



**Spotlight
Initiative**
*To eliminate violence
against women and girls*

Initiated by the European Union and the United Nations:



**Spotlight
Initiative**

*To eliminate violence
against women and girls*

COUNTRY PROGRAMME DOCUMENT

NIGERIA

December 2018

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COUNTRY PROGRAMME DOCUMENT

Programme Title: Spotlight Initiative in Nigeria	Recipient UN Organizations (RUNOs): UNDP, UNICEF, UN Women, UNESCO and UNFPA																					
Programme Contact: Elina Silén, Special Assistant to the Resident Coordinator Alternate: Kwasi Amankwaah, Head of the Resident Coordinator's Office Address: 617/618 Diplomatic Drive, Central Business District, Abuja Telephone: +234 70 1999 33 93 E-mail: rc.office.ng@one.un.org elina.silen@one.un.org kwasi.amankwaah@one.un.org	Programme Partners: Ministry of Budget and Planning; Ministry of Women Affairs and Social Development; Ministry of Health; Ministry of Justice; Ministry of Finance; Office of the Senior Special Assistant to the President on the Sustainable Development Goals; Ministry of Education; National Bureau of Statistic; and National Human Rights Commission at Federal and State level. The Office of the Vice President for federal level. CSO partners are to be selected through open and transparent competitive processes																					
Programme Country: Nigeria	Programme Location (provinces or priority areas): Federal Level State Level: <i>Focus states are Lagos, Sokoto, FCT, Ebonyi, Adamawa and Cross Riverⁱ (Annex 9: Criteria and Process for State Selection)</i>																					
Programme Description: Through a comprehensive approach, the Spotlight Initiative in Nigeria will aim to support a <i>Nigeria where all women and girls, particularly the most vulnerable, live a life free from violence and harmful practices</i> . The vision will be realized by addressing the linkages between sexual and gender-based violence and harmful practices with related aspects of sexual and reproductive health and rights as a cross-cutting theme. Focus will be on prevention efforts , particularly addressing the root causes of gender-based violence and harmful practices (child marriage and FGM) against women and girls; and ensuring access to inclusive, timely, and quality services for victims and survivors. The geographical scope will be vertical, supporting interventions at federal, state and community levels and horizontally across 5+1 focus states, one per geo-political zone, based on a mixed set of criteria (including	Total Cost of the Spotlight Country Programme (including estimated Unfunded Budget): USD 43,335,266 Total Funded Cost of the Spotlight Country Programme (Spotlight Phase I ¹ and UN Agency contribution): USD 27,189,793 Breakdown of Total Funded Cost by RUNO: <table><tr><th>Name of RUNOs</th><th>Spotlight Phase I (USD)</th><th>UN Agency Contributions (USD)</th></tr><tr><td>UNDP²</td><td>6,159,156</td><td>160,122</td></tr><tr><td>UN Women</td><td>7,202,026</td><td>312,686</td></tr><tr><td>UNFPA</td><td>6,314,321</td><td>408,314</td></tr><tr><td>UNICEF</td><td>3,498,828</td><td>754,215</td></tr><tr><td>UNESCO</td><td>1,825,668</td><td>554,456</td></tr><tr><td>TOTAL</td><td>25,000,000</td><td>2,189,793</td></tr></table>	Name of RUNOs	Spotlight Phase I (USD)	UN Agency Contributions (USD)	UNDP ²	6,159,156	160,122	UN Women	7,202,026	312,686	UNFPA	6,314,321	408,314	UNICEF	3,498,828	754,215	UNESCO	1,825,668	554,456	TOTAL	25,000,000	2,189,793
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¹ Funding from the Spotlight Initiative will be allocated by the Operational Steering Committee in two distinct phases: Phase I will entail allocating 70% of the funding envelope, Phase II will only be allocated depending on the Country Programme's overall needs and performance towards achieving results

² It should be noted that the UNDP budget also reflects all joint Programme Management Costs that are sitting at the Resident Coordinator's Office.

prevalence, political will, enabling environment, capacities and potential to facilitate further expansion and upscaling).ⁱⁱ The most vulnerable women and girls will be targeted.

Estimated No. of Beneficiaries

Indicative numbers	Direct	Indirect
Women	745,850	17,066,282
Girls	671,630	7,228,791
Men	50,000	3,523,103
Boys	39,120	1,767,038
TOTAL	1,506,600³	29,585,214⁴

Note: A breakdown and analysis by intersecting forms of discrimination should be provided in the body of this document.

Start Date: 1 January 2019

End Date: 31 December 2022

Total duration (in months): 48 months

³**For estimating the direct beneficiaries**-the following methodology was used: Jointly reviewed each of the activities to estimate direct number of beneficiaries; Made rough estimates for numbers of members in networks, coalitions; Made use of existing numbers of government employees of institutions; Used data from previous programming to see how many benefitted from them (especially in terms of calculating community mobilization interventions);

⁴ **For estimating the overall indirect beneficiaries:** the team used data from the 2016 National Bureau of Statistics, coupled with data from the National Population Commission and State Government data; to estimate the overall populations of the targeted states, disaggregated by women, men, boys and girls; Based on these numbers, envisaged that an estimated 75% of the targeted female adult and girls' population in these states will indirectly benefit from the Spotlight Initiative; whilst an estimated 20% of men and boys will indirectly benefit. Note: Whilst we envisage that s populations outside of these states will also benefit from the programme, we have not included them in the calculation as we find it very hard to estimate the impact at this point.



Spotlight Initiative
To eliminate violence against women and girls



Recipient UN Organization: UN Women

Ms. Comfort Lamptey
Country Representative
Signature
Date & Seal

Comfort Lamptey

4/1/2019



Recipient UN Organization: UNDP

Mr. Samuel Bwalya
Country Director
Signature
Date & Seal

J. Kuchnel

3/01-2019

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UNITED NATIONS DEVELOPMENT PROGRAMME



Recipient UN Organization: UNFPA

Mr. Eugene Kongnyuy
Country Representative a.i.
Signature
Date & Seal

[Signature]

07 January 2019



Recipient UN Organization: UNICEF

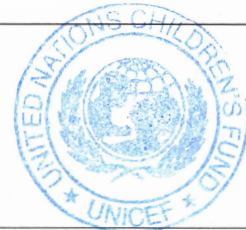
Mr. Mohamed Malick Fall
Country Representative
Signature
Date & Seal

oic for

[Signature]

PERVILLE IRONSIDE

2 January 2019



Recipient UN Organization: UNESCO

Mr. Yao Ydo
Title
Signature
Date & Seal

oic for

[Signature]

3/01/2019



UN Nigeria

Resident & Humanitarian Coordinator
Mr. Edward Kallon
Signature
Date & Seal

[Signature]

4/01/2019



The UN Executive Office of the Secretary General:

Ms. Amina J. Mohammed

Signature: _____

Date: _____

List of Acronyms & Abbreviations

ASC	Annual School Census
ASHWAN	Association of Women Living with HIV in Nigeria
CAN	Christian Association of Nigeria
CBO	Community-based Organization
CEDAW	Committee on the Elimination of Discrimination against Women
CEHWIN	Centre for Women's Health and Information
COLaHR	Coalition of Lawyers for Human Rights
CPC	Child Protection Committee
CPIMS	Child Protection Information System
CPN	Computer Professional Registration Council of Nigeria
CPSS	Child Protection System Strengthening
CRA	Child Rights Act
CRL	Child Rights Law
CRS	Catholic Relief Services
CSE	Centre for Science and Environment
CSWI	Commercial Sex Workers Initiative
CYDI	Community & Youth Development Initiative
CWEENS	Christian Women for Excellence and Empowerment
EMIS	Education Management Information System
EU	European Union
EVAWG	Ending Violence Against Women and Girls
FOMWAN	Federation of Muslim Women Associations in Nigeria
FIDA	International Federation of Women Lawyers
FGM	Female genital mutilation
GEEP	Government Enterprise and Empowerment Programme
GEOB	Gender and Equal Opportunities Bill
GBV	Gender based Violence
GBVIMS	Gender-Based Violence Information Management System
GOST	Guided Open Space Technology
HCWG	Humanitarian Communication Working Group
HIV	Human Immuno-Deficiency Virus
HP	Harmful Practices
ILO	International Labour Organization
IOM	International Organization for Migration
JNF	Justice Now Foundation
LACVAW	Legal Advocacy Coalition on Violence Against Women
LGA	Local Government Area
M&E	Monitoring and Evaluation
MICS	Multiple Indicator Cluster Survey
NAWEF	National Women Empowerment Fund
NGO	Non-Governmental Organization
NAPTIP	National Agency for the Prohibition of Trafficking in Persons
NASFAT	Nasrul-Lahi-L-Fatih Society
NDHS	Nigeria Demographic and Health Survey
NIALS	Nigerian Institute of Advanced Legal Studies
NHRC	National Human Rights Commission
NTC	National Technical Committee
NYC	National Youth Council
NYP	National Youth Policy
NSCIA	Nigerian Supreme Court for Islamic Affairs
OSSAP SDGs	Office of the Senior Special Assistant to the President on SDGs
PHC	Primary Health Care
ROLAC	Rule of Law and Anti-Corruption Programme
SACE	Strengthening Advocacy and Civic Engagement Project
SDG	Sustainable Development Goal



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SGBV	Sexual and gender-based violence
SMILE	Sustainable Mechanisms for Improvement of Livelihoods and Household Empowerment
SMS	Short Message Service
SOP	Standard Operating Procedure
SRHR	Sexual and reproductive health and rights
STEER	Systems Transformed for EmpoweredAction and Enabling Responses for Vulnerable Children and Families project
TVET	Technical and Vocational Education and Training
UN	United Nations
UNAIDS	Joint UN Programme on HIV and AIDS
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
UN Women	United Nations Entity for Gender Equality and the Empowerment of Women
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNCG	United Nations Communication Group
VAC	Violence Against Children
VAPP	Violence Against Persons Prohibition Act
VAWG	Violence against Women and Girls
WARDC	Women Advocates Research and Documentation Centre
WASD	Women's Affairs and Social Development
WOWICAN	Women's wing of the Christian Association of Nigeria
WHO	World Health Organization
WRAPA	Women's Rights Advancement and Protection Alternative
WYCA	Centre of Women Youth and Community Action



I. Situational Analysis

Nigeria ranks 118 out of 134 countries on the Gender Equality Index⁵. The inadequate inclusion of women and girls' perspectives in policy making decisions, resource allocation and implementation in economic and social sectors continues to challenge the advancement of gender equality. Over 70 percent of women live below the poverty line, with maternal mortality ratios at 576 per 100,000⁶. Of the estimated 3.2 million Nigerians living with HIV, 55 percent are women⁷. Enrollment of girls in school ranges from one third to one quarter of classroom participants and out of the 10.5 million out-of-school children, two-thirds are girls.⁸

Negative social norms which condone or support violence against women and girls (VAWG) and harmful practices (HP) remain pervasive. Gender-based violence (GBV) is widespread, and 30 percent of women aged 15-49 have reported experiences of sexual abuse, with a marked divide between girls and women in urban (33 percent) and rural (24 percent) areas⁹. The Boko Haram insurgency, the rise of violent extremism and the humanitarian crisis have exacerbated the occurrence of GBV in the North-East. Nigeria has the largest number of child brides in Africa and one of the highest prevalence rates in the world: 23 million girls and women were married as children¹⁰. Currently, 43 percent of girls are married before age 18, and 17 percent are married before they turn 15. Once girls in Nigeria are married, very few (1.2% of girls 15-19) use contraception or have their contraception needs met (13.1%). Nigeria accounts for the third highest number of women and girls who have undergone female genital mutilation (FGM), reported at 25 percent prevalence. Harmful practices occur in a context of limited knowledge and access to sexual and reproductive health and rights (SRHR) information and services, with complications of early child bearing and obstructed labour such as obstetric fistula. An estimated 20,000 new cases of obstetric fistula occur every year.

The Nigerian Government's response has included efforts to improve its institutional and policy framework, which include the Violence against Person Prohibition (VAPP) Act, enacted at the national level in 2015, the National Policy on the Elimination of FGM/C, the National Strategy to End Child Marriage, a Road Map and National Priority Actions to End Violence Against Children (VAC) which have been adopted and are being supported for implementation. Ongoing efforts to increase access to quality accessible and affordable services include the National Health Act, as well as the One PHC per ward initiative of the Federal Government.

Civil society remains an important constituency, working to hold the government accountable to deliver on rights protection. However, despite the existence of a strong feminist movement, the potential of civil society and women groups to advance women's rights has been insufficiently tapped to date due to limited coordination and capacity gaps.

Outcome 1 – Legislative and Policy Frameworks

The Nigerian Constitution, the Violence against Persons Prohibition Act (VAPP) 2015, and the Child Rights Act (CRA) 2003 are key laws that guarantee the safety of women and girls. The Constitution sets the legal age of marriage at 18 and this is reinforced by the CRA. The VAPP, which is the most comprehensive framework, provides protection for all citizens (including marginalized groups) and punishment for perpetrators, beyond previous laws. The VAPP is also the first federal law which prohibits FGM across the country.

However, in practice, most Nigerian women and girls are unable to claim their rights and entitlements stipulated in these frameworks and laws. One key reason is that domestication is lowⁱⁱⁱ; the CRA is

5 UNDP Human Development Report 2016

6 The 2013 Nigeria Demographic and Health Survey (NDHS)

7 UNAIDS 2017 Data - http://www.unaids.org/sites/default/files/media_asset/20170720_Data_book_2017_en.pdf

8 NDHS 2013

9 NDHS 2013

10 Multiple Indicator Cluster Survey (MICS) 2016 – 2017

only enacted by 23 states and the VAPP has only been domesticated in 5 states. Additionally, two states have enacted their own specific laws prohibiting FGM.

The combination of the three-pronged government system and the tripartite system are the key barriers for domestication, harmonizing legislation and removing discriminatory measures. The three-tier Government system allows states to independently develop and enact laws, policies and priority actions. As a result, there is also a lack of national standards and guidelines. Furthermore, Nigeria's legal system has a tripartite set-up composed of civil, customary and religious law where the common law does not apply to religious and customary law courts and where there are often conflicts between customary, penal and criminal law. For example, the religious law applicable in Northern regions legalizes beating of a child, pupil, servant or wife as long as it does not cause grievous hurt even though it is criminalized in the penal code.

Implementation of these laws and frameworks are poor. Many policies and frameworks^{iv} are either outdated or require revision. Some require costed action plans and M&E frameworks. Often, a key issue is the lack of law enforcement but Government institutions that should enforce and implement these laws lack capacity and funding. Public knowledge of these laws and policies is very limited and there is low awareness of rights, including sexual and reproductive rights.

The National Gender Policy is yet to bear fruit for it to become an effective vehicle to eliminate discrimination. In 2016, the Gender Equal Opportunities Bill aimed at strengthening women's rights, was presented to the National Assembly, however, if this bill is pending adoption to law. If adopted into law, it would be a major advancement of women's rights in Nigeria.

The implementation of the Convention on the Elimination of all Forms of Discrimination against Women (CEDAW) has stalled and key observations on the implementation of CEDAW in Nigeria include concerns that Nigeria is yet to domesticate the convention at federal and state level. Specific observations relate to concerns about Nigeria's complex and lengthy legislative process, the simultaneous application of statutory, customary and religious laws, grey areas of the Gender Equality and Opportunities Bill, and resistance to comprehensive sexuality education (see Annex 3 for further information).

Lessons Learned & Best Practices: A key lesson learnt regarding the legal and policy is the need to work closely with civil society networks or coalitions. The Legislative Advocacy Coalition on Violence Against Women (LACVAW), a coalition of civil society and women's rights groups, was instrumental in the enactment VAPP Act as they consistently pushed for national legislation prohibiting violence against women. As a result of their efforts and advocacy, the Bill became law. At the state-level, adoption of VAPP (Violence Against Persons Prohibition) Act in Bayelsa (funded by USAID/UKAID through NDI) is considered a best practice thanks to its legislative lobby and advocacy approach. The key success factor is in involving entirely different stakeholders and keeping civil society at the forefront in close engagement with state executives and legislators. Apart from the passing of the bill, there are weekly live radio programme that educate citizens on the provisions of the law, using radio drama to spark dialogue.

Outcome 2 – Strengthening institutions

Nigeria has several formal and informal institutions that hold direct and indirect responsibility for VAWG/SGBV/HP and SRHR. *Annex 10: Institutional Mechanisms in Nigeria* provides a full overview of the various roles and mandates. These institutions include law enforcement agencies, justice and legislative institutions, Ministries, Departments and Agencies (MDAs),^v traditional and religious leaders, and CSOs.

Within the Government, there are four key sectors with mandates related to SGBV, HP and SRHR where each sector addresses different aspects; Education, Justice and Security, Health and Social Affairs. Notwithstanding the plurality of these agencies, the responses and operations at Federal, State and Community levels remains weak and uncoordinated and lacks a comprehensive national coordination mechanism.

This is mainly due to weak capacities; poor planning and implementation; lack of linkages and regular coordination elements (including between formal and informal institutions); low leveraging on expertise; and limited inter agency/ministerial protocol. Additionally, there is no strong political will among many of the institutions to prioritize these issues. This is reflected in the allocation and release of funds including a lack of dedicated budget lines for most of these institutions, especially that of the apex Ministry (the Federal Ministry of Women Affairs and Social Development). Coupled with poor procurement and accountability processes, institutions struggle to produce quality services.

A key evidence that demonstrates the weak coordination is the lack of data on gender-related expenditures (at federal and state level), the absence of any joint action plans and priorities and a passive technical working group. This is particularly evident in comparison to the functioning coordination in other areas such as HIV/AIDS, Human Rights and Malaria.

Lessons Learned & Best Practices: Coordination around thematic areas that spans across various institutions needs joint work plans, joint priorities and dedicated staff (with experience and capacity) that comes together. These are some of the key success factors in the coordination around HIV/AIDS in Nigeria where several joint programmes are now in place. Additionally, there is a strong joint UN coordination among the UN agencies supporting this issue.

One best practice is the Gender and Human Rights project implemented by UNDP together with NACA and the Human Rights Commission. Through this project, various institutions with mandates on human rights have been able to consolidate their work, agree on a division of labor and come up with a joint action plan, recognizing the need for them to work better together.

Outcome 3 – Prevention and Social Norms

Negative socio-cultural norms supporting VAWG and HPs are pervasive and are driven by gender stereotypes and patriarchy where women and girls are seen as second-class citizens and those most marginalized (such as women and girls with disabilities) are very likely to be subject to multiple layers of discrimination. However, there is lack of prevalence data to fully capture the extent of this discrimination.

Nigeria has a wide array of harmful practices^{vi} but two stand out as the most common; *child marriage* and *FGM*. An estimated 6 million girls were married by age 15 and 36 million girls by age 18 and the highest prevalence rates are reported in the Northwest and Northeast region (at 72%). FGM is most prevalent in the South (at 56%)^{vii} but also show discrepancies between urban and rural areas; 23.4% of women living in urban areas having undergone FGM, compared with 15.6% in rural areas. Nigeria is also one of the five countries with the highest rates of FGM medicalization in the world with a prevalence of 12.7% among women aged 15-49 years and 11.9% among girls aged 0-14 years (NPC & ICF Macro 2013). These roughly equal rates signal a lack of change between generations.

Harmful practices occur in a context of poverty, limited knowledge and lack of access to SRHR information and services, with complications of early child bearing and obstructed labour which often results in obstetric fistula. Indeed, FGM and early marriage is seen as a safety guard for the chastity of the girl, and honor of the family that she be married off before commencement of promiscuous behavior. Other sociocultural norms present FGM as a rite of passage into womanhood, promoting hygiene, cleanliness, aesthetics, and controlling female sexuality.

SGBV is widespread and exists in all forms in public and private spheres; domestic violence remains pervasive (16% intimate partner violence prevalence rate) and 30% of women aged 15-49 have experienced sexual harassment abuse (33% in urban and 24% in rural areas) (NDHS 2013). Many are female students in post-secondary schools and pupils in primary schools, within both formal and informal institutions. The lack of economic empowerment is a key issue as it reduces women's choices of negotiation of leaving or remaining in abusive relationships. The poverty of parents sees many girls sent to work as domestic workers, thereby increasing susceptibility to various forms of violence.

According to the 2014 Violence Against Children Survey, one in four girls, one in two girls and one in

six girls have experienced sexual, physical and emotional violence respectively.^{viii} Out of the 10.5 million out-of-school children in Nigeria, girls account for two-thirds. SGBV often includes the denial of access to SRH information and services to women and girls. One indicator of this is that once they are married, very few (1,2% of girls 15-19) have their contraception needs met (13,1%).^{ix} Girls are often married to older men and have limited decision-making abilities including negotiation for condom use. Data indicates that early marriage is also risk factor for early sexual debut, exposure to gender-based violence and increased risk of exposure to HIV and as such, interventions that delay the age of marriage and increase their negotiation skills and house-hold decision making capacities are important to protect them from HIV. Furthermore, 23 percent of girls aged 15-19 years are either mothers or pregnant with their first child. The experience of giving birth may prove fatal for the infant and the mother as well - girls under 15 years of age are five times more likely to die in childbirth than women in their 20s. Child marriage is directly correlated to obstetric fistula, a preventable yet debilitating injury resulting from obstructed labour or prolonged childbirth. In Nigeria, an estimated 20,000 new cases of obstetric fistula occur annually. According to the NDHS 2008, approximately 140,000 young women and girls are living with the complications of untreated fistula in Nigeria, 85% of the cases are in Northern Nigeria, and have no financial capacity to seek medical help.

Lessons Learned & Best Practices: Working on prevention in Nigeria needs a holistic approach, longer term approach which includes empowerment and addressing social norms. One example is the UNFPA supported Adolescent Girls Initiative which has successfully managed to retain girls in schools and delay child marriage in Kaduna and Kebbi. The combined approach of ensuring access to school and safe spaces, enhancing ASRH information and health timing and spacing of pregnancy (HTSP) information as well as community outreach to address social norms has proven very successful. Community members have been targeted by training community champions and role model mothers to support ASRH and advocate for girl child education thereby, reinforcing collective community ownership, engagement and support to ensure girls are enrolled and retained in school.

In Nigeria, there is a strong need to engage men and boys as they are the main custodians of social norms and practices. Through the UN Women HeforShe programme, men and boys at the community level are successfully engaged through community dialogues and training of trainers where they are taught about gender equality and then engage with other men and lead discussions.

Outcome 4 – Services

Survivors (girls and women) face many interconnected challenges in accessing comprehensive, acceptable, quality services that are age-appropriate, gender responsive, user-friendly and affordable. This is partially due to the lack of existing service outlets (Refer to Annex 3: Snapshot of VAWG/SGBV/HP and SRHR in Nigeria for an overview of existing services), limited access to existing ones, socio-cultural as well as policy and legal reasons which makes service delivery challenging and often prohibitive. Sociocultural norms and beliefs that drive harmful practices include a strong desire to control women's sexual and reproductive health and rights. Girls especially face challenges in accessing services due to social cultural norms (culture of silence) underpinning non/low-disclosure of experiences of violence for fear of stigma and discrimination.

Access to justice for women to redress violations of their rights is hampered by long delays in the adjudicatory process, adjournments of proceedings, corruption, congestion in courts, and culture of impunity. Additionally, the capacity of law and security institutions to deliver efficient judiciary services is low and there is a lack of specialist trained law enforcement agents (especially of trained female officers).

There are no national guidelines and tools for the provision of services and referral, including coordination and accountability mechanisms. Frequently, survivors also report that access to health care providers, educational and legal institutions is difficult and that they do not provide a conducive environment to report violence (for example due to lack of privacy and safety measures). Services are uncoordinated and not accessible at community level and there are few shelters and safe spaces. Nigeria currently has some 13 Sexual Assault Referral Centres (One-stop centres) however, anecdotal evidence indicates that only one or two are functioning well. Nigeria's Primary Health Centre system, although centres which are estimated to be around and many are in bad conditions.



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There is also low awareness of people of how to seek help, especially for girls. Additionally, less than 5% of those who know how to seek help, actually receive help.

Reporting rates are low and there are huge inconsistencies in standards and linkages for gender responsive and comprehensive client-centred services, especially for those living with disabilities. In addition, capacities are inadequate to meet the needs of women and girls to access services in specialized units across law enforcement, health, education, human rights, legal and social welfare sectors. There is a large disconnect between services provided by formal and informal sectors and no coordination or accountability between the two.

Lessons Learned and Best Practices: to ensure access to essential services for all, there is a need to provide more holistic services in one place, for example through a one-stop-shop approach that is private, safe and easy to access. One best practice is in Lagos state where the Mirabel Center offers sexual assault referral services (including medical, psychosocial, forensic and counselling) in a safe hospital environment. A key success factor is the centre's close relationship with the state government and the justice sector, especially regarding referrals. Another key lesson learned is the need for developing and using standard operating procedures in service delivery. The joint UNFPA-UNICEF Programme on FGM has successfully recorded a total of 1,059 communities declaring abandonment of FGM. One key factor of this programme has been to ensure that Standard Operating Procedures and protocols including FGM/C, case management form, framework and the Integration of FGM/C indicators into the National Health Management Information Systems (NHMIS) is ongoing.

Outcome 5 - Data availability and capacities

Whilst there has been an increase in the generation of statistical information on socio-demographic variables in recent years, there is a paucity of data as it relates to SGBV, HP and SRHR. Most information is either old or not comprehensive. The two main data sources are the Nigeria Demographic and Health Survey, the Multiple Indicator Cluster Surveys (MICS) but neither provide disaggregated data; leave out vulnerable groups; does not cover the full spectrum of harmful practices; is survey-based and focuses on traditional data (leaving out civil society data, qualitative and anecdotal data). As such, they are mainly indicative.

Despite availability of some prevalence data from other sources such as civil society, there are many information gaps including a large gender gap in traditional data, especially regarding threats and violence that women face (traditional data are those officially recognized and quoted by Government sources). The data samples are small, there is limited primary data and a distinct gap is the unavailability of data on health access and service uptake of girls between ages 10-15. There are also gaps in operational research on socio-cultural, economic barriers and/or provider bias which is limiting adolescent girls' access to SRHR services. Other existing data sources are surveys and studies conducted by individual or coalitions of organizations but often small-scale studies that are carried out by programmes and project do not invest in dissemination and promotion of data use for planning and policy engagements. Most of the information remain in offices shelves and is not widely shared or used for decision making.

Whilst available data sources generally adhere to international guidelines around VAWG, SRHR and HIV, they do not disaggregate data by affected population or beyond the state level. As a result, there are large data gaps on the specific situation for those furthest behind, for example those with disabilities.

Even though Government institutions and CSOs have elements of data, data is often difficult to access and is rarely disseminated and properly used for policy, planning, programming and advocacy. One reason could be that there is no single data repository on SGBV, HP and SRHR data and the routine data management systems have low reporting rates due to poor capacity and inadequate equipment at sub-national level. In many states, GBV incidences are recorded manually and later collated and fed into a central electronic data and IMS. The IMS on GBV and child protection are still in a very nascent stage but are being rolled out. Consequently, regular monitoring of service provision, analysis and use of data for planning and budgeting remains very weak. There is a disconnect between data collected by formal institutions and CSOs and a dearth of simplified or local language data worsens the situation. There is also considerable underreporting which also

significantly contributes to the lack of data.

Lessons Learned and Best Practices: one best practice is The Observatory – a project which is an internet based ‘virtual’ safe space to which women and girls (and boys and men) can report cases of VAWG functional in 5 states (Borno, Kaduna, Kano, Plateau and Rivers). It comprises representatives of relevant ministries, departments and agencies such as the police and the Ministry of Women’s Affairs and Social Development, civil society organizations (CSOs), service providers and the media. The data is analysed and recorded by the platform provider, The Fund for Peace, to which reports are sent. In doing so, the Observatory contributes to breaking the culture of silence, and providing the support to survivors of violence and effective response to prevent and respond to VAWG.

The Population Council is another best practice in terms of accessing data on key and vulnerable populations through rapid studies where they generate and manage evidence on barriers and facilitators to accessing health systems, prevention of harmful practices and conducting more multilevel analysis of data from NDHS and MICS.

Outcome 6 - Supporting the women’s movement

Nigeria has a wide range of diverse and vibrant CSOs and women groups working on women’s and children’s rights and GBV/HP and related SRHR issues at the national, state and community level. They include social, religious, traditional, professional and young people’s groups. To date, they have achieved important results; one example is the Legislative Advocacy Coalition on Violence Against Women (LACVAW), which worked to ensure the passage of the VAPP and has promoted its implementation.

However, most operate at small-scale due to capacity and funding gaps. Another main challenge is the patriarchal status quo which makes it difficult to advocate for women’s rights. Most CSOs work in isolation without linkages between each other or a unified movement or umbrella body. Many of the groups that have large constituencies have been politicized and commercialized. As a result, they are disconnected from partners who could amplify their efforts, such as traditional, religious groups, men and boys’ networks, security and private sector partners and professional women associations. These lack of linkages and synergies limits their convening power and influence of their advocacy.

There is also a huge gap in the linkages and intergenerational engagements between the older CSOs and the nascent CSOs, hampering effective collaboration, mentoring and cross learning and sharing of knowledge and skills.

Lessons Learned and Best Practices: there is a need to work with local and grassroots CSOs to help them to coordinate and amplify their voices as they have great potential to make a large impact. One example is the Women for Women and He4She project which managed to mobilize Nigerian women into a movement and get them to speak up on issues of women and girls. It comprises men and women from different political and non-political interest and has managed to convene thousands of women across Nigeria, across religious affiliations, across ethnic divide/diversities, across geographic differences and across age, status, social class, physical challenges to jointly call on the National Assembly to take further steps to create an enabling environment for the elimination of Violence Against Women and Girls.

II. Programme Strategies and Theory of Change

The overall **vision** of the Spotlight Initiative in Nigeria is: *A Nigeria where all women and girls, particularly those most vulnerable, live a life free from violence and harmful practices.*

Theory of Change

If (1) Government institutions at Federal and State levels are engaged in assessing, developing, domesticating and implementing policies and legislation to eliminate VAWG/SGBV/HP and promote women and girls’ SRHR; and

(2) if the implementation of legislations and policies is effectively monitored; then (3) an enabling legislative and policy environment on VAWG/SGBV/HP and other forms of discrimination is in place and translated into plans and actions, guaranteeing the rights of women and girls (including SRHR); because (4) effectively implemented legislative and policy frameworks address impunity and provide for coordinated action, including in the areas of prevention, services and data collection; and (5) laws and programmes that integrate VAWG/SGBV/HPs into SRHR services are developed, implemented and monitored.

The Initiative visualizes to deliver on the following results: (a) existence and enforcement of non-discriminatory legislative and policy frameworks favorable to protect and empower women and girls where impact is assessed and monitored; (b) strengthened national and sub-national systems institutions with trained and capacitated staff who coordinate and deliver a multi-sectoral response; (c) communities, including community gatekeepers such as traditional and religious leaders, men and boys, community structures and champions, are mobilized and engaged as agents of change to help transform social norms and attitudes towards prevention of violence and harmful practices against women and girls; (d) women and girls' capacity with regards their rights to wellbeing is strengthened by addressing barriers to facilitate timely access to acceptable and quality essential services; (e) national and sub-level institutions have capacities and resources to collectively, analyze and use quality age and gender disaggregated data for decision-making; (f) empowered women's rights groups and civil society organizations are better able to advocate, influence and advance programming on EVAWG and HP.

The programme strategy is to address the linkages between sexual and gender-based violence and harmful practices with related aspects of sexual and reproductive health and rights as a cross-cutting theme. Focus will be on prevention efforts, particularly addressing root causes of violence and harmful practices against women and girls; and ensuring access to inclusive, timely, and quality services for victims and survivors. The six outcomes will be implemented simultaneously and in an inclusive manner. A comprehensive approach, which involves a continuum of interdependent and mutually reinforcing interventions, is needed in order to prevent VAWG/SGBV/HP and ensures provision of sexual and reproductive health services.

The Initiative will focus on interventions that are truly transformative and specifically target populations who are the furthest behind with dedicated strategies. Target groups will consistently be the most marginalized women and girls, including those who face intersecting forms of discrimination or multi-deprivation, such as those with disabilities, women and girls living with HIV/AIDS, the poorest and those living in most difficult to access communities will be target, as to leave no one behind. In order to achieve this, active and substantial participation of civil society and women's organizations, will be cross-cutting along all Pillars. Other key stakeholders are 4 main sectors traditionally engaged in public policies to address VAWG (Health, Education, Social Services, and Justice and Security) and other sectors that have been less engaged (Local Authorities and moral authorities such as Traditional and Religious Leaders, Council of Elders as well as Influencers, Private Sector and As such, the Initiative will also provide a model for partnerships to deliver on the SDGs in a more comprehensive manner, leveraging various partners' comparative expertise.

Interventions will be context specific and sensitive to the local context ^x, scaling up and strengthening what has worked, whilst allowing flexibility for adaptive programming. The geographical scope will be vertical, supporting interventions at federal, state and community levels and horizontally across 5+1 selected focus states, one per geo-political zone, based on a mixed set of criteria (including prevalence, political will, enabling environment, capacities and potential to facilitate further expansion and upscaling. The focus states for the Spotlight Initiative are Lagos, Sokoto, FCT, Ebonyi, Adamawa and Cross River – see Annex 9^{xi} for details on the selection of the geographic areas.

The Initiative places Goal 5 and the achievement of gender equality at the centre of efforts (alongside Goal 16) with the aim to provide an enabling environment for the implementation of all goals.



OUTCOME 1

Theory of Change

If (1) women and SGBV/HP/SRHR experts are engaged in assessing, developing and implementing policies and legislation to address SGBV/HP and barriers to SRHR,

If (2) if the implementation of legislations and policies is monitored

then (3) an enabling legislative and policy environment on SGBV/HP/SRHR and other forms of discrimination is in place and translated into plans, guaranteeing the rights of women and girls

because (4) effectively implemented legislative and policy frameworks address impunity and provide for coordinated action, including in the areas of prevention, services and data collection

(5) laws and programmes that integrate and SGBV/HP into SRH services are developed, implemented and monitored

Outcome Statement: *Legislative and policy frameworks, based on evidence and in line with international human rights standards, on all forms of violence against women and girls and harmful practices are in place and translated into plans*

Scope, scale and modalities of support: The Initiative will strengthen the legal and policy frameworks for SGBV/HP and related SRHR at national and sub-national levels. Building on progress made, the Initiative will advocate, provide technical assistance and increase capacities for the adoption, review and effective domestication and implementation of the VAPP, the CRA and relevant policies, frameworks and costed action plans. Key stakeholders are those who work to develop and implement these laws such as parliamentarians, government agencies, and the justice system where capacity will be built so that they are better able to interpret and utilize the laws and policies. The inclusion of all international human rights standards will be prescribed, taking into consideration the state context and aligning to the SDGs.

Estimated No. of Beneficiaries – Outcome 1		
Indicative numbers	Direct	Indirect
Women	5000	17,066,282
Girls		7,228,791
Men	5000	5,000
Boys		5,000
TOTAL	10,000	24,305,073

Key interventions will include: mapping the existing legal and policy frameworks to identify gaps and build capacities across strategic actors to facilitate the passage of laws and monitor their implementation. The mapping will include an assessment of conflicts between customary law and formal laws with proposals on how to resolve these. A review of existing and developing new national level multi-sectoral action plans with monitoring, evaluation and accountability frameworks in place will be done by providing support to parliamentary caucuses and relevant ministries. The Initiative will also support the development of guidelines and reporting tools for monitoring relevant policies including the National Gender Policy, National Policy for Basic Education, Sexual Harassment policy, and aim to ensure that implementation of laws and policies are prioritized in planning, budget and M&E.

Key government officials in all relevant MDAs as well as women's rights groups/defenders will be supported to increase their knowledge on SGBV, HP, SRHR and women's rights. Furthermore, efforts will be made to build the capacities of relevant justice system actors, parliamentarians, MDA, judges and prosecutors to be able to interpret and utilize the laws and policies. Knowledge products and portals will be developed and broadly disseminated to create awareness and support for the implementation of laws and policies amongst primary duty bearers. The Initiative will focus on advocating for the domestication and implementation of the VAPP, the Child Right Act and relevant policies/frameworks and create awareness using various conventional and non-conventional means.

A key element in advancing state domestication will be to strengthen the capacity of paralegals.

Human rights institutions will be supported to better monitor and report on VAWG/SGBV/HP and gender discrimination and supported to improve monitoring and reporting on HIV and SRHR from a rights angle.

The Initiative will equally build the capacities of women's rights advocates, civil society organizations and the media to support this advocacy and demand accountability for implementation. As such, CSOs, women's and child rights groups and media will play an important part. In addition to building their capacity, they will be supported to take on a key role in driving legislative and policy change by advocating and demanding accountability for implementation and review of obsolete policies.

Leaving No One Behind – In order to leverage on the principle of 'Leaving No One Behind' principle emphasized by the 2030 Agenda for the SDGs, the Initiative will set out to ensure that laws and policies which discriminate against different target groups, especially the most vulnerable women such as: rural women and girls, market women and girls, women and girls living with HIV and AIDS, women and girls living with disability and key affected populations will be addressed.

Ensuring Sustainability - Systematic national capacities will be built through a harmonized approach, ensuring sustainability and safeguarding results. National ownership, engagement and mutual accountability will be supported. In order to ensure that institutional capacity is built and sustained, a number of mitigation strategies will be put in place such as ToTs, knowledge management plan, signing MoU/Letter of commitment with Government on retention and strengthening succession plan of relevant government agencies.

OUTCOME 2

Theory of Change

If (1) relevant decision-makers and stakeholders in all sectors of government are informed and mobilized to address VAWG/SGBV/HP and promote women and girls' SRHR;
if (2) institutions at all levels and relevant stakeholders have strengthened capacity on VAWG/SGBV/HP/SRHR;
if (3) national and subnational bargaining processes are effective in overcoming the hurdles of collective action to address and prevent VAWG/SGBV/HP and promote women and girls' SRHR;
if (4) adequate budgets are allocated, released and utilized;
then (5) institutions will develop, coordinate and implement programmes that integrate the elimination of VAWG/SGBV/HP and other SDG targets into development planning processes;
because (6) institutional change requires appropriate capacity, adequate funding as well as political engagement and leadership to sustainably address VAWG/SGBV/HP and promote women and girls' SRHR.

Outcome Statement: *National and sub-national systems and institutions plan, fund and deliver evidence-based programmes that prevent and respond to violence against women and girls and harmful practices, including in other sectors*

Scale, scope and modality of the support: The Initiative will focus on upstream work with relevant formal and informal institutions at the highest federal and state level to strengthen capacities and ensure effective coordination of SGBV, HP and SRHR issues (including planning, setting up structures and providing oversight). Better inclusion and linkages of SGBV, HP, SRHR and child protection in sector plans is a key element. To this effect, the Initiative will support key sectors to develop programmes on VAWG and HPs, including integration of these issues into sectoral plans. The capacity of MDAs at national and state levels will also be built to improve their planning, implementation and monitoring and ensure that they leverage on each other's expertise and work and use funding more efficiently.

The envisaged result is cross-sectoral, multi-layered and coordinated work which focuses on synergy between different institutions and where inter-ministerial collaboration ensures more effective prevention and response as various elements are brought together to plan, programme and invest accordingly. Accountability frameworks will be put in place to ensure competitive and transparent processes for procurement and value for money. National and sub-national training institutions will be



supported to integrate ending VAWG/SGBV and HP in their curricula. Efforts will also be made to ensure that SRHR priorities are better integrated into national budget and planning processes.

Government officials, parliamentarians, and women's and girls' rights advocates at national and sub-national levels will be equipped so that they are able to prioritize and ensure adequate public budget expenditure on evidence-based prevention and response services. Through a pre-budget analysis and capacity building support to relevant ministries, gender budgeting principles and ring-fenced budgeting will be promoted to encourage prioritization, mainstreaming and increasing of budgets to eliminate VAWG/SGBV/HP and promote women and girls' SRHR.

Federal and state Ministries of Planning and Budget will be targeted to ensure that implementation of laws and policies are prioritized in planning, budget and monitoring and evaluation. This will also be a key strategy to secure attention to GBV/SRHR issues and to secure financial resources beyond the Initiative.

CSOs, women's and girls' rights organizations and media partners will be supported to enhance advocacy for budgetary allocation for SGBV, HP and SRHR issues. Linkages between formal and informal institutions will be facilitated to ensure efficiency and sustainability.

Lessons Learned: A key lesson learned is that **Government buy-in and ownership of the Initiative** at all levels is essential to demonstrate high impact; this includes high-level Government as well as recognizing the three-tier government structure and their relative roles. To leave no one behind, the Initiative will target CSOs that can help put in place better representation in institutions. Participation of civil society and girls and women's rights groups must go beyond the design and implementation and include strategic advisory, monitoring and evaluation.

Ensuring Sustainability - Systematic national capacities will be built through a harmonized approach, ensuring sustainability and safeguarding results. National ownership, high-level engagement and mutual accountability will be supported through joint annual work plans, reviews and alignment to national priorities. From the onset, the EU and UN will work closely with the Government to **develop a sustainability plan** that includes a feasible financing strategy with conditions to ensure that funding and services can continue. This strategy will emphasize strengthening government capacities for domestic resource mobilization, cost-sharing at the state level and technical support to Ministries, Departments and Agencies to cost minimum services packages. In addition, linking the Government and CSO efforts will ensure facilitated action and leveraging on comparative advantages.

Estimated No. of Beneficiaries – Outcome 2		
Indicative numbers	Direct	Indirect
Women	17,350	17,066,282
Girls	5,080	7,228,791
Men	4,550	3,523,103
Boys	5,070	1,767,038
TOTAL	32,050	25,045,073

OUTCOME 3

Theory of Change

If (1) multiple strategies such as community mobilization, key stakeholders' (including survivors, men and boys) engagement and education strategies are carried out in an integrated and coordinated manner based on a shared understanding and approach in line with international standards and evidence on preventing VAWG/SGBV/HP and promoting women and girls' SRHR;

then (2) favourable social norms, attitudes and behaviours will be promoted at institutional, community and individual level to prevent VAWG/SGBV/HP and to promote women and girls' SRHR

because (3) multi-pronged prevention initiatives that mutually reinforce each other and attract stakeholders buy-in can effectively shift individual and socio-cultural norms including those affecting women's SRHR

Outcome Statement: *Gender inequitable social norms, attitudes and behaviors change at community and individual levels to prevent VAWG/SGBV/HP and promote women and girls' SRHR*

Scale, scope and modality of the support: The Initiative will address the negative and pervasive socio-cultural norms that drive SGBV, HP and their inter-linkages with SRHR with an aim on transformative change. Interventions will focus on the Federal and all 5 selected focus states for SGBV; and in two northern states for child marriage, and two southern states for FGM. Access to SRHR will cut across. As attitudes and practices towards women and girls differ widely between regions and states, solutions will be context-specific and based on evidence on what works in that particular context.

The strategy will build on successful programmes and campaigns such as End VAC, End FGM and End Child Marriage, as well as lessons learned and best practices on what works in Nigeria and beyond.

Prevention is the nucleus of the Initiative and the comprehensive and multi-dimensional approach to prevention will be based on the following key elements:

Analyzing root causes and risks by examining behavioral factors that lead people to decision-making. Critically examining the behavioral factors that lead people to make decisions, act on them, think about, influence, and relate to one another, and how they develop beliefs and attitude.

Working with relevant formal and informal institutions that influences these behavioral factors (including beliefs, perceptions and behaviors) as the key custodians of socio-cultural norms. Learning institutions such as academic institutions (primary, secondary and tertiary), training centres e.g. teachers training colleagues, police colleagues, the law school and non-formal institutions e.g. women networks, peer education groups, traditional and religious institutions and council of elders will be targeted to use their platforms to promote equitable social norms and behaviours and non-violence among their subject and worshipers. Media, entertainers and social media influencers will also be engaged as they have a huge impact and potential to change pervasive negative norms, attitudes and behaviors.

Engaging men and boys to become upholders of the rights of women and girls and not perpetrators of VAWG. Male influencers at all levels will be identified as champions in the communities using existing platforms e.g. HeforShe campaign, husband and future husbands' schools, men and boys' networks and coalitions. Working with men and boys' networks and coalitions will support the campaign against GBV/HP, leveraging on existing platforms that target men at the community level.

Transformative change requires empowerment of women and girls to help them live a life of dignity. Thus, women and girls will be supported to access information on their rights including SRHR, human rights, sexuality education, to build networks and promote peer learning and counselling. For those furthest behind, this will be coupled with livelihoods support.

Based on these elements, specific interventions will include:

Community mobilization interventions and campaigns involving CBOs, CSOs, women's groups, youth networks and coalitions as well as influencers and community media. The interventions will aim to challenge and change negative social norms and behaviors and advocate for the prevention of VAWG and HPs in their communities. This will help ensure that the intervention is not a one-off event but amplifies their voices. Given the huge influence of religious, local and traditional leaders on the population at large, they will be engaged to use their platforms to prevent VAWG and promote SRHR.

High level advocacy with Government and non-government personnel (including political, religious and traditional leaders) will be carried out to sensitize and create awareness on gender inequality and VAWG/SGBV/HP/SRHR. Key gatekeepers will be engaged as positive influencers and champions for non-violence and for the protection of the rights of women and girls. They will be targeted to promote equitable social norms, behavior change and non-violence in the community and they will be supported to conduct continuous transformative dialogues.

Interventions to end VAWG/SGBV/HP will integrate prevention messages in key sectors – health, education, social welfare and justice, legal, police and security sector and ensure linkages to service provision. Capacity building of key staff will focus on providing them with skills and tools to prevent and respond to VAWG/SGBV/HP and their SRHR needs. The implementation and delivery of Comprehensive Sexuality Education will be one key preventative measure. School governance (SBMCs, PTAs, young people in and out of school, peer educators) will be involved and the capacity strengthening of curriculum developers will be supported to include CSE/SGBV/HP in education



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curricula including in basic, secondary and university level (where sex for marks is rife).

Media and entertainment platforms (including art, theatre, traditional, mass, social media platforms, community media and IEC) **will be utilized for creative advocacy capturing local language and context to reach all the nooks and crannies.** Influencers such as bloggers, Nollywood and the entertainment industry will also be targeted so they can use their channels to promote prevention of violence, ending HPs and promoting women's and girls' access to SRHR. Finally, the private sector will be engaged for greater impact and reach of the interventions as well as act to prevent gender-based violence within the company walls through HR-led policies, systems, training, communication, and dialogue, as well as by ensuring adequate complaint mechanisms are in place.

Efforts will be made to broadly disseminate and create public awareness and support for the implementation of laws and policies. This will include translation, creating simple and visual knowledge products and dissemination across states. To strengthen legal literacy in communities, partnerships will be developed with traditional and religious leaders and media.

Those furthest behind will be empowered through life skills training, economic opportunities, and ensuring access to information on their rights including SRHR, access to sexuality education focusing on gender norms, and building networks for women and girls. Safe and conducive spaces will be provided, and girls and young women will be supported to foster self-confidence, educate girls on their rights and promote peer learning and counselling.

Lessons learned include that **stronger and multi-stakeholder partnerships lead to more sustained results and community ownership.** This includes early and active engagement of grassroots-level CSOs and key community gatekeepers and opinion leaders (including traditional and religious leaders) at all levels. Men and boys must be engaged as partners, particularly for interventions on prevention. More local and contextualized strategies are needed. Based on experiences in Nigeria, the SI recognizes that prevention requires long-term planning and investment and that changes in behaviors can take long. Furthermore, new partners and more innovative approaches are needed to ensure that efforts not only increase knowledge and deter actions but also change behaviors.

Sustainability – several strategies will be used to ensure sustainability; **new partnerships** with International Financial Institutions, foundations, and the private sector to unlock additional resources will be built. Another key element will be to work with institutions such as for example schools and universities to ensure that EVAWG is included in prevention frameworks into their structures and through sensitization work with girls/boys/students. Putting young people at the heart of prevention efforts is one way to sustain the gains of the programme.

Estimated No. of Beneficiaries – Outcome 3		
Indicative numbers	Direct	Indirect
Women	470,500	17,066,282
Girls	260,000	7,228,791
Men	25,000	3,523,103
Boys	10,000	1,767,038
TOTAL	765,500	29,585,214

OUTCOME 4

Theory of Change

If (1) service providers have the capacity to deliver essential services, including SRHR services, and to prosecute perpetrators in line with international human rights standards and guidelines that are culturally and context sensitive; and

if (2) these services are made available and accessible to women and girls; and

if (3) women and girls are informed and empowered to exercise their rights to services (including SRHRs and access to justice);
then women and girls who experience VAWG/SGBV/HP will increase their use of services and recover from violence, while perpetrators will be prosecuted
because (5) underlying barriers to women and girls' access to services have been addressed
(6) including in relation to gender and socio-cultural norms affecting women's sexuality and reproduction

Outcome Statement: *Women and girls who experience VAWG/SGBV/HP use available, accessible, acceptable, and quality essential services including for long term recovery from violence*

Scale, scope and modality of the support: The Initiative will holistically address the needs of women and girls-survivors of VAWG/SGBV/HP in terms of age-appropriate, available, accessible, acceptable, and quality essential services^{xii} including for long term recovery from violence. The programme will target the Federal and 5+1 states for SGBV; two northern states for child marriage and two southern states for FGM.

The Essential Service Package will be the key element used to strengthen coordination as it relates to multi-sectoral services. The key focus is to build institutional and human capacity across all relevant sectors, targeting service providers (health, human rights, law enforcement, justice, security, education and social welfare) to make essential services available.

To reach those furthest behind, the key strategy is to ensure more comprehensive and holistic responses to survivors across Nigeria as there are currently very few one-stop centres that address the comprehensive needs of GBV and HP survivors with SRH needs provided at the facility level. This will be done through several approaches:

In urban areas, replication and nation-wide expansion of one-stop-shop approaches ^{xiii} such as Sexual Assault Referral Centres and SGBV Response Teams. Currently, there are 13 such initiatives across Nigeria.

In less densely populated rural areas, strengthen community-level "one-stop-solutions" where existing relevant health and social welfare departments, such as maternal health and SRH service points, as well as education systems and child protection networks will be used as entry points to prevent and respond to SGBV by providing more holistic services and integrated services (including for SGBV and SRHR). A key element will be to leverage on the existing Primary Health Care networks, building on the One PHC/Ward initiative^{xiv} and Child Protection Networks.

Across all areas, strengthen existing informal service provision points, such as safe spaces and shelters, to be able to provide better health services, immediate responses, accommodation, alternative care services and longer-term recovery for survivors and provide quality multi-sectoral responses including referral services to the One stop centres. Linkages will be strengthened for economic empowerment and social protection as a way of longer-term recovery.

Specific interventions will include: Information will be incorporated in pre-service training curriculum for teachers, health and social welfare workers, to improve access for women and girl survivors. To ensure that community-based elements are strengthened to provide a more holistic response, interventions will include facilitating access to services, detecting cases in the community and referring them to model centres for further management. One element to be addressed is to ensure that confidentiality can be maintained.

Model health facilities and social welfare units will be upgraded to also deliver integrated Sexual Reproductive Health Services ^[21]; based on international standards such as the Essential services package and the minimum package of services of standards for youth friendly services based on WHO standards including the integrated case management framework for child protection. Additionally, strategies based on ongoing behavioral studies will be developed to discourage the medicalization of FGM.

Youth friendly centres will offer livelihood support and life skills building, sensitization and awareness creation on SRHR including menstrual hygiene and information on where to report, access services and seek help to increase reportage.



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Other approaches for longer term recovery include the use of sports and arts for healing and second chance education. The Second Chance Education and Vocational Learning will target women and young women who are marginalized and who are at most risk of being left behind by providing relevant opportunities to access, participate in and achieve quality learning, entrepreneurship and employment outcomes through second chance education and vocational training. Girls and young women who were married young or are vulnerable to CEFM tend to be among the most marginalized communities.

Capacity building of the justice sector personnel to ensure timely provision of gender sensitive, age-appropriate and client-focused investigation, prosecution, adjudication, diversion programme and legal aid and ensure that victims are provided with legal support, in line with international human rights standards, guidelines and protocols. This includes capacities to accelerate the prosecution of SGBV cases and replicating mobile and fast-track courts models to try SGBV cases. Additionally, support will also be provided to ensure more lasting judicial structures in rural areas.

Pre and in-service social welfare and police specialised unit training materials will be developed and integrated into institutional and university curricula, as well as standard operating procedures, guidelines and court rules. Security responses will be enhanced through the establishment of specialized women and children protection desks in police stations, staffed by women and male officers who are trained (on gender-sensitive, user-friendly, confidential and child-friendly approaches) to receive reports from victims/survivors and in navigating the referral pathway for linkages with other sectors and agencies. Further to this, a key element will be building trust and public confidence in formal and informal justice systems to adjudicate GBV cases.

Finally, demand creation for services will be supported through community mobilisation, dialogues, sensitization, outreach and awareness at community and facility levels to promote access to services (whilst ensuring the safety of survivors). The Spotlight Initiative will support media engagement and development of communication materials on VAWG/SGBV/HP and integration into school curricula to create awareness and increase reporting. The initiative will also prioritize the establishment of new and strengthening of existing specialized units for services across sectors including police, health and social welfare, family courts using functional hotlines and SMS Platforms.

Lessons Learned – Given the role that civil society has in Nigeria in terms of providing services to victims, the Initiative will target civil society as a key partner and support interventions that strengthens their capacity to provide quality and accessible services in line with national standards. For example, several of the Sexual Assault Referral Centres are currently run by civil society organizations.

Sustainability – A key element in ensuring sustainability, especially when targeting civil society as key service providers is to ensure that strong and meaningful collaboration are in place between formal and informal service providers. It is thus important for the government to put in place an enabling environment for CSOs to provide sustainable services. Using existing structures at the local level as entry points for service provision will also ensure the availability of long-term services. Furthermore, more participatory, engaging and creative methods need to be used in assessing services and making sure that they are inclusive for all, including for those facing intersecting forms of discriminations to ensure that no one is left behind.

Estimated No. of Beneficiaries – Outcome 4		
Indicative numbers	Direct	Indirect
Women	200,000	3,000,000
Girls	400,000	1,000,000
Men	200	52,000
Boys	19,200	35,000
TOTAL	619,200	4,087,000

OUTCOME 5

Theory of Change

If (1) Measurement and methodologies for VAWG/SGBV/HP data collection in Nigeria are improved and strengthened;

(2) the capacity of national and sub-national (state and LGA) institutions and data gathering organisations to collect disaggregated VAWG/SGBV/HP data in line with globally agreed standards is strengthened;

and (3) disaggregated data (including to extent possible on age, location, socio-economic status, disability) are made user-friendly, accessible and disseminated to be used by decision makers and civil society;

(4) then laws, policies and programmes in Nigeria will be based on evidence and better able to respond to the specific context and realities of women and girls, including those most marginalized;

(5) because they will be based on quality, harmonized, disaggregated and globally comparable data.

Outcome Statement: *Quality, disaggregated and globally comparable data on different forms of violence against women and girls and harmful practices, collected, analyzed and used in line with international standards to inform laws, policies and programmes*

Scale, scope and modality of support: The Initiative will generate and use comprehensive, qualitative and quantitative, geospatial data from survivors of VAWG, SGBV and HP as well as the uptake and access challenges for SRHR services in the country. More robust data gathering and secondary analysis, including of census, demographic and health surveys, will be done to address the persistent disparities and close the gap between data generation and formulation of evidence-based policies and programmes. The Initiative will strengthen and modernize national and sub-national routine data collection, analysis and usage related to VAWG, HP and SRHR, including strengthening coordination mechanisms on data and harmonize analysis efforts. The Initiative will also focus on building national capacities of National Bureau of Statistics (NBS) and health facility M&E officers to be better able to capture, analyze, disseminate and feed this data into decision-making processes, ensuring that programming is more focused on actual needs. This will be a key element in ensuring that collection of SRHR data can be improved and better integrated with VAWG data collection. Because of these efforts, national capacities for capturing, analyzing, disseminating and feeding this data into decision-making processes will be strengthened, which will ensure that programming is more focused on actual needs.

Specific interventions include: A national landscape analysis of VAWG/SGBV/HP data will be carried out, building on efforts made to date, and results disseminated to key stakeholders in government and civil society. This analysis will include aspects of the legal and policy framework and centralized support to victims, and mapping capacities of state and non-state VAWG/SGBV/HP actors. Surveys will be carried out in line with identified data gaps, going beyond traditional data collection methods and embracing data innovation. The initiative will also support the undertaking of perception surveys and behavioural studies to better understand the underlying norms and behaviors that condone VAWG/SGBV, promote HP and limit women's and girls' access to SRHR.

A GBV database will be established, leveraging on the existing National Health Information



Management System, which already captures obstetric fistula and clinical management of rape services. It will include additional GBV indicators such as physical violence, child marriages, FGM/C prevention and management. This database will aim to harmonize various data sets across SGBV, HP and SRHR, in line with UN in Nigeria's efforts to align data systems to improve joint analysis and targeting. Further, the Initiative will support the ongoing roll-out of data information management systems such as the CPIMS platform. This presents a great opportunity to collect disaggregated and routine data on girls 10-15 years which is one identified gap.

Skills development and technical support will be given to national **and sub-national government institutions responsible for administrative data collection** to enable them to take on a stronger coordination role in managing GBV data, including managing the GBV database, providing technical support to States and producing annual national reports to inform advocacy and programming for addressing GBV and HP, based on evidence and data, including on SRHR.

Capacity of civil society partners who collect and manage data in protection and response contexts will be built to ensure that data collection and management follows standardized procedures, is used in line with ethical procedures ^{xv}and that data captured is tapped and channeled through existing mechanisms. Interventions will therefore be implemented through collaboration with both formal and informal data collection institutions, leveraging on existing research-based organizations, CSOs and platforms to ensure that data is captured at local government area levels, channeled through existing mechanisms and made available for programmes, knowledge management and advocacy.

Leaving No One Behind - Key elements will be to strengthen both informal and information capacities to gather, analyze and use disaggregated data and evidence, as this will better allow for understanding the range of disadvantages and deprivations that leave people behind. Two key gaps that have been identified is the lack of data on girls 10-15 years as well as the overall lack of disaggregated data, for example on the most marginalized populations such as women and girls with disabilities, key affected populations and data at LGA and state level.

Lessons Learned: Successful efforts show that **real-time monitoring and an effective and efficient M&E structure** are crucial elements to help measure progress, monitor risks, test the continued relevance of the theories of change and better ensure accountability and transparency.

Ensuring Sustainability: Efforts will be made to ensure that platforms, rather than projects, are established as **key instrument towards better accountability, transparency and coordination** including for planning, monitoring and reporting. Another key element will be to strengthen the national capacities and to modernize data. This will ensure that access to quality, timely data is less costly. Data collected will be highlighted as to be seen as valuable information to institutions - this way, they will be more willing to invest in it.

Estimated No. of Beneficiaries – Outcome 5		
Indicative numbers	Direct	Indirect
Women	2,250	2,000,000
Girls		1,500,000
Men	3,200	250,000
Boys		50,000
TOTAL	5,700	3,800,000

OUTCOME 6

Theory of Change

If (1) the knowledge, expertise and capacities of women's and girls' rights and civil society organizations is drawn upon and strengthened,

and (2) the space for women's and girls' rights and civil society organizations is free and conducive to their work,
and (3) multi-stakeholder partnerships and networks are established at local, national, and regional level with women's and girls' rights groups and civil society organisations,
then (4) women's and girls' rights organizations and civil society organizations will be able to influence, sustain, and advance progress on GEWE and VAWG/SGBV/HP/SRHR policies and programmes that respond to the needs of all women and girls, including those facing intersecting forms of discrimination,
because (5) the activism of women's and girls' rights organizations and civil society organizations, including those representing youth and groups facing intersecting forms of discrimination is a crucial driver of progress on efforts to ending VAWG/SGBV/HP and promoting women and girls' SRHR

Outcome Statement: *Women's rights groups, autonomous social movements and civil society organisations, including those representing youth and groups facing intersecting forms of discrimination/marginalization, more effectively influence and advance progress on GEWE and VAWG/SGBV/HP*

Scale, scope and modality of support: Interventions will leverage on existing women's rights groups and associations, youth groups and CSOs to strengthen their leadership and voice on the national stage; enhance their capacities for public engagement, effective advocacy, as well as capacities for programme implementation and monitoring.

An in-depth mapping and analysis of relevant civil society actors working on VAWG/SGBV/HP and SRHR, will be carried out to provide a baseline and show gaps and opportunities for strengthening interventions. The mapping will also include an assessment on the institutional needs. This will equally help to ensure that the Initiative goes beyond the traditional partners and reaches grassroots organizations, youth networks, private sector and other organizations working with women and girls facing intersecting forms of discrimination.

Based on the mapping, interventions will target CSOs with high potential for better public engagement, advocacy, media and visibility. The Initiative will respond to the issues of fragmentation by partnering and providing direct support to women's rights groups and CSOs that are instrumental to drive legislative and policy change, challenge social norms and deliver services to survivors. Capacities will also be built on how to use traditional and social media, simple innovation tools (such as user-centric design) as well as through hands-on expert/mentoring support. CSOs will also be directly supported through grants.

CSOs will be supported to establish multi-stakeholder partnerships and platforms for knowledge exchange, dialogues and networks at local, national, regional and global level. Capacities for better public engagement, visibility and advocacy, for example by using social media, engaging in campaigns and leveraging on social accountability mechanisms, will be built. Civil societies will also be mobilized to coordinate and to help push for policy reforms and implementation of relevant bills by facilitating collaborative partnerships between youth movements, women's civil society organizations and women elected to political office at Federal and State levels.

A key element will be to establish new partnerships and facilitate partnerships between women's rights organizations and other sectors working to address EVAW, including the security and justice sectors, private sector and media. CSOs will also be supported to develop strategies for engagement with these partners as well as other non-traditional partners such as men and boys' networks and women in politics. This work will build on existing networks and draw upon knowledge, expertise and capacity of what works in various parts of Nigeria.

CSOs will also be supported to build their institutional capacities, including strategic, technical, organizational and financial. Focus will be on those CSOs that have best capacity to magnify the work of the Initiative and carry on after the end of the Initiative.

Ultimately, cross-sectional learning such as building bridges and mentoring across the older and younger women; building synergies with rural women's associations and networks; and ensuring that the advocacy and influencing of institutional systems and structures will be adopted.

Lessons Learned – To ensure that no one is left behind, a key lesson learned is to support existing

coalitions and networks who are already engaged in interventions for delivery and advocacy for SGBV/HP/SRHR services. By targeting local CSOs and other grassroots organisations, the Initiative will be able to better leverage on the work that has been done in mobilizing key marginalized populations such as rural women's groups and people with disabilities.

Sustainability - Civil society engagement throughout the Initiative is crucial. Women's rights organizations, including non-traditional ones, will be integral partners; across all pillars as well as through specific efforts under pillar 6. CSOs will be involved in the design, development, delivery and monitoring of the programme. To ensure this involvement, the Initiative will emphasize more user-centric approaches such as design-thinking in the design of the programme. This strong and meaningful collaboration also leads to better ownership, another key element for ensuring sustainability. Local CSOs and women's rights groups will be prioritized throughout the engagement.

Estimated No. of Beneficiaries – Outcome 6		
Indicative numbers	Direct	Indirect
Women	50,500	5,400,000
Girls	6,500	2,780,000
Men	12,250	340,000
Boys	5,000	120,000
TOTAL	74,250	8,640,000

III. Governance

This section defines the set-up of the multi-stakeholder governance arrangements for the Spotlight Initiative in Nigeria.

The highest level of the governance structure of the Initiative in Nigeria shall be the National Steering Committee, co-chaired by the Honourable Minister of Budget and National Planning (HMS) and the UN Resident Coordinator (RC). The EU Head of Delegation in Nigeria will play a key role at the National Steering Committee. Guided by the global arrangement and principles, the following members shall be a part of the National Steering Committee:

- UN Resident Coordinator (RC) – Co-Chair
- Honourable Minister of Budget and National Planning (HMS) – Co-Chair
- EU Head of Delegation in Nigeria
- UN Women Representative plus one alternate Head of Agency (on a rotational basis);
- Two representatives of the civil society (or more ensuring a minimum of 20% civil society representation of the total membership of the Committee) who are members of and nominated by the Civil Society National Reference Group.

In addition, other stakeholders may be invited to participate in planning, deliberation and monitoring roles of the Committee. This includes representatives from EU, RUNOs, Government, academia, civil society, media, research institutions, local communities and the private sector.

The main task of the **National Steering Committee** will be to provide overall strategic political direction and guidance to the Initiative. The Steering Committee will also guide and oversee the implementation of the Country Programme by fulfilling the following roles and responsibilities:



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Ensure proper communication and coordination on the Initiative at the country level, and support a participatory implementation, in alignment with national priorities, the UNDAF and EU priorities.
Approve programme annual work plans, review output level results, adjust implementation set-up.
Review and approve periodic and annual joint programme narrative reports submitted by RUNOs.
Approve any programmatic or budgetary (revisions of less than 25 per cent of the value of the budget) programme revisions within the limits of the approved programme document by the Operational Steering Committee.
Review risk management strategies and ensure the programme is proactively managing and mitigating risks.
Manage stakeholder relationships at the country level.

A **Technical Committee** of the Initiative, consisting of representatives from the core Ministries Departments and Agencies¹¹, the five Representatives of the Recipient UN agencies, a representative from the EU, a (rotating) representative from the focus States and a minimum of 20% civil society membership of the Committee, from and nominated by the Civil Society National Reference Group (women's civil society organizations/networks with a strong track record of working on EVAWG) and the Programme Management Unit shall technically support the NSC and ensure the achievement of its mandate.

To the extent possible, existing structures, such as the Gender Theme Group, the M&E Group and the Communication Group will be used rather than establishing new ones. These forums will be used as advisory and coordination platforms, for example in planning and carrying out activities. Connections and links will be forged with other pooled funds or joint programmes operating in Nigeria. This will be done through existing platforms such as the inter-agency coordination group, the Development Partners Group and others.

A **Civil Society Reference Group** will be established in line with the global guidance and with the guiding principle of leaving no one behind. Currently, an interim group is in place however, a new group will be created through an open competitive process, organized in coordination with the EU.

The CS-GRG will have the following functions and responsibilities:

- Provide advice on the overall strategic direction of the Spotlight Initiative's Country Programme in Nigeria and on cutting-edge national and local policy issues on eliminating VAWG and HP
- Provide advice and perspectives on current eliminating VAWG and HP-related issues at national and local levels where the Spotlight Initiative's advocacy, leadership and support to civil society advocacy is important
- Partner on high-level advocacy and communications as well as political dialogue, including by supporting visibility and promotion of the Initiative's goals at the national and local levels
- Support efforts at dissemination of the messages of the Spotlight Initiative on eliminating VAWG and HP to the public, from the national to the community level, especially to marginalized groups, youth and the media
- Provide advice on ongoing interventions, possibilities for scaling up the Spotlight Country Programme
- Provide advice on funding priorities at national and local levels and on-going interventions and recommendations for up-scaling achievements and addressing challenges
- Serve as an interactive space and open forum for dialogue between the Spotlight Initiative and women's rights organisations, groups and networks working on eliminating VAWG and HP, including on global, regional, national and local developments, trends and risks related to such work
- Engage in broader consultations with groups and networks, especially at the local and grassroots levels, at regular intervals to update them and solicit input on the performance of the Spotlight Country Programme in Nigeria and for advocacy, research, learning and action
- Provide any other relevant information, analysis and lessons learned that could feed into the future programming and advocacy efforts of the Spotlight Initiative

¹¹ Federal Ministry of Health; Federal, Education, Justice Office of the Senior Special Assistant to the President on SDGs, the Bureau of Statistic; and National Human Rights Commission.



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- Play a review and monitoring role on the Spotlight Country Programme's implementation and provide feedback to the multi-stakeholder Country Programme Steering Committee, including on addressing challenges

The detailed role the group will play has been further outlined in *Annex 12: Draft ToR for the Civil Society Reference Group*.

The group will consist of maximum 10 - 15 individuals where at least half of the members should be from CSOs who participated in previous consultations. The composition of the group must be mindful of geographic balance with strong adherence to leaving no one behind. At least 25% will be from women's rights movements. National and local CSOs will be prioritized in the membership in the group in alignment with the principle of national ownership embedded in the SDGs.

Accountability:

The UNDS is more than ever before being asked to strengthen its cohesion to "expand the offer of a *whole-of-system* expertise to countries". With the UN reform and joint delivery on the SDGs by UNCTs as key principles for the Spotlight Initiative, the accountability arrangement in Nigeria will follow the existing UNCT structure. This will be supported by a joint Programme Management Unit which holds oversight, coordination and support roles. The Recipient UN Organizations (UNDP, UN Women, UNFPA, UNESCO and UNICEF) representatives, under the leadership of the Resident Coordinator, shall be jointly accountable for delivering on agreed outputs and outcomes. The five Representatives will be accountable to the RC for the planning, implementation and reporting as per the UNCT's code of conduct element on delivering of results. The clear roles and responsibilities of all stakeholders will be further outlined in the Initiative's *Implementation Arrangement Guide*. The specific accountability lines of the various stakeholders are:

Resident Coordinator: The RC holds the ultimate responsibility for the Spotlight Initiative. The RC leads and oversees the Initiative in partnership with the EU Head of Delegation and the Government of Nigeria. The RC also plays a crucial role in leveraging technical expertise from the UN agencies in an impartial and inclusive way.

Recipient UN Agencies: Responsible to work together to reach programme results based on priorities set in the programme. These are divided between *Lead Agencies* and *Participating Agencies*.

Lead Agencies: Take charge of coordination and leadership of the Outcome area they lead. Responsible for technical leadership, coordinating programmatic activities, ensure the coordination between participating agencies, represent the agencies that participate in the Outcome with the Programme Management Unit, monitor results and progress in each outcome area. Further, they will have the responsibility to coordinate reporting for each pillar and supervise implementation of results under each pillar. They will receive funds and implement activities in the workplan. It is required that all RUNOs will be consulted and carried along in all activity planning and implementation to avoid silos.

Participating Agencies: Receive funds to implement specific activities based on the country Programme Document and AWP. Responsible to deliver on and monitor results which they are responsible for, manage processes and implementation with relevant partners to achieve results, report on results achieved (and financially) as well as any other information required by the lead agency under each Outcome area. The table below indicate the division of labour for the accountability framework of the Spotlight Initiative in Nigeria.

Outcome	Cluster Agencies
Pillar 1 - Laws and Policies	Lead: UN Women and UNDP Participating: UNFPA, UNICEF
Pillar 2 – Institutions	Lead: UNDP and UN Women Participating: UNESCO



Pillar 3 – Prevention	Lead: UNFPA and UNICEF Participating: UNESCO, UN Women, UNDP
Pillar 4 – Services	Lead: UNFPA Participating: UNICEF, UN Women, UNESCO, UNDP
Pillar 5 – Data	Lead: UNDP and UNFPA Participating: UNICEF and UNESCO
Pillar 6 – Women’s Movement	Lead: UN Women Participating: UNDP and UNFPA

Programme Management Arrangements: the Programme Management model has been designed in line with the global programme management principles. It will follow two main streams; (i) coordination and technical coherence and; (ii) agency implementation. The Spotlight management structure will contain:

Programme Oversight and Coordination that sits in the Office of the UN Resident Coordinator to bring all of the pieces of the programme together.

Technical Coherence provided by the two UN agencies (UNFPA and UN Women) ensures that all pieces of the Spotlight programme are of high-quality, aligned to the Theory of Change and country results framework, and adhere to known best practice, and support innovation

Programme Implementation by Agencies – in line with programme commitments – ensures that interventions are of high-quality, appropriately financed, and on track to meet targets.

Specific responsibilities of programme management staff will be to guarantee coherence between different pillars and ensure coordination between RUNOs; lead communication and visibility activities; coordinate innovation and knowledge management; establish mechanisms for reporting; ensure coordination and communication with Secretariat and EU Delegation; prepare meetings with different governing bodies and follow up on decisions; address management and implementation challenges; lead and coordinate evaluations; facilitate monitoring of activities; support the national steering committee and CS reference group; identify resource mobilization opportunities and maintain relationship with donor partners.

Staffing structure is as follows:

- Programme Coordinator (P4)
- Technical Specialists (NOC)
- M&E and Reporting Analyst (SB4)
- Communication Officer (SB4)
- Programme Associate (SB3)
- Agency Programme Officers and Programme Assistants

Technical staff from each RUNO will form a **Technical Task Force Team** and work closely with programme management staff. Each RUNO will also assign M&E, KM, Innovation and Communication Focal Points to work closely with programme management staff as well as existing inter-agency groups such as the UNDAF Result Groups, the Gender Theme Group, the M&E Group and the Communication Group.

RUNO(s) and implementing partners:

In order to select the Recipient UN Organizations, the UN in Nigeria followed this process: all UN agencies were invited to participate in the initial mapping process as well as the scoping process. All coordination took place through the existing Gender Theme Group. After this process, a draft outline of the key priorities of the Country Programme was made. Based on these priorities, the criteria for selecting agencies were: mandate; technical expertise, capacities in-country; past, ongoing and planned programmes as well as cost-effectiveness. A list of suggested RUNOs were presented to the UNCT and included in the Country Programme Outline, which was shared with all partners.

In order to select the implementing partners, the UN will engage CSO partners through



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transparent, competitive processes. National and local CSOs will be prioritized in line with SDG principles of national ownership. For government partners, the Ministry of National Budget and Planning has officially assigned key ministries and focal points for the Initiative. Further details on the envisaged partners can be found in the profiles below:

IV. Implementing agencies and partners



Key Outcomes: 1, 2 and 5

Specific Contribution to the SI in Nigeria: Strong ability for high-level intervention through Government and CSOs; Human rights and Access to Justice, Legal & Policies, Technical Support to Core Institutions.

Annual Programme Delivery: \$ 51,910,866

Set-up: Country Office, 1 sub-office (Borno) and 85 staff

Key Envisaged SI Implementing Partners: UNDP's key partners will be Government agencies and national CSOs.

Outcome 1	Centre for Social Justice in partnership with the relevant MDAs to lead on the implementation of several activities focusing on legislative and policy framework
Outcome 2	Women AID Collective (WACOL) and CENSOJ with relevant MDAs and other CSOs (CSO assessment is currently ongoing) These institutions will be able to replicate several ToT organized for different MDAs.
Outcome 3	Funds will be transferred to the Population Council, Foundation for Resilient Empowerment and Development (FRED) as we have been working Population council on implementing on Violence Against Women which has been working on creating awareness and sensitizing the public and policy makers on the endemic and prevalent nature of violence against women and young girls and its negative consequences on the society.
Outcome 4	Grants will be provided to CSOs, facilities and centers through an open process for scaling up access to justice interventions.
Outcome 5	Funds will be transferred to the Population Council (known for their research and data driven development). MDAs will be supported on community DHIS. They will also work with the National Bureau for Statistics.
Outcome 6	CSOs, MDAs, networks and women groups through several meetings and coordination works. Small grants will be provided to selected CSOs.



Key Outcomes: 3, 4 and 5

Specific Expertise for the SI in Nigeria: Maternal and Reproductive Health for availability and use of integrated services (family planning, maternal health, HIV Fistula repair and rehabilitation), Strategic documents development, and building health workers' capacity • **Promotion of Gender equality and prevention/response to GBV** through policies and SOPs, capacity building for services and psychosocial counselling • **Population dynamics and data** through population-based surveys and analysis to ensure that women, adolescents, and youth are central to government policies.

Annual Programme Delivery: \$ Country program resources from 2012 to 2016 were 71,062,433 USD

Set-up: 1 Country Office, 4 sub-offices (Kaduna, Lagos, Cross River and Borno), 97 staff

Outcome 1	FmoH, FMWASD, OSSAP SDGs, NBS, NHRC, OVP, SmoH, SMWASD. Currently, UNFPA is also working with Education as a Vaccine, FMYSO, NMWCN, SOGON, MWAN
Outcome 2	FmoH, SmoH, FMWASD, SMWASD, FmoE, SMOE, FmoBP, SmoBP, FMYSO, police enforcement areas, MWAN



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Outcome 3	Currently, UNFPA are working with the following partners: Sultan's Foundation for Peace, FOMWAN, AfriYAN, CIRDDOC, CGE, YouthHub, NACA and SACA, SFH, ASWHAN, YEDI, STARE, NAN, Governor's wives forum, MWAN, Women's Helping Hand Initiative, ISN Public Health, Associations of young people living with HIV
Outcome 4	FMOH, FMOJ, Law enforcement agencies, SmoH, FMWASD, SMWASD, NACA and SACA. Grants will also be provided to CSOs. Currently, UNFPA is working with FHI360, CARE International, Fistula Foundation, CPRH, SFH, Mirabel Centre, ASWHAN, YEDI, MIRABEL centre, STARE
Outcome 5	NBS, FmoH-DPRS SmoH, NPC, Population Council
Outcome 6	Grants will be provided to CSOs; in its current programme, UNFPA are carrying out activities with Sultan's Foundation for Peace, FOMWAN, AfriYAN, CIRDDOC, CGE, YouthHub, IWEI, AHIP, MWANs, Associations of young people living with HIV, ASWHAN



Key Outcomes: 1, 2, 3 and 5

Specific Contribution to the SI in Nigeria: Women's political empowerment and economic empowerment, women in peace and security and humanitarian action. Cross-cutting emphasis on

VAWG, with focus on prevention.

Annual Programme Delivery: \$6,395,491

Set-up: 1 Country Office, 4 sub-offices, 40 staff

The **Key Envisaged SI Implementing Partners** are national CSOs. Specific planned partners include:

Outcome 1	Funds will be transferred to the Legislative Advocacy Coalition on Violence Against Women (LACVAW), a Coalition of diverse groups in civil society working on various aspects of women's human rights, and which was instrumental in the enactment VAPP Act. LACVAW will undertake several of the activities focusing on legislative action and work with the Gender Technical Unit (GTU).
Outcome 2	Funds will be transferred to the Ministry of Women Affairs and Social Development and the National Center for Women Development. These institutions will be able to replicate several ToT for government agencies and ministries.
Outcome 3	Transfer of funds to several CSOs working on prevention, including Project Alert on Violence Against Women as well as traditional and faith-based organizations.
Outcome 4	Grants will be provided to existing services and centers for scaling up, including the Mirabel Center through the Partnership for Justice
Outcome 6	Several CSO networks and women's rights groups through meetings and coordination. Small grants will also be provided to selected CSOs.



Key Outcomes: 1, 3 and 4

Specific contribution to the SI in Nigeria: UNICEF works to save children's lives, to defend their rights, and to help them fulfil their potential, from early childhood through adolescence

across all the states in the country through legislative and policy advocacy and framework e.g. VAPP and CRA, National Priority Action Plans on ending VAC, prevention and social norms change for VAC, child marriage and FGM/C as well as strengthening of institutions for Child Protection System delivery of services to victims and survivors.

Annual Programme Delivery: USD 290,500,000

Set-up: 1 Country Office, 9 sub-offices, 398 staff

The **Key Envisaged SI Implementing Partners** include:

Outcome 1	Targeting the Ministry of Women Affairs and Social Development at federal and state levels (especially Child & Social welfare Departments), Ministry of Justice and the Police as well as relevant CSOs focusing on the rights of children through Direct Cash transfers (DCTs) and direct payments to advocate for the passage and implementation of the Child Rights Act and VAPP to ensure the promotion and protection of the rights of children (especially girls)
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Outcome 2	The Ministry of Women Affairs and Social Development, MoJ, Police and CSOs through DCTs and direct payments to enhance the prevention of violence against children, protection and promotion of the rights of children and especially girls to ensure continuity and sustainability
Outcome 3	Government and Civil Society Organizations including the National Orientation Agency, religious and traditional organizations at Federal and state levels for community mobilization and sensitization through direct payments and or DCTs to create awareness on the harmful effects of harmful practices and every form of violence against children especially girls as well as to engender positive social norms change
Outcome 4	Partnership with relevant institutions and centres that provide for both prevention of and response to violence to ensure the promotion and protection of the rights of especially girl children. Interventions will be done through DCTs and or direct payments and supplies.
Outcome 5	Support to the MWASD at federal and state levels to establish and support the CPIMS and integration/combination with other management information system to ensure the existence of a comprehensive database (PRIMERO) for the prevention of and response to violence against women and girls across sectors. This will be achieved through DCTs, direct payment and supplies.



Key Outcomes: 3

Specific Contribution to the SI in Nigeria: UNESCO brings forward the wealth of experience generated in the field of education, culture and communication, and has specific experience developing sexuality education training modules, community consultations, engaging and building capacity of media personnel on accurate reportage of sexuality education and aid the dissemination of advocacy messages to hard-to-reach rural communities in English, Pidgin and local languages.

Annual Programme Delivery: USD\$14,200,374

Set-up: Multisectoral Regional Office in Abuja, 43 staff

The **Key Envisaged SI Implementing Partners** include:

Outcome 1	Federal Ministry of Education, Departments and Agencies in the review of the National Gender Policy for Basic Education, National HIV Policy for Basic Education and other relevant Ministries in workshops for the application of MOST tool as an appropriate mechanism for bridging the gap between academic knowledge needed to inform policymaking.
Outcome 3	Will leverage on its in-house International Institute for Educational Planning (IIEP), Bureau for Education (IBE) and International Institute for Capacity Building in Africa (IICBA). Federal and State Ministries of Education and Parastatals including Universal Basic Education Commission, National Commission for Literacy and Non-Formal Education and their State counterparts, Nigerian Educational, Research and Development Council charged with curriculum development, National Commission for Colleges of Education in charge of Pre-service teachers and National Teachers Institute charged with in-service teachers training. Others will include, education local governance including School-Based Management Committees, PTAs, School Administrators, the Media including community radio.
Outcome 4	Federal and State Ministries of Education and CSOs to strengthen capacity of school guardian counsellors to provide accurate information and access to services to young people especially girls. It will provide support in terms of grants and transfers to CSO to strengthen links between school and youth friendly facilities and services. It will work with Ministries of Youth and Sports Development and Culture (National Gallery of Arts) to organize sports and Arts competitions (Art Therapy) as ways of healing survivors of violence. Institute for Lifelong Learning, National Commission for Literacy and Non-Formal Education and the Non-Governmental Association for Literacy Support Services (umbrella body of NGOs working on literacy) to provide accelerated second chance education, life and vocational skills to out-of-school



	youth especially women and girls who left school early because unintended pregnancy, child marriage. The Programme will support their mainstreaming back to formal education. It will also strengthen capacity of Youth Networks.
Outcome 5	Federal Ministry of Education-Statistics and Education Management Information System (FME-EMIS) and the State counterparts to ensure the inclusion of CSE indicators into annual school census and EMIS. Strengthen capacity of EMIS officers at federal and state levels to collect information on the global indicators, analyse and report on them. UNESCO will pilot-test measures of SRGBV with Analysis and Imaging of the Response to SRGBV (AnImRS) tools used to evaluate education sector response to SRGBV.

V. Partnerships

Partnerships during the Country Programme Development Process

The UN and EU Delegation in Nigeria embarked on an extensive and inclusive process to ensure that the Country Programme development engaged all stakeholders from the onset. The process has in principle followed the *Guidance Note to the Resident Coordinators*. Working as One UN, agencies were brought together under the Gender Theme Group, with coordination support from the Resident Coordinator's Office. Partnering with the EU Delegation, steps to date have included informing, consulting and engaging in design processes with all relevant partners. The specific elements are documented in the process report^{xvi}, an important step in managing knowledge (please refer to *Annex 1: SI Nigeria Process Report*).

Key partners who have been consulted and engaged in the programme development include: **the EU Delegation, Government partners¹², Civil Society Partners¹³, Private Sector Partners¹⁴, and Media partners.¹⁵**

European Union

Throughout the process, the Country Team has worked closely with the EU Delegation under the guidance of the UN Resident and Humanitarian Coordinator and the EU Head of Delegation. Regular coordination meetings have been held and major events have been co-attended by the EU and the UN. Additionally, the EU and the UN have jointly advocated with the Government at the highest level to secure political buy-in and support. It is expected that this close collaboration will continue, and that the EU Delegation will remain the key partner for the set-up of the Initiative.

Government

The Government partners from all relevant MDAs have been meaningfully involved and engaged at three levels; *Highest-level* (Presidency); *Strategic Level* (through Ministers/Ministers of State) and *Technical Level* (through agency technical counterparts). In addition to bilateral meetings, Government partners have participated in all co-design and drafting events and workshops across the country. The Government have set up two Committees and nominated its members; one *National Steering Committee* and one *Technical Committee*. All relevant MDAs that constitute the Inter-Ministerial Committee are represented at these committees (*Annex 13: List of Government Committee Members*).

Civil society

A broad-based group of civil society networks and organizations across Nigeria have been

meaningfully engaged through bilateral and multilateral consultations, the interim Civil Society National Reference Group and co-designing events. In line with the principle of leaving no one behind, organizations representing key affected populations such as sex workers, women and girls living with HIV and women and girls with disabilities have been specifically targeted.

Other stakeholders

Development partners in the area of gender equality and human rights have been consulted (including Norway, Netherlands, Sweden, UK and Australia). Furthermore, the EU Delegation has sensitized development partners through their Heads of Missions, ensuring that advocacy is carried out at the highest level.

Media partners have been engaged through co-designing events and bilateral consultations. There have also been separate consultations with youth – leveraging on existing youth networks set up by UNFPA and UNIC with representation from marginalized groups such as disabled youth. The consultations were aimed at capturing the specific challenges faced by youth. Religious leaders have been involved through the engagement of a number of religious associations.

Partnerships during the Country Programme Development Implementation

In the initial stage of the Initiative, a Partnership Strategy will be developed, clearly outlining criteria for engagement (including gap analysis and potential for synergies) and a detailed plan for how various stakeholders will be systemically engaged.

European Union

The Partnership with the European Union Delegation will continue to be the main partnership. Beyond playing a key governance role, the EU Delegation will be involved in key elements of the initiative such as the Technical Committee, events, communication and visibility activities as well as monitoring.

Government

The partnership with the Government will continue to be targeted at *Highest-level* (Presidency); *Strategic Level* (through Ministers/Ministers of State) as well as *Technical Level* (through agency technical counterparts). MDAs within the four sectors traditionally engaged in public policies to address VAWG (Health, Education, Social Services, and Justice and Security) will be engaged.

Civil society

Active and substantial participation of civil society and women's organizations, will be cross-cutting across the Initiative. Moving forward, collaboration will continue through engaging civil society at various levels beyond the role as implementing partners only. CSOs will be key participants in the Governing Body (20%), the Steering Committee (20%); the Civil Society National Reference Group (100%) as well as the Implementing Partners group. In line with the Initiative's focus on leaving no one behind, groups of marginalised women and girls facing multiple and intersecting forms of discrimination will be targeted and involved through new ways of engaging such as participatory design, implementation and monitoring.

Other stakeholders

It is expected to continue to involve other donors through existing coordination fora as well as through bilateral meetings.

Religious leaders will continue to be engaged and FOMWAN and WOWICAN will be engaged to provide legitimacy. Partnerships with key medical associations will be strengthened, alongside ongoing partnership with the NHRC, CYDI, FIDA, Development Dynamics, CSWI, CEHWIN, WRAPA and organizations of Governor's Wives.



New partnerships will be formed with non-traditional partners such as social entrepreneurs, innovation labs, academia, local start-ups, celebrities, bloggers/influencers, artists and the Nollywood community.

The Private Sector will be engaged through exploring three potential work streams: making financial contributions, providing products or services; improving ways of working (business processes, services, operations, internal systems etc). Engagements will leverage on the Nigeria Humanitarian Fund Private Sector Initiative as well as the SDG Private Sector Advisory Group.

UN Agencies beyond RUNOs will be engaged through the Gender Theme Group, the M&E Group and the Communication Group where the Spotlight Initiative will be used as a pilot for how the UN can work better together, in line with the UN reforms.



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VI. Outcome framework

Programme's Results Matrix (See Table 1 in the Annexes)

VII. Intersectional approach to discrimination

Relevant "at risk" groups	Outcome areas where specific approaches are required	Key challenges for inclusion	Indicative approaches and methodologies for inclusion	Total numbers disaggregated by women, girls, men and boys when possible (please note that these are the overall numbers)
Group 1: Women and girls living with and vulnerable to HIV	1, 2, 3, 4, 5 & 6	Non-involvement and stigma, difficulty to access services. Lack of empowerment opportunities.	Mobilizing and integrating SGBV, HP and SRHR in HIV services. Prevention through a rights-based approach, to enable a supportive environment for people living with HIV, including confidentiality, anti-discrimination legislation and policies, and prevention of rights violations against key populations.	There are some 3,2 million people living with HIV in Nigeria, among whom 30% are accessing antiretroviral therapy. It is estimated that some 1,6 million of those are women. Key affected populations include sex workers, gay men and people who inject drugs. The prevalence rate is higher amongst than men (3.0 vs 2.5). Among pregnant women with HIV, 32% are accessing treatment or prophylaxis to prevent transmission to their children. In 2016, Nigeria had an estimated 220,000 new HIV infections. Among young people aged 20 – 24, the infection rate of females (3.7%)
Group 2: Women and girls living with physical and mental disabilities	1, 2, 3, 4, 5 & 6	Lack of skills for integration of disability in programmes	Institutional capacity strengthening for inclusive programming, prevention, better access to holistic services and data. Disability specific adaptations made to materials and learning aids designed to reach individuals living with disability.	Overall population living with disability - 3.25 million (National Population Commission (from 2006 Census). Lack of disaggregated quantitative data as well as qualitative data on the specific challenges faced by this group.
Group 3: Women and girls with	1, 2, 3, 4, 5 & 6	Stigma, discrimination and rejection. Seen as	Institutional capacity strengthening for inclusive programming.	Data in principle non-existent. Latest estimation assessment made in 2014 (in 6 states only)



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diverse sexuality		illegal. Difficulty to access services, including SRHR	Ensure greater legal recognition of people who are sex and gender diverse. Diversity management and provision of inclusive environment for sexual minorities	indicates a total of 26,060 women.
Group 4: Female Sex Workers	1, 2, 3, 4, 5 & 6	Stigma, physical, sexual and emotional abuse. Over 1/3 have HIV. Lack of legal and social protection.	Institutional capacity strengthening for inclusive programming, prevention and access to services. Address health risks for on-street, off-street, migrant, and trafficked sex workers. Prevention of associated poverty, homelessness, and substance misuse.	Data difficult to access – estimation assessment was made in 2015 (funded by USAID) and estimates a range from a minimum of 81,188 to a maximum of 125,792 with an estimated average of 103,475.
Group 5: Women and girls who use drugs	1, 2, 3, 4, 5 & 6	Stigma, physical, sexual and emotional abuse. Difficulty to access services, including for SRHR	Institutional capacity strengthening for inclusive programming, prevention and access to holistic services including SRHR. Comprehensive family centered treatment services with involvement of extended and blended family networks. Presence of residential Women's and Children's programme and targeting pregnant and parenting women.	Very little data but PWID estimates ranges from 30,490 to a maximum of 56,026 with an estimated average of 43,260.
Group 6: Widows	1, 2, 3, 4, 5 & 6	Stigma, discrimination, rejection, isolation	Institutional capacity strengthening for inclusive programming, prevention and empowerment. Anti-stigma practices including mode of dressing, labelling and access to spouse's benefits or disinheritance. Rights based approach to widowhood rites for widows of all ages and wives of the disappeared	3,531,682 women are widows. Little qualitative data on the specific challenges faced by widows..
Group 7: Out of school girls & adolescents	1, 2, 3, 4, 5 & 6	Lack of skills, no empowerment, vulnerable to abuse, exploitation and child marriage, lack of health information and services	Prevention, Life skills and empowerment, access to services. Building a safe and inclusive learning environment for girls and providing equitable quality education. Ending Child, early marriage and teen	7,35 million girls are out of school – some 60% of the out-of-school children are girls. Many of those who do enroll drop out early. Low perceptions of the value of education for girls and early marriages are among the reasons. Some northern states have laws requiring education of girls and



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		– vulnerable to STIs and unintended pregnancies	pregnancy	prohibiting their withdrawal from school. Girls' primary school attendance has been improving, but this has not been the case for girls from the poorest households.
Group 8: Women-headed households	1, 2, 3, 4, 5 & 6	Discrimination, lack of finances, lack of assets including land	Life skills and empowerment. Value of unpaid work and traditional role that women play in the house such as house-keeping, caring for husband and children and preparation of meals for the family. Determine household power relations, and recognise the role of matriarchs to avoid tensions	14,6% of households in Nigeria are headed by females.
Group 9: Market women	1, 3,4 6	Physical, sexual and emotional abuse	Prevention, legal literacy and access to services. Inclusion in the allocation of space and shops and opportunities for information on market access for women with realistic pricing and channels for marketing goods and services. Ensure equal access to information on market access for women with realistic pricing and channels for marketing goods and services especially in male dominated occupations	Women, including girls constitute 37. 14 percent of Nigerians in gainful employment and most women are highly concentrated in the informal sector of the economy.
Group 10: Female students at university	1, 3 and 4	physical, sexual and emotional abuse by teachers and peer students; sex for grades	Legal literacy, prevention and referral system for services. Access of university undergraduates to a confidential reporting mechanism for any harassment, bullying or violence; ensuring their voices are heard for advocacy interventions	Around 500,000 new female students enroll each year
Group 11: Women and girls in rural areas	1, 3, 4, 5 and 6	Physical, sexual and emotional abuse, poverty, lack of access to services, including SRHR	Through prevention, ensuring better access to services at community level as well as support to rural CSOs/associations including inclusion for developing policies which ensures access to services	Around 50% live in rural areas



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Group 12: Girls between 10 -15 years	3, 4 and 5	Lack of data on access to services; lack of access to health information and services – vulnerable to STIs and unintended pregnancies	Improved access to education, gender equitable learning and skills including adolescent friendly services and comprehensive sexuality education. Access to safe spaces offering confidentiality, RH education and peer activities. Efforts will aim to delay marriage and prevent violence against girls, nutrition services, HIV-stay free interventions, HPV and menstrual health and hygiene	60% of the 10.5 million out of school children in Nigeria are girls. Many who enroll drop out early because of low perceptions of the value of education for girls and early marriage especially in the North (Data UNICEF Nigeria)
Group 13: Pregnant women and girls	3, 4,5	Lack of data on access to services, including SRHR, social vulnerabilities which impact access to adequate SRHR services	Ensuring better access to services – capturing data on access to services. Instituting policies and practices that address cultural or religious beliefs that stigmatize unmarried, pregnant girls. Offering enrolment, retention and completion as well as second chance education options.	9,2 million each year

VIII. Risk Management

(See Table 2 before the Annexes):

Please refer to Table 2 that sets out the main risks that may jeopardize programme implementation, their likelihood, severity, and risk management, including responsibility for risk management/ mitigation, and includes protection considerations related to those engaged in the programme either at grassroots level or at high visibility levels.

IX. Consistency and alignment with other programmes

Programme Description	Outcomes	Geographic Coverage	Partners	Link to Spotlight Initiative
UNFPA/UNICEF joint programme on FGM abandonment aims at strengthening coordination, response and provision of	1, 3 & 4, 5 & 6	5 states (Ebonyi, Ekiti, Imo, Osun and Oyo)	National and international NGOs,	The SI will build on the work done to date and cover geographical



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services for SRHR, GBV and HPs for women and girls. Interventions use community-based approaches and strengthens the existing national systems to provide access to quality SRHR services, prevention of HPs and GBV response.			grassroots and faith-based organizations, MoH, MoWA, National Orientation Agency (NOA) (funded by USAID)	gaps.
Promoting Women's Engagement in Peace and Security in Nigeria; The programme <i>Promoting Women's Engagement in Peace and Security in Northern Nigeria</i> is a four-year initiative (2014-2018), designed to support the Nigerian government (federal level), three northern states (Adamawa, Plateau and Gombe) and selected constituent local government areas (LGAs) to strengthen women's leadership, advance gender equality and improve protection for women and children in conflict settings. By ensuring the implementation of the UN Security Council Resolution 1325.	1 & 3 & 6	Adamawa, Gombe, Plateau	European Union MOWASD (Federal and State level) UNICEF UNDP	The SI will build on the campaigns and work with the media (radio and TV, short movies, existing WPS media networks) done under the UN Women-EU WPS project.
UNFPA is currently working implementing the Campaign to End Fistula in Nigeria	3 & 4	Six geopolitical zones	MoH, MoWA	The SI will build on the campaigns done to date.
As a pathfinding country for End VAC, UNICEF is implementing a programme aimed at strengthening capacities amongst child rights duty bearers to implement a comprehensive child protection system, to improve care and support vulnerable and at risk children, and prevent and respond to all forms of violence, abuse, neglect and exploitation of children. This will be achieved through ensuring a robust and cohesive national policy and regulatory framework for child protection and creating a replicable comprehensive child protection systems model that could be scaled up throughout the country.	1, 3 & 4	Federal level. Currently in Lagos, Cross River, Gombe, Plateau with technical support provided in FCT, Benue, Edo, Kano and Kaduna	MoWA	The SI will build on the work done to date and expand to new states as well as to new LGAs and communities in Lagos and Cross River
UNICEF and UNFPA implements the End Child Marriage campaign	3 & 4	Federal level – focus on North	MoH, MoWA CSOs including religious and traditional organizations, media	The SI will build on the campaigns done to date. There is no existing funding for this JP.
UNESCO and UNFPA implements the Our Rights, Our Lives, Our Future (O3 Programme) , an education for health	3, 4 & 5	9 states including FCT (Aba, Benue, Cross	MoE, UBEC, NERDC, UNAIDS, UNICEF,	The SI will expand the work and take forward recommendations.



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and well-being project. The Programme seeks to improve sexual and reproductive health, gender and education outcomes for adolescents and young people through sustained reductions in new HIV/STI infections, early and unintended pregnancy and GBV		River, Ebonyi, Kaduna, Lagos, Nasarawa, Taraba and FCT)	MoH, NACA, SFH, AHI, EVA	
The Gender Based Violence Sub-Sector Working Group (GBVSWG) under the Protection Sector Working Group and coordinates a comprehensive multi-sector approach to GBV prevention and response. UNFPA leads and coordinates the GBV and sexual and reproductive health sub sectors. Efforts have been made to strengthen coordination of GBV needs under the multi sectorial response through periodic mapping of facilities and services, establishing referral pathways and Standard Operating Procedures. ^{xvii}	3 & 5	Borno, Adamawa, Yobe, Gombe and at national level	The Federal Ministry of Women Affairs and Social Development and respective line ministries at state levels, chair the GBVSWG.	Functioning inter-agency technical group which can be leverage upon and broadened. Specific linkages include the expansion of the GBVIMS.
UNDP has developed and coordinates the implementation of the Plan of Action to address GBV intersections . UNDP also implements the Access to Justice project which facilitates provision of prevention and linkages for GBV services including economic empowerment, legal literacy, providing legal and justice platforms, to reduce vulnerability to violence and abuse and bring the culprits to book.	1, 2 & 4	North-East	National Institute for advance legal studies, Center for Social Justice, Population Council, Police, Prisons, Federation of Female lawyers and Human Rights Council	The SI will leverage on services provided by this project to date.
The EU Gender Action Plan (GAP) II "Gender Equality and Women's Empowerment: Transforming the Lives of Girls and Women through EU External Relations 2016-2020"	3 & 6	Federal	European Union	The SI will take stock in the action plan and link to expected outputs and indicators. Reference will be made in the Results Framework
One UN Behavioral Insights Pilot for Protection Against Sexual Exploitation and Abuse (PSEA)	3	North-East/National	SGBV Sub-Sector, Behavioral Insights Team	The SI will take forward lessons learned from the pilot
The EU funded Rule of Law and Anti-Corruption Program (ROLAC) is supporting Sexual Assault Referral Centres in Lagos, Yola and FCT. The FCT SGBV response team secretariat is the core centre for call-in reports and referral. It also supports NAPTIP with a short code for call in and jingles to raise awareness on the VAPP act.	3	Adamawa Kano Anambra Lagos FCT	NAPTIP, LACVAW WRAPA, FMWASD NPF	SI will replicate the best practices
Call to Action on Protection from GBV in Emergencies is a global initiative launched in 2013 with one simple goal: to	3, 5, 6	North-East	EU, Government, Donors, UN Agencies,	SI will support coordination, advocacy and aligning the work of



ensure that every humanitarian response, from the very start, provides safe and comprehensive services for GBV survivors and mitigates the risks of GBV.			NGOs	access to services for survivors in the joint target state Adamawa
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X. Monitoring & Evaluation

The M&E system aims to ensure that activities: (i) are being implemented according to plan; (ii) have the intended impact; (iii) are being effective in delivering benefits and the benefits are being sustainably managed and owned; (iv) are relevant to the needs of, and prioritized by, the beneficiaries/agents of change; and (v) are being monitored so as to identify problems and risks early and ensure the progress of the programme. A Monitoring and Evaluation plan will be designed for the Initiative in line with the global M&E strategy to ensure that monitoring and evaluation of progress is an integral part and that the Programme is systematically reviewed against the set targets. The monitoring and evaluation of the Initiative will be guided by the principles of gender equality, human rights and promote inclusiveness and leaving no one behind.

The identification and collection of baseline data for all indicators is a priority and has been appropriately planned and budgeted. Agencies are responsible for the continuous monitoring and evaluation, including gathering data for the specific areas they led. The Programme Coordinator, supported by a dedicated M&E Officer, coordinates the process and provides advice on proper performance indicators and methods of data collection and analysis. Clear roles and responsibilities of the M&E Officer and Agency M&E focal points will be outlined in the *Implementation Arrangement Guide*. Innovation for M&E will be explored by:

- Leveraging on UN INFO^{xviii} as a key instrument to ensure real-time monitoring, better accountability, and transparency.
- Embracing data innovation by exploring new sources of data and embrace emerging technologies such as mobile surveys and picture-based reporting.
- Better engagement and involvement of all stakeholders in monitoring activities through user-centric approach^{xix} to get more honest and inclusive feedback and taking full advantage of new technologies and approaches.

External independent mid-term and final evaluations will be conducted and used to analyse programme performance and determine the extent the Spotlight Initiative's theory of change has been successful.

XI. Innovation

Through a *silofighters approach* (Innovating as One), elements of joint programmatic and operational innovation will be integrated across the Initiative and be a key element in driving collaboration. Innovation will incentivize flexibility, continuous reflection, learning and risk-taking and allow partners to test new initiatives and approaches that are *business unusual* and/or scale-up and replicate effective solutions that work. Specific consideration for addressing risks related to innovation are further addressing in *Table 2 – Programme Risk Management Matrix*.

Centralized technical support will be provided through the Programme Management Unit to accelerate innovation to: (1) Scans horizons and identify innovative approaches and methodologies that could work in Nigeria; (2) help to test, and scale and replicate solutions; and (3) build innovation capacities of staff and partners. Specific innovation approaches will include:

Programmatic

Embrace data innovation; explore new forms and sources of data such as mobile, radio and citizen-generated data; test the value of open data for real-time monitoring. Example: *capture radio data on informal marriages prevalence not reported through traditional channels*.

Improve services through user-centric approaches such as design-thinking and crowdsourcing and explore approaches to better include those furthest behind. Example: *co-design service delivery and use U-report to generate ideas*.

Foster networks for social mobilization and engage the wider public around specific issues or act



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Initiated by the European Union and the United Nations:



as agents of change. Examples: *Influencers call for the provision of services to survivors; peer-to-peer approaches to promote access to prevention and response centres; targeting private sector to put in place internal measures to prevent GBV.*

Leverage data and behavioural insights to better diagnose issues and design evidence-based communication and advocacy interventions aiming to nudge behaviors. Example: *Communication campaign based on behavioural insights encouraging victims to report incidents.*

Operational

All operational innovation aims to support the UNDS reform principles of ensuring a more effective implementation of the 2030 Agenda. Efforts will aim to enhance the UN's skill sets, optimize physical presence and ensure a more consolidated and effective back-office support. Specific interventions that are already in the pipeline will include:

Streamline business operations and processes across agencies to enable entities to work more effectively together. Example: *use emerging ICT tools to fast-track procurement, hackathons for business processes.*

Leverage on digital platforms for UN programming to improve transparency, accountability and online monitoring and reporting. Example: *continuing the pilot for UN Info – an online platform for planning, monitoring and reporting.*

Test methods to develop channels beyond international and public finance such as domestic and private sources. Example: *pilot peer-to-peer finance through private sector funding.*

To ensure that these plans are realized, the Spotlight Initiative will leverage on existing One UN Innovation efforts in Nigeria. To measure the impact of innovation, the SI in Nigeria will adapt lessons learned from the UNDP Innovation Facility. Three key indicators will be used: 1) the ability to scale or replicate the solution, 2) the ability to raise follow-on resources and 3) the skill set of staff and partners.

XII. Knowledge Management

Knowledge management (KM) plays a critical role in ending violence against women by making accessible the expertise and knowledge of what works to prevent and respond to violence. A KM Framework^{xx} will be developed with three objectives:

Create knowledge and build an evidence-base on policies, solutions to shape interventions and discourse;

Improve quality and efficiency of the Spotlight Initiative's work;

Produce evidence and lessons for learning, reporting, results-based management and communication.

Priorities include External KM - for and with partners to draw on external knowledge and build partners' capacities; and Internal KM - to most effectively improve the work. Key principles are: KM is people-centred rather than document-centred; KM is not generated for the Initiative only but that the public is the ultimate priority; and KM is not a stand-alone activity but integrated in programme delivery. The key elements are:

Learn and Capture Knowledge (compile an evidence-base on VAWG; with local institutions on research; engage with academia to generate knowledge; document good practices including on innovation; produce KM for visually impaired);

Knowledge Networking (foster knowledge exchanges; engage in communities of practice);

Public Engagement (work out loud, share knowledge with the public, crowdsource ideas; reach rural areas in local languages).

Build Knowledge Management Capacities (train staff and partners; provide support and advisory services to partners)

Research and Data (leverage on UN info; support data analytics of data generated by partners; produce pictorial data).

RUNOs will designate KM focal points to work closely with the Programme Coordinator, Technical



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Coherence and Programme Officers and leverage on existing inter-agency groups (such as the M&E and Communication group) and CoPs to avoid information silos.

In addition to national activities, the Country Team will engage in global and regional KM processes and link the Initiative to networks of academia, policymakers and other relevant stakeholders in support of south-south learning and knowledge systematization exercises.

XIII. Communication and visibility

All communication and visibility at the country level will be aligned with the global communication and visibility plan and implemented by the UN Resident Coordinator and engaged RUNOs.

Strong communications and visibility are central to the Initiative's success. The communication and visibility work will have four objectives;

Objective 1

Raise awareness of *gender-based violence and harmful practices against women and girls* and its prevalence in *Nigeria*: By publicizing data and supportive facts, creative messaging to key audiences, exhibiting thought leadership on violence against women and girls.

Objective 2

Illustrate and promote the impact and results of Spotlight-supported interventions: By finding, sharing and promoting the stories of women and girls whose lives have been positively transformed by Spotlight-supported interventions.

Objective 3

Provide communications for development support to strengthen Spotlight Initiative's programme design and implementation: By influencing the creation and delivery of behaviour-change and culture-shift activities, campaigns and initiatives, media sensitization and training.

Objective 4

Ensure visibility for the Spotlight Initiative, its donors and partners: By coordinating consistent and coherent branding, high-profile endorsements from social influencers, top-tier media placements, organizing publicity events and campaign.

The UN in Nigeria will develop a Communications Strategy, based on the global Communication & Visibility Guide, outlining the framework for a unified communication approach, anchored on four principles – trust, credibility, reach and engagement. Additional communication principles include: a single Spotlight Initiative branding; no single agency logos; a unified UN image and ensuring that all official material and events include both the UN and the EU logos.

The Strategy will be implemented through a One UN effort, spearheaded by a dedicated Communication Officer (based in the Programme Management Unit) and supported by RUNO Communication Officers and UNIC. Technical guidance will be provided by Programmes Officers and the PMU. The existing inter-agency working group for Communication, UN Communication Group (led by the UNESCO Representative) will be leveraged on for regular coordination on communication. Specific implementation strategies are: public advocacy, strengthened media relations, digital engagement, communication for fundraising, knowledge sharing as well as communication for development and social mobilisation.

Ensuring the visibility of the EU's commitment and contribution will be paramount and is further elaborated in the **Communication and Visibility Plan of the Country Programme (Annex 2)**. The Communication and Visibility Manual for European Union External Action has been used to establish this plan to ensure that it is in line with the EU's Communication and Visibility Criteria.

XIV. Annexes

TABLE 1 – PROGRAMME'S RESULTS MATRIX

OVERALL IMPACT – All women and girls, particularly those most vulnerable, live a life free of violence and harmful practices
Impact Indicators: Direct SDG 5.2.1 (<i>EU GAP Indicator 7.2</i>) Proportion of ever-partnered women and girls aged 15 years and older subjected to physical and/or, sexual violence by a current or former intimate partner, in the previous 12 months, by form of violence and by age; SDG 5.2.2 Proportion of women and girls aged 15 years and older subjected to sexual violence by persons other than an intimate partner since age 15 in the previous 12 months, by age and place of occurrence; SDG 5.3.1 (<i>EU GAP Indicator 7.1</i>) Proportion of women aged 20-24 years who were married or in a union before age 15 and before age 18; SDG 5.3.2 (<i>EU GAP Indicator 7.4</i>) Proportion of girls and women aged 15-49 years who have undergone female genital mutilation/cutting, by age; SDG 5.6.1 Proportion of women aged 15-49 who make their own informed decisions regarding sexual relations, contraceptive use and reproductive health care; Indirect SDG 16.2.3 Proportion of young women and men aged 18–29 years who experienced sexual violence by age 18; (Tier II, UNICEF) EU GAP Indicator 19.2 % of women aged 15-49 years who intend to cut their daughters (UNICEF data collection) EU GAP Indicator 19.4. In EU Partner Countries, N# of communities that formally declare abandoning a practice that discriminates or harms girls and women of all ages
OUTCOME 1 Legislative and policy frameworks, based on evidence and in line with international human rights standards, on all forms of violence against women and girls and harmful practices are in place and translated into plans Contributes to: UNDAF Outcome 1: Good Governance and Rule of Law: <i>By 2022, Governments at all levels apply principles for good governance, equity, non-discrimination and rule of law in public service delivery and citizen engagement</i> EU Gender Action Plan: <i>Priority B: Physical and Psychological Integrity, Objective 7: Girls and Women free from all forms of violence against them (VAWG) both in the public and private sphere and Thematic Priority D: Political and Civil Rights – Voice and Participation</i> Contributes to SDG 3, 5, 10 and 16



Indicators	Data source	Means of verification	Responsible Org.
<i>Indicator: 1.1 Laws and policies on VAWG/SGBV/HP that adequately respond to the rights of all women and girls, including exercise/access to SRHR, are evidence-based and in line with international HR standards and treaty bodies' recommendations in place (Y/N)</i> <i>Indicator 1.2 Number of national and/or sub-national evidence-based, costed and funded action plans and M&E frameworks on VAWG/SGBV/HP respond to the rights of all women and girls and are developed in a participatory manner (No.)</i> <i>Indicator 1.3 Existence of law(s) and policies that guarantee the ability of women's rights groups, autonomous social movements, CSOs and women human rights defenders/feminist activists to advance the human rights agenda (Y/N)</i>	Progress towards international standards will be measured through an analysis of specific components ("degree to which") as described in the Methodological Notes Progress towards international standards will be measured through an analysis of specific components ("degree to which") as described in the Methodological Notes Implementing UN Agencies CSOs MDAs NGOs	Existing laws and policies CEDAW and universal periodic review reporting Mapping and Assessment reports National action plans and accompanying budget Assessment reports Process reports of national consultations Presence of laws and policies protecting human rights defenders	UNDP UNWOMEN Implementing Partners UNICEF
Global Output 1.1 National and regional partners¹⁶ have strengthened evidence-based knowledge and capacities to assess gaps and draft new and/or strengthen existing legislations on ending VAWG/SGBV/HP and/or on gender equality and non-discrimination that respond to the rights of the most groups facing multiple and intersecting forms of discrimination and are in line with international HR standards and treaty bodies' recommendations Country Output 1.1 Capacities of Parliamentarians, government officials, judges and prosecutors, women's and girls' rights advocates, human rights institutions, media and civil society are strengthened to advocate for, and participate in the domestication, review, the development and implementation of laws and policies on ending VAWG, including SGB/HP and SRHR (<i>Annex 6– Overview of Legal and Policy Situational Analysis</i>)			
Indicator 1.1.1: Number of draft new and/or strengthened laws and/or policies on VAWG,	Implementing RUNOs MDAs	Review of laws and policies Mapping	UNDP UN Women



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including SGBV/HP, and/or on gender equality and non-discrimination developed that are in line with international HR standards and respond to the rights of women and girls (including SRHR), particularly those facing intersecting and multiple forms of discrimination	CSOs NGOs		UNICEF
Indicator 1.1.3 Proportion of draft laws and/or policies on VAWG/SGBV/HP and/or on gender equality and non-discrimination which have received significant inputs from women's and girls' rights advocates	Implementing RUNOs CSOs NGOs Women's Rights Groups	Surveys Reports from RUNOs and CSOs	UNDP UN Women
Indicator 1.1.4 Number of women's and girls' rights advocates with strengthened capacity to advocate for and support review, domestication, monitoring implementation of laws and policies.	Implementing RUNOs CSOs NGOs Women's Rights Groups	Surveys Reports from RUNOs and CSOs	UN Women
Indicator 1.1.5 Number of Parliamentarians and staff of human rights institutions with strengthened capacities to advocate for, draft new and/or strengthen existing legislation and/or policies on VAWG including SGBV/HP and/or gender equality and non-discrimination, including the promotion of women and girls SRHR, and implement the same	MDAs NHRC	Capacity assessment Universal Periodic Review	UNDP UN Women
Output 1.2 National and/or sub-national partners¹⁷ are better able to develop evidence-based national and/or sub-national action plans on ending VAWG/SGBV/HP in line with international HR standards with M&E frameworks, increase financing and allocate appropriate budgets for their implementation, including for those groups facing intersecting and multiple forms of discrimination			
Country Output 1.2: National and sub-national partners are better able to develop evidence-based national and or/sub-national action plans on ending VAWG/SGBV/HP in line with international HR standards with M&E frameworks, increase financing and allocate appropriate budgets for their implementation, including for those groups facing intersecting and multiple forms of discrimination			
Indicator 1.2.1 Number of draft evidence-based	Implementing RUNOs	Review of actions plans	UNDP

¹⁷ Key government/national decision makers (Heads of State, Finance Ministers, Ministries of Justice and Police, Security Ministers and relevant planning institutions) including women's rights advocates



national and/or sub-national action plans on ending VAWG, including SGBV/HP and promoting women and girls' SRHR developed that respond to the rights of groups facing intersecting and multiple forms of discrimination with M&E frameworks and proposed budgets	CSOs MDAs	RUNO reports	UN Women
Indicator 1.2.2 Number of key government decision makers with strengthened capacities to draft and cost action plans on ending VAWG, including SGBV/HP and the promotion of women and girls' SRHR, and accompanying M&E frameworks	Implementing RUNOs CSOs MDAs	Capacity assessments RUNO reports	UNDP UN Women
Indicator 1.2.3 Number of women's and girls' rights advocates ¹⁸ with strengthened capacities to draft and cost action plans on VAWG, including SGBV/HP, and the promotion of women and girls' SRHR, and accompanying M&E frameworks	Implementing RUNOs CSOs Women Rights Groups	Capacity assessments/surveys RUNO reports	UN Women UNICEF
Global Output 1.3 National, sub-national and/or regional partners¹⁹ have greater knowledge and awareness of human rights obligations and are able to draft laws and/or policies that guarantee the ability of women's rights groups, CSOs and women human rights defenders to advance the human rights agenda			
Country Output 1.3 National and sub-national partners have greater knowledge and awareness of human rights obligations that guarantee the ability of women's rights groups, CSOs and women human rights defenders to advance the human rights agenda including through the support of traditional, community and religious leaders, media and education sector			
Indicator 1.3.3 Number of key government officials with increased awareness of human rights standards and obligations and strengthened capacities to develop laws and policies that guarantee the ability of women's rights groups, CSOs and women human rights defenders to advance the human rights agenda	Implementing RUNOs CSOs MDAs Public	Capacity assessments/surveys	UNDP UN Women
Indicator 1.3.4 Number of women human rights defenders with strengthened capacities to contribute to	Implementing RUNOs Women rights	RUNO reports Capacity assessments/surveys	UNDP UN Women

¹⁸ Including those from groups facing multiple and intersecting forms of discrimination

¹⁹ Key government officials and women's human rights defenders



the development of laws and policies that guarantee the ability of women's and girls' rights groups, CSOs and women human rights defenders to advance the human rights agenda	defenders		
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OUTCOME 2

National and sub-national systems and institutions plan, fund and deliver evidence-based programmes that prevent and respond to violence against women and girls and harmful practices, including in other sectors

Contributes to:

UNDAF Outcome 1: Good Governance and Rule of Law: By 2022, Governments at all levels apply principles for good governance, equity, non-discrimination and rule of law in public service delivery and citizen engagement

EU Gender Action Plan: Priority B: Physical and Psychological Integrity, Objective 7: Girls and Women free from all forms of violence against them (VAWG) both in the public and private sphere and Thematic Priority D: Political and Civil Rights – Voice and Participation

Contributes to SDG 3,4, 5, 10, 16 and 17

Indicator	Data source	Means of verification	Responsible Org.
<i>Indicator 2.1 Existence of functioning national and/or sub-national coordination and oversight mechanisms at the highest levels for addressing VAWG/SGBV/HP that include representation from marginalized groups</i> <i>Indicator 2.2 Proportion of national and subnational budget allocated to the prevention and elimination of all forms of VAWG/SGBV/HP</i> <i>Indicator 2.3 VAWG/SGBV/HP is integrated in 5 other sectors (health, social services, education, justice, security, culture) development plans that are evidence-based and in line with globally agreed standards (Y/N)</i>	UN Report Federal and state budget statement; GCC for VAWG/SGBV/HP programme UN Report	Accountability framework and Reports Budget analysis report	UNDP UN Women UNICEF

Global Output 2.1 Key officials at national and/or sub-national levels in all relevant institutions²⁰ are better able to develop and deliver evidence-based programmes that prevent and respond to VAWG/SGBV/HP, especially for those groups of women and girls facing intersecting and multiple forms of discrimination, including in other sectors



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Country Output 2.1 Key government officials at national and/or sub-national levels in all relevant institutions ²¹ are better able to develop and deliver evidence-based multi-sectoral programming that prevent and respond to VAWG/SGBV/HP, especially for those groups of women and girls facing intersecting and multiple forms of discrimination, including in other sectors			
Indicator 2.1.1 Number of institutions that develop strategies, plans and/or programmes to prevent and respond to VAWG/SGBV/HP, including for those groups of women and girls facing intersecting and multiple forms of discrimination	Implementing RUNOs CSOs/NGOs	POAs RUNO reports	UNDP UNWOMEN
Indicator 2.1.2 Internal and external accountability mechanisms within relevant government institutions in place to monitor GEWE and VAW/SGBV/HP/SRHR (Y/N)	Implementing RUNOs CSOs/NGOs	Situation Analysis Performance review report Information management systems (with 2 dedicated staff at agency level)	UNDP UNWOMEN
Indicator 2.1.3 Number of strategies plans and programmes of other relevant sectors that integrate efforts to address VAWG/SGBV/HP developed in line with international HR standards	Implementing RUNOs CSOs/NGOs	Consultation report Strategic Plan of Actions	UNDP UNWOMEN
Indicator 2.1.5 Percentage of targeted national and sub-national training institutions that have integrated gender equality and ending VAWG/SGBV/HP and the promotion of women and girls' SRHR, in their curriculum as per international standards	Implementing RUNOs	RUNO reports	UNDP UNWOMEN UNFPA
Indicator 2.1.7 Number of key government officials with strengthened capacities to develop and deliver programmes that prevent and respond to VAWG/SGBV/HP and integrate into development plans the promotion of women and girls' SRHR	Implementing RUNOs	RUNO reports	UNDP UNWOMEN UNFPA UNESCO UNICEF

²¹ E.g. justice, statistics, police, health, community based, etc.



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Indicator 2.1.9 Number of women's rights advocates ²² with strengthened capacities to support the integration of ending VAWG, including SGBV/HP and the promotion of women and girls' SRHR into the development plans of other sectors (Health, Education, Justice, Human Rights, Budget & Planning)	Implementing RUNOs CSOs/NGOs	Consultation report Plan of Actions	UNDP UNWOMEN UNFPA UNESCO UNICEF
Global Output 2.2 Multi-stakeholder national and/or sub-national coordination mechanisms established at the highest level and/or strengthened that are adequately funded and include multi-sectoral representation and representation from the most marginalized groups			
Country Output 2.2 Multi-stakeholder national and sub-national coordination mechanisms that include representation from the most marginalized groups are established/strengthened;			
Indicator 2.2.1 Proportion of supported multi-stakeholder coordination mechanisms established at the highest level and/or strengthened composed of relevant stakeholders, with a clear mandate and governance structure and with annual work plans	Implementing RUNOs CSOs/NGOs	Coordination TOR/partnership framework Annual workplans Capacity building reports Coordination TOR/partnership framework Budget circulars Programmatic and Financial report	UNDP UNWOMEN
Indicator 2.2.2 Proportion of national and sub-national multi-stakeholder coordination mechanisms that include representative of groups facing intersecting forms of discrimination	Implementing RUNOs CSOs/NGOs Women Rights Groups	RUNO reports Implementing partner reports	UNDP UNWOMEN Programme Management Unit
Indicator 2.2.4 Number of annual meetings of national and/or sub-national multi-stakeholder coordination mechanisms	Implementing RUNOs CSOs/NGOs	RUNO reports Implementing partner reports	UNDP UNWOMEN Programme Management Unit
Global Output 2.3 Partners (Parliamentarians, key government officials and women's rights advocates) at national and/or sub-national levels have greater knowledge, capacities and tools on gender-responsive budgeting to eliminate VAWG/SGBV/HP and promote women and girls' SRHR			
Country Output 2.3: Partners (Parliamentarians, key government officials and women's rights advocates) at national and sub-national levels have			

²² Including those from groups facing multiple and intersecting forms of discrimination



greater knowledge, capacities and tools on gender-responsive budgeting to eliminate VAWG/SGBV/HP and promote women and girls' SRHR			
Indicator 2.3.1 Proportion of dedicated and multi-sectoral programmes developed that include proposed allocations of funds to end VAWG, including SGBV/HP, and to promote women and girls' SRHR	Implementing RUNOs CSOs/NGOs	Partner reports	UNDP UN Women UNFPA UNICEF UNESCO
Indicator 2.3.2 Percentage of Parliamentarians and Committee Members (Federal and State level) with strengthened knowledge and capacities to hold relevant stakeholders accountable to fund and implement multi-sectoral programmes to address	Implementing RUNOs CSOs/NGOs	Capacity building reports All inclusive knowledge products (IEC materials, simplified version of VAPP, training materials tool kits) Concept notes Work plans Program reports Budget	UNDP UNWOMEN
Indicator 2.3.3 Number of key government officials with greater knowledge, capacities and tools on gender-responsive budgeting to end VAWG, including SGBV/HP, and to promote women and girls' SRHR	Implementing RUNOs MDAs	Survey Capacity assessment	UNDP UNWOMEN
Indicator 2.3.4 Number of women's rights advocates ²³ with greater knowledge and capacities on age-sensitive and gender-responsive budgeting to end VAWG, including SGBV/HP, and to promote women and girls' SRHR	Implementing RUNOs Women's Rights Groups	RUNO reports	UNDP UNWOMEN UNICEF

²³ Including those from groups facing multiple and intersecting forms of discrimination



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OUTCOME 3

Gender inequitable social norms, attitudes and behaviours change at community and individual levels to prevent VAWG/SGBV/HP

Contributes to:

UNDAF Outcome 1: Good Governance and Rule of Law: *By 2022, Governments at all levels apply principles for good governance, equity, non-discrimination and rule of law in public service delivery and citizen engagement*

UNDAF Outcome 6: Protection: *By 2022, the national and state social protection policies are implemented and adequately financed with protection systems and services strengthened to effectively prevent and respond to violence, abuse, exploitation (including trafficking) and harmful social norms, with a focus on the most disadvantaged*

EU Gender Action Plan: Priority B: Physical and Psychological Integrity, Objective 7: Girls and Women free from all forms of violence against them (VAWG) both in the public and private sphere and Thematic Priority C: Economic, Social and Cultural Rights – Economic and Social Empowerment

Contributes to SDG 3, 4, 5, 10, 16 and 17

Indicators	Data source	Means of verification	Responsible Org.
<i>Indicator 3.1 Percentage of people who think it is justifiable for a man to (subject) beat his wife/intimate partner (to violence), by sex and age (%)</i> <i>Indicator 3.2 Percentage of people who think it is justifiable to subject a woman or girl to FGM, b. Percentage of people who think it is justifiable to subject a woman or girl child marriage</i> <i>Indicator 3.3 Existence of at least 3 evidence-based transformative/comprehensive prevention strategies/programmes that address the rights of those marginalized and are developed in a participator manner</i>	Survey assessments RUNO reports	Survey	UNFPA UNICEF

Global Output 3.1 National and/or sub-national evidence-based programmes are developed to promote gender-equitable norms, attitudes and behaviours, including on Comprehensive Sexuality Education in line with international standards, for in and out of school settings

Country Output 3.1: National and sub-national evidence-based programmes are developed to promote gender-equitable norms, attitudes and behaviours, including on Comprehensive Sexuality Education in line with international standards, for in and out of school settings



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Indicator 3.1.1 Draft new and/or strengthened Comprehensive Sexuality Education Programmes (Family life HIV education) in line with international standards in place (Y/N)	Implementing RUNOs	RUNO reports Implementing partner reports	UNESCO
Indicator 3.1.2 Number of young women and girls, young men and boys who participate in and out of school programmes that promote gender-equitable norms, attitudes and behaviours and exercise of rights, including reproductive rights	Implementing RUNOs CSOs Young women, girls, boys and men	RUNO reports Implementing partner reports Survey	UNICEF UNESCO
Indicator 3.1.3 Number of national and/or sub-national programmes developed for inclusion in educational curricula to promote gender-equitable norms, attitudes and behaviours, including targeting young women and girls, young men and boys facing multiple and intersecting forms of discrimination	Implementing RUNOs CSOs	Review of curriculum RUNO reports	UNICEF UNESCO
Output 3.2 Community advocacy platforms are established/strengthened to develop strategies and programmes,²⁴ including community dialogues, public information and advocacy campaigns, to promote gender-equitable norms, attitudes and behaviours, including in relation to women and girls' sexuality and reproduction, self-confidence and self-esteem and transforming harmful masculinities			
Country Output 3.2 Community advocacy platforms, strategies and programmes established and strengthened to promote positive gender-equitable norms, attitudes and behaviors, including in relation to women and girls' sexuality and reproduction, self-confidence and self-esteem and counter patriarchal conservative values and attitudes to end violence against women and girls			
Indicator 3.2.1 Number of women, men, girls and boys who participate in community programmes to promote gender-equitable norms, attitudes and behaviours, including in relation to women and girls' sexuality and reproduction	Implementing RUNOs Women's Rights Groups Women, men, girls and boys	RUNO reports Implementing partner reports UNFPA UNICEF	
Indicator 3.2.2 Number of people reached by campaigns and interventions transforming negative social norms and gender stereotyping that promote VAWG/HP/SGBV	Implementing RUNOs Women's Rights Groups Public	Survey Media analysis UNFPA UNICEF	
Indicator 3.2.3 Number of men and boys who	Implementing RUNOs	RUNO reports	

²⁴ Including informing parenting skills around gender socialization through early childhood development programmes



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participate in gender transformative programmes addressing violent masculinities and men's violence towards women and girls are developed in community centers, schools and other relevant spaces	Women's Rights Groups Men and boys	Implementing partner reports UNFPA UNICEF	
Indicator 3.2.4 Number of communities with advocacy platforms established and/or strengthened to promote gender-equitable norms, attitudes and behaviours, including in relation to women and girls' sexuality and reproduction	Implementing RUNOs Women's Rights Groups Community leaders	RUNO reports Implementing partner reports UNFPA UNICEF	
Indicator 3.2.6 Number of networks of men and boys developed and/or strengthened to advocate against VAWG/SGBV/HP and stand for promoting gender equitable values and behaviours, including on women and girls' SRHR	Implementing RUNOs Women's Rights Groups Male networks	RUNO reports Implementing partner reports UNFPA UNICEF	
Output 3.3 Decision makers in relevant institutions²⁵ and key informal decision makers²⁶ are better able to advocate for implementation of legislation and policies on VAWG/SGBV/HP and for gender-equitable norms, attitudes and behaviours and women and girls' rights (including SRHR) Country Output 3.3 Key decision makers in relevant non-state institutions and key informal decision-makers ²⁷ are better able to advocate for implementation of legislation and policies on VAWG/SGBV/HP and for gender-equitable norms, attitudes and behaviours and women and girls' rights (including SRHR)			
Indicator 3.3.1 Number of media outlets that develop standards on ethical and gender-sensitive reporting	Implementing RUNOs Media partners	Media analysis Survey	PMU/UNIC
Indicator 3.3.2 Number of relevant non-state institutions that have developed and/or strengthened strategies/policies on ending VAWG, including SGBV/HP and promoting gender equitable norms, attitudes and	Implementing RUNOs CSOs	RUNO reports Survey	PMU UNFPA UNDP UN Women UNESCO

²⁵ Including the media, sports, workplaces, etc.

²⁶ Will differ from region to region and includes decision makers from informal institutions, e.g. traditional, religious and community leaders

²⁷ List who they are include national religious institutions with a specific focus on male involvement and the use of media and media personalities (including community radio) who share the gender equality and zero tolerance values;



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behaviors and women and girls' rights, including those groups facing multiple and intersecting forms of discrimination, in line with international			UNICEF
Indicator 3.3.3 Number of traditional and non-traditional media stories that sensitively report on VAWG/ SGBV/HP and GEWE more broadly, including the promotion of women and girls SRHR	Implementing RUNOs Media partners	Media analysis Survey	PMU
Indicator 3.3.5 Number of key decision makers (traditional leaders, etc) in informal institutions with strengthened awareness of and capacities to advocate for implementation of legislation and policies on VAWG/SGBV/HP and for gender-equitable norms, attitudes and behaviours and women and girls' rights	Implementing RUNOs Influencers Traditional and religious leaders Media partners	RUNO reports Survey	UNICEF UNFPA PMU
Indicator 3.3.6 Number of people reached by prevention and awareness campaigns challenging social norms and gender-stereotypes related to VAWG/SGBV and HP (including HeforShe and End VAC Campaign)	Implementing RUNOs Public	Survey Online analytics	UNICEF UNFPA



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OUTCOME 4

Women and girls who experience violence and harmful practices use available, accessible, acceptable, and quality essential services including for long term recovery from violence

Contributes to:

UNDAF Outcome 1: Good Governance and Rule of Law: By 2022, Governments at all levels apply principles for good governance, equity, non-discrimination and rule of law in public service delivery and citizen engagement

UNDAF Outcome 3 Health, Nutrition & HIV/AIDS: By 2022, Nigerians, with a focus on the most disadvantaged, have access to and use quality health, nutrition and HIV services

UNDAF Outcome 6 Protection: By 2022, the national and state social protection policies are implemented and adequately financed with protection systems and services strengthened to effectively prevent and respond to violence, abuse, exploitation (including trafficking) and harmful social norms, with a focus on the most disadvantage

EU Gender Action Plan: Priority B: Physical and Psychological Integrity, Objective 7: Girls and Women free from all forms of violence against them (VAWG) both in the public and private sphere and Thematic Priority C: Economic, Social and Cultural Rights – Economic and Social Empowerment

Contributes to SDG 3, 5, and 10

Indicators	Data source	Means of verification	Responsible Org.
<i>Indicator 4.1 Proportion of women, including those facing intersecting and multiple forms of discrimination, who report experiencing physical or sexual violence who seek help, by sector²⁸</i> <i>Indicator 4.2.a Number of cases of VAWG/SGBV/HP reported to the police, b. proportions of cases reported to the police that are brought to court, c. proportions of cases reported to the police that resulted in convictions of perpetrators, all during a specific time period (e.g. past 12 months)</i> <i>Indicator 4.3 Existence of a VAWG/SGBV/HP dedicated management information system (MIS) at the national level which can measure number of women/girl victims/survivors of</i>	National Bureau of statistics National Demographic Household Survey Multiple Indicator Cluster Survey	Interviews/Reports Report Report	UNFPA UNDP UNICEF UN Women

²⁸ This indicator should be measured for women seeking services **within the past 12 months**, in order to measure progress and change over time—as lifetime prevalence of violence is not a sound measure of change over time.



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violence that have received quality, essential multi-sectoral services (Y/N)			
Global Output 4.1 Relevant government authorities and women's rights organisations at national and sub-national levels have better knowledge and capacity to deliver quality and coordinated essential services, including sexual and reproductive health services and access to justice, to women and girls' survivors of VAWG/SGBV/HP, especially those facing intersecting forms of discrimination Country Output 4.1: Relevant service providers at national and sub-national levels (health, education, police and justice, social services, child protection, specialized services structures and units as well as informal sectors including community-based institutions) have better knowledge and capacity to deliver quality and coordinated essential services, including sexual and reproductive health services and access to justice, to women and girls' survivors of VAWG/SGBV/HP, especially those facing intersecting forms of discrimination			
Indicator 4.1.2 Number of women and girls with access to programmes developed to integrated VAWG, including SGBV/HP, response to SRH and education services	Implementing RUNOs MDAs CSOs	RUNO reports Implementing partner reports UNFPA UNDP UNICEF UN Women	
Indicator 4.1.3 Existence of developed and/or strengthened national and sub-national guidelines or protocols in line with the guidance and tools for essential services	Implementing RUNOs MDAs	RUNO reports Implementing partner reports UNFPA UNDP UNICEF UN Women	
Indicator 4.1.4 Number of government service providers who have increased knowledge and capacities to deliver quality and coordinated essential services to women and girls' victims/survivors of VAWG including SGBV/HP	Implementing RUNOs Women's Rights Groups	RUNO reports Implementing partner reports Capacity assessments UNFPA UNDP UNICEF UN Women UNESCO	
Indicator 4.1.5 Number of informal sectors	Implementing RUNOs	RUNO reports	



including women's rights organizations and community-based institutions ²⁹ who have increased knowledge and capacities to deliver quality and coordinated essential services to women and girls' victims/survivors of VAWG including SGBV/HP	Women's Rights Groups	Implementing partner reports Capacity assessments UNFPA UNDP UNICEF UN Women UNESCO	
Indicator 4.1.6 Number of government service providers who have increased knowledge and capacities to better integrate VAWG including SGBV/HP response into SRH health, education and human rights services	Implementing RUNOs MDAs Women's Rights Groups	RUNO reports Implementing partner reports Survey UNFPA UNDP UNICEF UN Women UNESCO	
Indicator 4.1.7 Number of women's and girls' rights organisations ³⁰ who have increased knowledge and capacities to better integrate VAWG including SGBV/HP response into SRH, education and human rights services	Implementing RUNOs MDAs Women's Rights Groups Community networks	RUNO reports Implementing partner reports Survey UNICEF UNFPA UN Women	
Indicator 4.1.8 Number of local networks established among authorities and communities to prevent and respond to VAWG including SGBV/HP that include adequate representation of women and girls facing multiple and intersecting forms of discrimination	Implementing RUNOs MDAs Women's Rights Groups Community networks	RUNO reports Implementing partner reports Survey UNFPA	
Indicator 4.1.9 Existence of developed and/or strengthened national guidelines or protocols for essential services that specifically address the needs of women and girls facing multiple and intersecting forms of discrimination	Implementing RUNOs Implementing partners (CSOs)	RUNO reports Implementing partner reports	UNICEF UNFPA UN Women

²⁹ Including those representing groups facing multiple and intersecting forms of discrimination

³⁰ Including those representing groups facing multiple and intersecting forms of discrimination



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Global Output 4.2 Women and girls' survivors of VAWG/SGBV/HP and their families are informed of and can access quality essential services,³¹ including longer term recovery services and opportunities			
Country Output 4.2: Women and girls' survivors of VAWG/SGBV/HP, including specific groups of women exposed to intersecting forms of discrimination, and their families are informed of and can access quality essential services including longer-term recovery services and opportunities			
Indicator 4.2.1 Number of women and girls' survivors of VAWG/SGBV/HP that have increased knowledge of and access to quality essential services ³²	Implementing RUNOs Women and girl survivors CSOs	Survey RUNO reports CSO reports	UNFPA UNICEF
Indicator 4.2.2 Number of women and girls' survivors/victims and their families, including groups facing multiple and intersecting forms or discrimination, that have increased knowledge of and access to accompaniment/support initiatives, including longer-term recovery services	Implementing RUNOs Women's Rights Groups	Survey RUNO reports CSO reports	UNFPA UNDP UNICEF UN Women
Indicator 4.2.3 Number of strategies for increasing knowledge of and access to services for women and girls, including groups facing multiple and intersecting forms of discrimination	Implementing RUNOs Women's Rights Groups	Survey RUNO reports CSO reports	UNFPA UNDP UNICEF UN Women
Indicator 4.2.4 Number of women and girls, especially for those furthest behind including people with disabilities, HIV/AIDS, women-headed households and girls without parental care, with access to life skills training and livelihood opportunities who report enhanced self-reliance and confidence	Implementing RUNOs CSOs Young women and girls	RUNO reports Implementing partners	UNFPA UNICEF



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OUTCOME 5

Quality, disaggregated and globally comparable data on different forms of violence against women and girls and harmful practices, collected, analysed and used in line with international standards to inform laws, policies and programmes

UNDAF Outcome 8 Population Dynamics: By 2022, Nigeria's population dynamics becomes a strong basis for national development and resource management through better use of demographic intelligence

EU Gender Action Plan: Priority B: Physical and Psychological Integrity, Objective 7: Girls and Women free from all forms of violence against them (VAWG) both in the public and private sphere

Contributes to SDG 4, 5, 10, 16 and 17

Indicators	Data source	Means of verification	Responsible Org.
Indicator 5.1 Existence of globally comparable data on the prevalence (and incidence, where appropriate) of VAWG/SGBV/HP, collected over time	National Bureau of Statistics	Report, Online statistics	UNFPA UNDP UNICEF
Indicator 5.2 Existence of publicly available data, reported on a regular basis, on various forms of VAWG/SGBV/HP at the country level (Y/N)	National Demographic Household Survey	Report	
Indicator 5.3 Existence of national statistics related to VAWG, including SGBV/HP, incidence and prevalence are disaggregated by income, sex, age, disability, and geographic location	Multiple Indicator Cluster Survey	Report	

Global Output 5.1 Key partners, including relevant statistical officers, service providers in the different branches of government³³ and women's rights advocates have strengthened capacities to regularly collect data related to VAWG, including SGBV/HP, in line with international and regional standards to inform laws, policies and programmes

Country Output 5.1 Key partners at national and sub-national level, including relevant statistical officers, service providers in the different branches of government³⁴, civil society and women's rights advocates have strengthened capacities to regularly collect data related to VAWG/SGBV/HP in line with

³³ Statistics offices, justice, security and health sector

³⁴ Statistics offices, justice, security and health sector



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international and regional standards to inform laws, policies and programmes			
Indicator 5.1.1 Number of National Statistical Offices that have developed/adapted and contextualized methods and standards at national level to produce prevalence and/or incidence data on VAWG, including SGBV/HP	National and Sub-National Bureau of Statistics	Report; Online statistics	UNDP
Indicator 5.1.2 Percentage of targeted states with a system to collect administrative data on VAWG, including SGBV/HP, in line with international standards, across different sectors	National Bureau of Statistics	Report Online statistics (NBS)	UNDP UNFPA
Indicator 5.1.3 Number of National Statistical Officers who have enhanced capacities to produce data on the prevalence of VAWG, including SGBV/HP, and incidence where appropriate	National Bureau of Statistics	Report Online statistics (NBS)	UNDP UNFPA
Indicator 5.1.4 Number of government personnel, including service providers, from different sectors who have enhanced capacities to collect prevalence and/or incidence data, including qualitative data, on VAWG including SGBV/HP in line with international and regional standards	Implementing RUNOs CSOs	RUNO Reports	UNDP UNFPA UNICEF
Indicator 5.1.5 Number of women's rights advocates with strengthened capacities to collect prevalence and/or incidence data, including qualitative data, on VAWG including SGBV/HP in line with international and regional standards	Implementing RUNOs CSOs	RUNO Reports	UN Women
Global Output 5.2 Quality prevalence and/or incidence data on VAWG, including SGBV/HP, is analysed and made publicly available for the monitoring and reporting of the SDG target 5.2 indicators to inform evidence-based decision making			
Output 5.2 Quality prevalence and/or incidence data on VAWG/SGBV/HP is analysed and made publicly available for the monitoring and reporting of the SDG target 5.2 indicators to inform evidence-based national decision-making processes, advocacy and programming			
Indicator 5.2.1 Number of knowledge products developed and disseminated to the relevant	Implementing RUNOs	Published Pieces RUNO Reports	UNDP UNFPA



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stakeholders to inform evidence-based decision making	CSOs		UNICEF UNESCO UN Women
Indicator 5.2.2 Number of pieces of peer-reviewed qualitative research published	Implementing RUNOs CSOs	Published Pieces RUNO Reports Implementing partner reports	UNDP UNFPA UNICEF
Indicator 5.2.3 Number of government personnel, including service providers, from different sectors with strengthened capacities on analysis, dissemination and use of prevalence and/or incidence data on VAWG, including SGBV/HP	Implementing RUNOs MDAs	RUNO Reports Capacity assessment	UNDP UNFPA
Indicator 5.2.4 Number of women's rights advocates with strengthened capacities on analysis, dissemination and use of prevalence and/or incidence data on VAWG including SGBV/HP	Implementing RUNOs CSOs	RUNO Reports Capacity assessment Implementing partner reports	UNDP UNFPA

Women's rights groups, autonomous social movements and CSOs, including those representing youth and those facing multiple and intersecting forms of discrimination/marginalization, more effectively influence and advance progress on GEWE and VAWG, including SGBV/HP

EU Gender Action Plan: Priority B: Physical and Psychological Integrity, Objective 7: Girls and Women free from all forms of violence against them (VAWG) both in the public and private sphere
Contributes to SDG 5, 10, 16 and 17

Indicators	Data source	Means of verification	Responsible Org.
Indicator 6.1 Degree to which women's rights organizations, autonomous social movements and relevant civil society organizations, ³⁵ increase their coordinated efforts to jointly advocate on VAWG/SGBV/HP/SRHR	Implementing RUNOs CSOs	Assessment report	UN Women
Indicator 6.2 Degree to which there is an increased use of social accountability mechanisms by civil society in order to monitor and engage in ending VAWG/SGBV/HP efforts and promoting women and girls' SRHR	Implementing RUNOs CSOs	Assessment report	
Indicator 6.3 Proportion of women's rights organizations, autonomous social movements and civil society organizations, including those representing youth and groups facing intersecting forms of discrimination/marginalization, report having greater influence and agency to work on VAWG/SGBV/HP/SRHR	Implementing RUNOs CSOs	Assessment report	

³⁵ Including those representing youth and groups facing intersecting forms of discrimination/marginalization



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Global Output 6.1: Women's rights groups and relevant CSOs,³⁶ have increased opportunities and support to share knowledge, network, partner and jointly advocate for GEWE and ending VAWG, including SGBV/HP, and promoting SRHR, with relevant stakeholders at sub-national, national, regional and global levels			
Country Output 6.1 Women's rights groups and relevant civil society organizations, ³⁷ have strengthened leadership and voice, increased opportunities and support to share knowledge (including inter-generational learning), network, partner, establish multi-stakeholder dialogues and jointly advocate for GEWE and VAWG/SGBV/HP/SRHR, more specifically, with relevant stakeholders at sub-national, national, regional and global levels			
Indicator 6.1.1 Number of jointly agreed recommendations produced as a result of multi-stakeholder dialogues that include representatives of groups facing multiple and intersecting forms of discrimination	Implementing RUNOs CSOs	Key activity Report/communicate	UN Women
Indicator 6.1.2 Number of official dialogues with relevant government authorities and formal and informal decision-makers, with the meaningful participation of women's rights groups and relevant civil society organizations, including representatives of groups facing multiple and intersecting forms of discrimination	Implementing RUNOs CSOs	Advocacy/Consultation Report	PMU UN Women UNDP
Indicator 6.1.3 Number of women's and girls' rights groups and CSOs (working on ending VAWG/SGBV/HP and on the promotion of women and girls' SRHR) representing youth and other groups facing multiple and intersecting forms of discrimination that are integrated with coalitions and networks of women's rights groups and civil society and benefit from inter-generational exchanges	Implementing RUNOs CSOs	RUNO reports	UN Women
Indicator 6.1.4 Number of women's and girls' rights groups, networks and relevant CSOs with	Implementing RUNOs	Assessment Report RUNO reports	UN Women

³⁶ Including those representing youth and groups facing multiple and intersecting forms of discrimination/marginalization

³⁷ Including those representing youth and groups facing intersecting forms of discrimination/marginalization



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strengthened capacities to network, partner and jointly advocate for progress on ending VAWG/SGBV/HP and on the promotion of women and girls' SRHR at local, national, regional and global levels	CSOs		
Global Output 6.2 Women's rights groups and relevant CSOs are better supported to use social accountability mechanisms to support their advocacy and influence on prevention and response to VAWG, including SGBV/HP, and GEWE more broadly			
Country Output 6.2: Women's and girls' rights groups and relevant CSOs are better supported to use social accountability mechanisms and more innovative tools and approaches to support their advocacy and influence on prevention and response to VAWG, including SGBV/HP, and GEWE more broadly			
Indicator 6.2.1 Number of supported women's and girls' rights groups and relevant CSOs using the appropriate accountability mechanisms ³⁸ for advocacy	Implementing RUNOs CSOs	Assessment Report RUNO reports	UN Women
Global Output 6.3 Women's rights groups and relevant civil society organizations organisations, including those representing groups facing intersecting forms of discrimination/marginalisation, have strengthened capacities and support to design, implement and monitor their own programmes on VAWG/SGBV/HP and promoting women and girls' SRHR			
Country Output 6.3 Women's and girls' rights groups and relevant civil society organizations organisations, including those representing groups facing intersecting forms of discrimination/marginalisation, have strengthened organizational and technical capacities and support to design, implement and monitor their own programmes (including on male engagement) ³⁹ ; on VAWG/SGBV/HP and promoting women and girls' SRHR			
Indicator 6.3.1 Number of women's rights groups and relevant civil society organizations representing groups, including those facing intersecting forms of discrimination/ marginalization, that have strengthened capacities and support to design, implement, monitor and evaluate their own programmes on VAWG/SGBV/HP (<i>disaggregated by type of work</i>)	Implementing RUNOs CSOs	Assessment Report RUNO reports	UN Women
Indicator 6.3.2 Number of women's rights groups and relevant CSOs using knowledge products developed by the participating UN agencies in the	Implementing RUNOs CSOs	Assessment Report RUNO reports	UN Women

³⁸ E.g. the CEDAW, UPR shadow reports, and social accountability mechanisms such as social audits, citizen report cards, etc.

³⁹ This has been identified as a key gap by the CSOs during the CPO consultations.



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design of their own programmes on VAWG/SGBV/HP			
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TABLE 2 – PROGRAMME RISK MANAGEMENT MATRIX

Risks	Risk Level: Very high High Medium Low (Likelihood x Impact)	Likelihood: Almost Certain – 5 Likely – 4 Possible – 3 Unlikely – 2 Rare – 1	Impact: Extreme – 5 Major – 4 Moderate – 3 Minor – 2 Insignificant – 1	Mitigating measures	Responsible Unit/Person
Contextual risks					
Inadequate policy/legal framework	Medium	Unlikely	Moderate	Strengthening national mechanisms to enhance implementation of normative frameworks Work with civil society, support actors in the development/review of national legislation on SGBV/HP National plans replicated at local level Enhance the legitimacy of the national laws based on dialogue between the formal and customary law officials as well as a comprehensive approach to understanding complex social rule	UNDP UNDP, UNICEF, UN Women, UNFPA and UNESCO



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Limited national/state ownership	Medium	Possible	Major	Anchoring the initiative at the highest-level of the Government Involving Government partners at strategic and technical level from the onset Ensure that there is a clear understanding of what this programme wants to achieve in complementarity to other actions and its added value Signing of a political compact which outlines 5-10 key commitments	UN RC/HC and Head of EU Delegation UN RC/HC and Head of EU Delegation, UN Programme Management Unit and EU Programme Team Programme Management Unit UN RC/HC and EU Head of Delegation
Weak infrastructure and limited access to villages and grass-root level	High	Possible	Moderate	Identify prospective, hard-to-reach populations from the outset, and strategize with local stakeholders to ensure needs and barriers are addressed, with considerations built into country programme design	Gender Theme Group and RCO
Political changes in relation to the upcoming election in 2019 could jeopardize political commitment and policy focus on VAWG	Very high	Likely	Major	Close and regular political contacts with governments to ensure continuity of programmes despite change of administration and/or transfer of staff Monitoring of political situation Increase policy dialogue on gender issues Advocate with government actors beyond the gender apparatuses, and other sectors	Programme Management Unit EU and RCO (supported by PDA) UN RC/HC, UN Women UNDP, UN Women, UNICEF, UNFPA and UNESCO
Resistance from family, community, traditional and religious leaders	Low	Possible	Moderate	Strong engagement of men especially from family, community elders, traditional and religious leaders Sensitization and empowerment of women, traditional and political leaders to understand, mobilize against, and stop HPS, such as FGM and Child Marriage	UNDP, UN Women, UNICEF, UNFPA and UNESCO



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				Target advocacy of key stakeholders	Programme Management Unit
Culture of Silence	High	Likely	Major	Community Engagement on available prevention and response mechanism.	UNDP, UN Women, UNICEF, UNFPA and UNESCO
Victim blaming	Medium	Possible	Moderate	Community Engagement on available prevention and response mechanism.	UNDP, UN Women, UNICEF, UNFPA and UNESCO
Anti-rights environment	High	Possible	Moderate	Continue to support, through campaigns, education, and capacity development of rights holders and civil society, efforts to hold duty-bearers accountable Ensure engagement with key sectors such as education, parental, and community elders to focus on strategies that educate on human rights, gender equality, etc....for young people and adolescents	UNDP, UN Women, UNICEF, UNFPA and UNESCO
Conflict and fragility	Medium	Possible	Major	Relocation of the Initiative in case of conflict or crisis Selection of states includes criteria on stability	RCO (with support of the Peace and Development Advisor)
Programmatic risks					
National partners have limited capacities to apply knowledge	Medium	Possible	Moderate	Develop accompanying capacity development strategies through dialogue and advocacy and include the direct participation of civil society and all national partners	UN Women
Fund allocation not aligned to strategic objectives and/or poorly prioritized fund allocations	Low	Unlikely	Minor	Engage with Government and draft Political Compact, ensuring that programme allocations are fully aligned to strategic objectives	UN RC/HC and EU Head of Delegation
Funds are not expended at optimal level due to limitations and bottlenecks in absorption capacity at	Low	Unlikely	Minor	Engage with partners on a designated periodicity to monitor implementation Adjust programmatic approach as needed	Programme Management Unit



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national level					
Country Programme is not fully funded to achieve all deliverables due to the lack of required resources (resources additional to the EU envelope)	Medium	Possible	Moderate	Resource mobilization strategy to attract country-level resources developed and implemented The UN Resident Coordinator work with the Development Partners to mobilize additional resources, including government cost sharing	UN RC/HC and Programme Management Unit
Funding and services not available after Initiative ends due to lack of resources	High	Possible	Major	In collaboration with government, develop a feasible financing strategy with conditions that secure a financial sustainability plan from the outset – ensuring ownership through civil society's engagement Involve Ministry of Budget and National Planning as well as State level equivalents from the outset, to create space for permanent government support and action	UN RC/HC and EU Head of Delegation
Acquired capacity and knowledge by various stakeholders through the Initiative (government, civil society, etc.) not translated in transformative action	Medium	Unlikely	Major	Undertake assessment to understand why knowledge is not translated into action and work closely with national stakeholders to address issues Address potential barriers to transformative action Prepare action plan	UNDP, UNICEF, UN Women, UNFPA and UNESCO
Low retention rates by various actors who have received capacity building support	Medium	Likely	Moderate	Ensure ToT Knowledge management Sharing lessons learned Signing MoU/Letter of commitment with Government on retention Strengthening succession plan of relevant government agencies	UNDP, UNICEF, UN Women, UNFPA and UNESCO
General lack of access to modern technologies to reduce the scope for information sharing including data availability	Medium	Unlikely	Moderate	Discuss all possible options with government authorities from the programme outset to ensure alternative data collection and dissemination in case technologies are unavailable, and	UNDP



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and use				forecast these needs from the start to try to acquire needed technologies from the outset	
Lack of disaggregated data for girls 10-15 years	Medium	Possible	Moderate	Advocate for the review and inclusion of data related to girls 10-15 in the NHMIS.	UNFPA
Lack of technical and financial resources including to improve service delivery	Medium	Unlikely	Major	Diversify funding sources to fill cost gaps; ensure financing and sustainability strategy from the outset	Programme Management Unit
The use of new data (big and open) and new technologies could potentially harm individuals	Medium	Unlikely	Major	Use existing risk assessment tools for innovation such as the UN Global Pulse Data Innovation Assessment Tool (including checklists) Build capacity of partners on ethical guidelines for data innovation	Programme Management Unit
The SI programme system is not risk adverse enough to allow for innovation due to the low-risk culture and avoidance on failure	Medium	Possible	Major	Sensitization on the need for risk adverse programming to be able to pilot innovative approaches and tools	Programme Management Unit
Institutional risks					
Weakened civil society	Medium	Possible	Major	Strengthen support to local women and grassroots organizations and relevant regional and national women's organizations, to strengthen prevention Support a diverse group of CSOs representing groups facing multiple and intersecting forms of violence and discrimination	UN Women
Fiscal space and austerity policies	High	Possible	Moderate	Develop public/private strategies to address ending VAWG Apply methodologies for financing gender equality and gender budgeting Support strong costing methodologies for SGBV/HP work, including to make the case for investment on gender equality and addressing SGBV/HP and SRHR	UNDP, UN Women



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Limited availability of data and limited capacities of state institutions to develop and analyse data	Medium	Possible	Moderate	Adopt common classifications and indicators to enable cross references; Roll out capacity development for authorities Build on existing data systems (GBVIMS/EMISCPIMS) to collect data on violence	UNDP, UNICEF, UN Women, UNFPA and UNESCO
The high turnover of official in Government may delay implementation of the Initiative	Medium	Possible	Moderate	Work with various levels of government to mitigate risks Create technical working group for the project to ensure continuity of programme objectives despite change of staff and/or government A close policy dialogue at national levels Reinforce women's machineries and work with CSOs as watchdogs	Programme Management Unit Gender Theme Group UNDP, UNICEF, UN Women, UNFPA and UNESCO
Weak, fragmented and low capacity of institutions	High	Possible	Medium	Creation of capacity enhancement strategies, ad hoc and more agile and effective coordination mechanisms to prioritize and accelerate actions Continued policy dialogue and advocacy with key institutions in government Strengthen institutions' capacities to ensure law enforcement and fight against impunity Enhance dialogue and cooperation between the legal system and duty bearers at the community level	UN Women and UNDP UNDP, UNICEF, UN Women, UNFPA and UNESCO UNDP UNDP
Fiduciary risks					
Disbursements or resources to small stakeholders (CSOs) and national implementing	Low	Unlikely	Major	Channel funding to national institutions through UN agency systems for partnerships and capacity-building	UN Women



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partners have the potential to provide incentives for diversionary activities					
Contracting Implementing partners with weak /compromised accounting system.	High	Likely	Major	Conduct a comprehensive micro-assessment that will reveal the systemic strengths and weakness of IPs before they are engaged	Programme Management Unit
Assumptions: No major change in the political situation in the region will affect implementation of the Spotlight Initiative The SI has significant political and administrative support which facilitates the involvement and commitment of Government despite turnover of officials There is significant national commitment and dedication of domestic resources to ensure sustainability of the programme and overall efforts The violence against persons and prohibition act will be domesticated and enforced in the selected states, to ensure a holistic response. Community unrest and the security challenges in the Northern Nigeria will minimal to allow for smooth implementation of planned activities.					

TABLE 3: BUDGETS – see excel document attached.

Table 3 A – WORK PLAN

Table 3 B – BUDGET BY UNDG CATEGORY

Table 3 C – BUDGET BY OUTCOME

Table 3 D – ADVANCE PRE-FUNDING

ANNEX 1: Multi-stakeholder engagement in the Country Programme development process

For engagements during the Country Programme Outline process, please refer to the **Country Programme Outline Process report**.

Consultation 1: Consultative meetings with EU

Key recommendations:

A number of information sharing and planning bilateral meetings have taken place (4 June, 2 July, 16 July). The key aim of these meetings were to ensure that the EU engaged and in the loop regarding key events in the road map and calendar. These meetings were also essential to plan for high-level Government engagements. Key decisions taken included:

- For the EU to meet with **Spotlight Secretariat Mission** from New York 16 – 18 July
- For the EU to participate **the Multi-Stakeholder Design workshop** on 19-20 July:
- EU to explore possibility of joining regional engagement
- EU to join writing workshop in Abuja (first week of August)
- Regarding the **high-level Government engagement**, a joint letter will be sent from the UN Resident Coordinator & EU Ambassador to the presidency.

Key points raised by the EU Ambassador includes:

The large allocation to Nigeria reflects the importance of the country. It is a very important country to work in, considering the great challenges Nigeria is facing.

In Nigeria, it can be challenging to engage on these issues. However, the high-level political level engagement is important, and ensuring that there is accountability and that officials are not only paying lip service. As the EU, they are trying to engage as much as possible even though it can be challenging and furthermore, political accessibility can be difficult. It is also necessary to consider what types of messages that should be sent to Government.

Ensuring Government buy-in and coordination is another challenge which needs to be overcome. However, for future sustainability, this national

ownership is essential.

There is a need to remain focused in key selected areas and to not spread ourselves too thin. It is therefore important to select areas of work and geographical area with caution.

Key Focal Points at the EU Delegation are:

Ketil Karlsen, Head of EU Delegation

Kurt Cornelis, Head of International Development

Isabel Candela, Head of Section

Laolu Olawumi, Programme Manager

Consultation 2: Consultative meetings with Civil Society Interim Group

Key recommendations:

It is crucial to focus interventions beyond North-East Nigeria. The international community are currently focusing a lot on this area and little is done in other areas.

Innovation is important but as it is linked to tech, it is vital to also make consideration on protection to make sure that ethics are not compromised.

Legal frameworks are a key element in Nigeria to be addressed by the SI. There are a number of international policies against GBV including a VAPP bill but interventions are needed to ensure that these are evaluated (how effective are they and to what extent are they being implemented) as well as domesticated across the country. CSOs suggested that it is possible to push the limits of these existing laws, as was recently shown with a case where a student raised a case against a University lecturer.

It was also said to make better use of existing institutions, such as the Human rights commission – which could, for example, put in place a special rapporteur on GBV.

Several partners underlined the importance of supporting and upscaling interventions that work – that also includes replicating from North to South as well as expanding interventions that are working. There are many good initiatives in Lagos that could be looked at.

Another key element is to ensure that response services for victims exist and are of good standard and that first responders are better equipped and know what to do.

Currently, SRHR conversations are silent and need to be moved to a space where they are heard. It is also important that these issues are not regarded as family matters but are taken out to an open space. Social media could be a key tool for this.

We must go beyond standard M&E and have a more reactive report system. Accountability needs to be better linked to data.

Interventions for boys and men should be considered.

Ensuring alignment with donors and SDG interventions is important and a number of good examples were mentioned (Gender Hub, Sexual harassment hub). It is however crucial that sustainability is considered from the outset.

Name of organisation/agency	Name and title of representative	Area of focus of work (and specific area of expertise)	Type of organisation (CSO, gvt, EU, academia)	Dates of consult.
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Fame Foundation	Aderonke Bello	Prevention, Services (VAWG)	Civil Society	18 July
Fame Foundation	Amaerohule Sharon	Prevention, Services (VAWG)	Civil Society	18 July
Centre for Social Justice	Fidelis Onyejegby	Legal, Policies (VAWG)	Civil Society	18 July
Centre for Social Justice	Eze Onyekpere	Legal, Policies (VAWG)	Civil Society	18 July
Education as a Vaccine	Olabukunola Williams	Prevention, Services (VAWG, CM)	Civil Society	18 July
Girl Power Initiative	Loretta Enof-Laurel	Prevention (VAWG, CM)	Civil Society	18 July
Oxfam	Chioma Ukwuagu	Prevention, Services, Institutions (VAWG, CM)	Civil Society	18 July
SOAR	Chinuere Eyoh	Prevention, Services, Institutions (VAWG, CM)	Civil Society	18 July
NACCRAN	Betty Olatunde	Legal, Prevention, Services, Institutions (VAWG, CM, Child Rights)	Civil Society	18 July
PRO	Dura Irimiya Danjuma	Prevention, Services, Institutions	Civil Society	18 July
NACCRAN	Adediran Adelumle	Legal, Prevention, Services, Institutions (VAWG, HP)	Civil Society	18 July
Girls Voices Initiative	Carolyn Seaman	Prevention (VAWG)	Civil Society	18 July
CSACEFA	Adeleke Damian-Mary	Policies, Prevention, Services (VAWG)	Civil Society	18 July
SFH	Omoregia Godpower	Prevention, Services (SRHR, FGM)	Civil Society	18 July
SFH	Oye Tomori-Adelaye	Prevention, Services (SRHR, FGM)	Civil Society	18 July
Population Council	George Eluwa	Data (Key Affected Populations)	Civil Society	18 July
JOWAPWD	Ekaete Judith Umoh	Prevention, Services, Institutions (Disabled)	Civil Society	18 July

Consultation 3: Multi-stakeholder Programme Design Workshop in Abuja, 30-31 August (some 60 participants from EU, UN, Government and CSOs. Attendance list is a separate document.

Key recommendations:



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CSO and movement for greater impact

Funding, capacity building. Training in project management, fin management and M&E
Media and community advocacy
Evolve strategy that promotes systems and structure
Convene around common issues
Build strategy and structure for coalition

Prevention

Advocacy and sensitization
Involve traditional leaders and men to value place of the girl child.
One stop centre including use of women development centre
Toll free response line
Knowledge management products
Monitoring hard to reach areas

Early child marriage

Advocacy and sensitization to age groups, husbands, Traditional leaders
Using social media, town announcer, whatsapp. Using high profile personalities
Access to good healthcare. Family planning and child spacing
Empower care givers with Micro-finance, skills and conditional cash transfer
Female empowerment programme to address life skills of SRHR
Back to school skills
Awareness creation among stakeholders on how to report.
Providing structures to better report survivors

Capacity building for service providers

Access to services for survivors
Capacity strengthening, Improve social worker skills, access to referral guidelines
Emergency response fund
Create a platform where GBV providers can have materials, tool kits to work with service providers.
Work around awareness creation. Empower CSOs to mobilise and sensitize communities. Psychosocial support.
Speedline and referral, report, psychosocial support
One stop call centre

Create Awareness

Have good communications strategy.
Ensure factual content, using local language and dialect to create the content and involving case studies of the survivors.
Use of traditional, social media, community radio, word of mouth, community announcer, songs, poems, art and traditional folklore, drama.
Celebrities, sports football, Nollywood, song, flash mobs, road show,



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Training of stakeholders-youth, leaders, media practitioners, social media influencers, brand influencers
Traditional leaders become champions against HTP, use of local language, folklore, start with immediate family, a compendium of champion
traditional leaders, council of traditional leaders

Consultation 4: Youth Consultation – Lagos, 2 August 2018

Key issues and recommendations:

CONCERNS; what are the key concerns regarding ending GBV, HP and SRHR

Those in the rural areas and the grassroots level are the less reached, while they are the most vulnerable and in need of prevention, services and interventions

Culture and religion support GBV in marriages under the disguise of women submitting to their husbands and women learning through the violence/abuse.

None access to education or denial of it for girls with the conclusion that she will end up in a man's house.

Security for the protection of the service providers in the field

There is no adequate and proper definition of violence and abuse which at times makes it difficult if it is happening to a woman/girl to identify, the role of women and girl in the society not identified beyond cleaning and cooking.

Stigma and confidentiality make reporting challenging for survivors.

People with disabilities are only involved on the surface, they have limited access to appropriate information.

How does the law protect the LGBT and sex workers?

RECOMMENDATIONS:

Men and boy's involvements so that they would be the protector of women and not the perpetrator.

Engagement of the entertainment industry, this has the potential carrying the messages farther and wider considering these celebrities are highly influential.

Engagement of private sectors who has their language and policy that protects against GBV

Tax break for organizations that can carry on their brands messages on GBV, HP and SRH

Anonymous boxes for reporting

Media engagement on appropriate reportage.

Make abortion safe.

Possible hubs in LGA's to collect data, a quality data to push for policies and laws.

	Name of representative	Organization	Phone number
1	Elizabeth Williams	YPP	08174569801
2	Taiwo Oluwafunmilayo	UYPP	08150767612
3	Alesinloye-King Oluwapelumi	Ouiwee	08171920009
4	Oyeleke Olayinka O.	Lagos State youth Parliament	08167380373



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5	Michael Oluwaseun Bunmi Dare	Youth Officer/Hello Lagos (YEDI)	08026284819
6	Benjamin Odey	DBI	09056165514
7	Audu Faith Owofuni	Teenage Zone	09094823291
8	Babamole Ramon Olanrewaju	NYNETHA	08020538677
9	Okotie Sharon Ejio	Hope inspire Foundation for women and Youth Nigerian Association for the blind	08036893007
10	Lana Promise	YPP	07063715004
11	Okpalanedu Ikedi	YPP	07018058921
12	Oladimeji Ibrahim	YPP	08025631634
13	Blessing Ashi	YPP	08103195037
14	Ochiche Joy	YPP	09082951999
15	Chukwurenye Rita Isioma	YPP	07069572635

Consultation 5: Multi-stakeholder workshop, Lagos 3 August 2018

Key recommendations:

Mapping of women's groups

Directory and repository of CSOs providing services, CSO mapping for the purpose of referral- counselling, services Compendium / narrative

Establish what GBV looks like, identify drivers of GBV

GBV awareness, engagement and education, Media, (traditional and social)

Social norms change

Enabling environment for comprehensive sexuality education

Groups to Converge and convene

Involvement of men- Inclusion of champions and influencers, goodwill ambassadors, celebrities, artists,

Inclusion of survivors building in anonymity

Community dialogues at different strata, Local Language community informants, scouts

Partnerships and alliances

Economic Empowerment

Legal and policy and framework generation with amendment of laws and punitive measures

Harmonization of data tools

Inclusion of GBV on NHMIS

Medical and psychosocial support

Shelters – special needs

Policing sector HR desk in each police station



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Mobile courts
Executive order on child protection

Name of Organization	Name of representative	Type of organisation (civil society organisation, government, EU delegation, academia,	Date of consultation
Cece Yara Child Advocacy Centre	Grace Ketefe	CSO (VAWG, Advocacy, Child Rights)	3 August
Grace Springs Rehabilitation Home	Kingsley Kale	CSO (VAWG, Services)	3 August
Royal Women Health And Rights Initiative	Ese Blessing Awhatorhe	CSO (VAWG, Services)	3 August
One African Child	Victoria Ibiwoye	Grassroot CSO (VAWG, Child Rights)	3 August
Centre for Women's Health Initiative	Tolulope Aderibigbe	CSO (SRHR)	3 August
Human Support Services	Nwahiri Uchedu	Grassroot CSO (Policies, Marginalized populations)	3 August
Grace Springs Rehabilitation Home	Omolara Olawoyin	CSO (VAWG, SRHR)	3 August
LASUTH (Lagos State University of Technology)	Tonolu Femi-Adebayo	Academia	3 August
Action Health Incorporated	Fransesca Adeola Olusola	CSO (SRHR)	3 August
Centre for Health Ethics, Law and Development	Okonkoh Amarachi	CSO (Legal, Policies, Data)	3 August
Young Mothers Empowerment Network	Ayenuro Taiwo	CSO (Prevention, Services)	3 August
Rosie's Empowerment Consult	Echewe Rosemary	CSO (prevention)	3 August
Partnership for Justice	Ito Eze-Anaba	CSO (Legal, Policies)	3 August
Any Work Man Limited	Oyugboiku Joy	Grassroot CSO (Prevention)	3 August
Human Support Services	Nwahiri Chinyere Joy	Grassroot CSO (Policies, Marginalized populations)	3 August
ActionAid Nigeria	Stephen Obinwa	CSO (VAWG)	3 August
College of Medicine Lagos	Dr Sekoni A.O.	Academia (SRHR)	3 August
Women Radio 917	Toun Okewale Sonanya	Media	3 August
Ministry of youth and social development	Peter-Popoola Funmilola Olanike	Government (Gender)	3 August
Ministry of Economic Planning and Budget	Braimoh Adenike A.	Government (Gender)	3 August



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Population Council	George Eluwa	CSO (Key Affected Populations)	3 August
Centre for Health Ethics, Law and Development	Dibia Chioma	CSO (Legal, Policies)	3 August
Police Action Committee on AIDS	DSP Nnam Christian	CSO (Services, Marginalized population)	3 August
Action Health Incorporated	Adenike Esiet	CSO (Services, SRHR)	3 August
Women at Risk International Foundation (WARIF)	Anthonia Emetarom	CSO (Prevention)	3 August
Association of Women Living with HIV/AIDS	Victoria Mbah	CSO (Services)	3 August
Association of Women Living with HIV/AIDS	Jessica Osuh	CSO (Services)	3 August
Ministry of Economic Planning and Budget	Bankole O.A.	Government (Gender/VAWG)	3 August
Human Support Services	Ufon Udofia	Grassroot CSO (Policies)	3 August
NAPTIP	Comfort Sanni	Government (trafficking)	3 August
The Women's Helping Hand Initiative	Omowumi Omotayo	CSO (Services)	3 August
Lagos State Government Ministry of Health	Adeola Birch	Government (Gender/VAWG/Services)	3 August
Ministry of youth and social development	Sunmbo Daniel	Government (Gender/VAWG)	3 August
Nigerian Institute of Medical Research	Odubela Oluwatosin	CSO (SRHR)	3 August
One African Child	Lawal S. Demilade	CSO (Prevention, Child Rights)	3 August
Tosin Twins Trash to Treasure	Elizabeth O Bernard-Sowho	CSO (HP)	3 August
The Legal Aid Council	Ochubili Adaora Chioma	CSO (Legal, Policies)	3 August
Stand to End Rape Initiative (STER)	Wuraola Abulatan	CSO (Prevention, Services)	3 August
Legal Aid Council of Nigeria	Doris Ememonu	CSO (Legal, Policies)	3 August
Lagos State Domestic and Sexual Violence Response Team	Orekuja Bunmi	Government (VAWG/Services)	3 August
Ministry of Economic Planning and Budget	Oludere Temitope O.	Government (Gender)	3 August
Ministry of Women Affairs and Poverty Alleviation (WAPA)	Onupede Adesola A.	Government (Gender)	3 August
Ministry of youth and social development	Aladelusi Modupe O	Government (Gender)	3 August
National Council for Women Society	Chief (Mrs) M.A. Arioye	CSO (Policies, Gender)	3 August
Leading Edge Solicitors and Notary Public	Obiamaka Aga	CSO (Policies, Legal)	3 August
Human Support Services	Chiamaka Nsoedo	Grassroot CSO (Policies)	3 August



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Women Advocates, Research and Documentation Centre	Bukola Osidibo	CSO (Data)	3 August
OSURT	Titilola Vivan - Adeniyi	Grassroot CSO (VAWG)	3 August
Ministry of Women Affairs/Poverty	Hopo Kudirst B	Government (Gender/VAWG)	3 August
Medical Women's Association of Nigeria	Dr. Omowunmi Bakare	CSO (SRHR)	3 August
Mirabel Centre	Juliet Olumuwiya - Rufai	CSO (Prevention/Services/VAWG)	3 August
Mirabel Centre	Itozo Eze-Anaba	CS (Prevention/Services/VAWG)	3 August
Popcouncil	Scott Yosin	Key Affected Population	3 August
Popcouncil	Ogundimu Olamido	Key Affected Population	3 August
Mind Renewal Women Initiative	Ejiroghene Kate Hehe	Grassroot CSO (VAWG)	3 August
UNFPA	Jaiyeola Ayanbadejo	UN (Gender/SRHR/FGM)	3 August
Equality Triangle Initiative	Victor Brownson	Grassroot CSO (Key Affected Population)	3 August
Equality Triangle Initiative	Ore Jimi Shotunde	Grassroot CSO (Key Affected Population)	3 August
Project Alert	Josephine Effah Chukwaha	CSO (Prevention/Services/VAWG)	3 August
The Women's Helping Hand Initiative	James Yakubu	CSO (Prevention/Services/VAWG)	3 August
Popcouncil	Soraya	Key Affected Population	3 August
Ministry of Women Affairs/Poverty	Oluyemi	Government (Gender/VAWG)	3 August
Popcouncil	Iorhung Priscilla	Key Affected Population	3 August
Popcouncil	Queen Agiode	Key Affected Population	3 August
Ministry of Women Affairs/Poverty	Anoko A.M	Government (Gender/VAWG)	3 August
Community Influence of UN Trans Women	Cheninaya Emerald Nnoryka	Key Affected Population	3 August
Popcouncil	Lanre P. Oladimeji	Key Affected Population	3 August

Consultation 6: Multi-stakeholder workshop, Sokoto, 8 August 2018

Key recommendations:

Sustainable empowerment programs for community and target groups
Improve state policies and effective Policy implementation in the State
Advocacy and community Sensitization
Community Mobilization/Engagement



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Effective Collaboration among all relevant Stakeholders

Community Engagement, Advocacy and community mobilization of traditional community and religious leaders

Engagement of male champions including husbands

Child birth spacing awareness

Increased enrolment, retention, transition and completion of girl education

Establishment of Community structure- community based health volunteers- TBAs, traditional barbers

Survivors of VVF and rape empowered and are advocates

TV jingles, hand bills for literate, pictorial and in Arabic

Girl child education (formal & informal)

Health care service delivery, Guidance & counselling

Legal support and establishment of mobile courts

Institutional strengthening

Data collection

Youth Engagement

Modern Technology

Traditional media, social media Participatory Communication Approach: Community Theatre, Community radio , Theatre for Development

Improve state policies

Name of organisation/agency	Name and title of representative	Type of organisation (civil society organisation, government, EU delegation, academia, etc.)	Dates of consultations
Uwa Mai Bada Mama	Garba Maryam Wamakku	CSO	8 August
Centre for gender support and community Development	Abubakar Hamza	CSO	8 August
Jama,a Community	Malami Attahir	CSO	8 August
Maryam Mairo Waziri Tambowal Initiative	Asmau Habibu Shagari	CSO	8 August
Maryam Mairo Waziri Tambowal Initiative	Laraba Dattijo	CSO	8 August
Save the Child Initiative (STCI)	Rabiu Bello Gadi	CSO	8 August
Zeta Al- Luma Foundation	Ogunlaja Funmilola	CSO	8 August
Centre for peoples Health Peace and Progress	Cecila M. Esemé	CSO	8 August
YPFA	Mukhtar Umar Bagarawa	CSO	8 August



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DPH/ASCO	Bala Bello	CSO	8 August
MTDI	Ubaida Bello Mulid	CSO	8 August
HOP	Abdulralman Abdusalam	CSO	8 August
SSPHCDA	Amina Abdu Gusau	Government	8 August
Min of women and children Affairs MOWACA	Habiba Ahmed	Government	8 August
AFEB	Asmau Buhari Ridwan	Government	8 August
HCOMDI	Nasiru Yusuf		
UNICEF SFO	Danjuma Nehemiah	UN	8 August
UNICEF SFO	Daniel SFO	UN	8 August
Community Centre for Development	Ibrahim Adamu	CSO	8 August
UNICEF	Mohammed Habib Danjuma	UN	8 August
MBSE	Ibrahim Salint	Government	8 August
		UN	8 August
MBSC /UNFPA	Abdulahi A Musa	UN	8 August
UNICEF	David Audu	UN	8 August
MOBSE	Nasiru Bello Tamuwal	Government	8 August
Mercy Hands Initiative	Hassaini S Gobir	CSO	8 August
Community centre for development	Rafia Umar Marafa	CSO	
ILSWACI	Dorothy A Ogar	CSO	8 August
Youth dev centre	Nasiru Abu Bakar	CSO	8 August
Nigerian Television Authority	Hajara A Bubakar	Media	8 August
Nigerian Television Authority	Malami Haruni Ildaji	Media	8 August
Agency for female educación Sokoto	Suleiman Hassan Tambuwal	Government	8 August
Agency for female educación Sokoto	Asmau Buhari Ridwan	Government	8 August
MTDI	Fatima Khalid Molid	CSO	8 August
WYRHD	Abubakar Saidi	CSO	8 August
NAN	Hauwa Gold	Media	8 August
Daily trust	Hauwa Gold	Media	8 August
Every Girl Every women Initiation	Muneera Umar Farouk	CSO	8 August
High Court of Justice	Dangolsdimn Waziri	Government	8 August



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	Abdulrahman		
Vision FM 92.5	Naomi Komgbenda	Media	8 August
Garkuwa Fm	Maawiyya Abubakar	Media	8 August
UNICEF	Safiya Abdullahi	UN	8 August
Ministry of Budget and Economic planning (MBEP)	Shehu Abdullahi	Government	8 August
Health and Gender Unit	Ibrahim Mohammed	Government	8 August
Nigeria Police Force	Mabel Omomia	Government	8 August
Centre for Social Advocacy	Nasiru Lawal Maimagani	CSO	8 August
Centre for Gender support	Mukhtar Sani Doki	CSO	8 August
Programme Analyst	Samatia Al - Mustapha	Government	8 August
Caliphate women and children development initiative	Yusuf Ibrahim	CSO	8 August
A.A Africa	Musa Ubandawaki	CSO	8 August
The Path Newspaper	Kabiru Mohammed	Media	8 August
NTA Sokoto	TAIBAI Mohid	Media	8 August
MMOT	Shamsudeen Ibrahim	Government	8 August
Freedom Radio	Abba Laran Kurmawa		8 August
SSPHCDA	Nura Muazu	Government	8 August
Maryam Mairo Waziri Tambowal Initiative	Amiru Adamu	CSO	8 August
News Agency of Nigeria	Habibu M Harisu	Media	8 August
Centre for peoples Health Peace and Progress	Simon Sunday Tambari	CSO	8 August
Boana Better life	Adeyanji Temitope	CSO	8 August
Helping hands and grass root support foundation	Bello Sambo	CSO	8 August
Press /Media	Musa Lemu Zaria	Media	8 August
State Cash transfer Unit	Fatima Aliyu	Government	8 August
CONSS	Umar SB Aliyu	CSO	8 August
Arewa Development Initiative	Cika Murtala Abubakar	CSO	8 August
Ministry of Budget and Economic planning (MBEP)	Aminu Abubakar Bello	Government	8 August
Change Initiative	Aminu Saidu	CSO	8 August
CAFSI	Muhammad Muhammed Moji	CSO	8 August
Community Awareness Development Initiative	Malami Marafe Gegi	CSO	8 August



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MSS Communication	Jude Dodzie	Media	8 August
Min of women and children Affairs	Aisha Mohammed Dantosoh	Government	8 August
Ministry of Budget and Economic planning (MBEP)	Mohid Attahiru and Galadanci	Government	8 August

Consultation 7: Government consultations

Key recommendations:

Consultation with Minister of State, Ministry of Budget and National Planning

Technical Level Consultation with Key Ministries

Representatives noted that the timeframe for the programme is very short.

There are several pilots already taking place in Nigeria. It was mentioned that Nigeria is a very unique country but there is violence everywhere. To make a difference, it is essential to go beyond the elitist-level.

Government requested to be involved in the design of the programme

The Vice President's Office are already engaging in a number of initiatives related to GBV and that there are many efforts being made at the highest-level in the country.

It is essential to ensure that all players are working together and that we ensure a common vision. Currently, initiatives are being set up to ensure a more comprehensive referral network in as many states as possible. To date interventions have taken place in Kanu, Kaduna, Anambra, Adamawa and FCT (and Lagos). (Maybe Nasarawa and Kebbi, TBC).

There are many structures in place and that strengthening these are very important. Often, the problems with funding and lofty interventions programmes. As such, the Spotlight Initiative is a very welcome idea from the Ministry. It is important to take careful consideration when selecting states.

There is a need to package the Spotlight – as such, the right language is needed, and it would be useful with training and support with drafting communication material and talking points.

Lobbying should be done at the highest level

Strategic Level Consultation with Key Ministries

At the end of the meeting, it was resolved that:

There should be a National Steering Committee (NSC) and Technical Committee on the Initiative consisting of the relevant MDAs that constitute the Inter-Ministerial Committee, the MDAs for Steering Committee and Technical Working Committee include the following:

Federal Ministry of Health;

Federal Ministry of Education;



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Federal Ministry of Justice;
SSSAP-SDGs;
National Bureau of Statistic; and
National Human Rights Commission.

The MBNP will serve as the Secretariat to the two committees. The NSC will be co-chaired by the EU-UN with the Honourable Minister of State, Ministry of Budget and National Planning (Representing the Government of Nigeria);

The first draft of the CPD should be submitted on August 16, 2018 and the final submission of the document on Spotlight Initiative should be ready for submission to the Secretariat in New York on 26th September 2018; and

The MBNP being the Secretariat to the Committees should communicate the date of the next meeting to the participating MDAs.

Recommendation from the Minister:

I wish to recommend that the Ministry in collaboration with the UN Spotlight Initiative Team facilitate the Inauguration of the National Steering Committee and Technical Working Committee as soon as possible to enable Nigeria to meet the deadline.

Name of organisation/agency	Name and title of representative	Type of organisation (civil society organisation, government, EU delegation, academia, etc.)	Dates of consultations
Ministry of Budget and National Planning	Zainab Ahmed, Minister of State	Government	June
Ministry of Budget and National Planning	Dr. Faniran	Government	June
Ministry of Budget and National Planning	Margaret Dibigbo	Government	June
Office of the Vice President	Hadiza Aminu Dorayi	Government	17 July
Ministry of Women Affairs and Social Development	John Duru	Government	17 July
Ministry of Women Affairs and Social Development	Jummai Mohammed	Government	17 July
Ministry of Youth and Sports	Bamagboye Adedayo	Government	17 July
Ministry of National Budget & Planning	Margaret Dibigbo	Government	17 July
Ministry of Youth and Sports	Catherine E.O Moses	Government	17 July
Ministry of Education	Chime Buchiwa Olingeli	Government	17 July



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Ministry of Budget and National Planning	Senator Udoma Udo Udoma – Minister	Government	18 July
Ministry of Education	Anthony Onwuka – Minister of State	Government	18 July
Ministry of Health	Osagie Ehanire Minister of State for Health	Government	18 July
Ministry of Budget and National Planning	Permanent Secretary	Government	18 July
Ministry of Women and Social Development	Permanent Secretary	Government	18 July
Some 20 representatives from above mentioned Ministries as well as Ministry of Justice		Government	18 July

ANNEX 2: Communication and Visibility Plan

Objectives

Overall Objectives

Strong communications and visibility are central to the Initiative's success. The communication and visibility work will have **four overall objectives**;

- Objective #1: Raise awareness of gender-based violence and harmful practices against women and girls and its prevalence in Nigeria:** By publicizing data and supportive facts, creative messaging to key audiences, exhibiting thought leadership on violence against women and girls.
- Objective #2: Illustrate and promote the impact and results of Spotlight-supported interventions:** By finding, sharing and promoting the stories of women and girls whose lives have been positively transformed by Spotlight-supported interventions.
- Objective #3: Provide communications for development support to strengthen Spotlight Initiative's programme design and implementation:** By influencing the creation and delivery of behaviour-change and culture-shift activities, campaigns and initiatives, media sensitization and training.
- Objective #4: Ensure visibility for the Spotlight Initiative, its donors and partners:** By coordinating consistent and coherent branding, high-profile endorsements from social influencers, top-tier media placements, organizing publicity events and campaigns.

To this end, the UN in Nigeria will develop a country-level Communications Strategy which will outline the common framework under which the Programme can effectively communicate with a unified approach to both internal and external stakeholders.

2. Target groups

The Spotlight Initiative's audiences are diverse and have different information needs, from women and girls who are victims of gender-based violence to development partners and international practitioners. To meet the needs of all audiences, a multi-level approach to presenting information is required. However, for every key Spotlight Initiative, the language used needs to be clear and concise and information presented should be easily digestible. The Spotlight Initiative's target audiences are:

Women and Girls in Nigeria
Boys and Men in Nigeria
Traditional and Religious leaders
Influencers (including social media influencers, Nollywood community and celebrities)



Victims of gender-based violence and harmful practices
 Key affected populations
 Development partners
 The Government of Nigeria (including specifically Justice and Law Enforcement)
 Media
 Private Sector
 Practitioners/professional communities and Civil Society
 UN Staff in Nigeria
 UN Headquarters

Specific objectives for each target group, related to the action's objectives and the phases of the Country Programme cycle

Audience /Target Group	Specific Objective
Women and girls in Nigeria	Reduce incidence of GBV and VAW through increased commitment of men and women; boys and girls, to preventing and protecting women and girls from violence; Ensure that the beneficiary population is aware of the Spotlight Initiative and the work it promotes, the role of the UN and the EU in the Country Programme.
Boys and men in Nigeria	Reduce incidence of GBV and VAW through increased commitment of men and women; boys and girls, to preventing and protecting women and girls from violence; Ensure that the beneficiary population is aware of the Spotlight Initiative and the work it promotes, the role of the UN and the EU in the Country Programme. Raise awareness on how boys and men in Nigeria can work together with the Spotlight Initiative to support EAWG
Religious and Traditional Leaders	Reduce incidence of GBV and VAW through increased commitment of men and women; boys and girls, to preventing and protecting women and girls from violence; Ensure that the beneficiary population is aware of the Spotlight Initiative and the work it promotes, the role of the UN and the EU in the Country Programme. Raise awareness on how religious and traditional leaders in Nigeria can work together with the Spotlight Initiative to support EAWG
Influencers	Reduce incidence of GBV and VAW through increased commitment of men and women; boys and girls, to preventing and protecting women and girls from violence; Raise awareness on how influencers in Nigeria can work together with the Spotlight Initiative to support EAWG; Strategically engage influencers to provide support to help achieve the Spotlight Initiative objectives and delivery of results;
Victims of GBV	Promote empowering messaging and challenge public misconceptions that perpetuate harmful stereotypes and



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	practices; Raise awareness on how the victims can access support through the Spotlight Initiative and beyond;
Key affected populations	Promote empowering messaging and challenge public misconceptions that perpetuate harmful stereotypes and practices; Raise awareness on how the victims can access support through the Spotlight Initiative and beyond;
Development partners	Raise awareness on how the development partners in Nigeria can work together with the Spotlight Initiative to support EAWG; Strategically engage development partners to provide support to help achieve the Spotlight Initiative objectives and delivery of results; Illustrate benefits of supporting and collaborating with the SI. Potential success factors could include political, financial or in-kind support. Raise awareness on how the UN and the EU work together to support EAWG.
The Government of Nigeria	Reduce incidence of GBV and VAW through increased commitment of men and women; boys and girls, to preventing and protecting women and girls from violence; Raise awareness on how the Government in Nigeria can work together with the Spotlight Initiative to support EAWG; Strategically engage Government to provide support to help achieve the Spotlight Initiative objectives and delivery of results; Illustrate benefits of supporting and collaborating with the SI. Potential success factors could include political, financial or in-kind support. Raise awareness on how the UN and the EU work together to support EAWG.
Media	Reduce incidence of GBV and VAW through increased commitment of men and women; boys and girls, to preventing and protecting women and girls from violence; Raise awareness on how the media can work together with the Spotlight Initiative to support EAWG; Strategically engage media to provide support to help achieve the Spotlight Initiative objectives and delivery of results; Raise awareness on how the UN and the EU work together to support EAWG.
Private sector	Raise awareness on how the private sector in Nigeria can work together with the Spotlight Initiative to support EAWG (Message should emphasize the responsibility of the private sector to take action to address GBV within their own settings) Strategically engage private sector partners to provide support to help achieve the Spotlight Initiative objectives and delivery of results; Illustrate benefits of supporting and collaborating with the SI. Potential success factors could include political, financial or in-kind support. Raise awareness on how the UN and the EU work together to support EAWG.
Practitioners/professional communities and Civil Society	Raise awareness on how the civil in Nigeria can work together with the Spotlight Initiative to support EAWG Raise awareness on how the UN and the EU work together to support EAWG Support partners to ensure that activities and messages promote empowering messaging and challenge public



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	misconceptions that perpetuate harmful stereotypes and practices Promote the work of the Spotlight Initiative and illustrate results of the SI. Potential success factors could include accurate and high-quality reporting and activities from partners.
UN in Nigeria	Raise awareness on how the UN agencies in Nigeria can work together with the Spotlight Initiative to support EAWG Raise awareness on how the UN and the EU work together to support EAWG Raise awareness on how the UN is operationalizing the reforms
EU	Raise awareness on how the UN agencies and the EU in Nigeria are working together with the Spotlight Initiative to support EAWG Promote the work of the Spotlight Initiative and illustrate results of the SI. Potential success factors could include an increase in fund allocation in the second round of allocation
UN HQ	Raise awareness on how the UN agencies in Nigeria are working together with the Spotlight Initiative to support EAWG Promote the work of the Spotlight Initiative and illustrate results of the SI. Potential success factors could include an increase in fund allocation in the second round of allocation.



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B- Communication Activities

4. Main activities that will take place during the period covered by the communication and visibility plan (Phase 1)

Main Communication Activities	Description	Responsibility
Produce content to be included in UN Newsletter	Main activities of the initiative will be captured in the UN's existing newsletter which is widely shared within and beyond the UN	UNIC (content gathering and reporting)
Ensure coordination through UNCG Meetings	The existing coordination forum for communication will be used to coordinate certain joint activities	UNCG/UNIC
Outreach and engagement with Media	Outreach and engagement with local and national media. Production of media content (including articles, radio content and op-eds) as well as media briefings	SI Communication Officer Agency Communication Officers UNIC
Produce material for Spotlight Initiative Website	Material will be produced to be placed on the global website	SI Communication Officer (in coordination with agency Communication Officers)
Produce and post content on One UN Website	Material will be produced to be placed on the One UN Nigeria website	UNIC/UNCG SI Communication Officer to provide context
Produce Information products (e.g. video, leaflets, posters, annual report)	Online and offline information products will be produced and be used to support the two main objectives	SI Communication Officer Agency Communication Officers UNIC Programme Officers
Engage Influencers and Media Personalities	The SI will / develop relationships with influential media personalities and follow/engage them on social media and share information, especially at critical times (when there is Spotlight Initiative-related news or messaging to promote) or on special days	SI Communication Officer UNIC
Conduct Communication	Relevant communication officers will be trained in line with the SI	UNIC/UNCG



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Training	Communication Guideline	SI Communication Officer
Conduct Perception survey and do crowdsourcing	Support will be provided to ensure that knowledge management activities are in line with communication guidelines	SI Communication Officer UNIC Programme Officers
Produce and post content on Social Media (Facebook, Twitter, Flickr, blogs etc)	High social media presence will be a key activity; including producing new content such as photos and video but also engaging with other stakeholders	SI Communication Officer EU
Carry out joint visibility events (including EU-UN events)	Joint events and celebrations will be organized on relevant selected days including the International Day for the Elimination of Violence Against Women, International Women's Day, or World Day against Trafficking in Persons)	Programme Staff Communication Officers EU
Carry out Communication 4 Development activities	Partnerships with key civil society, media, and UN and other partners who specialize in communications for development and communications for social and behavioral change should be cultivated. Activities will go beyond traditional awareness raising and advocacy	Programme Staff Communication Officers
Organize high-level launch at the country level	Key objectives is to ensure high-level participation from the Government's, EU's and UN's side	RC/HC Heads of Agencies EU
Conduct High-level advocacy	Advocacy messages will be developed and shared	RC/HC Heads of Agencies EU
Organize Forums for knowledge building, networking, knowledge capturing	Events will include Knowledge Building Forum, Youth Engagement Summits, Youth Café - focus will be on leaving no one behind and engaging with priority groups (including youth, key affected population, private sector, academia, CSOs)	SI Communication Officer Agency Communication Officers UNIC Programme Officers

(*total communication cost – visibility only – is calculated at 3% of the direct programme cost)



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5. Communication tools chosen

Tools	Advantages in the local context
Reports	Formal communication tool which is accepted by Government and donors
Publication and printed material	Great outreach among general public
Media material	Great outreach among decision-makers
Online material	Low cost; very high social media presence; great outreach to engaged and committed youth as well as influencers
Research	New data has the possibility to change opinions and key messages has to be data driven
Meetings	Face-to-face is a preferred communication tool and personal relationships are key
Events	Allow various stakeholders to network and engage. Will allow us the possibility to better engage with priority populations as well as ensure high visibility – make the initiative seem credible and important



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6. Completion of the communication objectives

Objective #1: Raise awareness of gender-based violence and harmful practices against women and girls and its prevalence in Nigeria: By publicizing data and supportive facts, creative messaging to key audiences, exhibiting thought leadership on violence against women and girls.	# Outcome Indicator 3.1: Percentage of people who think it is justifiable for a man to (subject) beat his wife/intimate partner (to violence), by sex and age # Percentage of audience with accurate knowledge on the prevalence of gender-based violence and harmful practices in Nigeria
Objective #2: Illustrate and promote the impact and results of Spotlight-supported interventions: By finding, sharing and promoting the stories of women and girls whose lives have been positively transformed by Spotlight-supported interventions.	# Percentage of audience with accurate knowledge of the Spotlight Initiative # Percentage of audience with a positive perception of the Spotlight Initiative # Output Indicator 3.3.3: Number of new and other media stories/reports that sensitively report on VAWG and GEWE more broadly
Objective #3: Provide communications for development support to strengthen Spotlight Initiative's programme design and implementation: By influencing the creation and delivery of behaviour-change and culture-shift activities, campaigns and initiatives, media sensitization and training.	# Output Indicator 3.2.2: Number of people reached by campaigns challenging harmful social norms and gender stereotyping # Output Indicator 3.2.5: Number of campaigns challenging harmful social norms and gender stereotyping, including of women and girls facing intersecting and multiple forms of discrimination, developed and disseminated # Output Indicator 3.3.1 Number of news outlets that develop standards on ethical and gender-sensitive reporting # Output Indicator 3.3.4 Number of journalists better able to sensitively report on VAWG and GEWE more broadly
Objective #4: Ensure visibility for the Spotlight Initiative, its donors and partners: By coordinating consistent and coherent branding, high-profile endorsements from social influencers, top-tier media placements, organizing publicity events and campaigns	# Percentage growth of Spotlight audiences (segmented) # Percentage increase in Spotlight brand recognition

7. Provisions for feedback (when applicable)

Government – feedback from working groups

Public – perception surveys

EU/Donors – feedback tools will include regular meetings as well as report surveys

Annex 3 – Snapshot of VAWG/SGBV/HP and SRHR in Nigeria

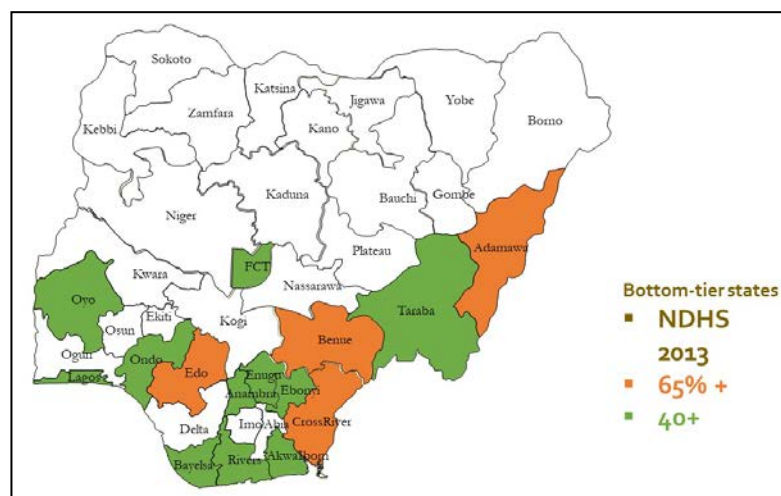
Violence against women and girls includes physical, sexual, psychological, emotional and socio-economic violence.

Gender inequality

Nigeria ranks 118 out of 134 countries on the Gender Inequality Index. It has one of the highest maternal mortality and child mortality rates in the world; considerable gender disparities in education especially in the North where 34 percent of primary-age rural girls are out of school compared with 25 percent of boys; and marginalization of women in the economic sphere where they are concentrated in casual, low-skilled, low paid informal sector, making up only 21 percent of the non-agricultural paid labor force.

Physical and sexual violence

Sexual and Gender-Based Violence (SGBV) remains pervasive and underreported in the country, largely constraining women's autonomy and life chances. The 2013 DHS indicates that nationally 38 percent of women between the ages of 15-49 have experienced some form of physical or sexual violence from the age of 15, and 11 percent experienced physical violence within the 12 months prior to the survey. 33% occurred in urban and 24% in rural areas, many of them female students and pupils. One in four girls, one in two girls and one in six girls have experienced sexual, physical and emotional violence respectively.



Physical violence prevalence rates per state

Intimate Partner violence

Social norms in Nigeria vary widely across the country, and largely condition women's economic and social status at the individual, household and community level. Entrenched gender-discriminatory social norms put women who challenge these norms by earning a higher income or engaging in non-traditional



employment sectors at a risk of experiencing GBV especially Intimate Partner Violence (IPV), at least in the short term. GBV is widespread and exists in all forms in public and private spheres; domestic violence remains pervasive (16% intimate partner violence prevalence rate).

A new World Bank book quantifies and categorizes major risk factors for IPV across 21 countries using recent DHS data (these include history of domestic violence, attitudes towards wife beating, etc.). Some of these risk factors for IPV are especially high in Nigeria. These include (i) justification for wife beating: one in three women in the Nigeria 2013 DHS Survey agreed that wife beating is justified in some cases; (ii) polygamous marriages: 33% women reported that their husbands had more than one wife and; (iii) early marriage: 43% of girls in Nigeria are married before they are eighteen.

Harmful Traditional Practices

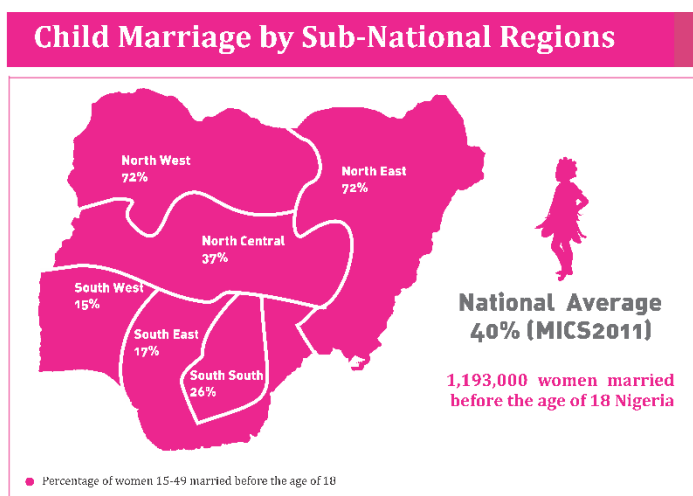
There is a wide array of harmful practices in Nigeria, ranging from widowhood practices, son preference, killing of twins, harmful witchcraft accusations, women to women marriage, and breast ironing.

However, two stand out as the most common; *child marriage* - most prevalent in the North (at 72%) and *FGM* – most prevalent in the South (at 56%).

3.1 Child Marriage

Nigeria has one the highest child marriage prevalence rates in the world. With 1,193,000 women married before the age of 18, Nigeria is the third country worldwide for absolute number of girl brides. Nigeria has the largest number of child brides in Africa and 23 million girls and women were married before the age of 18. As of 2013, 42.1 percent of women age 18-22 were married before the age of 18, and the mean age at first marriage was 15.9 years⁴⁰.

Once girls in Nigeria rare married, very few (1,2% of those 15-19) are using contraception in spite of their needs to space their childbearing time. Only 13.1% of them have their contraception satisfied (NDHS 2013).



Child marriage occurs more frequently among girls who are the least educated, poorest and living in rural areas. Girls living in rural areas tend to marry before the ones living in urban areas. The media age at marriage is four years lower among those living in rural areas (16.6 years) than among those residing in urban areas (20.8 years). Education is associated with the prevalence of child marriage in Nigeria. In 2013, adolescent girls with no education had median age at marriage 6 years lower (15.5 years) than girls with secondary education (21.5 years). Household wealth also influences the prevalence of child marriage with median age at marriage eight years lower in girls from the poorest quintile compared to girls in the highest (15.2 and 23.2 respectively).

Child marriage is most prevalent in the northern parts of Nigeria.

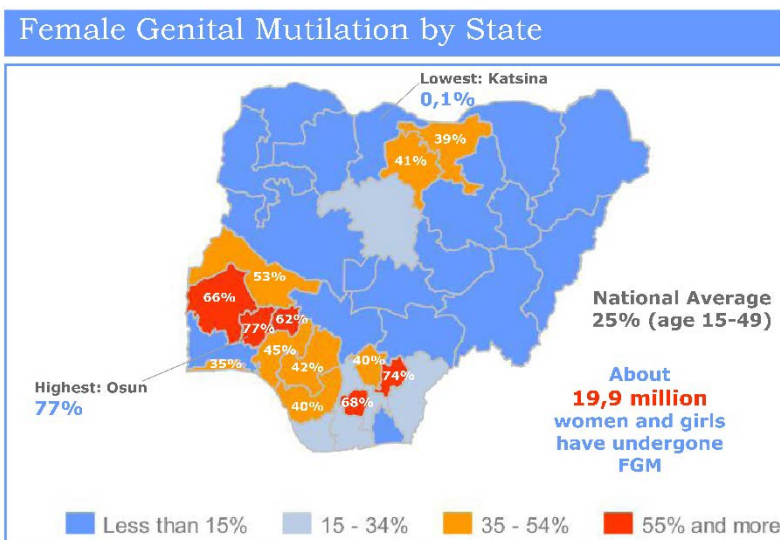
⁴⁰ <https://openknowledge.worldbank.org/handle/10986/24547>



3.2 Female Genital Mutilation

Nigeria accounts for the third highest number of women & girls who have undergone FGM worldwide (after Egypt & Ethiopia). The national FGM prevalence rate is 25% (NDHS 2013) and as a result, about 19.9 million women have undergone FGM accounting for 16% of the 125 million FGM survivors worldwide (NPopC 2014).

The practice is predominant in the South of Nigeria (South East – Ebonyi State 74 percent), South West - Osun State with the highest prevalence (77 percent) (NDHS 2013). It is a traditional practice performed to promote chastity, increase girls' marriage ability. For the states targeted by the Spotlight Initiative, the prevalence rates are: Ebonyi (71%), Cross River (32%), Lagos (35%), Adamawa (1%), FCT (6%), and Sokoto (3%).



Nigeria is one of the five countries with the highest rates of medicalization in the world with a prevalence of 12.7% among women aged 15-49 years and 11.9% among girls aged 0-14 years (NPC & ICF Macro 2013)^[1]. This means that the rates of medicalization among women and girls in Nigeria are roughly equal signaling a lack of change between generations. A study of 250 health workers in south-western Nigeria found that almost half (48.4%) had been asked to perform FGM/C (Adekanle et al 2011)^[2]. Onuh et al (2006)^[3] observed that 24.2 percent of 182 nurses in Benin City, Nigeria reported that some FGM/C forms were not harmful, with 2.8 percent supporting the practice because they viewed FGM/C as beneficial. In the same sample, 6.6 percent of respondents routinely practiced FGM/C, while another 14.3 percent had performed it, although not routinely; 57.7 percent of the latter reported that they would still perform FGM/C in certain circumstances, such as significant pressure from a girl or woman's family, or significant financial benefits. Their reasons for performing FGM/C were cultural (83.3%), financial gain (50%), and preventing patients from going to traditional cutters (25%).

Snapshot of Key Indicators for FGM in Nigeria

Key Indicators		Data sources
Population size, female, age 15-49 (in thousands), 2017	43,672	GLOBAL Revision of the World Population Prospects 2017
Prevalence of FGM among women and girls, 15-49 (%)	25	DHS 2013
Prevalence of FGM among girls, 15-19 (%)	15	DHS 2013
FGM prevalence rate in most affected ethnic group in the country (%)	57	DHS 2013
Existence of policies and laws banning	Yes (some states);	Global FGM programme data 2014

Snapshot of Key Indicators for FGM in Nigeria

Key Indicators

Data sources

FGM

1999-2006

3.3 Harmful Widowhood practices

Nigeria ranks 27 out of 39 Countries with One Million Widows or More according to 2015 widows estimates with 2,145,605 widows, out of population 61,303,000⁴¹. It is also one of the countries with Highest Percent of Widows of Female Marital Age Group, 2010 Report Nigeria has 7.7%. Practices considered harmful to widows include: shaving of body hairs (Head and Pubic Area); sleeping on the ground or on a mat; confinement and seclusion for weeks, or months as the case may be; restrictions on baths and Showers; forceful swearing with or on the corpse; compulsion to wear black over a period of time and disinheritance.

Girls Education

In Nigeria, girls' access to basic education, especially in northern states, has remained low. As few as 20 per cent of women in the North West and North East of the country are literate and have attended school. The 2006 National School Census (NSC) revealed a net enrolment ratio (NER) of 80.6% suggesting that a substantial proportion (19%) of primary school age population (6-11 years) is not enrolled in primary schools nationwide. This represents about 5 million Nigerian children aged 6-11 years old that do not access primary education.

In the Northern part of the country, the number of children out of school is particularly high and the proportion of girls to boys in school ranges from 1 girl to 2 boys and even 1 to 3 in two states. Although the gender gap has narrowed from 12 to 10 points, there exist wide variations across the States and zones, with the North Central and North West presenting worst scenarios. Out of the 10.5 million out-of-school children in Nigeria, girls account for two-thirds.

The reasons why girls are not attending school include poverty and economic issues, early marriage and teenage pregnancy, inadequate school infrastructure and cultural and religious misinterpretation are the main issues that prevent girls from going to school. With almost 70 per cent of the Nigerian population living below the poverty line, girls are often sent to work in the markets or hawk wares on the streets. Early marriage and teenage pregnancy also prevent girls from going to school. A lot of girls drop out of school before reaching primary class six.

Most schools lack adequate classroom space, furniture and equipment, and are often too remotely located. Water, health and sanitation facilities are usually inadequate while pupil-teacher ratios could be as high as 1:100 in urban slums. Many Nigerian parents, especially in large families with limited resources, enrol their boys in school rather than girls. Some parents also keep their daughters out of school due to misinterpretation of Islamic religion.

Boys are generally known to be given more opportunities to ask and answer questions, to use learning materials, and to lead groups. Research shows that girls are often given less time on task than boys in primary and secondary school science classes. Many Nigerian teachers still use corporal punishment and create an intimidating classroom environment.

The female literacy rate in Nigeria is 50.4% and the female life expectancy is 53.66 years.

Human trafficking

⁴¹ <http://www.theloombafoundation.org/images/The%20Global%20Widows%20Report%202015.pdf>



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Human trafficking, forced labor and child labor are also human rights concerns in Nigeria⁴². The predominant group that is targeted for human trafficking are girls: there are two times the number of trafficked females than males⁴³.

Sexual Health and Reproductive Health Rights

A 2017 report by the UN Department of Economic and Social Affairs projects that by 2050 Nigeria will have surpassed the United States to become the third most populous country in the world⁴⁴. Despite Nigeria's wealth in culture and resources, Nigeria's health indicators are shockingly poor – it has the world's highest rate of HIV/AIDS-related deaths as well as high rates of maternal and infant mortality and a low life expectancy. Regional conflict and instability, increasing poverty (particularly in rural areas), and internal displacement have further hindered access to healthcare in the country, especially for women. Some 55.7 percent of married women in Nigeria reported that their husbands made their healthcare decisions without their input, impeding their decision-making power.

Average births per woman: 5.25
Physicians per 10,000 people: 4
Births attended by skilled personnel: 48.7%
Lifetime risk of maternal death: 1 in 31 (chances a woman will die during childbirth)
Modern contraceptive prevalence rate: 11%
HIV prevalence and incidence among women and girls:

Even though trends in modern contraceptive prevalence rate, skilled antenatal care, skilled birth attendance, and adolescent birth show positive trends, marked disparities exist as rural, poor, and less educated women bear the greatest burden.

Nigeria has the world's highest burden of obstetric fistula and an estimated 20,000 new cases of obstetric fistula [NSF, 2015] occur annually. Child marriage and female genital mutilation are directly correlated to obstetric fistula, a debilitating injury resulting from obstructed labour or prolonged childbirth. Therefore, communities in which child marriage and FGM are common also have high numbers of obstetric fistula.

The primary victims of obstetric fistula are the society's poor and marginalized young girls and women who are often stunted by chronic malnutrition, are child brides who bear children while they are still children themselves or girl and women survivors of genital cutting and have prolonged/obstructed labour. According to the NDHS 2008, approximately 140,000 young women and girls are living with the complications of untreated fistula in Nigeria (85% of cases are in Northern Nigeria) and have no financial capacity to seek medical help. Women and girls affected are frequently abandoned by their husbands, rejected by families and progressively ostracized by their communities. Social stigma adds additional suffering for young women and girls living with fistula - she will be unable to find work - making it difficult for her to secure funds for repair surgery and forced to depend upon the goodwill of others for her very survival.

In Nigeria, the estimated cost of fistula treatment in private medical facilities ranges from \$1,400 to \$1,900. Consequently, less than 2,000 fistula repair surgeries are done annually, with a backlog of 10,000 clients added to subsequent years new cases. The Spotlight Initiative advanced funding would enable women and girls suffering with obstetric fistula access to quality treatment and care, returning home fistula free and reclaiming their dignity.

Directory of Services

Health Facilities in Nigeria by Type and Ownership, 2011

⁴² <https://www.state.gov/documents/organization/265500.pdf>

⁴³ <https://www.state.gov/documents/organization/271344.pdf>

⁴⁴ https://esa.un.org/unpd/wpp/Publications/Files/WPP2017_KeyFindings.pdf



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Type	Ownership		Total
	Public	Private	
Primary	21,808	8,290	30,098
Secondary	969	3,023	3,992
Tertiary	73	10	83
Total	22,850	11,323	34,173

Directory of SARCs

	State	Name of SARC	Quarterly client numbers (Jul2013 – Mar2018)
1	Adamawa	Adamawa Hope Centre <i>commenced March 2018</i>	9
2	Akwa- Ibom	Agape Centre <i>commenced in October 2016</i>	138
3	Borno	Nelewa Centre <i>commenced April 2018</i>	16
4	Enugu	Tamar SARC <i>commenced May 2014</i>	720
5	FCT	Sexual and Gender-based Violence Response Team (SGBVRT)	
6	Jigawa	Jigawa SARC <i>commenced in October 2016</i>	59
7	Kaduna	Salama Centre <i>commenced in December 2016</i>	151
8	Kano	Kano SARC <i>commenced in September 2016</i>	705
9	Lagos	Mirabel Centre <i>commenced July 2013</i>	3,390
10	Lagos	Women at Risk Foundation (WARIF) Centre	320
11	Lagos	Lagos State Domestic and Sexual Violence Response Team (DSVRT)	
12	Niger	Rayuwa Centre <i>commenced 2015</i>	242
13	Yobe	Damaturu SARC <i>commenced in October 2016</i>	125

Key Observations on the implementation of CEDAW in Nigeria

The implementation of the Convention on the Elimination of all Forms of Discrimination against Women (CEDAW) has stalled and key observations on the implementation of CEDAW in Nigeria include concerns that Nigeria is yet to domesticate the convention at federal and state level. Specific further observations relate to concerns about Nigeria's complex and lengthy legislative process, which are particularly detrimental to women, and the simultaneous application of statutory, customary and religious laws which creates differentiated degrees of protection to women's rights. Other issues highlighted are the grey areas of the Gender Equality and Opportunities Bill, sexism in the judiciary, the negative impact of Boko Haram on women's and girls' rights, blanket screening by the military and protracted detention of women, the high proliferation of small arms and weapons, the use of schools for military purposes, endemic violence against women, sexual exploitation of internally displaced women, criminalization of prostitution, inadequate representation of women in political and public life, discrimination of women in employment on the basis of pregnancy and marital status, gender pay gap, resistance to comprehensive sexuality education, the very high maternal mortality rate and HIV rate, economic empowerment of rural women, and criminalization of same-sex marriages and homosexuality.

Annex 4 – Mapping of CSOS and best practices

MAPPING OF CSOS

Categories

Movements
 Umbrella Organisations
 Issue based
 Professional
 Networks-
 Faith based
 Large National
 Media
 Small CBOS
 Key and vulnerable groups

MOVEMENTS	UMBRELLA	ISSUE BASED	PROFESSIONAL	NETWORKS/ COALITIONS	FAITH BASED ORGANISATIONS	LARGE NATIONAL NGOS	STATE LEVEL CSOs	MEDIA
WOMEN FOR WOMEN	NCWS	Child marriage Save the children UNICEF UNFPA	International Federation of Women Lawyers FIDA	JONAPED	FOMWAN Federation of Muslim Women Association	Action aid	Isa Wali Foundation Kano	FAME Foundation
UMUADA IGBO	MARKET WOMEN	FGM UN joint Programme- UNFPA And UNICEF Girl generation EVA FIDA MWAN	MWAN	WOMEN LIVING WITH HIV/AIDS	WOWICAN	Search for Common ground	SWODEN KANO	DRY movie VVF
	LACVAW	Twins Fame foundation Divine heritage	NAWOJ	CEVAW Centre for Eradication of	Young women Christian	Mercy corps	Neem Foundation Borno	Dorothy Njemanze Foundation



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		home		Violence Against Women	Association			
		<u>Widows</u> Widows Development Organisation FIDA WRAPA WACOL CEVAW CIRRDOC	BPW	WOMEN PEACE AND SECURITY NETWORKS			Civil Resource Development and Documentation Centre, CIRRDOC, Enugu - Nigeria, Enugu	Media Campaign Against Human Trafficking (MeCAHT) running a small safe house for prostituted/trafficked girls.
		<u>Witchcraft accusation</u> CRARN Stepping stones		Youth			Healing Heart Widows Support Foundation, HHWSF, Enugu	Fostering Achievement Community Empowerment (FACE) Initiative Daughters of the Niger Delta documentary
		<u>SGBV</u> P4J WACOL EVA CWEENS Dorothy Njemanze Foundation		Wives of Governors			University of Maiduguri Muslim Women Association Borno	
		<u>Domestic Violence</u>		Wives of security			Gender and	



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		WARD –C Project Alert ACTS generation GBV CLEEN foundation's national crime and safety survey 2012 shows that 31% of national sample admitted to being victims of domestic violence.		sector personnel			Developme nt Action; Rivers	
		Men against domestic abuse (MADA)					Gender Awareness Trust Kaduna	
		<u>Adolescent health</u> Save the Children (STEER), CRS (SMILE), Association for Reproductive and Family Health (ARFH), FHI360, ECEWS, Pro Health International (PHI) YEDI, Girl Effect, Mercy Corps, GAD					Christian Women for Excellence and Empowerm ent in Nigerian Society CWEENS	
		<u>Lagos SARC</u> Mirabel Centre, Ministry of Women affairs and Poverty alleviation, Ministry of Education, Ministry of Youth and Social					Women in New Nigeria WINN	



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		development, Women at Risk International Foundation (WARIF), Ministry of Education, The Nigerian Police Force, Lagos State Primary Health Care Board (LSPHCB), Office of the Public defender (OPD), Women, Law and Development Centre Nigeria (WLDCN), Women's Right and Health project (WRAPH), State Accountability and Voice Initiative (SAVI), Lagos State Ministry of Health and the Media.						
		<u>PL Disability</u> Women with Disability Self Reliance Centre Inclusive friends					Widows Developme nt Organisatio n Abia	
		<u>Trafficking</u> WOTCLEF IDA Renaissance MECHAT WISE					Girls Power Initiative (GPI),	



		Second chance options						
		Inwelle Centre						



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BEST PRACTICES

The Sahara group approach to engaging the private sector by exploring how best private sector can be active in SDG. Looking beyond Corporate Social Responsibility (CSR) to operating as an institution offering equitable opportunities, promotion and recruit women within the company. Policies on equal pay, fair maternity leave and elimination of sex for promotion. Choice of next of kin in pre-employment forms which denies widows' access to their spouses' entitlements

Kids and youth in the city make a difference in their communities. They work to change the mindset of communities. Use of Social media to reach 5.2 million people on a discussion platform in slum communities. On Line and off-line tactics. ASK HER is a programme for women to come and talk.

Joint action on harmful widowhood practices - In the southeast of Nigeria interventions to eliminate harmful traditional practices have been carried out including legislative advocacy, legal aid and community vanguard teams⁴⁵ by non-profit organisations such as the Women Aid Collective (WACOL), Widows Development Organisation (WiDO), Centre for the Eradication of VAW (CEVAW)

Action Health Incorporated- Promoting youth health and development, Provide access to information and youth friendly services for ages 10-24. Youth friendly health clinic-Includes training for medical doctors and students from medical school and Resident doctors in Community health partnership. Training also include Psychosocial support.

There have been efforts by civil society targeted at the trafficking route which commences in Edo State of Nigeria, "routinely cited as the main area in Nigeria from where young women are trafficked". Efforts such as those of Titi Atiku Abubakar, wife of the former vice-president of Nigeria. In 1999, she stood on her husband's ascendancy to the office of vice-president to establish the Women Trafficking and Child Labour Eradication Foundation (WOTCLEF)^{xxi}. In addition, there is the initiative of the wife of the Edo State Governor, Eki Igbiniedion, the Idia Renaissance project brought traffickers to book and were able to repatriate some of the girls. Surprisingly, parents were unhappy that their children were repatriated because things were difficult at home.⁴⁶ More recently, a non-governmental Organisation, Media Campaign Against Human Trafficking (MECHAT) launched a Film called Desperate Journeys on anti-trafficking was in February 2018.

Inwelle Centre strategy for combating violence against women is to reposition indigent girls academically and financially, create awareness in parents to support girls, and raise communities' leaders' consciousness to the issue of violence against women. Provide life skills, dissuading them from engaging in practices that will expose them to becoming victims of violence as well as for creating awareness of the potential violence to women embodied in marrying early. Secondly, parents are supported to provide the continuum at home. The work with community leaders is to advocate for change in attitudes, harmful traditional customs, and taboos that circumscribe girls and impede their ability to move into gainful areas of human endeavor.

Women's Rights and Health project (WRAHP) is a gender focused civil society organisation working within Alimosho, the Local Government Area with the highest population in Lagos state. Since 2013, WRAHP has been working with community leaders to address the alarming rise in sexual violence in Ejigbo and Ikotun-Igando LCDAs by tackling the culture of silence and the social stigma associated with sexual assault and establishing alternative avenues for victims to make reports through trade and vocational associations, schools and faith-based groups

ACTS Generation GBV - is a non for-profit organization focused on women and the girl-child in the area of gender equality, human rights and domestic violence and abuse. They provide advocacy, awareness/sensitization, counseling and intervention services. They also run empowerment programs for women and girls, through personal development workshops and trainings, to enable them to live a life

⁴⁵ Nwadinobi, E. (2014) 'Conflict Intervention on Behalf of Widows: Notes from Enugu State in Nigeria' in Fritz, J. (ed) *Moving toward a just peace: the mediation continuum*, pages 167-188, Berlin: Springer.

⁴⁶ <https://www.vanguardngr.com/2017/05/horror-human-trafficking-edo/>



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free from injustice and poverty so they can contribute positively to the growth and development of their community and Nation.

Women's Right to health information - WORTHI Campaign. The Medical Women's Association - MWAN initiated the WORTHI campaign. The idea behind the campaign is, for women, especially in rural areas, who are the bearers and carers in every home, to have the right to life-saving health information in an easy to understand form. As part of the campaign, MWAN provides health information in simplified and pictorial formats as well as in local languages to women. These are designed as fliers, posters or pamphlets. MWAN also utilises the media to disseminate simple health facts and information to wider audiences.

Women4Women, He4She – The newly formed Women for Women and He4She is a project committed to mobilise Nigerian women into a movement/pressure group to get them to speak up on issues of women and girls. It comprises men and women from different political and non-political interest, who want to see more women participate in changing the circumstances of the country by voting and being voted for as well as raising their voices on issues that affect them. Consequently, on May 9, 2018, W4W convened thousands of women across Nigeria, across religious affiliations, across ethnic divide/diversities, across geographic differences and across age, status, social class, physical challenges, and all other characterizations to converge on Abuja, the seat of power, to press for progress on all fronts. Called on the National Assembly to take further steps to create an enabling environment for the elimination of Violence Against Women and Girls and curb the growing menace of Sexual and Gender-Based Violence.

The Observatory is an initiative to address VAWG. It aims to ensure reporting, referral and response. It is an internet or web based 'virtual' safe space to which women and girls (and boys and men) can report cases of VAWG with Observatory Steering Committees (OBSTEC) functional in 5 states (Borno, Kaduna, Kano, Plateau and Rivers). The OBSTEC comprises representatives of relevant ministries, departments and agencies (MDAs) such as the police and the Ministry of Women's Affairs and Social Development (MWASD), civil society organisations (CSOs), service providers and the media. It is run by a coordinating CSO with experience in working on VAWG issues and chaired by an OBSTEC member chosen by other members. The data is analysed and recorded by the platform provider, The Fund for Peace, to which reports are sent. In doing so, the Observatory contributes to breaking the culture of silence, and providing the support to survivors of violence and effective response to prevent and respond to VAWG.⁴⁷

EDUTAINMENT (documentary, drama) strategies in stimulating dialogue to bring about practice change Fostering Achievement Community Empowerment (FACE).

Adopt VAPP (Violence Against Persons Prohibition) Act in Bayelsa is a project funded by USAID/UKAID through NDI. The project seeks to facilitate the adoption of the Violence Against Person Prohibition Act in Bayelsa State. It is a legislative lobby and advocacy project which is slightly different from the regular advocacy that we have been involved in, with entirely different stakeholders. By and large, it's been a good experience as we have had a very good reception from both the state executive and legislators. A draft bill has been developed working with the Attorney General/Commissioner for Justice's Office. The bill awaits the Governor's presentation to the Bayelsa State House of Assembly for consideration, as it is going through the route of an executive bill. Apart from other forms of enlightenment on the bill, there is an ongoing weekly live radio programme that educate citizens on the provisions of the law, using radio drama to spark dialogue. The lobby and advocacy is led by a Steering Committee made up of representatives from CSOs including members of WPSN.

WORTHI- Women's Rights to Health Information (WORTHI) The Medical Women's Association of Nigeria have an initiative called WORTHI- Women's Rights to Health Information (WORTHI). Health information is made simple for women at household and rural areas

⁴⁷ The Observatory on Violence against Women and Girls: Learning from the NSRP Experience



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Edo state -The Enoghe's Wives Association: In Edo State the wives of the Chiefs (*Enoghe's*) have established a central cooperative group referred to as 'The Enoghe's Wives Association' with cooperative groups in all the communities. The groups meet once every month to make thrift contributions known in local parlance as '*Olidara*' amongst them. Members who wish to start a business or address an urgent concern request for the contributions in turns and either establish a trade or solve urgent concerns. However, family heads, the Chief (Onoghe), the Chiefs wife and groups of elderly and experienced women known as '*Adan*' in Ewossa and Ikhewo in Uholor settle GBV related disputes and provide counsel to GBV survivors. In both communities, cases of GBV are first reported to family heads and in severe cases to the Chief and elders, the Chiefs wife and other women GBV support groups.

Sokoto State Kakar Aure can Taka Sallah Arbiki Sallamu Alaikum: This is a community structure social movement that supports Community based health volunteers and Traditional barbers. Traditional Birth Attendants (TBAs) are trained to refer cases of obstructed labour. Traditional barbers who do circumcision are trained to sterilize their instruments to reduce neonatal sepsis. The interventions are designed to align with the festive and weather seasons. Most marriages take place just before fasting, and the circumcision is done during the harmattan season

Annex 5 - List of Consulted Civil Society Partners

- § ActionAid
- § Alliance for Disability and HIV
- § Association of Positive Youth in Nigeria
- § Association of Women living with HIV in Nigeri
- § Association for Reproductive and Family Health
- § Care International in Nigeria
- § Catholic Relief Services – Nigeria
- § Centre for Advocacy for Persons with Disabilities
- § Center for Leadership Strategy and Development
- § Centre for Eradication of Violence Against Women
- § Centre for Women Information Network
- § Center for Social Justice
- § Child Protection Committees
- § Child Protection Networks
- § Christian Association of Nigeria
- § Christian Council of Nigeria
- § Christian Women for Excellence and Empowerment in Nigerian Society (CWEENS)
- § Civil Resource Development and Documentation Centre, CIRDDOC
- § Civil Society Action Coalition for Education for All
- § Community Development Committee
- § Conversations for Social Change
- § Development Dynamics
- § Diadem Consults
- § Dorothy Njemanze Foundation
- § Economic and Social Empowerment of Rural Communities
- § Education as a Vaccine (EVA)
- § El Meela Heritage Support Foundation
- § First Step Foundation
- § First Step Action for Children Initiative
- § Fistula Foundation
- § FHI360
- § FOMWAN Project Alert
- § Girls Power Initiative
- § Hope Foundation for the Lonely
- § International Federation of Women Lawyers (FIDA)
- § International Society of Media in Public Health
- § Isa Wali Empowerment Initiative
- § Jama'atu Nasril Islam
- § John Snow Incorporated

- § Joint National Association of Persons with Disabilities (JONAPWD)
- § Marie Stopes International Nigeria
- § Medical Women's Association of Nigeria (MWAN)
- § Mirabel Centre
- § Muslim Association of Nigeria
- § Nasrul-lahi-li Fathi Society
- § National Council of Child Rights Advocates of Nigeria
- § Network of Men Leaders to End Violence Against Women
- § Nigerian Red Cross Society
- § Pathfinder
- § Partnership for Justice
- § Plan International
- § Planned Parenthood Federation
- § Population Council
- § Population and Reproductive Health Initiative
- § Project Alert on VAW
- § Royal Heritage Health Foundation
- § Rural Women's Associations
- § Save the Children
- § Sexual Offences & Rehabilitation Initiative
- § SMILE Project
- § STEER Project
- § Strengthening Advocacy and Civic Engagement Project
- § Sultan Foundation for Peace
- § Victim Support Fund
- § Wellbeing Foundation Africa
- § Widows Development Organisation
- § Women Advocate Research & Documentation Centre (WARDC)
- § Women in Law and Development in Africa § Women Advocates Research and Documentation Center
- § Women Health and Action Research Centre
- § Women Wing of the Christian Association of Nigeria (WOWICAN)
- § Women with Disability Initiative
- § Women's Rights Advancement and Protection Alternative WRAPA
- § Women's Aid Collective
- § YouthHub Africa

List of Consulted Civil Society Partners in Lagos

Action Health Incorporated

Action AID

Women's health and health initiative
NCWS
Child support services
Women at risk
Centre for women's health and information
One Africa child-
Centre for health ethics and law
Child protection network
Young mothers empowerment network-
adolescent mothers
Royal health initiative
WARD – C
Pop council
Green springs rehabilitation home
Mirabelle Centre
Nigeria institute of medical research
Radio 91.7
Women help initiative
Rosie's empowerment consults
Women living with HIV/AIDS
One African child foundation
Youth empowerment and development initiative

Studio 24- Something for the girls
African youth network
Lagos model UN
Hacey health initiative
Rosies empowerment
Nigeria youth initiative network
UNILAG sports foundation
Kids in the city initiative
Men against domestic abuse (MADA)
Women helping hand initiative
Action Health Incorporated
Lagos state violence response team
Equality child initiative
Sahara group
Human support services
Mine rural initiate
Green springs rehab home
Women health and equal rights initiative
Hope inspired foundation
Project alert
Reproductive health initiative

List of Consulted Civil Society Partners in Sokoto

MMWAT initiative -
Every woman initiative
Adolescent out of school
Children and family support initiative- 11,000
beneficiaries out of school children
Child protection
Awareness and development initiative
Change initiative – health
Centre for social advocacy
Caliphate women and children initiative-youth
and law enforcement
Agency for formal education
Centre for people's health
Coalition of NGO in Sokoto
Arewa development initiative
Association for polio survivors
Women and health development
Shehu Shagari college of Ed
Save the child initiative
Agency for female education
MWWAT legacy initiative
Women and Youth for rural health development
Centre for gender support and community
development
Ja ma, a community initiative
Zethar AL- UMMA Foundation

Punch newspaper
Daily trust Vision FM
Better life

MEDIA

NAN
Sokoto premium radio

Annex 6: Overview of Legal and Policy Situational Analysis

1.1 Federal Laws

1.1.1. A Bill for an Act to Eliminate Violence in Private and Public Life, Prohibit all Forms of Violence Sexual, Psychological, Domestic, Harmful Traditional Practices; Discrimination Against Persons and to Provide Maximum Protection and Effective Remedies for Victims and Punishment of Offenders, 2015 (HB. 191) otherwise known as the VAPP bill was signed into law on 25/05/15 by President Goodluck Ebele Jonathan. In May 2002, Legislative advocacy Coalition on Violence Against Women (LACVAW) articulated and submitted to the National Assembly, the Violence Against Women (Prohibition) Bill. It was introduced in the 4th National Assembly sponsored by the then Chair of the House Committee on Women Affairs, Hon. Florence Aya. The first Legislative Consultation on the Bill was held at the National Assembly on March 8, 2004, facilitated by the Widows Development Organisation (WiDO). Currently, the VAPP Act is only applicable within the FCT. For it to become a national law, it needs to be passed in all the 36 States of the federation. VAPP 2015, has since been passed in 5 states.

1.1.2 National Action Plan (NAP) 1325 on Women Peace and Security (WPS) and domestication in 11 states. The Federal Government of Nigeria through the Ministry of Women's Affairs and Social Development (MoWASD) launched its National Action Plan (NAP) on the Implementation of UNSC Resolutions 1325 and 1820 on 27th August 2013 (2013-2016). In May 2017, a second-generation NAP was launched to cover the period of 2017-2020. As part of Nigeria's efforts to domesticate NAP implementation, WPS State Action Plans (SAPs) have been developed and endorsed by the state government in 11 states. Passage of State action plans (SAPs) for implementation has taken place in Adamawa, Bayelsa, Borno, Delta, Gombe Kaduna, Kano, Kogi, Plateau, Rivers and Yobe states.

1.1.3. Others

The Child Rights Act (CRA) has been domesticated in 23 states
Road map to VAC (2013 -2016)
National policy on elimination of FGM
National strategy to end child marriage

1.2 GBV and Laws operating in tandem

Domestic Legal Instruments include The Constitution of the Federal Republic of Nigeria, 1999 as amended, Penal Code as applicable in Northern Nigeria, Criminal Code as applicable in Southern Nigeria.

Nigerian law is also infused with discriminatory practices against women, including an implied legal backing to the assault of a wife in Section 55 of the penal code, and, in Section 6 of the criminal code, implies a lack of legal recognition for rape within marriage. GBV also affects men in Nigeria and sexual violence has been a tactic to humiliate and disempower men in times of conflict (ibid. 2012).¹

The legal provisions which enhance the dominance of men over women such as chastisement under the Penal Code and exception from rape for married men do not help matters as a woman is therefore forced to be subjected to life threatening situations. According to Onuoha this Penal Code provision is obviously a direct statutory endorsement of the customary laws that support violence against women. Conjugal abuse or wife-battering is regarded as a legitimate practice under customary law as re-echoed under the said section 55(1)(d) of the Penal Code. Under the Penal Code, a man is allowed to beat those under his care for correctional purposes, and the persons under a man's care include his wife.

In Nigeria, the police will not intervene in domestic quarrels, and do not consider wife beating as a crime, because, existing legal instruments do not treat wife abuse as a criminal offence. For instance, Penal Code Law Cap 89 laws of Northern Nigeria (1969) as cited by Odimegwu (2001) states that domestic quarrels is not an offence if committed by a husband for the purpose of correcting his wife. This law sees husband-wife relationship as being similar to parent-child relationship (Odimegwu, 2001).¹



In the Northern part of Nigeria, the Penal Code provides that the age of sexual consent for girls is 14. In Nigeria's bifurcated criminal law system, abortions are illegal regardless of duration of pregnancy. Both the Criminal and Penal Codes prohibit abortions performed at all stages of fetal or embryonic development from the time of fertilization, unless the abortion is performed to save a pregnant woman's life. While both Codes generally prohibit the performance of abortions, differences in the wording of the Codes, as well as in their interpretation, that have resulted in two slightly different treatments of the offense of abortion. Under the Penal Code abortion is generally prohibited but without prejudice to some exceptions. In northern Nigeria, the Penal Code defines rape to be sexual intercourse with a woman against her will or without her consent, or sexual intercourse with a girl under the age of 14. See section 282 (1)(a)-(b), (e) of the Penal Code. Furthermore, the Penal Code criminalizes consensual intercourse if the woman's consent was obtained through use of threats to her life or threats of physical harm. See Section 282 (1)(c).

In southern Nigeria, section 357 of the Criminal Code defines rape as "unlawful carnal knowledge of a woman or girl, without her consent". This includes consent obtained by force, fraud, threats, or "intimidation of any kind." Attempted rape is included within the definition.

Section 282 of the Penal Code states that mere penetration is sufficient to constitute the sexual intercourse necessary for the offense of rape. Similarly, section 6 of the Criminal Code defines "carnal knowledge" and "carnal connection").¹.

Individual state laws

The following 13 States have enacted related legislation – Anambra (Prohibition of Infringement of A Widow's and Widower's Fundamental Rights law); Cross River (Prohibition of Domestic Violence Against Women and Maltreatment of Widows law and Girl-Child Marriages and Female Circumcision [Prohibition] law); Ebonyi (Abolition of Harmful Traditional Practices Against Women and Children law); Edo (Prohibition of Female Genital Mutilation law and Inhuman Treatment of Widows [Prohibition] law); Ekiti (Gender Based Violence [Prohibition] law); Enugu (Prohibition of Infringement of Widow and Widower Fundamental Rights law); Katsina (A Law on Rape); Kogi (Violence Against Persons [Prohibition] Bill; Lagos (Domestic Violence Act); Niger (Anti Rape Law); Ondo (A Bill on Harmful Traditional Practices Affecting the Health of Women and Children and Related Matters); Oyo (A Bill Protecting the Inheritance Rights of Widows, Prohibition of Harmful Traditional Practices Against Widows and Other Related Matters); Rivers (Female Circumcision Law). LACVAW calls on its partners to continue to support the process of enacting anti-violence legislation at the State level, in order to realise the vision of comprehensive national legislation prohibiting all forms of violence against all Nigerians - wherever they find themselves in the federation¹.

The Plateau State House of Assembly passed the Gender and Equal Opportunities (GEO) Bill Monday 18th May 2015 and the Executive Governor assented to the law Wednesday 27th of May 2015. This brings to five the number of States that have passed the GEO Law. The others are Imo, Ekiti, Kogi, and Anambra.

Overview of State domestication of Laws and application of policies

STATE	GE O	CR A	VAP P	GBV	SAP 1325	HTP	OTHERS
ABIA		YE S					
ADAMAWA					YES		
AKWA IBOM		YE S					
ANAMBRA	YE S	YE S				Prohibition of Infringement of A Widow's and Widower's Fundamental Rights law	



BAYELSA		YES			YES		
BENUE		YES					
BAUCHI							
BORNO					YES		
CROSS RIVER		YES				Policies to address widowhood and FGM	Prohibition of Domestic Violence Against Women and Maltreatment of Widows law and Girl-Child Marriages and Female Circumcision [Prohibition] law);
DELTA		YES			YES		
EBONYI		YES				Abolition of Harmful Traditional Practices Against Women and Children law);	
EDO		YES				Prohibition of Female Genital Mutilation law and Inhuman Treatment of Widows [Prohibition] law);	
EKITI	YES	YES	Yes	GBV Prohibition law		FGM WIDOWS	GENDER AND DEVELOPMENT POLICY
ENUGU		YES				Prohibition of Infringement of Widow and Widower Fundamental Rights law	
FCT		YES			YES		
GOMBE					YES		
IMO		YES					
JIGAWA		YES					
KADUNA					YES		
KATSINA				Law on Rape			
KANO					YES		
KEBBI							
KOGI	YES		VAPP Bill		YES		
KWARA		YES					
LAGOS		YES		Domestic Violence Act)			
NASSARAWA		YES					
NIGER		YES		Anti			



		S		Rape Law)			
OGUN		YES					
ONDO		YES				Ondo (A Bill on Harmful Traditional Practices Affecting the Health of Women and Children and Related Matters);	
OSUN		YES	YES				
OYO		YES	YES			Oyo (A Bill Protecting the Inheritance Rights of Widows, Prohibition of Harmful Traditional Practices Against Widows and Other Related Matters);	
PLATEAU	YES	YES			YES		
RIVERS		YES			YES	Rivers (Female Circumcision Law).	
SOKOTO							
TARABA		YES					
ZAMFARA							
YOBE					YES		

Annex 7: Spotlight Initiative approach to conflict sensitivity

The Spotlight Initiative will take into consideration issues of conflict sensitivity. The objectives are:

To understand the VAWG/SGBV/HP/SRHR context where we are implementing our project/programme

To understand the interaction between our intervention and the VAWG/SGBV/HP/SRHR context
Spotlight will build flexibility into the project/programme design and implementation to avoid negative impacts and maximize the positive impact.

This will come from analyses/assessments that give information on the actors, history and dynamics as well as conducting impact assessments based on the analyses

The Spotlight Initiative will not realistically satisfy each tribe in Nigeria, because it has approximately 521 languages in Nigeria⁴⁸ and over 500 different tribes⁴⁹. It is however conflict sensitive to build in programme adjustment strategies (with interaction indicators) to tailor our interventions to the shifting differing tribal contexts.

Annex 8: Overview of glossary and terms used for the SI in Nigeria

⁴⁸ <http://www.studycountry.com/guide/NG-language.htm>

⁴⁹ <https://total-facts-about-nigeria.com/nigeria-tribes.html>



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Safe space

A safe space is a formal or informal place where women and girls feel physically and emotionally safe. The term 'safe,' in the present context, refers to the absence of trauma, excessive stress, violence (or fear of violence), or abuse. It is a space where women and girls, being the intended beneficiaries, feel comfortable and enjoy the freedom to express themselves without the fear of judgment or harm⁵⁰. The guiding principles for a Safe Space should be:

Leadership and empowerment of women and girls

Client/survivor centered

Safe and accessible

Community involvement

Coordinated and multi-sectorial

Tailored

Youth-friendly services

Youth-friendly services are services that all adolescents are able to obtain, and these services should meet adolescents' expectations and needs and improve their health. Youth-friendly services are able to effectively attract young people, meet their needs comfortably and responsively, and succeed in retaining young clients for continuing care. Many of the barriers that youth face in accessing health services are unique to young people due to their stage in life and associated special needs, perceptions, and abilities.

One stop center / Sexual Assault Referral Centre (SARC)

Sexual Assault Referral Centres (SARCs) are one stop centres where the police, traditional rulers and government ministries, work in partnership to address some of the critical problems.

Second Chance Opportunity

Second Chance Education - The education given to children, adolescents, young people, adults who never had formal education, who dropped out of school too early before they could acquire basic literacy because of multiplicity of reasons including poverty, child marriage, teenage marriage, disability and other vulnerable and marginalized groups. Second chance education gives them opportunities to acquire basic literacy and numeracy, find decent work, earn a living, contribute to their communities and societies and fulfil their potential

Domestic and Sexual violence response team (DSVRT)⁵¹

The team comprises of a group of professionals who provide prompt and professional response to survivors of Sexual and Gender base violence in Lagos state. The team comprises of the Mirabel Centre, Ministry of Women affairs and Poverty alleviation, Ministry of Education, Ministry of Youth and Social development, Women at Risk International Foundation (WARIF), Ministry of Education, The Nigerian Police Force, Lagos State Primary Health Care Board (LSPHCB), Office of the Public defender (OPD), Women, Law and Development Centre Nigeria (WLDCN), Women's Right and Health project (WRAPH), State Accountability and Voice Initiative (SAVI), Lagos State Ministry of Health and the Media. These professionals all work together to ensure that Sexual and gender-based violence is put to an end and professional services are provided to survivors of SGBV in Lagos state.

Referral Pathway

A referral pathway is a flexible mechanism that safely links survivors to supportive and competent services, such as medical care, mental health and psychosocial support, police assistance and legal/justice support.

⁵⁰ <https://www.unfpa.org/sites/default/files/resource-pdf/UNFPA%20UNFPA%20Women%20and%20Girls%20Safe%20Spaces%20Guidance%20%5>

⁵¹ <http://www.dsvrtlagos.org/>

Annex 9: Criteria for State Selection (Geographical Prioritization)

Methodology for State Selection

In order to prioritize in which states the Spotlight Initiative should be implemented in Nigeria, a comprehensive analysis was carried out. The methodology for the analysis was based on the following:

- Selection & analysis of key primary prevalence indicators with national coverage;
- Factoring in complementary considerations as secondary criteria including:
 - Geographic diversity (one state per geo-political zone)
 - Overall development situation (including existing Governance capacities, existence of service delivery and inclusive development)
 - Strong UN presence (Delivering as One or existing strong capacities)
 - Demonstrable government commitment (including financial commitment)
 - Investment **should not be** in humanitarian setting (but HDN is OK)
 - Existence of good practices and CSOs
 - Strong potential for success (for sustainability and further replication)

Based on these indicators:

Prioritize States that appear in bottom tiers of primary criteria (focus on worst performing States who are furthest behind within SGBV and HP) *whilst*;

Consider secondary criteria which identifies which states would have most to gain from concerted Spotlight Initiative Approach and have a higher likelihood of success (including both quick results and long-term sustainability).

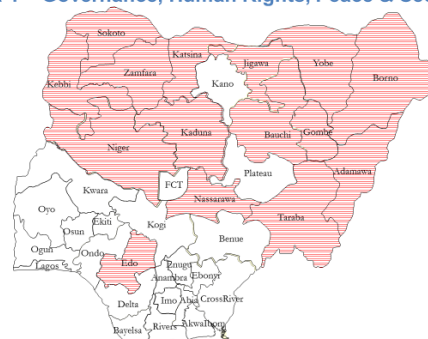
Taking stock in the UN's Comprehensive Development Analysis for the UNSDPF

In 2017, the UN in Nigeria conducted a comprehensive cross-cutting analysis of the overall development situation in Nigeria in order to better focus their work on leaving no one behind. The analysis looked at almost 30 nation-wide indicators across three results areas, using various proxy indicators to determine indicators within the three result areas.

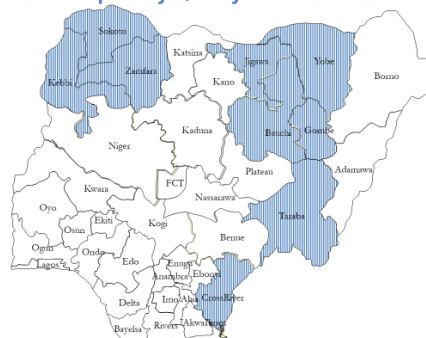
Under **Result Area 1: Governance, Human Rights, Peace & Security**, indicators include human security, corruption and inclusion of women in political processes.

Under **Result Area 2: Equitably Quality Basic Services**, indicators include children out of school, stunting, access to water, sanitation, immunization as well as ART coverages and birth attendance.

Result Area 1 – Governance, Human Rights, Peace & Security



Result Area 2 – Equitably Quality Basic Services





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Under *Result Area 3: Sustainable and Inclusive Economic Growth and Development*, indicators include GDP per capita and unemployment rates.

The result of this analysis was also used to identify the states in which the UN will deliver as one under the UNSDPF 2018 – 2022.

Overview of primary criteria

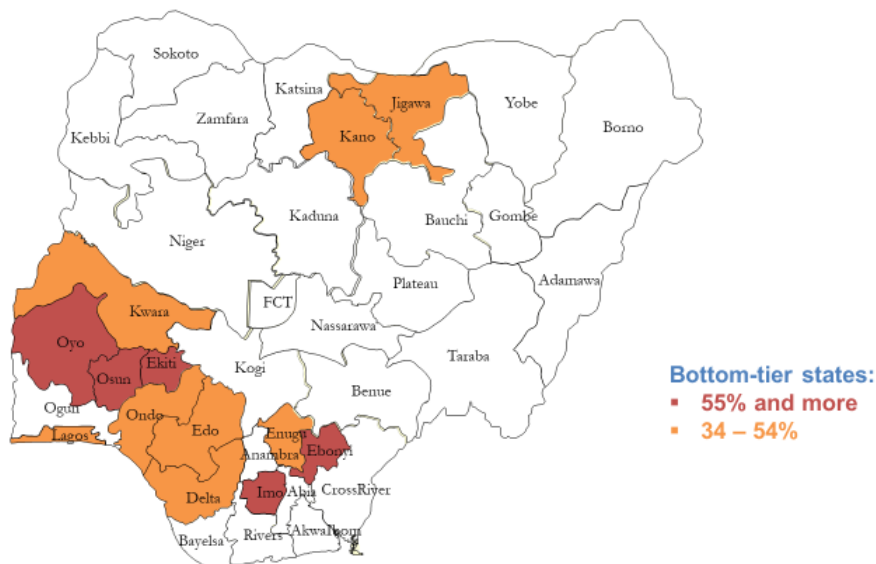
In order to carry out an analysis of the selected primary criteria, existing data from the NDHS and MICS was used looking at three key categories; FGM prevalence, Child Marriage rates and physical gender-based violence.

For **FGM prevalence ranking**, two bottom tiers rankings are normally used: 55% or more and 34-54%. Some 13 states fall into these two categories. As a result of this mapping, some 5 states were listed in the top tier and 8 states in the second tier.

Result Area 3 – Sustainable and Inclusive Economic Growth Development



Primary Criteria 1: FGM Prevalence



For **Child marriage prevalence** ranking, the main data set used was the percentage of women aged 20-24 who were married before 18. Two bottom-tier rankings were applied: 69% or more and 48-69%. As a result, 13 states fall into these tiers with 6 in the bottom and 7 in the second bottom tier. Additionally, the mapping also put an additional weight on those states with the highest percentage on child marriage before 15 (four states). It should be noted that these states are among the bottom states for the under 18 marriage as well.

For **physical gender-based violence**, data from 2013 NDHS was used. Two bottom-tier rankings are applied; one for states with more than 65% prevalence rates and one for states with 40-64%. As a result, some 15 states feature in the ranking.

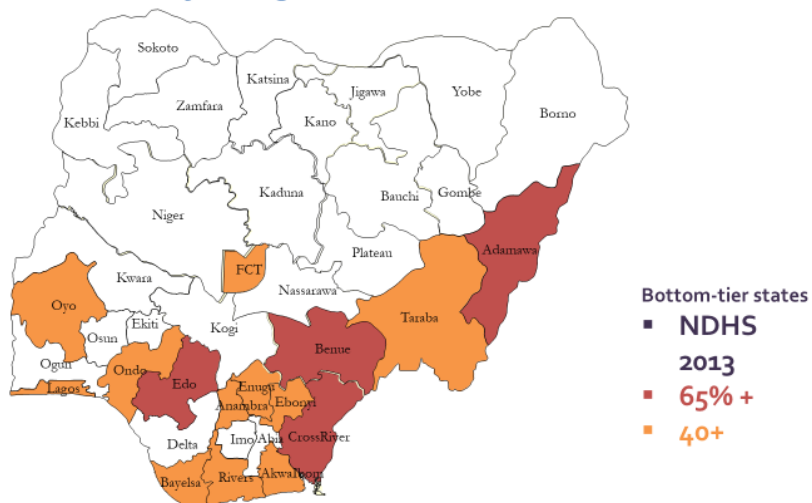


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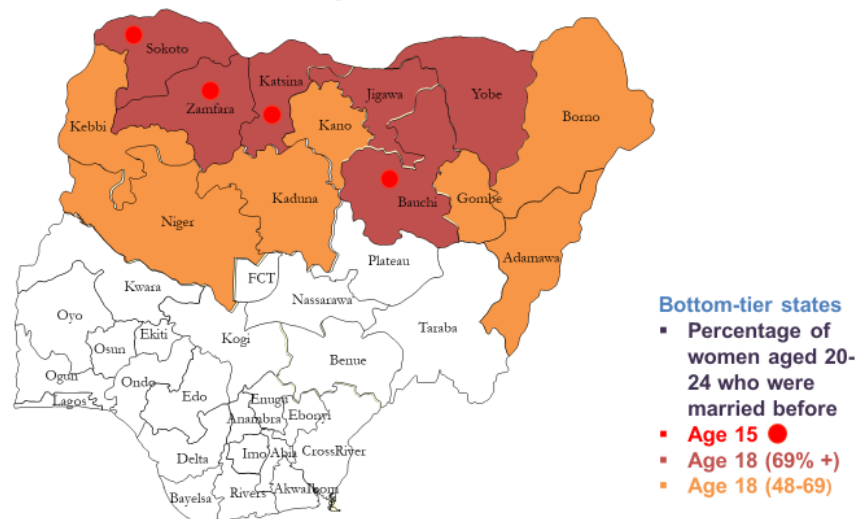
Initiated by the European Union and the United Nations



Primary Criteria 3: Physical gender-based violence



Primary Criteria 2: Child Marriage rates



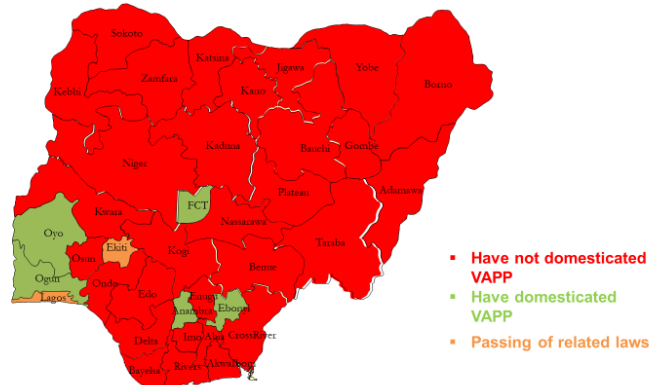


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For the secondary criteria; the initial mapping looked at domestication of the VAPP, the CRA

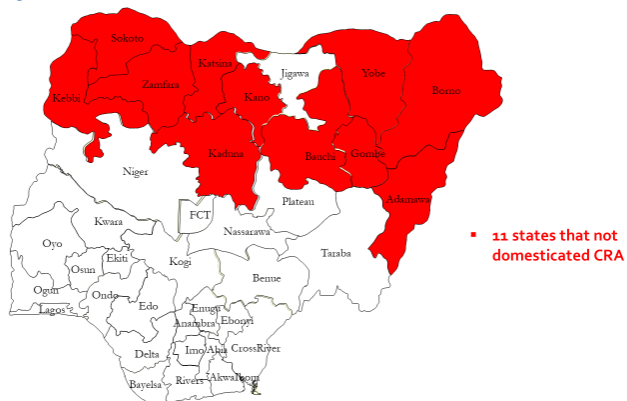
Secondary Criteria 1: Domestication of VAPP



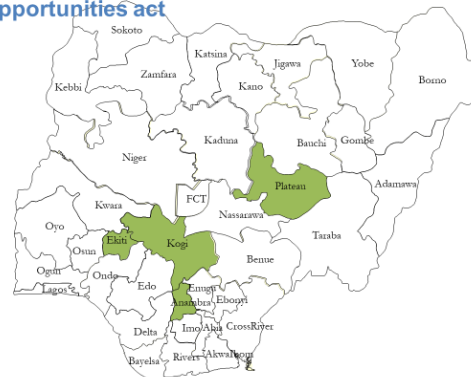
Secondary Criteria 2: Domestication of 1325



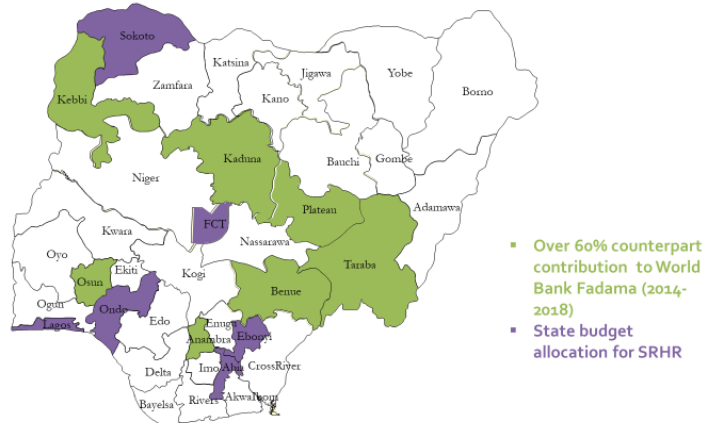
Secondary Criteria 1: Domestication of CRA



Secondary Criteria 2 Domestication of the gender and equal opportunities act



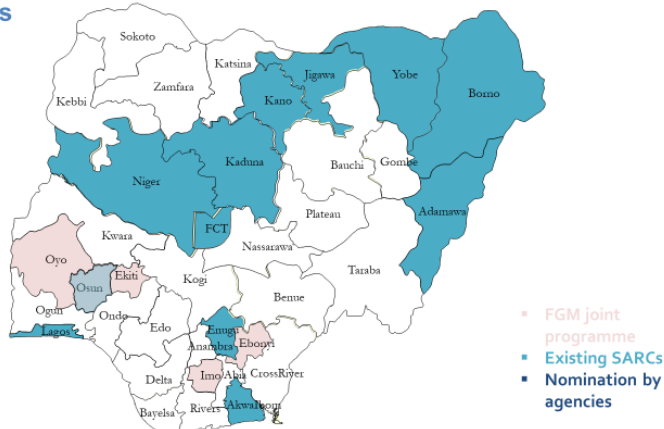
Secondary Criteria 3: Government financial buy-in



Another criteria looked at the Government financial buy-in as a mean to measure political willingness to engage in the programme. Proxy indicators used looked at states with over 60% contribution to the World Bank Fadama as well as state budget allocation for SRHR.

The final secondary criteria was the existence of programmes and good programmes to build on. Indicators included nomination by UN agencies, states targeted by the joint FGM programme as well as the overview of existing SARCs across Nigeria.

Secondary Criteria 4: Existence of programmes & good practices





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Ranking

- ☐ Top 2 per geo-political zone
- ☐ Composed indicator based on ranking of all criteria

Based on these criteria, a ranking was made which outlines two potential states per geo-political zone. The Box below outlines the recommended initiative and the rationale for selection.

North-West	North-Central	North-East	South-South	South-East	South-West
☐ Sokoto ☐ Kano	☐ FCT ☐ Niger	☐ Bauchi ☐ Adamawa ☐ Yobe	☐ Cross-river ☐ Akwa Ibom	☐ Anambra ☐ Ebonyi	☐ Lagos ☐ Oyo

Recommended Initiatives & Rationale

Zone	State	Rationale	
NC	(FCT)	- Existing good practices to be supported/scaled-up/replicated - Current active DaO	Government cooperation, political & financial buy-in
NW	Sokoto	- Current active DaO state - Appears in bottom tier situation for overall development situation - Appears in bottom tier for prevalence of child marriage	- Appears in bottom tier for lack of protective legal framework - State Government cooperation, political & financial buy-in
NE	Adamawa	- Appears in bottom tier for all overall development situation - Appears in bottom tier for prevalence of child marriage - Appears in bottom tier for lack of protective legal framework - Appears in bottom tier for physical violence	- Solid UN presence - State Government cooperation, political buy-in and high-level political support - Potential to pilot interventions across the HDN - Existing good practices to be supported/scaled-up/replicated
SE	Ebonyi	- State Government cooperation, political & financial buy-in - Existing good practices to be supported/scaled-up/replicated	- Appears in bottom tier for physical violence - Appears in bottom tier for FFM
SS	Cross River	- Appears in bottom tier for physical violence - Current active DaO state	- State Government cooperation & political buy-in - Appears in bottom tier for lack of protective legal framework
SW	Lagos	- Current active DaO State - State Government cooperation, political & financial buy-in - Existing good practices to be supported/scaled-up/replicated	- Appears in bottom tier for FFM - Appears in bottom tier for physical violence



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Annex 10: Institutional Mechanisms in Nigeria

List from UN Women Global Database

Title	Type of Measures	Form of Violence	Brief Description	Source of Info
National Bureau Of Statistics	Institutional mechanisms, Research and statistical data > Other research and statistical data	Violence against women and girls	The Federal Government of Nigeria has established an Agency, known as the National Bureau of Statistics (NBS), responsible for collecting, compiling, analyzing, interpreting, publishing and disseminating statistical information relating to the socio-economic life and conditions of the people of Nigeria. These include matters relating to gender based violence that are population-based and regular national surveys focused. The Bureau coordinates the development and management of official statistics in all the Federal Ministries, Departments and Agencies, State Governments Statistical Agencies and Local Government Councils.	Response of the Government of Nigeria to the questionnaire on violence against women 2011
National Agency for Prohibition of Trafficking in Persons and other Related Matters	Institutional mechanisms	Trafficking	The National Agency for Prohibition of Trafficking in Persons and Other Related Matters (NAPTIP) is a Federal Government Agency established to fight trafficking in persons using the Trafficking in Persons (Prohibition) Law Enforcement and Administration Act of 2003. This Act prohibits and prescribes punishment for trafficking in persons (particularly women and children) and other related matters and also makes provision for taking charge, supervising, controlling and co-ordinating the rehabilitation of trafficked persons and victims of child labour.	Response of the Government of Nigeria to the questionnaire on violence against women 2011



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National Centre for Women Development	Institutional mechanisms	Violence against women and girls	The National Centre for Women Development was established in 1997. The Centre's mandate is to promote women's advancement through research, training and documentation and proactively work towards empowering Nigerian women socially, economically and politically for sustainable national development. The Centre also deals with issues related to violence against women.	Response of the Government of Nigeria to the questionnaire on violence against women 2011
National Human Rights Commission	Institutional mechanisms	Violence against women and girls	The National Human Rights Commission was established by the National Human Rights Commission Act of 1995, in line with the United Nations General Assembly Resolution No. 48/134 of 20 December 1993, which enjoins all Member States to establish National Human Rights Institutions relative to their environment. The Act empowers the Commission to target the poor and vulnerable and other victims of human rights abuse and violations, by offering services free of charge. It is non-technical, less time consuming and more accessible to the public. The Commission has also facilitated the establishment of the Network on Monitoring and Documentation of Human Rights situations in Nigeria which is made up of the Commission and Civil Society Organizations. The Network monitors the state of the human rights situation in Nigeria.	Response of the Government of Nigeria to the questionnaire on violence against women 2011; Statement of Nigeria at the 54th session of CSW (2010)
Federal Ministry of Women Affairs and Social Development	Institutional mechanisms	Violence against women and girls	The Federal Ministry of Women Affairs and Social Development (FMWASD) was established by Decree No. 30 of 1989. The broad mandate of the Ministry is to advise the Government on gender and children issues and issues affecting persons with disabilities and the elderly. The Ministry also initiates policy guidelines and leads the process of ensuring gender equality and mainstreaming at both the national and international levels.	Response of the Government of Nigeria to the questionnaire on violence against women 2011



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Annex 11: Spotlight Initiative Team in Nigeria

Mr. Edward Kallon – UN Resident and Humanitarian Coordinator
Mr. Ketil Karlsen – Head of EU Delegation and ECOWAS

Mrs. Comfort Lampitey – UN Women Representative
Mr. Samuel Bwalya – UNDP Country Director
Mr. Eugene Kongnyuy – UNFPA Country Director a.i
Mr. Mohamed Malick Fall – UNICEF Representative
Mr. Yao Ydo – UNESCO Regional Director
Mr. Kurt Cornelis – EU Head of International Cooperation
Mrs. Isabel Candela – EU Head of Section
Mrs. Laolu Olawumi, Programme Manager
Mr. Kwasi Amankwaah – UN Head of Resident Coordinator's Office
Mrs. Milen Kidane – Chief Child Protection, UNICEF
Mrs. Olasunbo Odebo – Child Protection Specialist, UNICEF
Mrs. Patience Ekeoba - National Programme Officer, UN Women
Mrs. Onyinye Ndubuisi - Programme Analyst HIV/AIDS, Gender and Human Rights, UNDP
Dr. Zubayda Abubakar - Adolescent Sexual and Reproductive Health/HIV Programme Analyst, UNFPA
Mrs. Olawunmi Laoluakande – GBV Analyst, UNFPA
Mrs. Ngozi Amanze - Programme Officer – Education, UNESCO
Mr. Hugue Charmie Ngatta Ngandeu – Programme Specialist, UNESCO
Mrs. Anouk Jeanne Heili - UNWOMEN
Dr. Eleanor Nwadinobi - Consultant
Mrs. Elina Faber Silén - Special Assistant to the RC, UN

Annex 12: Draft ToR and Criteria for the Civil Society Reference Group in Nigeria

Role of the Country Reference Group

The main objective of the Civil Society Reference Group is the following:

To provide advice to the implementation of the Spotlight Initiative Country Programme in Nigeria with the expertise, perspective and knowledge of civil society and to engage as advocates and partners.

The main tasks of the Civil Society Reference Group are the following:

Participate in regular consultations with various stakeholders;

Provide advice on current EVAWG in Nigeria as well as strategic direction of the Spotlight Initiative and relevant policy issues;

Provide relevant information, analysis and lessons learned that could feed into programming;

Suggest further linkages and outreach to relevant Civil Society organizations in Nigeria;

Review the annual workplans and deliverables for the Country Programme Document;

Serve as partners in communication and advocacy initiatives.

Criteria for the Country Reference Group in Nigeria

The group should consist of maximum 10 - 15 individuals

At least half of the members should be from CSOs who participated in previous consultations

The composition of the group must be mindful of geographic balance

Strong adherence to leaving no one behind

All members should have expertise and proven experience of EVAWG in Nigeria

The group should include members from faith-based organizations

Include leaders of networks

At least 25% from women's rights movements

The group should include men and boys' organizations working on EVAWG

Members should have no formal affiliation with Government or political parties

Attitude and ability to participate

Participation is not remunerated
Financial transparency and credibility of the organization

Avoiding and managing potential conflicts of interest

Outmost efforts and measures will be taken to avoid and/or manage any potential conflict of interest from the CS representatives (if for example the organization they are affiliated with or are an implementing partner or grantee of the Country Programme). For example, it will be ensured that any CSO representative with a conflict of interest on the issue discussed excuses him/herself from that particular part of the meeting (and this is recorded).

Annex 13: Members of the Government Committee

Federal Ministry of Health;
Federal Ministry of Education;
Federal Ministry of Justice;
SSSAP-SDGs;
National Bureau of Statistic; and
National Human Rights Commission.

ⁱ The focus states have been nominated based on a number of criteria, listed in **Annex 9: Criteria for state selection**

ⁱⁱ The full criteria set for selection of the focus states includes: *primary criteria* (i.e., 1) rate of gender-based violence; 2) rate of harmful practices: 2a) child marriages and 2b)FGM, and *secondary criteria* (i.e. 3) level of Government commitment and political and financial buy-in towards EVAWG; 4) presence and capacity of the UN Team, 5) presence and capacity of CSO partners to deliver at the local level (including enabling environment in particular for civil society), 6) Existence of programmes and good practices that could be scaled up and produce quick positive results, and 7) Legal environment including the domestication of VAPP, CRA and Gender Equality Bill. In the selection of intervention sites, the most marginalized of women and girls, including those who face intersecting forms of discrimination or multi-deprivation, such as those with disabilities, women and girls living with HIV/AIDS, the poorest and those living in most difficult to access communities will be targeted to ensure that **no one is left behind**.

ⁱⁱⁱ See **Annex 6**: Overview of Legal Situational Analysis including domestication of laws per state

^{iv} Relevant frameworks and policies for the Spotlight Initiative include VAPP, CRA, National Policy and Plan of Action on Elimination of FGM, National Gender Policy and the GBV/HIV Intersection Plan of Action and National Strategic Plan to End Child Marriage.

^v Relevant MDAs include Ministry of Budget and Planning; Ministry of Women Affairs and Social Development; Ministry of Health; the Office of the Vice President; National Human Rights Commission; National Agency for the Control of Aids; State Governments; Ministry of Education, Nigerian Police Force, Judiciary; Ministry of Justice; and OSSAP SDGs.

^{vi} See Annex 3: FACT SHEET ON PREVALENCE OF VAWG/SGBV/ HP and SRHR in Nigeria

^{vii} Data is from the NDHS 2013

^{viii} According to the 2014 Violence Against Children Survey

^{ix} Further analysis can be found in Annex 3 – Snapshot of /SGBV/HP and SRHR in Nigeria

^x See Annex 7: *Spotlight Initiative approach to conflict sensitivity*

^{xii} The Essential Service Package is a guidance tool identifying the essential services to be provided to all women and girls who have experienced gender-based violence, including services that should be provided by the health, social services, police and justice sectors. This package also provides guidelines for the coordination of these services.

^{xiii} *Annex 8: Overview of glossary and terms used for the SI in Nigeria*

^{xiv} The One PHC per ward programme was initiated by the Nigerian Government in 2016 and is set to establish one Primary Healthcare Centre in each ward across the country. Led by the Ministry of Health, the programme aims to culminate in about 10,000 facilities. The goal is to provide local level facilities that are functional, service-ready and able to provide quality services at affordable cost.

^{xv} UN Guidance on data privacy, ethics and protection https://undg.org/wp-content/uploads/2017/11/UNDG_BigData_final_web.pdf

^{xvi} Appendix 1 – Spotlight Initiative Process Report

^{xvii} The Strategy for Gender Based Violence Prevention, Mitigation and Response in the Humanitarian Context is drafted by the GBV Sub Sector Working Group in Nigeria and describes and analyses the GBV situation in northeast Nigeria, including prevention, mitigation and response in terms of medical, case management and psychosocial support, safety and security, mental health, access to justice and rule of law (RoL) and coordination, indicating the actual needs, challenges and response.

^{xviii} Nigeria is one the global pilots or early adapters of the UNINFO, an online system for reporting, monitoring and oversight.

^{xix} To ensure data privacy, ethics and protection, the Initiative will follow relevant UN guidance including the UNDG Guidance Note on Big Data for Achievement of the 2030 Agenda and WHO safety and ethical guidelines for conducting research on domestic violence.

^{xx} In line with the Spotlight Initiative KM Strategy.

^{xxi} <http://www.antitraffickingreview.org/index.php/atrjournal/article/view/64/62>