 3,565 persons including local government chairmen, community and religious leaders, in and out of school adolescents and young people from 5 LGAs (Kura, Bukure, Danbatta, Gezaewa and Wudil) had better understanding on the dangers of child trafficking and child labour.

(k) In Jigawa State, members of the Nigeria Police, Nigerian Immigration Services, State Security Services, National Union of Road Transport Workers, traditional rulers, religious leader, representatives of the

In figure 29, some 73 victims of TIP were rescued in 2004, 341 in 2005, and a total of 364 in 2006. The following years 2007 and 2008 recorded 1,004 and 1,269 victims of TIP respectively. In the past six months of the current year, 2009, some 588 victims were rescued bringing the total of victims rescued to 3,638. The overall outlook indicated that the lowest number of rescued victims was recorded in 2004, while 2008 accounted for the highest number of victims.

(c) The level of success recorded in the numbers shown in figure 26 can be linked to interagency cooperation and collaborative initiatives existing between the role players involved in the area of rescue and reintegration of child victims of trafficking. The Police have consistently played a commendable role in the rescue of children. The Police were able to rescue 96 or 71% out of 135 children rescued in 2006. The Police demonstrated the same leadership role in 2007 with the rescue of 277 victims. Between 2008 - June 2009 the police has rescued 1,857. Families and community members also participated in the rescue of children, but the exact numbers of such families are not known.

Figure 30: Convictions of suspects on trafficking from inception - to 2009



Source: NAPTIP Update 2009

Figure 30 indicates that a total number of 64 suspects were convicted between the year 2004 and 2009 and a higher number of convicted suspects were recorded from 2007 to 2009. The lowest conviction was recorded in 2004, while 2008 recorded the highest number of convictions.

- (d) NAPTIP established a joint investigative mechanism with the Police, Immigration, Custom and other security agents to promote co-operation amongst security agents empowered by law to investigate TIP cases.
- (e) With the framework of the **FGN-UNICEF Programme of Co-operation 2002 – 2009, the Child Protection section reported the following results under its** anti-child trafficking network project;

Table 2: Age at First Marriage								
Percentage of women and men age 15-49 who were first married by specific exact ages, and median age at first marriage, according to current age, Nigeria 2008								
Current age	Percentage first married by exact age					Percentage never married	Number of respondents	Median age at first marriage
	15	18	20	22	25			
Women								
15-19	12.4	NA	NA	NA	NA	70.6	6,493	A
20-24	16.4	39.4	51.4	NA	NA	38.4	6,133	19.8
25-29	18.8	42.3	53.5	64.2	76.5	16.2	6,309	19.3
30-34	23.3	47.7	58.7	68.3	78.7	5.8	4,634	18.4
35-39	22.8	49.0	60.6	70.9	82.1	2.6	3,912	18.2
40-44	28.2	52.8	64.3	74.7	84.9	1.4	3,032	17.5
45-49	29.9	55.4	68.8	78.5	87.0	0.8	2,872	17.3
20-49	21.9	46.1	57.8	NA	NA	14.2	26,892	18.6
25-49	23.5	48.1	59.7	69.9	80.7	7.0	20,759	18.3
Men								
15-19	0.1	NA	NA	NA	NA	99.0	2,532	A
20-24	0.1	3.0	7.8	NA	NA	84.4	2,378	A
25-29	0.1	4.3	10.0	18.9	34.8	54.3	2,459	A
30-34	0.1	4.8	11.9	21.0	38.6	24.5	2,058	26.9
35-39	0.0	6.4	14.1	23.3	40.5	7.8	1,794	26.5
40-44	0.2	6.8	16.2	27.3	44.5	2.8	1,413	25.9
45-49	0.1	5.1	12.7	22.9	39.8	1.4	1,174	26.5
20-49	0.1	4.9	11.6	NA	NA	35.8	11,276	A
25-49	0.1	5.4	12.6	22.2	39.0	22.8	8,898	A
20-59	0.1	5.1	12.0	NA	NA	31.3	12,954	A
25-59	0.1	5.5	12.9	22.6	39.7	19.3	10,576	A
Note: The age at first marriage is defined as the age at which the respondent began living with her/his first spouse/partner. NA = Not applicable due to censoring A = Omitted because less than 50 percent of the women married for the first time before reaching the beginning of the age group.								

Source: Nigeria: Demographic and Health Survey, 2008, Table 6.3

Median Age at First Marriage

The median age at first marriage by current age and background characteristics is shown for women and for men in the 2008 NDHS Survey. The results show considerable variation in age at first marriage by background characteristics. For women age 25-49, those who reside in urban areas marry roughly four years later than their counterparts in rural areas (21.1 years compared with 16.9 years). By zone, the median age at first marriage ranges from 15.2 years in North West to 22.8 years in South East. The median age at first marriage increases from 15.5 years among women with no education to 22.0 years among women with secondary education. By wealth quintile, median age at first marriage increases from 15.4 to 23.1 years.

Also, the 2011 Nigeria Multiple Indicator Cluster Survey (MISC 4) indicates that about 20 percent of young women age 15-19 years is currently married. The proportion in urban is 8 percent and rural is for 28 percent. The proportion for those with secondary education is 6 percent but for none educated is 72 percent. North-West has about 52 percent of young women age 15-19 years currently married, while it was 3 percent in South-East. Percentage of women age 15-49 years in polygamous marriage/union in Nigeria is 34 percent.

In Nigeria, 18 percent of women married before age 15 while 40 percent married before age 18 Urban-rural, geopolitical zones and wealth index quintiles are important factors. About 44 percent of women aged 20-24 is currently married to a man who is ten years or more older and 52 percent of women age 15-19 are currently married to men who are older by ten years or more. Significance differences are observed between zones in the North and

South and education of women. Despite the above appreciable progress, the following are some of the key challenges being faced in addressing the above phenomenon: -

- Weak implementation of policy frameworks by Federal and State Ministries of Women Affairs largely due to under-funding and inadequate staffing;
- Limited material and financial capacity to generate, analyse and use data and to coordinate the activities of national and international actors in child protection issues nationwide.
- Addressing the socio-cultural determinants of early marriage in the rural areas and among the poor/illiterate populace.

3. The Committee recommends that the State party to strengthen its efforts to further harmonize the various minimum ages in line with the Charter.

Response 3: The Nigerian Law Reform Commission, a statutory body responsible for reforming laws and harmonization of Marriageable Age in Nigeria has already completed a review of the tripartite family legal regimes in its 3 volume 2006 reports and is engaging multi-stakeholders in a wider and painstaking consultations/dialogue nationwide.

4. The practice of Female Genital Mutilation (FGM) is still prevalent especially in the Northern States. The committee is thus concerned by the lack of information in the State Parties Report on the measures taken and programme or strategies in place to combat early child marriages, entrenched harmful traditional and cultural practices that hinder the best interest of the child.

Response 4: Information on measures taken and programmes or strategies in place to combat early/child marriages, harmful traditional and cultural practices such as FGM are:

- Federal Ministry of Women Affairs and Social Development (2007): National Gender Policy Goal, Objectives and Implementation Strategies on Gender-Based Violence: The National Gender Policy and the subsequent Strategic Document for Implementing the National Gender Policy provide the following policy goal on gender-based violence:
Eradicate all forms of gender-based violence and discrimination, and ensure that women and men enjoy the same rights irrespective of their gender, age, ethnicity, religion and class.
To achieve the above gender-based violence policy goal, the National Gender Policy provides the following policy objectives:
Legislate against all forms of gender-based violence and discrimination.
Build the capacity of institutions and persons in support of transformatory change that will bring about a society free of all forms of gender-based violence.

To achieve the stated policy goals and objectives, the following strategic guidelines for policy implementation become paramount:

- Create awareness and disseminate information on the magnitude and consequences of gender-based violence
- Promote awareness on existing protective national laws and practices, relevant policies and national plans of action.
- Sensitize policymakers and other key stakeholders who should initiate necessary reforms on socio-cultural practices that affect women's lives;
- Improve the knowledge and skills of service providers, notably health workers, law enforcement agents, teachers and social welfare officers;
- Provide the basis on which stakeholders develop specific plans for the implementation of gender-based violence interventions and policies.
- National Guidelines on Prevention and Response to Gender-Based Violence and Intervention Strategies in

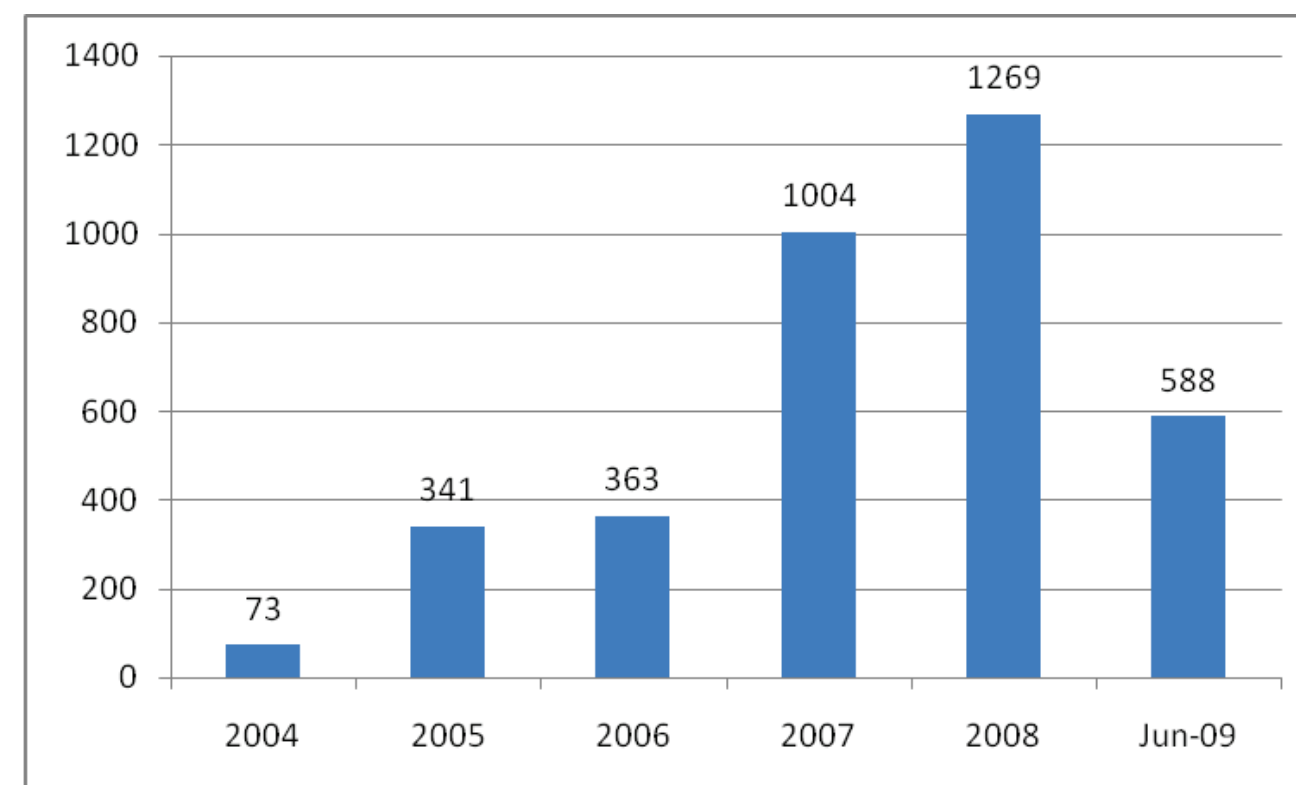
The Immigration Service recently established a specialized Anti-Human Trafficking Department. The Nigeria Police also has a unit dealing with internal and external trafficking. Several NGOs have undertaken awareness programmes on the issue of human trafficking, especially of women and children. The impact of Nigeria's cooperation with countries of destination has resulted in an increase in the number of arrests and prosecution of those involved in women and child trafficking and other forms of sexual exploitation. Development partners, international agencies and NGOs have given material and technical support to NAPTIP to assist in the rescue, rehabilitation and social reintegration of trafficked persons.

(iii) Efforts to Combat Child Trafficking

(a) NAPTIP works closely with other government ministries, CSOs and development partners in effecting the provisions of the Law. Joint collaborative initiatives have resulted in the design, implementation and monitoring of programmes to rescue, rehabilitate and reintegrate trafficked victims and survivors. In line with international standards, careful plans were developed for reception, sheltering, and counselling of each trafficked person identified. In addition, family tracing mechanism was employed to reunite rescued victims with their families. Arrangements are made for skills acquisition programmes and start up grants/loans for the survivors. Supporting trafficked persons to establish income-generating activity, enrolling school aged children in schools are employed as a preventive strategy since it has been shown that vulnerability, particularly of children, is amplified with increased poverty.

(b) To facilitate its protection programmes, NAPTIP currently operates 8 shelters. Rehabilitation of trafficked persons is undertaken in close collaboration with local and international organisations that provide both technical and financial assistance. The shelters are staffed and managed by qualified social workers employed by NAPTIP.

Figure 29: Numbers of rescued victims from 2004 – June, 2009



Source: NAPTIP 2009

children. In September, 2001, the Federal Government inaugurated an inter-Ministerial Committee on Human Trafficking, to deal with all issues on human trafficking, including the repatriation and rehabilitation of trafficked victims. This evolved into the office of the Special Assistant to the President on Human Trafficking and Child Labour.

Cooperation Agreements have been signed between Nigeria, Spain, Italy, the United Kingdom, Benin Republic and Saudi Arabia. In addition, the Nigerian Government has signed agreements with other countries including France, The Netherlands, Norway and the United States of America. Two coordinating groups and an Anti-Trafficking Network have been set up by NAPTIP, with the support of the United States Department of State and UNICEF to facilitate synergy and convergence on combating Child Trafficking in Nigeria

ECCAS/ECOWAS Multilateral Agreement on TIP was also signed in Abuja Nigeria in July, 2006.

Anti - Trafficking Networks have been established in 17 Southern Nigeria trafficking endemic States of Ogun, Lagos, Ondo, Delta, Edo, Akwa Ibom, Cross River, Rivers, Ebonyi, Imo, Anambra, Benue, Ekiti, Enugu, Oyo, Osun and Abia for sensitisation and awareness creation of people at the grassroots to stem the problem of trafficking from source.

With the emerging trends, focus has also shifted to identifying the major routes for trafficking situated in the Northern States. Consequently, an assessment of the situation of child trafficking in Borno, Yobe, Jigawa, Adamawa, Taraba and Kano States was conducted to provide an update on the magnitude, sources, transit routes, perpetrators and destinations of children trafficked in these states leading to the expansion of the Network to another 12 States in the North namely Kano, Kaduna, Nasarawa, Katsina, Yobe, Borno, Niger, Jigawa, Sokoto, Kebbi, Kwara and Taraba, Presently, the network has been expanded to cover all the 36 States of the Federation and Abuja.

Strong partnerships have been developed both at national and State levels with the Police, Immigration, NGOs and other governmental agencies to address the problem of child trafficking.

Information, Education and Communication Materials like Posters, Fact sheets, Victims Support Manual and NAPTIP's News have been published and circulated widely to educate the stakeholders and the populace as a preventive measure of illicit act of Child Trafficking.

About 24,000 copies of **Trafficking in Persons (Prohibition) Law Enforcement and Administration Act (TIPLEA Act)** have so far been circulated nationwide to educate, sensitize and create awareness on the malaise of child trafficking.

Joint Border Patrol has been initiated among Law Enforcement Agencies like the Nigeria Police, the Nigeria Immigration Service (NIS), the Nigeria Customs Service (NCS) and other border control agencies, to check the illegal movement or transfer of children across the borders. About 650 Law Enforcement Officers have been trained at the borders on detection, new trends dynamics of TIP.

A Training Manual on TIP for NAPTIP Care Givers and Investigators was published in 2007 to enhance the capability of the Agency's staff especially care givers and investigators.

Innovative Child Protection Interventions on 'Almajiri Child and Cross Border Crime and Multi-National Trafficking' in Nigeria were produced and circulated widely to educate stakeholders and would-be victims on the menace of Child Trafficking in 2007

curbing Harmful Traditional and Cultural Practices: - are intended to facilitate preventive and protective initiatives by various stakeholders and to assist victims of gender and sexual violence nationwide.

- Federal Ministry of Women Affairs and Social Development (2009): National Plan of Action on CRC/CRA, 2009-2015: Intended to reduce all forms of harmful traditional and cultural practices by 2015 through Harmful Traditional Practices Eradication Programmes anchored on the following strategies and

activities: -

Strategies:

- Increase sensitization and awareness on the negative effects of Harmful Traditional Practices;
- Implement existing laws protecting children against Harmful Traditional Practices.

Activities:

- Hold workshops and sensitization meetings to create awareness and behavioural change;
- Partner with electronic and print media for effective campaign against Harmful Traditional Practices;
- Advocacy and sensitization visit to community leaders, leaders of Faith Based Organisations, opinion leaders and traditional birth attendants.
- The 2008/9 National Demographic and Health Survey reveals the decreasing prevalence of FC/FGM among sequentially younger age groups. According to the NDHS 2008 findings, 30 percent of Nigerian women are circumcised. Variations in the prevalence of circumcision are similar to those observed for knowledge of the practice. For example, the prevalence of FGC is greatest in the Southern zones, among the Yoruba and Igbo, and among urban residents. The prevalence of FGC among Yoruba (58 percent) and Igbo (51 percent) helps to explain zonal and urban-rural differentials because the Yoruba and Igbo traditionally reside in the South West and South East zones, which are more urbanized than the Northern zones. Differentials in the prevalence of female circumcision by age indicate that the practice has become less common over time. Women age 45-49 are nearly twice as likely as women age 15-19 to have been circumcised 938 percent compared with 22 percent).

Table 3: - Knowledge and Prevalence of Female Circumcision							
Percentage of women who have heard of female circumcision, percentage of women circumcised, and the percent distribution of circumcised women by type of circumcision, according to background characteristics, Nigeria 2008.							
Background characteristics	Percentage of women circumcised	Number of women	Type of Circumcision				Number of women circumcised
			Cut, flesh removed	Cut, no flesh removed	Sewn closed	Other ¹	
Age							
15-19	21.7	6,493	44.6	2.1	5.3	1.3	1,406
20-24	26.4	6,133	41.6	2.7	5.0	1.4	1,619
25-29	28.9	6,309	43.6	3.7	5.0	2.1	1,823
30-34	32.8	4,634	43.0	3.1	5.7	1.6	1,521
35-39	33.9	3,912	48.0	3.1	4.1	0.9	1,325
40-44	36.4	3,032	50.7	3.5	4.9	2.0	1,103
45-49	38.1	2,872	49.6	2.7	7.3	1.5	1,093
Residence							
Urban	36.8	11,934	47.0	2.8	3.9	1.6	4,390
Rural	25.6	21,451	44.1	3.2	6.4	1.5	5,500
Zone							
North Central	11.4	4,748	56.5	1.4	8.2	0.5	544
North East	2.7	4,262	48.0	13.8	17.6	0.0	116
North West ²	19.6	8,022	24.4	0.6	10.5	0.4	1,573
South East	52.8	4,091	48.7	1.33	5.5	4.8	2,162
South South	34.2	5,473	50.8	3.6	5.7	1.5	1,873
South West	53.4	6,789	47.9	4.7	1.8	0.3	3,623
Ethnicity³							
Ekoi	34.9	555	47.0	2.5	18.6	3.9	194
Fulani	8.5	2,020	20.2	3.6	5.8	0.0	172
Hausa	20.3	7,431	25.4	0.4	10.2	0.4	1,507
Ibibio	15.8	819	66.8	6.1	2.2	3.5	130
Igbo	51.4	5,295	46.6	1.4	5.2	4.0	2,724
Ijaw/Izon	23.5	1,169	59.1	6.9	4.7	1.8	274
Yoruba	58.4	5,924	50.3	4.7	1.9	0.4	3,458
Others	14.0	10,034	50.6	3.8	6.6	0.5	1,400
Education							
No education	18.0	11,942	38.6	2.9	8.3	1.0	2,150
Primary	35.8	6,566	49.1	3.2	4.6	2.4	2,347
Secondary	36.0	11,904	46.2	2.7	4.5	1.3	4,286
More than secondary	37.2	2,974	47.2	4.2	3.9	1.9	1,107
Wealth quintile							
Lowest	13.4	6,194	38.2	2.1	8.4	1.7	832
Second	23.0	6,234	47.2	2.2	8.2	1.1	1,436
Middle	29.9	6,341	47.8	3.4	5.6	1.7	1,897
Fourth	39.1	6,938	45.9	3.5	4.2	1.8	2,716
Highest	39.2	7,678	44.5	3.0	3.8	1.5	3,010
Total	29.6	33,385	45.4	3.0	5.3	1.6	9,890

¹This category consists of respondents who said they were circumcised, but responded 'no' to 'cut, flesh removed,' 'cut, not flesh removed,' and 'sewn closed'.

²The observed prevalence of 20 percent in the North West zone in 2008 is due primarily to a prevalence of 74 percent in Kano State. Angurya and Gishiri cuts were included in the definition of female circumcision in Kano State.

³Total includes 31 cases with information missing on ethnicity.

Source: Nigeria: Demographic and Health Survey, 2008, Table 18.1

8.12 Concrete Measures Taken to Ensure that Children Within the Extended Family Situation are not Exploited or Abused as Domestic Workers.

CRA 2003, Sections 28(1) (b) (d); and 30(2) (a) provide for the protection of children, who are under the care of family/relations, from abuse and exploitation.

NGOs, in partnership with some UN agencies and NAPTIP, have embarked on public awareness campaign against child domestic work which includes exploitation of children within the extended family setting. . The campaign is currently on going.

8.13 Specific Programmes for the Prevention and Combating of the Ill - Treatment of Children, Child Abuse and Neglect

Between 2004 and 2009, there have been several programmes to raise awareness on the rights of children and against ill treatment of children. These programmes include:

- The Children's Parliament, which raises issues concerning ill treatment of children
- Children's Day celebrations (May 27), World Day Against Child Labour (June 12), Day of the African Child (June 16) and other international Days for children are usually used to create awareness on the plight of exploited and deprived children across the country at the Federal, State, Local Government and Community Levels.
- Public enlightenment programmes by NGOs and Government agencies on the rights of the child and prevention of abuse and neglect of children through radio, television, community and drama presentations, and through Parent/Teachers Association in schools are ongoing.
- Festivals of Arts and Culture and school debates on -prevention and combating of ill treatment of children- is providing opportunities for dialogues and engagements between Government officials other child's rights advocates on prevention methods.

8.13.1 Steps Taken to Combat the Illicit Transfer and Non-return of Children Abroad.

(i) Legislative Measures

Legislative measures against human trafficking, including trafficking in children, have been taken at the national level by the Federal Government and at the State levels by some State Governments. At the National level, the CRA under Section 30(2) (b) provides that '*a child shall not be used as a slave, or for practices similar to slavery such as trafficking of the child, debt bondage etc.*'

Sections 223-225 of the Criminal Code, applicable in Southern Nigeria, and Articles 278-280 of the Penal Code, applicable in Northern Nigeria provide for sanctions against human trafficking. Section 34 of the 1999 Constitution prohibits slavery and forced labour.

Furthermore, the *Trafficking in Persons (Prohibition) Law Enforcement and Administration Act 2003* prohibits trafficking in persons and provides for the rehabilitation of victims of trafficking. In line with this Act, Nigeria established the **National Agency for Prohibition of Traffic in Persons and Other Related Matters (NAPTIP)** in August, 2003.

With the amendment to the legislation in 2005, Section 54 of the Act established for NAPTIP, a Trafficked Victim's Fund into which all proceeds of the sale of assets and properties of traffickers are channelled for victim's rehabilitation.

(ii) Administrative Measures

A number of administrative measures have been undertaken to combat illicit transfer and non-return of

At the state level, a number of laws have been enacted to protect children from abuse. Bauchi State enacted the **Hawking by Children (Prohibition) Edict No 11 of 1985**. Under the Edict, parents or guardians who send out their children for hawking in contravention of the Edict are liable to a maximum punishment of one-month imprisonment without an option of fine.

(b) Administrative Measures

Social welfare offices at state and federal level provide support and care to children who are victims of abuse and injury. NGOs, CBOs, media organisations and concerned individuals have also contributed immensely towards bringing the issues of abused, neglected and injured children to public notice including the rehabilitation of such children.

8.10 Legal Measures Prohibiting all Forms of Exploitation Against Children

The **Child's Rights Act 2003** criminalizes the exploitation of children, including exploitative labour, (**Section 28**), sexual abuse and exploitation (**Section 32**), and other forms of exploitation (**Section 33**). Bauchi State enacted **Juveniles Accompanying Quranic Mallams (Prohibition) Edict No 9 of 1985** to prohibit the exploitation of children through the *Almajiri* practice.

8.11 Information on Children Suffering all Forms of Violence, Abuse, Neglect, Maltreatment or Exploitation - Article 27

The National Human Rights Commission was established in 1995 to create an enabling environment for extra-judicial recognition, promotion, protection and enforcement of human rights, in addition to providing a forum for public enlightenment and dialogue on human rights. The Commission has been very active in the area of giving redress to aggrieved and violated persons including children who suffer any violation of their rights.

In compliance with the 1993 Vienna declaration and programme of action adopted at the world conference on Human Rights, the Nigerian Government adopted a National Action Plan (NAP) in 2005 to progressively monitor compliance with all her International Human Rights obligations to the benefit of her people. An extensive part of the NAP document is dedicated to the rights of children. For effective implementation and monitoring of the interest of children, a Human Rights Commissioner was appointed as a Special Rapporteur on the rights of children. The rapporteur's mandate is to monitor and collate data on Child-Rights abuse in response to the current data gap.

Categories of child abuse and numbers of incidences of abduction as recorded from 2004-2009 are shown in Table 46.

Table 46: Categories of child abuse

Year	Denial of Access to the child	Neglect	Abandonment	Abduction	Abuse	
2004	1	3	10	1	1	16
2005	4	9	10	2	6	31
2006/7	-	13	12	1	10	36
2008/9	-	-	1	4	52	57
Total	5	25	33	8	69	140

Source: National Human Rights Commission: 2009

- More recently, the 2011 MICS 4 also found that in Nigeria, 27 percent of women aged 15-49 years had one form of FGM/C or another. Of this number, 13 percent had flesh removed, 2 percent were nicked, and 1 percent was sewn closed while about 11 percent could not determine the form of the mutilation. The percentage of women involved in FGM/C is least in North-East (3 percent) and highest in the South-West (4 8 percent). The prevalence of FGM/C is associated with age, education and wealth status. Twenty two percent of women thought it should be continued while 66 percent believed it should be discontinued.

5. The committee notes with appreciation the instituted universal free primary and junior education up to the age of 15 years. This seems to have increased the gross enrolment from 37.6% in 1999 to 88% in 2003. According to the report the enrolment seems to decline drastically in 2006. The committee recommends that the state party do accord priority in the area of education and adoption of measures that creates an enabling environment for child retention in school. It is also noted from the report although education is free, it is unavailable in many parts of Nigeria, and there is high illiteracy among girls and women. The Committee request the State party to include in the next periodic report, information on programmes for child retention in school, student teacher ratio, gender disparities, corporal punishment in schools and the nature of facilities in place. The committee recommends the expansion of vocational training especially for children over 15 years who have graduated from compulsory free education and are unable to further their education. It is further recommended that there be developed cooperation with the local national and regional actors on the area of education of children.

Response 5: Information on programmes for child retention in school, gender disparities, corporal punishment, facilities, vocational training programmes for graduates and cooperation with other partners/actors working on child education include the following:

1. Legislative and Policy Measures and Other Initiatives driving the Intervention Programmes

- In addition to the main poverty reduction strategy paper NEEDS and the Transformation Agenda of the Federal Government of Nigeria, the following are the main documents on national laws, policies and key programmes in the education sector:
 - The 1999 Constitution
 - National Policy on Child Labour, 2013.
 - Draft National Policy on Special Needs Education/Implementation Guidelines, 2012
 - Training Manual on Adaptation and Implementation of Inclusive Education in Nigeria, 2010
 - A Strategic Framework for the Revitalization of Adult and Youth Literacy in Nigeria, 2012.
 - Universal Basic Education (UBE) Act 2004
 - Child's Right Act 2003
 - National Child Policy 2007
 - National Policy for Integrated Early Childhood Development in Nigeria (2007)
 - National Minimum Standard for Early Child Care Centres in Nigeria (2007)
 - National Gender Policy on Education 2007
 - National Framework on Girls' and Women Education, 2012
 - Guidelines for Implementing National Policy on Gender in Basic Education, 2007
 - National Policy on Gender in Basic Education, 2007

• The above policies/laws seek to ensure the access of all children of primary and junior secondary school age (6-14+ years) in Nigeria to free, compulsory and universal basic education. This policy objective of free and compulsory education including skill acquisition fits well into employment and job creation objectives, the overall national development strategy on the free mid-day meal will no doubt impact positively on the health and nutrition objectives. Governments in Nigeria (Federal, State and Local) have primary responsibility to fund and manage basic education; with Federal Government playing the intervention/assisting role. The Agencies involved include: the Universal Basic Education Commission (UBEC), State Universal Basic Education (SUBEB), Local Government Education Authority, private sector and development partners.

- The UBE ACT prescribes minimum standard of basic education throughout the country and UBEC is expected to monitor, supervise and coordinate the implementation of specific programmes for the attainment of compulsory, free and universal basic education. Relative to health and nutrition, basic education has the highest budgetary allocation and is most essential in poverty and deprivation reduction. This is because of the linkages between education, health, improved sanitation, access to information and improved knowledge of child rights and protection. Thus it is a very effective means of addressing the MDG goals and targets relating to children.

- **Though the Nigerian Constitution does not directly provide for the right to education, yet section 18 of the Constitution on educational objectives obligates the government** to direct its policy towards ensuring that there are equal and adequate educational opportunities at all levels.

(2) Government shall promote science and technology.

(3) Government shall strive to eradicate illiteracy, and to this end Government shall as and when practicable provide:

- a) free, compulsory and universal primary education;
- b) free secondary education;
- c) free university education; and
- d) free adult literacy programme.

- **Section 15 of the Child Rights Act, 2003**, every child has the right to free, compulsory and universal basic education and it shall be the duty of the Government in Nigeria to provide such education.

(2) Every parent or guardian shall ensure that his child or ward attends and completes his:

- a) Primary school education; and
- b) Junior secondary education.

(3) Every parent, guardian or person who has the care and custody of a child who has completed his basic education, shall endeavour to send the child to a senior secondary school, except as provided for in Subsection (4) of this section.

(4) Where a child to whom Subsection (3) of this section applies is not sent to senior secondary school, the child shall be encouraged to learn an appropriate trade and the employer of the child shall provide the necessities for learning the trade.

(5) A female child who becomes pregnant, before completing her education shall be given the opportunity, after delivery, to continue with her education, on the basis of her individual ability.

- The **National vision 2020 for Nigeria** is to become an emerging economy model, delivering sound education policy and management for public good. Nigeria is also on course to meet the target of Millennium Development Goal that all boys and girls complete primary education i.e. 100% by 2015.

- **Government also collaborates with some international agencies like UNICEF, JICA, UNESCO, DFID, USAID, WHO and other development partners for the promotion of education in Nigeria.** Their intervention and contributions are in the following areas: Manpower training; Supply of textbooks equipment; Development of new institutions; Curriculum Development; Construction/refurbishing classrooms, libraries, laboratories toilets etc; Provision of computers and other related facilities; and Giving scholarship among others.

2. Achievements recorded in respect of Children / Girl-child / Women Education: - 2010-2013

- Remarkable increase achieved in the area of net enrolment ratio and net attendance ratio in primary education, up from 62.1 percent in 2008 to 70.1 percent in 2012.
- Improved enrolment in basic education: a) primary school – 2010 – 18,234,323 while in 2012 the figure increased to 21,947,513. b) junior secondary school – 2010 – 5,010,227 while in 2012 the figure increased to 6,210,956 (UBEC 2012 and Nigeria: Digest of Education Statistics: 2006-2010).

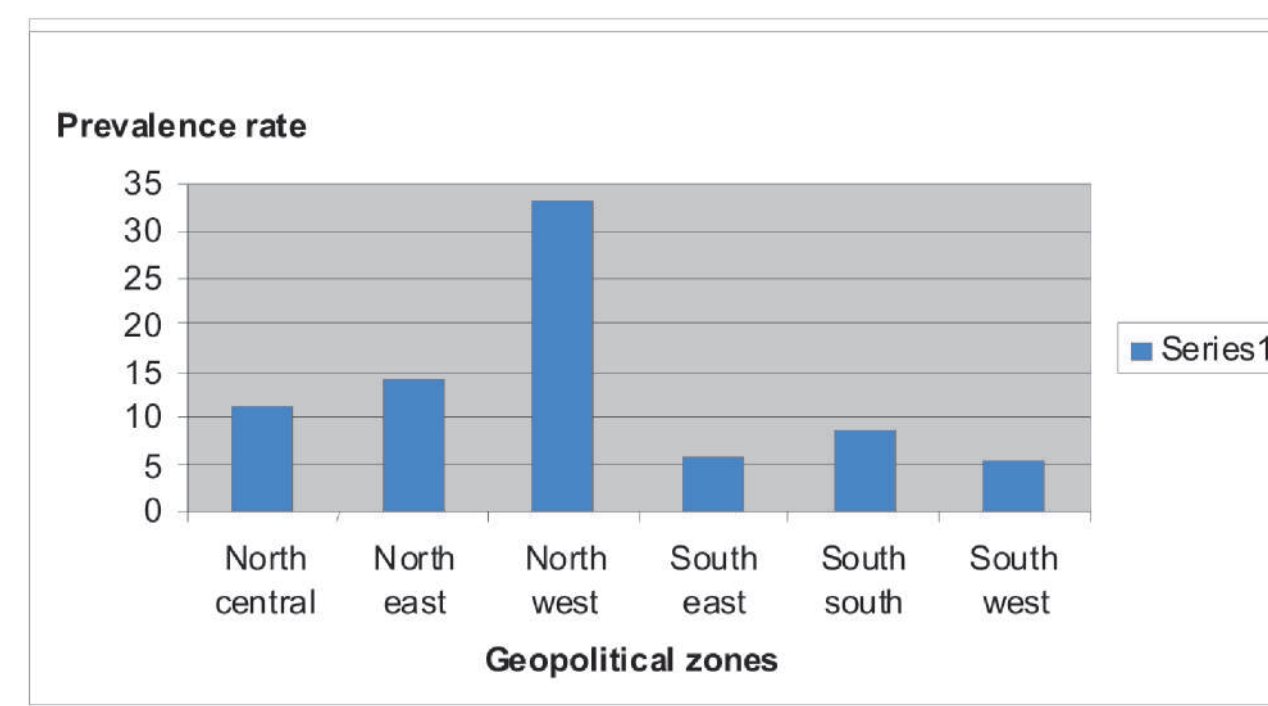
(e) Early Marriage

Sections 21 and 22 of CRA prohibit child marriage or betrothal of a child. The section complements steps taken by some states that have passed laws against withdrawing children from school for marriage.

Early marriage as shown in figure 28 is still prevalent in the northern part of the country. The highest incidences are recorded in the North West zone 33.3%, North East 14.3%, North Central 11.2%, South-South 8.6%, South East 5.8 and the lowest in the South West with 5.4%.

International Agencies and NGOs are working in the Northern part of the country where the practice is endemic to keep children in school since a correlation exists between girls' education and age at marriage. This initiative is succeeding as there has been 10 to 15% increase in girls primary school enrolment in some Northern states while withdrawal rates have dropped

Figure 28: Child Marriage Profile



Source: Early Marriage Profile, MICS3, 2007

8.9.2 Measures Prohibiting Injury to and abuse of Children

(a) Legislative Measures

The *Child's Rights Act 2003* makes wide provisions prohibiting various forms of abuse of children including:

- **Prohibition of Bodily harm and tribal marks (Section 24, CRA 2003)**
- **Prohibition of exposure to use, production, and trafficking of narcotic drugs, etc (Section 25)**
- **Use of children in criminal activities (Section 26)**
- **Prohibition of exploitative labour (Section 28)**
- **Prohibition of buying, selling, hiring or otherwise dealing in children for the purpose of hawking or begging for alms or prostitution (Section 30)**
- **Unlawful sexual intercourse with a child (Section 31)**
- **Prohibition of recruitment of children into the Armed Forces (Section 34)**

Vanguard Clubs in Secondary Schools in Enugu State to commemorate “Day of African Child”. This sensitization program was to update them on the menace of child abuse.

The FMWA&SD has established a temporary shelter for female victims of violence to provide guidance and Counselling, facilitate access to justice and provide basic health and services to girls/women whose rights have been violated.

The Nigeria Police Force has created 12 piloting juvenile complaint desks in the 12 zonal commands (Lagos, Abuja, Kano, Yola, Jos, Benin, Calabar, Lokoja, Umuahia, Sokoto, Oshogbo and Bauchi) across the country.

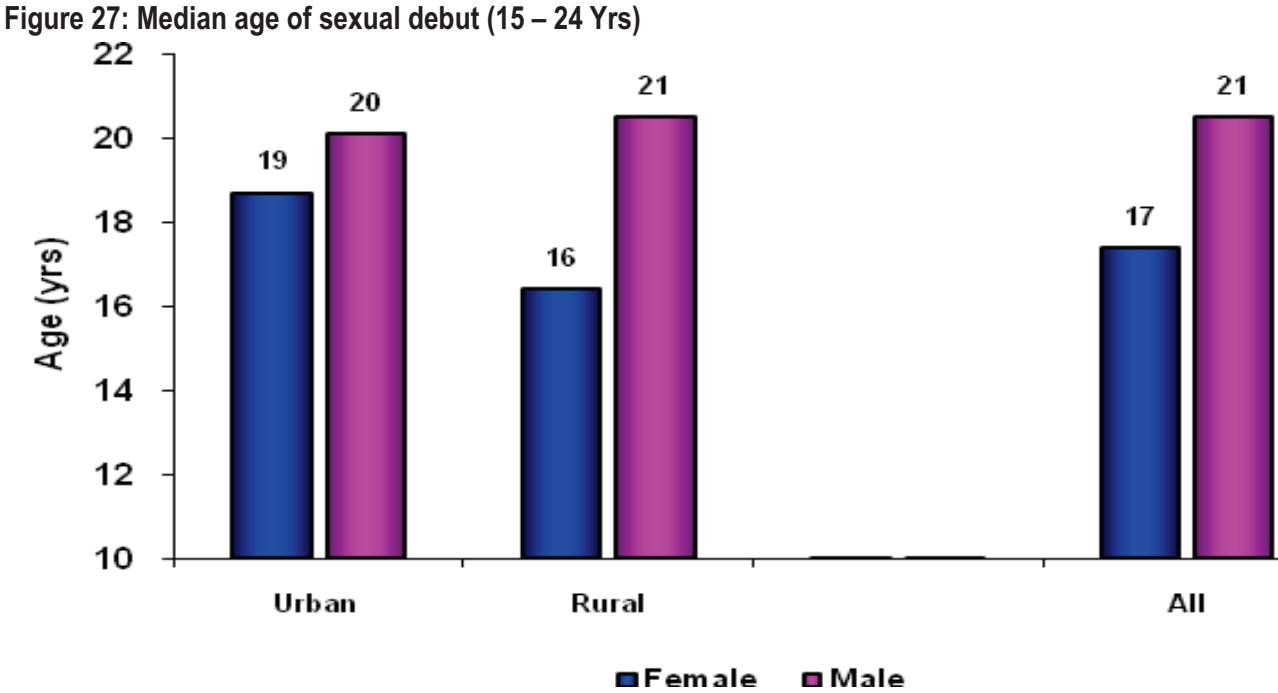
The NHRC has the mandate to receive and investigate complaints on violence against children. The Nigerian Police, Immigration and Custom Service have also established special units to handle cases of violence against children.

(c) Social and Educational Measures

Information dissemination about the dangers of violence against children forms a significant part of the mass awareness programmes of the NCRIC. In addition, some NGOs have embarked on enlightenment campaigns targeted at children, parents, teachers and communities on ways of reducing susceptibility of children to physical and mental violence.

(d) Median Age of Sexual Debut

One of the main focuses of the HIV/AIDS interventions is to ensure abstinence amongst the age at which most youths commence sexual activity. In figure 27, the median age of sexual debut for female was 17 while for male was 21. Females in rural locations are more likely to become sexually active in their early years.



Source: 2007 National HIV/AIDS and Reproductive Health Survey.

- Launching of the National campaign on Access to Basic Education across the geo-political zones to reduce number of out-of-school children especially the low participation of boys in education in the South East and the Almajirai-children in the North.
- Distribution of Instructional and library materials: (a) A total of 19.67 million instructional materials in four core subjects of English language, mathematics, basic science and technology, and social studies have been distributed to primary 1 & 2 pupils. (b) In addition to 4.144 assorted junior Secondary library materials were provided to schools across the country.
- Refurbishment and equipment of 51 federal and state Polytechnics with modern laboratories to encourage participation in **technical and vocational education and training**.
- Refurbishing 352 science and technical laboratories in the 104 Federal Unity Colleges, in addition to providing 62 ICT centres and 40 sets of mathematical kits.
- **Girls Education Programme Initiative in 13 States**
To continue to address the high rate of girls who are out of school, the construction of Junior Girls' Model Secondary School was initiated in 13 States of the Federation. The States are: Adamawa, Akwa Ibom, Bayelsa, Cross River, Delta, Ebonyi, Ekiti, Jigawa, Kaduna, Nasarawa, Rivers, Yobe and Zamfara. Some of the Schools have been completed while others are in different stages of completion as shown below:

Table 4: Girls Education Programme

Status	States
Completed and Ready for Handover	Adamawa, Jigawa, Nasarawa, Zamfara
90% completion	Rivers
75% completion	Akwa Ibom
70% completion	Delta, Ekiti
60% completion	Ebonyi, Yobe
40% completion	Cross River
20% completion	Bayelsa, Kaduna

Source: - Federal Ministry of Education, 2013

- To boost girl-child Education nationwide, tripartite partnership programme and funding between the Federal and State Governments and UNICEF had been launched since 2011 and has commenced disbursement of funds for the training of female teachers to States Universal Primary Education Boards. Sokoto state, one of the states with poor girl-child education record, trains 800 female teachers (2012-13) with N49.5m granted to 224 school-based management committees as critical components in achieving UBE for all.

1. Challenges of Gender Disaggregated Statistics Production in Nigeria: Focus on Girl Child / Women Education

The Nigerian Statistical System has witnessed improvements in the availability of gender statistics in recent times. Data producers are now able to produce sex disaggregated statistics in population, education, employment, parliamentary representation, land ownership and human trafficking. Also in many agencies, gender statistics in some hitherto unavailable areas are becoming available. These include violence against women, time use/domestic un-paid work, access to credit and Entrepreneurship amongst others.

The improved data situation has been enhanced by a number of developments including National Bureau of Statistics' (NBS) efforts at promoting gender statistics, the role of Women Affairs Ministry and development of the

National Gender Policy as well as contribution of international organisations such as UNICEF, UNDP and UNIFEM. There are however vital domains in which gender statistics are not yet available. These include HIV/AIDS, power, environment, infrastructure and physical security, all of which are critical areas of the Transformation Agenda.

The non-availability of these statistics can be traced to misunderstanding of the concept of gender, poor funding, lack of awareness of the need for gender disaggregation, non-mainstreaming of gender issues and concerns into data collection instruments. Also there is lack of commonly agreed uniform templates for data capture. In many cases, the concept of gender is conceived as relating to issues about women alone thereby denying gender issues of the support of men and the required funding and attention.

The most formidable challenge of gender statistics production in the country, however, is the issue of capacity. Many agencies are yet to have their staff trained in this important area of statistics. There is also lack of equipment and enabling structures for gender statistics production.

There is therefore need to address these challenges. Non-availability of reliable and comprehensive sex - disaggregated statistics will lead to exclusion of gender issues in the formulation and implementation process of policies and programmes.

(b) Administrative and other measures

The Federal Ministry of Health has, since 2004, commenced the commemoration of the 'Female Genital Mutilation (FGM) Day' on the 6th day of February. Since 2005/6, as part of programmes to mark the International Day of Zero Tolerance Activism on Violence against Women and to commemorate the 'Female Genital Mutilation (FGM) Day', a series of activities and intervention including training of 120 nurse tutors were carried out. This training covered the integration of FGM prevention and management into the schools curricula of Nursing/Midwifery/Public health Nurses/Community Health Officers in four health zones, namely South East, South West, North East and South-South.

Other Interventions Include:

- *A Joint ministerial press briefing on FGM by the Ministers of Health and Women Affairs and Social Development*
- *Symposium for secondary school teachers and journalists on FGM*
- *Sensitization visits to the lawmakers, policy makers, gate keepers, traditional/religious leaders and market women leaders to create awareness and behavioural change*
- *Production and distribution of Information, Education and Communication (I.E.C) materials.*
- *Electronic and print media round table discussions.*

These activities have created an increase in the level of public awareness nationwide; eleven states (Edo, Delta, Ogun, Ondo, Ekiti, Osun, Cross Rivers, Bayelsa, Rivers, Ebonyi and Oyo) have passed legislation prohibiting FGM.

The FMWA&SD also in commemorating the annual 16 days (25th November – 10th December every year) on Zero Tolerance Activism on Violence against Women conducted a sensitization training program for 50 Police Officers on the issues of violence against girls/women. The programme aimed to change the perception that domestic violence is a domestic issue and to underscore the point that such violation should attract sanctions.

Ebonyi state collaborated with UNFPA to commemorate the annual 16 days (25th November – 10th December every year) on zero tolerance activism on Violence Against Women/Girls

NAPTIP and other stakeholders on TIP have used various public enlightenment programmes such as advocacy, media campaigns and also circulation of print and electronic press to highlight the adverse effects of violence and ill treatment of children.

WOTCLEF and the National Youth Service Corps (NYSC) established WOTCLEF community and development service groups. The Youth corps members of these groups were charged with the responsibilities of reaching out to indigenes in the remote communities of each state with the anti-trafficking and child labour messages. In 2008, NAPTIP Corp Member's Forum sensitized a total number of 750 students in Abuja on the dangers of child trafficking and there are plans to set up NAPTIP Club in schools to continue the spread of the crusade

In 2008, NAPTIP Lagos Zonal Head featured in a local and international TV programme to educate the populace on the antics of traffickers.

In collaboration with the Enugu State Ministry of Gender Affairs and Social Development NAPTIP organised a one day programme to “expose Violence and TIP. The programme was marked by a motorcade rally along the major streets of Enugu State. NAPTIP also, organized a quiz competition for 15 Anti-Human Trafficking

The campaign aims to scale up efforts in line with the Millennium Development Goals and recent global commitments to AIDS.

8.9 Abuse and Neglect of Children—Articles 16 and 27, (CRA Section 50)

8.9.1 Measures in Place to Protect the Child from all Forms of Physical and Mental Violence

(a) Legislative measures

In respect of physical violence against children, both the Criminal Code operative in the South and the Penal Code operative in the North provide that while a parent, guardian, teacher or master may correct a child or apprentice under the age of 16 years by means of corporal punishment, such punishment must not result in the infliction of a wound or grievous harm.

In addition, no correction is justifiable which is unreasonable in kind or in degree, taking into account the age, physical and mental condition of the child on whom it is inflicted. Nor is physical correction justifiable where by reason of his tender years the child cannot understand the purpose for which it is inflicted. **(Section 295 of the Criminal Code and 55 of Penal Code)**

The **Child's Rights Act**, however, prohibits all forms of corporal punishment and other forms of physical and mental violence against children such as childhood marriage, and child abuse within the home.

Sections 21 - 23 of the Child's Rights Act provide that:

21. “No person under the age of 18 years is capable of contracting a valid marriage, and accordingly, a marriage so contracted is null and void and of no effect whatsoever

22. (1) No parent, guardian or any other person shall betroth a child to any person.
(2) A betrothal in contravention of subsection (1) of this section is null and void.

23. A person—

- (a) Who marries a child, or
- (b) To whom a child is betrothed, or
- (c) Who promotes the marriage of a child, or
- (d) Who betroths a child

Commits an offence and is liable on conviction to a fine of N500,000 (Five hundred thousand Naira) or imprisonment for a term of five years or to both such fine and imprisonment”

The Federal Ministry of Justice has completed a draft - Elimination of Violence in Society Bill 2006, already sent to the National Assembly for passage into Law. The bill has several sections defining violence against women and prohibiting such acts of violence against women and the girl - child. The Bill was drafted in line with Nigeria's International obligations.

In support of the proposed Federal Law, some State Houses of Assembly have recently made legislation to prohibit violation of girls/women's rights and punish perpetrators of violence especially in the states. The Houses of Assembly of Benue, Delta, Edo, Jigawa, Kaduna, Lagos, Abia, Anambra, Ebonyi, and Katsina States are already at different stages of passing Domestic Violence Prohibition Bills. The following legislation are already in place:

- Law to Prohibit Girl-Child Marriages and Female Circumcision. Law No.2 of **2000** of Cross River State.
- Law to Prohibit Domestic Violence Against Women and Maltreatment. Law No.10 of **2004** of Cross River State.
- Inhuman Treatment of Widows (Prohibition) Law **2004** of Edo State
- Malpractices Against Widows and Widowers (Prohibition) Law **2005**, of Anambra State.

Table 5 below reveals the fact sheet in respect of the gender indicators and the percentage difference in terms of population and families, health, education, decision-making etc.

Table 5: - Nigeria Gender Fact Sheet: - (2010-2011)

Indicators	Male	Female	Difference
Population & Families	%	%	%
1. Population 2006	49	51	2
2. Early Marriage	7.2	92.8	85.6
Health			
3. Percentage living with HIV Aids (Estimate 2010)	44.3	55.7	11.4
4. Life Expectancy (HDR 2008)	48	52	4
Education			
5. Youth Literacy in Any Language	86.0	79.0	7
6. Adult Literacy in Any Language	68.5	60.0	8.5
7. Adult Illiteracy	31.5	40	8.5
8. Primary School Enrolment (2010)	53.4	46.6	6.8
9. Secondary School Enrolment (2010)	54.2	45.8	8.4
10. Tertiary Enrolment: NCE (2009)	51.1	48.9	2.2
Polytechnic (2010)	72.3	27.7	44.6
University (2010)	61.6	38.4	23.2
Power and Decision Making			
10. Ministers (2011)	757(20)	23 (6)	54 (14)
11. Parliamentary Seats both houses (INEC)	93.6	6.4	87.2
12. State House of Assembly (INEC 2011)	94.5	5.5	89%
13. Permanent Secretaries (MDAs 2010)	96.5	3.5	93
14. Directorate (MDAs 2010)	90.8	9.2	81.6

Source: - NBS, Abuja (2011): - Gender Statistics Newsletter, at P.6

a) Gender disparity in primary school teaching and its effects on girls' enrolment

Experts believe that quality of education depends largely on the quality of teaching staff. Gender balance among the staff is critical for promoting gender parity and equality in access to and achievement in education. It is also closely related to improvement of gender parity in enrolments. Thus, as the proportion of female teachers increases, girls' enrolments rise relative to boys. The 'feminisation' of the teaching profession at the primary school level is usually considered desirable in any country's educational system where there is concern for improvement in girl child education. In the past, women were believed to be leading in terms of the number of teachers at the primary school level in Nigeria relative to men. This seems to have changed as analysis of Ministry of Education data on Table 6, 7 and 8 below shows that between 2006 and 2010, the average distribution of teaching staff at the primary school level has men and women sharing almost equal stake, on the average 51 and 50 percent respectively. Men are definitely dominating at the secondary school level both in terms of yearly share and five yearly average computation. Women's share in teaching drops significantly at the secondary school level and this has implications for girls' enrolment at that level.

Table 6: - Percentage Distribution of Secondary Schools Teachers (Public and Private) by Year and Gender)

Year	Male	Female
2006	58.3	41.7
2007	61.9	38.1
2008	60.1	39.2
2009	50.9	48.1
2010	56.1	43.9

Source: - Ministry of Education Digest of Statistics 2010

Average	
M	58
F	42

Table 7: - Percentage Distribution of Primary Schools Teachers (Public and Private) by Year and Gender

Year	Male	Female
2006	49	51
2007	48.7	51.3
2008	52.3	47.7
2009	49.9	50.1
2010	51.7	48.3

Source: - Ministry of Education Digest of Statistics 2010

Average	
M	51
F	50

- Balanced and comprehensive prevention strategies
- Youth friendly health centres
- Peer Educators
- Counselling, testing and control of STIs
- Communication materials & media
- Participation
- Strategies responsive to risk factors
- Inclusion of HIV/AIDS risks and vulnerabilities in emergencies

b. Prevention of Mother to Child Transmission (PMTCT) Plus: drive to increase national coverage of comprehensive package of PMTCT plus treatment, care and support to women and their families. **Interventions: PMTCT Plus Services**

- Testing
- ARVs for HIV Positive women and children
- Single/-dose ARVs for PMTCT
- Safe delivery
- Support group for positive women/information on staying negative
- Follow-up programme for families
- Home based care
- Nutritional support and infant feeding
- Development of policies, guidelines and training
- Integration into MCH services

c. Paediatric Treatment: Paediatric HIV drug formulations and cotrimoxazole to prevent opportunistic infections in infants integrated into public health and child survival programmes.

Interventions: Paediatric Services:

- Cotrimoxazole for HIV Positive children
- Linkages to child survival (Vitamin A, infant feeding, immunization, ITN, ORT, Antibiotics for ARI)
- Paediatric formulations, pricing
- Forecasting, supply management
- Training of health workers
- Operational support for clinics/centres
- Treatment of opportunistic infections
- Nutritional support

d. Protection, Care and Support for Orphans and Vulnerable Children:

Provide basic services including education, healthcare, nutrition and psycho-social support to children and adolescents driven into poverty and deprived of protective family environment

Interventions: Services for Orphans and Vulnerable Children:

- education: school fees, books, uniforms, assessments, vocational training
- nutrition + food
- health care
- family/home support + community-based responses
- Economic and psycho-social support
- Prolong lives of parents
- Resources for families and caregivers

percent) for children who lost their father while South-South recorded the highest (2.1 percent) for children that lost their mother.

Table 45: Percentage distribution of children who are orphans by sector and zones

	Both Parents dead	Fathers only	Mothers only
Over all	0.4	3.4	1.3
Residence			
Urban	0.4	3.7	1.4
Rural	0.4	3.2	1.3
Zones			
North East	0.5	1.4	1.2
North West	0.3	1.1	0.9
North Central	0.3	3.0	1.4
South East	0.7	9.5	1.9
South West	0.4	3.4	1.3
South-South	0.5	6.0	2.1

Source: NBS CWIQ 2006.

(b) Children and AIDS

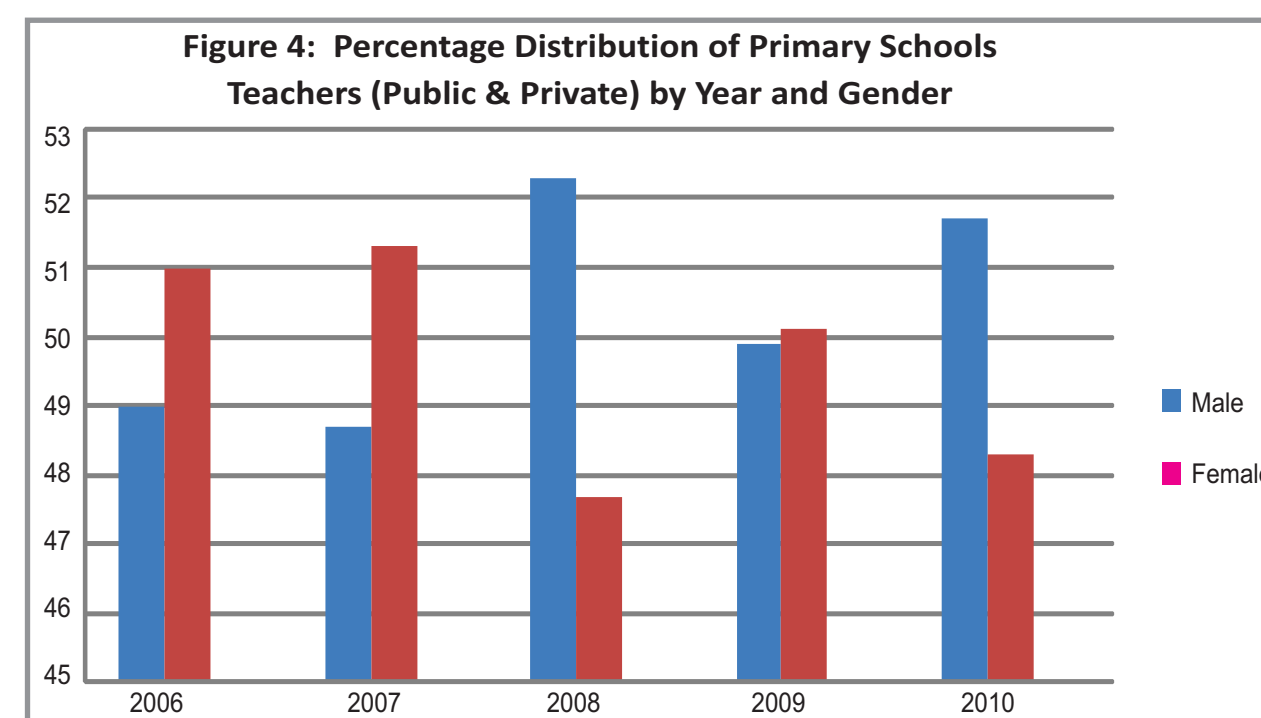
Unite for Children, Unite against AIDS is a global campaign to alert the world to the fact that children are missing from the global AIDS agenda. It was launched in Nigeria in November, 2005. It provided a platform for urgent and sustained programs, advocacy and fund raising to limit the impact of HIV/AIDS on children, halt the spread of the disease, control the pandemic and ensure that the projected figure does not become a reality.

The campaign provided a child-focused framework for country-level programs around four urgent imperatives (Prevention, PMTCT Plus, Paediatric Treatment and Protection Care and Support for OVC) that are currently making a difference in the lives and life chances of children affected by HIV/AIDS. Interventions formulated for the achievement of the four P's are:

a. Prevention: Limit the spread of AIDS through forthright national leadership, widespread public awareness and intensive prevention efforts to protect children and adolescents from infection.

Prevention activities include the following:

- Behaviour change communication
- School-based and community-based life skills



a) School enrolment: Gap still wide at secondary and tertiary levels

Long recognized as a fundamental right, education imparts skills, knowledge and competences that are pivotal to human development and improved quality of life. In doing so, it brings wide ranging benefits. Education of girls and women offer possibilities of high socio-economic returns. The importance of education is highlighted in both the Beijing Platform for Action and requirement in MDG 3 for achieving gender parity in all levels of education by 2015. The goal of gender parity in education demands that society should be interested in the outcome of education, women participation therein, educational quality, including the teaching staff level and in this knowledge and Information Technology era, the level of scientific and techno-logical knowledge transferred in the process. Participation of girls and boys is measured in terms of disparity in their enrolment at the primary, secondary, and tertiary levels of education. In Nigeria, while the gender gap at the primary level is narrowing, there is still a wide gap at the secondary and tertiary levels of education.

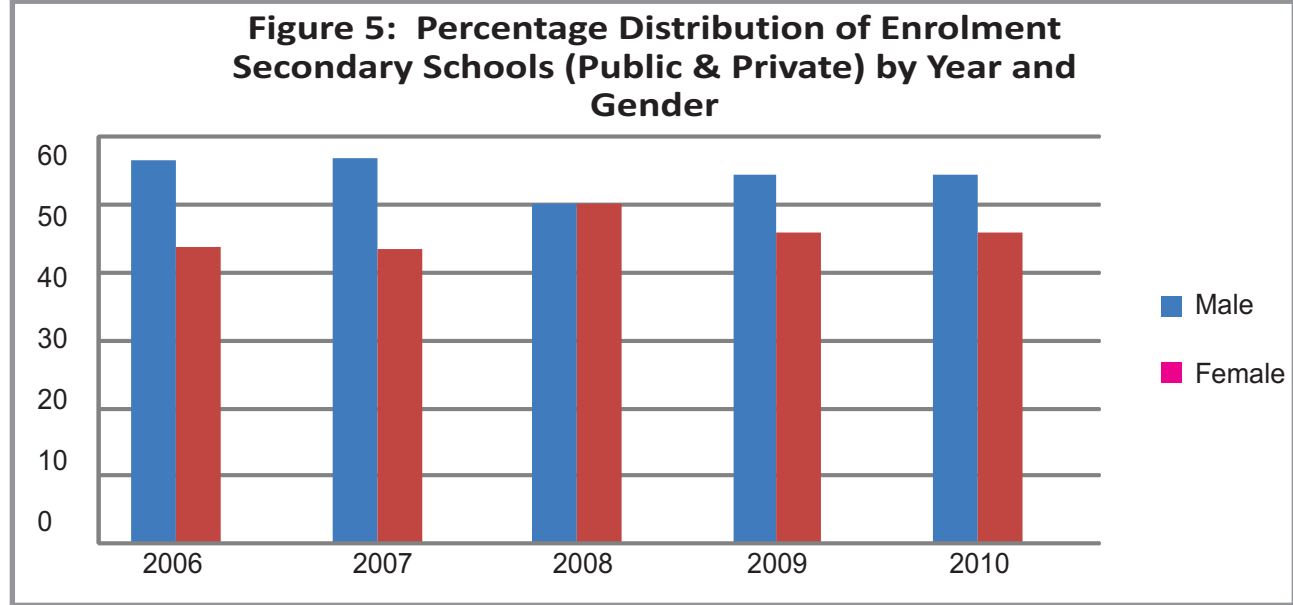
At the secondary level for example, in 2006, males were 56.4 percent of the enrolment while females were 43.6 percent. The figure remained stable for males in 2007 while that of females dropped to 43.3 percent. The trend of disparity in enrolment continued. In 2010, it was 54.2 percent for males and 45.8 percent for females.

Table 8: - Percentage Distribution of Enrolment in Secondary Schools (Public and Private) by Year and Gender

Year	Male	Female
2006	56.4	43.6
2007	56.7	43.3
2008	50.1	49.9
2009	54.3	45.7
2010	54.2	45.8

Source: - Ministry of Education Digest of Statistics 2010

Education imparts skills, knowledge and competences that are pivotal to human development



1. Administration of Corporal Punishment in Schools

- Provisions of the **Child's Rights Act 2003, Sections 11 (a) and (b) and 221 (i) (b)** and State Child Rights Laws, which prohibit corporal punishment in Nigerian schools are being implemented in the following States: Abia, Anambra, Ebonyi, Imo, Delta, Edo, Bayelsa, Rivers, Cross River, Akwa Ibom, Lagos, Ogun, Ondo, Ekiti, Osun, Oyo, Jigawa, Taraba, Benue, Plateau, Nasarawa and Kwara.
- The FMWA&SD has carried out sensitisation workshops across the country to disseminate findings and recommendations of the UN Secretary General's report on Violence Against Children (VAC).
- The key challenge however, **according two recent findings of the Action Aid (2011) and the British Council (2012)**, is how to keep girls in school by addressing the problem of many schools' failure to provide a safe environment for adolescent girls, who fear corporal punishment or worst forms of violence, bullying or humiliation.

2. On Teaching Facilities and Ratio:

a) Measures Adopted on the Basis of Gender Equality

To address the low enrolment of boys and girls in school, a number of strategies were put in place. These include:

- Development and implementation of the Guidelines on the National Policy on Gender Education.
- Procurement and distribution of 960 computers and accessories to six pilot schools in each of the five Southern States of Abia, Anambra, Enugu, Imo and Oyo with high boys dropout rate. Sports equipment have also been donated to the six pilot schools.
- GEP initiative and intervention in Bauchi, Borno, Jigawa, Niger, Katsina, Sokoto, Adamawa, Gombe, Kaduna, Kano, Kebbi, Nasarawa, Taraba, Yobe and Zamfara States encouraged more girls to access, remain and complete their education.
- Capacity building and economic empowerment of women in the GEP communities through the provision of sewing and knitting equipment by UNICEF. The acquired skills enable the women to support their families particularly to ensure that the girl child acquires adequate basic education.
- Supply of cooking and sewing equipment to Model Second Chance Education centres as support for young girls dropping out of school due to early marriage/pregnancy with a view to reintegrating them into mainstream education system in the GEP States (Admawa, Bauchi, Borno, Gombe, Jigawa, Kaduna, Kano, Katsina, Kebbi, Nasarawa, Niger, Sokoto, Taraba, Yobe and Zamfara) .

Such children may be placed with any orphanage or Motherless Babies' Home across the Federation. The child can also be fostered or adopted under the relevant laws and statutes in the respective states. In addition, in determining custody cases, children under 5 years are usually placed under the care of the mothers, while the father is to pay maintenance allowance for the child's up keep.

NAPTIP and NACTAL also provided vocational and educational training for children in their shelters around the country. These special trainings include skill acquisitions like bead making, hat making, tailoring, leather works, and tie & dye making.

8.8 Adoption and Periodic Review of Placement–Article 24 (CRA Sections 125-148)

8.8.1 Legislative Measures

There are measures adopted to ensure that States recognize or permit adoption with the best interest of the child being the paramount consideration. There are Adoption Laws in all Southern states, as well as Fostering Laws in all Northern States. The central consideration in the provisions of these laws is the principle of the best interest of the child. The CRA 2003 (Sections 125-148) provides for adoption, with the establishment of adoption services nationally. Clear specifications for the mechanisms and procedure for adoption, including a well articulated inbuilt monitoring mechanism, which has led to restrictions on interstate adoptions, are all stipulated in the Act.

Adopted children are conferred with the full rights of biological children, including inheritance rights. A child may therefore be adopted if the parent or guardian consent to adoption, or the child is abandoned, neglected or persistently abused or ill treated, and there are compelling reasons in the interest of the child why she/he should be adopted. A court order allowing the adoption of a child may be granted to any of the following:

- **A married couple, where each of them has attained the age of 25 years, and they are jointly authorised by order to adopt a child; or**
- **A married person who has obtained the consent of his spouse; or**
- **A single person of 35 years old provided that the child to be adopted is of the same sex as the person adopting.**

In all the above cases the adopter(s) shall be person(s) found to be suitable to adopt the child in question by the appropriate investigating officers.

8.8.2 Children Involved in Inter-country Adoption

Inter-country adoption is prohibited in Nigeria. The adoption laws of the various states provide that persons adopting or fostering a child should come from the community or locality where the child resides. Section 116 of the Child Rights Act 2003 prohibits the taking or transfer of a fostered child outside Nigeria.

Nigeria has not ratified the Charter on the Protection of Children and Cooperation in Respect of Inter-country Adoption adopted in 1993 at The Hague because the country has no mechanism for monitoring the welfare of Nigerian children subject to inter-country adoption.

8.8.3 Information on Placement and Treatment of Children in Certain Situations

(a) Children in Situation of Abandonment

The 2006 Core Welfare Indicator Questionnaire (CWIQ) Survey indicated that 0.4 per cent of children were orphans who have lost both parents. In addition, about 3.4 percent lost their fathers while 1.3 percent lost their mothers. At the zonal levels, only the North West and North Central states recorded rates below the national average while the highest rate (0.7 percent) was recorded for the South East. The South East zone recorded the highest rates (9.5

abuse and labour. Between 2008 to 2009, UNICEF in collaboration with NAPTIP provided rehabilitative services for over 209 victims/child survivors of trafficking, while 50 (4 boys and 46 girls) child survivors from Lagos, Benin and Uyo were provided with vocational equipment and acquired entrepreneurship/business management skills and start off grants.

Family Tracing and Re-union: With the assistance of the Police, the Ministry of Women Affairs, Civil Society Organisations at the States, Local Government and Community leaders, a total of 550 children were reunited with their families. NAPTIP Rehabilitation and Counselling department traced the families of 263 victims that had lost contact with their families and 16 of these children were handed over to the Embassies of Ghana, Togo and Benin Republic for re-union with their families.

Counselling: Between 2006 to 2009, over 3,676 victims received adequate and comprehensive counselling services at the NAPTIP shelters in collaboration with NGOs.

Shelters: Currently, 8 transit/rehabilitation centres for trafficked children have been established by NAPTIP in Lagos, Enugu, Sokoto, Kano, Maiduguri, Uyo, Benin, and the FCT. NACTAL members also have rehabilitation centres in FCT, Edo and Ondo State. WOTCLEF shelter and rehabilitation centre serves as a transit shelter for child survivors of trafficking and abuse. These shelters are structured to provide immediate protective environment with safety, security, food, clothing, health services and income generating activities for victims.

8.7 Maintenance of the Child - Article 18.3(CRA, Section 51 & 52)

8.7.1 Measures taken to ensure maintenance of the child

The *Child's Rights Act 2003 (Sections 51 and 52)* makes provision for maintenance of a child where the parents or other care givers are unable or refuse to provide the necessary care. In cases where the person is able to maintain the child but wilfully refuses to do so, the court can order such a person to pay a specified monthly sum for the child's maintenance while under placement.

The CRA further mandates parents, guardians, institutions, persons and authorities to provide care, maintenance and good nurturing for all children within the normal home setting. The government, in collaboration with CSOs, CBOs, FBOs, NGOs and the private sector, is providing institutional care and maintenance for children living outside the home setting and in institutions.

Facilities and services being made available to ensure the well being of such children include:

- Primary/Secondary Schools
- Remedial Classes
- Vocational/Craft centre
- First aid facilities
- Sick-bays and clinics
- Access to hospitals and visits by doctors and other health officials
- Games, toys for younger children and play grounds
- Beddings, toilet facilities and television sets

Special vocational training programmes have been developed to assist children from low socio-economic backgrounds and for other disadvantaged and vulnerable children.

Under the *Matrimonial Causes Act* a person or parent who has legal responsibility to maintain a child but fails to do so may be compelled by the court to pay the maintenance allowance into court. At the state level, the Social Welfare and Child Development Departments also take up the maintenance of children when abandoned or when parents refuse or evade maintenance.

- Supply of computers, block and brick moulding machines, sewing machines, barbing instruments to Youth Centres to encourage the acquisition of entrepreneurial, ICT and basic life skills in boy-drop out states namely, Abia Anambra, Enugu, Imo and Oyo States.
- Capacity building of female teachers to serve as role models for girls in the rural areas.
- Training and constitution of School Based Management Committees (SBMCs) in the twenty (20) States affected by the gender disparity (Bauchi, Borno, Jigawa, Niger, Katsina, Sokoto, Adamawa, Gombe, Kaduna, Kano, Kebbi, Nasarawa, Taraba, Yobe Zamfara, Abia, Anambra, Ebonyi, Imo and Oyo States).
- The launching in 2009 of the Bauchi State Chapter of the Nigerian Girls Education Initiative (NGEI). This is to widen the scope of girls' education in Nigeria;
- The distribution of communication materials for advocacy on gender sensitivity to support the girl-child education.
- Generally, the aforementioned interventions have resulted in positive reduction in gender gap in the three hundred and sixty GEP focus schools specifically from 23% in 2005 to 15% in 2007.
- UNICEF in collaboration with State Agency for Mass Education (SAME) established National Formal Education Centres for out-of-school boys in four Eastern States of Abia, Anambra, Enugu and Imo. These centres were planned to operate flexible learning hours, in an informal environment, that does not stipulate specific dress code. The centres are sited close to the markets, mechanic villages and other places where the out-of-school boys can be accessed. The aim of this initiative is to give these out of school boys the opportunity to acquire basic literacy and life skills.

b) Measures to Promote Even Distribution of Schools and Educational Facilities

- The **UBE** policy of building new schools and class rooms is to ensure accessibility and community participation in the sustenance of the facilities.
- The Federal Government is currently undertaking the school mapping exercise aimed at identifying the geographical location of schools and determining their closeness to homes so as to meet Government policy which says that primary school children should not walk a distance of more than 5 kilometres away from home, and secondary school students not more than 7 kilometres. The exercise has successfully been implemented in Ebonyi State and the Federal Capital Territory; while the exercise is ongoing in Benue and Oyo States.
- State Primary Education Boards in the North West, North East and in parts of North Central and South West zones have also been involved in donor-assisted collaborative programmes to address religious and socio-cultural impediments to the uneven distribution of schools and facilities.
- For the construction of schools and the provision of educational facilities, the Federal Ministry of Education through Universal Basic Education Commission, gives 50% matching grant each year to all the States of the Federation. The funds are for the provision of educational facilities, construction of schools and rehabilitation of dilapidated structures.
- UNICEF supplied building materials for the rehabilitation of infrastructure, the provision of VIP toilets \ and hand pumps to all the 36 Local Government where the Girls Education Project (GEP) is on-going. This is to encourage girls' enrolment, retention and completion.
- The FME has approved the National Policy for the Standardisation, Upgrading and Integration of Formal Education into the Qur'anic Schools system.
- In Sokoto, Katsina, Jigawa, Bauchi and Yobe States, for example, there is concerted effort by the Federal Ministry of Education, in collaboration with UNICEF, to promote non-formal education for the development and integration of *"Islamiyya"* and *Qur'anic* schools into regular primary schools.
- In the South West, religious organisations (Christian and Islamic) have been involved in the even distribution of schools through the policy that effected the return of schools to religious organisations by State Governments.

c) **Adequacy of Teachers**

- In 2012, below is the Federal Ministry of Education planned target for learners/teachers/classroom ratio: a) for primary school learners-classroom ratio 1:42, actual achievement by December 2012, 1:49; b) for Junior Secondary school learners-classroom ratio is 1:52, actual achievement by December 2012, 1:62. The construction of new classroom is addressing this shortfall.
- In the same 2012, below is the Federal ministry of Education planned target for teacher-classroom ratio: a) for primary school teacher-classroom ratio is 1:1, actual achievement by December 2012, 1:1; b) for Junior Secondary School Teacher-classroom ratio is 1:1, the actual achievement by December 2012, is 2:1: Recruitment and training of teachers is addressing this shortfall.
- Pupil -Teacher Ratio (PTR) remained constant from 2005 to 2006 at about 1:40-36 and between 2006 and 2007 rose to 1:50-98 due to increased intake of pupils through Basic Education Programme and the integration of Islamiyya Schools into the Basic Education Programme (National Primary Schools Key Indicator Report 2007).
- A total of 401,495 primary school teachers were recorded in 2007. Kaduna State had the highest number of teachers amongst the States with, 23,645; this was followed by Kano (20,688) while Oyo State recorded 18,700 teachers.
- Generally, female teachers predominate in the Southern States (120.842) as against their counterparts in the North (62,772). (Source: NEMIS-FME. 2007).

d) **Adequacy of Facilities**

- With regard to educational facilities, records available at the Federal Ministry of Education show that in 2007 there were 54,434 public primary schools with 401,495 teachers and pupils' enrolment of 20,469,395
- The provision of teaching and learning facilities such as books, writing materials, desks, and chairs is shared between parents/guardians/NGOs and Governments in most States of the country.
- In the South West and South East States, for example, classroom furniture and teaching materials are provided by State governments while parents are responsible for school uniforms, feeding, text books and other learning materials.
- In some Northern States, Government, in addition to providing classroom facilities and teaching materials, provides school uniforms (in most cases for girls), mid-day feeding, and textbooks for primary and secondary school pupils.

Constraints

- In spite of Government and parental support, teaching and learning equipment still remain inadequate in many schools.

e) **Measures Encouraging Same Quality of Teaching for Boys and Girls**

In furtherance of its commitment to promote gender equality in education, the Federal Government has, through various agencies, adopted the following:

- Completed a gender review process of the curricula used in primary and secondary schools through the Nigerian Educational Research and Development Council.
- Enhanced the quality of teacher performance and curriculum delivery under the UBE programme.
- UBEC has institutionalised cluster in-service training programme in nineteen (19) States of the federation.
- NERDC developed and is operationalizing a nine-year Basic Education Curriculum (BEC) which is in consonance with the MDGs and National Economic Empowerment and Development Strategy (NEEDS)
- The National Teachers Institute (NTI) has trained and is re-training teachers for the UBE programme through the Special Teacher Upgrading Programme (STUP).
- UBEC, through FTS, has recruited and trained 80,000 NCE holders to teach in primary schools between 2007 & 2008 through the MDGs DRG (Debt Relief Grant).

Table 44: Percentage distribution of children separated from parents by sectors and zones

	Both parents absent	Fathers only absent	Mothers only absent
Over all	11.0	5.6	2.9
Residence			
Urban	12.9	6.6	3.1
Rural	10.2	5.3	2.8
Zones			
North East	8.9	1.9	3.1
North West	7.0	1.3	2.2
North Central	10.2	5.3	2.8
South East	14.4	11.8	2.3
South West	16.3	7.4	3.1
South-South	13.4	12.4	4.3

Source: NBS CWIQ 2006.

8.6 **Family Reunification and Children Deprived of Family Environment - Article 25**

Measures Taken:

A National Policy Framework on 'Rehabilitation and Re-integration of Victims of Human Trafficking' (2009) has been approved by the Federal Executive Council and adopted by the Economic Community of West African States (ECOWAS). This framework aims at creating a common parameter that will serve as a guide for rehabilitation and re-integration of victims of human trafficking and child labour in the country.

National Agency for the Prohibition of Traffic in Persons and Other Related Matters (NAPTIP) coordinates all activities relating to Trafficking in Persons (TIP) in the country as well as investigation and prosecution of traffickers, supervision and coordination of the rehabilitation, reintegration and reunification of victims of child trafficking in the country.

In 2005, The Network of Civil Society Organization (CSOs) Against Child Trafficking, Abuse and Labour (NACTAL), was established by UNICEF and Women Trafficking and Child Labor Eradication Foundation (WOTCLEF) to provide a platform for CSOs to come together, share best practices, and develop a common and coordinated approach to minimizing the practice of child trafficking, labour and abuse in Nigeria. Over 50 CSOs spread across the six geo political zones of Nigeria and the FCT are members of NACTAL. The leaders of these CSOs have undergone some basic training as regards the objectives of the network thereby contributing to the concerted effort to create an environment conducive for the proper growth and protection of the child.

From 2006 to 2009, various services against child trafficking and child labour have been provided for children according to the 4Ps strategies, these are the (Protection, Prevention, Prosecution and Participation.) CSOs (especially NACTAL members) and the Counselling and Rehabilitation Department of NAPTIP undertook the following major activities:

Rehabilitation: Under the NAPTIP Rehabilitation programme, 4,020 victims have been received from inception. In 2008, 27 victims were enrolled in schools while one was employed by NAPTIP. 224 victims have been trained in hairdressing and other skills through the assistance of TAMPEP under the ALINA project, and the French Government respectively. NACTAL members have also rehabilitated over 1,500 children victims of trafficking,

widely circulated Guidelines and Standard of Practice (SOP) and the National Plan of Action on OVC;

- OVC Funds Disbursement Committees (OFDC) made up of key stakeholders with defined Terms of Reference (TOR) have been constituted at Federal and State levels; and
- Educational and health care support services are being provided to 64 orphans and vulnerable children in each of the initial 12 benefiting States.

8.3 Illicit Transfer and Non-return of Children – Article 29

There is no disaggregated information on the separation of children from their parents as a result of detention, imprisonment, exile, deportation, illicit transfer or non return or death. However, the National Baseline Survey on Child Protection Issues undertaken by UNICEF, NBS, ILO and CRC Chair in the University of Lagos address some issues articulated under children separated from their parents.

8.4 Measures in place for effective management of child care centres

In 2008, the Child Development Department of the Federal Ministry of Women Affairs, developed and published a 'National Policy Guidelines for the Establishment and Monitoring of Child Care Centres in Nigeria for effective monitoring and evaluation for operators of child care centres in Nigeria.

For effective management of institutional child care centres, 200 social welfare officers and care givers from child care residential institutions in Nigeria received basic standard training, on counselling and community re-integration of children - organised by the Federal Ministry of Women Affairs, NAPTIP and WOTCLEF. The anti-trafficking unit of the Nigeria Police has an ongoing training programme for Police officers on child care and protection. A total of 1,150 Police Officers were trained in 2009.

FCT has developed a handbook on Child Welfare since 2005/6 and carried out sensitization campaign on how to access child welfare services in FCT 2007 to date.

8.5 Children Placed with Foster Families

Although, there is Legal Fostering system under the Law, the traditional fostering system is also in operation in Nigeria where children grow up with their relatives and not their parents. The 2006 CWIQ Survey showed that 11 per cent of children had both parents absent from the household. 12.9 percent was recorded for the urban areas and 10.2 percent for the rural areas. About 3 percent of these categories of children were not living with their mothers while 6 percent had their fathers absent from the household. Higher absent rates of both parents were observed in the Southern zones than in the Northern zones. The South West zone recorded the highest rate (16.3 percent) followed by South East zone (14.4 percent) while the lowest rate was recorded for the North West zone (7.0 percent).

- The Teachers Registration Council of Nigeria (TRCN) have been mandated to register teachers in Nigeria for harmonisation and professionalizing the teaching profession.
- The TRCN have expanded access to quality teacher education programmes by encouraging teachers who are holders of degrees in non education fields as well as Higher National Diploma (HND) graduates to acquire a Post Graduate Diploma Certificate in Education (PGDE).
- A Teacher Education Policy has been approved by the Federal Government with a view to ensuring the quality and professional competence of teachers in the basic education sub-sector.
- The National Commission for Nomadic Education (NCNE) has continued to train the existing teachers in nomadic schools on the peculiarities and expectations of the nomadic education curricula as well as enhance their knowledge, skills and competencies through exposure to new and innovative teaching methods.
- The NCNE organised series of training workshops to update the knowledge, skills and competencies of Nomadic teachers and its other personnel for effective implementation and delivery of Interactive Radio Instruction (IRI)
- The NCNE is constructing five model schools in five States of the Federation namely: Adamawa, Anambra, Bayelsa, Enugu and Niger. These model schools cover three distinct areas in grazing reserves, fishing pots and farm centres.

6. The Committee noted with concern the continued prevalence of violence against children especially gender based violence. There is lack of adequate machineries taken by the State party to prevent and combat violence, abuse and neglect against women and children. It is recommended that all forms of violence against children should be redressed and the perpetrators prosecuted and punished. It is necessary to create awareness and to sensitize care-givers: the Police, Public Officials and Health Providers about the pervasive nature of gender based violence. The committee recommends the established of support systems for victims of gender violence and to enhance co-operation with non-governmental organisations working in the area of child protection.

Response 6: The efforts made by the Federal Ministries of Health, Women Affairs and Social Development in providing to all partners and other stakeholders,, National Guidelines, Strategic Plan of Action and Intervention Strategies in curbing the prevalence and practice of Gender based violence, Violence Against Children and support for victims of such violence, have already being highlighted under Response 4 above.

The efforts being made by the Law Enforcement Agencies, particularly the Police Force and the Anti-Human Trafficking Agency (NAPTIP) is quite encouraging in this regard.

Table 9: Number of Cases Reported/Investigated/Prosecuted and Convicted by the Police for Crime against Children in 2011-12.

S/N	Types of Offence	No. of Cases Reported		No. of Cases Investigated		No. of Cases Prosecuted		No of Cases Gain Conviction	
		2011	2012	2011	2012	2011	2012	2011	2012
1	Pornography	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil
2	Child Abuse	2	100	2	80	2	5		
3	Child Labour	8	54	8	47	3	17		
4	Rape/Indecent Assault/ Sexual Abuse	1,478	1,488	1,478	1,486	70	71		
5	Sexual Exploitation	143	156	143	152	126	127		29
6	Sexual Behaviour	Nil	Nil	Nil	Nil	Nil	Nil		
7	Child Kidnapping/ Abduction	17	53	17	47	9	9		

Source: Nigeria Police Force, Abuja, 2011-2012.

Table 9a: Number of Cases Reported/Investigated/Prosecuted and Convicted by NAPTIP for Crime against Children in 2011-12.

S/N	Types of Offence	No. of Cases Reported		No. of Cases Investigated		No. of Cases Prosecuted		No of Cases Gain Conviction	
		2011	2012	2011	2012	2011	2012	2011	2012
1	Pornography	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil
2	Child Abuse	51	64	51	60				1
3	Child Labour	38	54	38	50			2	2
4	Rape/Indecent Assault/ Sexual Abuse	2	24	2	22			5	5
5	Sexual Exploitation	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil
6	Sexual Behaviour	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil
7	Child Kidnapping/ Abduction	23	29	23	21			2	6

Source: Anti-Human Trafficking Agency (NAPTIP), Abuja, 2011-2012(2013).

7. The committee also noted the increased number of children subjected into labour; this is despite the State party's ratification of the ILO Conventions on the minimum age of admission to employment and the prohibition and elimination of all forms of child labour in October 2002. It is noted in the report there is a significant number of children in Nigeria working as domestic servants, in plantations, mining and quarrying sectors and as beggars on the streets. The report reveals an endemic problem of street children which is compounded by an Almajiri system. According to this system children are attached to Imams (religious leaders) for religious teaching and instruction but the children end up in the streets as beggars.

8.2.2 National Response

A cost evaluated 5 year National Plan of Action on OVC has been developed. National Guidelines and Standards of Practice on Orphans and Vulnerable Children were also developed as Nigeria's efforts to accelerate and scale up the implementation of the National Plan of Action (2006-2010).

The Guidelines and Standards of Practice was developed to ensure that improved and qualitative programmes and services are implemented for the protection, care and support of children considered most vulnerable in Nigeria. Based on the guiding principles of the CRA and AU Charter, essential service and Monitoring Checklist for OVC programmes have been developed to track interventions and programming for OVC.

Government focal points, NGOs & CBOs providing psychosocial support and care for OVC are being capacitated to deliver more for orphans through the developed training manual and numerous training programmes going on across the country in collaboration with development partners and donor agencies.

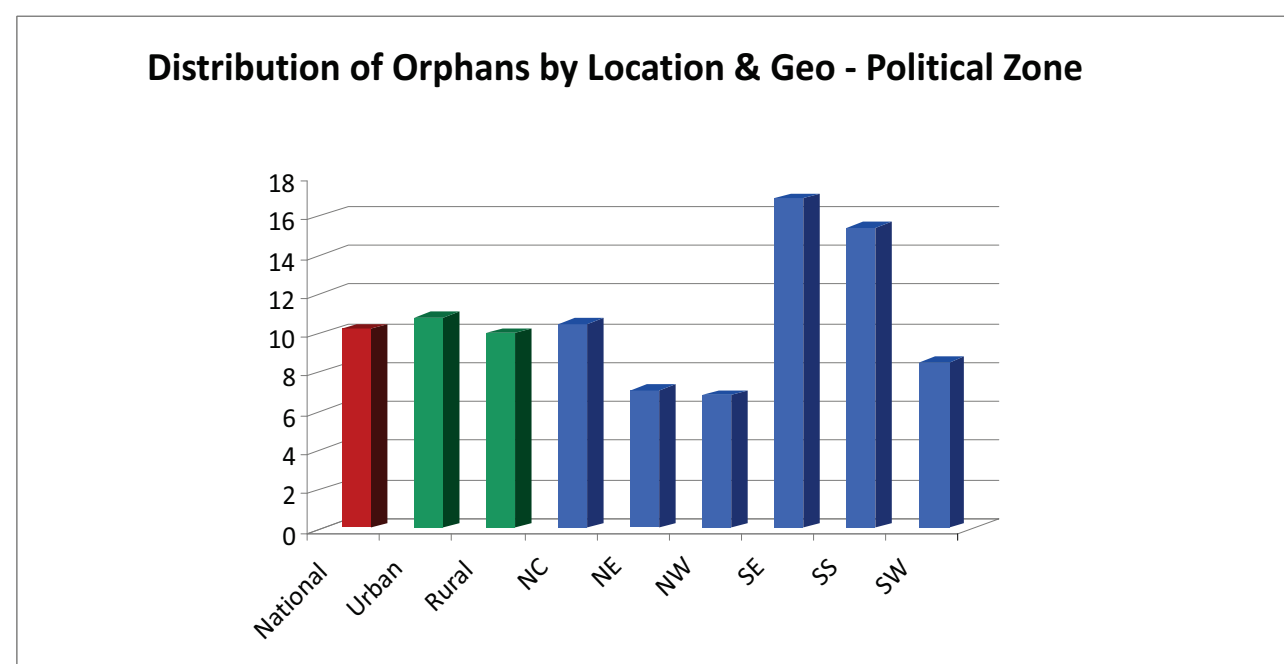
Other interventions include:

- Establishment of community networks and partnerships to promote community based care, social protection and support services for Orphans and Vulnerable Children (OVC).
- Promotion of vocational and entrepreneurial skills acquisition for income generation and empowerment of child care givers;
- Strengthening capacity of care givers to provide qualitative care and support services for OVC residents in orphanages and other child care institutions;
- Procurement of educational and recreational materials including construction equipment for OVC shelters;
- Provision of grants to NGOs, CBOs and FBOs to provide psychosocial support to OVC at the community level;
- Provision of microfinance to OVC and OVC caregivers at LGA levels;
- Capacity building of young and vulnerable children on peace building, life and management skills and as peer educators;
- Establishment of a national steering committee and a technical working group to provide policy and technical direction to the OVC response based on the costed National Plan of Action. Similar coordination structures are being established at state levels;
- Development of monitoring and reporting tools on Situation Assessment and Analysis of OVC;
- Development of policy and advocacy action plans to mobilize resources and support for the implementation of appropriate OVC intervention programmes; and
- The FMWA&SD as a sub-recipient under the Global Fund Round 5 Project has recorded the following achievements:
 - From March 2007 to March 2008 a total of 498 CBOs and caregivers were capacitated to deliver improved care and support services to OVC and other vulnerable children across the country;
 - 2,500 copies of advocacy package on OVC were disseminated to create awareness on OVC phenomenon in the country;
 - Two advocacy skills training sessions for Federal and States' OVC unit staff were held with support from EHANSE Project;
 - Advocacy visits, sensitization and awareness creation meetings were conducted at Communities, Local Government Area (LGAs) and State levels in 16 States Akwa-Ibom, Anambra, Benue, Borno, Delta, Enugu, Kano, Katsina, Kogi, Lagos, Nasarawa, Niger, Ogun, Rivers and Taraba, targeting policy makers, legislators, traditional and religious leaders, women and youth groups/leaders and the OVC themselves.
 - 50,000 copies of OVC Vulnerability Index (OVI) were produced and disseminated to impact selection and disbursement of funds to OVC in dire need of support. The OVI helps to determine OVC who are greatly in need of immediate help through objectively verifiable criteria in line with the

8.2 Orphans and Vulnerable Children Responses

Orphans and children made vulnerable by HIV/AIDS include children who have lost either or both parents due to any cause of death and children affected by HIV/AIDS. This includes children living with HIV-infected parents and those in foster families affected by HIV/AIDS. The National HIV/AIDS Sero-prevalence was 4.4% in Nigeria, with series of different AIDS epidemic emerging at state levels. According to the 2008 'Situation Assessment and Analysis on orphans and Vulnerable Children (OVC) in Nigeria', there are 7.3 Million orphans and 2.9 to 3.3 million adults are living with HIV/AIDS.

Figure 26: Percentage distributions of orphans by location and geo – political zones



In figure 26 the estimated orphan population in Nigeria was over 7 million in 2008, out of which 1.8 million was due to AIDS. It is projected that the numbers will increase exponentially to 8.2 million by 2010.

8.2.1 Core Principles and Strategies for Responding to the Phenomenon

In response to the growing phenomenon of OVC, the following strategies are being applied:-

- Strengthening the protection and care of orphans and other vulnerable children within their extended families and communities.
- Strengthening the economic coping capacities of families and communities
- Enhancing the capacity of families and communities to respond to the psychosocial needs of orphans, vulnerable children and their caregivers
- Fostering linkages between HIV/AIDS prevention activities, care and support for people living with HIV/AIDS, and efforts to support orphans and vulnerable children.
- Targeting the most vulnerable children and communities, and not only AIDS orphans
- Ensuring the full involvement of children and adolescents as part of the solution
- Strengthening the role of schools and education systems
- Reducing stigma and discrimination
- Accelerating learning and information exchange
- Strengthening partnerships at all levels and build coalitions among key stakeholders
- Massive advocacy and social mobilization at all levels especially in endemic regions to create awareness on the jeopardy of children deprived of protection and care.

Response 7: Measures put in place to address the problems of child labour/domestic service, street children and Almajirai-children begging include the following: -

- Legal framework: - Section 28 of the Child Right Act, 2003 prohibits subjecting a child to any forced or exploitative labour, including child domestic service outside his/her own home or family environment. It attracts a liability regime on conviction to a maximum of N50,000 fine or 5 years imprisonment or to both for an individual; while corporate liability attracts a fine of N250,000.
- Section 30 of the CRA also prohibits the buying, selling, hiring or otherwise dealing in children for the purpose of begging for alms, hawking of goods or services, prostitution, domestic or sexual labour, human and drug trafficking as well as child pornography etc.
- National Plan of Action on CRC/CRA, 2009-2015 provides for very concise objectives and strategic intervention programmes/activities in combating child labour, child trafficking, the Almajiri-child begging phenomenon and street children.
- In addition to the 2011 adoption of the Strategic Plan of Action an Operational Guidelines for the Implementation of the Almajiri Child Education Programme, the Federal Government has completed the construction of 124 Almajiri schools which are in the final stages of hand over to affected Northern States Governments to address the high number of out-of-school Almajirai-children.
- Implementation report of the President's Transformation Agenda, 2011-2013, revealed the following interventions: - a) Launching of the National Campaign on Access to Basic Education across the geo-political zones to reduce number of out-of school children especially the low participation of boys in education in the South East; b) Establishment of Special Education Intervention Fund of which N36 billion has been disbursed to the States in 2012 through the Universal Basic Education (UBE) programme; c) a conditional cash transfer to 39,567 households in order to address household poverty and child deprivation issues affecting vulnerable children.

8. While acknowledging the measures taken by the State to combat street children by introducing integrated schooling system that incorporates the madrasa. The Committee recommends that the State party should undertake programmes and implement the policies and legislation to protect and prevent the root causes of the child labour. Further the Committee calls for further information in the next periodic report on the alternative programmes being used to rehabilitate the street children and more specifically dealing with the root causes of the problem.

Response 8: In addition to the measures listed under Response 7 above, the following strategic programmes of intervention outlined in the 2009-2015 National Plan of Action are being implemented: -

- **Objectives:**
 - To eliminate all forms of child labour
 - To create a database of all existing resources on child labour
- **Programme:**
 - Child Labour Prevention Programme
- **Strategies:**
 - Implement poverty reduction strategies;
 - Increase access of poor families to micro credit facilities;
 - Mobilize national partnership and international cooperation to protect children from all forms of economic exploitation
 - Strengthen the collection and analysis of data on child labour;
 - Build capacity of relevant stakeholders to address child labour.
- **Activities:**
 - Advocate support for the ratification and enforcement of international laws that protect children;
 - Support the passage and implementation of the Child's Rights Laws at the State level;
 - Hold consultation meetings with employers to ensure that where children have to be employed, the health, safety and morals of children are fully protected and that the children have received adequate instruction or vocational training on the said activity.
 - Strengthen the capacity of labour inspectors and law enforcement agents to identify and report

- cases of child labour.
- Mainstream action relating to child labour into national and state poverty eradication and development programme.
- Develop and widely disseminate IEC materials to the general public.
- **Programme:**
 - Boys enrolment and retention programme;
 - Gap education and apprenticeship for boy dropouts;
- Strategies:**
 - Advocacy visits to local governments and community leaders on the importance of education devoid of gender inequality;
 - Sensitise parents on the importance of basic and secondary education and beyond;
 - Provide guidance counselors in all schools, and
 - Promote reintegration and retention of working children and school drop outs.
- Activities:**
 - Initiate economic incentive programmes for low-income families to ensure increased enrolment, retention and completion of boys in school;
 - Establish more drop-in centres to enable drop-outs to acquire basic literacy, numeracy as well as life skills;
 - Include livelihood skills acquisition in normal school curriculum for 'working' children and school drop-outs
 - Generate interest in sports and games and emphasise tournaments.
- Strategic focus on addressing vulnerable children's education and household poverty/family support as a twin effective weapon against child labour, street children and other deprivations:
 - Success recorded in 2011-2012 Conditional Grant Scheme in States and LGAs include:
 - a) the construction, renovation and equipping of 3,389 health facilities,
 - b) construction of 8,985 water facilities'
 - c) a conditional cash transfer to 39,567 households
 - d) payment of 2,260 new village health workers,
 - e) building and renovation of 1,714 classroom blocks, and
 - f) procurement of 2,804,644 textbooks
 - A total of 9,210 women were trained between 2012 in various skills
 - Over 3,339 women groups/cooperatives have received a total sum of N271,500.00 as at December 2012 from which 3,281 jobs were created.

9. Child survival: Infant Mortality rates (IMR) is high. It was estimated to be 191 per 100 live births in 1991. It went down to 133 in 1999 but shot up to 201 in 2003. The situation in rural areas is especially bad where it is estimated it is 11/2 times higher than in the urban areas. The figures for some regions are also high such as the North-West which has 217 compared to 119 in South West. The main causes of the High causes of morbidity among children are Malaria 30%, preventable diseases 22%, acute respiratory infection 16% and diarrhoea 10%. The Committee is also concerned at the very low level of knowledge among mothers on basic health issues, such as about the use of oral dehydration solutions for diarrhoea. The committee recommends awareness –raising programmes for women on prenatal and post natal health care as well preventive measures, immunization and nutrition. Ensure universal access to drinking water and sanitation services. The Committee would like to receive information on programmes and facilities put in place to ensure child survival

Response 9: Information on programmes and facilities in place to ensure child survival, particularly, for women on prenatal and post natal healthcare issue, preventive measures, immunization, nutrition as well as access to drinking water and sanitation services include the following:

- Appreciable progress made in the reduction of under-five mortality (per 1,000 live births) from 157 in 2008 to 141 in 2011. Equally, the percentage of children under five with fever who are anti malarial drug increased from 32 percent in 2008 to 54 percent in 2012.

- Public enlightenment programmes in the mass media, and through the communities, mosques and churches to sensitize parents on their responsibilities and duties regarding their children by members of the National, State and Local Government, Child Rights Implementation Committees and relevant NGOs.
- Sensitization workshops and conferences organized at all levels of Government, to educate parents on the need to implement all the provisions of the **AUCRWC** and **CRA**. Such workshops have highlighted the ills of Child abandonment and various harmful practices inimical to the well being of the child.
- School focused intervention mechanism for promoting quality education and child rights awareness are indicated in the establishment of the Parent/Teacher Associations and Full Based Management Committee (FBMC). These are operating in most schools of the Federation to ensure good quality education and the welfare of children.
- In Kano State, community re-orientation committees were established in all the Local Government areas and Community Education Committee (which comprises Traditional leaders). These were set up to propagate Government programmes and policies, which have helped in the dissemination of information on the provisions of the **AUCRWC** and **CRA**.

8.1.3 Information on Children who have benefited from measures adopted to assist Parents/Guardians in Child rearing.

There is no disaggregated information on the number of children benefiting from such or similar facilities; it is fairly widespread across the country. However, the Governments at Federal and State levels, as well as NGOs and the private sector, have established day-care centres and after school facilities to assist working/nursing mothers. According to the revised Public Service Rules (2008) Nursing mothers are now entitled to 16 weeks maternity leave at a stretch beginning not less than 4 weeks from the expected date of delivery with full pay. However, this has not been adopted in the Private sector as nursing mothers are still entitled to 12 weeks post natal leave to enable them care for their babies at the early period.

Faith Based Organisations and other religious institutions engage parents and young couples in counselling and workshops to promote parenting and child rearing skills. Some organisations such as the News Agency of Nigeria (NAN) and the National Agency for Food and Drug Administration and Control (NAFDAC) in March 2009 established crèches in their Abuja offices for the convenience of nursing mothers to ensure sustenance of the baby friendly initiatives.

8.1.4 Support for Single Parent

As the family is a basic institution in the society, parents are charged with the responsibility of protecting and developing children for socialisation and acquisition of values for freedom of expression and association. However, due to social stigmatization, single mothers often do not make their status public and this has hindered the acquisition of reliable data on single-parent families.

The Nigerian Immigration Service in a bid to reduce stigmatisation of single mothers has relaxed the requirement for a paternal letter of consent for a child to obtain an international passport.

NEEDS II document also proposed a framework for providing support to vulnerable groups, especially single parents and teenage mothers. Some impregnated teenagers receive support from their families and communities and are able to have safe deliveries and in many cases return back to school.

Recently, 'Care For Youth Future Initiative' (CAFYOIN) an Abuja based NGO organized a training and empowerment workshop aimed at discovering and re-channelling youthful talents and potentials towards productivity in single teenage mothers and this programme empowered 25 mothers.

PART EIGHT

Family Environment and Alternative Care and Responsibilities of the Child Articles 16, 18, 19,20,24,25 and 27

8.1 Parental Guidance, Parental Responsibility and Separation from Parents, and Recovery of Maintenance for the Child. (CRA Sections 19-20)

8.1.1 Measures adopted to ensure the responsibilities, right and duties of parents.

Section 20 of the CRA provides that:

“Every parent, guardian, institution, person and authority responsible for the care, maintenance, upbringing, education, training, socialisation, employment and rehabilitation of a child has the duty to provide the necessary guidance, discipline, education and training for the child in his/its care, to equip the child to secure assimilation, appreciation, and observance of the responsibilities set out in this part of the Act.”

Further, the Governments at Federal and State levels have adopted specific programmes to support parents to carry out their economic and social responsibilities to their children, through:

- **Establishment of the National Poverty Eradication Programme (NAPEP) in all the states in Nigeria.** Through this programme, small grants are given to parents in the low-income groups to enable them fulfil their economic responsibilities. However, due to weak mechanisms, implementation for the achievement of expected objectives has not been effective.
- **The CRA Part XV (Sections 171-185) provides that state Governments should support children and families, including the provision of a range of services appropriate for the welfare and upbringing needs of children.**
- **The agricultural sub-component of the National Policy on Women 2000, seeks to remove the obstacles to women's access to land, water, credit and other productive inputs including extension services and training necessary for agriculture. The Policy also seeks to strengthen institutional credit sources to create special revolving loan funds for women. Already Government has established the Nigerian Agricultural Cooperative and Rural Development Bank (NACRDB) to provide micro credit windows to parents, with special consideration to women.**
- **The FMWA&SD has the mandate to promote income generation and employment opportunities through access to loan schemes. The Ministry also assists women to set up cottage industries, acquire life skills and other vocational training within the context of their assessed needs and potentials. In order to attain these objectives, the Ministry has a long term programme to facilitate the establishment on a yearly basis, of three small scale industries to be located in all the states of the Federation.**
- **In 2006, a new initiative on women's empowerment was launched by the Ministry of Women Affairs in collaboration with financial institutions, tagged the Women Fund for Economic Empowerment (WOFEE). It is a revolving loan scheme for grass root women. WOFEE aims, among other things, to facilitate access to better strategies for goods marketing, business training, infrastructural facilities, and provision of a supportive policy environment. Food processing machines were distributed to women as income generation drives in 19 selected states of the Federation to empower women and combat poverty level of families, while there are plans to distribute to the remaining 17 states of the Federation and the FCT.**

8.1.2 Awareness Creation and Social Mobilization

Series of campaigns are undertaken to promote parent/family education, including addressing the problem of the abandonment of children. These include:

• **Initiatives to Reduce infant and Maternal Mortality in Nigeria:**

The Save One Million Lives Initiative was launched in 2012 by the President of Nigeria. This initiative is focused on evidence-based, cost effective interventions that are proven – and address the leading causes of morbidity and mortality. The Initiative comprises several components which will contribute to saving one million lives. The components include:

- a) Improving Maternal, Newborn and Child Health: through delivering an integrated package of interventions at thousands of primary health care clinics with referral links, including access to a skilled healthcare provider.
- b) Improving routine immunization coverage and eradicating poliomyelitis.
- c) Prevention of Mother to Child Transmission of HIV; through increased access to quality HIV testing and counseling to mothers; treatment of infected mothers; and exploring feasibility of universal access to HIV treatment to all those infected.
- d) Scaling up access to essential medicines
- e) Malaria control; through an increased utilization of treated bed nets and effective anti-malarial medicines;
- f) improving child nutrition;
- g) strengthening logistics and supply chain management and
- h) promoting innovation and use of technology.

- In 2011, a target was set to save 800,000 lives by December, 21, 2014 and one million lives by 2015. Using the list tool, we have estimated a total lives saved of between 207,917 – 218,579 in 2012 alone, for the Save One Million Lives pillars/interventions using conservative assumptions and 2012 coverage rates. This demonstrates that we are on track to save more than one million lives by 2015.

• **Human Resources for Health**

Midwifery Service Scheme (MSS) – The sector had engaged, deployed and retained a total of 4,000 midwives and 1,000 Community Health Workers in over 1,000 Primary healthcare facilities. The Scheme which has been in operation ensures that women in rural and hard-to-reach areas are being attended to by skilled birth attendants during childbirth. Maternal Mortality ratio has reduced from 545/100,000 live births in 2008 to 487/100,000 in 2011 (Lancet 2011). This Scheme is now the largest single health human resource intervention of its kind anywhere on the African continent.

• **Financing for Health**

Community Based Health Insurance – The National Health Insurance Scheme (NHIS) has been successfully established in the formal sector and is in operation across the country. In addition, under the Transformation Agenda of President Goodluck Jonathan, activities under the NHIS have been scaled up significantly in order to ensure that more Nigerians sign on to the scheme so that out-of-pocket expenses on health will reduce, thereby freeing up resources for other important things.

• **Strengthening the supply of commodities for maternal mortality reduction:**

The government has come up with several strategies but not limited to the following:

- Supply of Anti-shock garment. This is a specially made garment designed for management of obstetric hemorrhage during and after deliveries. These are currently being piloted in some states.
- The Ministry recently procured the gold standard drug called magnesium sulphate which is used in the management of pre-eclampsia and eclampsia. Sensitization meetings on the use of the drug have been conducted and the use of the drug will soon commence.
- Purchase of safe motherhood (mama) kits pilot to solve the problem of out of stock of consumables used during delivery was embarked upon in some states.
- The Ministry also procured midwifery kits which are currently being used for the midwives services scheme.
- Midwifery kits consumables have also been procured distributed to all the Federal Tertiary Institutions.
- Development and revision of some important policy documents.

- The total estimated costs of the NSHDP for the six year period 2010-2015 is USD 26.653 billion with an annual cost and investment requirement of \$4.442 billion. This gives an annual cost per capita of USD 31.63. Details of the specific earmarks of each priority areas are in table 10 below.

Table 10: - Estimated Cost of the NSHDP 2010-2015

Priority Area	US\$	Percent
Leadership and Governance for Health	183,914,685	0.69%
Health Service Delivery	12,975,047,689	48.68%
Human Resources for Health	11,097,841,997	41.64%
Financing For Health	1,459,843,402	5.48%
National Health Information System	277,367,996	1.04%
Community Participation And Ownership	159,420,543	0.60%
Partnerships for Health	170,016,518	0.64%
Research For Health	329,654,407	1.24%
Sum	26,653,107,239	100.00%

The overarching goal of the NSHDP is to significantly improve the health status of Nigerians through the development of a strengthened and sustainable health care delivery system. (See table 11 below)

Table 11: Key NSHDP Indicators and Targets					
S/N	Indicator	Baseline	Targets		
			2011	2013	2015
1.	Life expectancy at birth	47 years	55 years	63 years	70 years
2.	Under-five mortality rate	157/1000 LBs (NDHS, 2008)	130/1000 LBs	103/1000 LBs	75/1000 LBs
3.	Infant mortality rate	75 (NDHS, 2008)	60/1000 LBs	45/1000 LBs	30/1000 LBs
4.	Proportion of 1 year old immunized against measles	41.4 (NDHS 2008)	60%	80%	95%
5.	Prevalence of children under five years of age who are underweight	27.1 (NDHS, 2008)	24%	20%	17.90%
6.	Percentage of Children under 5 sleeping under insecticide -treated bed nets	5.5 (NDHS, 2008)	24%	42%	60%
7.	Maternal mortality ratio	545/100,000 LBs (NDHS 2008)	409/100,000 LBs	273/100,000 LBs	136/100,000 LBs
8.	Adolescents Birth Rates	126 per 1000	114/r 1000	102/1000	901/1000
9.	HIV prevalence among population aged 15-24 years	4.2% (ANC Sentinel Survey)	3.2%	2.1%	1%

- Day of the African Child- June **2006, 2007, 2008 and 2009.**
- **International Day of Broadcasting –December 2006,2007.**
- Sensitisation meeting for Media Executives on the Child's Rights Act - January **2006.**
- Regional Conference on the 'Almajiri child' May, **2006.**
- Children submitted the document “A call to Action” to the President of the Federation during Children's Day- **2006.**
- Joint session of National House of Representatives with Nigeria Children's Parliament, in Commemoration of 2006 Children's Day Celebration (May 27, 2006).
- Launching of the National Children's Parliament's Website by the Honourable Minister of Women Affairs and Social Development on June 16,**2006.**
- International Children's Holiday Camping in South Africa, August, **2007.**
- Advocacy visit by the leadership of the National and States Children's Parliament to the Vice President, Senate President and the Speaker of House of Representatives, February, **2008.**
- Nigerian children have also participated in an array of programmes and radio/television events. Some have had opportunities to make presentations before international and national audiences, both individually and collectively. Children lobby groups, children's clubs, children newsletters and magazines have been formed and promoted to further enhance children's right to freedom of expression.

7.3 Freedom of Thought, Conscience and Religion - Article 9, (CRA Section 7)

The Nigerian Constitution and the CRA guarantee the Nigerian child's freedom of thought, conscience and religion. Nigeria is a multi - religious state and is prohibited by **Section 10 of the 1999 Constitution** from adopting any particular religion as state religion. Children are educated on the virtues of religious tolerance. In order to promote religious tolerance amongst children with diverse backgrounds, Unity Secondary Schools have been established in each State of the Federation.

other relevant line Ministries in 2007.

- The Senate President and the Speaker were among the Nigerian delegation to the United Nations General Assembly (UNGASS) (Plenary Session on Children) in New York, USA in December 2007.
- Two children parliamentarians presented a live programme on HIV/AIDS on national television as part of activities marking the International Children's Day of Broadcasting in 2007.
- Two members of the Senate of the Parliament led the Nigerian delegation to the 5th World Summit on Media for Children in Johannesburg, South Africa, from March 23rd to 28th 2007.
- The Senate President participated in the British Council "Road to Davos" Programmes at Horsley Park in London in January, 2008.
- Two members of the Parliament attended the commemoration of Martin Luther King Jnr. organised by the American Corner in January, 2008.
- The 4th NCP was inaugurated in July, 2008.
- In 2008 the Chairman, Senate Committee on Child Survival represented the Nigerian children at *World Congress III against Sexual Exploitation of Children and Adolescents*, in Rio de Janeiro, Brazil.
- In March, 2009, members had a special session on the Marketing of food to children that marked the 2009 International World Consumer Rights.
- During the 2009 National Children's Day celebration, a capacity building workshop was organised for members on parliamentary procedures and practice.
- Members of the Parliament had a special sitting at the National Assembly on the themes for the 2009 Children's Day which was "Expose Violence and Sexual Exploitation of Children: Uphold the Rights of the Child. The theme for Day of the African Child was: "Africa fit for Children: a call for accelerated actions towards their survival". Resolution from the above sittings was forwarded to the President for consideration.
- Members had a joint session with the adult Honourable members of the House of Representatives in their chambers during the debate on the survival rights of children to mark the 2009 Children's Day.
- Three representatives from NCP participated in the Climate Change Forum for Children in Copenhagen in December, 2009.
- Over 1,600 children in 16 focused communities in North West/Central Nigeria acquired skills on child participation, and now have a platform for participating in decisions that affect them following the establishment of children's councils in these communities
- Press interviews and dialogue sessions were undertaken by children to air their views on major national issues in Osun, Delta, Bayelsa and Ogun States.
- The Child-for-Child Assembly is a school based platform for promotion of children's participation and is currently being piloted in selected States and the FCT (from September, 2009);
- Other activities the children participated in are further captured under Cluster 4. (4.3).

7.2 Freedom of Expression – Article 7 (CRA Section 3(1) & (2))

7.2.1 Measures Guaranteeing the Child's Right to Freedom of Expression:

- Section 39 of the Nigerian Constitution, and Section 3 of the CRA 2003 guarantee freedom of expression to all citizens including children.
- The inauguration of the Nigerian Children's Parliament in December 2000 has provided a forum for children to participate in affairs affecting them. The parliament has been institutionalised and it provides a platform for children to dialogue with the President of Nigeria and other leaders on a regular basis.
- We have Children's parliament at the National level and in thirty-six states and FCT, and some of the local governments in the country.

Key officers of the Children's Parliament participated in the following national and international programmes:

- Nigerian Children's Day Celebration-May **2006, 2007, 2008 and 2009.**

- **Introduction of new vaccines** such as menafric vaccines for cerebrospinal meningitis which confers 10 years protection; pentavalent vaccines (PPT, HB, Hib), will help protect our children against two additional diseases (Childhood Pneumonia & Hepatitis B). Approval from GAVI for the introduction of Pneumococcal Conjugate vaccine in 2013 (This will help prevent pneumonia and Meningitis).
- **HIV/AIDS Control** – In the year 2012, the Federal Ministry of Health achieved the following milestones towards further improving:
 - Signed the implementation Plan for the Framework Partnership with the United States Government. Commenced the decentralization of ART services to the primary health care level. The Ministry is an implementing partner under the Global Funds Round 8. Under this grant, PHC health workers are being trained on Voluntary Counseling and Testing, prescription and administration of anti retroviral drugs and general care of persons living with HIV/AIDS.
 - In the same vein, the Center for Disease Control (CDC) project PHAID is domiciled in the agency. The project is a vehicle designed to take HIV/AIDS control to PHCs across the country. Health facilities that are not being covered under the GLOBAL fund project are being covered by the PHAID project. Recently PHC staff in 18 states of the federation were trained on various aspects of HIV/AIDS management (data opportunistic infections associated with HIV).
- **Roll Back Malaria**
 - Additional 7 million LLINs distributed bringing the total to 51.7 million.
 - Procurement process for massive nationwide larviciding commenced.
 - Release and dissemination of the 2010 Malaria Indicator Survey.
- **National Health Bill:** The Federal Ministry of Health has continued to pursue the passage of the National Health Bill into law. In consultation with the National Assembly, the bill has been further revised before and after the Senate hearing in February 2013.
- **Scale up of Health Insurance Coverage** – In 2013 additional communities from 11 States have subscribed to the Community Based Health Insurance Scheme. These are Anambra, Bauchi, Borno, Ebonyi, FCT, Kaduna, Katsina, Kogi, Kwara, Lagos and Ogun.

10. Children in the criminal justice system:

The report reveals that there is an estimated 6,000/= children in juvenile and retention centres. The report further reveals that $\frac{1}{3}$ of the juvenile offenders are locked up with adults in crowded cells, they are subjected to police brutality. Of utmost concern to the Committee is the existence of death penalty over the child offenders especially under the sha'aria laws, although the Child Right Act provides for the establishment of juvenile justice system and prohibits imprisonment of children and provides the establishment of children and family court, the Committee recommends the State Party do ensure the full implementation of juvenile justice standards. Ensure that the minimum age for criminal responsibility is applicable in all the 36 States. It is also recommended those who are responsible for the implementation and are setting up of the juvenile justice system establish a legal aid system to assist children who are in conflict with the law or require legal intervention.

Response 10:- Information on measures put in place to ensure the full implementation of juvenile justice standards, provision of legal aid to children in conflict with the law, national application of the minimum age for criminal responsibility include the following:

- I. First, as a matter of policy, the Nigerian Prisons Service does not receive juvenile offenders in adult prisons. In practice and by law, such offenders are committed to the Borstal Homes located in Kaduna, Ilorin and Abeokuta, upon ascertaining their actual age. In fact, this is part of the on-going Prison Reform exercise described below. The challenge here however, is the unfortunate practice of age racketeering with the active connivance of parents/guardians whose children are beyond parental control.
- Prison Decongestion and Reform Initiative of the Federal Government (2008-11): The Nigerian Prisons Service has gone through a lot of reforms designed to make the institution meet contemporary assessment in terms of best practices. The prisons infrastructure which includes cells, offices, workshops and even the

immediate environment, which a few years ago were as oppressive to both prisoners and staff alike, have now been rehabilitated. This rehabilitation also included the building of new prisons, the expansion and modernisation of old ones and the building of new and modern cells to contain the pre trial detainees in humane conditions. It is estimated that close to 45 percent of the old prisons infrastructure in Nigeria have received a face lift; that is in addition to eight new prisons completed and commissioned between 2008 and 2011.

Furthermore, the NPS has upgraded its medical facilities to ensure that prisoners have access to Medicare in custody. For this reason prison hospitals have been built in Kuje, Owerri, Makurdi, Port-Harcourt which together with the existing ones in Lagos, Kaduna and Bauchi prisons provide medical services for sick prisoners. In addition, the collaboration between the prison and NACA has led to HIV/AIDS management strategy that has reduced the prevalence in the prison. The NPS has also started the Adult Remedial Educational Programme (AREP), through which prisoners who are interested in continuing with their education are given the opportunity to do so. The NPS is collaborating with the National Open University of Nigeria (NOUN) on this project and as at today, there are up to 35 registered undergraduate prisoners studying various courses with NOUN.

On the issue of manpower development, the NPS has reorganized its training infrastructure to be in tune with current trends. The training manual has been reviewed in a collaborative effort with the United Nations Office of Drugs and Crime, (UNODC) Nigeria. This new manual contains the whole gamut of NPS training curriculum and the best part of it is its human rights slant.

The major challenge has been the high level of awaiting trial prisoners in the system. For now out of 47,508 prisoners in custody, 30,629 are awaiting trial; some for more than 17 years. The total number as at April 2013 of condemned convicts is 1,128 (1,119 males and 19 females). The major constraint is how these awaiting trial persons, who are still considered innocent in law, can get fair and fast trial.

The Nigerian Prison Service is meanwhile collaborating with the Judiciary, Federal and State Ministries of Justice and the Non-Governmental Organizations/Nigerian Bar Association in order to find out ways of pushing through needed reforms in the Criminal Justice Sector that will help to entrench fair and faster trials of suspects in custody. This new reach out to stakeholders is yielding results because new and innovative ways of speeding up the trial of cases are being adopted in several States with very remarkable results.

Meanwhile the transformation of the Nigerian Prisons is continuing with the enthronement of Corrections in the system very much in sight.

- Awaiting trial inmates and prison decongestion reform initiatives 2005-11 Sequel to the Federal Executive Council's approval in 2005, the Honourable Attorney General of the Federation began a nationwide systematic prison decongestion exercise by Government to improve and strengthen the international processes of managing the nation's prisons. The Program has, through these necessary, proactive and firm measures, achieved its primary target of reducing the population of Awaiting Trial Persons (ATPs) in Nigerian prisons and generally improving the criminal justice system in the country.

The Prison Act (Amendment Bill) 2007 is receiving due consideration of the National Assembly.

The Statistics obtained through the Ministry's monitoring mechanism for the Program indicate that over **47,956** inmates have so far benefited from the program through the retention of the services of a large number of private Legal Practitioners (over **3,500** Solicitors) to undertake the defence of such persons in courts across the 36 states and the FCT.

As a result of our concerted efforts with other stakeholders over the years, it is on record that out of the total number of **47,956** cases farmed out, a total of **22,544** cases have so far been prosecuted with some accused persons convicted, others discharged for want of evidence and many granted bail while **25,412** cases are still pending before the various courts in the country. It should be noted however that this information represents the number of cases in progress as captured by reports submitted to the office of the Hon. Attorney-General of the Federation & Minister of

- In 2010 National Children's Day Celebration, members of the National Children's Parliament went to the Chamber of the National Assembly to express their views and sought the consideration to easy passage of bill that concern the welfare and wellbeing of children.
- Members of the National Children's Parliament created awareness and sensitized the public on the removal of fuel subsidy in Nigeria.
- To give support to effective operation of the Children's Parliament, a constitution and standing order was developed. Presently, Children's Parliament existed in 35 states of the Federation including FCT and over 25 States have inaugurated Children's Parliament in the local Government Areas to give a voice to the children in the grass roots. The constitution makes inclusion of children with disability in the Nigerian Children's Parliament paramount.
- The constitution and Standing Orders of the Children's Parliament also provides a bottom top approach to membership of the Nigerian Children's Parliament. i.e. two children (Male and Female) are elected from the local government to form the State Children's Parliament, where election will equally be conducted at the State Headquarters to elect State Representatives (Male and Female) to form the National Children's Parliament. The approach was used in the election and inauguration of the 5th National Children's Parliament which has a unicameral structure, where the Speaker of the National Children's Parliament occupies the highest seat in the Nigeria Children's Parliament.
- Apart from the Nigeria Children's Parliament, child rights to participation are being encouraged by the establishment of child's rights club in schools. It is interesting to note that most of the school in Nigeria today involved pupils and students in selections of school prefect unlike in those days where the school imposes prefect on the pupils/students.
- Children are represented in activities / programmes that concern them. So much is done in the media where children produce and anchor programmes in the television and radio. Also kiddies' corner is almost in all the electronic and print media in the country. Advertisement Company also uses children to advertise children's products.
- Nigeria is doing very well in promoting the rights of the child to participation.
- The Nigeria Children's Parliament (NCP), now established in all the 36 States and the Federal Capital Territory (FCT) provides a formal platform through which children may freely express themselves and make inputs into the decision-making process of national issues that affect their lives;
- The Children's Parliament led by the Senate President and another official presented the views of Nigerian Children to the Constitution Review Committee in 2006.
- The Senate President and Speaker were in the African children delegation to the 2nd Children's World Water Forum held in Mexico City, Mexico in March 2006.
- Members of the Parliament attended the National Conference on Water in 2006.
- The Children's Parliament's Special Committee participated as observers at the 52nd Commonwealth Parliamentary Conference held in September 2006, in Abuja.
- Members of the Nigerian Children's Parliament facilitated some activities in November, 2006 to mark 30 years of Abuja as Nigeria's Federal capital.
- In the year 2005, 2006 and 2007, sessions of the Parliament deliberated on issues like the compulsory use of insecticide treated nets in boarding schools, Almajiri, HIV/AIDS, child trafficking, passage of the CRL and the establishment of Children's Parliament in the States, water and sanitation. Resolutions from these sessions were submitted to appropriate authorities for action.
- The Senate President is a member of the United Nations Global Taskforce on Water, Sanitation and Hygiene (WASH) representing the entire African Children. He is also a member of the New Partnership for Africa's Development (NEPAD), among other Government bodies.
- Members of the Nigerian Children's Parliament were Special delegates at the Global Conference on Information and Communication Technologies for Education and Development.
- The Children's Parliament produced two editions of its Newsletter with guidance from an editorial advisory committee with members drawn from the Federal Ministry of Women's Affairs and Social Development and

Table 43: Composition of the Nigerian Children's Parliament

Senate President Speaker Deputy Senate President Deputy Speaker	
Senate Leader Deputy Senate Leader Chief Whip of the Senate Clerk of the Senate	House Leader Deputy House Leader Chief Whip of the House Clerk of the House
Chairpersons of the ten relevant committees of the Senate and the House, namely committees on: Survival Development Protection Participation Information, media and publicity	
Ethics, Rules & Business Water & Sanitation MDG NAPTIP NEPAD *(In Zamfara State there is a committee on Sharia Implementation)	
Deputy Chairpersons of the Relevant Committees in the Senate and House	
Senators of the Upper House	
Representatives of the Lower House	
Sergeant At Arms of the Senate	Sergeant At Arms of the House

The Nigeria Children's Parliament is divided into an Upper and a Lower House. The table shows the hierarchy within the Parliament and the members are ranked in descending order of importance.

7.1.4 Highlights of the Children's Parliament Activities 2009 to date / 2006-2009

- The inauguration of the Nigerian Children's Parliament, by the former President Olusegun Obasanjo has opened up the promotion of the children's right which has made the Nigeria children's Parliament become the only recognized children's voice by Government at all levels.
- From 2009 to date, members of the Nigerian Children Parliament had deliberated, advocated and created awareness on the followings topical issues: Immunization, Education of the Girl- Child, HIV/AIDS, Millennium Development Goals, Violence and Sexual Exploitation of Children, Partnering for improved Nutrition for Mother and Child, Good Governance, Child Protection issues among others. Resolutions from their sittings were passed to Government for necessary action. They had paid courtesy calls on the President of the Federal Republic of Nigeria, the Vice President, Federal Republic of Nigeria, the leadership of the Senate and the House of Representative of National Assembly and other top policy makers where they advocated for consideration and adequate budgetary allocation for children's programme.

Justice as at May 2010. It is noteworthy that there are so many solicitors that have not submitted progress reports at the time of compiling this report.

Payment of Fines: The present Hon. Attorney-General of the Federation has introduced a novel and laudable practice of payment of fines on behalf of indigent convicted for minor offences with option of fines. So far, over a thousand convicts have benefitted nationwide. This is done in order to drastically reduce the number of convicts and has been found effective.

A Success Story: The achievements recorded in the course of this program include: -

- The prosecution of over **22,000** cases before various courts in the Country through the instrumentality of this program;
- Retaining the services of over **3,500** private counsel to represent over **47,000** accused persons charged for various offences;
- Regular installmental payment to the external solicitors engaged, as pegged by the Ministry; and
- Creating the enabling environment for officers of this Ministry to visit the prisons and have first-hand information about the conditions prevailing therein

Following the resolution and recommendations at the December 2010 National Summit on Prison Reform and Decongestion in Nigeria, the Minister of Internal Affairs directed in January 2011 the Controller General of Prisons to get monthly prison's report to the Legal Aid Council of Nigeria in order to provide free legal advice and representation in all Nigerian Courts for prison inmates held in prison custody nationwide.

The Federal Ministry of Justice's consultative Forum on Criminal Justice Administration in Nigeria was convoked in December, 2010. It was attended by State Chief and High Court Judges, State Attorneys General, Prisons Police and Legal Aid officers, Civil Society Groups and other stakeholders.

One of the results of this nationwide consultation was the development of a set of templates on best practices which have been tried elsewhere on how to ensure fair and fast trials. These measures are being communicated to states for application and the results are encouraging.

Intense efforts are also being made to get the National Assembly to pass the relevant bills on Criminal Prosecution including the Prison (Amendment) Bill.

- On the Committee's utmost concern, the correct information today is that until all the federal and 36 States' Criminal and Penal Codes are amended to remove capital punishment for specific heinous crimes, death penalty is, and remains constitutional in Nigeria, according to the Supreme Court of Nigeria in the Case of *Kalu Onuoha v. The State*, 1998.

Hence this is not limited to Sharia Law as perceived and emphasized. On the contrary, the correct position is hereby reproduced from Nigeria's 3rd and 4th UN CRC Country Periodic Report, 2008, at p.10. Specifically, all the states in Northern Nigeria have always had these provisions in their respective Laws. Examples abound in the Sharia Penal Laws of Northern States of Nigeria regarding specific provisions for the protection of children and young persons. for example, Section 237 of the Zamfara State Sharia Criminal Procedure Code law of 2000, No. 1 Vol. 4 provides that **“No sentence of hudud or qisas shall be imposed on a person who is under the age of taklif. Note- Hudud means offences or punishments that are fixed under the Sharia and includes offences or punishments in Sections 126 to 141 of the Sharia Penal Code; Qisa means punishments inflicted upon the offenders by way of retaliation for causing death of or injuries to person; taklif means the age of puberty. Note: Hudud offences include sexual offences like zina (fornication)”**

Under **Section 238 (1)** of the same code, where a person is convicted of a ***hadd or qisas*** offence and it appears to the court by which he is convicted that he was under the age of ***taklif*** when he committed the offence, the court shall deal with him in accordance with **Section 11 of the Children and Young Persons Law (CYPL)** and **Section 95 of the Sharia Penal Code**.

Under **Section 95 of the Sharia Penal Code** of both Zamfara and Yobe States, when an offender who has completed his 7th year but not completed his 18th year of age is convicted by a court of any offence, the court may instead of passing the sentence prescribed under this code, subject the offender to confinement in a reformatory home for a period not exceeding one year.

The Sharia Penal Codes equally protect children and young person's by prescribing punishment for the crimes of causing miscarriage, injuries to unborn children, exposure of infants to danger, cruelty to children and concealment of births. So also kidnapping of children under 7 years and young person's above 7 years, abduction of children and young persons, sexual exploitation and trafficking of the girl-child and forced labour are all punishable crimes. **(Sections 207 -239 of the Zamfara and Yobe States Penal Codes).**

- Recently, the Federal Capital Territory Administration, Abuja, passed the much needed/first ever Child Rights (Enforcement Procedure) Rules, 2013, which aims at expediting the full implementation of the juvenile justice standards consistent with the AU Charter and UN CRC.
- Similarly, the 2009-2015 National Action Plan on the CRA/CRC produced by the Federal ministry of Women Affairs and Social Development provides for a clear strategic objectives, programmes and activities (in its chapter 3) required for the full implementation of the Child Justice System as provided in the CRA and States CRLs as well as the strengthening of the machinery for effective monitoring prevention and control of juvenile delinquency nationwide.
- Further, the 2011-2015 Strategic Framework for the Implementation of Justice Sector Reforms in Nigeria, produced by the Office of the Attorney-General and Minister of Justice, articulates strategic objective 3, where the Justice Ministry will evaluate and review the state of Nigeria's compliance with our obligations under the UN Human Rights Council, the AU, and ECOWAS including the submission of periodic reports on ECOSOC and Civil rights situation; **Improve the capacity of the poor, women, disabled persons, and children to access the courts; Provide protection of rights at the lower courts by strengthening legal aids council and training of paralegals.**
- The Legal Aid Council of Nigeria was established by Legal Aid Act No 56 of 1976 (now repealed and re-enacted as Legal Act 2011) is a parastatal under the supervision of the Federal Ministry of Justice. The Council is charged with the statutory responsibility of providing free Legal Representation, Legal Assistance, Legal Advice, to indigent Nigerians. The Council engages salaried lawyers and coordinates the activities of lawyers who provide pro bono services Besides its jurisdiction over such cases as murder manslaughter, rape, stealing, common assault occasioning actual bodily harm, affray, malicious or willful wounding, conspiracy, aiding and abetting and armed robbery cases, it also undertakes civil claims in respect of (a) accidents (b) breaches of fundamental rights and intervenes in civil matters resulting from criminal prosecutions. In addition to the above the Council provides mediation services in all its state offices as her contribution to promoting Alternative Dispute Resolution.

The Legal Aid Council has commenced the drive to collate its panels of registered lawyers into a directory of those who have applied to provide pro bono services to the over 100 million Nigerians who cannot afford the services of paid lawyers. The Council is positioned to coordinate and to monitor these activities and provide general information on pro bono lawyers, Legal aid providers and practitioners nationwide. This directory would also assist national and international donor agencies to determine who is providing legal aid services and consider collaboration and sponsorship. On the 19th of September 2013 and in line with its mandate, the Council convened a conference of pro

PART SEVEN

Participation Rights of the Child

7.1 Participation

Opportunities for the participation of children in matters concerning their rights and welfare, however, have progressively increased over the years since the ratification of the Charter and especially with the establishment of the Children's Parliament. In addition, the FME/UNICEF in 2008, developed a concept note and operational guidelines for the promotion of child participatory rights in schools through a programme tagged Child-for-Child Assembly (C4CA). The aim of the programme is to involve the children in the decision making process on issues that concern them. The programme is currently being piloted in 12 schools in the FCT. A scale up is expected in 2010.

7.1.1 Mandate of the Children's Parliament

- To represent the voices, minds and aspirations of Nigerian children;
- To come up with high quality supplementary advocacy for the survival, protection, development and participation rights of children;
- To deliberate on child related issues and adopt child-friendly recommendations and forward to supervising ministry for consideration;
- To receive reports from peers and deliver same to the relevant Authorities through the Child Development Department; and
- To monitor Issues involving child survival, development, protection and participation.

7.1.2 Composition of the Nigerian Children's Parliament at the National Level

The Federal Republic of Nigeria consists of 36 States and the Federal Capital Territory. At the National level, each state has two representatives, one each in the Senate and the House of Representatives, giving a total of 74 members in the National Children's Parliament.

7.1.3 Officers of the Children's Parliament

- In conjunction with related Government Ministries like the FMWASD, NAPTIP's focal persons in the LGAs have been charged with the responsibility of reporting incidences.
- Government has put in place mechanisms for public enlightenment to create awareness among the populace about existing child's rights and labour laws relating to the minimum age for employment.
- NAPTIP is also cooperating with Ministry of Women Affairs to align with the OVC reporting system.
- Inter-governmental agreement/instrument between Agencies or Ministries in destination countries have been established to outwit and break up trafficking rings with the aim of eventually eradicating trafficking as well as arresting and repatriating traffickers for prosecution in Nigeria.
- Donor agencies (i.e. ILO, FAO) are assisting by initiating the establishment of poverty alleviation schemes such as vocational training and other skills acquisition programmes in rural and urban centres for victims and potential victims. This is done through the provision of financial assistance and technical support to relevant Civil Society Organizations (CSOs) to organise training and seminar workshops for personnel in government agencies – Immigration, Police, Judiciary and Ministries.

bono lawyers to consolidate on this initiative.

The Council has initiated the training and upgrading of some of its administrative officers as Paralegal officers. The training covers Legal system and Human Rights, Paralegalism, civil/criminal procedure, family law, landlord and tenant to give the trainees the core skills of assisting the Legal Officers in problem solving within the Council. These paralegals would be deployed to the grassroots to provide first line access to justice services.

The Federal Government has provided funding and the Council has acquired a Headquarters office complex. The Council has equally received the Federal Government's approval for the recruitment of more lawyers to ensure a conducive working environment and provision of effective and efficient proactive legal services to indigent Nigerians.

In September 2012 the Federal Government, at the United Nations General Assembly re-affirmed its commitment to promoting the Rule of Law and undertook to support the Legal Aid Council with increased funding, increased personnel by 15% and increased service delivery by 40%. To this end the Council has received the Federal Government's approval to recruit more lawyers and is presently enjoying the deployment of SURE-P lawyers to boost the Council's manpower.

The Legal Aid Council observed that there are many convicts who deserve a second chance. To this end, the Council established a prerogative of Mercy Unit in its efforts to contribute to the Prison Decongestion Agenda of the Federal Government. Through the activities of the Unit, some State Governors have granted prerogative of mercy to some convicts. A total of ten convicts have been granted pardon while some applications are pending.

The Council, in collaboration with Lawyers Without Borders (France) has completed its collaborative training of justice sector stakeholders on the United Nations Convention Against Torture in Kano, Kaduna, Lagos and Plateau States.

Table 12: Legal Aid Cases

Nature of Cases	Granted	Completed
Criminal	88,345	58,372
Civil	9,210	5,900
PDSS	19,688	19,688
Total	117,243	83,960

Source: Legal Aid Council, Nigeria: March, 2013.

- ix. Currently, the passage of Child's Rights Laws (CRL) in 23 out of the 36 states has instituted the required legal framework for the protection of children's rights in Nigeria. Capacity for the implementation and monitoring of the CRL in states that have promulgated the Law have been enhanced via targeted training for over 317 members of the State Child Rights Implementation Committees, religious/ traditional leaders and legislators, media executives, representatives of CSOs, and members of the state Children's Parliament. An advocacy coalition involving 400 policy makers, religious and traditional leaders, children and the media have also been established in 9 states and the FCT, to sustain the issue of passage of CRL on the agenda in states that are yet to pass the bill. Efforts to harmonise the laws throughout the country include:

- High level advocacy visits led by the Honourable Minister of Women Affairs to state governors, law makers, traditional/religious and opinion leaders on the need for full domestication of the Act in all the States of the Federation.
- Advocacy/sensitisation meetings/campaigns targeting policy makers, legislators at all levels of Government and NGOs to facilitate the passage and implementation of the Act as State laws.

x. National Response

In response to these problems, the Child's Rights Act, 2003 was enacted to provide for a new system of child justice administration and for the care, support and protection of vulnerable children and those in conflict with the law. The child justice administration system in Nigeria as contained in the CRA provides for both non-custodial and custodial institutional measures for children in conflict with the law. It further provides for the protection of children in need of care and special attention.

Actions taken in implementing the provisions include:

- Free legal representation/aid for children: Mechanisms have been put in place to provide children free legal service delivery through the establishment of pro-bono services by the Nigerian Bar Association. Similar free legal service delivery is being rendered by various NGOs, the respective offices of the Public Defender and the various zonal offices of the Legal Aid Council.
- Family Courts are being established in Nigeria as the platform for effective implementation of the child justice administration. Family courts are already established and functioning in Abia, Lagos, Ondo, Anambra, Akwa-Ibom, Plateau, Kwara, Nasarawa States and the FCT. Efforts are in progress to establish same in all the states that have passed the Child's Rights Laws.
- Diversion programmes are currently being introduced into the child justice system. Specifically Alternative Dispute Resolution mechanisms are being strengthened to ensure that all disputes/conflicts involving children are settled through victim-offender mediation and or family conferences. Magistrates handling children are also being encouraged to adopt diversion programmes.
- Advocacy strategies are being employed with legislators and policy makers to ensure the provisions of the Children and Young Persons Laws (CYPL), the Penal Code, the Criminal Procedure Code and the Sharia Penal Code are reviewed and brought in conformity with the provisions and standards of the AUCRWC and CRA.
- The CRA and CRLs have all excluded the application of death penalty to persons below 18 years.
- Relevant professionals and child care givers are acquiring improved knowledge on appropriate National and International standards to ensure better care and support for children in conflict with the Law and other vulnerable children.
- Both the Social Welfare and the Child Development Departments at the state and Federal levels have in place programmes on rehabilitation and re-integration of vulnerable children.
- National plan of Action on Violence against Children has been developed, with well articulated training processes, to train parents, teachers, law enforcement officials, care givers, judges and health professionals in identification, reporting and management of violence against children.
- FMWA&SD is collaborating with Community Based Organizations (CBOs) to sensitize parents, teachers, care givers, etc, on the provisions of the CRA and CRLs.
- The development by the Nigerian Bar Association (NBA) and UNICEF of the assessment tool for

6.9.2 Sales, Trafficking and Abduction

Child trafficking in Nigeria has generated much concern in recent times because the practice undermines the survival and development rights of the child. Data obtained from NAPTIP survey particularly from 20 states are provided in Table 42 below.

Table 42: Percentage distribution of child victims of trafficking by gender, age and states

State	Male	Female	Total	Percent	Mean Age
Adamawa	3	2	5	6.3	14
Akwa-Ibom	4	2	6	7.5	15
Anambra	1	1	2	2.5	16
Bauchi	2	2	4	5.0	12
Benue	2	2	4	5.0	16
Borno	2	2	4	5.0	14
Cross River	3	2	5	6.3	15
Ebonyi	2	1	3	3.8	13
Edo	2	2	4	5.0	17
Enugu	3	2	5	6.3	15
Imo	2	1	3	3.8	15
Jigawa	2	2	4	5.0	12
Kano	4	2	6	7.5	16
Katsina	1	0	1	1.2	16
Lagos	3	2	5	6.3	15
Ogun	4	2	6	7.5	15
Oyo	4	2	6	7.5	14
Rivers	1	1	2	2.5	15
Taraba	2	2	4	5.0	15
FCT Abuja	1	0	1	1.2	8
TOTAL	48	32	80	100	15

Source: NBSCPN 2008

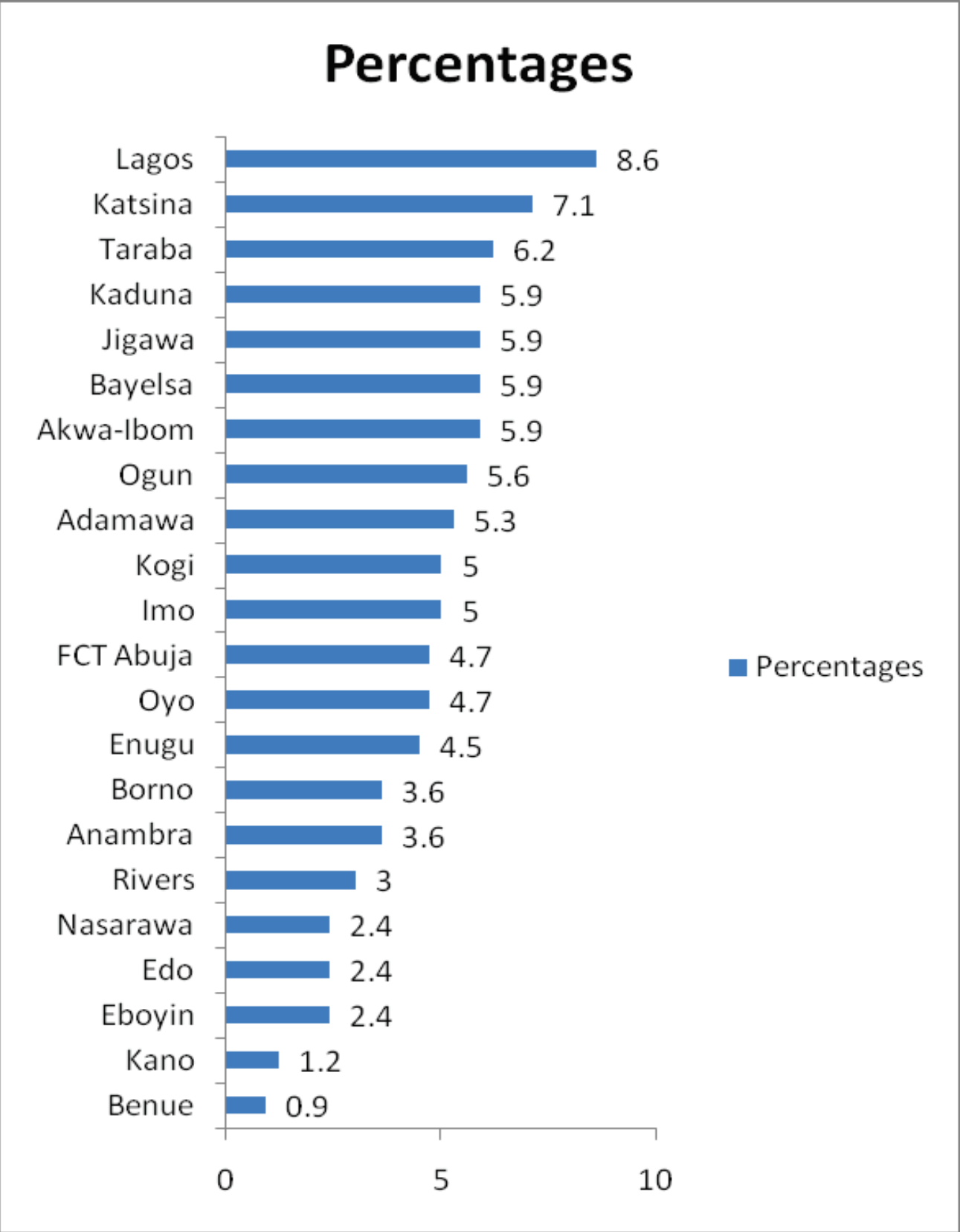
The distribution of the victims, as shown in table III above, indicated that Akwa Ibom, Kano, Ogun and Oyo states recorded the highest percentage of trafficked children (7.5 %) while FCT and Katsina State contributed 1.2 %. The findings also revealed that more female children (57%) were trafficked than male who accounted for 42.5%. The mean age of the children is 15 years. The age ranged between 8 and 17 years across the States.

6.9.3 National Response to Sales, Trafficking and Abduction of Children:

In addition to numerous studies being carried out on the phenomenon, a number of policies and legislative instruments have been adopted to address the problem:

- NAPTIP has established an electronic data bank for reported incidences of trafficking and exploitation of children.

Figure 25: Percentage distribution of CSWs by States



Source: NBSCPN 2008

the implementation of Child Justice Administration (CJA) in Nigeria in May 2008 helps State Governments in the implementation of Child's Rights Laws.

- xi. **Other results of the initiative and programme of cooperation are indicated below:**
- About 3,500 members of the Nigerian Bar Association made up of lawyers, judges and magistrates and other law enforcement officers have so far been enhanced on the various legislative reforms and developments in the child justice system. Provisions of the CRA and the delivery of protective services and care for children in conflict with the law and other vulnerable children, have equally been explicated to members of the Association and the law enforcement agents.
 - 180 care-givers in Osun, Oyo and Kaduna states and from 8 institutional child care centres including Almajiri care givers acquired skills and knowledge on child's rights. They are now better equipped to give care and conducive environment for children deprived of primary care.
 - 370 children in conflict with the law in Borstal training institution had access to life skills, anger management, and conflict resolution/provision of psychosocial counselling/pro-bono services. The exposure of 50 Borstal institution care givers to the AUCRWC principles, diversionary measures and current child justice administration accounted for the effort.
 - Coalition of NGOs and Government partners (comprising of Representatives of the Ministry of Justice, Women Affairs and Social Development, the Prisons, the Police, Nigerian Bar Association, Legal Aid Council, Taraba National Youth Council and other Human Rights NGOs in Plateau and Taraba States) provided free legal services and counselling services to over 200 indigent children who were in conflict with the law.
 - Awareness creation on child justice administration, through the provision of mattresses, pillows and beddings to children and young people in children's and young people's homes in Plateau, Nasarawa and Taraba States.
 - The established technical working group is currently coordinating, monitoring and improving the provision of *Pro bono* services within the NBA and other role players in the Child Justice Administration.
 - Key information on the care and protection services for children in institutions is made available at all levels of the Child Justice Administration in the country through the developed '*Assessment Tool to assist National and State governments in the implementation of Child Justice Administration*'
 - **Establishment of a State Child Justice Administration Committee comprising of FIDA, SMWAD, NHRC, NBA, NGOs, Police, Prison, FBOs and the media in the Jigawa, Kano, Adamawa, Gombe, Bauchi, Plateau, Nasarawa, Borno, Taraba and Benue States.**
 - **Reinforcing the provision of Pro-bono services, counselling and legal aid for children in conflict with the law and in need of care and protection.**
 - About 580 children, young persons, and women in conflict with the law and 600 vulnerable children in Ebonyi, Anambra and Rivers states received free legal aid and counselling services, 29 of them were released from prison custody.
 - 100 children in conflict with the law from Kogi, Kwara, Niger, Kaduna, Zamfara, Katsina, Kebbi and Sokoto States acquired improved knowledge based on the different provisions of the CRA and are better informed on their responsibilities. The setting up of a coordinated mechanism to monitor, collate and analyze data on recovery services for children in conflict with the Law, and other vulnerable children resulted in the successful provision of free legal representation, rescue and recovery services for over 1005 vulnerable children and those in conflict with the Law in year 2007.
 - The coalition on Child Justice Administration in Plateau and Taraba States **recovered and reintegrated a total of 192 (158 boys and 34 girls) children in conflict with the law and in need of care and protection in the states.**
 - Interactive session with key stakeholders (Directors of Child Development, Chairman of the Nigerian Bar Association, Legal Aid Council and Human Rights NGOs) on Child Justice Administration in Jigawa, **Kano, Adamawa, Gombe, Bauchi, Plateau, Nasarawa, Borno, Taraba and Benue States.**
 - **Promoting access to sustainable justice** for children in conflict with the law and in need of care and

- protection **among the stakeholders through awareness creation.**
- 12 Police Area Commanders from 12 states and 24 Juvenile Welfare Desks Officers from 24 States of the Federation had improved knowledge on counselling, care and protection of children. These officers are now better positioned to effectively and efficiently deliver improved recovery services for children in conflict with the law and other vulnerable children.
- Improved data management and information processing techniques to assess the situation of children in conflict with the law at the Juvenile Welfare Desks offices across the country was put in place in year 2007.

11. Child trafficking: While acknowledging the measures taken by the State to combat trafficking of women and children including the adoption of trafficking in persons (prohibition law enforcement and act as amended in 2005). The establishment of the national agency for the prohibition of trafficking in persons and the various corporation agreements reached with other countries. The committee is concerned by the continuing prevalence and the extent of this problem especially the trafficking of children who become sex slaves or domestic workers. The committee urges the State Party to take measures aimed at reducing the vulnerability of girls as well as awareness raising an awareness campaign particularly in communities most at risk.

Response 11: Information on measures put in place to reduce the vulnerability of girls/children as victims of trafficking and community-based awareness campaign to stem the tide of child trafficking include:

- 1) **In order to effectively check the scourge of human trafficking and related crimes, NAPTIP adopted a 4P's strategy as follows:**
 - **Prevention** is a strategic tool used to promote Awareness, Knowledge and Understanding of Trafficking in Persons (TIP), through use of Information, Education and Communication (IEC) Materials, Public Rallies, Conferences, Workshops and Seminars, Advocacy visits, community dialogues, Mass Media Campaigns and Victims Testimonies as well as the establishment of NAPTIP Vanguard, Brigades and clubs in Schools, National Youth Service Corps (NYSC) and Civil Society Organisations (CSOs) among others. It outlines a range of processes for communicating and sharing information on trafficking in persons (TIP) to target members of the public.
 - **Prosecution** involves investigating human trafficking related cases, monitoring cross-border movements and prosecution of TIP cases in law courts.
 - **Protection** involves an intricate process of activities geared towards the successful rehabilitation and reintegration of victims into the society. Protection processes employed by the Agency are: reception, processing, allocation and medical examination/psychiatric assessment. Others include debriefing, documentation and engagement.
 - **Partnership** entails the adoption of collaborative strategies among countries and agencies in the area of information sharing, investigation and prosecution to combat TIP. This fact has been recognised by most international instruments as well as the Trafficking in Persons (Prohibition) Law Enforcement and Administration Act (2013). In realisation of this, the Agency has continued to facilitate bilateral negotiation and MOUs with source, transit and destination countries as well as the UN Agencies.
- 2) **National Response to Human Trafficking:** The ratification of the Palermo Protocol on December 28th June, 2001; Enactment of TIPPLEA Act 2003 into law on 14th July, 2003; Establishment of NAPTIP on the 14th July, 2003; Amendment of the Trafficking in Persons (Prohibition) Law; Enforcement and Administration Act, (TIPPLEA) 2003 in December 2005; Setting up the National Task Force on TIP on October 4th, 2006; Establishment of Victims of Trafficking Trust Fund in 2008; Signing of bilateral and multilateral agreements; Approval of the National Policy on Protection Assistance to Trafficked Persons in Nigeria by the Federal Executive Council (FEC) on the 12th of November, 2008; The National Plan of Action on TIP was approved by the Federal Executive Council (FEC) in 2008.

- Officials of the NDLEA are mandated to carry the campaigns to high-population areas, such as market places, religious houses and community centres.
- Psychiatric centres have been established around the country to provide counselling and treatment of serious cases of illicit drug usage and abuse.
- Delta State in particular, has a drug abuse control committee which carries out sensitisation campaigns and counselling.

6.9 Measures to Combat Sexual Exploitation, and Sexual Abuse of Children. –Article 27 (CRA, Sections 31 and 32)

Sexual exploitation of children, particularly girls has taken new dimensions with child prostitution on the increase in urban areas. It constitutes severe abuse of their fundamental human rights. It is a problem of special concern in Nigeria, because of its scale and link with the commercial trafficking in children.

National Baseline Survey on Child protection in Nigeria (2008) provides a broad picture of the problems of commercial sexual exploitation in Nigeria. Percentage distribution of CSWs according to States in Nigeria is shown in Figure 22. The distribution of Child Sex Workers by State was observed to be highest in Lagos State (8.6%) followed by Katsina (7.1%) and Taraba States (6.2%). Benue and Kano had the least percentages with 0.9% and 1.2% respectively.

6.9.1 Prevention Programmes for the Eradication of Sexual Exploitation

- Prevention projects and services have been stepped up in all States especially those where child trafficking is rife.
- Awareness campaigns focusing especially on rural areas from where children are trafficked for domestic work have been stepped up.
- The Government through the Ministry of Education has progressively ensured that the free and compulsory primary and junior secondary education for all children both in the rural and urban communities is implemented.
- Governments at all levels are making basic education functional and effective (including vocational education) by ensuring the availability of educational facilities and motivated teachers.

Table 41: Commonest used hard drugs in communities

STATE	Heroin	Cocaine	Indian Hemp	Others		Total
Adamawa	0.0	0.0	95.6	4.4	45	100.0
Akwa-Ibom	1.4	6.5	92.1	0.0	215	100.0
Anambra	3.1	2.1	94.8	0.0	96	100.0
Bauchi	1.7	0.0	95.0	3.3	60	100.0
Benue	0.0	0.8	98.3	0.8	118	100.0
Borno	5.3	7.0	83.3	4.4	114	100.0
Cross River	0.0	0.0	98.5	1.5	65	100.0
Ebonyi	0.0	0.0	100.0	0.0	78	100.0
Edo	1.4	0.0	98.6	0.0	69	100.0
Enugu	1.3	0.0	97.4	1.3	78	100.0
Imo	0.6	1.3	97.4	0.6	150	100.0
Jigawa	0.0	0.0	98.1	1.9	54	100.0
Kaduna	1.0	2.9	88.3	7.8	206	100.0
Kano	0.0	10.7	72.3	17.0	112	100.0
Katsina	1.1	2.2	96.7	0.0	91	100.0
Kogi	1.5	6.1	92.4	0.0	66	100.0
Lagos	0.9	1.7	97.4	0.0	115	100.0
Nasarawa	0.0	8.7	78.3	13.0	23	100.0
Ogun	3.6	3.6	76.4	16.4	55	100.0
Ondo	0.0	0.0	100.0	0.0	21	100.0
Oyo	0.0	0.0	100.0	0.0	25	100.0
Rivers	0.8	0.0	98.5	0.8	133	100.0
Taraba	0.8	3.1	95.3	0.8	129	100.0
FCT Abuja	0.0	1.8	98.2	0.0	50	100.0

Source: NBSCPN 2008

- 3) The National Policy on Protection and Assistance to Trafficked Persons adopted a holistic approach in the protection and assistance in the protection and assistance to trafficked persons through rehabilitation programmes that provide appropriate integration into their various communities.
The scope/method include: reception, identification, sheltering, counselling, family tracing, return/repatriation, integration, empowerment, follow-up/after-care and disengagement. The common denomination of these components is the accompanying objectives and implementation.
As an outcome to the National Policy document, the Agency produced the Guidelines for the Protection of Children in Formal Care, which was adopted by stakeholders at a national workshop in Kaduna in December 2009. The guidelines contain checklists and Codes of Conducts for care-givers and others who come in contact with children in informal care, including the mass media. Both the policy and the guidelines are being disseminated across the country.
- 4) Since its establishment on the 14th July 2003, NAPTIP's successes have been growing in leaps and bounds.
 - The Agency evacuated 104 girls trapped in sex slavery in Mali. They were counseled and rehabilitated.
 - The Agency has taken various far-reaching steps to educate the public and stakeholders on the menace of human trafficking in Nigeria. Various workshops, seminars and open air rallies have been held in various states. These programmes are usually targeted at various groups belonging to different sectors of our national life including institutions of learning, religious organisations and worship centres, rural communities and Traditional Rulers as well as officials of governments at various levels.
 - The Agency has collaborated with countries such as Italy, France, Netherlands, Switzerland, Spain, the United States of America, Finland, Britain, Saudi Arabia, Norway, Benin Republic, and organisations such as UNODC, IOM, UNICEF, ILO, USAID, UNICRI, WOTCLEF, etc.
 - The Agency has shelters in all the 7 zonal offices and the headquarters in Abuja.
 - Over 6,000 victims have been rescued and counselled.
 - About 1000 of this number have been equipped with various vocational skills, while some are in schools and others reunited with their families.
 - About 200 traffickers have been convicted and they are serving various jail terms in different parts of the country with many cases still pending in various courts in the country.
- 5) Realising educational empowerment of Girls/Women as a great weapon and a strategic remedial intervention, the Government is implementing the 2012 National Framework on Girls' and Women Education, which seeks to improve the quality of education available to all girls, addressing inclusive and vocational education through their rights to quality education to improve access, attendance, retention and learning achievements at the basic education level. It also serves as a veritable solution to the attainment of Education For All (EFA) and the Millennium Development goals (MDGs), in Nigeria.
- 6) In addition to the above, see earlier responses 5, 7 and 8 on education, household poverty etc.

6.8.2 Measures to Combat Sale and Abuse of Narcotic Drugs to Children:

- Government has embarked on massive public awareness programmes to warn against the dangers of drug abuse, especially for children.
- Nigeria **has strengthened the laws on drug abuse and drug trafficking, culminating in the establishment of the National Drug Law Enforcement Agency (NDLEA). The Agency has wide-ranging powers to prevent, monitor and prosecute cases of drug production, abuse and trafficking.**
- **The establishment of** over 2,000 Drug Free Clubs in Nigerian schools, to undertake awareness campaigns, public lecture series, talk shows, drama presentations, quizzes, and peer education. The creation of behavioural changes amongst children remain the principal objective.
- Drug education has been introduced into the primary and secondary curricula in a collaborative initiative between NDLEA and the National Educational Research and Development Council of the Federal Ministry of Education.
- **The provisions of the CRA, CRLs and the NDLEA Act, ensure that Nigeria has the legal framework for controlling the sale, use and trafficking of drugs and psycho-tropic substances by children. This legislation, has abundant provisions in terms of structures and procedures for treatment, counselling, recovery and re-integration of children involved with drugs and psycho-tropic substances.**

PART THREE

General Measures of Implementation: Articles 1,2,3,4, 26 & 43

3.1 Evolution of Legislative Actions in Implementing the Provisions of the AU Charter

Prior to the ratification of the AUCRWC in 2001, child rights issues were guided by various legislations at the Federal and Regional levels up to 1961 and at Federal and State levels after 1961.

Notable among these were the *Children and Young Persons Act (1943)*, which dealt mainly with Juvenile Justice Administration; the *Labour Act (1974)*, which sought to regulate child labour and to protect children from exploitative labour and abuse; the *CRC in 1991*, which promotes and protects the rights of the child to survival, development, protection and participation.

In 1993, a draft *Children's Bill* was prepared, based on the principles of the *CRC*, but it was never enacted into law until the end of the military era in 1999. Since the inauguration of democratic governance in Nigeria in May 1999, concerted efforts have been made to evolve a legal framework for the protection and promotion of the rights of children.

These efforts have culminated in the passage of the *Child's Rights Act (CRA)* in **July 2003**. The main provisions of the Act are laid out in **24 parts** and cover the broad themes of the *CRC*, namely; the rights of the Nigerian Child to Survival, Development, Protection and Participation.

This substantive Act domesticates the provisions of the *CRC* and AUCRWC in Nigeria and strengthens the various states legislation dealing with individual aspects of child protection, including the prohibition of street hawking and begging; child abuse (including sexual abuse); child trafficking; child labour and other forms of exploitation. Harmful traditional practices such as Female Genital Mutilation (FGM), scarification, child marriage, withdrawal of children from schools mainly for commercial purposes or marriage, abuse and exploitation of the *Almajirai children* (Pupils of the traditional system of Koranic education) were also prohibited.

3.1.1 Institutional Framework for the Implementation of the AUCRWC

- Prior to 1993, only the Social Welfare Department of the then Federal Ministry of Social Development and Culture had the mandate on issues relating to childcare and juvenile justice. In 1993, however, a Child Development Department (CDD) was created in the National Commission for Women located in the Presidency, to cater solely for issues concerning children. This was the result of the movement for the advancement of women's rights, and the consequence of the Children's Summit of 1990.
- The Commission later evolved into the Ministry of Women Affairs and Youth Development in 1996, and has since vigorously pursued the promotion and protection of children's rights at all levels in Nigeria. As a result, the 36 States of Nigeria now have specific ministries charged with women and children's affairs. The Federal Capital Territory, Abuja, also has a department charged with the responsibility of child rights protection and promotion, along the same lines.
- At the institutional level, the *NCRIC* is the apex body charged with the responsibility of monitoring compliance with the Act and the AUCRWC. The body comprises representatives of government ministries/agencies, CSOs and Academia responsible for monitoring and the implementation of the rights enunciated in the *CRA/AUCRWC*. The NCRIC is obliged to: - advise Government on programmes and projects that would enhance the implementation of the rights of the child; collect and document information on matters relating to child rights; prepare and submit periodic reports on

- Convention on the Prevention and Punishment of the Crime of Genocide.
- Optional Protocol to the Convention Against Torture; and
- Optional Protocol to the Convention on the Rights of Persons with Disabilities.

The country has commenced the ratification process of the following:

- Optional Protocol on the Involvement of Children in Armed Conflicts.
- Optional Protocol on the Sales of Children, Child Prostitution and Child Pornography.

6.8 Children and Drug Abuse – Article 33

6.8.1 Problems of Drug Use among Children

Drug abuse is one of the major deviant behaviours by young persons. The distribution, use and abuse of drugs have been recognised as major problems in the country. These vices have prompted the establishment of the National Drug Law Enforcement Agency. Drug-related problems are also widespread in different parts of the country.

a) Awareness of Drug-related Offences and Common Hard Drug Problems among Children

Based on NBSCPN findings, nearly a quarter (23.8%) of the respondents were aware of the incidence of drug related offences in their respective communities, while majority (86.92%) reported that they were unaware of the incidence of drug related offences in their respective communities. At the state level, high percentage of respondents in Akwa-Ibom, Imo, Kaduna, Rivers and Taraba States were aware of drug related offences and the effects on communities.

b) Common Hard Drug Problems in Children.

The use and abuse of hard drugs by young persons was reported in the NBSCPN as the a prevalent problem, as indicated by more than four-fifths (82.3%) of the respondents. Possession of hard drugs was more prevalent in Bauchi, Katsina, Kogi and Taraba States. The use of hard drug was widespread in all the states, although more prevalent in Akwa Ibom, Enugu, Kaduna, Lagos and Ogun states with over 90%.

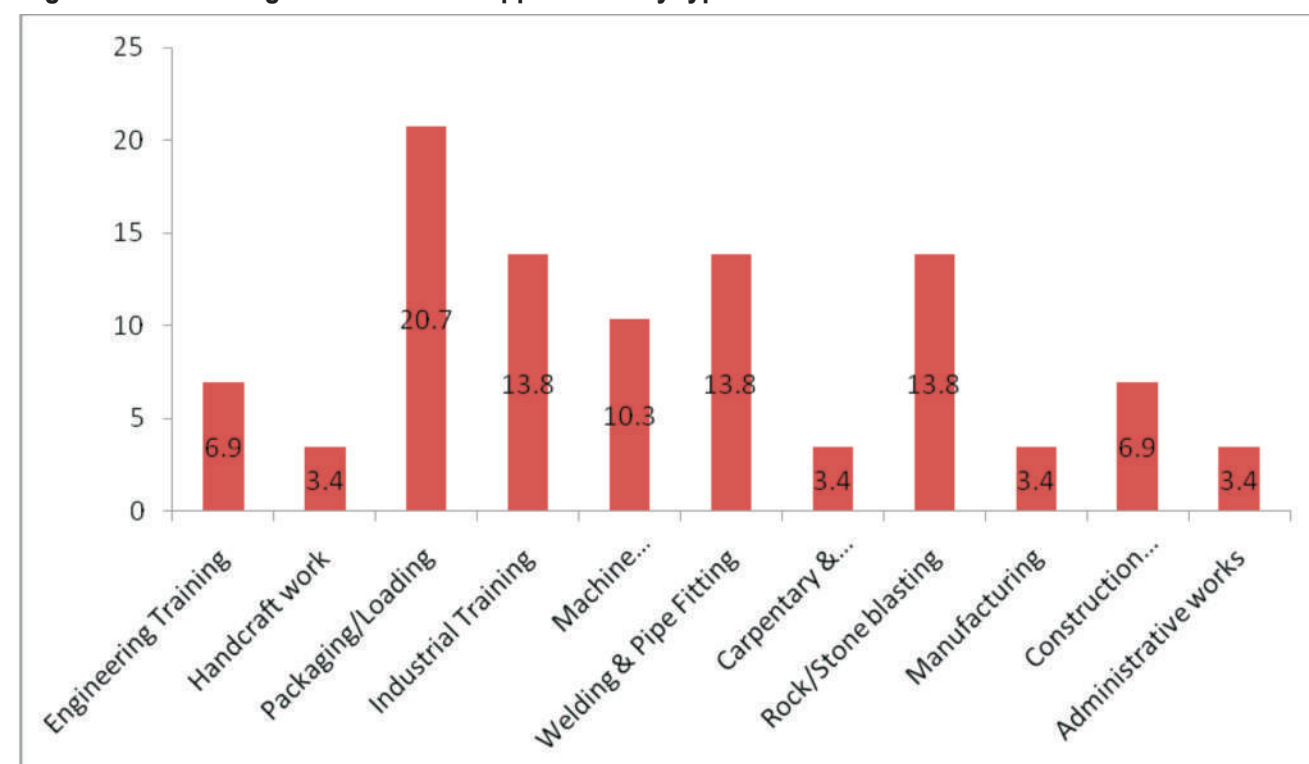
c) Commonly Used Drug in Communities

Based on the NBSCPN finding, Indian hemp was reported to be the most commonly used drugs in communities, with more than nine-tenths (93.1%) of the respondents as shown in table 41, children in Ebonyi, Ondo and Oyo States were more involved in the use of hard drugs, than their counterpart in Kano State, who had the least figures of involved in the use of hard drugs.

e). Children in Construction

Of the total number of establishments which engaged children as apprentices in the quarry/construction industry, about 20.7 % engaged them in the packaging/loading sectors. 13.8 % engaged apprentices in industrial training, welding and pipe fitting as well as in rock/stone blasting respectively. It was further found that 10.3% of the establishments engaged apprentices for machine operation/driving. Other establishments indicated the engagement of children as apprentices in engineering training (6.9%), manufacturing (3.4%) and administrative work (3.4%). See figure 24.

Figure 24: Percentage distribution of apprentices by type of activities



Source: NBSCPN 2008

The report recommended to the government a transformative social protection framework that encompasses **protective, preventative, promotive and transformative social protection measures**, in view of the severe, multiple and intersecting deprivations, vulnerabilities and risks faced by the children enumerated in the survey.

(f) International Cooperation Measures

International treaties and protocols on women and children ratified by the Government as at December 2009 include:

- ILO Convention 138 on Minimum Age.
- Optional Protocol to the Convention on Elimination of All Forms of Discrimination against Women.
- ILO Convention 182 on Elimination of the Worst Forms of Child Labour.
- Convention against Torture and other Cruel, Inhuman and Degrading Treatment or Punishment.
- Convention against Trans-national Organized Crime.
- Protocol to Prevent, Suppress and Punish Trafficking in Persons, especially Women and Children.
- Optional Protocol on the Civil Aspects of International Child Adoption.
- International Convention for the Protection of All Persons from Enforced Disappearance

the **AUCRWC** and advise the Government on how best to ensure the well-being of the Nigerian child. The SCRIC replicates same activities at state levels.

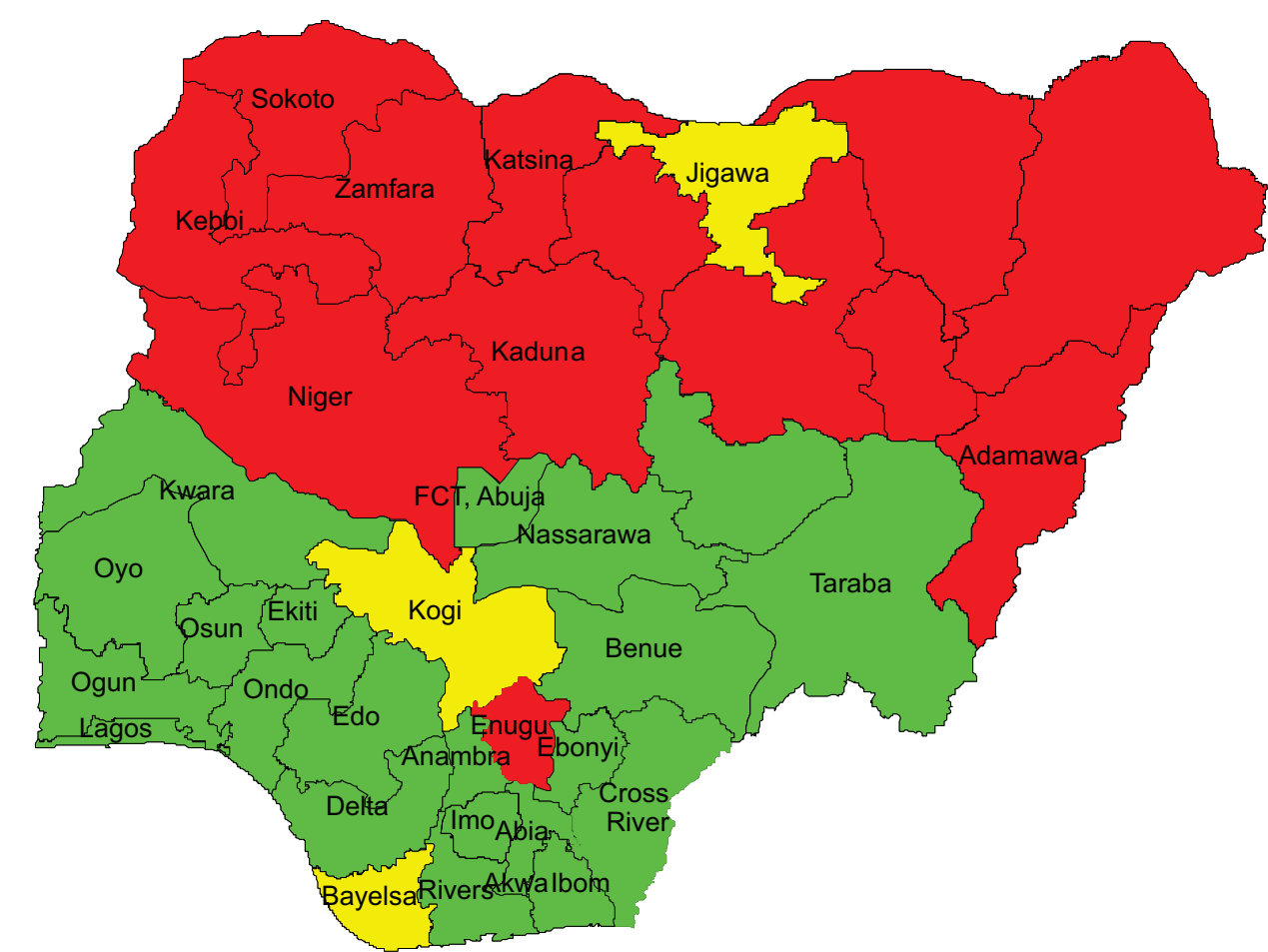
- Family courts, through which the provisions of the CRA and CRLs of the states will be enforced, have been instituted in eight states namely; Abia, Lagos, Ondo, Anambra, Akwa Ibom, Plateau, Nasarawa, Kwara, Delta, Oyo, Osun, Ekiti, Ogun, Cross River, Kogi, Benue, Ebonyi and the FCT.
- The **National Human Rights Commission** established under the **National Human Rights Commission Act, No. 22 of 1995 as amended in 2010** is responsible for Human Rights promotion, and monitoring as well as the investigation of violations of the rights of children, as provided under the Constitution, the **CRA** and International Human Rights Instruments, such as the AUCRWC, CRC and the two Optional Protocols. A Programme officer on Child Rights at the Commission has the responsibility to monitor compliance with the **AUCRWC** and the **CRA** and to provide legal aid to children whose rights have been violated.
- The formation of the National Council of Child Rights Advocates of Nigeria (NACCRAN) as the umbrella NGO for non-governmental groups involved in Child Rights Advocacy;
- The establishment of Juvenile Welfare Desks at Police Divisional Headquarters across the country; and the,
- Formation of Child Protection Networks across the 36 states of the Federation.
- Formation of functional Child Rights Implementation and Monitoring Committees in the FCT, Abia, Ebonyi, Benue, Borno, Oyo, Plateau and Enugu States.

3.1.2 Measures to Harmonize National Legislation and Practice with the Provisions of the AUCRWC.

Since the ratification of the Charter, efforts have been made at the Federal, State and Local Government levels to translate the provisions of the Charter into reality and ensure its effective practical implementation. The implementation measures adopted include: legal, policy, administrative, institutional, promotional/educational and judicial measures including:

- Development of the National Child Policy of 2007 and its Strategic Plan of Action/implementation framework 2007/2008.
- Development of National Plan of Action on OVC and its Guidelines and Standard of Practice, 2007.
- Institutions exist to provide and coordinate services for the care and support of OVC in line with the National Plan of Action.
- Institutions and structures at national and sub-national levels increase participation of women and children in line with the gender and children's policy.
- A comprehensive, rights-based National Plan of Action covering all the areas of the Charter with the time frame of 2009-2015 was developed.
- The Child Rights Laws have been passed in 21 States; namely, Abia, Akwa Ibom, Anambra, Benue, Cross River, Delta, Ebonyi, Edo, Ekiti, Imo, Jigawa, Kwara, Lagos, Nasarawa, Ogun, Ondo, Osun, Oyo, Plateau, Rivers and Taraba. Two states (Bayelsa and Kogi) have passed the Law, but are still awaiting Governor's assent; whilst 13 States (Adamawa, Bauchi, Borno, Enugu, Gombe, Kaduna, Kano, Katsina, Kebbi, Niger, Sokoto, Yobe and Zamfara) are yet to pass the law.

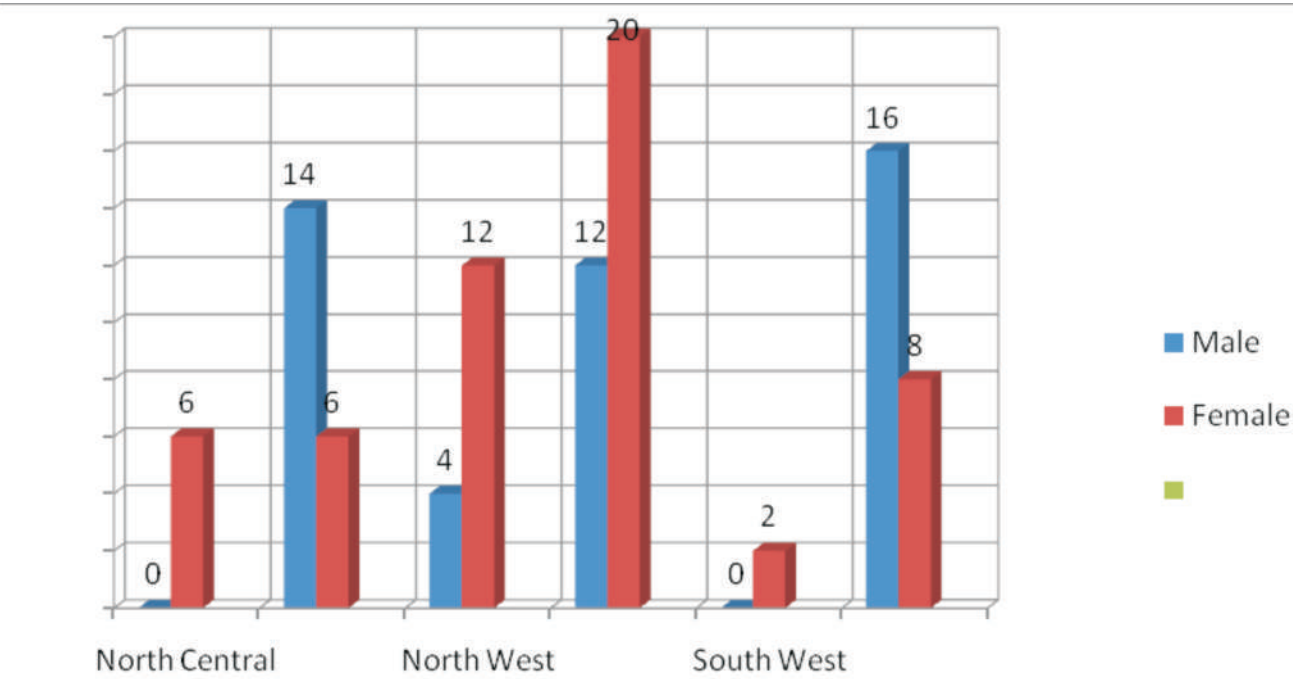
Figure 6: Status of Passage of Child's Rights Laws in Nigeria



States that have passed ■ States that have not passed ■ States that have passed but no governor's assent ■

- National Agency for Food and Drug Administration and Control Act
 - Criminal Code
 - Sharia Penal Code
- The capacity of over 280 members of the Coalition on Child Justice Administration including Judges, Magistrates, and members of the Nigerian Bar Association, the Police, Child Welfare Officers and Social Welfare Officers were enhanced to deliver recovery services for children in conflict with the law and those in need of special protection. Similarly, the partnership developed with the National Judicial Institute led to the establishment of Family Courts in Abia, Lagos, Ondo, Anambra, Akwa Ibom, Plateau, Nasarawa, Kwara States and the FCT to fast track access to justice and improved care and services for children in conflict with the Law.
- NAPTIP has continued to provide leadership in combating trafficking in persons in Nigeria. Measures to address both in-country and cross border child trafficking initiated by NAPTIP in collaboration with Law Enforcement Agencies, CSO and Communities led to the rescue of 972 child victims of trafficking and the prosecution of 24 traffickers in 2008. Table 12a on page 42 reveals the 2011-2013 efforts by NAPTIP, **Number of Traffickers Convicted and Victims Rescued by NAPTIP: as at 30/6/2013.**

Figure 22: Percentage distribution of child domestic workers by gender and zone

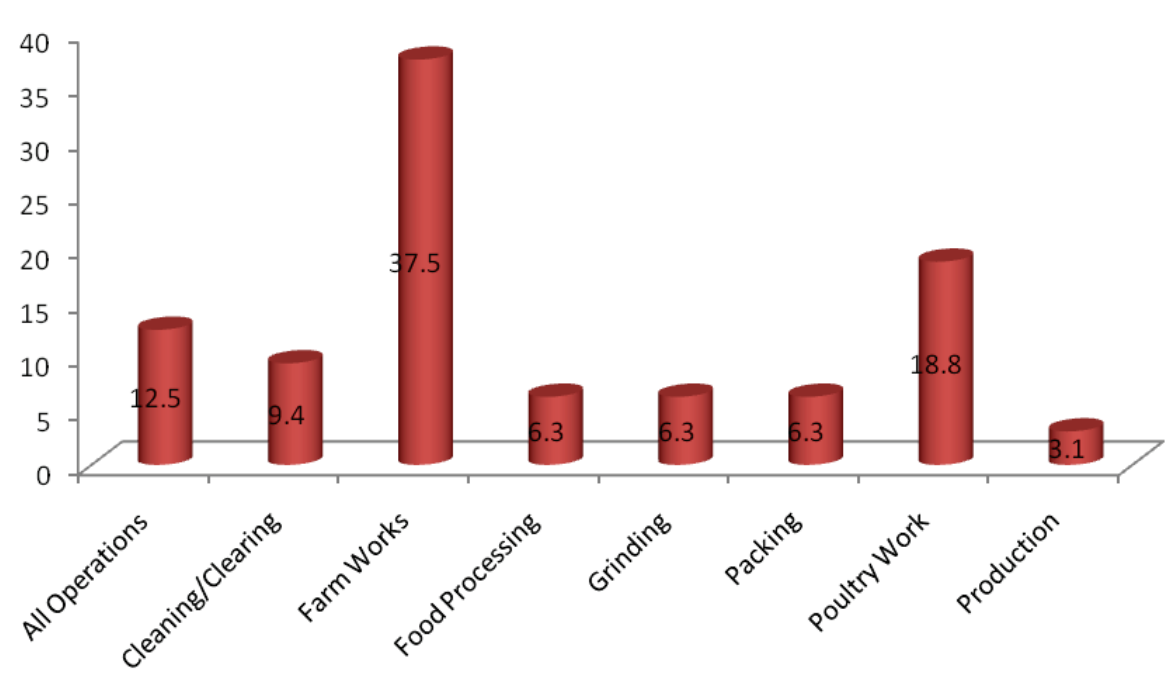


Source: NBSCPN 2008

d). Children in Agriculture

Figure 23 presents findings on children engaged in the agricultural sector. It shows the nature of work done by children in agricultural establishments. Findings reveal that the majority (37.5%) were engaged in farm works, 18.8% worked in the poultry. Food processing, grinding and packaging employed 6.3% each, while only 3.1% were engaged in production

Figure 23: Percentage distribution of children by agricultural activity

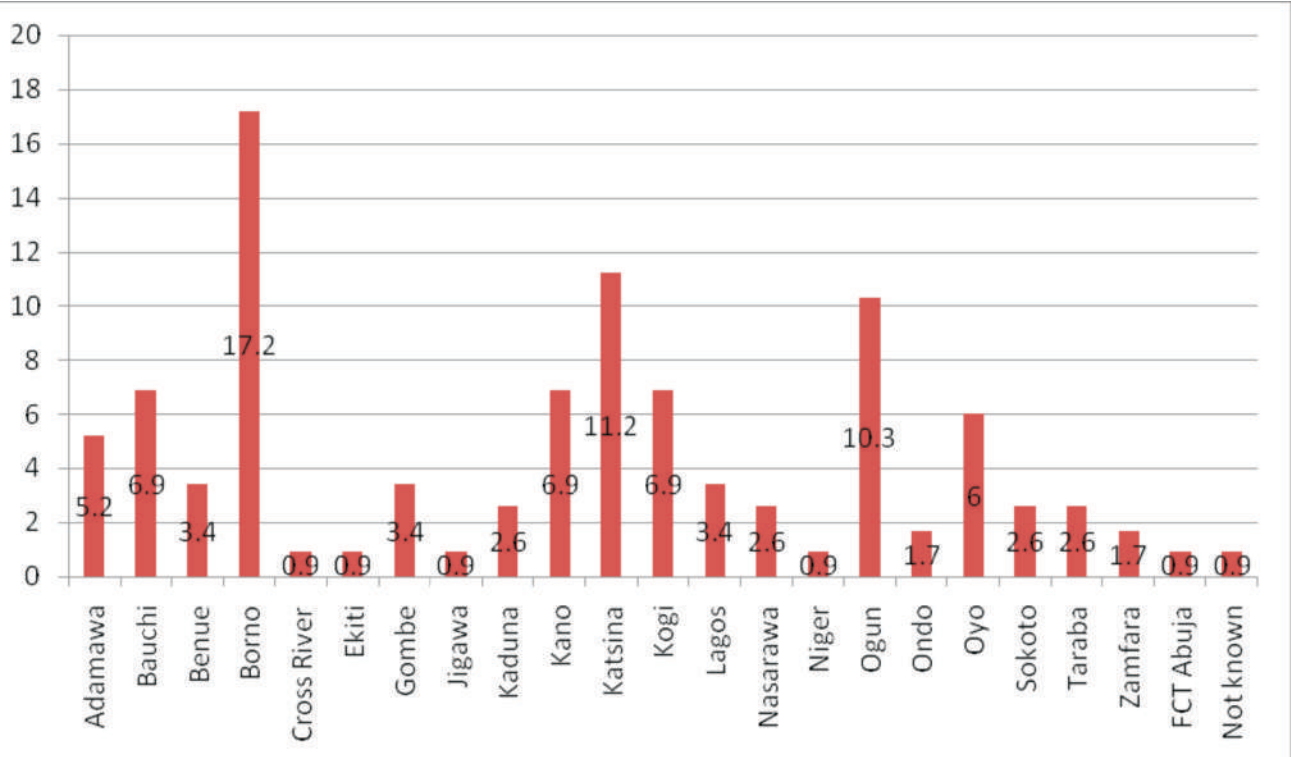


Source: NBSCPN 2008

b). **Almajirai**

The Almajirai are a special category of street children who are supposedly receiving instruction/education under Islamic scholars. The percentage distribution of the Almajirai according to surveyed States in Nigeria is presented in Figure 21.

Figure 21: Percentage distribution of the Almajirai children by states



Source: NBSCPN 2008

Based on NBSCPN, the highest percentage of Almajirai is from Borno (17.2%). Katsina had 11.2% and Ogun 10.3%. It was also reported that 6.9% each originated from Bauchi, Kano and Kogi States. Gombe and Lagos had 3.4% each.

c). **Child Domestic Workers (CDW)**

Child Domestic Workers are children under the age of 18 years engaged in domestic work within the household. They are commonly referred to as **househelps, houseboys/girls, maids and servants** (Figure 22). The distribution of child domestic workers across the zones based on the findings from the NBSCPN indicated that the South-East contributed the highest proportion of 32% (made of 20% females and 12% males), followed by the South- South with 24% (made of 8% females and 16% males), Others were North –East accounting for 20% (made of 14% males and 6% females), North West was 16% (made up of 12% females and 4% males), North-Central was 6% (Males only) and South- West accounting for 2%(females only).

Table 12a below shows efforts by the Nigerian anti-trafficking agency (NAPTIP) in securing successful prosecutions and convictions of human traffickers between 2004 and 2013:

Table 12a: List of Convictions by NAPTIP on Trafficking 2004-2013 (July)

S/N	No. of Convictions	NO. of Rescued Victims	No. of Cases being Prosecuted
1	205 persons convicted for human trafficking offences	Over 6,700 trafficked victims rescued between 2004 to July 2013.	Over 157 suspected human Traffickers

Source: NAPTIP, Abuja as at 30/7/2013

- The Federal Government has also forwarded a Bill to the National Assembly to re-enact and strengthen the Law against human trafficking as well as impose stiffer penalties on convicted traffickers. The Bill has passed 2nd Reading at both the Senate and House of Representatives and the Public Hearing took place on 22nd of July, 2013.
- Mainstreaming of child protection issues into the curriculum in Police Training Institutes.
 - Lagos State Street Trading and Illegal Markets (Prohibition) Law, Cap 183
 - Specifically, all the states in Northern Nigeria have always had these provisions in their respective Laws. Examples abound in the Sharia Penal Laws of Northern States of Nigeria regarding specific provisions for the protection of children and young persons. for example, Section 237 of the Zamfara State Sharia Criminal Procedure Code Law of 2000, No. 1 Vol. 4 provides that

“No sentence of hudud or qisas shall be imposed on a person who is under the age of taklif. Note- Hudud means offences or punishments that are fixed under the Sharia and includes offences or punishments in Sections 126 to 141 of the Sharia Penal Code; Qisa means punishments inflicted u p o n the offenders by way of retaliation for causing death of or injuries to person; taklif means the age of puberty. Note: Hudud offences include sexual offences like zina (fornication)”

- Under **Section 238 (1)** of the same code, where a person is convicted of a **hadd or qisas** offence and it appears to the court by which he is convicted that he was under the age of **taklif** when he committed the offence, the court shall deal with him in accordance with **Section 11 of the Children and Young Persons Law (CYPL)** and **Section 95 of the Sharia Penal Code**.
- Under **Section 95 of the Sharia Penal Code** of both Zamfara and Yobe States, when an offender who has completed his 7th year but not completed his 18th year of age is convicted by a court of any offence, the court may instead of passing the sentence prescribed under this code, subject the offender to confinement in a reformatory home for a period not exceeding one year.
- The Sharia Penal Codes equally protect children and young person's by prescribing punishment for the crimes of causing miscarriage, injuries to unborn children, exposure of infants to danger, cruelty to children and concealment of births. So also kidnapping of children under 7 years and young person's above 7 years, abduction of children and young persons, sexual exploitation and trafficking of the girl-child and forced labour are all punishable crimes. (**Sections 207 -239 of the Zamfara and Yobe States Penal Codes**).
- **Judicial Decision under the Sharia:** - In the celebrated case of **Karimatu Yakubu V. Alh. Paiko, (Appeal No. CA/K/80s/85 – unreported, Court of Appeal, Kaduna)**, the Court of Appeal, Kaduna division, allowing the appeal in favour of the teenage appellant, reiterated that: **'her father could not compel her to marry a man contrary to her choice and right to consent. The court clearly indicated that under the Sharia Family Law the need for the consent of a girl in her marriage is both an**

indispensable requirement and contractual right or at least a desirable one'.

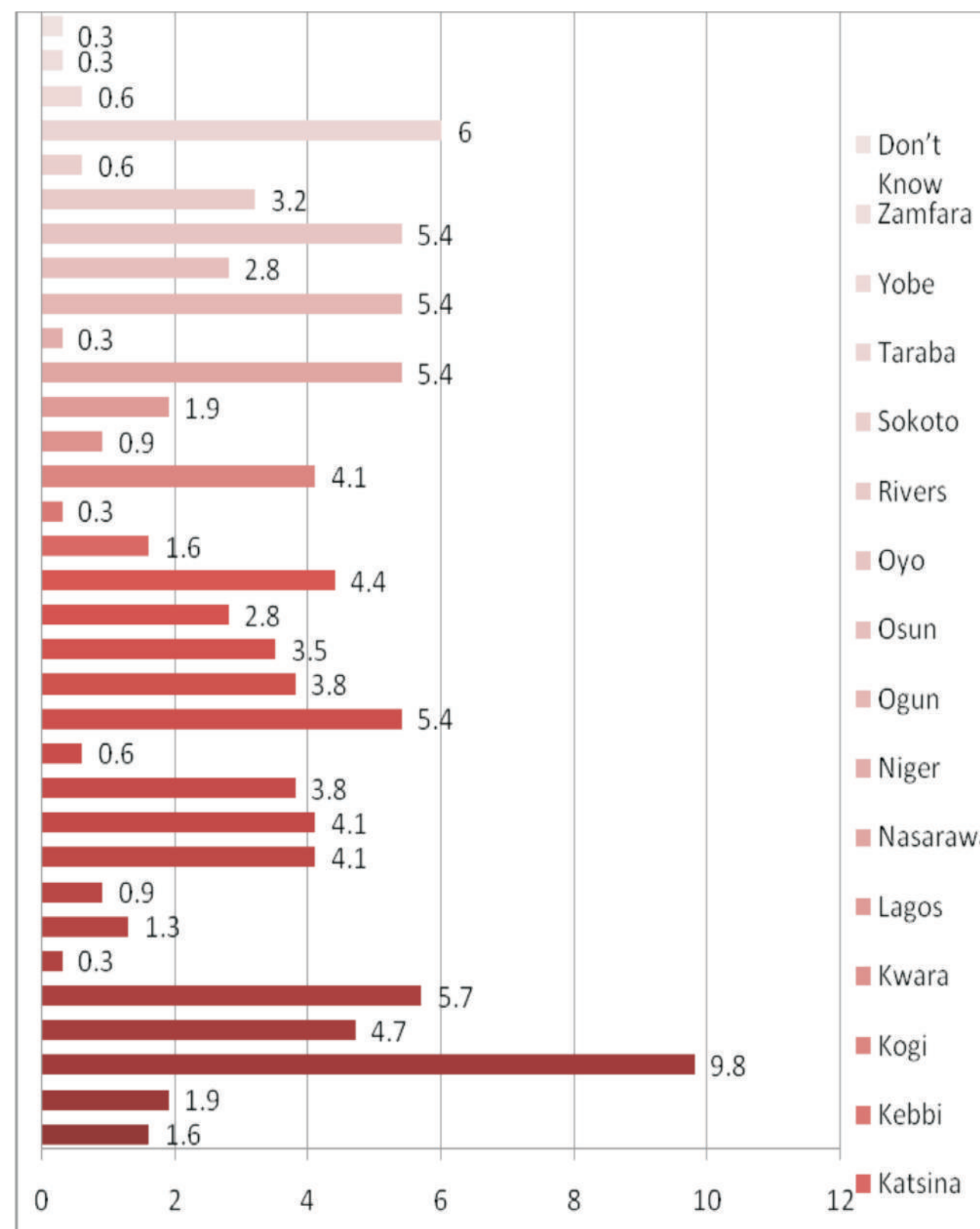
This decision demonstrates compatibility with the guiding principle of the best interest and welfare of the child.

- **Popularisation:** Numerous measures taken to popularize the CRC and the CRA include:
 - Circulation of simplified and abridged versions of the CRC and CRA across the country. These have also been translated into the three major Nigerian languages-Hausa, Igbo and Yoruba.
 - Advocacy and sensitisation visits to stakeholders and opinion leaders at various levels.
 - Seminars, workshops and conferences for appropriate target groups.
 - Holiday camps for children, quiz/debate competitions, children's rallies and the celebration of special days like the Day of the African Child and the National Children's Day.
 - Media Campaigns, numerous radio and television enlightenment programmes, including documentaries and movies.
 - Establishment of Child Rights Clubs and child-friendly schools (Sarah Communication Initiative).
 - Production of Information, Education and Communication (IEC) materials, like posters, billboards and newspaper advertisements.
 - Advocacy visits to State Governors, parliamentarians, traditional and religious leaders, opinion and community leaders were carried out in Cross River, Kebbi, Abia, Adamawa, Nasarawa, Ondo, Ekiti and Niger States to create awareness on the need for behavioural change. For example, the need to stop dubbing children as witches; the sale of babies as well as illicit adoption; by the Honourable Minister of Women Affairs and Social Development.
 - **"Red Card to Child Labour"** a global programme by the ILO in collaboration with WOTCLEF.
 - **Production and circulation of CRC Guide for Law enforcement officers in Nigeria.**
 - **Development and production of Juvenile Justice Administration training manual for law enforcement officials, as well as guide for training.**
 - **Capacity Building of NGOs, CBOs and child care givers delivering psychosocial support and services for orphans and vulnerable children.**
 - **Establishment of National Task Force on Human Trafficking.**
 - **Development of a draft National Policy on Child Labour.**
 - The formation of Child Rights Clubs in primary and post primary schools across the country.
 - The opportunity provided by FMWA&SD, FMI&C, some NGOs and the mass media for Nigerian children to participate in the International Children's Day of Broadcasting, and in the production and presentation of programmes dealing with issues that concern children.
 - The One-day Governor Programme in which the Governor and his cabinet vacate their offices for one day in a year, for selected children took place in Lagos and Nasarawa states.
 - Production and circulation of Handbooks on Adoption and Foster Care(2008)
 - **Dissemination of key findings on the evaluation of girls' education project(2008)**
 - **Production and Dissemination of National Directory of Child Care Institutions(2008)**
 - Government continued effort to publicise the Charter by translating it into minor local languages and disseminating the provisions through radio and television programmes, etc.

3.1.3 Law Enforcement

- There are currently Juvenile Welfare Centres at Police Divisional Headquarters across the Country. An officer of the rank of a Commissioner coordinates the activities at each centre nationwide.
- Interception, rescue, repatriation and rehabilitation of trafficked children and children in exploitative labour and abusive situations as well as the prosecution of culprits/traffickers by both Federal and State governments.
- Establishment of Child Labour Monitoring System in Cocoa Plantations (Ondo State).
- Programmes to withdraw street children, and to rehabilitate them in craft centres or formal schools for

Figure 20: Percentage distribution of street children by state



Source: NBSCPN 2008

child labour, especially its worst forms. 3) Provide guidelines for effective resource mobilisation and sustainability of action programmes and projects amongst Implementing Partners and Agencies. 4) Provide a coordinating and networking framework of action programmes among Stakeholders and Implementing Agencies on the elimination of child labour in Nigeria with a view to strengthening and streamlining efforts. 5) Provide guidelines for monitoring, evaluating and reviewing policies, legislations, regulations on projects and programmes on child labour.

Two major legislations were enacted in 2003 to further reinforce the protection of children and to incorporate the provisions of the **Charter**. These are the **Trafficking in Persons (Prohibition) Law Enforcement and Administration Act, 2003**, and the **Child's Rights Act, 2003**. Almost all the States in Nigeria have various laws prohibiting hawking, street begging, child prostitution and other forms of exploitative labour against children.

The generation of the National Baseline Survey on Child Protection in Nigeria (NBSCPN) focused on the various issues affecting the rights of children and youths in situation of exploitation in Nigeria, was undertaken as a priority in the implementation of the Cooperation Agreement between UNICEF and the University of Lagos, for the establishment of the Convention on the Rights of the Child (CRC) Chair in the Department of Public Law of University of Lagos. The three thematic areas of the survey arising from this need, which also coincide with the interests of other collaborating United Nations Development Systems (UNDS) agencies, were:

- Child Trafficking, Sexual Exploitation and Prostitution;
- Child Domestic Work, Street Children, Child Labour in Agricultural and Construction Industries and Almajirai;
- Youth Crimes, Drugs and Violence.

Adopting a multi-stage stratified cluster design, the study covered about 400 households, some 9,600 housing units in 96 LGAs across 23 states of the Federation and the Federal Capital Territory. A total of 1,173 children were enumerated in the households. About 54% are males and 46% females and fifteen instruments were used for data collection, grouped into three main categories namely: (i) Household-Based Questionnaires, (ii) Institutional-Based Questionnaires and (iii) Special Module Questionnaires

The NBSCPN, amongst other child protection indicators, focused on visible and accessible working **children**. Five categories of child labourers identified in the survey were: **street children, young domestic workers, Almajirai, children in agriculture and children in construction work**.

a). Street Children

The percentage distribution of street children according to states in Nigeria is provided in Figure 20. Based on NBSCPN, the distribution of children by place where they were found is shown in Figure 20 indicated that the highest percentage of street children were from Akwa Ibom (9.8%), followed by Taraba (6.0 %) and Bauchi (5.7 %). The lowest percentages (0.3%) are found in Zamfara, Bayelsa, Kebbi and Niger.

retraining and re-orientation by state agencies and NGOs. Others are also reunited with their families where possible.

- **Support by NGOs, of the work of NAPTIP and Law Enforcement Agents in the prevention and protection of children in exploitive situations.**

3.1.4 Accession to Other Regional and International Instruments on Children

- The African Charter on the Rights and Welfare of the Child 2001 (domesticated in Nigeria)
- Nigeria has ratified the Palermo Protocol and the Charter on Trans-national Organised Crime (TOC) in 2003.
- Optional Protocol to the CRC on the Sale of Children, Child Prostitution and Child Pornography (signed but not ratified).
- Optional Protocol to the CRC on the Involvement of Children in Armed Conflict (signed but not yet ratified).
- In 2009, Nigeria also ratified the International Convention for the Protection of All Persons from Enforced Disappearance; the Convention on the Prevention and Punishment of the Crime of Genocide; the Optional Protocol to the Convention Against Torture; and the Optional Protocol to the Convention on the Rights of Persons with Disabilities.
- In February 2009, Nigeria presented the national report to the Human Rights Council as part of the UN Universal Periodic Review (UPR) process. Full implementation of the CRC and by extension, the Charter, by all states of the Federation was one of the recommendations. Nigeria became the second country in Africa to deposit a National Plan of Action at the UN Human Rights Council.

3.1.5 Other Strategic National Policy and Action Plans

- Nigeria has now completed documentation on **Vision 20:20:20**, designed to make Nigeria one of the top 20 economies in the world by 2020. A special interest group on Vision 20:20:20 was constituted and Women Special Interest group and implementation and funding of the Child's Rights Act in Nigeria were included in the final version of the Vision 20:20:20 document.
- A more comprehensive, rights-based **National Plan of Action with the time frame of 2009 - 2015**, which extensively covers all areas of the Charter and which incorporates the objectives and goals of the outcome document entitled: "A World Fit for Children" (from the 2002 United Nations General Assembly Special Session for Children), as well as the Millennium Development Goals has been developed and disseminated to stakeholders.
- **The Transformation Agenda and Implementation Framework 2011-2015** of President Jonathan's Administration is currently being implemented with particular social protection interventions relating to household poverty affecting vulnerable children; Access to Education by vulnerable children especially Street and Almajirai Children as well as Girls and Women Education.

3.1.6 Measures to Train Professional Groups on the Provisions of the Charter

- The development of relevant Training/Facilitators Manual such as:
On trafficking; Innovative Child Protection Interventions; Assessment Tools on Child Justice Administration; Handbooks on Foster Care and Adoption; Directory of Orphanages; Frequently Asked Questions on Violence Against Children; CRA and the AU Charter on the Rights and Welfare of the Child. Provisions of IT, audio visual, educational, recreational, medical and vocational training materials/equipments to partners have facilitated setting up structures for the implementation of the provisions of the CRA and CRL.
- The services of 706 birth registrars and 1,410 notifiers engaged for the national birth registration exercise resulted in the registration of 1,807,025 live births in 2007 compared with only 927,472 registered in 2006.
- The capacity surge in 2007, sustained by the National Population Commission, resulted in the registration of 4,002,089 live births between January and June 2008. A comprehensive publication of vital statistics from 1994-2007/8 is documented to present the national picture on birth registration.
- **Continuous monitoring of birth registration process in 2009 resulted in the registration of 5,679,276**

live births (2,968,548 boys and 2,710,727 girls).

- In 2008, over 6 million adolescents and young people acquired HIV/AIDS prevention information and life skills to reduce their vulnerability to HIV infection nationwide, this contributes to the over 28 million young people being reached by the project since 2002. Specifically, over 7,940 volunteer Corp member peer education trainers (42% Female) utilised the revised training manual to provide HIV/AIDS prevention information and life skills to 317, 600 adolescent peer educators (12 – 15 years) in schools nationwide. The peer educators in turn reached their peer in school clubs, youth centres and communities.
- The revised training manuals featured updated information on adolescent reproductive health, HIV/AIDS, care and support for PLWHA, PABA and OVC, Life Building Skills and the implementation of peer education activities.
- An additional 1,510 out-of other school young people also acquired knowledge and skills on HIV/AIDS prevention, and other vocational skills in Youth Resource/Skills Acquisition Centres in Edo, Delta, Akwa-Ibom, Niger, FCT(2013), Jigawa(2011), Nasarawa(2010), Borno(1991), Kebbi(1993), Ogun(2000), Ebonyi, Sokoto(2010), Oyo and Zamfara States. Linked to the project, selected peer education trainers were provided with HIV counselling and referral skills to facilitate access of young people to HIV counselling and testing services in the communities. Temporary camp initiatives exist in the following states between 2004 and 2013: Kano (2011), Anambra (2010-13), Bayelsa (2004), Rivers (2008) and Gombe (2009).
- In 2008, 15 additional CSOs, representing the programme areas of Health and Nutrition, HIV and AIDS, Girls Education and Child Protection reported deploying their skills to project management, resource mobilisation and documentation on issues of children and women.
- Sensitisation and training of professional groups and bodies responsible for the protection of Children's rights are periodically being organised by the Federal Ministry of Women Affairs and Social Development in collaboration with its partners. These include social workers, the police, prisons and judicial officers, media personnel, civil society groups, health workers, child care givers and teachers on the provisions of the AUCRWC and the Child's Rights Act 2003.

3.1.7 Data Collection

With funding from the World Bank, Nigeria completed a Master Plan for the National Statistical System in 2005, the implementation of which is designed to span five years 2005-2009. The implementation of the master plan resulted in the merger of the Federal Office of Statistics (FOS) and the National Data Bank to form the National Bureau of Statistics. The plan's key objective includes:

- To strengthen the capacity of the national statistical system.
- To generate reliable, timely and relevant statistical data.
- To support policy making as well as the monitoring of the achievement of Nigeria's development objectives.

Several reform activities have taken place at the NBS, one of such is the introduction of digital technology into data collection and processing which translated into the reduction of incidence of error, reduction of processing time by 80% and overall credibility of the process. In the reformed NBS, there is a full fledged department that deals with Child related statistics.

Apart from the data collection processes conducted by the NBS, UNICEF entered into a **Cooperation Agreement for the establishment of the Convention on the Rights of the Child (CRC) Chair in the Department of Public Law, University of Lagos.**

The priority of the Agreement is to generate a baseline data on various issues affecting the rights of children and youths in Nigeria through the conduct of a National Baseline Survey on child protection, indicators/thematic issues are particularly child trafficking, sexual exploitation, child

These policies stipulate that Guidance and Counselling services be provided in all primary and secondary schools in Nigeria. In addition, Guidance Counsellors are expected to include Family Life and HIV/AIDS Education Counselling in counselling sessions.

Other Measures Aimed at Addressing Human Rights Issues of Orphans and Venerable Children, as well as People with HIV/AIDS include:

- National Guidelines and Standards of Practice on Orphan and Vulnerable Children (June, 2006).
- National Workplace Policy on HIV/AIDS (2005).

In addition to the foregoing governmental interventions through policies, efforts are in place by NGOs and Community Based Organisations for the promotion and protection of the interest of OVC in Nigeria. Notable amongst these bodies is the Association of OVC NGOs in Nigeria (AONN) established in 2006. The Association was established primarily to coordinate the activities of all OVC focused NGOs with a view to improving the lives of OVC in the country. The Association also acts as implementing partners of the Global Fund Round 5 in the area of Education and Health. AONN has developed Monitoring and Evaluation tools for the effective measurement of the impact of the activities of all its members in Nigeria.

AONN works in collaboration with other national and international organisations to step down protection benefits to OVC in Nigeria. In this regard, the organisation acts as an implementing partner to Save the Children UK (SCUK).

6.6 Children of Imprisoned Mothers (Article 30)

6.6.1 Legal Measures

The Child's Rights Act in Sections 221-225 states that 'No child shall be ordered to be imprisoned, subjected to corporal punishment or death penalty or have death penalty recorded against him'...and a court shall on sentencing of an expectant or nursing mother consider a non- institutional sentence as an alternative measure to imprisonment. Where institutional sentence is mandatory, an expectant and nursing mother shall be detained at a Special Mother's Centre for a period not longer than the time the child would have attained the age of 6 years...

The Act has thus indicated that special treatment should be given to expectant or nursing mothers, and a mother must, under no circumstances, be imprisoned with the child.

6.7 Children in Situation of Exploitation – Articles 15 & 27, CRA sections 28 and 33)

6.7.1 Legal and other measures taken on children in situation of exploitation

The *Labour Act CAP L.1. LFN 2004* includes a wide range of provisions: Sections 58-63 prohibiting or regulating various forms of child Labour. Section 59 prohibits a child under the age of 12 years from all work except where he is employed by his family on "*light work of an agricultural, domestic or horticultural character.*"

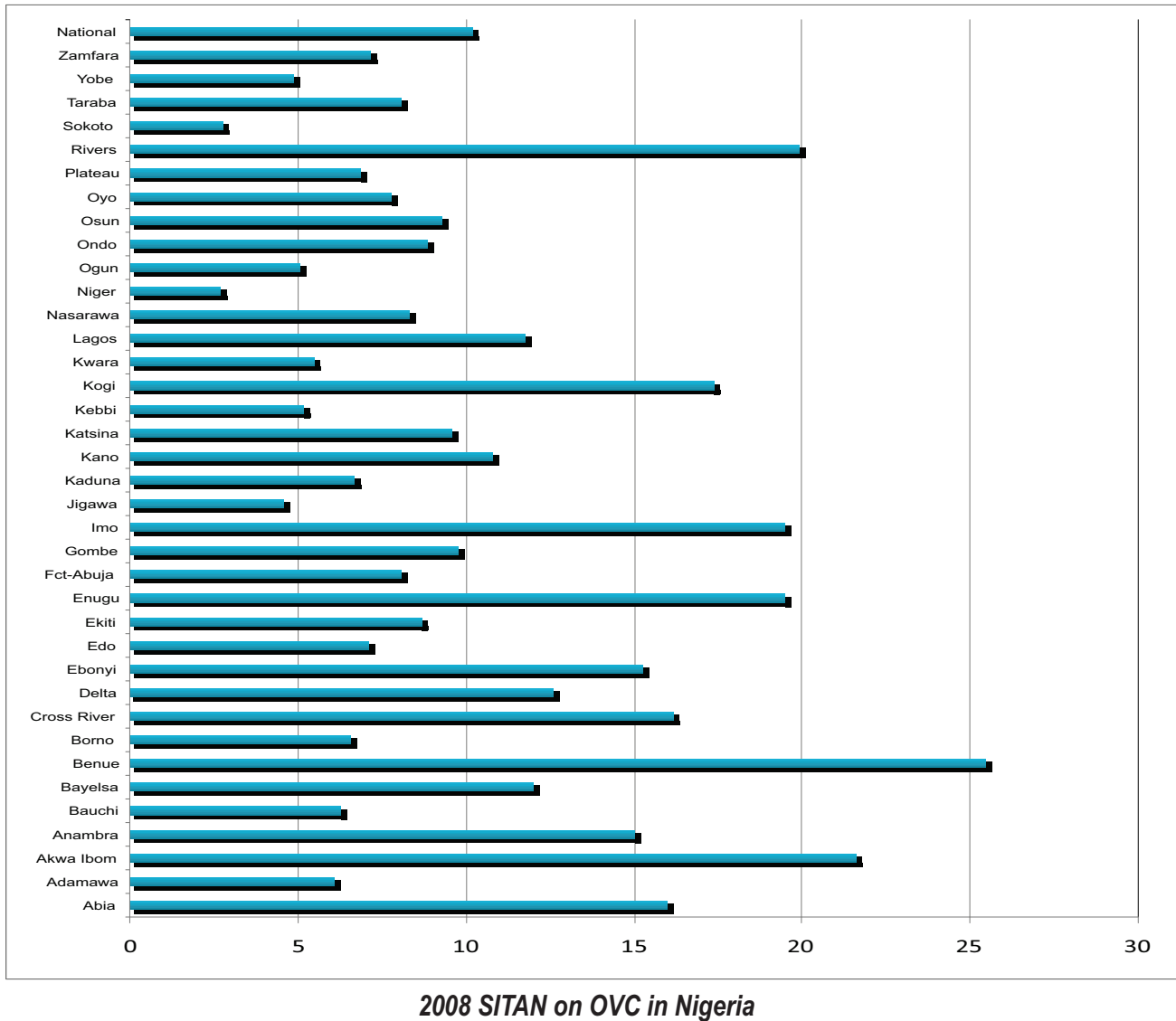
It allows apprenticeship from the age of 12 years with the consent of the child's parent, but forbids any child under the age of 15 years from working in any industrial undertaking. As a result, large, formal sector organisations tend not to employ children who are below the age of 15 years. The labour inspectorate system monitors the formal sector ensuring respect for the provisions of the **Labour Act**.

The National Policy on Child Labour (2013): The ultimate goal of the National Policy on Child Labour is to provide a legally binding, and standardized guidelines for actors implementing the national programme on child labour, especially its worst forms, towards a drastic reduction of its prevalence in Nigeria by 2015 and total elimination by 2020. The National Policy on Child labour has the following specific objectives: 1) provide guidelines for awareness creation, advocacy and sensitization among the general populace about the evil effects and consequences of child labour in Nigeria as well as its prevention. 2) Provide guidelines and modalities for concrete direct action projects and programmes by Governments and other relevant Stakeholders at all levels, in combating

From the findings of the survey, it can be concluded that orphans and vulnerable children whose mothers were very sick constituted the majority (3,318). This is followed by Parental orphans (3, 013), father very sick (2, 972) and maternal orphans (959). Double parents were found to be last with 662 respondents

a). Prevalence of orphans in Nigeria
Figure 19 provides the distribution according to States of the Federation and FCT.

Figure 19: Percentage distribution of children according to OVC status by state and FCT



Based on SITAN on OVC in Nigeria (2008), it can be concluded that Benue state recorded the largest number of OVC. This was followed by Akwa Ibom and Rivers States. Sokoto state had the least number of OVC.

The National Response to OVC in Nigeria:

- The National Policy on Education (2004).
- The National Plan of Action for OVC.
- National Policy on HIV/AIDS for the Educational sector in Nigeria (2005).
- National Policy on HIV/AIDS for the Educational sector in Nigeria: Implementation Guidelines (2007).
- Situation Analysis of Orphans and Vulnerable Children in Nigeria (SITAN) 2008.

labour, child / youth in conflict with the law, orphans and vulnerable children. Data generated through the baseline survey is being employed to formulate laws, policies and programmes for the effective implementation of the Charter.

In addition, the following are some of the surveys conducted during the reporting period:

- CWIQ, 2006.
- Survey on Refugees and Internally Displaced Children, 2007.
- Documentation of Innovative Intervention on the Almajiri Child protection in Nigeria, 2007.
- Directory of Orphanages in Nigeria, 2007.
- Survey on Youth Friendly Services, 2007.
- National Population Census, 2006.
- MICS 3, 2007.
- National Baseline Survey on Child Protection Issues, 2008.
- Situation Assessment and Analysis of OVC in Nigeria 2008.
- A study on the causes and prevalence of violence against children accused of being witches in Akwa Ibom State was conducted to inform possible programming and intervention aimed at eliminating the syndrome in Cross River and other South - South States.
- A study of traditional ECD Qur'anic schools in six focused states namely: Bauchi, Borno, Kano, Katsina, Sokoto, and Zamfara,
- Assessment of learning achievement of primary four pupils in 15 Girls Education Project (GEP) states viz; Adamawa, Bauchi, Borno, Gombe, Jigawa, Kano, Kaduna, , Katsina, Kebbi, Nasarawa, Niger, Sokoto, Taraba, Yobe, Zamfara.

3.1.8 Budgets and Budget Trends

Budgetary allocations on children's issues are embedded in the budgets of various ministries at the Federal and State levels. It is, therefore, difficult to isolate such allocations, or fully to account for all expenditures in respect to the proportion of the budget devoted to social expenditures for children in the areas of health, welfare, social services, recreation and leisure. The budget trends for the years 2004-2008 are given in table 13 below. This shows increasing allocations to children issues.

3.1.9 Debt Relief Savings Allocations

On June 30th 2005, Nigeria's huge debt burden of USD 19,293,207,575 was wiped off by the Paris Club. The savings that accrued to both Federal & State governments were in the proportion of 75% and 25% respectively. The Federal Government invested the saved funds into various sectors and cross-cutting issues such as gender, HIV/AIDS, youth programmes and urban slum upgrading which directly or indirectly impacted positively on the lives of Children. Specifically, the allocation to women and children affairs appreciated from 1billion naira in 2006 to about 1.3 billion in 2007. Table 14 shows debt relief funds allocations and examples of spending in various sectors of the economy.

Table 13 - Budgetary allocation and trends of Federal Budgets in relevant MDAs 2004-2008 in Naira (N)

Ministry/Department and Agency	2004	2005	2006	2007	Total
Federal Ministry of Education	376,129,175	14,648,213,337	166,621,653,758	189,199,774,929	370,845,771,199
FGC, Unity Schools Colleges	39,994, 246, 509	15,278,149,876	18,188,656,002	19,032,813,542	92,493,865,929
Universities & FST Colleges	12, 283, 338,699	*	78,771,112,001	87,600, 179,082	178,654,629,782
UBE	343,766,001	*	6,749,414,750	8,415,300,000	15,508,480,751
Special Education for the Handicapped Studies in Secondary Schools	*	*	*	*	*
Federal Ministry of Health	26,410,000,000	20,000,000,000	106,940,000,000	*	153,350,000,000
National Programme on Immunisation (NPI)	6,000,000,000	10,288,195,030	7,903,552,523	24,191,747,553	48,383,495,106
Primary Health Care	2,530,000,000	*	10,288,271,244	*	12,818,271,244
National Action Committee on Aids (NACA)	1,500,000,000	1,470,000,001	250,000,000	3,220,000,001	6,440,000,001
	82,500,000	277,500,000	415,780,000	576,980,000	1,352,760,000
Development(Child Development Department)					
Federal Ministry of Water Resources	37,497,754,831	73,074,011,548	80,103,630,703		190,675,397,082
Federal Ministry of Housing	2,848,500,000	10,392,032,796	7,995,000,000		21,235,532,796

Source: National Assembly, Abuja: Yearly Appropriation Act (2004 –2007)

Table 14: Debt Relief Savings Allocations to MDAs 2006-2007

Sector	2006 (₦BN)	2007 (₦BN)	Examples of Some of the Projects Executed
1 Education	18, 221,707,736	15,353,043,361	-145,000 Teachers given in service training while 40,000 have been recruited nationwide for the Teachers scheme. -Scaling up of Nomadic Education programmes with a focus on Health Care -The development of new improved curriculum for Primary & Secondary school levels -Equipment & Training at selected colleges of Education
2 Health	21,288,000,000	15,348,000,000	-Refurbishing and building of selected referral centers and procurement of vaccines for immunization & equipment for cold storage -166 new Primary Health Care centers and 207 rehabilitated across the country -400,000 insecticide treated bed nets, over 1 million dose of Anti-malarial (Ts) and two million doses Sulfadoxine -Pyrimethamine (SP) provided
3 Agriculture	9,400,000,000	15,000,000,000	-The construction and subsidized distribution of on farm storage bins to mitigate post harvest losses.
4 Water Resources	19,215,849,154	13,848,572,250	-Rural water projects worth 20 billion -Boreholes and small earth dams
5 Power & Steel	16,961,839,096	10,108,550,527	
6 Housing	495,000,000	3,000,000,000	-Investment in cross-cutting issues, such as urban slum upgrading
7 FCT	-	1,800,000,000	
8 Women & Children Affairs	1,000,000,000	1,015,000,000	-Gender mainstreaming, Training & Advocacy programmes to ensure the adoption of CRC provisions in the Nigerian Legal framework and funding for gender research.
9 Youth	990,000,000	1,000,000,000	-Agricultural Entrepreneurship Farming & Leadership Training Programmes
10 NACA	-	1,000,000,000	-79,000 doses of anti-retroviral drugs (ARVs) procured for HIV/AIDS patients
11 Works	9,855,000,000	-	Approximately 4,000 km of rural roads nationwide
12 Environment	1,485,000,000	-	Desertification Projects
13 Conditional Grants	-	20,000,000,000	
14 Safety Nets	990,000,000	10,000,000,000	
15 Monitoring & Evaluation	1,000,000,000	2,000,000,000	
Total	99,912,395,986	109,473,173,138	

Source: Nigeria MDG Progress report 2006 -2007, Office of the Senior Special Assistant to the President on MDGs

Table 39: School Attendance of Orphans and Non-orphans

Table HA.13: School attendance of orphans and non-orphans								
School attendance of children age 10-14 years by orphanhood, Nigeria, 2011								
	Percentage of children whose mother and father have died (orphans)	Percentage of children of whom both parents are alive and child is living with at least one parent (non-orphans)	Number of children age 10-14 years	Percentage of children who are orphans and are attending school ¹	Total number of orphan children age 10-14 years	Percentage of children who are non-orphans and are attending school ²	Total number of non-orphan children age 10-14 years	Orphans to non-orphans school attendance ratio
Sex								
Male	1.2	81.8	8695	75.9	103	82.4	7109	.92
Female	1.3	79.6	8980	83.5	113	76.6	7148	1.09
Area of residence								
Urban	1.3	78.0	6016	83.5	77	95.1	4695	.88
Rural	1.2	82.0	11660	77.9	139	71.8	9562	1.08
Total	1.2	80.7	17676	79.9	216	79.5	14257	1.00
¹ MICS indicator 9.19; MDG indicator 6.4								
² MICS indicator 9.20; MDG indicator 6.4								

Source: UNICEF, 2011/12 MICS 4: Table HA. 13

Vulnerability in the 2008 SITAN on OVC in Nigeria was derived mainly by two factors: children who had lost one or both parents and those who lived in households where an adult/ caregiver had been critically ill for at least three months in the past year. Based on this definition, a total of 9,189 children constituting 24.5% of children interviewed in house, were categorized as OVC. Table 33 provides the distribution of OVC by categories:

Table 40: Percentage distribution of OVC by category

Total		
Category	Number	%
Double Orphans	662	1.8
Maternal Orphans	959	2.6
Paternal Orphans	3,013	8.0
Mother very sick	3,318	8.8
Father very sick	2,972	7.9
Total	9,189	24.5

Source: 2008 SITAN on OVC in Nigeria

Children's Living arrangements and Orphanhood (Continued)

Table HA.12: Children's living arrangements and Orphanhood (continued)														
Percent distribution of children age 0-17 years according to living arrangements, percentage of children age 0-17 years in households not living with a biological parent and percentage of children who have one or both parents dead, Nigeria, 2011														
	Living with both parents	Living with neither parent				Living with mother only		Living with father only		Impossible to determine	Total	Not living with a biological parent ¹	One or both parents dead ²	Number of children age 0-17 years
		Only father alive	Only mother alive	Both are alive	Both are dead	Father alive	Father dead	Mother alive	Mother dead					
Area of residence														
Urban	79.1	.8	1.1	7.4	.9	4.8	3.3	.7	1.1	.7	100.0	10.2	7.3	23393
Rural	82.4	.5	.9	6.0	.7	3.6	2.9	.7	1.2	1.0	100.0	8.2	6.3	49796
Age														
0-4	87.8	.3	.3	3.6	.3	5.3	1.6	.3	.4	.2	100.0	4.4	2.8	25060
5-9	82.5	.6	.9	6.8	.9	3.4	2.6	.8	1.2	.4	100.0	9.1	6.2	22746
10-14	76.5	1.0	1.6	9.0	1.2	3.2	4.2	1.0	1.8	.5	100.0	12.8	9.8	17676
15-17	68.5	1.0	2.3	8.9	1.2	3.2	6.2	1.1	2.3	5.3	100.0	13.4	13.1	7707
Wealth index quintiles														
Poorest	86.9	.4	.6	4.6	.6	1.8	2.1	.5	1.2	1.4	100.0	6.3	4.9	15858
Second	82.3	.6	.9	6.2	.6	3.4	3.0	.6	1.3	1.2	100.0	8.3	6.4	15538
Middle	76.8	.6	1.2	7.2	.8	6.1	4.4	.8	1.4	.7	100.0	9.8	8.4	14624
Fourth	79.6	.7	1.1	6.6	1.1	4.6	3.7	1.1	1.2	.3	100.0	9.6	7.8	14015
Richest	80.5	.8	1.1	8.0	.8	4.3	2.1	.6	.9	.8	100.0	10.7	5.8	13155
Geo-political zone														
North-Central	79.5	.7	1.3	8.5	1.1	4.3	2.4	1.0	.8	.4	100.0	11.5	6.3	10616
North-East	89.3	.4	.7	3.7	.8	1.3	1.3	.2	1.7	.7	100.0	5.5	4.8	10907
North-West	89.3	.3	.5	3.0	.6	.7	1.6	.3	1.6	2.1	100.0	4.5	4.7	21104
South-East	73.0	.7	1.7	8.7	1.3	4.3	8.5	.7	.8	.3	100.0	12.4	13.0	7561
South-South	69.0	1.0	1.5	9.0	.8	11.2	4.2	1.6	1.3	.3	100.0	12.4	8.9	10042
South-West	77.7	.9	.9	9.4	.5	5.7	3.2	.9	.6	.1	100.0	11.8	6.2	12960
Total	81.4	.6	1.0	6.5	.8	4.0	3.0	.7	1.2	.9	100.0	8.8	6.6	73189
¹ MICS Indicator 9.17														
² MICS Indicator 9.18														

Source: UNICEF/NBS/DFID/UNFPA/FGN, 2011/12: MICS 4: Table HA. 12

One of the measures developed for the assessment of the status of orphaned children relative to their peers looks at the school attendance of children 10-14 for children who have lost both parents versus children whose parents are alive (and who live with at least one of these parents). If children whose parents have died do not have the same access to school as their peers, then families and schools are not ensuring that these children's rights are being met.

In Nigeria, 1 percent of children aged 10-14 have lost both parents (Table 39). Among those, only 80 percent are currently attending school. Among the children age 10-14 who have not lost a parent and who live with at least one parent, 80 percent are attending school. This would suggest that double orphans are not disadvantaged compared to the non—orphaned children in terms of school attendance as the orphans to non-orphans school attendance ratio is 1.00. School attendance rate for double orphans shows slight advantage in favor of double orphans in the urban areas (84 percent) and 78 in the rural area. In the same manner, schools attendance rate for double orphans shows slight advantage in favor of female orphans (84 percent) and for male orphans at 76 percent in 2011.

Table 14a: Debt Relief Gains (DRG) appropriations, 2006-2009

Sector	Allocation (N Billion)			
	2006	2007	2008	2009
Education	18.2	15.3	13.5	9.75
Health	21.3	16.07	22.9	15.9
Youth Development	0.96	1	1	1.026
Women's Affairs	1	1.04	0.595	1.742
Agriculture and Water Resources	28.6	28.8	15.7	1.8
Housing	0.495	3	1.7	4.5
Environment	1.4	-	1.6	-
Power	16.9	11.3		-
Monitoring and Evaluation	1	2	2	2
Social Safety Nets	-	10	9	2.265
Defence	-	-	1	1
Police	-	-	-	1
Works	9.8	-	-	-
Federal Capital Territory		1.8	-	
Head of Service/ Capacity Building	-	-	2	3.8
Conditional Grants Scheme	-	20	24.4	32.6
Quick Wins	-	-	19.7	17.5
Total Appropriation	100	110	111	112

Source: Presidential Committee on the MDGs 2nd and 3rd Quarter Reports for 2009 (OSSAP-MDGs 2009e). See also CGS Assessment Report (SPARC 2010).

* Exchange rate Nigerian naira (N):US dollar ranged between N100 and N150:US\$1.

Table 14b: Progress Towards MDG Targets and Current Status (June 2010)

Goal	Status
1 Eradicate extreme poverty and hunger	Slow: There is less poverty than in 2000 but the data is not clear. Five out of every ten Nigerians still live in poverty. Growth has not been sufficiently equitable or generated enough jobs to reduce poverty further. Nutrition has improved significantly.
2 Achieve universal primary education	Average: Many more children are in school. Nine out of every ten eligible children attend school as a result of Universal Basic Education Programme interventions and enrolment in private schools. However, disadvantaged groups are still excluded and the quality of education remains poor.
3 Promote gender equality and empower women	Average: Some improvement in gender parity. Nine girls attend school for every ten boys. Economic and political empowerment remains elusive. A common reason for the disparity in rates of girls and boys completing schooling, especially at secondary level, is poor or nonexistent water and sanitation facilities.
4 Reduce child mortality	Average: Significant reductions but progress needs to be accelerated.
5 Improve maternal health	Slow: The data for 200 - 8 show a significant improvement, but the gap between the current situation and the target is still very large.
6 Combat HIV/AIDS, malaria and other diseases	Average: The prevalence of HIV/AIDS in the population has fallen from 5 per cent to under 4 per cent. Rates of malaria infection have dropped, but still account for 300,000 deaths a year, on average. The hard work is still to come. Impressive progress against polio.
7 Ensure environmental sustainability	Slow: Access to safe water and sanitation has not improved significantly and other environmental challenges, such as erosion, coastal flooding and climate change, are growing.
8 Develop a global partnership for development	Average: The benefits of debt relief have not been matched by an increase in aid. Trade and access to markets is still unequal. Rapid increase in access to information and communication technologies, teledensity and regional initiatives (New Partnership for Africa's Development, Economic Community Of West African States, etc.).

Source: OSSAP-MDGs 2010c.

3.1.10 Collaboration between Groups and Individuals on the Implementation of the Charter

The past four years (2006 - 2009) have witnessed greater collaboration between the FMWA&SD, NGOs and UN Agencies like UNICEF, ILO, UNDP, WHO UNFPA, UNODC, Save the Children, USAID, PEPFAR, Global Fund, World Bank as well as other government ministries and agencies on the promotion and protection of children's rights in Nigeria:

- The FMWA&SD also collaborates with other relevant Federal ministries like Justice, Information, Education, Police Affairs, Immigration, Internal Affairs, Foreign Affairs, Finance, National Planning, Health and the Judiciary.
- In addition, the Ministry maintains relationships with its state counterparts and with relevant Federal agencies like the NHRC and the National Agency for the Prohibition of Traffic in Persons (NAPTIP).
- The University of Lagos' CRC Chair, in collaboration with NBS and with the support of UNICEF, conducted a National Baseline Survey on Child protection issues.
- Non-Governmental Organisations (NGOs) are also in the promotion of child rights under the

Table 38: Children's Living arrangements and Orphanhood

Table HA.12: Children's living arrangements and Orphanhood														
Percent distribution of children age 0-17 years according to living arrangements, percentage of children age 0-17 years in households not living with a biological parent and percentage of children who have one or both parents dead, Nigeria, 2011														
	Living with both parents	Living with neither parent				Living with mother only		Living with father only		Impossible to determine	Total	Not living with a biological parent ¹	One or both parents dead ²	Number of children age 0-17 years
		Only father alive	Only mother alive	Both are alive	Both are dead	Father alive	Father dead	Mother alive	Mother dead					
Sex														
Male	82.6	.6	1.0	5.7	.8	4.0	3.1	.8	1.2	.3	100.0	7.9	6.6	37047
Female	80.1	.7	1.0	7.3	.8	4.0	3.0	.6	1.1	1.5	100.0	9.8	6.6	36141
State														
Abia	78.9	.6	.9	6.6	.7	2.6	8.6	.5	.5	.2	100.0	8.7	11.2	1292
Adamawa	84.4	.7	.6	6.8	1.2	2.6	1.2	.6	1.5	.3	100.0	9.4	5.3	1732
Akwai Ibom	72.2	.6	1.7	7.6	.6	9.2	5.0	1.2	2.0	.1	100.0	10.4	9.9	1859
Anambra	74.4	.6	1.8	10.7	1.5	2.2	7.5	.6	.4	.2	100.0	14.7	11.8	2073
Bauchi	92.3	.2	.6	2.3	.4	.2	1.4	.2	2.1	.2	100.0	3.5	4.7	2804
Bayelsa	62.9	.9	1.4	9.9	.2	18.0	2.9	1.6	1.1	.9	100.0	12.5	6.6	888
Benue	65.6	.8	2.5	12.8	2.9	6.1	4.8	2.5	1.1	.9	100.0	18.9	12.1	2180
Borno	90.0	.2	.3	3.3	1.0	2.0	1.4	.1	1.3	.5	100.0	4.7	4.2	2333
Cross River	68.6	.9	1.9	9.7	.6	9.3	5.2	1.7	1.9	.2	100.0	13.1	10.5	1441
Delta	67.0	1.1	1.1	10.2	.3	13.8	4.3	1.5	.7	.2	100.0	12.6	7.4	1961
Ebonyi	72.4	.3	.7	7.6	1.3	6.9	8.5	.8	.9	.6	100.0	9.9	11.7	1107
Edo	69.7	.4	.5	11.1	.4	13.4	2.4	1.2	.6	.4	100.0	12.4	4.2	1546
Ekiti	73.5	.9	1.1	13.1	.4	6.6	2.8	1.2	.4	.0	100.0	15.5	5.6	1072
Enugu	70.3	.6	1.9	7.4	1.8	6.8	9.8	.5	.6	.2	100.0	11.8	14.8	1412
Gombe	91.9	.1	.2	1.8	.3	1.3	1.0	.2	1.4	1.8	100.0	2.5	3.0	1390
Imo	69.6	1.2	2.5	9.7	1.1	4.4	8.5	.9	1.7	.4	100.0	14.5	15.0	1676
Jigawa	87.4	.7	.9	6.1	.5	1.2	.5	.3	1.0	1.3	100.0	8.2	3.6	2542
Kaduna	89.4	.1	.6	1.2	.6	.4	2.1	.2	1.6	3.9	100.0	2.5	5.0	3577
Kano	89.9	.4	.5	2.9	.6	.9	1.3	.3	2.1	1.1	100.0	4.4	4.8	5517
Katsina	86.6	.0	.5	3.4	1.0	.6	3.9	.0	1.8	2.2	100.0	4.8	7.2	3475
Kebbi	91.4	.7	.3	2.4	.9	.3	.6	.2	1.6	1.6	100.0	4.4	4.1	1936
Kogi	73.3	.4	.6	10.2	.3	12.6	1.4	.6	.5	.1	100.0	11.5	3.3	1589
Kwara	78.8	.5	1.0	11.8	.5	3.2	2.0	1.9	.3	.0	100.0	13.8	4.3	1224
Lagos	77.1	1.3	1.0	9.2	.2	5.8	4.2	.8	.4	.0	100.0	11.7	7.0	3993
Nasarawa	84.9	.5	1.9	6.3	1.6	1.5	1.9	.5	.8	.1	100.0	10.3	6.7	994
Niger	93.4	.5	.5	3.2	.3	.4	.5	.2	.6	.4	100.0	4.4	2.4	2365
Ogun	80.7	.4	.7	8.4	.6	4.5	3.1	.8	.7	.1	100.0	10.1	5.5	1780
Ondo	76.6	.4	.6	7.9	.2	9.2	3.3	1.1	.7	.0	100.0	9.1	5.2	1619
Osun	74.4	.8	1.0	11.7	.2	6.1	3.6	2.2	.0	.0	100.0	13.6	5.6	1657
Oyo	81.0	1.1	1.1	8.5	1.5	3.6	1.5	.1	1.2	.4	100.0	12.2	6.6	2839
Plateau	80.3	1.2	1.2	7.9	.8	3.3	2.7	.7	1.2	.7	100.0	11.2	7.1	1570
Rivers	70.2	2.0	2.3	7.0	2.0	7.7	4.7	2.4	1.5	.3	100.0	13.3	12.4	2348
Sokoto	90.2	.3	.3	3.1	.0	.6	.8	1.2	.7	2.7	100.0	3.8	2.1	2125
Taraba	85.7	.6	1.8	5.1	1.0	1.4	2.0	.1	1.7	.5	100.0	8.6	7.2	1229
Yobe	88.7	.5	.9	4.3	.8	.7	1.0	.1	1.9	1.2	100.0	6.4	5.0	1420
Zamfara	91.5	.4	.7	2.3	.3	.1	1.0	.1	1.5	2.3	100.0	3.6	3.9	1933
FACT (Abuja)	81.0	.8	2.1	7.1	.6	1.6	4.6	.2	1.6	.5	100.0	10.6	9.7	694

As expected, older children are less likely than younger children to live with both parents and slightly more likely than younger children to have lost one or both parents. Table 33 also shows that the percentages of children living with both parents is the highest in the poorest wealth quintile (87 percent) and lower in the richest quintile (81 percent). Two percent of children in the poorest households live with their mother only while their father is alive. The corresponding proportion of such children in the richest quintile is 4 percent.

There are only small differences between urban and rural areas or among the regions in terms of orphan hood. In the urban areas, 7 percent of the children aged 0. 17 years had one or both parents dead while the corresponding figure in the rural areas was 6 percent.

The likelihood that a child lives with neither parent increases from rural (8 percent) to urban (10 percent) households and from northern regions (around 5 percent) to Southern regions (around 12 percent) North-Central.

auspices of the National Council of Child Rights Advocates of Nigeria (NACCRAN), which partners with the Ministry.

- The mass media have collaborated with the FMWA&SD in the areas of publicity, public enlightenment and advocacy, especially in the run-up to the enactment of the **Child's Rights Act**, and in the campaign to get the individual State Houses of Assembly to adopt the provisions of the Act as State Laws.
- UNICEF, NHRC, FMWA and Child Rights Brigade (NGO) collaborated in 2010 to carry out the assessment of the level of implementation of the CRA, and CRL by state governors across the country.
- The Government of Italy is actively collaborating with NAPTIP, through the Anti-Mafia Bureau, to combat human trafficking across Nigerian borders. Italy has also provided technical support, including the donation of equipment for the Agency's National Monitoring Centre. Community Based Organisations (CBOs) and Civil Society Organisations (CSOs) work with relevant ministries and departments at Local, State and Federal levels.

3.1.11 Reporting Obligation—Article 43

The submission of this 2nd and 3rd Periodic Report demonstrates Nigeria's commitment to discharging her reporting obligations under the Charter.

3.2 Definition of a Child: Article 2

Section 277 of the **Child's Rights Act 2003** of Nigeria defines a child as “a person under the age of 18 years.” This definition is in total consonance with **Article 2** of the Charter. The Act is the basic law which governs all matters relating to the rights and welfare of Nigerian children. To further empower this Act, Section 274 specifically states as follows:

- (1) The provisions of this Act supersede the provisions of all enactments relating to:
- (a) Children;
 - (b) Adoption, fostering, guardianship and ward-ship;
 - (c) Approved institutions, remand centres and borstal institutions; and
 - (d) Any other matter pertaining to children already provided for in this Act.

- (2) Accordingly, where any provision of this Act is inconsistent with that of any of the enactments specified in sub-section (1) of this section, the provision of this Act shall prevail, and that other provision shall, to the extent of its inconsistency, be void.”

3.2.1 Minimum Legal Ages Provided by the *Child's Rights Act 2003*

The minimum legal ages as provided for by the Act are as follows:

- (i) **Legal or medical counselling without parental consent**
Section 64(2) of the **Act** provides that a child who has attained the age of 16 years has a right to give consent for scientific investigation without parental consent.
- (ii) **End of compulsory education**
Section 15 of the **Act** obligates Government to provide free, compulsory education to every child up to the Junior Secondary School level, i.e. up to the age of 15 years.
- (iii) **Marriage**
Sections 21–23 prohibit any child under the age of 18 years from contracting or being contracted into marriage, under any guise.
- (iv) **Sexual Consent**
Sections 31 and 32 prohibit sexual intercourse with a child, with or without the child's consent.
- (v) **Recruitment into the armed forces**
Section 34 of the **Act** precludes any person below the age of 18 from enrolling into the Armed Forces either

voluntarily or by conscription.

(vi) **Criminal liability**

Section 204 provides that *“No child shall be subjected to the criminal justice process or to criminal sanctions, but a child alleged to have committed an act which would constitute a criminal offence if he were an adult shall be subjected only to the child justice system and processes set out in this Act.”*

(vii) **Entry into legal/binding contract**

No child can enter into any legally binding contract, unless it is a contract for necessities, according to Section 18 of the Act

(viii) **Capital punishment**

Section 221 (1)(c) provides that *“No child shall be ordered to be - Subjected to the death penalty or have the death penalty recorded against him”*.

(ix) **Deprivation of liberty and imprisonment**

Section 221 (1) a & b provides that
-“No child shall be ordered to be- imprisoned; or subjected to corporal punishment. “

(x) **Admission to part-time/fulltime/hazardous employment**

Section 28 (1) a, b, c, stipulates that *“No child shall be-*

a) *Subjected to any forced exploitative labour; or*

b) *Employed to work in any capacity except where he is employed by a member of his family on light work of an agricultural, horticultural or domestic character; or*

c) *Required in any case, to lift, carry or move anything so heavy as to be likely to adversely affect his physical, mental, spiritual, moral or social development”*.

(xi) **Exposure to drugs and controlled substances**

Section 25 (1) a provides that,
“No person shall expose or involve a child in the use of narcotic drugs and psycho-tropic substances.”

• Currently, the passage of Child's Rights Laws (CRL) in 23 out of the 36 states has instituted the required legal framework for the protection of children's rights in Nigeria. Capacity for the implementation and monitoring of the CRL in states that have promulgated the Law have been enhanced via targeted training for over 317 members of the State Child Rights Implementation Committees, religious/ traditional leaders and legislators, media executives, representatives of CSOs, and members of the state Children's Parliament. An advocacy coalition involving 400 policy makers, religious and traditional leaders, children and the media have also been established in 9 states and the FCT, to sustain the issue of passage of CRL on the agenda in states that are yet to pass the bill. Efforts to harmonise the laws throughout the country include:

• High level advocacy visits led by the Honourable Minister of Women Affairs to state governors, law makers, traditional/religious and opinion leaders on the need for full domestication of the Act in all the States of the Federation.

• Advocacy/sensitisation meetings/campaigns targeting policy makers, legislators at all levels of Government and NGOs to facilitate the passage and implementation of the Act as State laws.

3.3 Guiding Principles: Articles 3, 4 and 26

3.3.1 Non Discrimination – Article 3 & 26 (CRA – Section 10)

The 1999 Nigeria Constitution under Chapter IV, and specifically in **Section 42 (1) (a), (b), (2) and (3)**, provides for non discrimination on the basis of gender, religion, ethnicity, age or circumstances of birth against any citizens including children. By this provision, all organs of government are obligated to protect children against all forms of discriminatory practices in Nigeria. For instance, the Court of Appeal's decision in the celebrated case of **Karimatu Yakubu v. Paiko** buttressed this. The Court allowed the appeal in favour of a teenage girl on the grounds that her right to consent in marriage, and to marry her suitor was of paramount consideration even under the Sharia family law, notwithstanding her father's right to exercise the power of **ljibar** (compulsion), according to the Maliki school of Law widely followed in North.

voluntary accompaniment of juveniles by their parents or guardians to police stations. This is done either in consequence of a complaint or in order to lodge a complaint.

6.4.9 Educational, Health and Recreational Facilities Provided in Remand Homes

The facilities provided in these homes are still inadequate. These facilities include:

- Primary/Secondary Schools educational materials.
- Remedial classes.
- Vocational/craft centres.
- First aid facilities.
- Sick-bays and clinics.
- Access to hospitals and visits by Doctors and other health officials.
- Facilities for games, toys for younger children, play grounds.
- Beddings, toilet facilities and television sets.

(a) How Conditions in Such Institutions are monitored (Section 198 CRA)

- Staff of these institutions are usually supervised by designated State Ministries and officials.
- NGOs, other interested agencies, and members of the mass media have access to these homes and report on their conditions.
- Members of children's families have rights of visits.
- Health officers, mainly doctors and sanitation officers visit the homes from time to time.
- Periodic reports from the officers to their parent Ministries.

(b) Complaint Procedures

- Children are encouraged to speak up on cases of ill treatment. They could speak to superior officers or to other agencies and individuals visiting the homes.
- Such complaints are taken up by appropriate officers in supervisory Ministries, who usually take steps to correct anomalies.
- Many times, exposure of adverse conditions or situations of ill treatment through the mass media draw the attention of high government officials, including State Governors.

6.4.10 Imposition of Capital Punishment

There is no known case of imposition of capital punishment on any child in Nigeria. The laws in Nigeria prohibit the imposition of life imprisonment on persons below 18 years. In accordance with the **CRA**, death penalty cannot be imposed on a child.

6.5 Care for Orphans (Article 26)

As the HIV epidemic progresses, more and more children are becoming orphaned because of AIDS. Children who are orphaned may be at increased risk of neglect or exploitation if the parents are not available to assist them. Monitoring the variations in different outcomes for orphans and comparing them to their peers gives us a measure of how well communities and governments are responding to their needs.

Table 38 presents information on the living arrangements and orphanhood status of children under age 18. 81 percent of children aged 0-17 years in Nigeria live with both their parents, 4 percent live with mothers (father alive) only and .7 percent live with fathers only (mother alive). 7 percent of children live with neither of their biological parents while both of them are alive. 4 percent live with mothers only while the biological father is alive. Very few children lost one or both parents. 3 percent of children have only their father dead and 1 percent of children have only their mother dead.

provided free legal services and counselling services to over 200 indigent children who were in conflict with the law.

- Awareness creation on child justice administration, through the provision of mattresses, pillows and beddings to children and young people in children's and young people's homes in Plateau, Nasarawa and Taraba States.
- The established technical working group is currently coordinating, monitoring and improving the provision of *Pro bono* services within the NBA and other role players in the Child Justice Administration.
- Key information on the care and protection services for children in institutions is made available at all levels of the Child Justice Administration in the country through the developed '*Assessment Tool to assist National and State governments in the implementation of Child Justice Administration*'
- Establishment of a State Child Justice Administration Committee comprising of FIDA, SMWAD, NHRC, NBA, NGOs, Police, Prison, FBOs and the media in the Jigawa, Kano, Adamawa, Gombe, Bauchi, Plateau, Nasarawa, Borno, Taraba, Anambra, Ebonyi and Benue States.
- Reinforcing the provision of Pro-bono services, counselling and legal aid for children in conflict with the law and in need of care and protection.
- About 580 children, young persons, and women in conflict with the law and 600 vulnerable children in Ebonyi, Anambra and Rivers states received free legal aid and counselling services, 29 of them were released from prison custody.
- 100 children in conflict with the law from Kogi, Kwara, Niger, Kaduna, Zamfara, Katsina, Kebbi and Sokoto States acquired improved knowledge based on the different provisions of the CRA and are better informed on their responsibilities. The setting up of a coordinated mechanism to monitor, collate and analyze data on recovery services for children in conflict with the Law, and other vulnerable children resulted in the successful provision of free legal representation, rescue and recovery services for over 1005 vulnerable children and those in conflict with the Law in year 2007.
- The coalition on Child Justice Administration in Plateau and Taraba States recovered and reintegrated a total of 192 (158 boys and 34 girls) children in conflict with the law and in need of care and protection in the states.
- Interactive session with key stakeholders (Directors of Child Development, Chairman of the Nigerian Bar Association, Legal Aid Council and Human Rights NGOs) on Child Justice Administration in Jigawa, Kano, Adamawa, Gombe, Bauchi, Plateau, Nasarawa, Borno, Taraba and Benue States.
- Promoting access to sustainable justice for children in conflict with the law and in need of care and protection among the stakeholders through awareness creation.
- 12 Police Area Commanders from 12 states and 24 Juvenile Welfare Desks Officers from 24 States of the Federation had improved knowledge on counselling, care and protection of children. These officers are now better positioned to effectively and efficiently deliver improved recovery services for children in conflict with the law and other vulnerable children.
- Improved data management and information processing techniques to assess the situation of children in conflict with the law at the Juvenile Welfare Desks offices across the country was put in place in year 2007.

6.4.8 Measures to Promote the Child's Sense of Dignity and Worth

The Child Justice system presently applicable makes provision for the following:

It ensures that a child in conflict with the law has the right to treatment that promotes the child's sense of dignity and self worth and takes the child's age into account; while aiming at his or her reintegration to ensure their constructive role in the society. Avoidance of the placement of a juvenile in a closed facility is paramount; however, deprivation of liberty is a measure of last resort, limited to exceptional cases and for the shortest time possible.

The pre-trial juvenile justice system involves the initial contact often accomplished by arrest, invitation or by

The Nigerian Government has domesticated the AUCRWC through the passage of the ***Child's Rights Act 2003***. The Act outlines the rights and responsibilities of children in Nigeria, and provides for a system of child justice administration, amongst other things. So far 23 states out of the 36 States of the Federation have adopted the CRA.

3.3.2 Steps Taken to Eradicate Discrimination

The following steps are being taken at all levels of government to stamp out discrimination:

- Conducting enlightenment campaigns.
- Establishment of skills acquisition centres for girls.
- Instituting laws against Female Genital Mutilation in the southern states of the country where the incidence is most prevalent.
- At the national level, a bill which seeks to prohibit the practice of FGM has been submitted to the National Assembly.
- Motivation for school enrolment of the girl-child and automatic scholarships for girls in the states of Zamfara, Bauchi, Katsina, Yobe, Sokoto and Borno.
- Provision of scholarships for girls in twelve states of the country by various NGOs.
- Implementation of Girl-Child Education Projects (GEP) across the country.
- Establishment of rehabilitation centres for street children in Cross River, Delta, Enugu, Akwa-Ibom and Borno States.
- Establishment of children's home and rehabilitation centre for destitute in Rivers State (under the Ministry of Social Welfare and Rehabilitation).
- Initiation of the harmonisation of OVC programme tools as an instrument for effective coordination and monitoring of the national response to OVC in Nigeria.
- High level commitment evidenced by budgetary allocation for OVC in some States.
- Legislative framework and coordination / steering team in 12 states in Northern Nigeria for the implementation of the OVC NPA.
- Prohibition of child marriage in Kebbi and Niger States.
- Prohibition of withdrawal of girls from schools in Kano, Borno, Gombe and Bauchi States.
- Provision of free and compulsory basic education across the country.
- Provision of free and compulsory primary and secondary education in Ebonyi, Lagos, Akwa Ibom, Ogun, Delta, Ondo, Ekiti, Nasarawa, Niger, Kano, Katsina, Yobe, Zamfara, Sokoto, Imo, Kaduna, Rivers, Anambra, Enugu, Edo, Jigawa and Oyo States.

3.3.3 Challenges

A major constraint on meaningful planning for physically challenged children is the dearth of accurate data. To address this gap, the Federal Government has included, in the National Policy on Education, a commitment to carry out a census of all physically or emotionally challenged children. Other constraints are:

- Inadequate number of safe homes/shelters/boarding schools for physically challenged and disadvantaged children.
- Lack of emphasis in public enlightenment programmes to draw the attention of the public to the plight of disadvantaged children.
- Lower school enrolment for disadvantaged children.
- Insufficient personnel and educational facilities for physically challenged children.

3.3.4 Best Interest of the Child – Article 4 (CRA – Sections 1 & 2)

a) Legislative and Administrative Measures Concerning the Best Interest of the Child:

Section 1 of the Child's Rights Act 2003 states that the best interest of the child shall be a primary consideration in all actions concerning children, whether undertaken by public or private social welfare institutions, courts of law, administrative authorities or legislative bodies. It mandates every person, institution, service agency, organization and body responsible for the care or protection of children to conform to the standards established by the appropriate authorities, particularly in the areas of the safety, health and welfare of the child.

In every decision affecting the child, the various possible solutions must be considered and due weight given to the child's best interest. The Nigerian courts and other agencies, in settling conflicts of interest, usually base their decisions on what is best for the child. This applies when Administrative authorities intervene in situations where regulations are made in schools, at home and in the civil society. When programmes are designed for children usually, actions taken on behalf of children safeguard their best interest. Besides, Family courts have been established in fourteen States to further entrench the principle of the best interest of the child.

b) Measures Taken to deal with Cultural Practices Affecting Children.

Specific measures taken by Government to combat harmful cultural practices against the best interest of the child include:

- Prohibition of child marriage and child betrothal under **Sections 21 and 22** of the **CRA**.
- Prohibition of tattoos and skin marks under **Section 24** of **CRA**
- Prohibition of Child Trafficking by promulgation of Trafficking in Persons (Prohibition) Law Enforcement and Administration Act; **(2003)**.
- Edo State Law on Female Genital Mutilation (FGM)-**2008**, bans the practice of FGM and prescribes the punishment of N1000 fine or six months imprisonment for its violation.
- Laws prohibiting Female Genital Mutilation have been promulgated in eleven States.
- The National Policy on Food and Nutrition in Nigeria **(2001)** addresses among others, cultural nutritional practices that cause deficiencies associated with high rate of infant mortality and morbidity.
- The Northern States of Zamfara, Sokoto, Kebbi, Kaduna, Kano, Jigawa, Yobe, Bauchi, and Borno, where the Shari'a Legal System is being applied, have witnessed commitment of Government to the welfare of the less privileged children, notably orphans and the numerous child beggars (almajirai) prevalent in those states.
- The Shari'a Legal system does not provide for adoption but allows for fostering and inheritance rights defined by a will (**Wasiyyah**) for children, thereby guarding against possible discrimination against such children.
- Advocacy is continuing, to persuade the states to amend the law to raise marriageable age to 18 years in compliance with Article 21(2) of the Charter.
- There are ongoing efforts across the country by NGOs to scale up children participation in decision making in schools - particularly in the areas of school administration, drafting school's time table, choice of prefects and involvement in Parent/Teachers Association meetings.
- The inauguration of the 5th Nigeria Children's Parliament at national and state levels has reinforced the commitment of Government towards the participation rights of children.

3.3.5 Challenges

- The acceptance of child participation at community level is still low. This poses a challenge to implementation of the best interest of the child principle. The limited understanding of participation as a right of children and women is a hindrance to the prevention of exploitation, the abuse of children and the

- Children are sensitized to offer information about actual or potential cases of child abuse or victimization.

(vi) Diversion Programmes

Adoption of diversion programmes designed to divert children away from the formal judicial proceedings and towards community support is being emphasised by the Child Justice System. This is with a view to providing alternative ways of dealing with child offenders, especially first offenders and those whose offences are of a minor nature. Such programmes include: community service of a non-exploitative nature, temporary re-location to homes and child care institutions.

- Other diversion options include:
 - Pre-trial community service.
 - Vocational or life skills training programmes.
 - Victim-offender mediation.
 - Family conferences.
 - Reparation to victim for the injury, loss or damage done to him.

To further actualise these strategies, the following are initiated among others: all the officers dealing with children's cases, namely, Police, social workers, child development officers, child psychologists, judicial officers, and other personnel, are being specially trained in the handling of diversion programmes.

Within the last five years UNICEF has had extensive consultation and interventions with various stakeholders (Federal Ministry of Justice, Nigeria Police, Nigeria Prison Service, National Human Rights Commission, Nigeria Bar Association, Legal Aid Council and several Civil Society Organizations) to promote reforms in child justice administration based on the protection and participation programmes of the FGN/UNICEF programme (2002-2007) and the bridging year-2008. National Technical Committee had been set up to strengthen the child justice systems. Its function is to coordinate the establishment of family courts and monitor the application of free Legal services to trafficked, vulnerable and at risk children. The conveyance of the Conference of All Nigerian Judges held in November 2007 and committed to set up Family Courts to improve the legal protection for children in Nigeria.

Other results of the initiative and programme of cooperation are indicated below:

- About 3,500 members of the Nigerian Bar Association made up of lawyers, judges and magistrates and other law enforcement officers have so far been enhanced on the various legislative reforms and developments in the child justice system. Provisions of the CRA and the delivery of protective services and care for children in conflict with the law and other vulnerable children, have equally been explicated to members of the Association and the law enforcement agents.
- 180 care-givers in Osun, Oyo and Kaduna states and from 8 institutional child care centres including Almajiri care givers acquired skills and knowledge on child's rights. They are now better equipped to give care and conducive environment for children deprived of primary care.
- 370 children in conflict with the law in Borstal training institution had access to life skills, anger management, and conflict resolution/provision of psychosocial counselling/pro-bono services. The exposure of 50 Borstal institution care givers to the AUCRWC principles, diversionary measures and current child justice administration accounted for the effort.
- Coalition of NGOs and Government partners (comprising of Representatives of the Ministry of Justice, Women Affairs and Social Development, the Prisons, the Police, Nigerian Bar Association, Legal AID Council, Taraba National Youth Council and other Human Rights NGOs in Plateau and Taraba States)

- Other specific priority objectives and strategies for assuring the full protection and re-integration of children in conflict with the law and other vulnerable children are focused on the following areas:
 - (i) **Crime and Delinquency Prevention**
The machinery for monitoring and preventing juvenile crimes is being strengthened at all levels of the society, with the goal of minimizing offending or delinquent behaviour in them. This has multidimensional benefits for all: for the child, assuring his/her growth as a good and responsible adult citizen; and for the society, assuring peace, order and security.
 - (ii) **Provision of Access to Quality and Affordable Education**
Government, at all levels, is actively promoting this objective, despite the paucity of funds, because of the potential benefits of basic education for all citizens. Currently, the implementation of the various constitutional and legal provisions on this issue is steadily progressing. Priority attention is being given to the following:
 - Full implementation of the **Universal Basic Education (UBE)** Programme to ensure the education of the child
 - Vigorous re-introduction of civic and moral education in the school curriculum; and
 - Establishment of mechanism for, and placement of Guidance Counsellors in schools to, among other things, reduce victimization, criminality and anti-social behaviours within schools and communities.
 - (iii) **Community Participation and Ownership of the Child Justice System** This is being achieved through the following measures:
 - Awareness-creation and involvement of the entire community in crime and delinquency prevention through visits to schools, churches, mosques and associations within the community.
 - Establishment of Community Crime and Delinquency Committees to facilitate community awareness, monitor the courts, the police, prisons, and other relevant personnel and facilities; and the
 - Introduction of Community Service Schemes for children and communities to fully participate in the Child Justice System.
 - (iv) **Encouragement of Children's Participation in the Planning and Implementation of Programmes**
Efforts are being made to involve children in the planning and implementation of Child Justice programmes at various levels of the Nigerian society. Some of these new initiatives include:
 - Establishment of peer education for children in and out of schools.
 - Establishment of peer assessors in the context of the Family Court, as well as that of Community Conflict Resolution; and
 - Ensuring participation of the child offender in life skill, adolescent development programmes, such as anger management, civic responsibilities, and skills acquisition.
 - (v) **Establishment of Child-friendly Facilities in Rural and Urban Centres Strategies adopted in the implementation of this objective include:**
 - Establishment of child welfare desks at police stations, Local Governments offices, and rural communities to facilitate access to complaints mechanisms and remedies for abused children, or children at risk of abuse or victimization.

- adoption of Human Rights-based approach to programming.
- Deep rooted socio-cultural barriers related to child protection, gender issues, HIV/AIDS and child participation still persist in Nigeria thus contributing to the slow pace of establishing legal framework for the protection of children and women in the country. It equally limits access of young people to HIV prevention services.
- There are limited capacities to implement child protection (including OVC programme) in the country. This has also translated into inadequate budgetary allocation for child protection issues by government departments in charge of the child protection.
- The lack of legal framework for the implementation of CEDAW serves as institutional barriers towards the realisation of the rights of girls and women to gender equity.

3.4. Respect for the Views of Children – Article 12 (CRA- Section 3)

3.4.1 Legislative and other measures

The International, Regional and National Legal Instruments and Policies concerning children uphold children's rights to participation, and freedom to express their views in all matters affecting them. These include the CRC, CEDAW, AU Charter on the Rights and Welfare of the Child, National Child Policy (2007), the National Gender Policy (2007), as well as the *Child's Rights Act (2003)*.

- Children's Day and Day of the African Child are annually celebrated with the involvement of topmost government officials in both the executive and legislative arms.
- Directors of Child Development Departments were trained on Child-Friendly Budgetary processes, as well as Advocating for Promotion and Sustainability of Nigeria Children's Parliament.

3.5 Provision of Information to Children and the promotion of children's participation

The cumulative effect of Sections 210 and 214 (1) of the CRA, 2003 is that Nigerian Children enjoy the right to participate in the process of child justice administration. In the case of children in need of special protection measures, Section 16 of the CRA obliges all responsible persons, authorities and bodies to ensure their full rights to participation.

Whilst the right to freedom of expression is guaranteed, Nigerian Laws have provisions that protect children against publications that promote immorality, particularly Section 45 (1) (a) of the Constitution of the Federal Republic of Nigeria 1999. Other legal provisions prohibiting the production and dissemination of harmful publications are stipulated in Sections 35 and 36 of the **CRA, 2003**.

PART FOUR

Survival Rights of the Child: Basic Health and Welfare – Articles 5, 13, 14, 20, 26 (CRA Section 13)

Introduction

The commitment of Government to secure the survival rights of the Nigerian child are seen in the numerous activities and efforts that have been put in place, notably:

- Development of the Integrated Maternal, New born and Child Health Strategy in the FMOH and its launch in March 2007.
- Formation of Social Mobilization Committees, at national, state and local levels, on immunisation of children against poliomyelitis and other childhood killer diseases.
- Regular de-worming exercises for children in primary schools across the country;
- Free pre - and post-natal medical care for women and children up to the age of five years.
- Idoine and Vitamin A supplementation exercise.
- *Roll-back Malaria* project, including the popularisation of the use of insecticide-treated mosquito nets.
- Promotion of exclusive breast-feeding for the first six months of life.
- Promotion of household and community practices for child survival, such as parent and community education initiatives.
- Group monitoring for under-five.
- Oral rehydration therapy for diarrheal diseases.
- Integrated Management of Childhood Illness (IMCI); and
- Implementation of the School Feeding Programme in eleven states: Abia, Benue, Enugu, Imo, Kogi, Nasarawa, Kebbi, Gombe, Jigawa, Borno and Osun

4.1 Right to Life: Article 5 (CRA– Section 4)

4.1.1 Legislative and Policy Measures on Health and Welfare

Nigeria has shown keen commitment to promote and protect the rights of the child to basic health and welfare, principally through legislative, policy, strategic and administrative measures.

(a) Legal Measures

- The **Constitution** of Nigeria, in **Sections 13, 14(2)(b), 17 (3) (c) and (d)**, enjoins the Federal, State and Local Governments, and all persons and authorities exercising legislative, executive and judicial powers, to ensure that the welfare and security of children, and adult persons remain the primary purpose of government.
- The Nigerian Constitution does not explicitly provide for the right to health, yet the provisions of sections 17, 33 and 35 allude to the right to health in Nigeria.
- Section 17 dealing with the social objectives of the Nigerian State obligates government to direct its policies to ensure adequate medical and health facilities for all persons; ensure that the health, safety and welfare of all persons in employment are not endangered or abused.

- Diversion programmes are currently being introduced into the child justice system. Specifically Alternative Dispute Resolution mechanisms are being strengthened to ensure that all disputes/conflicts involving children are settled through victim-offender mediation and or family conferences. Magistrates handling children are also being encouraged to adopt diversion programmes.
- Advocacy strategies are being employed with legislators and policy makers to ensure the provisions of the Children and Young Persons Laws (CYPL), the Penal Code, the Criminal Procedure Code and the Sharia Penal Code are reviewed and brought in conformity with the provisions and standards of the AUCRWC and CRA.
- The CRA and CRLs have all excluded the application of death penalty to persons below 18 years.
- Relevant professionals and child care givers are acquiring improved knowledge on appropriate National and International standards to ensure better care and support for children in conflict with the Law and other vulnerable children.
- Both the Social Welfare and the Child Development Departments at the state and Federal levels have in place programmes on rehabilitation and re-integration of vulnerable children.
- National plan of Action on Violence against Children has been developed, with well articulated training processes, to train parents, teachers, law enforcement officials, care givers, judges and health professionals in identification, reporting and management of violence against children.
- FMWA&SD is collaborating with Community Based Organizations (CBOs) to sensitize parents, teachers, care givers, etc, on the provisions of the CRA and CRLs
- The development by the Nigerian Bar Association (NBA) and UNICEF of the assessment tool for the implementation of Child Justice Administration (CJA) in Nigeria in May 2008 helps State Governments in the implementation of Child's Rights Laws.

6.4.6 Children Deprived of their Liberty – Article 37

The provisions of the **Child's Rights Act** are consistent with those of the United Nations Standard Minimum Rules for the Administration of Juvenile Justice (the Beijing Rules) which prohibits incarceration of children unless there is no other way of dealing with them satisfactorily. The Act makes the following provisions:

- Prohibition of corporal punishment (**Section 221(1) (b) CRA 2003**)
- Abolition of the “age of criminal responsibility.” Instead, the Act gives the age of 18 years to be the age below which a child cannot be subjected to the adult criminal processes, but can only be subjected to the child justice administration process (**Section 204 CRA, 2003**)
- Prohibition of joint trial of children with adults under any circumstance (**Section 205 CRA**)
- The separation of children from adults in detention in all circumstances (**Section 222 CRA**)

6.4.7 Administration of Child Justice System in Nigeria (Article 17)

The broad strategies indicated in the last country report remains relevant to the current child justice systems. The main features are:-

a) Priority Objectives and Strategies to Address the Situation of Children in Conflict with the Law

- The Nigerian child justice system deals with violation of criminal laws, as well as other forms of delinquency, such as truancy, insubordination to parents and guardians, intemperate drinking, smoking, promiscuity and prostitution.
- Civil processes in relation to care and protection cases and lost or abandoned children are also dealt with.
- Priority is being given to the provision of adequate number of institutions and trained personnel to handle child offenders.

Rescue Unit of the Armed Forces and of the Nigeria Police Force.

(c) Care for Internally Displaced Persons

The challenge of internally displaced persons has been of grave concern to the Nigerian Government in recent times. This is attributable to the various religious, ethnic and sectarian crises that occurred in some parts of the country.

Government has responded to this challenge by mandating the National Commission for Refugees to specifically take care of the victims and their children. The NCFR has acted on this mandate by responding to the plight of the internally displaced person's in Bauchi, Plateau and Cross River states and is currently intervening in the Niger Delta crises. Also, NGOs set up schools and educational centres for some of the children that are internally displaced.

d) Measures to Protect the Civilian Population

In cases of domestic conflicts, such as communal clashes, riots and religious violence, the civilian population, including children, are usually protected by the deployment of police personnel, and in extreme circumstances, military personnel. The vulnerable groups are usually evacuated to safer environments where psychological, post-traumatic and humanitarian assistance are given. The combined efforts of Government, NGOs and international agencies usually handle such situation.

6.4.5 Children in conflict with the Law (Article 17)

a) Problems of Child Justice Administration in Nigeria

Most child offenders often come from broken homes and lack parental guidance. Normally, poverty and lack of education dominate their backgrounds. Child offenders involved in “status offences”, such as vagrancy, truancy or wandering are usually held in custody for protection. Others are detained at the request of parents for stubbornness or for being “beyond parental control.”

Child offenders are not often prepared for life after detention due to the inadequacy of vocational and educational facilities, counselling services, and after-care services that should assist in their rehabilitation and reintegration into society.

b) National Response

In response to these problems, the *Child's Rights Act, 2003* was enacted to provide for a new system of child justice administration and for the care, support and protection of vulnerable children and those in conflict with the law. The child justice administration system in Nigeria as contained in the CRA provides for both non-custodial and custodial institutional measures for children in conflict with the law. It further provides for the protection of children in need of care and special attention.

Actions taken in implementing the provisions include:

- Free legal representation/aid for children: Mechanisms have been put in place to provide children free legal service delivery through the establishment of pro-bono services by the Nigerian Bar Association. Similar free legal service delivery is being rendered by various NGOs, the respective offices of the Public Defender and the various zonal offices of the Legal Aid Council.
- Family Courts are being established in Nigeria as the platform for effective implementation of the child justice administration. Family courts are already established and functioning in Abia, Lagos, Ondo, Anambra, Akwa-Ibom, Plateau, Kwara, Nasarawa, Ebonyi(2011), Osun(2011), Kogi(2012), Benue(2013) States and the FCT. Efforts are in progress to establish same in all the states that have passed the Child's Rights Laws.

- Clearly the constitutional provisions under sections 33 and 35 recognized that the rights to life, sanctity of the human person and human dignity are necessarily connected to physical and mental health of persons.
- Further the constitutional provisions of sections 17, 33 and 35 implicitly on the right to health includes the provision of affordable, available, adequate, qualitative and accessible health care facilities and services by all, especially women's reproductive health rights without any discrimination.
- Furthermore, human rights of persons living with HIV-AIDS are protected under the rights to freedom from discrimination, to human dignity, to personal liberty, to life, to private and family life, to freedom of expression, to peaceful assembly and association and to freedom of movement.
- In the case of *Odafe and Ors v. Attorney General and Ors* (2004) AHRLR 205, the Federal High Court, Port Harcourt, held that failure by the prison officials to give the applicants/prison inmates as confirmed HIV/AIDS patients due medical attention and access to medical services while in prison custody was violative of the rights to human dignity and health under Articles 5 and 16 of the Charter.
- Furthermore, having signed and ratified the following multilateral treaties, Nigeria is bound legally to ensure the effective promotion and protection of the provisions and state obligations contained therein that are relevant to the right to health and HIV/AIDS.

- The **Child's Rights Act, 2003**, in **Section 13** provides for the child's rights to health and Health Care Services, and imposes the duty on all levels of government and relevant bodies responsible for the healthcare and welfare of a child. It states that every child is entitled to enjoy the best attainable state of physical, mental and spiritual health. The Act mandates the reduction of infant, and under- five mortality rates and the provision of necessary medical assistance and child health- care services to all children with emphasis on the development of primary health care, and the combating of childhood diseases and malnutrition within the framework of primary health care through the application of appropriate technology.

(b) Policies, Strategies and Plans

Nigeria has developed a number of policies, plans and strategies that provide enabling environment for child survival and development. These include:

The 2004 Revised National Health Policy's long-term goal is to provide adequate access to primary, secondary, and tertiary health care services for the entire Nigeria population through a functional referral system.

Because health is an integral part of overall development, inter-sectoral cooperation and collaboration between the different health-related ministries, development agencies and other relevant institutions shall be strengthened; and a gender-sensitive and responsive national health system shall be achieved by mainstreaming gender considerations in all health programmes.

The February 2005 National Policy on Population for Sustainable Development has the overall goal of improving the quality of life and standard of living for the Nigerian population. This is to be achieved through the attainment of a number of specific goals that include:

- Achievement of sustainable economic growth, protection and preservation of the environment, poverty eradication, and provision of quality social services;
- Achievement of a balance between the rate of population growth, available resources, and social and economic development of the country;
- Progress towards a complete demographic transition to a reasonable growth in birth rates and a low death rate;
- Improvement in the reproductive health of all Nigerian at every stage of the life circle;
- Acceleration of a strong and immediate response to the HIV/AIDS pandemic and other related infectious diseases;

- Progress in achieving balance and integrated urban and rural development.

The overall goal of the National Policy on HIV/AIDS 2003 is to control the spread of HIV-AIDS in Nigeria, and to mitigate its impact to the point where it is no longer of public health, social and economic concerns, such that all Nigerians will be able to achieve socially and economically productive live free of the diseases and its effects.

The primary objective of the National Health Insurance Scheme (NHIS) is to ensure that every Nigerian has access to good health care services, protect families from financial hardship of huge medical bills, and ensure equitable distribution of health care costs among different income groups. There are several sub-programmes under this scheme such as Children under-Five Social Health Insurance Programme (CFSHIP), Permanently Disabled Persons Social Health Insurance Programme (PDPSHIP), Formal Sector Social Health Insurance Programme (FSSHIP), Urban Self-employed Social Health Insurance Programme (USSHIP), Rural Community Social Health Insurance Programme (RCSHIP) and Prison Inmates Social Health Insurance Programme (PISHIP). The programme is funded through contribution of members and employer's investment income.

The Integrated Child Survival and Development (ICSD) Strategic Framework and Plan of Action (2005-2009)” (National Planning Commission, 2005) combines effective interventions for preventing death and improving health, growth and development. It is to serve as a reference document to guide implementation of child-survival interventions by governments at all levels.

The overall objective of the Revised National Health Policy is to strengthen the national health system such that it will be able to provide effective, efficient, quality, accessible and affordable health services that will improve the health status of Nigerians through the achievement of the health-related Millennium Development Goals (MDGs).

The following were the targets set by the National Health Policy:

- Reduce the under-five mortality rate by two-thirds between 1990 and 2015;
- Reduce the maternal mortality rate by three-quarters between 1990 and 2015;
- Reduce the spread of HIV/AIDS by 2015;
- Reduce the burden of malaria and other diseases by 2015.

• **National Child Health Policy of May 2005:** This provides a long-term direction for protecting and promoting the health of children. It provides a holistic and integrated vision for child health, bringing together in one document all key policy elements to promote child health and development. The document elaborates on core responsibilities of the different tiers of government and major stakeholders and provides the framework for planning, management, delivery and supervision of services to address critical problems affecting childcare in the target group.

• **National Response Plan of Action on Orphans and Vulnerable Children (OVC), 2006-2010:** This has been developed with the establishment of an OVC Unit in the FMWA & SD. The National Plan of Action on OVC when fully implemented would address the needs of OVC at various locations in the country.

• **National ARV Plan:** Measures to reduce mother-to-child transmission of HIV included a plan to accelerate access to Anti-Retroviral Therapy (ART) by reaching 250,000 People Living with HIV/AIDS (PLWHA) in need of treatment by the end of year 2006.

Since the submission of the last report, other notable policies, plans and strategies that have been developed include:

- National Policy on Female Genital Mutilation (2005).
- National Policy on Malaria Control (2005).
- National Health and Insurance Scheme (2005).
- National Policy on Infant & Young Child Feeding (2005).
- National Guidelines on Infant & Young Child Feeding (2005).

encouraged to utilize the opportunity through the appropriate authorities' i.e. National Population Commission, the Local Government Authorities, and hospitals.

- **Protection:** Unaccompanied minors are put in the care of foster parents after a Best Interest Determination (BID) assessment has been conducted by the Community Service units of both the UNHCR and NCFR. There is also legal protection for refugee children by way of prosecution of people involved in the violation of the rights of refugee children to act as deterrence measures.

(a) **The International Laws and Procedures Applicable to Refugee Children:**

- The Geneva Charters and their Protocols.
- Convention on the Rights of the Child 1989.
- Optional Protocol on the Rights of the Child (Involvement in Armed Conflict) 2000.
- Optional Protocol on the Rights of the Child (Sale of Children, Child prostitution and Child pornography) 2000.
- International Charter against Trans-National organised Crime 2000.
- Charter relating to the status of stateless persons 1954.
- Charter on the reduction of statelessness 1961.
- Charter against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment 1984.
- International Charter on the Elimination of all Forms of Racial Discrimination 1965.
- The AU Charter on the Rights and Welfare of the Child.
- The AU Charter Governing the Specific Aspect of Refugee problems in Africa.

(b) **The Domestic Laws and Procedures Applicable to Child Refugees:**

- The Constitution of the Federal Republic of Nigeria (1999).
- Child's Rights Act, 2003.
- The Child Rights Laws of the 23 States of the Federation.
- National Commission For Refugees Act, cap 21, Laws of the Federation of Nigeria, 2004.
- Trafficking in Persons (Prohibition), Law Enforcement and Administration Act 2003.

6.4.4 Rehabilitative Care for Victims of Armed Conflict, Torture and Neglect (Article 22)

(a) *Measures Adopted to Promote Physical and Psychological Recovery and Reintegration of Victims of Armed Conflict:*

- Provision of relief materials.
- Free medical services.
- Counselling by religious bodies.
- Reintegration into their families.
- Temporary shelter.
- Provision of recreational facilities and psycho-social support.

(b) *Care and Rehabilitation of Refugees*

The African Charter on Human and Peoples' Rights makes provisions for the care and rehabilitation of refugees, especially those affected by conflicts. Nigeria has over the years, provided refuge for such people from different parts of Africa. People affected by natural disasters and economic problems are also similarly accommodated. Victims are catered for by such institutions as the National Commission for Refugees (NCFR), International Red Cross and Red Crescent Societies, the Salvation Army, NEMA, State Emergency Relief Agencies (SERAs), as well as other institutional response agencies like the Search and

- country on emergency reporting;
- 2. Sensitisation workshops on the operation of the National Disaster Response Plan (NDRP).
- 3. The government's framework for emergency coordination in Nigeria—was conducted for 56 middle cadre officers and Directors from the Ministries of Health, Education, Water Resources, Environment, Agriculture, Federal Road Safety Corps, Civil Defence, the Police and the Armed Forces.
- The main strategy of capacity building remains appropriate. As the first step within this strategy, the project (in 2003) assessed local emergency data management capacity gaps at the Federal and in 12 States (Bauchi, Borno, Cross River, Delta, Ebonyi, Ekiti, Enugu, Kaduna, Kano, Katsina, Kogi, and Lagos) with the aim of addressing the gaps identified.
- The report indicated that most states are still grappling with the new concept of state emergency management and how to mainstream this into the state governance structure.
- States Ministries of Women Affairs and Social Development (SMWASD) in collaboration with Child Protection Network (CPN) is strengthening Child Protection System in all the states.

6.4.3 Refugee Children (Article 23)

In line with the principle of family unity and the protection of children, 2,280 children were granted the refugee status from 2006-2009. The refugee child enjoys all the rights, benefits and protection enshrined in various instruments on the protection of the child.

Refugee children have the privilege of benefiting from the various programme of the National Commission for Refugees (NCFR). In collaboration with the UNHCR, 282 Children of Liberia and Sierra-Leone origin whose parents have opted for various durable solutions, following the return of peace to their countries are adequately catered for under the programme. 44 children from Liberia and 18 from Sierra-Leone were repatriated to their home country while 113 Liberians and 122 Sierra-Leoneans were integrated into the Nigeria community within the frame work of the ECOWAS Protocol on free movement. Four other refugee children that opted for exemption had their request granted. Other refugee children were resettled to a third country of Asylum alongside their parents for various reasons including the children's health.

- **Education:** In line with the NCFR mandate and with support from UNHCR, 145 children were given elementary educational scholarship and 68 children at secondary level from Lagos, Ijebu Ode and Taraba areas between 2007 and 2009. To facilitate the absorption of refugee children into the educational system, UNHCR, through the NCFR, renovated some school buildings that have refugee pupils in attendance, as well as provided instructional materials to these schools.
- Refugee children are also being trained in skills acquisition programmes and vocational training is provided at various refugee centres/settlements in Nigeria.
- **Health and Nutrition:** All issues relating to children's health are given top priority. 16 children are on medical subsistence allowance on monthly basis from 2006 – 2009 in the Lagos liaison office of NCFR alone. Preventive measures as enjoyed by Nigerian Nationals such as children immunization are equally in place for refugee children.
- Government hospitals are available and utilized by refugees thereby keeping the child mortality rate at the barest minimum.
- Sanitary facilities were constructed in Amana in Cross River State and Ityuave in Benue State for the benefit of refugees, their children and host communities. This helps in ensuring that children live and thrive in hygienic environments. In addition, specially prepared nutritional supplements for the malnourished and provision of sanitary pads to refugee female children are done on monthly basis.
- **Birth Registration:** Refugees are well enlightened about the importance of birth registration and are

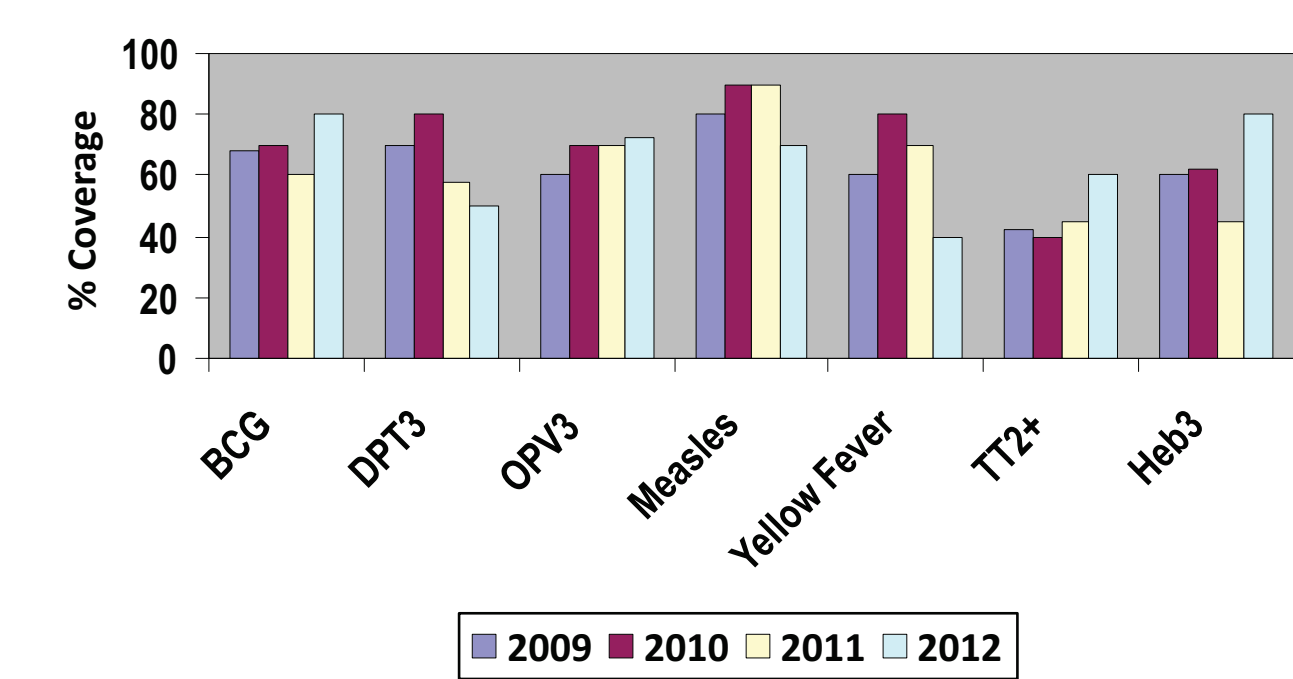
- National Strategic Plan for Implementing Global Strategy on Infant and Young Child Feeding (2006).
- National Guidelines on Micronutrients Deficiencies Control in Nigeria (2005).
- National Guidelines and Strategies for Malaria Prevention/Control During Pregnancy (2005).
- National Strategic Framework and Plan for VVF Eradication in Nigeria (2005-2010).
- National Reproductive Health Policy and Strategy (2002- 2006).
- National Policy on Adolescent Health and Development (2006).
- National Maternal, Newborn and Child Health Strategic Document (2007).
- National Guidelines and Standards of Practice on OVC (2007).
- National Policy on Integrated Disease Surveillance and Response (2008).
- Assessment Report of National Response to Young People's Sexual and Reproductive Health in Nigeria (2009).

4.1.2 Initiatives to Reduce infant and Maternal Mortality in Nigeria:

- The Save One Million Lives Initiative was launched in 2012 by the President of Nigeria. This initiative is focused on evidence-based, cost effective interventions that are proven – and address the leading causes of morbidity and mortality. The Initiative comprises several components which will contribute to saving one million lives. The components include:

- a) Improving Maternal, Newborn and Child Health: through delivering an integrated package of interventions at thousands of primary health care clinics with referral links, including skilled healthcare provider.
- b) Improving routine immunization coverage and eradicating poliomyelitis.
- c) Prevention of Mother to Child Transmission of HIV; through increased access to quality HIV testing and counseling to mothers; treatment of infected mothers; and exploring feasibility of universal access to HIV treatment to all those infected.
- d) Scaling up access to essential medicines
- e) Malaria control; through an increased utilization of treated bed nets and effective anti-malarial medicines;
- f) improving child nutrition;
- g) strengthening logistics and supply chain management and

Fig 7: Coverage of Key Vaccines in Nigeria (2009-2012)



Source: NPHCA, 2012 Administrative Data

Diphtheria and Tetanus are other major causes of high mortality rate in Nigeria (USAID, 2004). Tetanus was and is still a major cause of death in most mothers and infants, who are exposed to the bacteria during childbirth or wound injury. The disease is one of the major reasons early vaccination was introduced in Nigeria (Delta State Government, 2004). Over the years, we have been able to significantly increase the % of children and/or mother that have received vaccination to prevent diphtheria (Fig 9) and/or tetanus as the case may be. This has resulted in overall reduction in case fatality rates from these diseases in the country.

Figure 7 above shows coverage of DPT 3 which is a tracer antigen for measuring utilization of immunization services. The chart shows an increase in coverage over the period, however the national target of 80% coverage has not yet been achieved.

HIV, TB and Malaria

The prevalence of HIV has been on the decrease since 2001, when Nigeria recorded a prevalence of 5.8. The prevalence fell from 5.8 in 2001 to 4.1 in 2010 (Fig. 8). There are an estimated 3.15 million Nigerians living with HIV by the end of 2011 while there were 229,480 HIV+ pregnant women (FMOH ANC Survey 2010). By mid 2012, 472,422 people received ARV (roughly 65% women and 35% men), a 3600% increase from 13,000 in 2004. Despite this important achievement, the estimated number of individuals in need of ARV therapy in Nigeria is 1,360,000 according to the WHO 2010 guidelines. In other words, only 35% of Nigerians who need ARV therapy are receiving it. The situation is most dire for children: only 18% of children who require ARV therapy are receiving the appropriate treatment. With continued support from the major funders of international ARV therapy programmes - the Global Fund to Fight AIDS, Tuberculosis and Malaria and the United States President's Emergency Plan for AIDS Relief (PEPFAR) - this gap is gradually being reduced. As at June 2012, we have 458 ART sites, 978 PMTCT sites.

Part III provides for the protection of the rights of the child through the prohibition of:

- Child marriage.
- Child betrothal.
- Infliction of tattoos and skin marks.
- Exposure to use, production or trafficking of drugs and psychotropic substances.
- Use of children in any criminal activity.
- Abduction and unlawful removal and transfer of a child from lawful custody.
- Forced, exploitative or hazardous child labour, including employment of children as domestic helps outside their own homes or family environment.
- Buying, selling, hiring or otherwise dealing in children for the purpose of hawking, begging for alms, prostitution, and unlawful intercourse.
- Other forms of sexual abuse and exploitation prejudicial to the welfare of the child.

Further, the Act prohibits recruitment of children into the Armed Forces of Nigeria, and importation of harmful publications, which portray information such as the commission of crimes, acts of violence, obscene, immoral and indecent representations that tend to corrupt or deprave a child. In addition, the CRA and CRLs give the courts the powers to make maintenance order on parents and care givers.

Part IV (Sections 41-49) of the Act provides for additional protection through civil and welfare proceedings. Thus, it makes provisions for securing assessment orders in relation to ascertaining the state of health or development of, or the way in which the child has been treated, with a view to enabling a determination as to whether the child is suffering or is likely to suffer significant harm.

To this end, the appropriate authority may secure an order from the Family Court for emergency protection of children where and when necessary. The Act additionally imposes duties on State Governments to safeguard or promote the welfare of any child in danger or suspected to be in danger of suffering significant harm within their jurisdiction.

Part V (Sections 50-52) of the Act empowers a Child Development Officer or Police officer or any other authorised person to bring a child in need of care and protection before a court for a protective or corrective order, if he has reasonable grounds for believing that the child:

- Is an orphan or is deserted by his relatives, or
- Has been neglected, ill treated or battered by the person responsible for the care and custody of the child, or
- Has either the guardian or one or both parents imprisoned, ill-treated or battered by his parent or guardian or imprisoned,
- Mentally deranged, or otherwise severely handicapped, or
- Found begging for alms in any circumstance or found in company of a reputed/common thief or prostitute, or
- Beyond parental control, or
- Exposed to moral or physical danger.

6.4.2 Children in Situation of Emergency (Articles 22 & 23)

- Nigeria has established the Emergency Preparedness and Response (EPR) Project consisting of two sub-projects - the emergency data management and preparedness; and field response, communication and networking. In addition, the recently established Oil Spillage and Vandalisation Control Agency responds to oil spillage under emergency situations.
- To strengthen government's capacity for coordination of emergencies in the country, UNICEF supported National Emergency Management Agency (NEMA) and State Emergency Management Agency (SEMA) to anchor series of trainings between 2002 and 2004. These include:

1. Training of 9 editors and 39 reporters drawn from both the electronic and print media across the

6.3.2 Measures to Recognise the Right of Every Child to Social Security

- In 2004, the Federal government launched a National Health Insurance Scheme (NHIS) and children are to be the prime beneficiaries of the scheme through their parents' participation and contribution to the fund.
- Informal linkages on social security and childcare services exist between the Federal and State Ministries of Women Affairs & Social Development. In year 2006, new initiatives on women empowerment by the Ministry of Women Affairs in collaboration with financial institutions were launched as the Women Fund For Economic Empowerment (WOFE).
- WOFE aims among other things to facilitate access to land, profitable marketing strategies, business training, infrastructural facilities, better technology and the provision of a supportive policy environment.
- WOFE was established to facilitate direct flow of credit to grassroots women groups.
- Within the reporting period, food processing machines were also distributed. This was done to reduce time and energy used while processing foods, to generate income; to achieve food security at the household level, and to defeminise poverty. The FMWA&SD has commenced providing a revolving loan for women in business - tagged the Business and Development Fund for Women (BUDFOW).

6.3.3 Measures to Assist Parents and Others to Implement Right to Adequate Standard of Living

- The agricultural sub-component of the National Policy on Women 2000 sought to inter alia, remove the obstacles to women's access to land, loans/credit and other productive inputs.
- In 2004, the SMEDAN Scheme was initiated to lend weight to the above policy by strengthening women's access to special revolving loans through finance houses. An example is the establishment of the Nigeria Agricultural Cooperative & Rural Development Bank (NACRDB), which provided Micro Credit Schemes especially for women. While there is no disaggregated data to measure the success of these initiatives, it is noteworthy that finance houses have recorded appreciable successes in the recovery and recycling of the micro revolving loans.
- More women in urban areas/cities have access to loans that have considerably enhanced their standard of living.
- The National Directorate of Employment (NDE) organises skills training for OVC who are between 15 and 18 years of age.

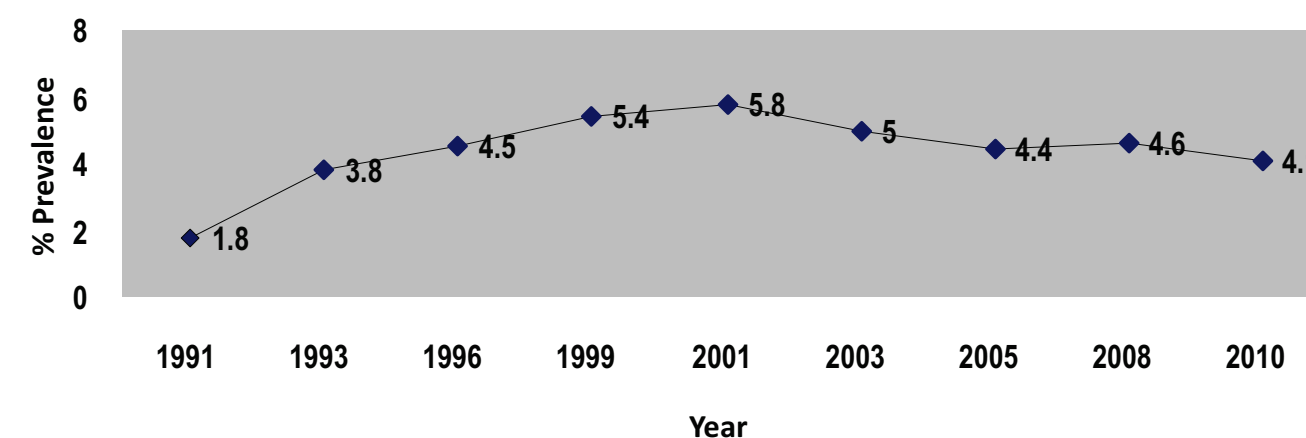
6.4 Special Protection Measures – Articles 15, 16, 17, 22, 23, 25, 26, 27-29 (Sections 21– 52 CRA)

6.4.1 Laws for the Protection of Children's Rights

Over the years, many laws have been enacted at the Federal and State levels, dealing with various child protection issues and the enforcement of the rights of children. Principal among these laws are:

- Trafficking in Persons (Prohibition) Law Enforcement and Administration Act (2003).
- Various State Laws dealing with child trafficking, street trading, child labour, and the abolition of harmful traditional and cultural practices, such as female genital mutilation, child marriage and other forms of physical, sexual or psychological exploitation and abuse of children, and Harmful Publication acts.
- The Child's Rights Act 2003, which incorporates and updates the provisions of all previous and existing laws dealing with the rights of the child and Child Justice Administration.
- Child's Rights Laws already passed in Ogun, Imo, Ebonyi, Anambra, Ekiti, Rivers, Taraba, Plateau, Nasarawa, Jigawa, Kwara, Edo, Bayelsa, Lagos, Oyo, Osun, Ondo, Abia, Benue, Delta, Akwa Ibom and Cross River and Kogi States.
- The Nigerian Law Reform Commission in its report on the reform of Family law in Nigeria, submitted to the FGN, made specific provisions for parental responsibilities that are actionable when breached.
- Provisions guaranteeing special protection measures for children are contained in parts III, IV, and V of the Child's Rights Act (CRA) 2003. The implementation of the provisions of Part III (Sections 21-25) of the *Child's Rights Act* has improved with the passage of the Child Rights Laws (CRLs) in 23 states of the Federation.

Figure 8: National Median HIV Prevalence in Nigeria (1991-2010)

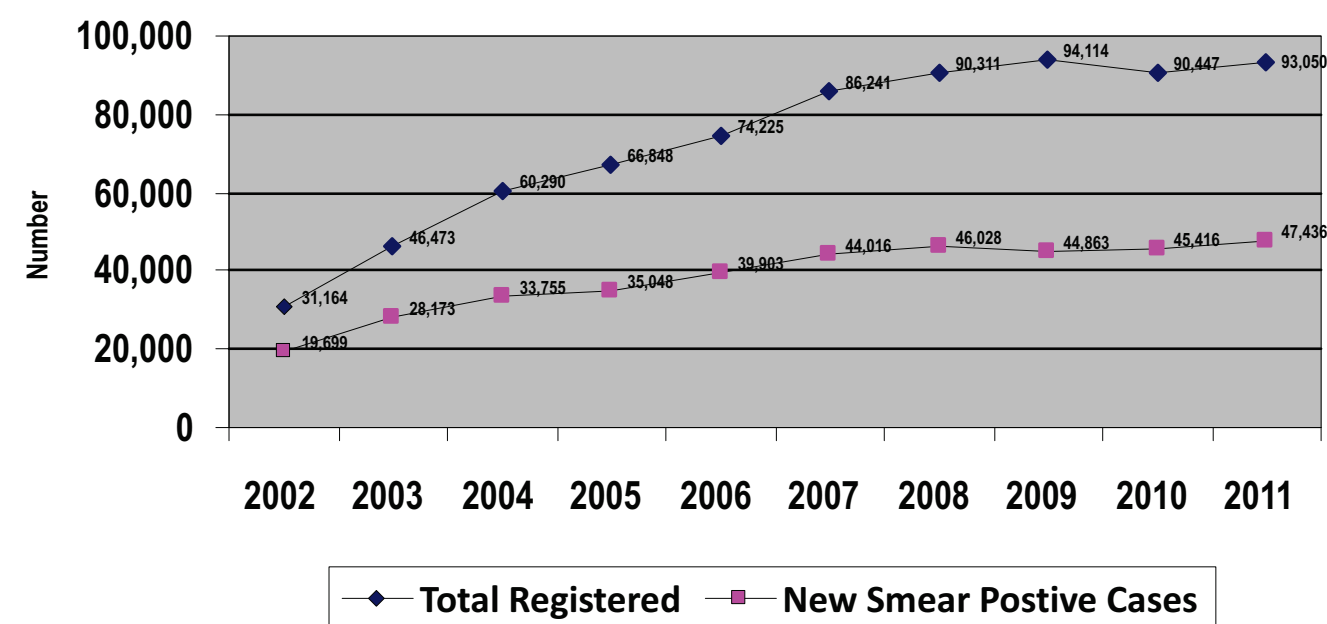


Source: FMOH-HIV Sero-Prevalence Report 1991-2010

Figure 9 below shows that the total number of TB cases on register increase progressively from 31,164 in 2002 to 930,050 in 2011, while for the same period the smear positive cases increased from 19,699 to 47,436 due to better case detection capability. The burden of TB is complicated by the emergence of drug resistant tuberculosis (DR-TB). In the last one year, capacity for diagnosis of DR-TB has been established through installation of 30 new diagnostics GeneXpert machines for rapid diagnosis of TB and Rifampicin resistance in 22 states and the FCT.

Nigeria was among countries with the highest Leprosy burden along with India, China etc, with over 500,000 leprosy cases on register in 199. However, since almost a decade the number of cases have reduced drastically and as at December 2011, cases have been reduced to 3,623 even with improved

Fig. 9: - Trend in TB Case Finding in Nigeria (2002-2011)



Source: NTBL Report 2011

Although malaria is curable and preventable, it is an endemic disease in Nigeria, accounting for up to 25 percent of the burden of malaria in Africa. Malaria-related deaths account for up to 11 percent of maternal mortality, 25 percent of infant mortality, 30 percent of under-5 mortality and contributes to about 300,000 childhood deaths annually.

The disease overburdens the already-weakened health system: nearly 110 million clinical cases of malaria are diagnosed each year, and malaria contributes up to 60 percent of outpatient visits and 30 percent of admissions. Malaria also exerts a huge social and economic burden on families, communities, and the country at large, causing an annual loss about 132 billion Naira in payments for treatment and prevention as well as hours not worked. Because malaria is both treatable and preventable, knowledge of malaria is essential for appropriate care seeking behaviour. The 2010 malaria indicator survey is the first systematic survey dedicated to monitoring progress in malaria control in Nigeria. 94% of women interviewed in the survey are aware of malaria. Of these, 66% are aware of fever, 44% chills/shivering, 55% headache and 31% of joint pains as the major symptoms of malaria. This shows overall that knowledge about malaria symptoms is low, a situation that could contribute to the low coverage of treatment seeking behaviours and use of prevention strategies.

Efforts to improve the control malaria have focused on use of LLINs, appropriate treatment of malaria and malaria preventative therapy for pregnant women.

In addition, efforts at environmental control of the disease including indoor residual spraying, larviciding and environmental hygiene are being promoted. Available data shows about five-fold increase in the percentage of under 5 children sleeping under LLINs in 2010 (29%) compared to 2008 (6%). Similarly, the percentage of women taking two or more doses of suphadoxine pyrimethamine (SP) to prevent malaria has increased from 5% in 2008 to 13% in 2010 (Fig. 10)

Fig. 10: Trend in IPT and use of ITNs among U5 children in Nigeria (2003-2010)

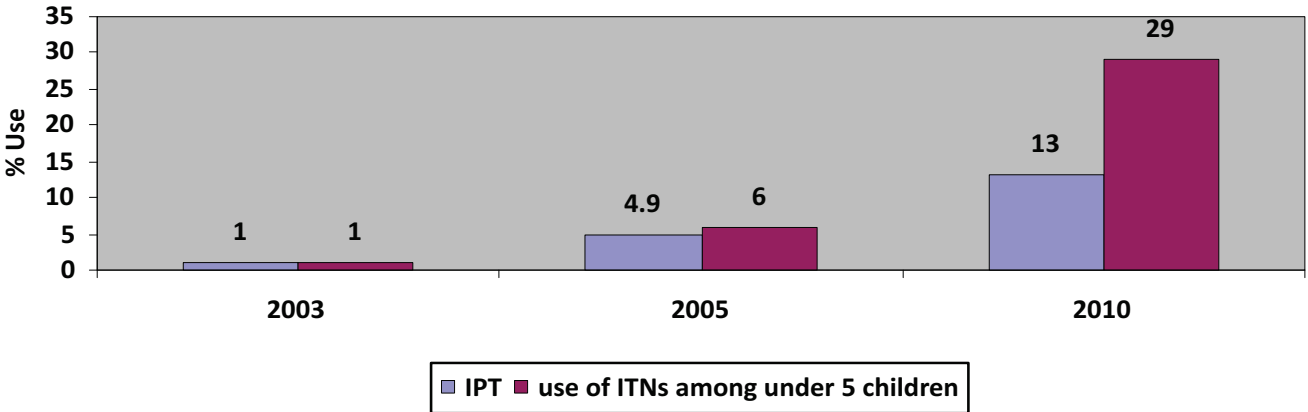
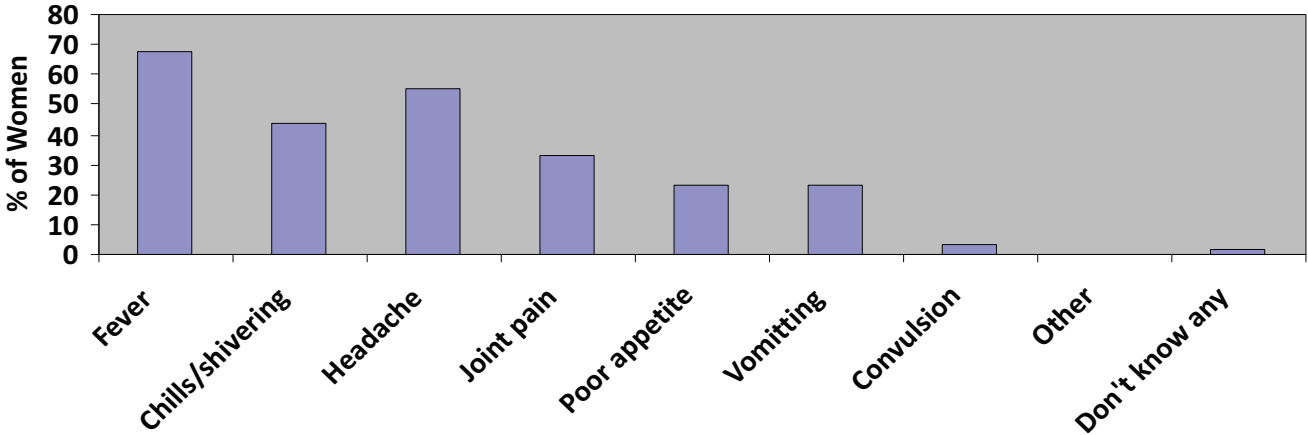


Fig. 11: Knowledge of Malaria Symptoms among women in Nigeria (MIS 2010)



Africare(CUBS) in collaboration with Bayelsa state provided financial support to indigent children while the objectives of the programme are as follows:

- To provide support for co-ordination and scale up HIV activities
- To mobilize & support Community based responses aiming to identifying, locating and protecting OVC
- To deliver a holistic service package focusing on multifaceted needs of OVC
- To address gender-related issues in OVC programming
- To document and disseminate successful approaches ie models of evidence based best practices
- **Capacity Building – CUBS in Bayelsa state engaged 4 CSOs KAN Foundation**
- **Girl Child Empowerment & Reproductive Health Synergy Care Initiative**
- **CUBS Programme – Girls in need of special protection due to extreme circumstances such as abuse, rape, trafficking & the like**
- **HIV/AIDS staying healthy including reproductive health & Nutrition**
- **Livelihood options and career guidance**
- **Association for Reproductive & Family Health (ARFH) through Global Fund OVC Projected has been supporting OVC in dire need in integrated care support through the CBOs/FBOs/Caregivers since 2007 to date**

6.2 Protection of Privacy – Article 10 (CRA Section 8)
Section 37 of the 1999 Constitution guarantees the rights of Nigerians to privacy including those of children. The **CRA** has further provided for the privacy of the Nigerian Child in the context of parental responsibility.

6.3 Social Security and Child Care Services –Articles- 26 & 27

6.3.1 Social Security and Child Care Services and Facilities
The National Child Policy was developed by the Federal Ministry of Women Affairs and Social Development, in collaboration with other stakeholders. The thrust of the National Child Policy is to provide a window of opportunities for the various levels of government, civil society groups, development partners and other stakeholders to contribute meaningfully to the promotion and protection of the best interests and welfare of the Nigerian Child. In developing the strategies that would be employed for its implementation, mechanisms that would provide 'protective, preventive, and transformative' social protection services for children were articulated.

Planned and specific social protection strategies that would provide income or consumption transfers to the poor, protect the vulnerable against livelihood risks, enhance the social status and rights of the marginalized were all indicated in the document. The strategies developed have been forwarded to the National Planning Commission to ensure their integrated into the NEEDS II document for effective implementation.

Akwa Ibom state built additional home in 2011 for street children for rehabilitation and re-integration with families

States Ministries of Women Affairs and Social Development (SMWASD) in collaboration with Child Protection Network (CPN) is strengthening Child Protection System in all the states.

- Physically and emotionally challenged children are being trained in crafts and other occupational jobs like carpentry, tailoring and weaving amongst others in the centres mentioned above.
- The **National Policy on Education** and the **Blue Print on Special Education** prescribe the welfare and care of physically and emotionally challenged children.
- The **National Reproductive Health Policy and Strategy** serves as an effective national platform for strengthening reproductive health activities in Nigeria and facilitates the achievement of improved health, well being, and overall quality of lives of all children and people of Nigeria including the physically and emotionally challenged children.
- The government, through the Immunization programme and Food Fortification Programmes, effectively puts in place annual plans to detect, control and eliminate the outbreaks of diseases affecting child health, growth and development. Disease that cause impairments and disabilities of all sorts in children, usually receives more attention.

However, the cumulative effect of the **Child's Rights Act, 2003 (Sections 11, 13 and 16)** guarantees the rights of physically and emotionally challenged children to dignity, self-reliance, active participation in community as well as access to training, health care and rehabilitation services.

6.1.4 Strategies for more effective intervention in favour of physically and emotionally challenged children.

- Capacity building for caregivers and teachers, with a view to ensuring self-actualisation for the physically and emotionally challenged children is ongoing.
- Intensification of advocacy activities by Government and Non-Governmental Organisations, to enlighten the general public on the plight of physically and emotionally challenged children.
- Provision of adequate budgetary allocations for programmes for the physically and emotionally challenged children.
- Monitoring and evaluation of progress achieved in the care for the physically and emotionally challenged children.
- Timely data collection on issues relating to physically and emotionally challenged children.
- Early detection of disabilities where feasible to be carried out *in utero*.
- Setting up more schools for the physically and emotionally challenged children.
- Creation of more specialised teacher - training colleges to handle children with special needs.
- Equipping public schools with modern facilities to meet the demands of children with special needs.

6.1.5 Programmes and services available to physically and emotionally challenged children.

Special educational facilities are the most comprehensive and well-focused services provided by Government to meet the special needs of physically and emotionally challenged children. The **National Policy on Education** provides for equal educational opportunities for all children, irrespective of their physical, mental or emotional challenges. Alongside the Federal and State Governments, UN Agencies like UNICEF, UNDP, WHO and UNFPA and CSOs have been especially active in the provision of education, welfare and rehabilitation services for physically and emotionally challenged children.

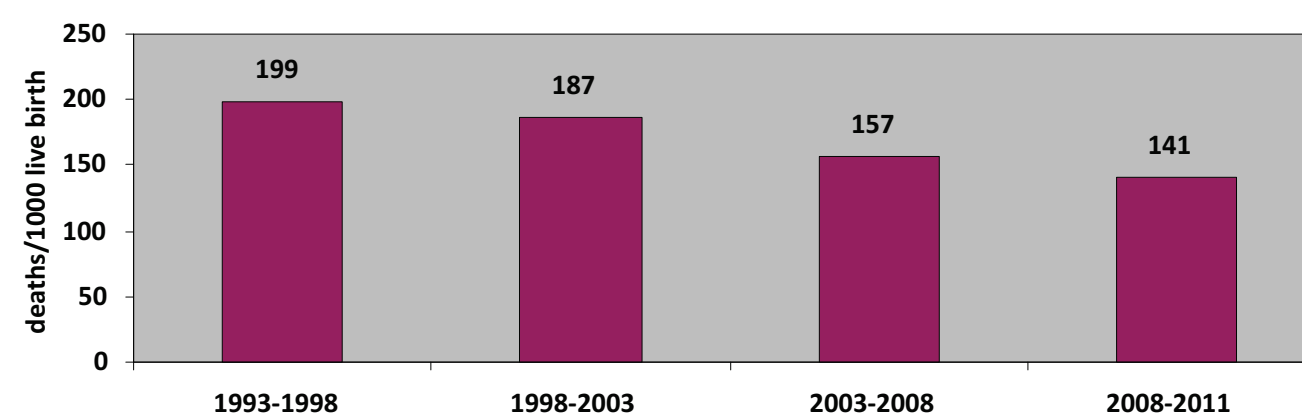
Kwara State Ministry of Women Affairs in collaboration with an NGO- Women & Child Watch Initiative organizes free eye operation to indigent children since year 2011 to date
Africare (CUBS) in collaboration with MWASD Bayelsa has provided financial support for indigent children in four (4) LGAs in the state from 2009 to date

a) Trends in Maternal and Child Health

Infant and child mortality rates are high, though decreasing. Infant and under five mortality rates have improved from 87 and 192 in 1990 to 75 and 157 in 2008 respectively. A further decline in under 5 mortality rate to 141 death per 1000 live birth has been reported in 2011 (Fig. 12). This trend seems likely to be related to the increase in coverage for vaccine preventable diseases reported earlier. The next NDHS will be conducted in 2013 and the expectation is a further decrease in the mortality rates.

There are also large differences in infant and child mortality rates across population sub-groups and zones. Children of the Poor living in rural areas, and children living in the north are more likely to die before they reach their fifth birthday than their richer, urban, and southern counterparts. Children and infants among the poorest 20% of the population are about three times more likely to die than those among the richest 20%. The poor living in rural areas and in the Northern regions, fare considerably worse than the rest of the population.

Fig. 12: Trends in Under 5 Mortality Rate in Nigeria (1993-2011)



Source: NDHS 2008, Lancet Survival Series, 2011

The progress towards improving maternal health, although on the increase, is still off track on achieving the MDG related targets. Maternal mortality ratio has improved from 704 in 1990 to 545 per 100,000 live births in 2008 and 147 per 100,000 live births in 2011. It is estimated that about 4 maternal deaths occur in Nigeria per hour, 90 per day, and 2,800 per month giving a total of about 34,000 deaths annually, with wide regional and local variations. Skilled attendance at birth and antenatal care are two major interventions proven to improve maternal survival. The coverage of these interventions has remained low over the years. Skilled attendance at birth improved marginally from 35.3% in 2003 to 39% in 2008. On the other hand, the proportion of women making at least 4 ANC visits during their last pregnancy rather decreased from 47.4% in 2003 to 44.8% in 2008. While recent data on these tracer indicators is lacking, it is expected that we would achieve increased coverage going by the achievements of the midwives service scheme.

b) Subsidy reinvestment and Empowerment Programme (Sure-P) Maternal and Child Health (MCH) Programme

The following achievements were made under the SURE-P Programme:

- Increased the supply of human resources for health and created jobs by recruiting 3,960 health care workers. They have now been deployed to provide quality antenatal, skilled birth delivery at birth and post-natal services for previously underserved rural, poor women accessing maternal, neonatal and child health services in 500 SURE-P supported primary health care (PHC) centres spread across the 36 states and FCT. These health care workers comprises:
 - 929 midwives;
 - 1,783 community health extension workers (CHEWs); and

- 1,248 female village health workers (for the North East and North West zones of the country. VHWs are being recruited in other zones.
- Selected 625 primary and secondary health care facilities across the 36 states of the country and FCT in collaboration with State and Local Government authorities. These health facilities will be transformed into model health facilities with funding support from the SURE-P MCH Programme for extensive renovation and infrastructural upgrade which will include provision of boreholes, toilet facilities, and solar-power infrastructure to guarantee 24 hours power supply. We have recently completed a Bill of Quantities Assessment of all 625 health facilities to determine the state of physical infrastructure upgrade required for their visible transformation.
- Initiated the supply of essential drugs, health commodities and medical equipments to all 625 SURE-P supported primary and secondary health facilities. The SURE-P MCH Programme is committed to ensuring that no programme beneficiary will be required to pay any user fees when accessing services at any SURE-P supported primary health care centre by ensuring all-year round availability and supply of basic maternal, newborn and child health drugs and health commodities. In addition, the right set of medical equipments will be available to provide quality antenatal, delivery and post-natal services to all programme beneficiaries accessing any SURE-P supported primary health care centre across the country.
- Successfully completed a Conditional Cash Transfer (CCT) Proof of concept Phase and State of Readiness Assessment for the follow-up pilot Programme:
 - A 3-week Proof of Concept Phase for the Conditional Cash Transfer (CCT) Programme was conducted in Kuje and Karu primary health care centres where a total of **520 women** qualified to benefit from cash support by fulfilling co-responsibilities (i.e. attending antenatal care, delivery under supervision of skilled birth attendance, receiving postnatal care and first immunization for baby, receiving family planning advice).
 - A 100% increase in antenatal care (ANC) clinic attendance was observed during the proof-of-concept phase.
 - We also discovered that charging of user fees and transportation costs were major barriers impeding the access of rural women to primary health care services and the implementation of the conditional cash programme (CCT) pilot programme would help address and overcome these barriers.
- A 2-week State of Readiness Assessment for the Conditional Cash Transfer (CCT) Programme was conducted in the eight selected pilot states namely: Anambra, Bauchi, Bayelsa, Ebonyi, Kaduna, Niger, Ogun, Zamfara states, and the Federal Capital Territory (FCT).
- In 2011, a target was set to save 800,000 lives by December, 21, 2014 and one million lives by 2015. Using the list tool, we have estimated a total lives saved of between 207,917 – 218,579 in 2012 alone, for the Save One Million Lives pillars/interventions using conservative assumptions and 2012 coverage rates. This demonstrates that we are on track to save more than one million lives by 2015.
- **Human Resources for Health**
Midwifery Service Scheme (MSS) – The sector had engaged, deployed and retained a total of 4,000 midwives and 1,000 Community Health Workers in over 1,000 Primary healthcare facilities. The Scheme which has been in operation ensures that women in rural and hard-to-reach areas are being attended to by skilled birth attendants during childbirth. Maternal Mortality ratio has reduced from 545/100,000 live births in 2008 to 487/100,000 in 2011 (Lancet 2011). This Scheme is now the largest single health human resource intervention of its kind anywhere on the African continent.

The rate of disability of children per 1000 is 3.1 and 3.0 for ages 0-5 and 6-11 respectively. But the rate of disability in these age groups does not vary greatly by sex. For ages 12-17 the rate of disability increases from that in childhood, to 4.2 disabled persons per 1000. The rate is higher among male than female. (See tables 36 and 37).

Table 36: Number and percentage distribution of persons 6-24 with disability by educational attainment

Total Population 6-24 with Disability	Number	Percentage
Literacy Status		
Pop. 6-24 with disability	2947	100
Illiterate	1381	46.9
Literate	1566	53.1
Educational Attainment		
Primary	689	44
JSS/Modern	212	13.5
SSS/Tech	211	13.5
Poly/University	33	2.1
Others	409	26.1
NR	12	0.8
Total	1566	100

Source: Nigeria 1991 Population Census-Post Enumeration Survey (PES) by NPopC/UNFPA 2002

Table 37: Level of disability among population 0-17 by age and sex

Age Group	Population			Disability			Disability Rate /1000			
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Ratio
0-5	8,911,055	8,524,344	17,435,399	28,6222	25,017	53,639	3.2	2.9	3.1	110
6-11	8,356,153	7,937,909	16,294,062	24,966	23,495	48,461	3	3	3	100
12-17	6,125,750	5,869,711	11,995,461	27,814	22,842	50,655	4.5	3.9	4.2	115

Source: Nigeria 1991 Population Census-Post Enumeration Survey (PES) by NPopC/UNFPA 2002

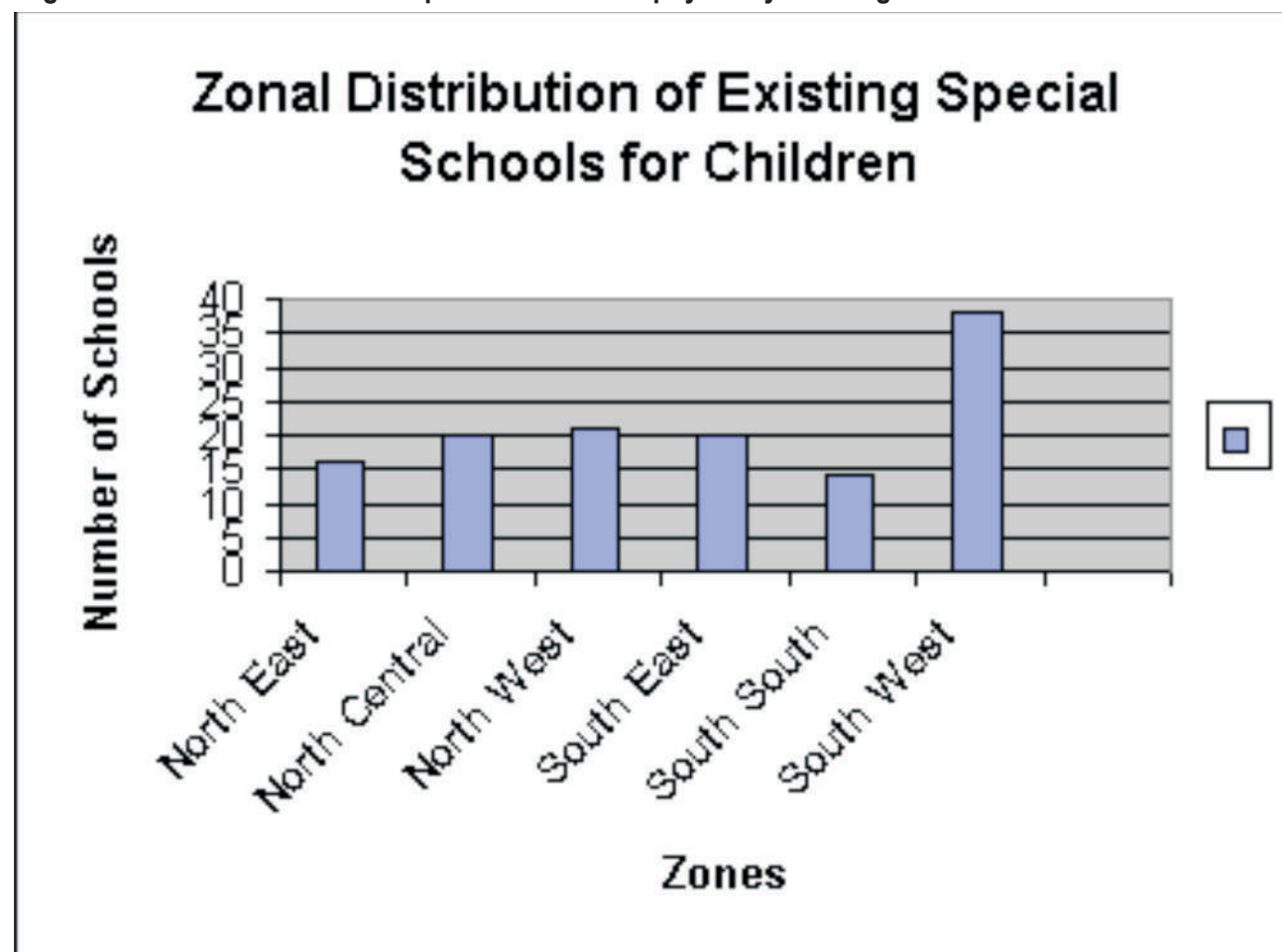
6.1.2 Measures to protect the rights of physically and emotionally challenged children:

- Most states have special education and/or rehabilitation centres.
- In some states, physically and emotionally challenged children have access to scholarship as well as, free medical care, school bus, recreation facilities and book subsidies.
- They are provided with support gadgets like crutches, wheel chairs, tricycles, hearing aids, and Braille machines to facilitate their development.
- Special sports are designed for their convenience and active participation.
- In some states some of the physically challenged children are mainstreamed into normal school system

6.1.3 Special measures and policies that relate to care of physically and emotionally challenged children

- Establishment of schools, homes, and rehabilitation centres in most states for the physically and emotionally challenged children and others in difficult circumstances, is ongoing by government, non-governmental organisations and Faith Based Organisations. The rehabilitation centres provide care and emotional stability for these children.

Figure 18: Zonal distribution of special schools for physically challenged children



Source: Federal Ministry of Education (Women and Basic Education, Primary and Secondary Education Departments Abuja) 2005

Table 35 below shows the population distribution of physically and emotionally challenged children by literacy status. The rate of literacy of children varied with age and sex. About half of the physically and emotionally challenged children were not literate. The female population were less literate than male children.

Table 35: Disability by age, literacy status and educational attainment

Age	Total Disability	%	Literate	%	Not Literate	%
6-9	161,631	100	91,942	56.9	69,689	43.1
10-11	47,510	100	23,526	49.5	23,984	50.5
12-17	50,302	100	32,686	65	17,617	35
Male						
6-9	76,292	100	47,564	62.3	28,728	37.7
10-11	24,446	100	12,517	51.2	11,929	48.8
12-17	27,605	100	18,890	68.4	8,715	31.6
Female						
6-9	85,339	100	44,379	52	40,961	48
10-11	23,064	100	11,0009	47.7	12,055	52.3
12-17	22,698	100	13,795	60.8	8,902	39.2

Source: Nigeria 1991 Population Census-Post Enumeration Survey (PES) by NPopC/UNFPA 2002

• Financing For Health

Community Based Health Insurance – The National Health Insurance Scheme (NHIS) has been successfully established in the formal sector and is in operation across the country. In addition, under the Transformation Agenda of President Goodluck Jonathan, activities under the NHIS have been scaled up significantly in order to ensure that more Nigerians sign on to the scheme so that out-of-pocket expenses on health will reduce, thereby freeing up resources for other important things.

c) Provision of Health Services

The provision of health services is the responsibility of Federal, State, and Local Governments in collaboration with the private sector and the civil society. The services are organised in a three-tier health care system:

- Primary Health Care, is largely the responsibility of Local Governments, with the support of the State Ministries of Health. Services at this level include: health education; nutrition information, safe water and sanitation, reproductive health (including family planning); immunisation against five major infectious diseases; provision of essential drugs; disease control and treatment of common illnesses. Nigeria has also established a minimum health care package that ensures minimum health interventions and provision for children at this first level of health care.

- Secondary Health Care, which is the responsibility of the State Governments provides specialised services to patients referred from the primary health care level, and it is the responsibility of the State governments;

- Tertiary Health Care, which provides highly specialised, referral services from the primary and secondary levels of health care delivery system, is situated in the domain of the Federal and State Governments.

- The policy on public private partnership in health encourages the public-private mix in the provision of health services to Nigerians.

- Private hospitals are being supervised by State Ministries of Health to ensure that they maintain minimum standards in the country.

d) Strengthening the supply of commodities for maternal mortality reduction:

The government has come up with several strategies but not limited to the following:

- Supply of Antishock garment. This is a specially made garment designed for management of obstetric hemorrhage during and after deliveries. These are currently being piloted in some states.
- The Ministry recently procured the gold standard drug called magnesium sulphate which is used in the management of pre-eclampsia and eclampsia. Sensitization meetings on the use of the drug have been conducted and the use of the drug will soon commence.
- Purchase of safe motherhood (mama) kits pilot to solve the problem of out of stock of consumables used during delivery was embarked upon in some states.
- The Ministry also procured midwifery kits which are currently being used for the midwives services scheme.
- Midwifery kits consumables have also been procured distributed to all the Federal Tertiary Institutions.
- Development and revision of some important policy documents.

The following targets were set by the National Policy on Population for Sustainable Development:

- Reduce the national population growth rate to 2 percent or lower by 2015;
- Reduce the total fertility rate by at least 0.6 children every five years by encouraging child spacing through the use of family planning;
- Increase the contraceptive prevalence rate for modern methods by at least two percentage points per year

through the use of family planning;

- Reduce the infant mortality rate to 35 per 1,000 per live births by 2015;
- Reduce the child mortality rate to 45 per 1,000 live births by 2010;
- Reduce the maternal mortality ratio to 125 per 100,000 live births by 2010 and to 75 by 2015;
- Achieve sustainable universal basic education as soon as possible before 2015;
- Eliminate the gap between males and females in school enrolment at all levels and in vocational and technical education by 2015;
- Eliminate illiteracy by 2020;
- Achieve at least a 25 percent reduction in HIV/AIDS adult prevalence every five years.

e) Progress towards target

- The development and adoption in March 2010 by the Federal Republic of Nigeria of the National Strategic Health Development Plan (NSHDP) 2010-2015 was highly participatory.

- The NSHDP will also serve as the overarching framework for health development in Nigeria. It draws inspiration from 36 States and the FCT Health Development Plans (SHDP). It has the following eight strategic priority areas:
 - Leadership and Governance for Health;
 - Health Service Delivery;
 - Human Resources for Health;
 - Financing for Health;
 - National Health Management Information System;
 - Partnerships for Health;
 - Community Participation and Ownership; and
 - Research for Health.

- Highly cost effective services in dealing with the major health challenges in Nigeria will be made available. As such a set of specific “high impact services” would constitute a core part of the service delivery to the Nigerian population. These services are specified in the NSHDP and will be implemented in an integrated manner.

- **Results Matrix:** A Framework has been developed to serve as a guide to the Federal, State and LGAs in the selection of evidenced-based priority interventions that will contribute to achieving the desired health outcomes for Nigerians.

The Federal, States and LGAs have used this framework to respectively develop their estimated budget plans through participatory approaches to reflect their context and prevailing issues.

- **Monitoring and Evaluation:** The NSHDP Results Matrix provides an excellent summary of key performance indicators to assess the progress of the National Plan. It has a total of 52 indicators covering an essential combination of indicators on impact, outcomes, outputs, process and inputs. A Monitoring and Evaluation (M&E) Framework for the National Strategic Health was developed to encourage the participation of different actors (with the public sector, private-for-profit, private-not-for-profit, NGOs, faith-based organizations, etc.) in harmonizing their data and to be mutually accountable for results at their respective levels.

In order to complement the National M&E Framework, a generic sub-national M&E framework was developed which the States and LGAs adapted to their own contexts, although indicators selected for sub-national are different from those of the national level.

- The total estimated costs of the NSHDP for the six year period 2010-2015 is USD 26.653 billion with an annual cost and investment requirement of \$4.442 billion.

PART SIX

Protection Rights of the Child

6.1 Right to Protection Against all Forms of Abuse, Exploitation, Discrimination and Disadvantage

6.1.1 Children with Disability: Status of the mentally and physically challenged child

The *Nigerian Constitution*, under **Sections 16 (2) (d) and 17 (3)**, recognizes physically and emotionally challenged children as a vulnerable group that needs to be supported financially, materially, technically and be protected against all forms of exploitation and abuse.

Types of disability for children aged 0-14, and for females of all ages, as reported by the 2006 census are as follows:

- Deafness
- Deaf and Dumb
- Blindness
- Crippled
- Mental Disability

Special education facilities are the most comprehensive services provided by the States to meet the peculiar needs of children with severe disabilities. The **National Policy on Education (2004)** makes provision for such education, stating that it is intended to equalise educational opportunities for all children, irrespective of their physical, mental or emotional challenges. Alongside the Federal and State Governments, NGOs and Religious Organisations have been active in the provision of education, welfare and rehabilitation services for the physically challenged children. The various governmental and non-governmental organisations also operate vocational training centres, special

Table 34: - Percentage breakdowns of types of disability of children 0 - 14 years

Age group	Any challenge	Crippled or Lane	Dumb	Deaf	Blind	Other
0-4	0.3	42.2	7.4	9.9	3.1	39.4
5-9	0.4	36.1	21.3	18.0	2.7	29.8
10-14	0.5	30.7	15.4	18.7	12.4	31.6

Source: 2006 CWIQ (NBS)

There are several institutions providing special education for physically challenged children. Although schools for those with visual impairments are prominent, there is a marked zonal disparity in the distribution of these schools.

The South West has the largest number of schools for physically challenged children (**see Figure 18**). Overall, the number of institutions is still insufficient to meet the educational needs of physically and emotionally challenged children.

(MDGs). It targets all the sectors of education and addresses such thematic areas as:

- Planning, coordination and resource mobilisation.
- Prevention of new infection.
- Impact mitigation.
- Enabling policy environment, monitoring and evaluation.
- Response to Orphans and Vulnerable Children (OVC) by the FME in the National HIV & AIDS is ensuring the provision of increased access to education for OVC in the education sector.

- The Ministry also collaborated with relevant stakeholders in achieving the following:
 - Providing support to over 200 OVC in Benue, Kaduna, and Nasarawa States through the collaborative efforts of the FME, some States' Ministries of Education, FBOs and NGOs.
 - Inclusion of OVC issues in section 8 of the revised National Policy on Education (2007).

- FME has built the capacity of 60 guidance counsellors and health care providers in Federal

Government Colleges in the South East and North West geo political zones on psycho-social support to students infected with HIV & AIDS.

5.2 Child's Right to Leisure, Recreation and Cultural Activities – Article 31 (CRA Section 12)

Nigerian children's rights to leisure, play and involvement in culturally related activities are enshrined in the National Policy on Education.

Nigerian children from all States and Local Government Areas, are brought together to attend national events like the Children's Day Celebration, (May 27 every year), and the National Children's Festival for Arts and Culture (NACHIFEST). During such national programmes, selected children have the opportunity to participate in government-sponsored activities such as Holiday Camps, Creative Arts Competitions and Exhibitions, Essay Competitions and Cultural Displays.

These activities are replicated in all States and Local Government Areas in the country. Across the rural areas of the country, children's participation in leisure, play and cultural activities are guaranteed in the rich traditional and cultural socialisation processes of the respective ethnic and religious groups.

In all State capitals and the major urban cities, there are amusement parks and gardens specially designed for children to enhance their rights to leisure and play.

5.3 Freedom of Association and Peaceful Assembly - Article 8, (CRA Section 6)

The Constitution of Nigeria (1999) guarantees the right to freedom of association and peaceful assembly to all its citizens including children. In addition, the **Child's Rights Act** contains adequate provisions to ensure freedom of association and assembly by all children. These provisions are given practical effect by the formation of clubs like the Girls' Guide, Boys' Brigade, Boys' Scouts, Child Rights and Debating Clubs. Frequent inter-schools sporting activities are other ways of ensuring the freedom of association and assembly by all Nigerian Children. Currently, survey is ongoing by the Rehabilitation Departments of the Federal and State Ministries of Women Affairs and Social Development to assess and provide data on freedom of association and peaceful assembly among children with special needs.

This gives an annual cost per capita of USD 31.63. Details of the specific earmarks of each priority areas are in table 15 below.

Table 15: Estimated Cost of the NSHDP 2010-2015

Priority Area	US\$	Percent
Leadership and Governance for Health	183,914,685	0.69%
Health Service Delivery	12,975,047,689	48.68%
Human Resources for Health	11,097,841,997	41.64%
Financing For Health	1,459,843,402	5.48%
National Health Information System	277,367,996	1.04%
Community Participation And Ownership	159,420,543	0.60%
Partnerships for Health	170,016,518	0.64%
Research For Health	329,654,407	1.24%
Sum	26,653,107,239	100.00%

The overarching goal of the NSHDP is to significantly improve the health status of Nigerians through the development of a strengthened and sustainable health care delivery system.(See table 16 below)

Table 16: Key NSHDP Indicators and Targets

S/N	Indicator	Baseline	Targets		
			2011	2013	2015
1.	Life expectancy at birth	47 years	55 years	63 years	70 years
2.	Under-five mortality rate	157/1000 LBs (NDHS, 2008)	130/1000 LBs	103/1000 LBs	75/1000 LBs
3.	Infant mortality rate	75 (NDHS, 2008)	60/1000 LBs	45/1000 LBs	30/1000 LBs
4.	Proportion of 1 year old immunized against measles	41.4 (NDHS 2008)	60%	80%	95%
5.	Prevalence of children under five years of age who are underweight	27.1 (NDHS, 2008)	24%	20%	17.90%
6.	Percentage of Children under 5 sleeping under insecticide -treated bed nets	5.5 (NDHS, 2008)	24%	42%	60%
7.	Maternal mortality ratio	545/100,000 LBs (NDHS 2008)	409/100,000 LBs	273/100,000 LBs	136/100,000 LBs
8.	Adolescents Birth Rates	126 per 1000	114/r 1000	102/1000	901/1000
9.	HIV prevalence among population aged 15-24 years	4.2% (ANC Sentinel Survey)	3.2%	2.1%	1%

f) National Health Management Information System

In her bid to bring together national stakeholders to discuss multi-sectoral approach to advancing the use of ICT for improving healthcare delivery and other health services, FMOH recently organized a National Conference on ICT in Health in Nigeria. Under the African Union Initiative, there is a Tele-medicine Programme being supported by the Indian Government/Firm with the University College Hospital (UCH), Ibadan as Regional Focal Centre and Lagos University Teaching Hospital (LUTH) as a National Centre. These Hospitals are connected to other Hospitals in Africa for the telemedicine and medical e-learning programmes.

g) Partnership For Health

Collaboration with Nigerians in Diaspora – The Sector has strengthened its collaboration with Nigerians in Diaspora. That has led to the signing of Memorandum of Understanding (MoU) between the Federal Ministry of Health, Medical Association of Nigerian Specialists Across Great Britain and Association of Nigerian Physicians in America on Education and Training, Research for Health, Service Delivery and Skill Transfer, Quality Assurance and investments. This has led to the donation of medical books, equipment and drugs.

- Federal Neuro Psychiatric Hospital, Kaduna (Commissioned a new Male Medical Ward, New Female Medical Ward, Laboratory Block, Child and Adolescent building, reconstructed Female Ward, Medical Library and Occupational Therapy Complex)
- Federal Neuro Psychiatric Hospital, Calabar (Commissioned the new Medical Block and the rehabilitated Occupational Therapy Unit).
- Federal Medical Centre, Makurdi (Projects completed and awaiting commissioning (Intensive Care Centre, Laboratory block, Male & Female surgical Wards, Laboratory Block at Outreach Centre, Male and Female Wards at Outreach Centre and Assorted medical Theatre Equipment).

h) Disease Control and Surveillance

International Vaccine Summit: The first International vaccine summit was held in Abuja on 16th & 17th April, 2012. The objectives of the summit were to:

- Articulate a national consensus statement and call to action for the achievement of universal vaccine coverage for all Nigerian children by the year 2015, as part of overall efforts to achieve MDG 4.
- Raise pledges of commitments and action from Nigerian leaders across political, business, traditional and religious spectrum for vaccines and immunization.
- Establish action plans and accountability framework to ensure that the resolutions and commitments made at the summit are fulfilled.

i) **Polio Eradication:** In our effort to eradicate polio, the President, Federal Republic of Nigeria has doubled the funding of Polio Eradication activities to 4.7 billion Naira. The Presidential Taskforce on Polio Eradication has been constituted and inaugurated under the Chairmanship of the Honourable Minister of State for Health. A new robust Polio Eradication emergency plan has been developed with an accountability framework. All States Governors and the Minister of FCT have re-committed to the Abuja commitment and in the last one year have actively and personally led the quarterly Supplementary Immunization Days (SIDs) in their respective states.

The Federal Ministry of Health also commenced a corrective survey service in collaboration with Indian authorities in order to restore the functioning of affected limbs for victims of polio.

j) **Cancer Control:** In continuation of its commitment to improve prevention of cancer and early management, the Ministry has established six additional screening centres for common cancers such as cancer of the breast, cervix and prostate as follows:

- Federal Medical Centre, Gusau
- University of Port-Harcourt Teaching Hospital, Port-Harcourt
- National Obstetric Fistula Centre, Abakaliki
- Federal Medical Centre, Keffi
- Federal Medical Centre, Ebuta Metta

5.1.4 Vocational Information and Educational Guidance

- The Federal and State Ministries of Education subscribe to the policy of running Guidance and Counselling units in secondary schools. Most secondary schools in urban areas across the country offer such services to cover vocational information, and educational guidance for students.
- For primary schools, the dearth of qualified staff is a major hindrance, and most children begin to access vocational information and guidance only at secondary school level.
- The UBE Commission has initiated steps for the training of counsellors and para- counsellors, and the production of relevant manuals to be used in all primary schools in the country.
- Former Federal Trade Centres, which were mainly for training artisans, have now been transformed to Federal Science and Technical Colleges, with their programmes now incorporated into the UBE programmes. This opens the way to produce qualitative low and middle level manpower for the country.
- The Government has introduced Vocational Educational Institutes (VEIs) and Innovative Enterprises Institutions (IEIs). Both bodies seek to incorporate into the educational curricula, at the secondary and tertiary levels of education, entrepreneurship programme.
- Under a Public Private Partnership (PPP) licences have been granted to 6 proprietors for VEI and 36 proprietors for IEI in 2009.

5.1.5 Children Exclusion from School

- The DFID/UNICEF assisted by funding the Girls Education Project in six States (Bauchi, Borno, Jigawa, Sokoto, Niger and Katsina). Funded by DFID to the tune of £26 million, this intervention provided a great leverage for improving access and participation of girls in basic education in Northern Nigeria.
- Integration of subjects such as English, Mathematics, Basic Science and Social/Life Skills Education into traditional Qur'anic School Curriculum also provide opportunity for Almajiri children to receive quality basic education alongside the traditional Qur'anic Education.
- The FGN ownership of the Girls Education Project and the commitment of the MDG Debt Relief Allocation to basic education to address gender issues was also a major policy push to address children excluded from school.
- Other noticeable efforts in reaching excluded groups include: the programme on girl-child education in some Northern States and the Non-Formal Education (NFE) programme for street children in urban areas of Sokoto, Kaduna, Lagos, Ibadan, Aba, Onitsha and as well as for the Qur'anic school pupils in the Northern States.
- The special NFE programmes are run mostly by some NGOs and State Agencies for Mass Education with considerable assistance from UNICEF.
- The National Policy on Education has approved the integration of formal education curriculum into the Islamiya/Quranic Education.
- There is also a radio programme in 14 local languages, and primers have been developed for the non-formal sector.
- NGOs collaborate with various States and Local Governments in working with children excluded from schools.
- The FMWA&SD has established two (2) Drop-In-Centres in Ebonyi and Sokoto States to enable children who drop out of the formal school system, to acquire basic literacy, numeracy as well as life skills.

5.1.6 Education Opportunities Provided for Children Living with HIV/AIDS

- In 2006 the HIV/AIDs unit of FME developed a Strategic Plan for tackling HIV/AIDS for 2006 – 2010 target periods being the National Education Sector HIV & AIDS Strategic Plan –NESP- (2006-2010).
- The NESP aligns with the National Policy on Education (NPE), National Policy on HIV & AIDS, National Economic Empowerment and Development Strategy (NEEDS) and The Millennium Development Goals

Primary School Enrolment Rate by Gender from 2006 -2008

- The 2006 National School Census (NSC) revealed a Net Enrolment of 63,144,477. While the males accounted for 33,928,504, females are **29,215,973** (Table 27)

Table 32: Primary school enrolment by gender from 2006 -2008

Year	Female	Male	Total
2006	9,456,811	10,761,059	20,217,870
2007	9,948,567	11,683,503	21,632,070
2008	9,810,595	11,483,942	21,294,537
TOTAL	29,215,973	33,928,504	63,144,477

Source: FME/UBE 2009 National School Census

School Enrolment and Expenditure (2006-2008)

- Between 2006 and 2008, the primary school enrolment is as shown in table 32, and the sum of N109,780 billion was budgeted for basic education out of which the sum of 45.8bn was disbursed to the 36 States and FCT

Primary School Completion Rate by Gender and Geo-Political Zones (2006-2007)

- Table 33 shows the primary school completion rate between 2006 and 2007 being 12 percent. The result shows 10.5 percent completion rate in the rural areas, and 16.1 percent in the urban areas. The South East zone had the highest primary school completion rate of 22.9 percent; followed by South West (18.6 percent) while the least rate (5.8 percent) was recorded in the North West.

Table: 33: Primary school completion rate by gender and geo-political zones (2006-2007)

Background Characteristics	2006	2007
National/ Over all	12.0	-
SEX		
Male	-	38.2
Female	-	33.6
National	12.0	-
Sectors		
Urban	16.1	49.5
Rural	10.5	31
Zones		
North East	6.3	-
North West	5.8	20.7
North Central	12.8	41
South East	22.9	17.6
South West	18.6	62.1
South-South	17.2	49.8

Source: *NBS, CWIQ 2006, MICS, 2007

- Abubakar Tafawa Balewa Teaching Hospital, Bauchi.

k) HIV/AIDS Control: In the year 2012, the Federal Ministry of Health achieved the following milestones towards further improving:

- Signed the implementation Plan for the Framework Partnership with the United States Government. Commenced the decentralization of ART services to the primary health care level. The Ministry is an implementing partner under the Global Funds Round 8. Under this grant, PHC health workers are being trained on Voluntary Counseling and Testing, prescription and administration of anti retroviral drugs and general care of persons living with HIV/AIDS.
- In the same vein, the Center for Disease Control (CDC) project PHAID is domiciled in the agency. The project is a vehicle designed to take HIV/AIDS control to PHCs across the country. Health facilities that are not being covered under the GLOBAL fund project are being covered by the PHAID project. Recently PHC staff in 18 states of the federation were trained on various aspects of HIV/AIDS management (data opportunistic infections associated with HIV).

l) Roll Back Malaria

- Additional 7 million LLINs distributed bringing the total to 51.7 million.
- Procurement process for massive nationwide larviciding commenced.
- Release and dissemination of the 2010 Malaria Indicator Survey.

m) Guinea worm Eradication: For more than 3 years, there has been no case of guinea worm infestation and we are making all efforts to ensure that Nigeria receives certification as being Guinea worm free before the end of the year.

n) TB Control: Commissioning of the new Testing and Treatment Centre for Multi-Drug Resistant Tuberculosis (MDR-TB) in Lagos.

Commissioning of the new Respiratory Intensive Care Unit (Avian Flu and other viral diseases) at University of Abuja Teaching Hospital, Gwagwalada.

o) Other initiatives between January 2013 – May 2013

National Health Bill: The Federal Ministry of Health has continued to pursue the passage of the National Health Bill into law. In consultation with the National Assembly, the bill has been further revised before and after the Senate hearing in February 2013.

Improving protection of human research participants: through its National Health Research Ethics Committee, the FMOH has continued to foster the conduct of scientifically sound and ethically compliant health research in Nigeria. In this regard, the 2nd Forum of the Chairman of Health Research Ethics Committees of Nigeria was held in February 2013 to deliberate on how to better improve protection of human research participants.

Scale up of Health Insurance Coverage – In 2013 additional communities from 11 States have subscribed to the Community Based Health Insurance Scheme. These are Anambra, Bauchi, Borno, Ebonyi, FCT, Kaduna, Katsina, Kogi, Kwara, Lagos and Ogun.

p) Strengths of the National Health System

Strong political will and support

The support that the Federal Ministry of Health enjoys since the beginning of this administration has been unprecedented. At the Federal Level for the first time, Mr. President rallied and got all State governors and the Honourable Minister of FCTA to sign a Declaration to improve health outcomes in Nigeria; he also launched the National Strategic health Development Plan and approved it as the compass for health development in Nigeria including the NV20:2020 and the Transformation Agenda.

Partners/Donor Support

In Nigeria, the health sector is the one in which the highest proportion of international agencies are active. They comprise the multilaterals such as the World Health Organisation (WHO), UNICEF, UNFPA, UNAIDS, World Bank, African Development Bank; the bilateral which include DFID, USAID, CIDA, JICA, NGOs including Bill and Melinda Gates Foundation, MacArthur Foundation, Packard Foundation etc. These international agencies strongly cooperate with the government and provide significant technical and financial resources in the sector. It is estimated that they provide about 4% of health expenditure in the health sector. The highlight of collaboration between government and the development partners was evidenced with the collective effort to develop the National Strategic Health Development Plan (NSHDP). It is noteworthy that the partners also signed an international health partnership and related initiatives (HP+) compact to affirm their commitment to the provision of predictable and sustainable funding for the implementation of the NSHDP.

The World Health Organisation (WHO) has an office in every state of Nigeria while most of the other agencies also have structures and are active in more than one state. Through such decentralized presence, the partners are able to work with government not only at the national level but also at the state and local levels.

Potential for Sufficiency in Human Resources for Health

Nigeria has one of the largest pools of human resources for health in Africa comparable only to Egypt and South Africa. By the end of 2012, there were 66,162 doctors, 148,343 nurses and 101,709 midwives, 15,911 pharmacists registered in the country. Compared with most of the other countries in the region. Nigeria has a high human resources for health production rate due to the availability of many medical schools, schools of pharmacy, and each of the 36 states has at least one school of nursing and midwifery as well as one school of health technology. Each of these institutions turns out graduates every year.

Promising Health care Financing Arrangements for protection of the Poor

The National Health Insurance Scheme (NHIS) was set up by Act 35 of 1999. Health sector reform in 2004 reinvigorated the drive to push the actualization of Health Insurance (a contributory pre-payment method) as a veritable programme for improving the health of Nigerians by making healthcare easily available, affordable and accessible. It is a social health insurance scheme. Various programmes or products were developed to meet the needs of the different groups/sectors of the population.

The Formal sector social health insurance programme (public sector), targeted employees under the Federal government and their dependents and was flagged off in 2005.

NHIS-MDG/MCH: A major component of the NHIS that holds great promise for women and children is the MDG/NHIS project for pregnant women and under 5s. This project ensures the provision of free health services to pregnant women and under 5s in twelve states of the federation. Plans are on to extend the coverage to other states of the federation.

Community Based Social Health Insurance: CBHI is a form of private health insurance whereby individuals, families, or community groups finance or co-finance costs of health services. CBHI was designed for people living in the rural area and people in the informal sector who cannot get adequate public, private, or employer-sponsored insurance. We intend to use CBHI to cover people employed in the informal sector and in the rural area especially women and children that constitute majority of the highly vulnerable groups. The CBHI was flagged off in 2011 by Mr. President at Isanlu, Kogi State.

Since then, many communities in eleven states have keyed into the programme. The States are: Anambra, Bauchi, Borno, Ebonyi, FCT, Kaduna, Katsina, Kogi, Kwara, Lagos and Ogun.

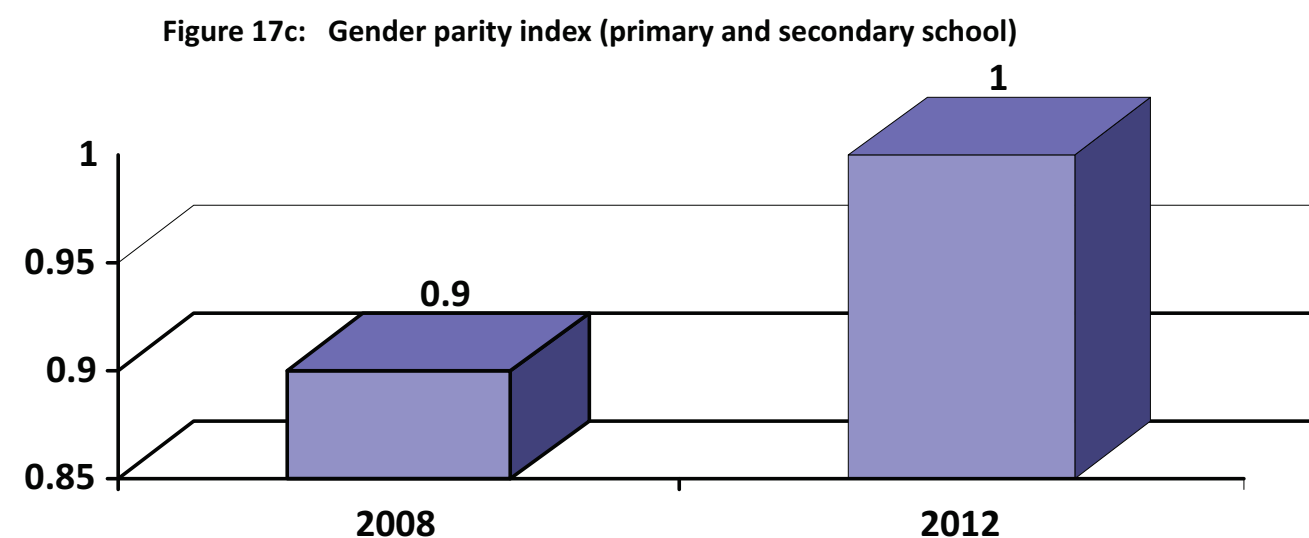
Three states, Bauchi, Cross-River and Enugu are participating in the Health Insurance Programme. Unfortunately, payment has not been consistent thus affecting implementation of the programme in those States. Other programmes include tertiary institutions social health insurance and road transport health insurance programmes. The scheme has extended health insurance cover to over 6,806,687 Nigerian through one payment mechanism or the other.

Table 31: - Nigeria Gender Fact Sheet: - (2010-2011)

Indicators	Male	Female	Difference
<u>Population & Families</u>	%	%	%
1. Population 2006	49	51	2
2. Early Marriage	7.2	92.8	85.6
<u>Health</u>			
3. Percentage living with HIV Aids (Estimate 2010)	44.3	55.7	11.4
4. Life Expectancy (HDR 2008)	48	52	4
<u>Education</u>			
5. Youth Literacy in Any Language	86.0	79.0	7
6. Adult Literacy in Any Language	68.5	60.0	8.5
7. Adult Illiteracy	31.5	40	8.5
8. Primary School Enrolment (2010)	53.4	46.6	6.8
9. Secondary School Enrolment (2010)	54.2	45.8	8.4
10. Tertiary Enrolment:			
NCE (2009)	51.1	48.9	2.2
Polytechnic (2010)	72.3	27.7	44.6
University (2010)	61.6	38.4	23.2
<u>Power and Decision Making</u>			
10. Ministers (2011)	757(20)	23 (6)	54 (14)
11. Parliamentary Seats both houses (INEC)	93.6	6.4	87.2
12. State House of Assembly (INEC 2011)	94.5	5.5	89%
13. Permanent Secretaries (MDAs 2010)	96.5	3.5	93
14. Directorate (MDAs 2010)	90.8	9.2	81.6

Source: - NBS, Abuja (2011): - Gender Statistics Newsletter, at P.6

MDG indicator 3.1 Ratio of girls to boys in primary and secondary education



Source: National Bureau of Statistics, Abuja: MDGs Performance Tracking Survey Report 2012 (Fig. 4.2 P.25)

The disparity between boys and girls at both primary and secondary school has been eliminated (indicator Figure 17c). Impressively, the report (table 5.5) shows that gender parity index (primary and secondary education) was a ratio of 1.0 in 2012 as against 0.90 in 2008. With this, the country has achieved parity in both primary and secondary education ahead of the 2015 terminal date.

Using rural-urban and wealth metrics, shows that the country has impressively achieved complete and total parity in both primary and secondary education. The report (table 5.5) shows that gender parity index in primary education in the urban area was 1.03 and 0.99 in the rural area; while parity index in secondary education was 1.03 in the urban area and 0.99 in the rural area. Gender parity in primary education in the poorest household was 0.96 and 1.01 for those in the richest household. Parity in secondary education was 0.93 and 1.00 in the poorest and the wealthiest households, respectively.

Table 31 on page 114 reveals a gender fact sheet in relation to 2010 literacy rate, gender parity in primary, secondary and tertiary education in Nigeria (row 3 of the table):

Table 17: Distribution of lives covered under different programmes of NHIS

Programme	Number Covered	Number expected to be covered	% Covered
Public Sector (Worker under employment of the federal government and their dependents, military and police) Health Insurance	Principals = 853,537 Dependents = 1,610,408 Total = 2,463,945	870,956	98%
Community Based Health Insurance (Pregnant Mothers and Children under five NHIS MDG/NHIS 6 LGAs in the 6 Zones) and other community Social Health Insurance Programmes	NHIS-MDG/NHIS=1,433,019 Isanlu = 2,000 Katsina = 17,200 Total = 1,452,219	As communities enroll	-
Tertiary Health Insurance	382,415	As Institutions enroll	-
Road Transport Health Insurance	1,900,000	As operators enroll	-
States Health Insurance (Cross River and Bauchi)	Cross River = 41,060 Bauchi = 66,912 Total = 95,000	As states enroll	-
Private Health Insurance	500,136	As individuals enroll	-
Grand Total	6,806,687		

In countries that have attained substantial progress towards universal coverage with health insurance, their health insurance schemes are being supported mainly from government financing or through donors as is the case in Kenya, Ghana and Rwanda. Making health insurance mandatory/compulsory through legislation with the government paying for the vulnerable groups has been the main agenda for reaching Universal Health Coverage (UHC). It requires *strong policy will* for funding from the various leaderships at the various government. Mandatory health insurance requires the widest cross subsidies possible.

Suggested sources of funds to finance mandatory health insurance:

- Contributions from formal sector employees (both public sector and private sector). These can be arranged as a single pool or maximum of two pools
- Contributions from the formal informal sector. These include those employers who by nature of their number do not qualify to be called Organised Private Sector based on the CAMD 1990, other interested Nigerians, foreigners etc. These contributions will be pooled with the formal sector contributions for maximum cross subsidy and to reduce adverse selection. Family enrolment is also encouraged to further check adverse selection.

a) The Informal sector contributions, using CBHI model but pooled at the level of the LGA or state to

- increase the pools and harness the advantages of economies of scale.
- b) An equity fund to be established. This fund will be used to pay the contributions of the vulnerable groups and the poorest of the poor in the society. It is proposed that this fund will be financed through the following:
 - Sin tax -This includes taxes on goods with known deleterious effects on health. These include cigarette tax, levies on alcoholic beverages etc.
 - Levies on mobile phone use
 - The National Health Bill – When this is passed and signed into law, will provide an additional source of revenue to fund healthcare for the poor in Nigeria.
 - Subsidy Reinvestment and Empowerment Programme Fund (SURE-P) earmarked for universal health coverage. A portion of the SURE-P fund should be used for financing the Fund for the vulnerable groups.

Robust System for Strengthening Primary Health Care

Under the auspices of PHC Under One Roof, the NPHCDA has been in the forefront as an advocate for the establishment of State Primary Health Care Development Agencies/Boards, a platform that is seen as a necessary step for alignment and harmonization of the functions of multiple ministries, departments and agencies (MDAs) at the state level with overlapping responsibility for primary health care. It is expected that this development will improve PHC governance and performance in general. Towards this end, guidelines have been developed and circulated. The draft National Health Bill requires that states establish State PHC Agencies/Boards to have access to the National PHC funds. So far, 17 states have set up Primary Health Care Development Agencies/Boards.

Increasing access to required health care facilities

There are 34,173 health facilities all over Nigeria, of which 30,098 are primary health care facilities located in rural areas, 3,992 secondary facilities and 83 tertiary facilities. In terms of Ownership; Government owns 22,850 while 11,323 are private owned. While the number of available health care facilities are still in-adequate. Government has been investing in the refurbishment/upgrading as well as construction of health care facilities to meet the required needs, Debt Relief Grant funded Conditional Grant Scheme managed by the Office of the senior Special Assistant to the President on MSGs, as well as the GAVI and Global Fund grants.

4.2 Health and Health Services Article 24 (CRA Section 13)

(a) Programmes

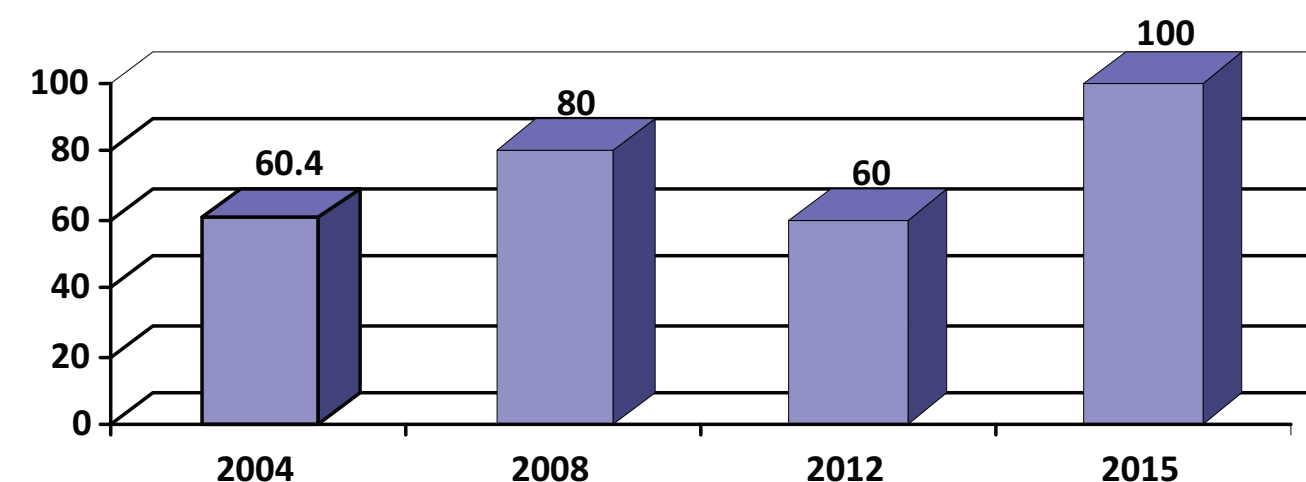
- The National Health Management Information System (NHMIS), established by the Federal Ministry of Health, among other functions, promotes health data management for planning, evaluation and balancing of health services.
- A National baseline Survey on children with mental and physical disability by the Federal Ministry of Women Affairs & Social Development and UNICEF is ongoing in the country.
- Integrated Management of Childhood Illness Strategy through the PHC centres is now being expanded to cover families and communities both in the rural and urban areas. Coverage has also expanded from 6 pilot States in 1999, 24 States in 2003 to 33 States in 2007 including the FCT.
- A bi-annual Child Health Week (CHW) has been instituted across the country to promote child survival and development interventions such as Vitamin A, ITN, ORS, de-worming tablets along with Polio vaccines
- The baby-friendly-hospital initiative continues to be a cost effective approach to child survival and development through promotion, protection and support of exclusive breastfeeding for six months, and continued breastfeeding with adequate complementary foods for two years and beyond.
- HIV/AIDS programmes focus on massive awareness creation, the availability of treatment with Anti Retro Viral (ARV) drugs (including paediatric –anti retroviral drugs), the prevention of mother-to-child transmission of HIV as well as care of HIV/AIDS orphans and treatment of opportunistic infections.
- Adolescent Reproductive Health Guidelines, including sexuality education have been adopted and promoted in Nigeria. Safe motherhood programme is another successful programme, providing essential

Grade 6 completion rate increased from 82.0 per cent in 2004 to 87.7 per cent in 2012, 12.3 per cent less than the 2015 MDG benchmark as shown in indicator Figure 17b. The report (Table 5.3) shows that completion rate was higher in the rural (90.5 per cent) than the urban (81.5 per cent) area – which means that the incidence of primary school dropouts was relatively higher in the urban areas than in the rural areas.

Incidence of dropouts is also more prevalent among children in the poorest households. The completion rate of children in the poorest households was about 58.2 per cent, while that those in the richest households was 74.9 per cent.

MDG indicator 2.3: Literacy rate of 15-24 year olds, women

Figure 17b: Percentage literacy rate of 15-24 year olds, women



Source: National Bureau of Statistics, Abuja: MDGs Performance Tracking Survey Report 2012 (Fig. 4.2 P.24)

There was a slump, particularly in the rural area, in number of young women age 15-24 years who can both read and write in any language. Literacy rate among young women rose from 60.4 per cent in 2004 to about 80.0 per cent in 2008, but declined significantly again in 2012 to about 66.0 per cent. The 2012 figure is 34.0 per cent less than the MDG target for 2015 and 14.0 per cent less than the 2008. However, this dismal performance could be associated with the security challenges in some states in the North-east and North-west. These regions recorded low literacy rates as shown in the report (table 5.4). Literacy rate in the Northeast was about 34.4 per cent and 30.1 per cent in North-west. In contrast, literacy rate in the North-central was 65.6 per cent, while it was 90.7 per cent in the South-east, 91.6 per cent in the South-south, and 88.5 per cent in the South-west, respectively.

The report (table 5.4) further revealed that literacy rate was significantly lower in the rural than in the urban area. Literacy rate in the rural area was about 56.6 percent which is 20.4 percent less than the figure in the urban area. Using income metrics, the survey reveals that illiteracy was exceedingly more pronounced in the poorest household with literacy rate of 19.6 per cent as against 94.3 per cent among women in the richest household.

MDG 3: Promote gender equality and empower women

This goal sorts to eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015. Indicators used to measure the progress in this area are ratios of girls to boys in primary, secondary and tertiary education; and the proportion of women in paid employment within the non-agricultural sector. For the purpose of this report, only two indicators are covered, ratio of girls to boys in primary and secondary education.

Nomadic teachers and its other personnel for effective implementation and delivery of Interactive Radio Instruction (IRI)

- The NCNE is constructing five model schools in five States of the Federation namely: Adamawa, Anambra, Bayelsa, Enugu and Niger. These model schools cover three distinct areas in grazing reserves, fishing pots, and farm centres.

5.1.3 Primary School *Enrolment and Completion / Gender Equality in Education* Implementation of the MDGs 2 and 3 in Nigeria (2008-2012)

The National Bureau of Statistics 2012 MDGs Performance Tracking Survey Report reveals the following:

MDG 2: Achieve Universal Primary Education

The MDG target here is to ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling. The measurable indicators are net enrolment ratio in primary and secondary education; proportion of pupils starting grade 1 who reach the last grade of primary school; and literacy rate of 15-24 year-olds.

MDG indicator 2.1: Net attendance in primary education

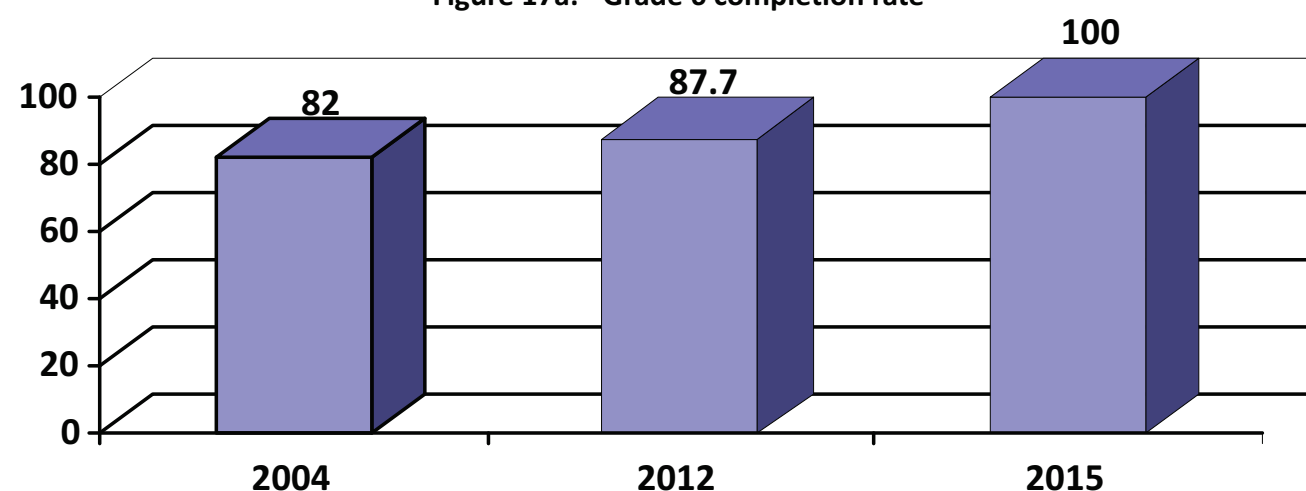
In place of the traditional net enrolment ratio, net attendance ratio was estimated as a proxy since net enrolment cannot be estimated from household level.

Net attendance ratio increased to 71.0 per cent in 2012 from 61.0 percent in 2008 (indicator figure 17a). Of this, 83.9 per cent was in the urban area, while 63.4 per cent was in the rural areas. A further breakdown of the results in The report (table 5.1) indicates that the attendance rate of both male and female was 68.0 percent, indicating parity between male and female education. This is impressive given the temporary setback as a result of some security challenges in some parts of the country since 2009, notably Borno and Yobe (North-east), Kaduna, Kano, and Plateau (North-west). The attendance rate in the North-east zone was 42.0 per cent, while North-west zone recorded 47.8 per cent.

Nonetheless, there is still a significant ground to be covered in closing the gap between the attendance ratio of the haves and the have-nots in the economy – which mirrors income inequality. The net attendance ratio of pupils in the poorest household was about 31.1 per cent, while attendance ratio of those in the richest household was about 89.0 per cent.

MDG indicator 2.1: Primary 6 completion rate

Figure 17a: - Grade 6 completion rate



Source: National Bureau of Statistics, Abuja: MDGs Performance Tracking Survey Report 2012 (Fig. 4.1 P.24)

obstetric care that ensures the health of the neonatal and survival of the mother.

- Micronutrient control programme focuses on iodization of salt, which is about 98%, Vitamin A supplementation for children and breastfeeding mothers in the first 6 weeks including Iron supplementation and de-worming of school children.
- The Onchocerciasis and Guinea Worm Control programmes are on-going.
- The Roll Back Malaria initiative was recently adopted to control malaria. Through this programme, insecticide treated bed nets (ITNs) and anti-malaria drugs are supplied free of charge to under-five and pregnant women. The Federal Government has set in motion mechanisms to further subsidise the ITNs for the rural populace.
- The Bamako Initiative is implemented in all the PHC centres to ensure availability of essential drugs.
- The role of the National Agency for Food, Drugs Administration and Control (NAFDAC) in combating the menace of fake and sub-standard drugs, contributes to child survival.
- Development of an essential Mental Health Intervention Package for the control of interventions for common neuropsychiatric disorders in Nigeria. These disorders include: depression, schizophrenia and hazardous alcohol use.
- The National Health Insurance Scheme is another strategy to make health care affordable for most Nigerians.
- The recent incorporation of the Community Health Insurance Scheme focusing on maternal, newborn and child health is another bold initiative. This has taken off in 6 states of the country and to be scaled up subsequently.
- Despite these vertical programmes, marginal improvement was recorded in terms of childhood morbidity and mortality rate. To make significant progress in the reduction of childhood mortality rate, the country is paying more attention to integrated health care delivery system through the IMNCH Strategy. This strategy ensures a continuum of care along the life cycle from home/community through primary facility to referral hospital. In line with the above, the National Programme on Immunisation has been merged with the National Primary Healthcare Development Agency (NPHCDA) to avoid duplication of efforts and promote synergy.
- Through documentation of best practices and Integrated Supportive Supervision and Monitoring, the nation ensures quality delivery for all these programmes.

(b) Routine Immunisation Coverage

The Government of Nigeria has shown increased commitment to achieve the Health MDGs including MDG4, but there is still a wide disparity between the urban (38.4%) and rural areas (15.7%). There is increased attention to routine immunization that has led to a change in the polio eradication initiative, making it less vertical, with plans to add other antigens and child health interventions. This change was manifest in the North Central zone with 25.9% coverage. This change has resulted from the massive and aggressive programme ongoing within the country. A lot of effort is still being required to combat the low level recorded in other Northern zones- with an all time low of 7.6% in North East and 6.0% in North West.(NDHS 2008)

Table 18 pertains to children aged 12-23 months; the age at which they should have received all vaccinations. Overall, 23 percent of children aged 12-23 months are fully vaccinated. This shows that vaccination coverage has nearly doubled in the five years before this report. Nationally, only about one-quarter of children had a health card. Overall, 29 percent of children in Nigeria have not received any vaccinations.

The children with full vaccination coverage range from a high of 43 percent for South West and South East to a low rate of 6 percent for North West. There are substantial variations among states in vaccination coverage; the percentage of children that are fully vaccinated ranges from less than 1 percent in Katsina and Jigawa to 58 percent in Ondo and 59 percent in Osun.

Mother's level of education plays a major role in measuring the rate of immunization coverage. 61 percent of children whose mothers have more than a secondary education are fully immunised, compared with 7 percent for children whose mothers have no education.

Table 18: Percentage of children aged 12-23 months, who received specific vaccines at any time before the survey (according to a vaccination card or the mother's report), and percentage with a vaccination card seen, by background characteristics, Nigeria 2008.

Background characteristic	BCC	DPT 1	DPT 2	DPT 3	Polio 0 ¹	Polio 1	Polio 2	Polio 3	Measles	Air ²	No vaccination card	Percentage with a vaccination card	Number of children
Sex													
Male	49.1	51.4	44.8	35.6	36.6	66.7	56.4	38.7	41.5	22.6	29.7	26.2	2,448
Female	50.2	52.7	45.1	35.8	36.7	68.9	58.0	38.7	41.4	22.8	28.1	26.1	2,497
Residence													
Urban	72.7	72.4	65.5	56.8	57.7	78.8	69.3	52.8	60.0	38.4	17.8	39.6	1,520
Rural	39.4	43.0	35.4	26.2	27.3	68.1	51.8	32.6	33.2	15.7	34.1	20.2	3,425
Zone													
North Central	62.4	68.9	54.5	43.4	42.0	72.7	59.9	40.5	51.8	25.9	23.4	31.2	640
North East	27.2	30.5	18.9	12.4	17.7	61.4	45.6	28.6	24.8	7.6	33.9	15.1	780
North West	19.1	23.9	17.4	9.1	11.2	48.6	38.5	24.8	19.5	6.0	48.7	5.8	1,545
South East	79.1	79.8	74.8	66.9	68.1	80.6	75.4	52.5	63.9	42.9	17.4	46.1	504
South South	75.8	74.5	65.6	54.2	56.4	86.7	74.9	53.6	55.5	36.0	10.5	46.4	668
South West	80.3	81.7	77.8	66.5	63.4	83.2	76.0	53.4	65.5	42.8	12.9	42.5	814
State of residence													
Sokoto	4.5	5.5	4.5	2.0	1.5	34.8	29.4	10.9	3.5	1.0	64.7	1.0	175
Zamfara	15.9	23.9	19.2	8.8	3.0	47.2	37.5	22.8	14.1	5.4	52.2	1.1	145
Katsina	7.8	8.6	4.7	1.7	6.9	39.7	30.2	19.8	8.2	0.9	58.6	4.3	269
Jigawa	8.6	11.7	5.4	0.0	6.8	48.4	35.4	25.1	8.8	0.0	54.2	2.9	188
Yobe	15.0	19.3	10.2	9.1	14.7	36.8	25.0	18.0	25.0	4.0	57.2	18.7	101
Borno	17.9	17.0	7.1	2.5	11.5	38.5	24.8	13.4	12.5	1.5	56.9	8.0	179
Adamawa	43.8	52.5	40.7	30.2	32.7	78.4	66.7	46.8	41.4	19.1	16.7	28.4	122
Combe	42.4	48.6	37.4	28.2	26.7	69.7	58.6	35.5	37.0	15.5	25.8	23.0	97
Bauchi	17.7	16.4	4.7	1.0	7.9	68.6	43.3	27.4	14.9	1.0	27.3	6.7	194
Kano	23.3	24.6	16.1	7.6	11.8	39.9	27.6	15.7	17.8	5.5	54.1	5.5	894
Kaduna	46.8	60.5	49.1	32.7	29.3	86.6	72.3	50.8	56.9	21.4	10.9	17.3	247
Kebbi	15.1	26.5	19.9	7.2	12.7	48.8	42.2	28.8	21.1	4.8	50.6	4.2	126
Niger	37.5	38.7	28.9	20.9	22.8	55.2	44.9	25.8	33.2	12.3	41.7	17.2	142
Abuja	84.7	87.2	82.0	75.9	66.4	90.5	86.0	65.2	73.5	55.4	7.6	54.6	48
Nasarawa	50.1	53.6	45.7	30.1	33.5	57.0	39.8	31.0	38.6	16.1	39.5	24.9	54
Plateau	78.2	79.5	74.7	56.8	51.4	82.8	69.1	44.2	64.4	31.2	13.0	43.6	111
Taraba	40.9	51.8	33.6	19.6	24.7	88.6	73.4	42.0	35.2	14.1	7.7	16.6	88
Benue	59.9	60.5	46.9	36.8	35.2	74.0	58.9	43.8	43.8	18.8	18.8	33.9	137
Kogi	76.4	78.6	65.2	55.0	53.9	83.2	64.0	46.1	69.6	39.3	13.5	24.7	80
Kwara	70.8	71.8	65.2	55.2	52.0	78.4	70.7	41.9	60.9	30.9	21.6	31.0	68
Oyo	70.6	79.4	74.4	60.7	49.5	89.0	78.9	42.7	59.4	30.6	8.9	33.3	176
Osun	95.3	95.3	95.3	85.6	85.7	89.1	87.9	68.4	84.4	58.7	4.7	56.2	82
Ekiti	97.1	96.2	94.3	88.5	75.1	97.1	94.3	70.2	85.7	57.7	1.9	42.3	78
Ondo	75.3	71.9	66.3	54.3	43.4	74.1	68.6	48.8	64.4	37.0	22.6	29.9	92
Edo	88.8	87.9	79.5	61.8	62.8	91.7	79.7	54.6	74.0	38.8	3.7	44.3	98
Anambra	84.7	88.6	82.4	76.3	68.5	87.5	83.3	63.2	71.0	51.9	10.4	47.8	158
Enugu	66.2	63.8	59.2	50.0	61.6	70.8	59.2	35.3	53.6	28.4	28.1	41.1	96
Ebonyi	79.4	76.9	71.8	60.1	66.8	74.2	72.6	56.8	60.8	50.0	19.0	58.4	72
Cross River	75.8	76.7	74.8	64.6	57.1	84.2	77.6	51.5	63.6	42.1	15.8	54.3	102
Akwa Ibom	68.0	72.4	63.7	51.5	50.6	90.2	82.6	59.1	50.2	32.4	8.7	42.0	103
Abia	76.2	74.7	70.3	59.8	70.3	77.7	71.8	52.8	61.2	38.9	20.8	46.4	71
Imo	83.9	83.9	82.6	77.0	72.8	85.2	82.6	49.5	66.2	40.3	14.8	40.0	109
Rivers	71.7	68.9	58.5	51.8	59.3	87.8	71.6	54.6	48.9	36.5	11.3	45.0	204
Bayelsa	65.3	53.1	37.8	27.6	37.8	78.5	59.2	34.7	30.6	20.4	18.4	37.8	54
Delta	81.5	83.9	74.3	58.1	59.8	85.9	75.1	57.4	61.3	38.4	7.7	52.5	102
Lagos	84.6	86.1	83.2	73.6	75.1	83.1	77.2	60.9	69.2	52.8	11.7	52.8	263
Ogun	67.8	64.4	57.6	42.0	51.0	68.8	55.4	35.3	41.9	23.1	26.7	26.5	122
Education													
No education	20.2	24.4	17.6	10.7	11.7	50.0	38.4	24.0	19.0	6.5	47.4	8.6	2,248
Primary	58.2	61.0	50.1	37.7	39.9	73.5	62.5	33.7	47.4	23.1	21.8	29.8	1,107
Secondary	83.6	83.1	76.4	65.4	66.0	88.5	78.9	56.9	65.7	41.4	8.2	45.7	1,283
More than secondary	92.6	92.5	90.7	83.4	85.2	91.8	85.8	69.8	82.9	61.2	5.3	59.6	307
Total	49.7	52.0	44.7	35.4	36.7	67.8	57.2	38.7	41.4	22.7	28.9	26.1	4,945

¹ Polio 0 is the polio vaccination given at birth.

² BCC, measles and three doses each of DPT and polio vaccine (excluding polio vaccine given at birth)

Indicator Report 2007).

- A total of 401,495 primary school teachers were recorded in 2007. Kaduna State had the highest number of teachers amongst the States with, 23,645; this was followed by Kano (20,688) while Oyo State recorded 18,700 teachers.
- Generally, female teachers predominate in the Southern States (120,842) as against their counterparts in the North (62,772). (Source: NEMIS-FME. 2007)

b. Adequacy of Facilities

- With regard to educational facilities, records available at the Federal Ministry of Education show that in 2007 there were 54,434 public primary schools with 401,495 teachers and pupils' enrolment of 20,469,395.
- The provision of teaching and learning facilities such as books, writing materials, desks, and chairs is shared between parents/guardians/NGOs and Governments in most States of the country.
- In the South West and South East States, for example, classroom furniture and teaching materials are provided by State governments while parents are responsible for school uniforms, feeding, text books and other learning materials.
- In some Northern States, Government, in addition to providing classroom facilities and teaching materials, provides school uniforms (in most cases for girls), mid-day feeding, and textbooks for primary and secondary school pupils.
- **Constraints:** In spite of Government and parental support, teaching and learning equipment still remain inadequate in many schools.

c. **Measures Encouraging Same Quality of Teaching for Boys and Girls** In furthering of its commitment to promote gender equality in education, the Federal Government has, through various agencies, adopted the following:

- Completed a gender review process of the curricula used in primary and secondary schools through the Nigerian Educational Research and Development Council.
- Enhanced the quality of teacher performance and curriculum delivery under the UBE programme.
- UBEC has institutionalised cluster in-service training programme in nineteen (19) States of the federation.
- NERDC developed and is operationalizing a nine-year Basic Education Curriculum (BEC) which is in consonance with the MDGs and National Economic Empowerment and Development Strategy (NEEDS).
- The National Teachers Institute (NTI) has trained and is re-training teachers for the UBE programme through the Special Teacher Upgrading Programme (STUP).
- UBEC, through FTS, has recruited and trained 80,000 NCE holders to teach in primary schools between 2007 & 2008 through the MDGs DRG (Debt Relief Grant)
- The Teachers Registration Council of Nigeria (TRCN) have been mandated to register teachers in Nigeria for harmonisation and professionalizing the teaching profession.
- The TRCN have expanded access to quality teacher education programmes by encouraging teachers who are holders of degrees in non education fields as well as Higher National Diploma (HND) graduates to acquire a Post Graduate Diploma Certificate in Education (PGDE).
- A Teacher Education Policy has been approved by the Federal Government with a view to ensuring the quality and professional competence of teachers in the basic education sub-sector.
- The National Commission for Nomadic Education (NCNE) has continued to train the existing teachers in nomadic schools on the peculiarities and expectations of the nomadic education curricula as well as enhance their knowledge, skills and competences through exposure to new and innovative teaching methods.

- The NCNE organised series of training workshops to update the knowledge, skills and competencies of

- The **UBE** policy of building new schools and class rooms is to ensure accessibility and community participation in the sustenance of the facilities.
- The Federal Government is currently undertaking the school mapping exercise aimed at identifying the geographical location of schools and determining their closeness to homes so as to meet Government policy which says that primary school children should not walk a distance of more than 5 kilometres away from home, and secondary school students not more than 7 kilometres. The exercise has successfully been implemented in Ebonyi State and the Federal Capital Territory; while the exercise is ongoing in Benue and Oyo States.
- State Primary Education Boards in the North West, North East and in parts of North Central and South West zones have also been involved in donor-assisted collaborative programmes to address religious and socio-cultural impediments to the uneven distribution of schools and facilities.
- For the construction of schools and the provision of educational facilities, the Federal Ministry of Education through Universal Basic Education Commission, gives 50% matching grant each year to all the States of the Federation. The funds are for the provision of educational facilities, construction of schools and rehabilitation of dilapidated structures.
- UNICEF supplied building materials for the rehabilitation of infrastructure, the provision of VIP toilets and hand pumps to all the 36 Local Government where the Girls Education Project (GEP) is on-going. This is to encourage girls' enrolment, retention and completion.
- The FME has approved the National Policy for the Standardisation, Upgrading and Integration of Formal Education into the Qur'anic Schools system.
- In Sokoto, Katsina, Jigawa, Bauchi and Yobe States, for example, there is concerted effort by the Federal Ministry of Education, in collaboration with UNICEF, to promote non-formal education for the development and integration of "*Islamiyya*" and *Qur'anic* schools into regular primary schools.
- In the South West, religious organisations (Christian and Islamic) have been involved in the even distribution of schools through the policy that effected the return of schools to religious organisations by State Governments.

h) Administration of Corporal Punishment in Schools

- Provisions of the **Child's Rights Act 2003, Sections 11 (a) and (b) and 221 (i) (b)** and CRLs, which prohibit corporal punishment in Nigerian schools are being implemented in the following States: Abia, Anambra, Ebonyi, Imo, Delta, Edo, Bayelsa, Rivers, Cross River, Akwa Ibom, Lagos, Ogun, Ondo, Ekiti, Osun, Oyo, Jigawa, Taraba, Benue, Plateau, Nasarawa and Kwara.
- The FMWA&SD has carried out sensitisation workshops across the country to disseminate findings and recommendations of the UN Secretary General's report on Violence Against Children (VAC).

i) Extent to Which Children are Taught in Their Mother Tongue

- Section 10 of the National Policy on Education (2004) stipulates that "Government appreciates the importance of language as a means of providing social interaction and national cohesion and preserving culture". In this regard, most primary schools in Nigeria have adopted the policy of teaching children in their mother tongue during the first three years of schooling. This has been done with the three major Nigerian languages namely: Hausa, Igbo and Yoruba.
- Efforts are being made towards developing the curriculum for teaching some other minor languages like Kanuri, Tiv, Efik, Fulfulde, Edo, Izon and Ebira.

5.1.2 Adequacy of Teachers and Facilities

a. Adequacy of Teachers

- Pupil-Teacher Ratio (PTR) remained constant from 2005 to 2006 at about 1:40-36 and between 2006 and 2007 rose to 1:50-98 due to increased intake of pupils through Basic Education Programme and the integration of Islamiyya Schools into the Basic Education Programme (National Primary Schools Key

(c) Access to Safe Water, Sanitation and Hygiene

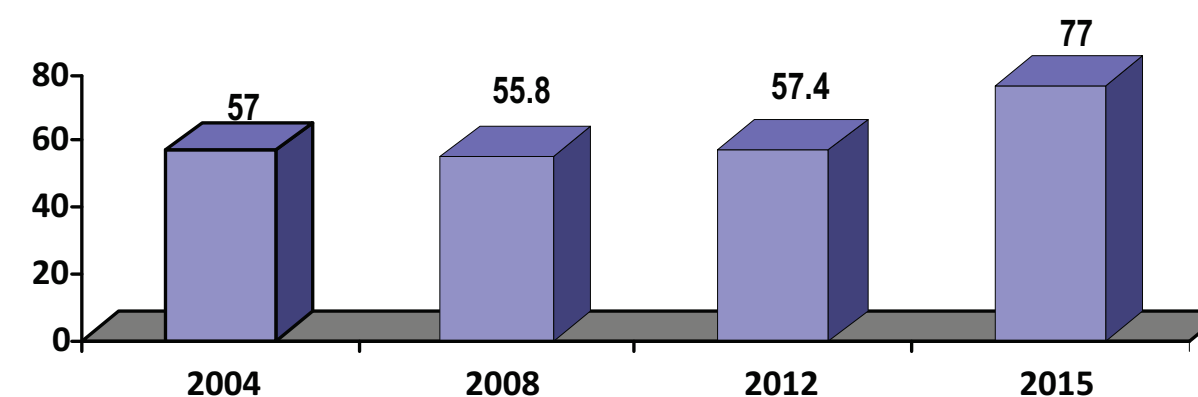
Table 19 below gives a breakdown of Nigerians' access to safe drinking water by place of residence and geographical zones.

MDGs 7: Environmental sustainability: The target here is aimed at reducing by half the proportion of people without access to safe drinking water and basic sanitation. **The National Bureau of Statistics 2012 MDGs Performance Tracking Survey Report** revealed that about 57.4 per cent of Nigerians have access to safe drinking water, 19.2 per cent less than the MDGs benchmark of 77 per cent. This is only marginally higher than the 2004 and 2008 figures of 0.8 per cent and 2.3 per cent respectively. The number of people who have access to improved sanitation was about 33.7 per cent, a decline from 54 per cent recorded in 2008.

The survey generally shows that there were significant improvements in most of the indicators tracked. While some of the indicators have met and even surpassed the benchmarks, others are every inch closer to being met. Nonetheless, there are yet some challenges. The achievements recorded so far are skewed to the urban areas, the rich and educated households; the rural areas, the poor and non-educated households were lagging in all the indicators. More effort is therefore required to tackle rural-urban disparities as well as inequalities between the haves and the have-nots so as to forestall a situation where by these achievements are being reversed.

MDG indicator 7.8: Proportion of population using an improved drinking water

Figure 12a: Proportion of population using an improved drinking water source %



Source: National Bureau of Statistics, Abuja: MDGs Performance Tracking Survey Report 2012 (Fig. 4.15 P.35)

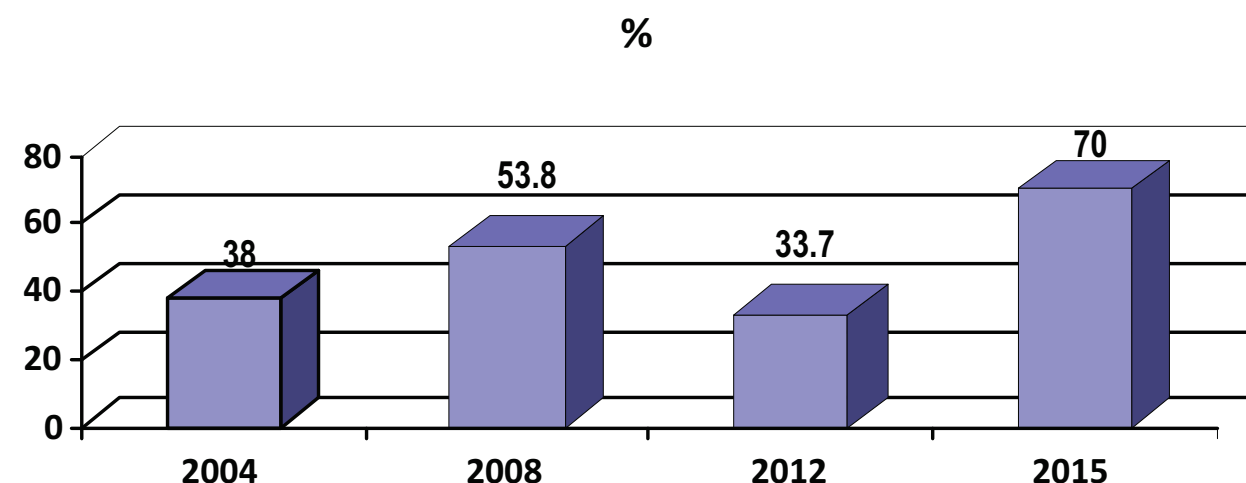
Emphasis on adequate access to safe drinking water stems from its (water) link with other water-related diseases such as diarrhea, cholera, dysentery, and guinea worm which are known to be widespread.

The proportion of households that used improved drinking water sources was 57 per cent in 2004 and 55.8 per cent in 2008. In 2012, indicator Figure 12a above shows that it increased to 57.4 per cent which is about 1.6 per cent more than the 2008 figure and 0.4 per cent marginally higher than the 2004 figure.

Evidently, the 2012 figure points to a large scope for improvement in order to achieve additional 19.2 per cent access to meet up with the 77.0 per cent MDGs target by 2015. The challenge is particularly more pronounced in the rural area where access to improved source of drinking water is relatively lower at about 51.3 per cent compared with 72.4 per cent in the urban area. About 24.9 per cent of those in the poorest household have access to improved sources of water while about 74.4 per cent of those in richest household have access to improved water sources.

MDG indicator 7.9: Proportion of population using an improved sanitation facility.

Figure 12b: Proportion of population using improved sanitation facility



Source: National Bureau of Statistics, Abuja: MDGs Performance Tracking Survey Report 2012 (Fig. 4.16 at P.36)

Access to improved sanitation facilities has not shown any regular pattern over the years. In 2004 access to improved sanitation was about 38 per cent, but increased to 53.8 per cent in 2008 and declined significantly again in 2012 to 33.7 per cent. The 2012 figure is a serious challenge when compared with 70 per cent benchmark for the MDG in 2015.

Access to improved sanitation in the urban and rural areas were 42.7 per cent and 30.1 per cent; while access in the poorest household was about 8.6 per cent, which is significantly low compared with 52.1 per cent in the richest household, see Table 19 and Table 19a.

To address the low enrolment of boys and girls in school, a number of strategies were put in place. These include:

- Development and implementation of the Guidelines on the National Policy on Gender Education.
- Procurement and distribution of 960 computers and accessories to six pilot schools in each of the five Southern States of Abia, Anambra, Enugu, Imo and Oyo with high boys dropout rate. Sports equipment have also been donated to the six pilot schools.
- GEP initiative and intervention in Bauchi, Borno, Jigawa, Niger, Katsina, Sokoto, Adamawa, Gombe, Kaduna, Kano, Kebbi, Nasarawa, Taraba, Yobe and Zamfara States encouraged more girls to access, remain and complete their education.
- Capacity building and economic empowerment of women in the GEP communities through the provision of sewing and knitting equipment by UNICEF. The acquired skills enable the women to support their families particularly to ensure that the girl child acquires adequate basic education.
- Supply of cooking and sewing equipment to Model Second Chance Education centres as support for young girls dropping out of school due to early marriage/pregnancy with a view to reintegrating them into mainstream education system in the GEP States (Adamawa, Bauchi, Borno, Gombe, Jigawa, Kaduna, Kano, Katsina, Kebbi, Nasarawa, Niger, Sokoto, Taraba, Yobe and Zamfara).
- Supply of computers, block and brick moulding machines, sewing machines, barbing instruments to Youth Centres to encourage the acquisition of entrepreneurial, ICT and basic life skills in boy-drop out states namely, Abia, Anambra, Enugu, Imo and Oyo States.
- Capacity building of female teachers to serve as role models for girls in the rural areas.
- Training and constitution of School Based Management Committees (SBMCs) in the twenty (20) States affected by the gender disparity (Bauchi, Borno, Jigawa, Niger, Katsina, Sokoto, Adamawa, Gombe, Kaduna, Kano, Kebbi, Nasarawa, Taraba, Yobe, Zamfara, Abia, Anambra, Ebonyi, Imo and Oyo States).
- The launching in 2009 of the Bauchi State Chapter of the Nigerian Girls Education Initiative (NGEI). This is to widen the scope of girls' education in Nigeria;
- The distribution of communication materials for advocacy on gender sensitivity to support the girl-child education.

f) Information on Special and Gifted Children

The Federal Ministry of Education has adopted the following strategies focussing on education of Children with Special Needs:

- The approval, in 2007, of the National Strategy for the Education of Special Needs Children.
- The retooling of regular classroom teachers on skills and methodology of handling Special Needs Children in an inclusive classroom setting;
- Organised advocacy and sensitisation workshop in Abuja for Stakeholders in the North Central Zone of the country for the promotion of inclusive education in regular schools.
- The development of a draft identification matrix for gifted and talented children. This matrix is already in use in some senior secondary schools.
- Distribution of specialised equipment for inclusive education such as braille machines, white cane, audiometers, talking books, watches, and computer with jaws.
- The support by Universal Basic Education Commission to educational institutions for Children with Special Needs.
- Appointment of specialized educators and itinerant teachers for early intervention.
- The designation of three secondary schools for the gifted and the talented children in the country. These are the Federal Government Academy, Suleja, Niger State, the Schools for Gifted Children, Gwagwalada, Abuja (FCT) and Bamaina in Jigawa State. The students are drawn from all parts of the country, and from different socio-economic and cultural backgrounds.

g) Measures to Promote Even Distribution of Schools and Educational Facilities

- Provision of teaching and learning materials to schools through the Universal Basic Education Commission (UBEC) and the provision of science kits in designated junior secondary schools within the Country in a bid to demystify the study of the sciences at the junior secondary level. This project was funded from the Millennium Development Goals (MDGs) fund. It provided 63 sets of Science kits to each of the 36 States of the Federation and the Federal Capital Territory, (FCT).

- Introduction of School Based Teacher Training Programmes, Student Tutoring Mentoring and Counselling (STUMEC) programmes and role models to improve the quality of teaching and learning. The Student Tutoring Mentoring and Counselling, programme, is aimed at improving learning achievement and retention of children in schools. The initiative has commenced in the 15 GEP States (Bauchi, Borno, Jigawa, Niger, Katsina, Sokoto Adamawa, Gombe, Kaduna, Kano, Kebbi, Nasarawa, Taraba, Yobe and Zamfara) of the North and in five Southern States (Abia, Anambra, Ebonyi, Imo and Oyo) with boys' drop-out syndrome.

- Introduction of competitions to promote academic excellence, for example, International Olympiad Competitions.

- The recognition of the best performing teachers.

- Adoption of Child Friendly Schooling as a policy by UBEC.

d) System to Assess Quality of Learning

The problem of quality of children's education is largely informed by strategies adopted in the formulation of the repackaged **UBE** Programme. As at 2008, the **UBE** coordinating office and State SUBEBs had initiated specific measures in curriculum innovation, textbooks development, teacher education and the provision of teaching and learning materials in public schools in order to set and maintain uniform standards. These measures include:

- Reformation of the Federal Inspectorate Service (FIS).
- Establishment of Nigeria Education Quality Assurance Service (NEQAS). The strategic aim of the Education Quality Assurance is to prescribe standards and ensure that inputs, processes and output of the system meet international standards.
- Harmonisation of the State and Federal Inspection Instruments to replace the former School Inspection Manual. The instrument adopts the whole school self evaluation concept which combines the school self evaluation with external evaluation.
- Introduction of a Community Participation Initiative (CPI) which is a new thrust in quality assurance in education worldwide. This focuses on the involvement of all the stakeholders within the location of the school. Community participation is a holistic approach to quality assurance stemming from the Whole School Evaluation (WSE) process.
- Development of Training Manual in 2009 on the implementation of the community participation process which will enhance quality assurance in education delivery.
- Training of 753 inspectors drawn from the Federal Armed Forces as well as Local Government Education Area Authorities (LGEAs) in the implementation of the Community Participation Manual between 2008 and 2009.
- Introduction of the Federal Teachers' Scheme (FTS) in 2006 with the aim of addressing shortage of qualified teachers in the basic education sub-sector across the country. The scheme, which is being financed from the Debt Relief Grant (DRG), is a two-year programme designed to cater for unemployed NCE graduates. It is expected to serve as a period of internship, preparatory to formal absorption of successful participants (NCE graduates) into the teaching profession.
- Enforcement of the National Certificate of Education (NCE) as the minimum teaching qualification in all the States of the Federation.

The rationale for the above strategies is to meet the objectives of the four point agenda of Access, Standard and Quality Assurance, Technical and Vocational Education and Funding of the FME.

e) Measures Adopted on the Basis of Gender Equality

Table 19: Percentage distribution of household population according to main source of drinking water and percentage of household population using improved drinking water sources

State	Main source of drinking water															Percentage using improved sources of drinking water (%)		
	Improved sources										Unimproved sources							
	Piped into dwelling	Piped into compound, yard or plot	Piped to neighbour	Public tap / standpipes	Tube well, borehole	Protected well	Protected spring	Rainwater collection	Bottled water	Unprotected well	Unprotected spring	Tanker-truck	Cart with small tank / drum	water (river, stream, dam, lake)	Bottled water		Sachet/Pure water	Other
Abia	2.0	2.0	4.0	3.0	85.0	3.0	0.0	0.0	0.0	0.0	0.0	1.3	1.0	9.5	2.0	0.0	0.0	81.0
Adamawa	0.0	0.0	0.0	0.0	30.2	6.0	0.0	0.0	0.0	19.5	0.0	7.2	8.3	25.9	0.0	0.0	0.0	37.7
Adamsom	1.7	0.0	0.0	1.1	53.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	59.3
Anambra	0.0	0.0	0.0	0.0	65.9	6.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	10.6	0.0	0.0	0.0	74.9
Bauchi	0.0	0.0	0.0	0.0	26.6	7.0	0.0	0.0	0.0	59.2	2.9	0.0	0.0	0.0	0.0	0.0	0.0	35.0
Bayelsa	2.0	0.0	0.0	12.7	24.3	0.0	0.0	0.0	0.0	6.4	0.0	0.0	0.0	41.5	0.0	0.0	0.0	39.5
Benue	0.0	0.0	0.0	0.0	15.4	26.5	0.0	0.0	0.0	5.3	1.5	2.6	0.0	45.6	0.0	0.0	0.0	43.6
Borno	0.0	0.0	0.0	2.4	19.7	8.7	0.0	0.0	0.0	59.3	0.0	0.0	0.0	4.3	0.0	0.0	0.0	43.6
Cross River	1.0	1.0	0.0	0.0	37.2	6.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	49.4	0.0	0.0	0.0	48.0
Delta	1.9	1.7	0.0	5.4	42.8	12.0	0.0	0.0	0.0	13.3	0.0	0.0	0.0	16.9	0.0	0.0	0.0	64.8
Ebonyi	0.0	0.0	0.0	0.0	63.5	2.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	26.1	0.0	0.0	0.0	68.3
Edo	0.0	0.0	0.0	0.0	57.2	27.4	0.0	0.0	0.0	1.4	0.0	0.0	0.0	9.6	0.0	0.0	0.0	86.8
Ekiti	0.0	0.0	0.0	0.0	29.9	27.8	0.0	0.0	0.0	1.6	3.9	0.0	0.0	0.0	0.0	0.0	0.0	75.8
Enugu	0.0	0.0	0.0	0.0	26.3	1.0	0.0	0.0	0.0	5.2	8.0	14.8	1.8	25.0	0.0	0.0	0.0	40.8
Gombe	3.7	0.0	1.3	3.6	27.5	10.0	0.0	0.0	0.0	36.5	7.8	2.3	0.0	6.7	0.0	0.0	0.0	46.0
Imo	1.5	1.2	0.0	2.2	71.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	5.8	0.0	0.0	0.0	83.2
Jigawa	3.9	7.4	2.0	13.5	41.0	0.0	0.0	0.0	0.0	24.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	69.9
Kaduna	2.9	2.5	0.0	0.0	4.0	20.7	1.0	0.0	0.0	51.3	2.3	0.0	2.0	9.2	0.0	2.5	0.0	31.9
Kano	5.8	4.5	4.3	3.8	30.5	18.7	0.0	0.0	0.0	25.3	0.0	3.7	0.0	1.3	0.0	3.4	0.0	65.8
Katsina	1.3	0.0	0.0	0.0	29.4	23.6	0.0	0.0	0.0	27.6	1.7	0.0	0.0	9.6	0.0	0.0	0.0	57.0
Kebbi	2.9	0.0	0.0	1.8	11.8	9.4	0.0	0.0	0.0	59.4	1.0	0.0	0.0	11.8	0.0	0.0	0.0	26.9
Kogi	0.0	0.0	0.0	0.0	15.9	13.8	1.9	0.0	0.0	6.3	1.2	14.9	0.0	34.9	0.0	0.0	0.0	40.0
Kwara	2.3	3.3	1.3	10.3	42.0	8.4	0.0	0.0	0.0	5.4	2.6	0.0	0.0	17.8	0.0	0.0	0.0	68.0
Lagos	2.8	4.7	0.0	0.0	36.7	1.7	0.0	0.0	0.0	1.7	0.0	1.6	0.0	0.0	0.0	0.0	0.0	53.5
Nasarawa	2.3	3.0	0.5	2.3	22.3	17.2	0.0	0.0	0.0	21.1	1.4	0.0	0.0	28.1	0.0	0.0	0.0	48.7
Niger	3.7	3.6	1.9	2.3	32.7	8.0	0.0	0.0	0.0	21.3	1.8	0.0	2.3	21.3	0.0	0.0	0.0	52.2
Ogun	1.2	3.1	3.3	7.9	42.8	15.2	0.0	0.0	0.0	6.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	74.7
Ondo	0.0	0.0	0.0	0.0	22.6	40.2	0.0	0.0	0.0	1.6	1.1	0.0	0.0	29.4	0.0	2.6	0.0	68.4
Oyo	1.5	1.6	1.5	11.4	25.0	46.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	87.5
Plateau	0.0	0.0	0.0	0.0	35.2	38.6	0.0	0.0	0.0	1.8	3.2	0.0	0.0	0.0	0.0	0.0	0.0	81.0
Rivers	3.1	4.5	5.6	9.5	47.4	12.6	0.0	0.0	0.0	8.3	0.0	1.6	0.0	0.0	0.0	0.0	0.0	42.2
Sokoto	5.1	1.7	2.1	3.3	9.6	7.0	0.0	0.0	0.0	62.6	5.0	0.0	0.0	0.0	0.0	0.0	0.0	84.1
Taraba	0.0	0.0	0.0	0.0	15.1	7.3	0.0	0.0	0.0	16.3	3.3	0.0	0.0	16.9	34.5	0.0	0.0	28.9
Yobe	0.0	0.0	0.0	0.0	39.6	11.7	0.0	0.0	0.0	35.3	1.2	1.4	0.0	0.0	0.0	0.0	0.0	23.8
Zamfara	1.7	0.0	0.0	1.2	21.7	25.0	1.4	0.0	0.0	24.9	0.0	0.0	0.0	1.9	20.9	0.0	0.0	59.7
FCT (Abuja)	6.5	3.1	0.0	10.2	42.3	4.8	0.0	0.0	0.0	1.1	0.0	15.4	0.0	12.8	0.0	0.0	0.0	51.5
Urban	4.8	4.1	2.1	6.5	37.1	16.9	0.0	0.0	0.0	3.7	0.0	4.1	1.3	2.1	0.0	15.4	0.0	65.5
Rural	1.4	1.0	0.0	0.0	22.0	12.8	0.0	0.0	0.0	24.1	2.3	1.1	1.0	18.5	0.0	0.0	0.0	72.4
None	1.4	1.0	0.0	0.0	27.4	12.2	0.0	0.0	0.0	31.6	2.4	1.4	1.4	15.2	0.0	1.3	0.0	51.3
Household	1.1	1.3	1.1	3.2	40.2	14.5	0.0	0.0	0.0	11.0	2.1	2.0	1.0	17.4	0.0	3.8	0.0	46.4
Secondary + head	3.1	3.4	1.6	5.3	36.1	15.3	0.0	0.0	0.0	8.5	0.0	2.5	0.0	10.3	0.0	10.3	0.0	62.3
Misangok	0.0	0.0	0.0	0.0	26.1	33.4	0.0	0.0	0.0	20.3	0.0	4.0	3.1	7.5	0.0	2.7	0.0	66.1
Poorst	0.0	0.0	0.0	0.0	14.7	7.7	0.0	0.0	0.0	46.4	3.5	0.0	0.0	0.0	0.0	0.0	0.0	58.0
Second	0.0	0.0	0.0	0.0	17.7	13.5	0.0	0.0	0.0	31.9	2.5	0.0	0.0	0.0	0.0	0.0	0.0	24.9
Middle	0.0	0.0	0.0	0.0	23.9	13.5	0.0	0.0	0.0	16.7	1.7	1.9	1.1	17.2	0.0	0.0	0.0	41.1
Fourth	1.9	1.8	1.8	5.2	43.3	19.1	0.0	0.0	0.0	5.9	1.4	2.9	1.3	9.9	0.0	4.1	0.0	60.1
Richst	5.6	5.5	1.6	5.9	43.1	11.1	0.0	0.0	0.0	1.6	0.0	3.6	0.0	0.0	0.0	0.0	0.0	73.9
North central	2.0	2.1	1.2	3.8	24.1	15.9	0.0	0.0	0.0	11.7	1.9	4.4	4.4	29.6	0.0	1.7	0.0	74.4
North east	0.0	0.0	0.0	0.0	26.0	8.2	0.0	0.0	0.0	41.7	2.3	1.6	4.4	10.8	0.0	0.0	0.0	49.7
North west	3.6	2.8	1.6	3.6	22.4	15.8	0.0	0.0	0.0	36.9	1.3	1.3	1.1	7.0	0.0	1.5	0.0	37.9
South east	0.0	0.0	0.0	0.0	62.4	2.4	0.0	0.0	0.0	1.8	2.7	4.7	0.0	0.0	0.0	0.0	0.0	70.4
South south	1.7	1.9	1.5	4.7	45.8	10.7	0.0	0.0	0.0	5.9	1.0	0.0	0.0	0.0	0.0	0.0	0.0	51.4
South west	1.5	2.5	0.0	6.6	33.4	23.4	0.0	0.0	0.0	2.2	1.4	0.0	0.0	0.0	0.0	0.0	0.0	67.4
Total	2.0	2.0	1.1	3.9	33.5	14.0	0.0	0.0	0.0	18.3	1.7	1.9	1.1	13.8	0.0	5.3	0.0	57.4

Source: - National Bureau of Statistics, Abuja: MDGs Performance Tracking Survey Report 2012 (Table 5.21 P60)

Table 19a: Percentage of Household Population by Drinking Water and Sanitation Ladders

State		Percentage of household population using:						
		Improved drinking water		Unimproved drinking water	Improved sanitation [2]	Unimproved sanitation		
		Piped into dwelling, plot or yard	Other improved			Shared improved facilities	Unimproved facilities	Open defecation
	Abia	1.3	86.6	12.1	47.8	30.0	20.0	2.2
	Adamawa	.8	36.9	62.3	50.9	1.1	27.4	20.5
	Akwa ibom	2.4	57.0	40.7	51.2	31.2	13.7	3.9
	Anambra	.4	74.5	25.1	61.7	25.2	1.3	11.8
	Bauchi	.1	34.9	65.0	22.5	.2	64.4	12.9
	Bayelsa	.6	38.9	60.5	11.5	5.6	38.1	44.8
	Benue	.5	43.2	56.4	33.5	6.6	11.4	48.5
	Borno	1.8	30.5	67.7	19.6	1.7	48.5	30.3
	Cross River	2.7	44.0	53.4	8.5	12.0	26.3	53.2
	Delta	3.6	61.0	35.4	38.3	26.0	13.5	22.2
	Ebonyi	2.0	66.4	31.7	18.6	7.5	18.6	55.3
	Edo	.9	85.8	13.2	56.1	23.9	6.8	13.2
	Ekiti	3.0	72.6	24.4	22.5	22.7	2.2	52.7
	Enugu	3.4	37.4	59.2	25.2	18.1	15.7	41.0
	Gombe	3.8	42.2	54.0	17.5	1.3	61.2	20.0
	Imo	2.7	80.5	16.8	62.4	19.6	2.2	15.8
	Jigawa	11.3	58.6	30.1	27.9	.9	31.5	39.8
	Kaduna	5.5	26.4	68.1	24.4	15.3	43.8	16.4
	Kano	10.3	55.3	34.4	67.7	1.9	29.9	.5
	Katsina	1.4	55.6	43.0	41.2	1.6	49.6	7.6
	Kebbi	3.6	23.3	73.1	31.5	5.3	40.1	23.1
	Kogi	2.3	37.7	60.0	20.6	9.7	9.6	60.1
	Kwara	5.5	62.5	32.0	14.6	20.9	8.7	55.9
	Lagos	8.0	45.5	46.5	29.3	61.2	4.9	4.5
	Nasarawa	5.5	43.1	51.3	35.4	6.8	16.1	41.7
	Niger	7.2	45.0	47.8	26.0	8.1	13.8	52.1
	Ogun	4.4	70.4	25.3	37.5	33.6	4.5	24.5
	Ondo	.3	66.1	33.6	12.1	40.6	12.8	34.5
	Osun	3.2	84.3	12.5	40.8	29.6	.7	28.9
	Oyo	1.1	79.9	19.0	16.3	29.0	4.6	50.0
	Plateau	1.8	40.4	57.8	14.3	8.0	15.6	62.2
	Rivers	7.6	76.5	15.9	25.1	18.5	37.9	18.6
	Sokoto	6.8	22.1	71.1	12.2	2.2	49.6	36.0
	Taraba	.2	23.4	76.4	23.5	2.5	27.7	46.4
	Yobe	1.0	58.8	40.3	33.7	1.5	21.1	43.7
	Zamfara	1.9	49.5	48.5	53.9	2.7	35.4	8.0
	FCT (Abuja)	9.5	56.0	34.5	45.6	16.5	6.7	31.3
Area	Urban	8.8	63.6	27.6	42.7	36.7	8.4	12.2
	Rural	2.0	49.3	48.7	30.1	8.4	29.2	32.3
Educational level of household head	None	2.4	44.0	53.6	27.8	6.4	32.9	32.9
	Primary	2.4	59.9	37.7	33.5	19.3	18.4	28.9
	Secondary +	6.6	59.5	33.9	40.0	25.6	15.5	18.9
	Missing/DK	.1	55.9	44.0	29.5	6.1	53.7	10.8
Wealth index quintiles	Poorest	.2	24.7	75.1	8.6	.7	40.9	49.8
	Second	.8	40.3	58.9	25.8	2.9	34.1	37.2
	Middle	1.2	58.9	39.9	32.6	9.2	25.7	32.4
	Fourth	3.7	70.2	26.1	39.5	22.5	17.7	20.3
	Richest	11.2	63.2	25.6	52.1	37.5	6.3	4.1
Geopolitical zone of household head	North central	4.1	45.6	50.3	26.2	10.1	11.9	51.8
	North east	1.2	36.8	62.1	27.5	1.2	44.7	26.6
	North west	6.4	44.0	49.6	41.0	4.4	39.1	15.4
	South east	1.9	69.5	28.6	46.5	20.9	9.9	22.8
	South south	3.6	63.8	32.6	34.0	21.3	22.3	22.5
	South west	4.1	65.4	30.4	26.6	41.2	5.0	27.2
Total		4.0	53.4	42.6	33.7	16.5	23.2	26.5

Source: - National Bureau of Statistics, Abuja: MDGs Performance Tracking Survey Report 2012 (Fig. 5.22 P.61)

Table 30: FGN-UBEC disbursement to states between 2006 and 2008

Year	Amount (₦)
2006	27,468,179,012
2007	15,590,521,138
2008	2,749,572,660
Total	45.8bn

Source: UBEC Memo to Joint Consultative Committee on Education (2009)

- The amount was expended on the renovation of classrooms, provision of new classroom blocks, payment of teachers' salaries and the provision of teaching and learning facilities at the primary school level.
- State governments, across the country, have maintained a regime of budgeting for and funding such infrastructure, and facilities at the senior secondary school level.

c) Measures for the Improvement of Education Quality

- Improved school infrastructure such as the provision of medical facilities, furniture and electricity in schools to ensure a child friendly school environment is being implemented vide the Education Trust Fund, Universal Basic Education Commission matching grants to States and FME Debt Relief Funds.
- In-service Teacher Training Programmes through National Teachers Institute (NTI), National Commission for Colleges of Education (NCCE) and UBEC are being intensified.
- Improvement of sanitation in schools including the provision of portable water and the construction of latrines through the DFID, EU and UNICEF/FME funded programmes.
- The Federal Colleges of Education Abeokuta and Asaba received, between 2007 and 2008, the sum of N200m and N393.1m respectively from the MDG funds for the upgrading of facilities and training of teachers for basic education.
- The successful completion of the NTI-MDG supported capacity building programme with the NTI having successfully trained 156,592 teachers across the nation in 2008. The 2009 exercise has commenced in the North and South East geo-political zones.
- Promotion of school-health and hygiene in schools through the integration of health education into the curriculum.
- Child to child, child to parent, and child to community strategies has been encouraged.
- School, Health Clubs and Water Sanitation and Hygiene (WASH) initiative which promote the washing of hands with soap or ash among children after defecation, and before and after eating have been introduced.
- Improvement of school management through the establishment of School Based Management Committees (SBMCs) and Parents Teachers Association (PTA).
- Every public school in Nigeria is mandated by law to establish an SBMC to plan, coordinate and manage schools effectively.

Following from the flag-off of the Campaign in June, 2010 in Yola, targeting specifically Girl-Child Education; in 2012, the Back-To-School Programme tagged 'Mmuta Bu 'Ike' was launched in Enugu. The Campaign is targeting the high number of boys who drop out of school in the South East zone of Nigeria. The Campaign is among others meant to:

- Address the challenge of high number of Out-of-School boys in the South East.
- Provide/rehabilitate schools near major markets and apprenticeship centres.
- Integrate Technical and Vocational Skills to support development in diverse trades.

During the launch of the Campaign, Mr. President directed the construction of schools to address the issue of Boy-Child drop out in the South East. A National Implementation Committee for the Integration of Out-of-School children from the South-South and South-East States have been inaugurated to drive the implementation of the Programme.

Similar campaigns due for launch in other geo-political zones include:

- Campaign for children of nomadic fisher folks in the South South and riverine areas and
- The Street to Skills programme for the South West.

• Nomadic Education Programme

The Nomadic Education Programme continues to offer nomads located across the country opportunities for participation in Basic Education.

In the year under review, educational facilities and resources continued to be provided across the country which included:

- Establishment of Model Nomadic Education Centres in Bauchi, Benue and Edo States.
- Rehabilitation of community-based nomadic schools in Bayelsa, Gombe and Taraba States.
- Provision of mobile collapsible structures with chairs and tables in the six geo-political zones.
- Construction of motorized boreholes in Anambra, Bauchi, Benue, Edo and Oyo States.

b) Budgetary Allocation

- Between 2006 and 2008, a total of 109,780 billion Naira was committed by the Federal Government to the UBE Programme through the National and State Offices.

Table 29: Consolidated Revenue Fund (CRF) statutory allocation to UBEC (2006 – 2008)

Year	Amount (₦)
2006	30,480,000,000
2007	35,300,000,000
2008	44,000,000,000
Total	109,780bn

Source: UBEC Memo to Joint Consultative Committee on Education (2009)

(d) Infant and Young Child Feeding Practices

The integration of Infant and Young Child Feeding Practices (IYCF) into other child health services at PHC facilities and at the community level such as the Baby –Friendly Initiative, IMCI, PMTCT, Growth Monitoring/Promotion and Referral provided critical entry points for scaling up IYCF interventions.

The 2008 NDHS data on infant and young child feeding (IYCF) practices for all children born in the five years preceding the survey show that (Table 6.8) only 13 percent of children under 6 months of age are exclusively breastfed. In addition to breast milk, 34 percent of infants aged 0-5 months are given plain water only, while 10 percent are given non-milk liquids and juice and 6 percent are given milk other than breast milk. Furthermore, 35 percent of infants aged 0-5 months are given complementary foods. By age 6-9 months, 75 percent of infants are given complementary foods. Sixteen percent of infants aged 0-5 months are fed using a bottle with a nipple; a practice that is discouraged because of the risk of illness to the child. (NDHS 2008)

Table 20: - Breast-feeding status by age.

Among youngest children under three years living with their mother, percent distribution by breastfeeding status and the percentage currently breastfeeding; and among all children under three years, percentage using a bottle with a nipple, according to age in months, Nigeria 2008											
Age in months	Breastfeeding and consuming:						Total	Percentage currently breastfeeding	Number of		
	Not breast-feeding	Exclusively breastfed	Plain water only	Non-milk liquids/juice	Other milk	Complementary food			youngest children under three years	Percentage using a bottle with a nipple ¹	Number of all children under three years
<2	2.9	20.1	39.2	12.4	5.5	19.9	100.0	97.1	741	12.5	748
2-3	3.1	14.2	34.0	10.7	5.9	32.1	100.0	96.9	1,011	16.6	1,024
4-5	3.1	7.2	29.1	7.9	5.1	47.6	100.0	96.9	1,083	16.7	1,102
6-7	3.2	3.3	17.1	4.8	3.3	68.3	100.0	96.8	1,015	12.8	1,032
8-9	5.9	1.3	5.3	2.4	1.7	83.3	100.0	94.1	909	16.3	939
10-11	9.4	0.9	3.2	1.4	1.1	84.1	100.0	90.6	861	11.1	884
12-15	14.6	0.6	2.3	1.2	0.8	80.5	100.0	85.4	1,995	8.9	2,041
16-19	38.8	0.2	1.1	0.5	0.4	59.0	100.0	61.2	1,559	6.4	1,637
20-23	67.7	0.3	0.6	0.5	0.1	30.7	100.0	32.3	1,099	5.8	1,267
24-27	89.0	0.1	0.0	0.1	0.0	10.8	100.0	11.0	1,547	2.7	1,947
28-31	92.1	0.1	0.1	0.0	0.1	7.6	100.0	7.9	1,082	2.7	1,584
32-35	95.3	0.3	0.5	0.0	0.0	4.0	100.0	4.7	575	3.1	1,105
0-3	3.0	16.7	36.2	11.4	5.8	26.9	100.0	97.0	1,752	14.9	1,773
0-5	3.0	13.1	33.5	10.1	5.5	34.8	100.0	97.0	2,835	15.6	2,874
6-9	4.5	2.4	11.5	3.7	2.5	75.4	100.0	95.5	1,924	14.5	1,971
12-15	14.6	0.6	2.3	1.2	0.8	80.5	100.0	85.4	1,995	8.9	2,041
12-23	35.3	0.4	1.5	0.8	0.5	61.6	100.0	64.7	4,653	7.3	4,945
20-23	67.7	0.3	0.6	0.5	0.1	30.7	100.0	32.3	1,099	5.8	1,267

Note: Breastfeeding status refers to a "24-hour" period (yesterday and last night). Children classified as breastfeeding and consuming plain water only consume no supplements. The categories of not breastfeeding, exclusively breastfed, breastfeeding and consuming plain water, water-based liquids/juice, other milk, and complementary foods (solids and semi-solids) are hierarchical and mutually exclusive, and their percentages add to 100 percent. Thus children who receive breast milk and water-based liquids and who do not receive complementary foods are classified in the water-based liquid category even though they may also get plain water. Any children who get complementary food are classified in that category as long as they are breastfeeding as well.

¹ Based on all children under three years

Source: NDHS 2008

(e) **Post-natal Healthcare**

Priority interventions for morbidity and mortality reduction during the immediate postpartum period are being strengthened and these include:

- Detection of complications (breathing difficulties, infection, jaundice etc).
- Promotion, protection and support for exclusive breast feeding.
- General monitoring of the wellbeing of the mother and neonate.
- Infection prevention and control.
- Rooming in.
- Information and counselling on home care.
- Advice on danger signs.
- Emergency preparedness and birth readiness.
- Immunization.
- Sleeping under insecticide-treated nets.

As reported in the National HIV/AIDS Reproductive Health Survey (NARHS) of 2007, the proportion of women that received postnatal care (PNC) for their last pregnancy out of women that gave birth within the last 5 years preceding the survey, was 42 per cent for the whole country. The proportion varied considerably with the characteristics of the women. Higher level of education was associated with utilization of post-natal care, as the proportion that received the service increased progressively from 19 per cent among illiterate women to 75 per cent among those with tertiary education. Geographically, 33 per cent of rural dwellers received post-natal care compared to 60 per cent of urban dwellers, and by zone, the proportion ranged from 23 per cent in the North West to 58 per cent in the South East.

Generally, post-natal care was mostly sought from government hospitals by about 71 percent of women who gave birth during the 5 years preceding the survey. About 22% sought PNC in private hospitals. Less than 1 percent of women sought PNC from Traditional Birth Attendants (TBA).

4.3 **Measures Taken to Ensure Registration of Births in the Country**

- (i) The Vital Registration Project started in Nigeria in 1988 following the mandate given to NPopC:
- To establish and maintain a machinery for continuous and the universal registration of births and deaths throughout the Federation;
 - To collect, collate and publish data on migration.
 - To take the project to the grassroots level with the establishment of at least two registration centres per Local Government Areas.
- (ii) The commission now operates a total of 2,773 Registration Centres that is 3 per LGA in all the 774 LGAs in the Country.
- **Births, Death, etc (Compulsory Registration) Act No.69 of 1992**, stipulates that registration shall be carried out, free of charge, within a period of 60 days from the date of birth. **Section 10 (2) (b)** of the Act states that registration can take place after 60 days and within 12 months, subject to payment of prescribed fees.
 - The **Child's Rights Act 2003** in its **Section 5** states that '**Every child has the right to a name and the birth of every child shall be registered.**
 - **Osun state has established a committee for birth registration to ensure compliance with the existing laws on birth registration.**
 - **Capacity building workshops and training were organized for birth registrars and notifiers from all the states of the Federation.**

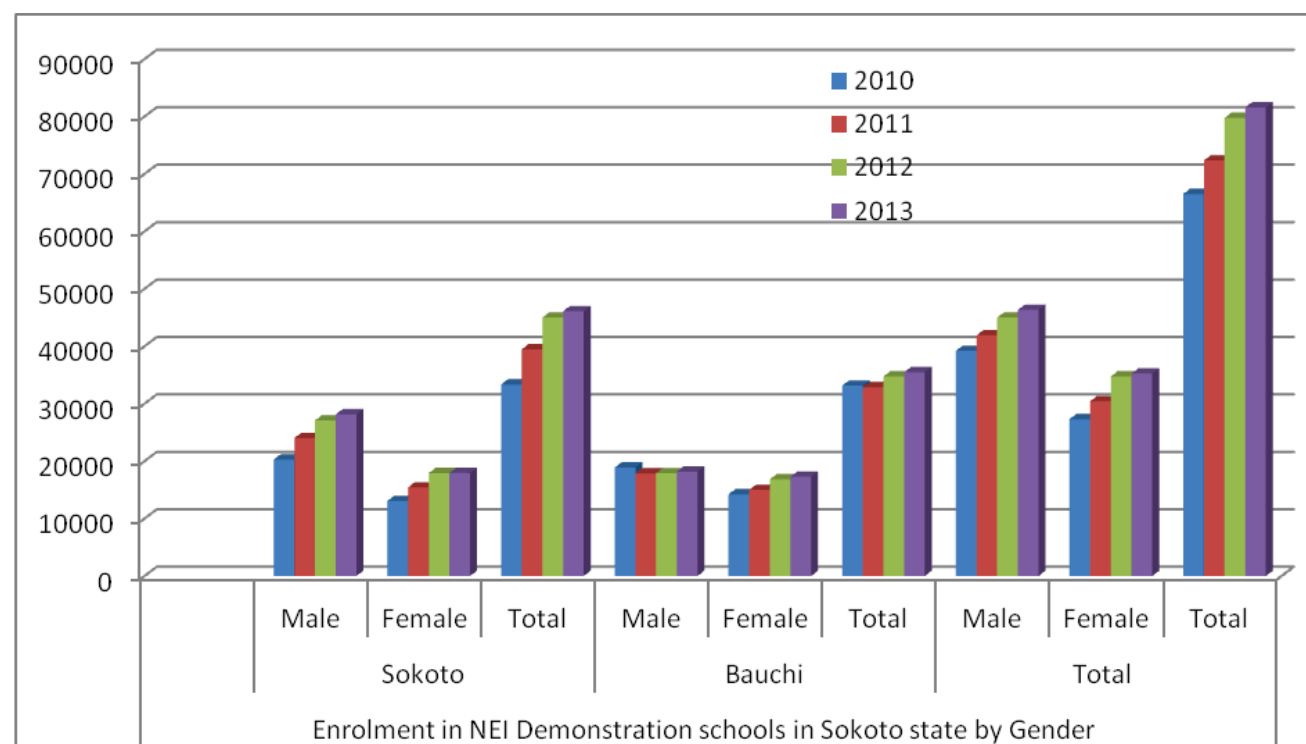
NEI's ultimate approach in producing these documents was working with government partners to adapt or operationalize policies, enhance (or create) systems, and develop procedures so that educational and other services are routinely and effectively delivered to schools and children by government, NOT the project. The underlying development hypothesis is that the quality and coverage of basic education is a function of both a responsive policy and investment framework and the systems and procedures to operationalize and implement it effectively at each level of the education system. NEI's work on policy and system development for both Objective 1 and Objective 2 was organized and conducted through Technical Working Groups (TWG) and sub-TWGs comprising government technical personnel charged with carrying-out tasks and specific activities and other stakeholders. Where such groups existed already, the project worked with them and where they did not, they were established. The TWGs and sub-TWGs were supported technically by NEI staff and consultants. Clear terms of reference (TOR) were defined for each group, outlining tasks, products and schedules. Figure 17 below shows a pictorial view of some policies, procedures and guidelines developed with USG funds.



Figure 17: Pictorial of some policies, procedure and guidelines.

Source: **USAID-Nigeria Northern Education Initiative, 2014: Figure 4**

- **Early Child Care Development (ECCD)**
In order to increase enrollment one-year Pre Early Child Care Development (ECCD) has been incorporated into the Basic Education System. The objective is to make our children spend one year of pre-primary, 6 years of primary and 3 years of post primary. The Ministerial memorandum in line with presidential fiat in respect of this new Basic Education structure was presented and approved by National Council on Education (NCE).
- **National Campaign on Access**
The National Campaign on Access to education was launched to encourage enrolment in schools. While the Federal Ministry of Education is leading the campaign at national and regional levels, State and Local Governments are meant to launch State, Local Government and community level campaigns so as to create awareness for communities. This will ultimately improve access to education especially at the Basic level.



Source: USAID-Nigeria Northern Education Initiative, 2014: Figure 3

Figure 16: Enrolment in NEI demonstration schools by state and by gender, 2010-2013

Creating enabling environment for basic education service delivery Policies, procedures and guidelines put in place

Table 28: Number of policies, regulations, or guidelines developed or modified to improve equitable access to or the quality of education services

Policies, procedures and guidelines developed and approved by State BESC	EOP Target	EOP Actual
1, MTSS; 2, STEP; 3, TRD Procedure; 4, Quality Assurance; 5, Integration of Core Subject to Qur'anic Education; 6, Guideline and Procedure for Mainstreaming OVC to formal school; 7, EMIS Policy; 8, State OVC Plan of Action; 9, Manual for Ministries and OVC Officers' Roles and Responsibilities, 10, Manual on CC formation and Community Action Cycle, 11, A guide on how to find resources for the development of communities, hold community group discussions for BCC and form and run CC. 12, Information Booklet for Adolescent Girls Program; 13, Guidelines for CSO Role in Partnering With Government in MTSS Advocacy, Planning, Implementation and Monitoring	10	13

Source: USAID-Nigeria Northern Education Initiative, 2014: Table 6

4.3.1 Strategies to Promote Birth Registration in Nigeria

Within the reporting period, the National Population Commission evolved an Action Plan to create birth registration systems that are permanent and sustainable. These include:

- Involving every part of society, local communities and stakeholders in awareness raising activities on the importance of birth registration.
- A better coordination between relevant government ministries and institutions involved in birth registration processes.
- The provision of some social infrastructures to facilitate birth registration in rural communities.
- The training of seventy-two NPopC commissioners, state and zonal directors on the supervision and reporting of vital registration activities in all the states of the Federation and different activities to mop up registration exercises at the community level.
- The Vital Registration Department of NPopC also made a country- wide announcement waiving, for the next three years, payment of late registration fees. Payment of fees had however hampered the level of birth registration in the past.

4.3.2 Short Term Strategies

In July 2007, the Vice President, Federal Republic of Nigeria, flagged off a National Campaign on Birth Registration in Abuja. The launch brought together government representatives from the National Population Commission, Federal Ministries of Women Affairs and Social Development, Information and Communications as well as Health. Also represented at the launch were the Speaker of the Federal House of Representatives, Parliamentarians and donor partners like CIDA. UN agencies and the Country Representatives of UNICEF, WHO, and UNFPA, as well as over 500 participants drawn from CSOs, traditional rulers and the media.

The nationwide campaign and launch by the Vice President demonstrates government's commitment to increasing birth registration coverage across the country as well as providing an enabling environment for an effective and smooth implementation of a comprehensive birth registration programme in Nigeria.

Between October and December 2007, the Federal Radio Corporation of Nigeria (FRCN) – 'Radio Nigeria', the National Agency for the Prohibition of Trafficking in Persons (NAPTIP) and UNICEF launched a three-month radio campaign on child trafficking and the economic exploitation of children linked with birth registration. The campaign was broadcast to more than 60 million listeners of Radio Nigeria during more than 20 hours of prime network airtime.

Within the same period, a backlog of nearly 10 Million vital/birth registration forms were processed. The findings, processing methodology, characteristics of birth in Nigeria, current birth registration status and other lessons learned on best practices are documented in a draft comprehensive report which will show the level of births registered in Nigeria from 1994-2007.

With the successful campaign and strong commitment of government coupled with the processing of the huge number of vital registration forms in the country, it is expected that a sustainable systemic monitoring mechanism for documenting births of children born in Nigeria is being institutionalized. It is on record that birth registration coverage of 28% in 1999 (MICS 1999), rose to 30.2% in 2006 (CWIQ 2006) and according to NDHS 2008, 30% of under 5 years old children have their births registered in Nigeria.

4.3.3 Long Term Strategies to Promote Birth Registration in Nigeria

The modalities and frameworks for a sustainable systemic monitoring mechanism for documenting births of children born in Nigeria developed since the last reporting period is still being employed as part of a long term strategic approach in Nigeria.

These are to:

- Include every part of the society, especially local communities.
- Involve stakeholders by raising awareness on the importance of birth registration.
- Enforce and publicise existing legislation.
- Ensure coordination between relevant government ministries and institutions involved in birth registration processes.
- Provide necessary social infrastructure to facilitate birth registration in rural communities.
- Integrate birth registration in other governmental activities and provide sufficient resources for the programmes and service delivery.
- Improve the capacity of the relevant government officials.
- Provide the resources required to ensure universal and effective system of birth registration.
- Collaborate with partners and embark on strong and virile resource mobilization strategies in and outside the country and to involve government, legislators, development partners/donor agencies, health and education sectors, civil society networks, children's parliament and other stakeholders.
- Consistently strengthen institutional capacity of the NPopC (Vital Registration Department) to collate, analyze, process and generate birth registration data at the state and country levels;
- Establish a network between the 3 registration centres in LGAs and child delivery institutions to ensure that all children are registered at birth.

4.3.4 Malnutrition/Poor Nutritional Status

Malnutrition of children or poor nutritional status is the highest cause of deaths of children in Nigeria. The weight for age is a measure of both acute and chronic malnutrition. Children whose weight for age is more than two standard deviations below the median of the reference population are considered *moderately or severely underweight*. Those whose weight for age is more than three standard deviations below the median are classified as *severely underweight*. Stunting is a reflection of chronic malnutrition as a result of failure to receive adequate nutrition over a long period and the recurrence of chronic illness. Wasting is usually the result of a recent nutritional deficiency.

Nutritional Status: MICS 4, 2011

According to MICS 4 2011, children's nutritional status is a reflection of their overall health. When children have access to an Adequate food supply, are not exposed to repeated illness, and are well cared for, they reach their growth potential and are considered well nourished.

Malnutrition is associated with more than half of all child deaths worldwide. Under nourished children are more likely to die from common childhood ailments, and for those who survive, have recurring sicknesses and falter in growth. Three-quarters of the children who die from causes related to malnutrition were only mildly or moderately malnourished—showing no outward sign of their vulnerability. The Millennium Development target is to reduce by half the proportion of people who suffer from hunger between 1990 and 2015. A reduction in the prevalence of malnutrition will also assist in the goal to reduce child mortality.

In a well-nourished population, there is a reference distribution of height and weight for children under age five. Under-nourishment in a population can be gauged by comparing children to a reference population. The reference population used in this report is based on the WHO growth standards. Each of the three nutritional status indicators can be expressed in standard deviation units (z-scores) from the median of the reference population.

Weight-for-age is a measure of both acute and chronic malnutrition. Children whose weight-for-age is more than two standard deviations below the median of the reference population are considered moderately or severely underweight while those whose weight-for-age is more than three standard

Table 27: Statewide enrolment in both project states by gender, 2010-2013

	Sokoto			Bauchi			Grand Total		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
2010/11	255,747	120,962	376,709	396,871	291,444	688,315	652,618	412,406	1,065,024
2011/12	316,566	146,089	462,655	426,261	322,923	749,184	742,827	469,012	1,211,839
2012/13	397,932	214,499	612,431	455,486	355,008	810,494	853,418	569,507	1,422,925

Source: - USAID-Nigeria Northern Education Initiative, 2014: Table 4

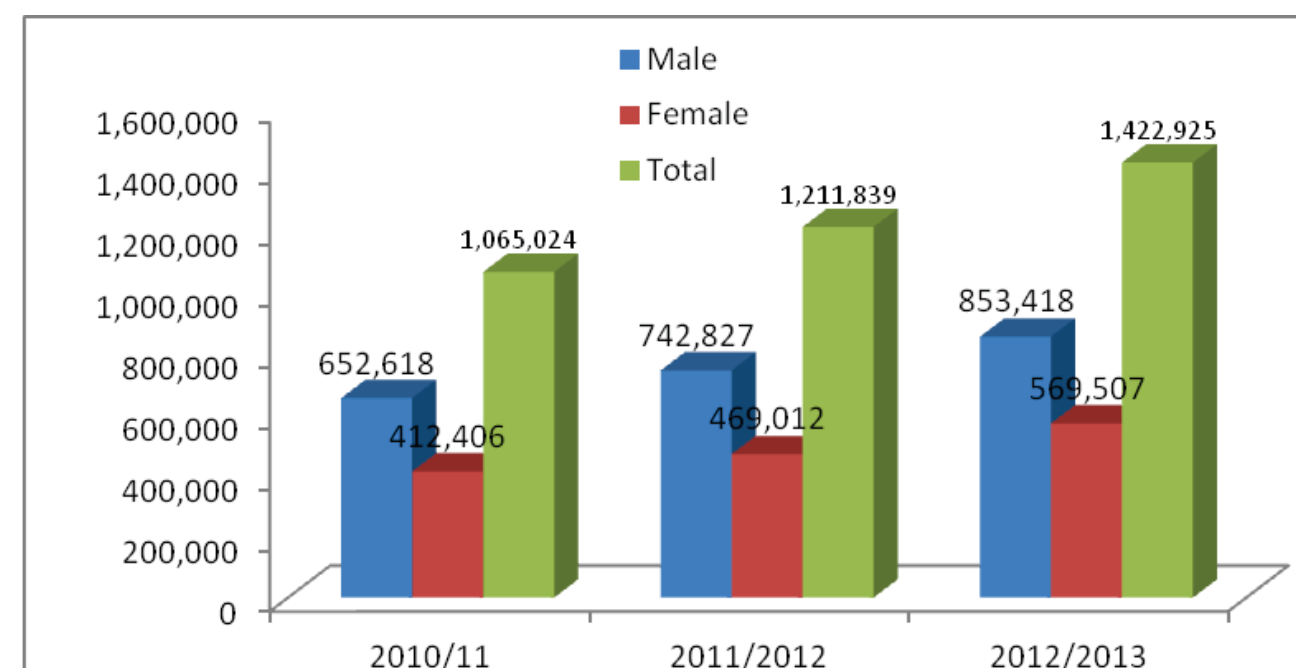


Figure 15: Statewide enrolment in both project states by gender, 2010-2013

Source: USAID-Nigeria Northern Education Initiative, 2014: Figure 2

Table 27 above and figure 15 below, show an enrolment increase from 1.065m in 2010/11 to 1.22m in 2012/13 academic years. This accounts for 33% increase in both states (31% m, 38% f). In Bauchi state an 18% increase in enrolment (15% m, 22% f) was recorded while in Sokoto 63% increase (56% m, 77%f). This shows greater increase in girls' enrolment across gender and in both states. These increases could be attributed to the NEI systems being strengthened at state and LGAs levels, capacity building of administrators and officials as shown on Table 24 and 25 above as well as community mobilization efforts as conducted by the structures set up by the project in them.

Increase in enrolment in demonstration schools

Figure 16 below shows an increase of 23% (Sokoto: 38%, Bauchi: 7%) in the demonstration schools in both states over the baseline (2010-2013). This was an overall increase of 18% m, 29% f; -4% m, 22%f in Bauchi and 39% m, 37% f in Sokoto.

Table 25 above shows the number of classroom teachers and teacher administrators trained under the project. Teachers are key drivers in the achievement of any meaningful learning gains. Series of trainings, workshops were organized for in-service teachers as well as those in pre-service (Primary Education Studies' lecturers and student-teachers) of the Colleges of Education (COEs).

Teacher manuals and guides were produced after needs assessment in four thematic areas of Literacy (L) Numeracy (N), Life Skills (LS) and Psychosocial (PSC) in a participatory approach with major stakeholders. The project strengthened in-service and pre-service training of 3,568 (2,709m, 859f; Bauchi - 1,953: 1,386m, 567f; Sokoto - 1,615: 1,323m, 292f) teachers/educators from 200 demonstration schools in LS and PSC. In PY4, the project trained another set of pre-service teachers in the two COEs (886: 541m, 345f; 424 in Bauchi: 245m, 179f; 462 in Sokoto: 296m, 166f) and supported (in parts) scaled up training by state governments (1,400: 1,224m, 176f; 26in Bauchi: 18m, 8f; 1,374 in Sokoto: 1,206m, 168f). This added to PY3 actual gave a total of 5,685: 3,323m, 1,362f (2,077 in Bauchi: 1,402m, 675f, 3,608 in Sokoto: 2,921m, 687f) teacher educator supported under the project. Additionally, 98 (37m, 12f per state) mentor teachers were identified and trained to develop state capacity in disseminating the new training model. Federal and other donor officials also reviewed the manuals for wider acceptability, sustainability and ownership. See details in 1.4 under discussion

Capacity of school and community-based structures built

School-based structures supported

Table 26: Numbers of Parent-Teacher Associations (SBMCs/CBMCs) school governance structures supported

Project Year/State	Bauchi	Sokoto	Total
1(2010)	0	0	0
2(2011)	60	60	120
3(2012)	100	100	200
4(2013)	100	100	200
NCE	10	10	20
Major title of training/workshop			
Whole school development planning, School Improvement plan, Effective schools management, strategies and monitoring Developing plan and implementing budget, Holding of meetings and decision making			

Impact of capacity building on school enrolment
Increase in enrolment statewide

deviations below the median are classified as severely underweight.

Height-for-age is a measure of linear growth. Children whose height-for-age is more than two standard deviations below the median of the reference population are considered short for their age and are classified as moderately or severely stunted. Those whose height-for-age is more than three standard deviations below the medianare classified as severely stunted. Stunting is a reflection of chronic malnutrition as a result of failure to receive adequate nutrition over a long period and recurrent or chronic illness.

Finally, children whose weight-for-height is more than two standard deviations below the median of the reference population are classified as moderately or severely wasted, while those who fall more than three standard deviations below the median are classified as severely wasted. Wasting is usually the result of a recent nutritional deficiency. The indicator may exhibit significant seasonal shifts associated with changes in the availability of food or disease prevalence.

In MICS4, weights and heights of all children under 5 years of age were measured using anthropometric equipment recommended by UNICEF (www.childinfo.org). Findings in this section are based on the results of these measurements.

Table 21 below shows percentages of children classified into each of the above described categories, based on the anthropometric measurements that were taken during fieldwork. Additionally, the table includes the percentage of children who are overweight, which takes into account those children whose weight for height is above 2 standard deviations from the median of the reference population, and mean z-scores for all three anthropometric indicators.

Table 21: Nutritional Value of Children

Percentage of children under age 5 by nutritional status according to three anthropometric indices: weight for age, height for age, and weight for height, Nigeria, 2011													
	Weight for age			Number of children under age 5	Height for age			Number of children under age 5	Weight for height				
	Underweight percent below	Mean Z-Score (SD)			Stunted percent below	Mean Z-Score (SD)	Wasted		Mean Z-Score (SD)	Number of children			
				percent below			percent above						
								- 2 SD ¹ - 3 SD ²			- 2 SD ⁴ - 3 SD ⁴	- 2 SD ³ - 3 SD ⁵	+ 2 SD
Sex													
Male	24.4	9.3	-1.1	12327	36.8	19.8	-1.4	12193	11.0	3.6	3.2	-.4	12354
Female	24.0	8.7	-1.1	11843	34.9	18.8	-1.3	11782	9.5	2.7	2.7	-.4	11857
Area of residence													
Urban	16.8	4.9	-.8	7356	23.3	10.9	-.9	7294	9.7	2.6	3.0	-.4	7360
Rural	27.5	10.9	-1.2	16814	41.3	22.9	-1.6	16680	10.5	3.4	3.0	-.4	16850
State													
Abia	12.9	2.3	-.7	476	14.0	5.3	-.5	475	11.3	2.5	1.7	-.5	476
Adamawa	27.4	10.7	-1.3	591	47.3	24.1	-1.9	588	6.4	1.1	1.4	-.3	590
Akwa ibom	13.6	3.3	-.7	643	23.3	8.3	-.9	642	4.5	.7	3.4	-.3	642
Anambra	4.5	1.8	-.4	715	11.1	4.3	-.4	716	4.4	.9	.7	-.3	716
Bauchi	35.9	16.3	-1.6	1051	56.4	31.7	-2.2	1047	9.1	2.5	1.7	-.5	1046
Bayelsa	12.9	3.5	-.7	322	15.9	7.4	-.8	322	7.3	.9	1.8	-.4	322
Benue	12.4	4.1	-.5	596	26.0	11.3	-1.0	593	4.9	1.2	4.7	.0	591
Borno	35.5	14.2	-1.5	740	46.9	29.5	-1.6	733	18.7	5.6	3.5	-.8	737
Cross River	13.0	3.6	-.8	468	28.1	10.1	-1.2	468	5.0	1.3	2.7	-.2	466
Delta	15.7	4.2	-.8	683	21.9	9.4	-.8	681	10.3	2.7	2.3	-.5	677
Ebonyi	16.6	3.8	-.9	322	25.1	11.0	-1.0	322	6.2	1.8	.9	-.5	322
Edo	7.9	1.8	-.5	504	14.6	5.3	-.6	503	4.7	1.4	1.9	-.3	503
Ekiti	8.7	2.9	-.6	320	13.6	6.0	-.8	318	6.1	.5	3.2	-.1	320
Enugu	9.5	.0	-.4	470	10.8	4.0	-.5	461	7.1	2.6	2.7	-.2	463
Gombe	37.1	14.3	-1.6	456	56.3	29.6	-2.1	447	12.3	4.1	2.8	-.5	450
Imo	11.6	1.4	-.6	535	14.6	3.0	-.6	533	5.9	.7	1.3	-.3	535
Jigawa	43.8	18.0	-1.8	882	58.8	39.6	-2.4	867	14.3	6.6	4.7	-.5	874
Kaduna	27.2	11.0	-1.3	1213	43.0	23.5	-1.6	1180	11.9	4.5	2.2	-.5	1212
Kano	37.4	15.1	-1.5	1898	53.6	32.7	-2.1	1883	10.6	2.8	3.5	-.4	1912
Katsina	44.8	20.1	-1.8	1049	61.9	40.1	-2.5	1026	14.7	5.1	4.4	-.5	1157
Kebbi	43.4	20.4	-1.7	621	53.9	33.7	-2.0	608	18.2	5.7	2.3	-.8	613
Kogi	14.7	5.3	-.6	434	26.7	10.3	-1.0	429	6.4	1.3	6.0	.0	434
Kwara	21.5	6.5	-1.1	425	29.5	15.1	-1.1	423	11.5	3.9	.8	-.6	424
Lagos	11.5	.7	-.7	1443	8.9	2.1	-.4	1440	11.6	2.6	1.4	-.6	1444
Nasarawa	16.9	5.1	-.9	326	33.2	15.1	-1.3	325	6.2	1.7	2.3	-.2	325
Niger	29.8	12.0	-1.3	745	46.6	28.2	-1.7	739	14.5	4.7	4.5	-.4	740
Ogun	13.8	3.4	-.9	574	19.8	7.1	-.9	571	8.4	3.2	1.5	-.5	571
Ondo	12.2	4.2	-.7	486	43.2	20.5	-1.6	481	5.7	3.1	13.9	.4	484
Osun	11.0	1.6	-.8	529	22.2	6.6	-1.0	529	6.6	.8	.6	-.3	529
Oyo	20.0	4.3	-1.0	944	27.3	9.5	-1.1	936	11.1	3.1	2.8	-.5	934
Plateau	19.6	5.8	-.9	472	33.9	15.6	-1.3	472	6.3	1.4	2.6	-.1	469
Rivers	9.4	3.9	-.4	763	13.5	6.2	-.3	759	6.7	2.6	4.8	-.3	761
Sokoto	31.8	14.2	-1.5	763	47.5	24.9	-1.8	760	16.7	6.4	3.9	-.7	771
Taraba	19.6	5.9	-1.0	363	40.0	20.6	-1.5	358	6.2	2.6	3.7	-.1	359
Yobe	48.0	22.3	-2.0	484	64.8	40.4	-2.5	480	14.9	4.9	2.3	-.7	483
Zamfara	47.5	21.9	-1.9	655	61.7	41.6	-2.4	648	17.5	6.7	2.0	-.7	653
FCT (Abuja)	11.0	2.5	-.7	210	19.6	7.0	-.8	210	3.4	.6	1.8	-.2	207

Table 24 above shows the number of individuals and by extension institutional capacity built under both objectives (1 and 2) and major title of trainings and workshops. In all, 461 (428m, 33f; 246 in Bauchi: 225m, 21f; 215 in Sokoto: 203m, 12f) administrators and government officials were trained over the LOP. Those trained included largely government administrators/officials from State UBE Board (SUBEB), Ministry of Education (MOE), and LGEAs who were trained/retrained on their scope of work to improve education services delivery and decision making process. Specifically, SUBEB officials were trained on new Performance Monitoring Plan (PMP) to track MTSS implementation as well as strategic planning. Agencies for Mass Education (ANFEA and SAME) officials were trained on Non-formal Education MTSS development and finalization and LGEA personnel on computer literacy and TMIS utilization. All these trainings improved their competencies, in addition to the policies, guidelines and procedures that provided an enabling environment for efficiency. Details of these trainings and their impact are in the discussion under each result below.

Capacity of government officials build for Teacher Development and Management

Teacher-Educators trained

Table 25: Numbers of Teachers/Educators trained with USG funds during LOP (in-service, pre-service, mentors, facilitators, trainers)

Project Year	Number Trained								
	Bauchi			Sokoto			Grand Total		
	M	F	Total	M	F	Total	M	F	Total
1(2010)	29	9	38	25	3	28	54	12	66
2(2011)	1,139	488	1,627	1,419	353	1,772	2,558	841	3,399
3(2012)	1,386	567	1,953	1,323	292	1,615	2,709	859	3,568
4(2013)	263	187	450	1,502	334	1,836	1,765	521	2,286
NCE	NA	NA	NA	NA	NA	NA	NA	NA	NA
Major title of training/workshop									
Content development workshop, TRD Assessment Training, NTEP A daptation and sensitization workshop, Mentor teachers trained as trainers and school support activities, Teachers Training on activity-based method on literacy and Numeracy, Primary Education Studies (PES) lecturers trained on introductory literacy and num eracy materials, In -service and pre -service teachers training on life skill and psychosocial, Teachers Educators (College Lecturers) were also trained on incorporation of contents of the Literacy, Numeracy, life skill and psychosocial counseling manuals in their teacher training curriculum, scaled up training of teachers on the Literacy, Numeracy, life skill and psychosocial counseling.									

Source: USAID-Nigeria Northern Education Initiative, 2014: Table 2

both states, so that school-level **data** is regularly collected and processed to inform a **consultative decision-making** process involving Local Government Education Authorities (LGEAs), communities and civil society organizations (CSOs). This consultation follows a **deliberative, reflective planning process**, utilizing established tools and methods to set **standards, goals and benchmarks** to establish **state-wide policies and procedures** which improved classroom instruction, teacher performance and supervision as well as supporting vulnerable children (VC) to access and succeed in school. (**Recommended Citation:** Creative Associates International, Washington DC, USA. February 2014. Nigeria Northern Education Initiative: Final Progress Report 2014. U.S. Agency for International Development, Nigeria Mission).

Project accomplishments

NEI operated under two objectives: 1) Strengthening state and local government capacity to deliver quality basic education services by addressing key issues in the management, sustainability and oversight of basic education and 2) Increasing access of vulnerable children to basic education and other services such as health information and counseling. These two objectives contained nine (9) results, six (6) and three (3) respectively.

In order that a broader understanding is established, project accomplishment will be presented using some key operational indicators to demonstrate the lasting impact generated through the NEI-USAID project.

Capacity of government officials built in Relevant MDAs Administrators and officials trained

Table 24: Numbers of Administrators and officials trained with USG Funds during the Life of Project

Project Year	Number Trained								
	Bauchi			Sokoto			Grand Total		
	M	F	Total	M	F	Total	M	F	Total
1(2010)	57	11	68	93	14	107	150	25	175
2(2011)	134	15	149	132	8	140	266	23	289
3(2012)	225	21	246	203	12	215	428	33	461
4(2013)	138	13	151	196	5	201	334	18	352
NCE	48	5	53	53	1	54	101	6	107
Major title of training/workshop									
Proposal Writing Workshop for Federal Funding , MTSS Development and Review Workshop, EMIS guidelines workshop, National Teacher Education Policy (NTEP) development and review workshop, Setting priorities training, MTSS/SESOP Harmonization training, Annual School Census (ASC) and EMIS Toolbox and Geographic Information System (GIS), training capacity to effectively disseminate correct information on OVC, Standard setting, State teacher education policy, TRD procedure, Quality assurance policy, MTSS - Performance Management Plan, Quality Assurance, Teacher Recruitment and Deployment Policy, Strategic Management, Annual School Census, EMIS, TMIS, Structured Query Language (SQL), Computer Literacy for LGEA personnel, and MS Power point for TMIS officers, Budget Planning Tool, Computer Literacy, TMIS deployment, utilization, advanced searches as well as TMIS report									

Source: - USAID-Nigeria Northern Education Initiative, 2014: Table 1

Table 21: Nutritional Value of Children (Continued)

Percentage of children under age 5 by nutritional status according to three anthropometric indices: weight for age, height for age, and weight for height, Nigeria, 2011													
	Weight for age		Number of children under age 5	Height for age		Number of children under age 5	Weight for height						
	Underweight percent below - 2 SD ¹ - 3 SD ²	Mean Z-Score (SD)		Stunted percent below - 2 SD ³ - 3 SD ⁴	Mean Z-Score (SD)		Wasted percent below - 2 SD ⁵ - 3 SD ⁶	percent above + 2 SD	Mean Z-Score (SD)	Number of children			
Age in months													
0-5	14.4	5.4	-5	2540	14.7	6.2	-2	2501	14.1	4.5	4.6	-5	2504
6-11	24.3	9.1	-1.1	2701	19.0	8.9	-6	2665	19.9	6.3	2.3	-9	2693
12-23	28.7	11.0	-1.2	4860	37.0	19.3	-1.4	4824	15.5	4.2	2.9	-7	4855
24-35	25.4	11.7	-1.1	4551	43.8	25.0	-1.7	4510	7.3	2.7	3.1	-2	4573
36-47	24.5	8.7	-1.2	4957	43.9	25.4	-1.8	4923	4.9	1.8	3.0	-1	4979
48-59	23.5	6.7	-1.2	4560	39.4	20.3	-1.7	4552	5.6	1.3	2.4	-3	4607
Mother's education													
None	36.3	15.4	-1.5	10426	53.0	31.7	-2.0	10306	12.7	4.4	3.5	-5	10481
Primary	20.6	6.6	-1.0	4812	31.7	15.1	-1.3	4780	8.9	2.1	2.4	-4	4817
Secondary +	12.1	3.0	-7	8930	18.2	7.1	-7	8886	8.1	2.2	2.7	-4	8910
Missing/DK	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)	(*)
Wealth index quintile													
Poorest	38.2	16.8	-1.6	5522	54.0	32.4	-2.1	5442	13.2	4.6	3.3	-5	5529
Second	30.6	12.1	-1.4	4969	48.5	27.8	-1.9	4931	10.4	3.5	3.4	-4	4995
Middle	22.4	7.7	-1.1	4528	34.9	16.6	-1.4	4485	9.2	2.8	2.7	-4	4544
Fourth	16.8	4.8	-8	4643	23.6	10.6	-1.0	4623	9.9	2.4	2.7	-4	4641
Richest	9.6	1.8	-5	4507	13.4	5.7	-5	4495	7.8	2.1	2.6	-4	4501
Geo-political zone													
North-Cent	19.4	6.7	-9	3207	32.8	16.3	-1.2	3191	8.4	2.4	3.6	-2	3190
North-East	34.6	14.5	-1.5	3686	52.5	29.8	-2.0	3653	11.5	3.4	2.4	-5	3666
North-West	38.4	16.5	-1.6	7080	53.8	33.2	-2.1	6972	13.9	4.9	3.4	-5	7191
South-East	10.1	1.7	-5	2518	14.1	5.0	-6	2508	6.8	1.6	1.4	-3	2512
South-South	12.1	3.4	-7	3383	19.5	7.8	-7	3375	6.5	1.7	3.0	-3	3370
South-West	13.5	2.5	-8	4296	20.3	7.3	-9	4275	9.4	2.5	3.2	-4	4281
Total	24.2	9.0	-1.1	24170	35.8	19.3	-1.4	23975	10.2	3.1	3.0	-4	24210
¹ MICS indicator 2.1a ² MICS indicator 2.1b ³ MICS indicator 2.2a, ⁴ MICS indicator 2.2b ⁵ MICS indicator 2.3a, ⁶ MICS indicator 2.3b													
The nutritional status table based on the NCHS/CDC/WHO reference can be produced if needed													

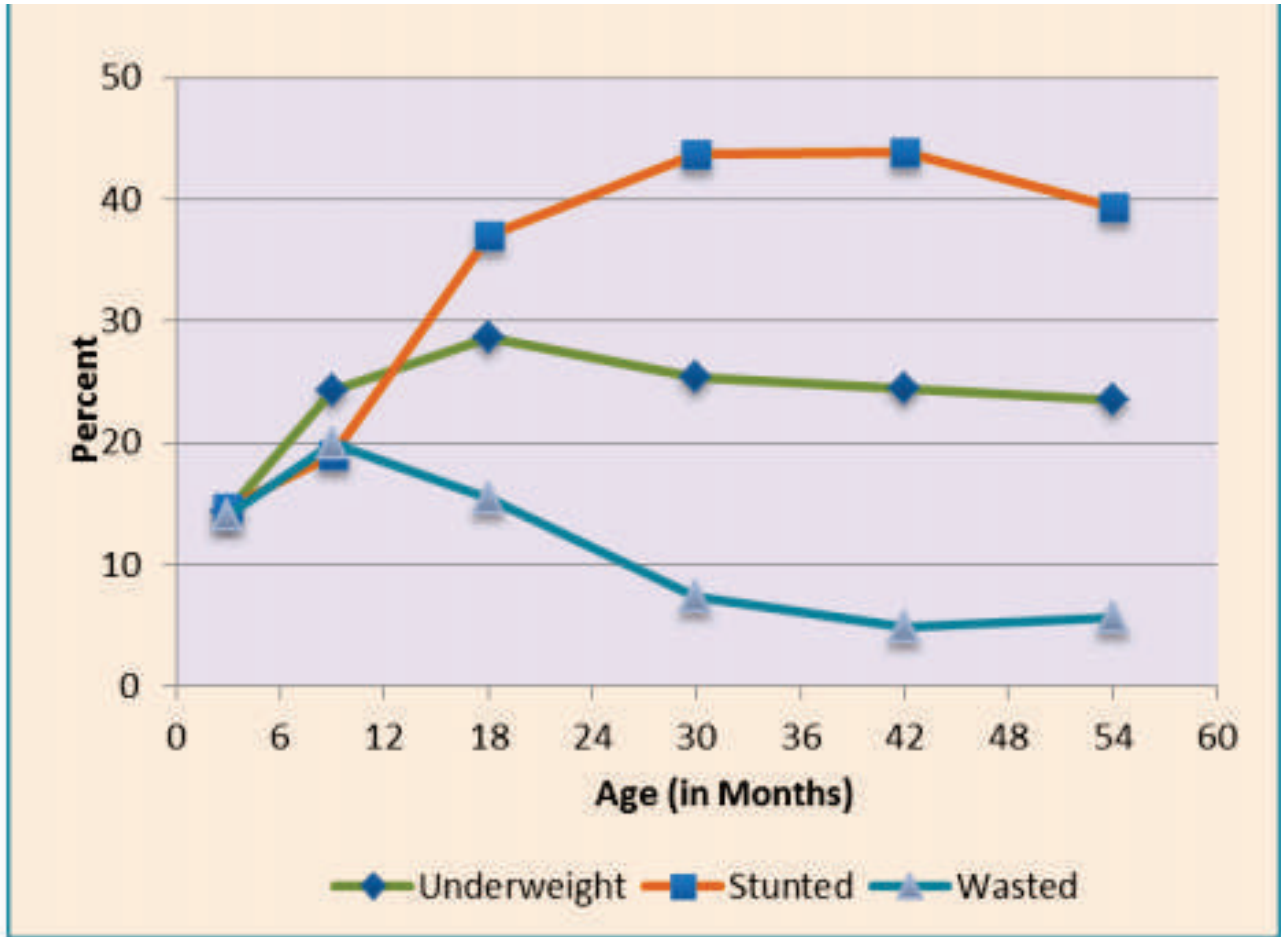
(*) less than 25 unweighted cases

Source: UNICEF/NBS/DFID/UNFPA/Federal Republic of Nigeria, Abuja (2011): MICS 4 (Table NU.1, at pp.20-21)

Children whose full birth date (month and year) were not obtained and children whose measurements are outside a plausible range are excluded from Table 21. Children are excluded from one or more of the Anthropometric indicators when their weights and heights have not been measured, which ever applicable. For example if a child has been weighed but his/her height has not been measured, the child is included in underweight calculations, but not in the calculations for stunting and wasting.

More than one in five (15 percent) of children under age five in Nigeria are moderately underweight and 9 percent are classified as severely underweight (Table 21). More than one in five children (17 percent) are Moderately stunted or too short for their age and 7 percent are moderately wasted or too thin for their height. Severely stunted and severely wasted are 19 percent and about 3 percent respectively.

Figure 13: Percentage of children under age 5 who are underweight, stunted and wasted, Nigeria, 2011.



Source: UNICEF/NBS/DFID/UNFPA/Federal Republic of Nigeria, Abuja (2011): MICS 4 (Figure NU.1, at pp.22)

Children in North are more likely to be underweight and stunted than other children. In contrast, the percentage (14) wasted is highest in North-West while the South-South has the lowest at 7 percent.

Those children whose mothers have secondary or higher education are the less likely to be underweight and stunted compared to children of mothers with no education. Boys appear to be slightly more likely to be underweight, stunted, and wasted than girls. The age pattern shows that a higher percentage of children aged 12-23 months are undernourished according to all three indices in comparison to children who are younger and older (Figure 13). This pattern is expected and is related to the age at which many child en cease to be breastfed and are exposed to contamination in water, food, and environment.

Table 23: Out of School Children

S/N	ITEM	QUANTITY
1	Teacher @ 1:40	262,500
2	Classroom @ 1:40	262,500
3	Instructional Materials (Textbooks) i. English ii. Mathematics iii. Basic Science iv. Social Studies	10,500,000 10,500,000 10,500,000 10,500,000 42,000,000
4	Incentives i. Mid-day meal ii. Conditional Cash Transfer to cover sundry expenses iii. Provision of sanitary facilities like toilets and water in schools to address the needs of the girl-child iv. Security for the pupils v. Create employment opportunities for parents and guardians vi. Child-friendly learning environment	

Source: Federal Ministry of Education, Abuja, July 2013

- Almajiri Education**
The Almajiri Education Programme was launched in Sokoto as part of the strategy to reduce the number of Out-of-School children. The programme is aimed at mainstreaming the Almajiri System into Basic Education, thereby providing them with the opportunity to develop skills that will make them contribute to national development. Textbooks in eleven (11) subjects have been produced for use in the schools nation-wide.
- USAID-Nigeria Northern Education Initiative: 2009-2014**
End of project technical report of Nigeria Northern Education Initiative (NEI), a four and a half year USAID-funded basic education intervention in two northern states of Nigeria to strengthen systems for delivery of basic education and increase access of vulnerable children to basic education and other services (e.g. health information, counseling, referral). At project commencement in November 2009, basic education indices in northern Nigeria sharply contrasted the national average. According to the Nigeria DHS EdData Survey (NEDS), 2010, School age children that had never attended any school was 31% (national), 52% in Bauchi state and 66% in Sokoto state. Issues with basic education were fuelled by poor planning, weak budgeting systems, low capacity of officials, non involvement of communities and civil society in service planning, delivery and monitoring as well as a poor perception of the concept of vulnerability among children.

The project responded to several identified issues in Bauchi and Sokoto states, in partnership with state and local governments and non-governmental agencies whose primary focus is the delivery of quality basic education. Two hundred public and Qur'anic schools were selected as demonstrations schools to test project hypothesis. NEI **strengthened education systems in**

The above documents aim at addressing the integration of the more than 9,523,699 Almajirai across the country. A breakdown of this figure shows that: North-East has 2,657,767 pupils; North-West – 4,903,000 pupils; North-Central – 1,133,288; South-West- 809,317; South – East – 3,827; South-South – 18,500.

• The **Strategy for the Acceleration of Girls' Education** in Nigeria seeks to achieve gender parity in access to, retention, completion and achievement in basic Education by 2015 in Nigeria.

• **Girls Education Programme**

To continue to address the high rate of girls who are out of school, the construction of Junior Girls' Model Secondary School was initiated in 13 States of the Federation. The States are: Adamawa, Akwa Ibom, Bayelsa, Cross River, Delta, Ebonyi, Ekiti, Jigawa, Kaduna, Nasarawa, Rivers, Yobe and Zamfara.

Table 22: - Girls Education Programme

Status	States
Completed and Ready for Handover	Adamawa, Jigawa, Nasarawa, Zamfara
90% completion	Rivers
75% completion	Akwa Ibom
70% completion	Delta, Ekiti
60% completion	Ebonyi, Yobe
40% completion	Cross River
20% completion	Bayelsa, Kaduna

Source: Federal Ministry of Education, Abuja, July 2013

• **Initiative to Address the Out-of-school Children Phenomenon (10.5 Million)**

The Federal Ministry of Education seeks to address the basic requirement for the above category of children in Nigeria through the following interventions:

4.4 **Measures to Scale up High Impact Intervention for Maternal, Newborn and Child Health**

(a) **Integrated Management of Pregnancy and Child birth (IMPC)**

The “Making Pregnancy Safer” Initiative through the Integrated Management of Pregnancy and Childbirth (IMPC) offers opportunities for addressing early newborn care. The clinical guidelines for the integrated management of childhood illnesses (IMCI) have also been expanded to include the newborn in the first 7 days.

(b) **The National Health Insurance Scheme (NHIS)**

The implementation of the NHIS started in 2004 focusing initially on public sector employees. The potential for this scheme to improve access for the poor and informal sector is dependent on how quickly it can build up a sizeable number of contributors.

(c) **Health Service Delivery System**

Health services are provided through the various hospitals and clinics owned by Federal, State and Local Governments. The Local Government is responsible for Primary Health Care (PHC), which includes comprehensive health centres, primary health care centres, health clinics and health posts. Overall, the number of PHC facilities indicates reasonable availability with less regional disparities than is the case with hospitals. There were over 13,000 public sector PHC facilities and almost 7000 private PHC facilities. Although the population/PHC facility ratios are higher in the North East, North-West and South–South, the disparities are not as marked. More importantly, there are relatively more public sector PHC facilities in the North compared to the South.

(d) **Health Management Information System**

The Health Management Information System (HMIS) was established in 1990s, and has been significantly revised to ensure that standard forms are available to both public and private health care. Information thus generated by the health system is designed to flow upwards from the community (collected by Junior Community health extension workers) through the Local Government and the State Ministries of Health to the Federal Ministry of Health. The information collated and exchanged is employed to improve the health care systems in the country.

The Community-based Information System (CBIS) which collects data on the Key Household and Community Practices (KHCP) from the household was recently harmonised with the HMIS in the context of IMNCH using the key indicators for maternal, newborn and child health. This ensures that information on the KHCP which has been proven to have the greatest impact on the survival of children is documented and used to promote the much needed behavioural change towards the care of children.

(e) **Health Sector Reform Programme (HSRP)**

There is an ongoing Health Sector Reform Programme in Nigeria (HSRP) by the Federal Ministry of Health. The HSRP is to ensure a fundamental realignment/transformation of the organization, management and financing of the Nigeria Health Care System. It is the Government's response to dealing with the outlined organisational, systemic and financial challenges facing the national health system. The comprehensive reform is structured along seven strategic thrusts:

- Improving stewardship role of government.
- Strengthening the National Health System and its management.
- Reduction of disease burden.
- Improving availability of health resources and their management.
- Improving access to quality health services.

- Improving consumer awareness and community involvement.
- Promoting effective partnership, collaboration and coordination.

In addition, many of the professional regulatory bodies have been reconstituted. For example, the Medical and Dental Council Malpractices Tribunal is now functional. These professional bodies are empowered to ensure that high standards are maintained in the health profession.

Reducing the distance to health consumer's travel to the health service delivery point is another objective of the health sector reform programmes. The National Primary Health Care Development Agency is building and equipping an additional 200 PHC centres across the country to improve consumer access and provide quality health care. The Debt Relief Fund (DRF) is being used to fund this activity in addition to other ancillary activities aimed at achieving the health related MDGs in Nigeria (See table 6.10)

(f) The National Health Bill and Fiscal Responsibilities Bill

The National Health Bill, designed to successfully revamp the Primary Health Care System and implement the Integrated Maternal New Born and Child Health Strategy (IMNCH), has been passed by the National Assembly awaiting the President's assent. It will enhance the financing of health care, especially at the PHC level.

Currently, there is a draft Fiscal Responsibilities Bill (FRB) at the National Assembly which when passed will create the framework within which Nigeria's economic policy will be managed. The Bill seeks to compel all tiers of government to adhere to principles of sound public expenditure management. It prescribes rules for financial and assets management and financial reporting

(g) Resources Allocated

The Federal budgetary component of health expenditure has increased from the 1999 N16 billion to N63.2 billion of the year 2002 budgeted expenditure. The Federal figure for 2006 was about N102 billion representing a 40% increase. The health appropriations in 2006 also included the deployment of N21 billion from the debt relief fund towards the achievement of health-related MDGs from the debt relief gains in table 21a below:

- b) free secondary education;
- c) free university education; and
- d) free adult literacy programme.

- **Section 15 of the Child Rights Act, 2003**, every child has the right to free, compulsory and universal basic

education and it shall be the duty of the Government in Nigeria to provide such education.

- (2) Every parent or guardian shall ensure that his child or ward attends and completes his –

- a) Primary school education; and
- b) Junior secondary education.

- (3) Every parent, guardian or person who has the care and custody of a child who has completed his basic education, shall endeavour to send the child to a senior secondary school, except as provided for in Subsection (4) of this section.

- (4) Where a child to whom Subsection (3) of this section applies is not sent to senior secondary school, the child shall be encouraged to learn an appropriate trade and the employer of the child shall provide the necessities for learning the trade.

- (5) A female child who becomes pregnant, before completing her education shall be given the opportunity, after delivery, to continue with her education, on the basis of her individual ability.

- **The Universal Basic Education Act 2004 and strategic plan provides commitment to compulsory and free education**

- The National vision 2020 for Nigeria is to become an emerging economy model, delivering sound education policy and management for public good. Nigeria is also on course to meet the target of Millennium Development Goal that all boys and girls complete primary education i.e. 100% by 2015.

Government also collaborates with some international agencies like UNICEF, JICA, UNESCO, DFID, USAID, WHO and other development partners for the promotion of education in Nigeria. Their intervention and contributions are in the following areas: Manpower training; Supply of textbooks and equipment; Development of new institutions; Curriculum Development; Construction/refurbishing of classrooms, libraries, laboratories toilets etc; Provision of computers and other related facilities; Research and Giving scholarship among others.

- **The National Policy on Education 2004** provides for the following: - philosophy and goals of education in Nigeria; early childhood/pre-primary education; basic education; primary education; secondary education; mass literacy, adult and non-formal education; science, technical and vocational education; tertiary education; open and distance education; special education; educational services; planning, administration and supervision of education; financing education.

- Very recent opportunity to address the plight of the Almajirai children that are largely out of school is the Constitution of a National Implementation Committee on Almajirai Education Programme after the foundation laying stone of the Almajiri Model School launch in Jigawa State on December, 2010. The Committee has come out with the following documents to address the Almajiri child education:

- **A Strategic Plan of Action (short term 2011-2015; long term 2020);**
- **Operational guidelines complementing the Almajiri education programme;**
- **The workplan for the integration of 400,000 Almajirai and distribution of model schools.**

PART FIVE

Development Rights of the Child

5.1 Education, Leisure and Cultural Activities: Articles 11 and 12 (CRA Section 15)

5.1.1 Child's Right to Education Article 11 AUCRWC

a) Legal, Policy and Administrative Measures Taken to Protect the Right of the Child to Education

- In addition to the main poverty reduction strategy paper NEEDS and the Seven Point Agenda of the Federal Government of Nigeria, the following are the main documents on national laws, policies and key programmes in the education sector:
 - The 1999 Constitution
 - Draft National Policy on Special Needs Education/Implementation Guidelines, 2012
 - Training Manual on Adaptation and Implementation of Inclusive Education in Nigeria, 2010
 - A Strategic Framework for the Revitalization of Adult and Youth Literacy in Nigeria, 2012.
 - Universal Basic Education (UBE) Act 2004
 - Child's Right Act 2003
 - National Child Policy 2007
 - National Policy for Integrated Early Childhood Development in Nigeria (2007)
 - National Minimum Standard for Early Child Care Centres in Nigeria (2007)
 - National Gender Policy on Education 2007
 - National Framework on Girls' and Women Education, 2012
 - Guidelines for Implementing National Policy on Gender in Basic Education, 2007
 - National Policy on Gender in Basic Education, 2007
- The policies/laws seek to ensure the access of all children of primary and junior secondary school age (6-14+ years) in Nigeria to free, compulsory and universal basic education. This policy objective of free and compulsory education including skill acquisition fits well into employment and job creation objectives, the overall national development strategy on the free mid-day meal will no doubt impact positively on the health and nutrition objectives. Governments in Nigeria (Federal, State and Local) have primary responsibility to fund and manage basic education; with Federal Government playing the intervention/assisting role. The Agencies involved include: the Universal Basic Education Commission (UBEC), State Universal Basic Education (SUBEB), Local Government Education Authority, private sector and development partners.
- The UBE ACT prescribes minimum standard of basic education throughout the country and UBEC is expected to monitor, supervise and coordinate the implementation of specific programmes for the attainment of compulsory, free and universal basic education. Relative to health and nutrition, education has the highest budgetary allocation and is most essential in poverty and deprivation reduction. This is because of the linkages between education, health, improved sanitation, access to information and improved knowledge of child rights and protection. Thus it is a very effective means of addressing the MDG goals and targets relating to children.
- **Though the Nigerian Constitution does not directly provide for the right to education, yet section 18 of the Constitution on educational objectives obligates the government to direct its policy towards ensuring that there are equal and adequate educational opportunities at all levels.**
 - (2) Government shall promote science and technology.
 - (3) Government shall strive to eradicate illiteracy, and to this end Government shall as and when practicable provide:
 - a) free, compulsory and universal primary education;

Table 21a: - Health specific Debt Relief Fund (DRF) appropriation breakdown (2006)

Allocation(₦b)	Initiative	Activity	Executing MDA
5.5	Immunisation Programme	Procurement of vaccines for routine immunisation through UNICEF	NPI
8.45	7,850 primary Health care	Construction and equipping of 200 PHC centres and the rehabilitation of 150 old PHCs	NPHCDA
	0.645 maternal and Child	Capacity building for doctors and nurses and procurement of drugs and equipment and supplies for MNCH	CDPA/FMOH
1.38	Roll back malaria	Insecticide Treated bednets (ITNs) and drugs	FMOH
0.51	Tuberculosis/Leprosy control	Anti tuberculosis treatment using the Directly Observed Treatment Short course (DOTS) therapy	National TB and leprosy referred to Teaching hospital Zaria
4.75	HIV&AIDS		FMOH
0.21	Tracking the implementation of MDG Policies	Procurement and distribution of software for tracking, monitoring and evaluation of the implementation and health related millennium development goals	FMOH
0.21	M& E	Monitoring and Evaluation	Presidency

Source: Federal Ministry of Health, Department of Planning Research and Statistics, 2007

(h) Health Education

HIV/AIDS education remains a major challenge with the national prevalence rate of 4.4% (2005 Sentinel Survey). The HIV prevalence among 15-24 years old rose from 5.7% in 1999, to 5.9% in 2001, and decreased from 5.4% in 2003 to 4.8% in 2005. The decrease has been comparatively more rapid among 15-19 than among 20-24 year olds. (Nigeria MDG Report, 2006).

In the UNICEF/FGN 2002 – 2007 Programme Plan of Cooperation, the **Adolescent Health, HIV/AIDS Prevention, Care and Support Project** under the Protection and Participation section of UNICEF has as part of its objectives the following:

- To provide adolescents and young people with adequate information on health-HIV/AIDS prevention, care and support in 774 LGAs.
- To provide life skills and youth-friendly services in at least 111 focus LGAs to improve their health-seeking behaviour.
- To institutionalise reproductive health and HIV/AIDS prevention and care initiatives into the NYSC scheme.

Under this scheme and based on the defined objectives, UNICEF in collaboration with the NYSC recorded the following results by the end of year 2007:

- A total of 119,263 (55% males & 45% females) youth corps members acquire scientifically correct and

culturally sensitive information on RH issues and HIV/AIDS prevention, care, and support through the conduct of IEC seminars in 37 NYSC camps nation-wide..

- 7,438 volunteer corps members (41% females) acquired peer education skills in HIV prevention and are currently training and mentoring peer educators in schools and conducting HIV/AIDS prevention and care outreaches in communities of primary assignment nation-wide.
- 3,868 corps members (32% females) received HIV/AIDS voluntary counselling and testing as part of UNICEF's collaboration with Global HIV/AIDS Initiative in Nigeria (GHAIN) on the NYSC reproductive health and HIV/AIDS prevention, care and support project. Although a fewer number of females were tested, more positive cases (24) were reported among them compared with males (10).
- 169 orientation/master trainers acquired improved knowledge and skills on Reproductive health issues, HIV/AIDS and life skills. These trainers were deployed to 9 camps to provide accurate and complete information on HIV and AIDS, Reproductive health issues and life skills to about 40,000 Nigerian graduates on 9 camps. 1,800 Peer educator trainers enlisted are expected to train and mentor about 72,000 young secondary school students on HIV, AIDS, Adolescent Reproductive Health and peer education issues over a period of one year.
- 48 government officials working with youths/NGOs (including state directors of youth development and youth development officers from 27 UNICEF Focus LGAs) acquired skills and knowledge on youth friendly planning and programming
- 251 young person's acquired different skills at the Youth Resource Centre, in Delta state. 289 were counselled and submitted to HIV/AIDS testing. Referral services were provided to 7 youths who tested positive.
- 360 young persons from Oyo and Lagos States, had improved knowledge in conducting community outreaches in Rights, HIV/AIDS and Gender issues
- A total No. of 666 trainers acquired knowledge and skills on HIV and AIDS, Reproductive health issues and life skills for provision of training of corps members in camp.
- Information exists for the development of NYSC HIV/AIDS workplace Intervention.
- 66,400 Young People aged 15 – 19 in 30 LGAs of Adamawa , Bauchi, Borno Gombe, Plateau, Nasarawa, Taraba, Kano, Jigawa and Yobe states acquire information and skill to practice healthy behaviour or Reproductive health and HIV prevention.
- 2,108 Faith Based Youth organisation members in 42 focus communities in Abia, Akwa-Ibom, Anambra, Bayelsa, Benue, Cross-River, Ebonyi, Enugu, Imo and Rivers, acquire knowledge and skills on HIV/AIDS prevention, access to services, care and support.
- 111 primary health care providers in the North East, North West, North Central states acquired updated knowledge and skills for provision of youth friendly services.
- 30,409 corp members, camp officials and persons from the camps mammy markets in Delta, Edo, Ekiti, Lagos, Ogun, Ondo, Osun and Oyo, were sensitised on the key things to know on RH/HIV/AIDS.
- **47 out-of-school/street children had their experiences documented and 15 of them were reunited with their families in Lagos, Ogun, Ondo, Delta, Sokoto and Kano States, while others are being supported to go back to school.**

(i) National Response:

The national response to young people's sexual and reproductive health is premised on principles bordering on the following strategic areas of frame work:

- **Advocacy and Social Mobilization.**
- **Equitable Access to quality.**
- **Adolescent Friendly Health Services.**
- **Capacity Building and**

d) Environmental Factors

It is widely acknowledged that there are other “non health” factors that significantly impact health status of populations. These include poverty, poor environmental sanitation, food insecurity and poor nutrition as well as climate change with its consequent disasters and emergencies.

African Ministers of Health and Ministers of Environment at their meeting in 2010 in Angola issued a joint statement in which acknowledged that climate change could affect African countries to the extent of jeopardizing the attainment of health related MDGs if appropriate proactive measures are not urgently taken. Nigeria also ranks 115th among 169 countries on index to access to potable water while only 32% of our population have access to basic sanitation. These factors, singularly and collectively significantly contribute to high disease burden with respect to water borne and water related diseases and contribute to morbidity and mortality especially among children.

- Advocacy and awareness creation e.g. Celebration of International Day of Zero Tolerance and Sensitisation of school children and Youth Corp members
- Mass media sensitisation and partnership in information dissemination
- Legislation by State Houses of Assembly against some of these harmful practices
- Training programmes to re-orientate practitioners in Female Genital Mutilation (FGM) and to provide alternative employment opportunities for them.
- Girl-child education and adult literacy campaigns.

4.8 Measures to Ensure Equitable Distribution of Medical Services and Equipment

Various levels of government have undertaken several measures aimed at ensuring equitable distribution of services, personnel and equipment in the health sector through the following efforts:

- Development of Ward Minimum Health Package to replace Minimum District Health for all Packages.
- 328 completed Model Primary Health Care Centres have been completed between 2001 and 2006 nationwide; while 246 are still under construction.

4.9 Challenges: The Health Sector

a) Legal Framework

Lack of legal framework for health in Nigeria, particularly the absence of a National Health Act that clearly defines the roles and responsibilities of healthcare professionals, as well as the roles and responsibilities of Local, State and Federal Governments in the management of the three levels of healthcare;

b) Human Resources for Health

Human Resources for Health in the country are beset by the following issues and challenges:

- Shortages, mal-distribution and under-utilization of health professionals as a result of persistent brain-drain, skewed rural/urban disparity in the distribution of health service providers and inefficiencies in the rational deployment and utilization of staff on the basis of workload.
- The overall HRH picture in Nigeria is inconsistent and lacks integrity as HR information and data collection are fragmented and incomplete, with various stakeholders collecting and collating bits and pieces in the absence of any common data source or human resource management information system (HRMIS).
- Production of health professionals is not related to the requirements of the country as there is no mechanism in place to inform health training institution intake and output targets on the basis of service demand and staffing projections.
- There are systemic deficiencies in the planning, management, development and administration of the health workforce.

c) Health Care Financing-3 states participating Enugu, Cross River and Bauchi

Household out of pocket expenditure (OOPE) has remained by far the largest source of health expenditure in Nigeria (about 69%) and in absolute terms increased from N489.79 billion in 2003 to N656.55 billion in 2005. The estimated health expenditure of private firms grew from N20.32 billion in 2003 to N29.67 billion in 2005. The contributions from the development partners to health sector in Nigeria is estimated to have increased from N48.02 billion in 2003 to N78.78 billion in 2005. In terms of contribution from different levels of Government, the NHA 2003-05 estimated that the Federal Government contributed above a tenth of the total sum (12.1%), State Governments, about 7.6%, and LGAs about 4.5%.

The share of OOPE steadily increased from 64.25% during 1998-2002 to 68.6% during 2003-2005) with analysis showing that OOPE was as high as 86% in some northern states. This underscores the huge economic burden of health care expenditure on households, especially the poorer households. The responsibility to lessen this burden therefore rests with the government playing a stewardship role to ensure provision of quality and affordable health services to Nigerians.

- **Research.**
- Monitoring and Evaluation.

The frame work recognises the pivotal role of young people's participation as major stake holders and identifies the need for effective, sustainable implementation with key factors for success as follows:

- Integrated approach to programme planning and implementation.
- Effective coordination especially at the community level.
- Young people's participation.
- Partnership and resource mobilization including budgetary allocation by government at all levels.

The following programme areas were identified: Advocacy, Information, Education and Communication, Education and Skills Development, Training, Services, Legal Rights and Protection as well as Research, Monitoring and Evaluation.

(j) Measures to Ensure Adequacy of Counselling and Guidance

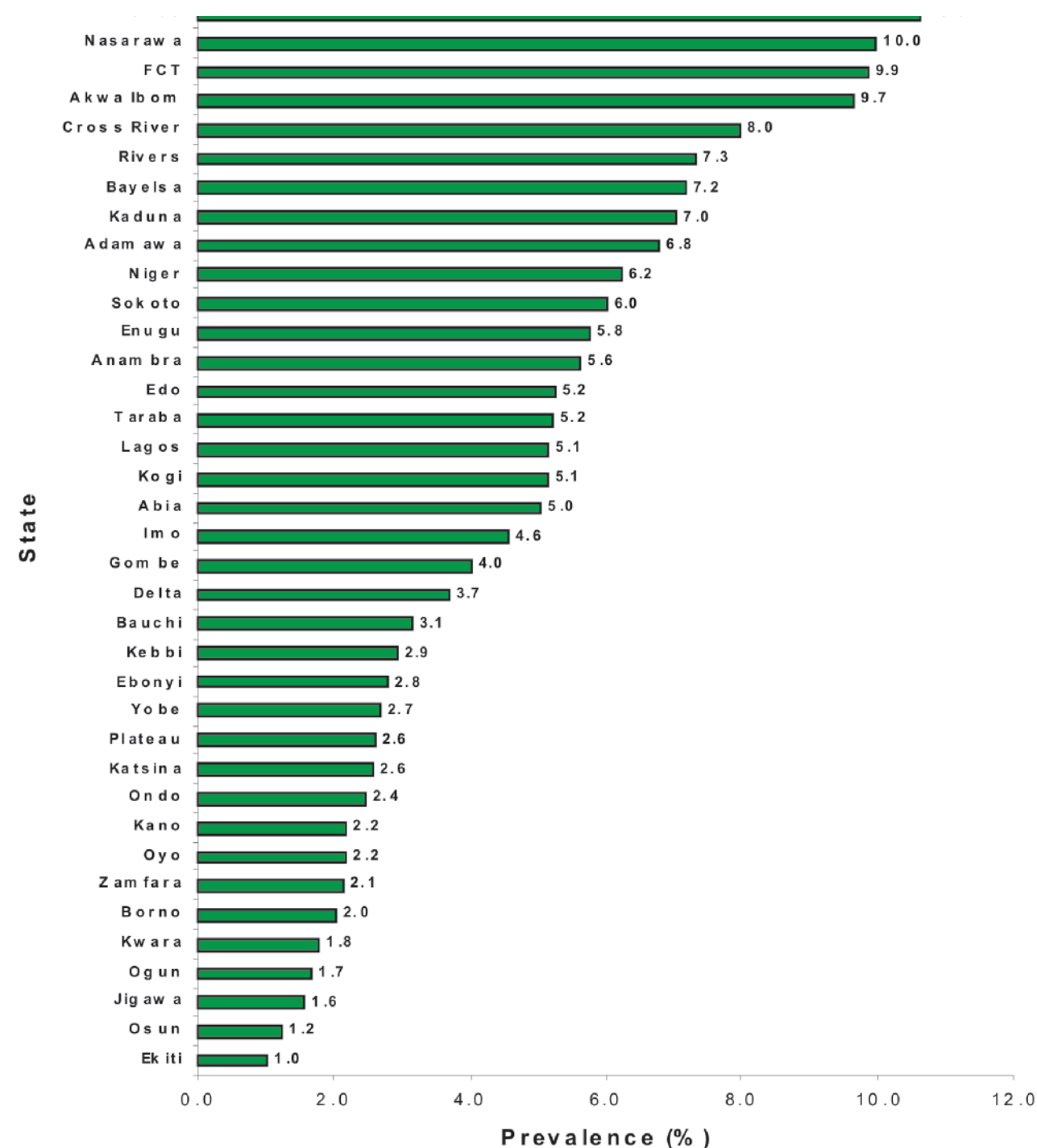
- The National Education Policy recommends the establishment of Guidance and Counselling Units in primary and secondary schools. This is to ensure that children receive adequate counselling and guidance including education on HIV/AIDS and reproductive health. However, to date these units exist only at the secondary school level, as the counsellors are inadequate in number.
- In some states, youth centres have been established to provide recreational, information and counselling services.
- There is a national reproductive health guideline/strategy.
- Government and NGO's collaborate in advocacy and awareness creation programmes on reproductive health including HIV/AIDS.
- Peer Educators Initiative involving training of teachers and pupils on environmental health, sexual health and HIV/AIDS have been introduced in schools with the aim of involving children in the counselling of fellow children under the supervision of teachers.

(k) Prevalence of HIV/AIDS: Administrative and Policy Measures

- In addition to the introduction of the Prevention of Mother-to-child Transmission (PMTCT) of HIV programme, HIV Counselling and Testing Centres (HCT) have been established in most states of the Federation.
- The PMTCT programme, which began in six tertiary sites in 2002, has expanded to 230 sites, and about 400,000 pregnant women have benefited from it.
- HIV/AIDS control has been integrated into the country's PHC system and decentralised to the LGA.
- The Integrated HIV and AIDS, Sexual/Reproductive Health and Tuberculosis (HASTS) service model is being implemented across the country.
- HIV sentinel surveillance was established to monitor trends in the epidemic and to assess the impact of the response.
- The 2008 HIV and Syphilis Sentinel Survey was conducted from June 16 to September 8th, 2008. The objectives of the survey were to: determine HIV prevalence among pregnant women attending antenatal clinics, assess the trend in HIV prevalence and provide data for estimating and projecting the HIV epidemic in the general population.
- In the 2008 Sentinel Survey (HSS 2008), 36,126 pregnant women participated from 158 sentinel sites (84 urban and 74 rural) in the 36 States in Nigeria and FCT. The survey was guided by SMC while CDC and WHO provided technical support. The outcome of the survey, as indicated in Figure 14., recorded thus:
 - Overall HIV Prevalence was 4.6%.

- Prevalence range: 1.0% in Ekiti to 10.6% in Benue.
- All States and FCT had prevalence greater than 1%.
- 17 States and FCT, had prevalence greater than 5%.
- Bwari in FCT had the highest site prevalence of 22.0% while the least (0.0%) was recorded in Igbara Odo (Ekiti), Ganawuri (Plateau), Taura (Jigawa) and Tudun Wada (Kano State).

Figure 14: HIV Prevalence - Country Situation (HSS 2008)



Source: Health Sentinel Survey 2008

- In order to address the grossly inadequate treatment regimen for children infected with HIV/AIDS, Government developed the Paediatric Anti-retroviral Therapy (ART) Guideline, a draft paediatric ART training manual and National Paediatric Framework. The demonstration phase of 'Early Infant Diagnosis' for early detection of HIV/AIDS in HIV-exposed infants has been concluded. A laboratory for early infant diagnosis has been set up in Taraba and Oyo States and the FCT as well.

4.5 AIDS Orphans

Estimated Number of AIDS Orphans

- The Number of AIDS-orphaned children in 2008 was 2.23 million. Orphans for whom surrogate/foster parents cannot be found amongst extended family relatives are sent to any of the orphanages, throughout the country.
- Following the West African Regional Conference on Orphans and Vulnerable Children (OVC) held in Yamoussoukro, Cote D'Ivoire, in April 4-8, 2002, Nigeria established an OVC Stakeholders Committee to address the increasing number of OVC due to HIV/AIDS. This was followed by the creation of OVC units at National and State and LGA levels.

4.6 Care of Children Affected by HIV/AIDS

The priority objectives and strategies needed for improved care of children affected by HIV/AIDS would require a multi-sectoral approach. Consequently Nigeria's OVC National Plan of Action 2006-2010, was launched in May, 2007. This has provided the needed impetus and framework for the acceleration of the national response to the orphans and vulnerable children. About 5000 copies of the NPA and National Guidelines & SOP have been widely disseminated among key stakeholders.

UNICEF, in collaboration with the Federal Ministry of Women Affairs and Social Development, implemented activities based on defined objectives in the OVC NPA using the most appropriate combination of the strategy mix of advocacy, capacity building, service delivery, programme communication and empowerment. Key results achieved are as follows:

- A baseline survey on the situation of orphans and vulnerable children in Nigeria was published in 2008, under the coordination of the Federal Ministry of Women Affairs and Social Development.
- A coalition of civil society organisations in 10 Northern States provides care and support services to 25,000 orphans and vulnerable children in 30 LGAs/communities.
- 27 NGO members of the Children and AIDS coalition from Sokoto, Kebbi, Kaduna, Niger, Kogi, Katsina, Kwara, Zamfara and FCT, during an interactive session, acquired knowledge and skills on establishing, running and sustaining of OVC support groups and developed a guide for the whole process including monitoring in CFO focus LGAs.
- Political leaders were mobilised to allocate adequate national resources to the care of orphans and children made vulnerable by HIV/AIDS.
- Capacity of families and communities was strengthened to support and care for orphans.
- Community-based responses were stimulated and strengthened.
- Awareness was raised in communities on the need to create an enabling environment for orphans and children made vulnerable by HIV/AIDS.
- Sustainable communication initiatives aimed at reducing stigma and discrimination were supported.
- The involvement of the global community and development partners was facilitated.

4.7 Some Specific Measures to Combat Harmful Practices Affecting Children's Health

Sections 21-25 of the CRA seek to address HTP such as early marriage/betrothal, tattoos and skin marks and exposure or involvement in the use of narcotic drugs or the production of psychotropic substances. Other measures are: