# **EDUCATION AS A VACCINE AGAINST AIDS (EVA)**

**STRATEGIC PLAN** (2010 – 2014)

# **FOREWORD**

A strategic planning process for any organisation is designed to support a systematic approach to determining the issues and needs for attention and action, and the necessary resources, structures and systems that will enable the organization implement the agreed priority actions. It also include stock taking and drawing from the inspiration, experience, expertise and collective wisdom of the leadership (management and board) and critical stakeholders to define its future more concretely. In addition, it provides answers to critical questions including who are we and who/what should we be, how to get to the destination we have defined, what resources (human, financial, materials and technological), do we need and how do we get the resources, who do we need to work or partner with to achieve our vision and mission and what results do we desire to achieve. These are the questions that the 2<sup>nd</sup> Strategic planning process of EVA set out to answer. The process of developing the 2<sup>nd</sup> strategic plan (2010 – 2014) for Education As Vaccine Against AIDS is a fairly long one, but its outcome no doubt justified the end. It is an outcome of a rigorous but systematic process of consultations, brainstorming, examinations and weighing different options for growth and development and consensus building on the best way forward. EVA is desirous of contributing to the achievement of National and Millennium Development Goals (MDGs) and national health and socio-economic development goals by initiating, developing and implementing programs that respond to health and socio-economic concerns in Nigeria. The attainment of these goals provides the rationale for the process that produced this plan.

In 2003, EVA produced its maiden (2004 – 2008) strategic plan which articulates its vision and mission strategic focus, goals and strategic objectives, main activities, human resource requirements, organisational structure and resource mobilisation. The plan guided organisational and program management over the past five years and a review of the implementation of the plan revealed demonstrable evidence of growth and transformation over the past five years. There is no doubt that EVA has grown and expanded in size and influence, a gain that must be consolidated and surpassed for a better future. With the expiration of the plan, the stage was set for a review and development of the second strategic plan. A new strategic plan is not only an outcome of an expired plan but it also takes into consideration a number of other factors especially changes in the internal and external environments of the organisation especially emergence of new alliances, changes in donor funding policies, emerging new priorities, global economic and political developments, policy changes at all levels of government (National, State, LGA), dynamisms introduced by disease and other socio-economic conditions and new facts resulting from research outcomes. Nigeria is one of the countries with poor health and social economic indices despite renewed efforts at accelerating responses in all the sectors of the economy. The profile of the country is manifested in huge disease burden with children, young people and women as the most vulnerable, high poverty level, high maternal mortality, collapsing health and social infrastructure, weak support systems for children, women and young people to access socio-economic information and services and huge demands for improved condition of service by organisation's personnel in order to attract and retain highly skilled personnel within the industry. EVA accepts these challenges and is determined to remain competitive, effective and sustainable in Nigeria.

It is therefore imperative for EVA to reposition itself to respond to these challenges in the years ahead by generating additional resources (through grants and other sources) for its operations, design and manage innovative and relicable programs/projects, develop unique capacity and capabilities in its area of focus, expand its coverage of Nigeria, increase demand for its services, be able to attract and retain highly skilled staff, remain competitive, explore new ways of capturing achievements, learning from its experience, publish and disseminate outcomes of its work and survive in the face of economic meltdown. It is in realisation of this that EVA initiated the process that produced its second strategic plan. EVA is grateful to COMPASS project for the support provided to facilitate the strategic planning process. We are happy that the plan is a true reflection of our individual and collective aspirations. We commend management and staff, members of Board of Directors of EVA and partners for demonstrating commitment to the process and outcome of this

effort. I call on our donors, government and partners to continue to support EVA in implementing and achieve the goals and strategic objectives of this plan.

Chair BOARD OF DIRECTORS (EVA) **Executive Director EVA** 

# INTRODUCTION

Education as a Vaccine against AIDS Incorporated (EVA) is a non-governmental organization based in Abuja and formed in 2000 by two Nigerian women. EVA was registered in Nigeria with the CAC in 2001 and in the United States as a 501C3 organization. EVA was established to combat the rising incidence of HIV. The organization was found based on the premise that education is the key to effective prevention. EVA utilizes informal and formal educational initiatives to address the numerous factors that fuel AIDS epidemic in Nigerian communities. EVA's principal's target audience is Young People and Youth Living with HIV/AIDS. The vision of EVA is a Nigerian society where all youth have rights and access to reproductive health and HIV&AIDS information and services while its mission is to establish systems and structures for young people to make responsible decision about their development using youth friendly approaches to provide information, services as well as conduct advocacy initiatives in partnership with other affinity groups.

In the last five years, the program focus and operations of EVA has expanded significantly and this places demands on the organisation in terms of staffing (number and mix of skills and expertise), organizational structure, coverage and mobilization of resources to meet with increasing demands for its services. EVA original focus is HIV&AIDS focusing on young people, one of the Most At Risk and Vulnerable Population (MARP), however, the changes and demands of the external environment necessitate a review of EVA program scope to increase the mix of programs and services. In addition, EVA has also developed unique competencies in a number of technical areas of its focus, thus enhancing its emergence as an important national resource that had over the years contributed knowledge, skills and expertise to supporting other organisations in developing and implementing innovative programs. EVA also partnered and collaborated with other organisations in contributing to improved environment for HIV&AIDS especially as they affect young people in the FCT and Benue, Nasarawa and Cross River states. EVA needs to demonstrate that the expansion of its program and services is a conscious effort at increasing it impact and effectiveness in Nigeria, thereby contributing to the achievement of national sectoral growth and development especially in the area of health.

In this case, EVA needs to re-appraise itself and agree on build consensus around repositioning efforts that enable it respond to national priority issues and specific and general needs of its diverse internal and external clients. It is within this context that a strategic review and planning process was designed and conducted, culminating in the development of the  $2^{nd}$  five year (2010 – 2014) strategic plan. The process of developing the plan was highly involving and participatory with active engagement and participation of the Board, management, staff and partners in the external environment to reason together and collectively determine the future of the organisation.

## The process of developing EVA 2<sup>nd</sup> strategic plan development

EVA's strategic plan 2010-2014 was designed and developed through a careful, painstaking and diligent process which articulated its vision and mission, options for growth and development, strategic focus, goals, strategic objectives main activities and indicators as well as framework for partnership, resource mobilization and monitoring and evaluation. The process involved the following:

# i) Consultative meetings involving the Executive and Management

The commitment of the leadership of an organisation to a strategic review and planning process is a very critical step in facilitating and enhacing a good outcome especially in ensuring commitment to its eventual implementation. As such series of consultations were held involving the leadership (Executive and Management) of EVA with the purpose of building a common understanding of the process, clarify expectations, discuss and agree on the implications of the process (in terms of attendant changes that will occur) and the need for EVA management to position itself to manage the change through decisive and transparent actions that reduce resistance and facilitate smooth transition and rekindling of hopes and sense of belonging in the staff

# ii) Review of the implementation of 1st EVA Strategic planning and presentation of findings

This involved a rapid appraisal of the implementation of the 2<sup>nd</sup> EVA Strategic Plan (2003 – 2008) and its purpose was to determine the extent of the implementation of the Strategic Plan and document specific changes in EVA arising therein. The findings of the assessment were presented at a dissemination meeting attended by all staff. The presentation highlighted specific accomplishments recorded under each strategy including institutional capacity building, resource mobilization, service delivery, advocacy, and information and education. In addition, some of the overall changes attributed to the implementation of the plan included the adoption of a leadership and management structure, infrastructural development, increase in mix (number, skills, expertise) of EVA human resources, expanded scope of programs and services, establishment of an effective Management Information and Evaluation Systems, implementation of a resource mobilization plan resulting in increase in EVA financial resources and good accounting and financial management system and establishment of viable management systems. However, the presentation also highlighted some challenges which were considered along with the findings of a rapid organizational assessment in arriving at the current strategic plan.

## iii) Staff awareness and Readiness meeting

One of the documented findings of barriers to the implementation of organisation's strategic plan or lack of accomplishment of the plan's goal and strategic objectives is the peoples' finding. This means the inability of the leadership/management to involve and engage the staff in a meaningful manner by giving them a voice, obtain their perspectives, discuss the implications of the process and collectively explore ways of managing the process in a mutually benefiting way. In order to remove this barrier, a one day awareness creation/readiness meeting was held with staff of EVA. The meetings served as a forum to formally present the scope of work including anticipated changes arising from the process, discuss, clarify issues and expectations of the staff of EVA, assess the level of readines, identify and remove likely obstacles in addition to clarifying individual and collective roles and responsibilities. The meeting also facilitated building the commitment of staff to the process and outcomes.

## iv) Assessment of EVA internal and external environments

The purpose was for EVA to re-appraise itself and establish sound basis for action. Using a two pronged approach, the exercise documented strengths, weaknesses, opportunities and threats in the internal and external environments of EVA and what issues it (EVA) should be

responding to in the next five years and how it should respond. The presentation on the implementation of the first strategic plan (2004 – 2009) revealed a number of strengths and gaps. Some of the changes (strengths) included the adoption of a leadership and management structure, infrastructural development, increase in mix (number, skills, expertise) of EVA human resources, expanded scope of programs and services, establishment of an effective Management Information and Evaluation Systems, decentralisation of operations, implementation of a resource mobilization plan resulting in increase in EVA financial resources, improved accounting and financial management system, expansion of donor base, establishment and implementation of viable management systems. In addition, the presentation documented to a reasonable extent the accomplishment of program and service delivery goals and strategic objectives including provision of life skills to 1500 young people in public secondary schools in FCT and Nasarawa, provision of HIV information to 6,796 callers, aged 20 – 35, through the national hotline, 1000 OVC reached with life skills education and psychosocial support, implementation of a workplace HIV/AIDS program for Texaco Nigeria in 5 states in collaboration with YEF and trained 524 young girls (street children, out-of-school and sex-workers) on sexual health issues and business development through WISE. Others include establishment of a youth friendly HCT centre in Benue state, expansion of HCT services with increased coverage of young people to access HCT services, implemented an HIV awareness seminar for 97 parents from a rural community, uniformed personnel, Islamic and Catholic groups, worked with the College administration (College of Education, Akwanga) to develop a workplace HIV policy and advocated and supported the implementation of the FLHE curriculum in FCT schools. These accomplishments/strengths were also validated through another assessment using structured questionnaire complemented by EVA staff and additional qualitative information obtained from key stakeholders in FCT, Benue and Nasarawa states.

However, both assessments also documented a number of gaps including difficulty in coordinating the inputs of board members based outside Nigeria, inability to fill the position of Programs Director due to inadequate financial resources, low technical capacity of team leaders and core staff, inadequate office space, equipment and other facilities and high staff attrition. Others include weak evaluation mechanisms, lack of resources to implement staff development plan, low funding arising from shift in donor focus/priorities, inadequate capacity for documentation, over-stretching of the capacity of the Executive Director, weak capacity in financial management, monitoring and evaluation, human resources and inability to penetrate the public sector. The assessment lent credence to determining and defining in concrete terms with active participation of partners in the external environment what priority issues should EVA focus on, who should it serve/continue to serve, structure and resources required. It also obtained information on what should change (programs, governance, human resources,) and what impact it will make, how to re-organise to respond to issues/developments in the external environment and how to build a sustainable organisation that is responsive to change. The findings, conclusions and recommendations from the assessment provided sound and practical basis for discussing and deciding EVA's strategic options and needed changes for the future.

# v) Leadership envisioning (strategy formulation retreat)

The retreat which was for the leaders (Board members, Executive, Management and select senior staff) of EVA was a participatory platform to the determination of the issues and agenda for EVA's action during the strategic plan period, and agreeing the structures that will enable the organization implement the agreed agenda. The retreat served the unique opportunity for EVA leaders to envision together the future of the organization, coming to conclusion on what they collectively judge to be the best interest of the organization without the influence of outsiders but with consideration for the expressed concerns, perspectives and expectations from external stakeholders obtained through the assessment

exercise. The 2 day retreat achieved the goal of formulating the overall strategy for EVA for the next five years (2010-2014) that will strengthen the relevance, effectiveness and sustainable impact of the organisation. The output of the retreat was a skeleton strategic plan dealing with the vision, mission, goals and broad strategic objectives for the plan period as well as the implications for EVA human resources development, organizational structure, and resource mobilization. This document guided discussions and consensus building at an enlarged consultative strategic planning workshop.

#### vi) Participatory strategic planning workshop

This 3 day activity provided a participatory and enabling platform for joint development of EVA 5 year strategic plan and it was to further define, discuss and agree the action implications of the vision, mission and the goals and strategic objectives that were adopted at the leadership envisioning retreat. The draft plan EVA was shared with selected partners for information, feedback, validation, expansion and for dialogue on collaboration and partnership in implementing the plan. The main output of the workshop was the first draft of the five-year strategic plan which was further refined by the Consultant using ideas and information generated at the workshop.

## vii) Production, presentation, finalisation and refinement of plan

This is stage of putting together and harmonizing all ideas and information generated at the strategic planning workshop to produce the first draft of the strategic plan. The first output was the tabular version which was presented to the board, management and staff of EVA for discussions, further validation, expansion and refinement. The feedback at the stage was used to produce the second draft which is the comprehensive plan with the necessary preface, background information, justification, approved goals and strategic objectives (with indicators), main activities and monitoring and evaluation plan.

# ANTICIPATED CHANGES IN THE EXTERNAL ENVIRONMENT

An important consideration in a strategic planning process is the situation, developments and trend in the external environment that will impact either positively or negatively on an organisation. These are a host of factors beyond the control of the organisation but that will influence its choice of direction and action, organizational structure and internal processes. There is converse relationship between the organisation and its ever changing external environment. These are further categorized into economic, social, political, technological and ecological factors and they form the basis of the opportunities and threats that an organisation faces in its competitive environment. Despite the fact that EVA may not have control over these factors, however, it needs be aware of them and strategically position itself to pro-actively respond to them by instituting and implementing responses/mechanisms that neutralize or minimize their effects on the organisation, its programs and services to the extent possible. The table below shows the list of anticipated developments in the external environment which EVA must keep in focus and formed sound basis for the strategies and approaches articulated in this plan

GLOBAL	NATIONAL	STATE	COMMUNITY	LOCAL GOVERNMENT
Positive:	• Change in the	Positive	POSITIVE FACTORS:	Negative:
Change in ideal of political entities	national policy	<ul> <li>More NGOs working with</li> </ul>	• community or	• Frequent change in
in donor countries (PEP <b>FA</b> R)	environment	young people.	stakeholder	leadership
<ul> <li>Increase in funding for EVA</li> </ul>	<ul> <li>Political</li> </ul>	<ul> <li>Staff will be motivated to</li> </ul>	acceptance	<ul> <li>Lack of funding at the</li> </ul>
Building the capacity of local NGOs	environment:	increase capacity in project	<ul> <li>More funding to</li> </ul>	local government level
to be able to implement better.	Priorities may	implementation.	enable us provide	<ul> <li>Communal clashes and</li> </ul>
<ul> <li>Nigerian's lack of development</li> </ul>	change with	<ul> <li>Government policies (SACA)</li> </ul>	more services	conflict (political)
attracts more developing agencies.	emergence of new	in favor of NGOs.	• More media	<ul> <li>Placement of people</li> </ul>
Global fund	government agenda.	• SACA policy of funds	coverage or	with little or no
Negative:	• Shift in vertical	accessibility will depend on	activities at	technical expertise –
Global meltdown- cooperate and	program to more	involvement in CISHAN	community level	weak capacity
individual donations have come	integrated program	activities.	NEGATIVE FACTORS:	<ul> <li>Poor political will</li> </ul>
down	(revitalization of the	FCT committee on AIDS will	<ul> <li>Most people usually</li> </ul>	<ul> <li>Strike actions</li> </ul>
<ul> <li>Availability of funds such as Global</li> </ul>	primary health care)	soon be an agency.	expect material	• Truancy and lack of
fund is reducing	• Funding: Donor	<ul> <li>Funds can be accessed in FCT</li> </ul>	things and money	commitment to work
Change in strategy and program	organizations	Negative	from NGOs and	<ul> <li>Poor monitoring of</li> </ul>
focused based on change in	funding interest may	<ul> <li>Increased ccompetition</li> </ul>	when this is not	activities
political ideologies of donor	change e.g. NACA etc	<ul> <li>EVA is perceived as a "non</li> </ul>	provided, makes	<ul> <li>Wrong perception of</li> </ul>
countries	• Human resource:	-indigenous" NGO.	them loose interest	NGOs by LGA staff (NGO
Deflation of dollar, GBP affect the	Existence of better	<ul> <li>Most Government officials</li> </ul>	on any activity for	as money making
value of money we have and hope	opportunities could	own NGOs and increase	them.	ventures)
to get	lead to high staff	politicking.	• Competition from	Positive:
Conflict in the middle east and	turnover	These officials will always	other NGOs who also	1. Favorable policy
fallen fuel prices		channel funds to their "NGOs".	give the same	environment and
			services EVA is	political will support.
			giving.	

# **SWOT PROFILE OF EVA**

The analysis of the Strengths, Weaknesses (internal environment), Opportunities and threats (external environment) of an organisation is an important element of a strategic review and planning process and it is a technique through which managers create a quick overview of an organisation's strategic situation. It is also a logical framework intended to help managers (including staff and to a reasonable extent partners) thoughtfully consider the organisation's internal capabilities and use the results to shape strategic options. The import of this information is to enable the organisation proactively determine, discuss, consider and build consensus around general and specific actions to reinforce the strengths and achieve further improvement while also strategizing to maximize the opportunities presented to an advantage. On the other hand, information on weaknesses and threats is to inform measures that are required to strengthen the weak areas and overcome the threats to the extent possible. SWOT profile of EVA as presented below is an outcome of responses from respondents of the organizational assessment and the reflections at the leadership envisioning retreat. The ideas generated are to guide consensus on specific strategies and actions for implementation in the plan period.

STRENGTHS	WEAKNESSES	OPPORTUNITIES	THREATS
Capacity to implement projects	Poor implementation of organizational	Increased donor interest in	Politics involved in NGO
<ul> <li>Ability to work with young people as well</li> </ul>	policies	program areas of EVA	work in the country as
as public and private health service	Delay in communication	<ul> <li>Community acceptance and</li> </ul>	well as at the state level.
providers	Taking on impromptu assignments	partnership	Stiff competition from
<ul> <li>Dedicated, hardworking staff with</li> </ul>	(ad-hoc operations)	<ul> <li>Improved policy</li> </ul>	NGOs without
outstanding technical expertise	Staff welfare not commensurate to	environment	commensurate
<ul> <li>Free/enabling work environment</li> </ul>	assigned workload	<ul> <li>Board members residing</li> </ul>	expertise in youth
<ul> <li>Functional offices in Benue , Nasarawa</li> </ul>	Occasional staff motivation	outside the country	programming
and Cross River states and FCT	<ul> <li>Weak dissemination of information on</li> </ul>	<ul> <li>Increased acknowledgement</li> </ul>	<ul> <li>Negative mind set in</li> </ul>
<ul> <li>Internal drive to accomplish her mission</li> </ul>	organizational activities	of EVA capacity and	some state that EVA is
and vision.	<ul> <li>Inadequate skilled staff at all levels</li> </ul>	capabilities	"foreign"
<ul> <li>Skilled manpower who are always</li> </ul>	Not so conducive work environment	Demand for EVA programs	Wrong perception of
working as a team and as a family with all	Inadequate motivation for community	and services	EVA being
vigour.	members involved in EVA activities	<ul> <li>Increased cases of child</li> </ul>	inexperienced
<ul> <li>Energetic and hard working Executive</li> </ul>	Difficulty coordinating between board	abuse	
Director and leadership able to show and	members living abroad and those		
provide clear direction	in-country		
Good community entry strategies and	The apparent limitations of the name of		
commitment to meeting community needs	the organisation - depicting EVA as a		
and working with communities	one-disease NGO.		
Good advocacy skills	Not being proactive in "marketing" and		
Ability and skills in initiating programs	creating awareness of its activities		
that meet the needs of the target	Weak monitoring and evaluation of its		
population	activities and publisicing results		
Good sustainability strategies for	Worried about how much of its existence		
community interventions	is dependent on the current leadership		
Good and functional organization     structure	Staff attrition.     Insufficient staff to bondle programmatic.		
structure	Insufficient staff to handle programmatic activities which overburden the staff.		
<ul> <li>Defined plan of action for key interventions on different HIV/AIDS and</li> </ul>			
youth focused programs			
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	programs • Limited funding		
Now an established NGO with a proven track record in delivery	Limited funding		
track record in delivery			

# OPTIONS FOR GROWTH, DEVELOPMENT AND TRANSFORMATION

Strategic analysis and choice is the phase of a strategic planning process in which managers and staff examine and choose strategy/strategies that allow their organisations to maintain or create a sustainable competitive advantage. The starting point is to evaluate and determine which competitive advantages provide the basis for distinguishing the organisation in the mind of its beneficiaries compared with other reasonable alternatives. Organisations must choose among alternate strategies to guide the organisation's activities, particularly when trying to decide about broadening the scope of its activities. The questions to be answered are many, however, they are divided into two broad areas; (i) what strategies are most effective at building sustainable competitive advantages and (ii) to what extent should an organisation diversify to build value and competitive advantage. The Executives and Managers of organisations evaluate and choose strategies that that they think will make their business/organisation successful considering that business become successful when organisations possess some advantages relative to other competitors.

The rationale for strategic options for growth and development is premised on the fact that no organisation has the capacity and capability to do and provide everything and therefore, making choices out of the different alternatives is a decision to be made, knowing that the choices made will have implications for the now and future especially as they relate to survival, performance, stability and sustainability. In this case, the choices to be made will include expanding or reducing program scope and focus, mix and quality of human resources required, structure of the organization, target groups to be served, strategies for remaining competitive in the face of stiff competition and economic downturn, improving quality of operations for better outputs, partnership arrangement that offer the best advantage and establishing management and control systems that enhance flow of operations and reduce wastage. In addition are choices on resource mobilization, allocation and management, setting priorities, the type, volume and quality of services to be offered, enhancing and sustaining community participation, attracting and retaining skilled human resources and choices about affecting the external environment more meaningfully.

As discussed and agreed, EVA is broadening its program areas to include Child protection, enhancing capacity of young people through leadership development, creating and establishing model initiatives for replication by other organisations, gradual expansion of programs into disadvantaged communities (rural areas), community based medical outreaches to increase access, expanding target groups to include vulnerable children (witch children), adolescent OVC and single mothers, gradual transition to grant making and provider of capacity building technical services, gradual replacement of state offices with zonal offices, secure own office facility, increase capacity to diversify funding and income generation, strengthen and expand operations of the board, link vulnerable groups to services (clinical and legal), recruitment of skilled personnel and building capacity of existing staff and strengthen monitoring, evaluation and documentation mechanisms. The table below captures in detail, the choices agreed on at the leadership visioning retreat and validated at the strategic planning workshop

Strategic area	Agreed consensus
Program Areas	EVA will in addition to Reproductive Health and HIV&AIDS focus on Child
	Protection issues to make its OVC response (especially in relation to children
	and young people) a complete package

Sub program Areas	EVA Reproductive Health and HIV&AIDS program components are BCC/prevention, HCT, referral for various services and OVC. The RH will further include information on HIV, STIs, support to victims of sexual abuse/exploitation while services will be limited to HCT and condom distribution
Capacity Strengthening for young people	EVA's young people's program will be expanded beyond providing information and services (direct and referral), but also to develop the life and leadership skills of young people for enhanced capacity to make informed decisions, participate in development efforts/activities and improving their capacity to discover, manage and achieve their full potentials. An integral part of this is enhancing their ability for self employment through linkage and referral for vocational and business development and management capacity.
Program niche	EVA will in the plan period consolidate its achievements in present locations while gradually expanding to new areas based on need and resource availability. EVA will improve its capacity to design and manage innovative interventions and thus creating models for replication while also strengthening systems at the LGA and community level for improved response at these two levels.
Project Location	EVA's program will cover both urban and rural areas, but more rural coverage will be top priority considering the high need for EVA services as that level. EVA will also strengthen capacity at community level for effective partnership, establish and implement practical community participation strategies to facilitate ownership, community takeover of initiatives and sustainability of such. EVA will also establish and implement an effective and practical disengagement and project hand over strategy.
Main target	EVA's primary target group will be in and out of school adolescent/young people. The in school will be those in secondary and tertiary institutions. The adolescents are those within 10 – 17 years, witch children are in age range of 5 – 12 years, young people engaged in sex work (10 – 24 years) and single mothers (12 – 24). The decision of EVA to target and focus on these category of children, adolescents and young people is premised on low coverage of these groups despite their vulnerability which further compound their and community social problems and perceived difficult nature of working with these groups. EVA is conscious of the challenges involved, however, it is

	desirous of developing its capacity, strengthen its community response mechanism to make the difference
Service Delivery	EVA will directly provide limited services such as HCT while other services will be through referrals. EVA will increase its demand creation activities, create and implement community based medical/health outreaches and mobile HCT services and link up and refer young people to non clinical organizational based facilities
Status	EVA currently implements programs directly in its target communities and it will continue in this capacity, however, it will within the plan period, develop capacity to provide grants (under sub granting arrangement) to local NGOs/CBOs with back up technical services for human and institutional capacity building.
Organisational structure and expansion	EVA will strive to maintain a National outlook to the extent possible to increase its chances of attracting and retaining funding. The HQ will exist for coordination, technical backstopping, quality control, visibility, national level advocacy and partnership development and resource mobilization. The current offices in FCT, CRS, and Benue and Nasarawa states will be maintained at least for the next 2 years prior to the emergence of zonal offices for effective coverage and visibility in the nation's geo-political zones. State offices might be retained or created based on demand/exigencies of the period such as donor requirements or for visibility purpose
Human resources and staffing and Leadership development	Five (minimum) strategic positions will be created and maintain as permanent positions including the Executive Director, Programs Director, Resource Mobilisation/Business Development and Management, Knowledge Management (External Relations and M&E) and Finance and Administration (including human resources). Others will be project positions which will be created and maintained based on grants secured while additional staff (to fill technical positions) will be recruited based on needs. EVA will also build the capacity of existing staff and provide them with good remuneration and incentives (low tax, medicals, pension, condolence visits and rewards. EVA will establish and implement a performance based reward for its staff at all levels for increased productivity and training. EVA will also ensure that its workforce achieve a balancing between young people and experienced and skilled "adults" especially to fill management level position. In maintaining a quota for young people as staff, EVA will be keeping within its vision and commitment to

	developing the leadership skills of young people for active participation in community and national development. EVA will recruit a volunteer (VSO) to occupy the position of Programs Director who will overtime groom potential successor and occupiers of other senior level technical positions including knowledge management and business development. EVA will also establish a transition and succession plan for leadership positions at all levels
Board	Retain the Board as constituted and strengthen it. Ensure face to face meeting at least once in a year and arrange visit field offices/project sites. This will increase interest and commitment.
Infrastructural development	EVA will retain its Benue and FCT offices while a new office space will be acquired for the Headquarters. Nasarawa state will advocate for office space from the LGA secretariat and on long term basis, the HQ will acquire its own office space through mortgage arrangement or outright self funding
Gender mainstreaming	EVA will mainstream gender into its operations at all levels through capacity building for its staff in gender mainstreaming and sharpening gender content of its programs/projects while also adopting and implementing guidelines for documenting and evaluating gender content of its programs.

# SITUATION ANALYSIS OF REPRODUCTIVE HEALTH, HIV&AIDS AND CHILD PROTECTION

EVA program focus/scope; sexual and reproductive health, HIV&AIDS and child protection with adolescents, young people and young mothers and children is determined by documented evidence of poor health and socio-economic indicators and lack of well focused interventions to address them decisively and consistently. In the following section, attempts have been made at establishing rationale for the areas of focus of EVA and the situation EVA is responding to and the strategies it intends to adopt in responding to the issues/challenges in the plan period. This explains the strategies adopted and articulated in this strategic plan.

# 1. Reproductive Health

According to NDHS 2008, all forms of mortality and morbidity are still high including high maternal mortality (800 per 100,000 live births), child mortality (88 per 1000 live births), infant mortality rate (75 per 1000 live births) and under-five mortality rate (157 per 1000 live births). Others are high prevalence of HIV&AIDS of 4.6% with women, young people and children being the most affected, increase in the number of children orphaned by HIV&AIDS and other factors, high rate of teenage pregnancy and cases of VVF, increase in cases of STIs and low contraceptive rate of 15% (NDHS 2008).

Teenage pregnancy is a major health concern because of its association with higher morbidity and mortality for both mother and child. According to NDHS 2008, overall, 23% of women age 15 – 19 have begun child bearing. A larger proportion of teenagers in rural areas (29%) have begun child bearing compared with teenagers in urban areas (12%). The percentage of teenagers who have started childbearing decreases with increasing level of education according to the survey. Early marriage is still a challenge especially in Northern Nigeria with all its attendant outcomes. There are a number of issues with early marriage. For instance, the younger the bridge, the wide difference in age between her and her spouse. Also the younger the bridge, the less say she has in choice of her husband (Pop Council 2004 – general thesis, not Nigeria-specific). Some of them who also get pregnant early may encounter serious problems during labour and this accounts for the high rate of Vesico Vagina Fistulae especially in North East and North West.

#### 2. HIV&AIDS

The prevalence of HIV&AIDS as at 2008 is 4.6% (NDHS 2008) and it is believed that the prevalence rate is higher among young people age 15-24. Poverty, low literacy level, high rates of casual and transactional unprotected sex particularly among youth between the ages of 15 and 24, low levels of male and female condom use, cultural and religious factors, as well as stigma and discrimination are major factors in the transmission of HIV in Nigeria (NDHS 2008). Despite intensified at preventing the spread of the infection especially among young people, there are still challenges. Among others, the proportion of the population (especially young people) that have access to and are accessing HIV counseling and testing (HCT), though increasing, is still low; there is inadequate and inequitable access to antiretroviral therapy (ART); and, the number of orphan and vulnerable children (OVC) is rising.

Several population-based surveys, including Nigeria Demographic and Health Survey (2003, 2008), NARHS (2003, 2005, 2007), and HIV/AIDS Behavioural surveillance Survey (2005), have reported a gap between awareness and comprehensive knowledge of HIV prevention on the one hand, and between knowledge and behaviour on the other hand. The report of the 2008 NDHS, for example, indicates that while awareness of HIV was almost universal (88 percent of women aged 15 to 49 years and 93 percent of men aged 15 to 59 years), only half of women and two-thirds of men (48 and 68 percent, respectively) know that using condoms and limiting sexual intercourse to one uninfected partner are both means of preventing the spread of HIV. Furthermore, only a third of women aged 15 to 49 years and half of men aged 15 to 59 years (33 and 53 percent, respectively) who had sexual intercourse with a non-spousal or non-cohabiting partner between 2007 and 2008 used condom during the last of such sexual encounter.

The result of the Integrated Biological and Behavioural Survey conducted in 2007 also shows a fairly high level of risk behaviour among selected groups of most-at-risk populations for HIV and AIDS, including transport workers, injecting drug users (IDUs), and members of the police force. Additionally, a high level of stigma is still attached to certain risk-behaviour groups like female sex workers (FSWs), drug users, and MSM, delimiting the volume and quality of outreach to such groups in the country. Furthermore, there is inadequate funding as well as capacity for HIV&AIDS programme management particularly at sub-national levels.

#### 3. Child Protection

A cursory appraisal of the situation of children in Nigeria shows that little progress has been made with regard to protection of their rights. The impediments to childrens' protection rights include odious customary laws and harmful traditional practices as well as lack of up to date data and inadequate resources. Some other hinderances to the realisation of protection rights of the child include increased poverty, harmful practices such as child bethrotal and marraige, weak social protection policies, low birth registration, prevalence of domestic violence, lack of undersatnding by law enforcement agaencies, inadequate public education and enlightement on the rights of the child as well as weaknesses and contradictions in the juvenile systems. In addition, children with disabilities, street children, children affected by communical conflicts, child drug abuse, child labour, child trafficking and abduction and sexual exploitation pose enormous challenges to the realisation of protection rights of the child.

A UNAIDS, UNICEF & USAID Joint Publications: Children on the Brink, July 2004 (sourced from OVC NPA) revealed that total orphans as a percentage of all children was 10% (of estimated 69million), total number of children who are orphans were 7 million, and number of children who are AIDS orphans were 1.8m (26%). By 2010, it is projected that 8.2 million children will be orphaned from all causes. Of those orphans, 1.8 million (26%) were orphaned due to HIV/AIDS. (From UNICEF 2004). Other causes of orphaning in Nigeria have been identified to include maternal mortality, sectarian and ethnic conflict while large numbers of children are made vulnerable due to poverty, conflict and gender inequality. Specifically a WHO survey of 12 states (cited by UNICEF and sourced from NPA) revealed that OVC was caused by accidents (42%), ethnic/communal strife (17%) and HIV&AIDS (11%).

UNICEF 2002 (quoted from The dynamics and contexts traffiking in persons: A national perspective – NAPTIP 2004) estimated that about 8million Nigerian children were vulnerable and at risk of being trafficked for different forms of exploitative (bonded) labour including domestic

work, prostitution, street hawking, begging etc. While exact numbers are always difficult to obtain, the economic benefits from trafficking in children and women often reveal that trafficking in persons is a big and growing business globally. Those commonly trafficked are between the ages of 10 and 25, meaning that children (usually between 8 and 17) account for larger percentage of the victims and are more likely to be women/girls trafficked for use as a source of cheap domestic labour and sexual exploitation. Other forms of exploitation to which victims are subjected to include sexual exploitation (inclusive of forced prostitution), forced or exploitative labour, domestic servitude, the worst forms of child labour, begging, enlistment into armed conflicts, forced marriages, organ harvesting and rituals.

A survey conducted by Catholic Relief Services in 2008 revealed useful findings on situation of Orphans and Vulnerable Children in Nigeria. After death of parents, double orphans and paternal orphas were more likely to drop out of school or record a drop in school attendance than single and maternal orphans, older children (13 -17) had less access to education than the younger children (6-12years) and about 20% of the children identified insufficient food as the major problem confroting them. It also reveals that about 33% of the children had worked for money and 22% of the children had worked for food or other gift items while incidence of forced labour was higher in semi-urban areas than rural and urban areas and in all cases of child rights and protection examined, boys were more vulnerable to abuse than girls. In summary, lack of access to care, education, health services, food, shelter and economic opportunities are the major problems confronting orphans and Vulnerable Children in Nigeria. Despite on-going efforts to protect women and vulnerable populations against violence, there is still much to be done to protect victims and to further inform and educate the population about the problem in Nigeria as in other countries. According to NDHS 2008, 28% of all women experienced physical violence since the age of 15. Specifically, it reveals that 26% of women between ages 15 and 19 experienced physical violence while it is 28% amongst those within 20 and 24. Women in this category fall within the age bracket that EVA classified as young people for specific interventions in the plan period.

Until now, the response to the sudden rise of OVC on account of HIV&AIDS in Nigeria was family/community driven. The extended family tried to respond to the challenge, but because HIV&AIDS itself is poverty-driven, worsening the household poverty situation, the ability of the family and the community to cope was stretched to breaking point. The situation of OVC is further compounded by the worsening vulnerability of children through high maternal mortality, poverty, diseases, armed conflicts and communal clashes leading to family dislocation and instability in income. Others include child labour and child trafficking. This underscores the fact that the issue of orphans and vulnerable children go far beyond the bounds of HIV&AIDS.

In the last nine years, specific actions on child protection in the form of policy formulations (NEEDS 1 & 2, National Child Policy) adopting strategic plans of action (Plan of Action for CRC/CRA, Plan of Action for OVC), passage of legislations (Child Rights Acts, Anti Trafficking Act), establishment and strengthening of structures (NAPTIP, Child Development Department, OVC Unit) resource allocation, desiging and funding of specific country program by donors and development partners (UNICEF, Save the Children, Catholic Relief Services, Christian Aid,) strengthening coordination, partnership and collaboration, establishment of national committees and mobilisation of all stakeholders. In addition, a number of government agencies/institutions (NAPTIP, Police, Prisons, Immigration, National Human Rights Commission) have re-structured their operations for increased, focused and targeted activities on child protection. All these were/are directed at improving the situation of children including OVC in Nigeria.

A number of surveys have also been conducted to highlight and document issues around child protection especially examining the incidence, prevaence, magnitude, causes and consequences of all forms of child abuse, labour, trafficking, rights violation, sexual abuse and violence against children and exploitation. In addition, Civil Society Organisations (JDPC, ARFH, CISNAN, Child to Child etc), have also increased and intensified actions on child protection using strategies such as advocacy, capacity building, community mobilisation, establishing and managing rehabilitation centres, resource mobilisation and service delivery. These interventions need be taken to scale.

# **VISION, MISSION AND VALUES**

A vision is what an organization wants to become in the future and it expresses the aspirations of the leadership of an organisation. It is a

statement that presents an organisation's strategic intent resources of the organisation on achieving a desirable future. One stretches an organization's capabilities and image of itself. During environments of EVA, most respondents agreed that the vision of changes that have occurred in the organisation in the past five programs' scope. The old vision statement was a Nigerian society reproductive health and HIV and AIDS information and services.

#### Box 1: EVA Vision Statement

EVA envisions a Nigeria where children and young people reach their full potentials. designed to focus the energies and of the attributes of a good vision is that it the review and analysis of the EVA should be revised considering the years, coupled with the expansion of its where all youth have rights and access to One of the reasons espoused for the

revision of the vision statement is the desire of EVA to build a total being that is capable of contributing to national development. Consequently, the vision statement in box 1 was agreed on.

A mission on the other hand is a broadly framed but enduring statement of an organization's intent and it embodies the business philosophy of the organisation's decision makers, implies the image the organisation seeks to project, reflects its self-concept and indicates the organisation's

product or service the unique purpose operations and also does so in a way makers and to a respondents during organisation

establish

Box 2: EVA Mission statement

To build and implement innovative and sustainable mechanism for improved quality of life for vulnerable children and young people. areas and the primary target group the organisation will attempt to satisfy. It is that sets a company apart from others of its type and identifies the scope of its describes the organisation's product (programs and services) and market and it that reflects the values and priorities of the organisation's strategic decision large extent, the stakeholders in the external environment. Similarly, the organizational assessment also agreed that the mission statement of the should be revised in line with the new vision. The old mission statement of EVA systems and structures for young people to make responsible decision about

their development using youth friendly approaches to provide information, services as well as conduct advocacy initiatives in partnership with other affinity groups. With a new vision, it follows that a new mission statement is inevitable. Consequently, participants at the workshop built consensus around the mission statement in Box 2

#### **VALUES**

Values are guides to excellence in thinking and actions and standards which an are also habits that enable an individual or organisation live, be successful and be useful, an organisation must consciously and consistently hold and at the workshop agreed on the core values presented in box 3.

#### Box 3: Core Values

- Respect
- Teamwork
- Accountable
- Confidential
- Commitment

organisation strive to achieve. They achieve happiness and greatness. To demonstrate its values. Participants

# TARGET AND BENEFICIARY GROUPS AND THEIR DEMANDS/REQUIREMENTS

Target and beneficiary groups are individuals, groups/organisations and institutions who will either benefit from or provide/support to progarms and services to be offered by EVA and they cut across public and private sectors or special groups in the communities who EVA will either directly or indirectly partner or collaborate with. They also include individual and groups whose actions or decisions will influence policies/decisions that will promote the health and socioeconomic status of the various target or beneficiary groups. The findings of the organisational assessment and discussions at the leadership visioning retreat revealed that target and beneficiary groups of EVA should change in view of expanded scope of operations especially the emergency of child protection as a program area including provision of support (legal) services to victims of rape and other forms of sexual violence and exploitation especially of children young people and sex workers. The table below gives an overview of EVA target and beneficiary groups including their demands and requirement

Target group/beneficiary group	Their demands and requirements	
Primary		
Adolescent OVC	Education, capacity building, care and support, PSS, SRH (info and services), mentoring, health education, feeding, nutrition, shelter, family relationship, life skills	
Witch Children	Protection, care and support, mentoring, legal support, counseling, shelter, economic empowerment, psychological support, education, life skill education	
Young people in sex work	Information and service (SRH), capacity building, protection and mentoring, life skills, economic strengthening, psychological support	
Single Mothers	Information service (SRH), capacity Building, mentoring ,protection reassurance, RHS- antenatal & postnatal, counseling, shelter, economic strengthening psychological support, HCT	
In School Youths (Secondary)	SRH information, capacity building, mentoring, counseling, protection	
In school Youths (Tertiary)	SRH Information and service, capacity building, mentoring, counseling, protection	
Children of single mothers	Shelter, education assistance, SRH, alternate dispute resolution, negotiation skills	
In and out of school youths	Life skills education (PET), education, HCT, referral for skill acquisition for OSY	
Secondary		
Care Givers/parents/relatives/ family members	Economic strengthening, education, awareness, counseling	
Health care providers/ teachers	Capacity building (youth friendly), education, awareness creation, information, counseling	
Social dev. Workers network	Capacity building(Youth friendly approach)	

Religious leaders and community leaders	Capacity building, education and sensitization	
Brothel managers/chairlady	Sensitization	
Community boys/men	Education, health, counseling, life skills	
Employers, network	Education and advocacy	
Community gate keepers (teachers)	Information, capacity building	
CBOs + FBOs = other NGOs	Mentoring, information and capacity building	
Tertiary		
Government /decision makers/policy makers/community & religious leaders/PTA/MOE/MOY/LGA/media group/gate keepers	Advocacy, sensitization, education, skills, information	

# **EVA STRATEGIC FOCUS/STRATEGIES**

A strategy is a large scale, future-oriented plans for interacting with the competitive environment to achieve company/organizational objectives. It is broad, long range and far reaching and it is concerned with linking resources at the disposal of an organisation with the ends or results to be achieved. It also reflects an organisation's awareness of how, when, and where it should compete; against whom it should compete and for what purpose it should compete. By consensus, advocacy, strategic behavior change communication, capacity building, service provision and institutional capacity development emerged as EVA strategies in the plan period. While the first four strategies are programs focused, the last strategy is focusing on EVA as an organization.

#### 1. ADVOCACY

In the Nigerian environment, the strategic role of government at all levels is to make the environment more enabling through formulation and implementation of appropriate policies and legislations and also providing adequate resources through increased, timely and consistent allocation of fund to support programs and service delivery. As documented, lack of implementation of existing policies and laws and inadequate funding of health and socio-economic development programs often explain the lack of performance or underperformance of various programs, thereby compromising the achievement of nationally and internationally set goals and targets. Research findings have severally established low resource allocation to health and socio-economic development programs and where allocated, release of such fund is usually low while most times, application of what is appropriated is abysmally poor.

It is a common knowledge that In addition, weak coordination and lack of capacity of public (government) institutions to provide the required leadership also significantly contribute to the poor results often recorded. HIV&AIDS, reproductive health and child protection interventions (programs and services) require strong government backing and support at all levels for the desired change to be recorded. In addition, the operating environment at the community level for health and socio-economic programs leaves much to be desired. This explains EVA's adoption of advocacy as a key strategy to influence policies, legislations and the operating environment positively. EVA defines advocacy as an action directed at changing the policies, positions or programs of any type of institution. In addition, advocacy refers to speaking up, drawing attention to an important issue, and directing decision makers at all levels including the community toward a solution. In this case, advocacy consists of different strategies aimed at influencing decision-making at the organizational, local, provincial, national and international levels. The goal of EVA's advocacy strategy is improved policy environment for care and protection of children and young people. This effort aims at strengthening institutional frameworks and to support the articulation of policies that promote the health, educational and economic development of women, adolescents, young people and children. Efforts will focus on influential people (government policy makers, religious/community leaders) who have power to change policies and public opinion and make the operating environment enabling

#### 2. PREVENTION AND SBC

Prevention remains the most important, potent and cost effective strategy for reversing HIV epidemic, effect of harmful practices, teenage and unwanted pregnancy, sexually transmitted infections and all other forms of social and health problems. This reinforces the importance of prevention as a cornerstone of EVA's response in the next 5 years. Over the years, persistent HIV-risky behavior especially amongst young people in spite of high level of awareness on HIV&AIDS and STIs, prevalence of harmful practices against young people and children that fuel social problems and domestic violence against women, young girls and children that often affect their ability to achieve their full potentials calls for renewed and continuous prevention intervention efforts that will address specific needs of individuals and groups especially at community level to stimulate adoption of appropriate behavior that reduces vulnerability to health and social problems. The strategy also has the potential to increase demand for prevention services and have an impact on knowledge, attitudes, behaviors, and practices that influence behavior appropriately. This strategy will focus on HIV&AIDS, STIs, teenage pregnancy, unsafe abortion, pre marital sex, drug/substance abuse, multiple sexual practice, unprotected sex, sex work and such harmful practices as Female genital cutting, tattooing, male preference, forced marriage, early marriage, wife inheritance, , widowhood right, tribal marks, rape, child labor/abuse and neglect, trafficking, child sale, domestic help syndrome, blood oath, cultism, thuggery, discriminatory nutrition/feeding, torture (child beating, witch children), forceful withdrawal from school and luring underage to sex/sexual exploitation. Hence for effective control of health and social problems such as highlighted above, strategic behavior change communication is key. The goal of EVA Strategic Behavior Communication Change is decreased harmful practices endangering the health and development of vulnerable children and youn

#### 3. **CAPACITY BUILDING**

Capacity building is a package of mutually reinforcing activities which strengthen the knowledge, abilities, skills and behaviour of individuals and improve institutional structures and processes such that organizations can efficiently meet their mission and goals in a sustainable way. It also involves specific interventions that will be designed and delivered by EVA to build and or strengthen the capacity of individuals, groups, organisations and institutions to reposition them and increase their effectiveness. Weak capacity is one of the major challenges confronting individuals and institutions involved in health and socio-economic development programs in public, private and CSOs sectors. Flowing from weak capacity are poor/non-existent mechanism for coordination, poor implementation of policies and programs, poor quality of services, poor performance of programs, weak resource base and effective management of limited available resources and inadequate knowledge of health and socio-economic issues. The target audience for EVA capacity building strategy are health care providers, police/prison/judicial officers, religious leaders, women leaders, TBAs, Youth leaders, community members, artisan employers, Guardians, parents, young people & children, policy makers, public sector officials (state, LGA), CBOs/FBOs/NGOs, teachers, and care givers. These are the various groups that will be recipients of capacity building interventions such as training, technical assistance, mentoring, coaching, supportive supervision, workshops/seminars, exchange programs/study visits etc. The goal of the strategy is strengthened capacity of partner institutions in public, private and CSO sectors providing health and socio-economic support to children and young people.

#### 4. SERVICE PROVISION

EVA will in the strategic plan period provide and or facilitate access to wide range of reproductive health, HIV&AIDS and child protection services, to increase access of the most at risk groups (women, young people, orphans and vulnerable children, sex workers, victims of

trafficking and sexual abuse/exploitation, substance abusers, under-aged girls (who are victims of forced and early marriage) to quality RH, FP, HIV&AIDS and child protection services. The purpose is to reduce disease burden, prevention of infections/reduce transmission, mitigate impact of diseases, reduce rate of school drop-out and forceful withdrawal from school, reduce harmful practices at community level and improve quality of life and life expectancy and attain global health/MDGs. Though there have been some improvements in recent times, however, Nigeria still parades one of the worst health and socio-economic indices in the world. A review of the situation reveals lack of access to reproductive health (including maternal and child health), HIV&AIDS and wide range of Child protection services especially by women, young people, girls and children. In the strategic plan period, EVA will work with others to increase to and utilization of quality RH and child protection services. Components of EVA services include general counseling, condom distribution, syndromic management, family planning, HIV Counseling and Testing and referral for comprehensive RH and HIV&AIDS care, legal support, Alternate Dispute Resolution services (family and community courts). The goal of EVA service delivery strategy is increased utilization of child and youth friendly services

# STRATEGIC FRAMEWORK: GOALS, STRATEGIC OBJECTIVES, MAIN ACTIVITIES, INDICATORS AND MEANS OF VERIFICATION

Strategic area and goal	Strategic Objectives	Main activities	Verifiable indicators	Means of verification
ADVOCACY Improved policy environment for care and protection of children and young people	To enhance the capacity of stakeholders on ASRH, HIV/AIDS and child protection issues to support advocacy efforts	Designing, conducting and disseminating research findings on ASRH, HIV/AIDS and child protection issues.	<ul> <li>Number and type of research</li> <li>Number and type of dissemination events</li> <li>Number of publications</li> </ul>	<ul> <li>Publications</li> <li>Annual Report (programmatic and organisational)</li> <li>EVA Web site</li> </ul>
		Building capacity of community members and other stakeholders in ASRH, HIV/AIDS and child protection issues.	<ul> <li>Number reached</li> <li>Number and type of capacity building initiatives</li> <li>Number utilising knowledge and skills</li> </ul>	• Reports and records
	To increase support of decision makers (policy, law) for children and young peoples' programs, services and rights.	Facilitating the building of the knowledge of policy makers on RH, HIV&AIDS and child protection issue	<ul> <li>Number reached</li> <li>Number and type of knowledge building activities</li> <li>Number utilising knowledge supporting children and young peoples' protection</li> </ul>	<ul> <li>Reports</li> <li>Policies and legislations</li> <li>State/LGA annual budget</li> </ul>
		Building strategic alliances with CSOs, CBOs, FBOs, community groups and other stakeholders to engage policy makers at national, state and LGA levels on women and child protection issues.	<ul> <li>Number and type of CSOs involved/reached</li> <li>Number and type of joint activities</li> <li>Number of CSOs and other stakehlders participating</li> </ul>	Reports Minutes of meetings
		Organising, conducting and documenting outcomes of advocacy events/activities.	<ul> <li>Type of support received</li> <li>Number of decision makers suppporting ASRH, HIV&amp;AIDS and protection issues for young people and children</li> </ul>	<ul><li>Reports</li><li>Gazzette</li><li>Policies and legislations</li></ul>
		Producing and disseminating advocacy packages to policy makers at state and LGA levels	Number and type produced and disseminated	<ul><li>Reports</li><li>Records</li></ul>

	To strengthen evidence based policy development and implementation that support and protect children and young people.	Conducting advocacy for free education for vulnerable children and young people  Reviewing, documenting and disseminating information on gaps from existing policies on ASRH HIV/AIDS and child protection.  Mobilizing stakeholders to contibute to reviewing and updating existing policies based on findings or GAP analysis.  Conducting and documenting findings on tracking of budgetary allocation and expenditure to youths ASRH, HIV/AIDS, DS and child protection programs at state and LGA levels.	<ul> <li>Number of CSOs demanding and using packages developed by EVA</li> <li>Number enjoying free education by level – primary, secondary, tertiary</li> <li>Number completing education</li> <li>Number and type of dissemination events</li> <li>Number of stakeholders participating</li> <li>Number of policies requiring review</li> <li>Number conducted by sector</li> </ul>	<ul> <li>Reports</li> <li>Policy document</li> <li>Budget document</li> <li>Media reports</li> <li>Reports</li> <li>Media reports</li> <li>Publications</li> </ul> Reports Publications Media features Reports Publications Media features
		Participating in the development, reviewing and disseminating policies on ASRH, HIV/AIDS and child protection	Number of policy review events attended	Reports
CAPACITY BUILDING	To improve structures and	Conducting and documenting	Number and type of capacity	Reports
Strengthening institutions providing support to children and young people	systems of institutions (CSOs and LGA) to provide care and protection for children and young	findings of capacity assessment of partnering institutions to establish basis for action	<ul><li>assessment</li><li>Number of institutions assessed</li></ul>	_
	people in target communities	Designing and conducting training for individuals and institutions to provide quality care and protection for children and young people	<ul> <li>Number and type of training</li> <li>Number trained (by sex and cadre)</li> <li>Number of institutions sending trainees</li> </ul>	<ul><li>Reports</li><li>Clinic records</li><li>Exit interviews</li></ul>

		Number of sites providing  quality convices.	
	Providing resource materials to individuals and institutions providing care and support for children and young people	<ul> <li>quality services</li> <li>Number and type of materials</li> <li>Number of organisations / institutions receving resource materials</li> </ul>	Progress report
	Facilitating organization development interventions for partner institutions providing care and support for children and young people	<ul> <li>Number of capacity assessment conducted</li> <li>Number of organisations assessed</li> <li>Type and mix of OD interventions</li> <li>Number of individuals and organisation benefiting</li> <li>Number of organisations demonstrating high capacity</li> </ul>	<ul> <li>Assessment reports</li> <li>Intervention reports</li> <li>Capacity scoring report</li> </ul>
	Supporting the establishment and management of community structure and systems to protect orphans and vulnerable children and young people	<ul> <li>Number of communities involved</li> <li>Type of systems established</li> <li>Number of communities managing the systems effectively</li> </ul>	Reports Evaluation findings
To improve access to and management of resources of partner institutions for support and protection of children and young people	Building the capacity (training, mentoring, technical assistance) of partners in mobilising and managing resources efficiently.	<ul> <li>Number of organisations assisted/supported</li> <li>Number implementing their RM plans</li> <li>Number of organisations with increased resources/funding and by mix of sources</li> <li>Mix of resources mobilised</li> </ul>	
	Providing financial support (in the form of sub granting) to local partners and institutions.  Providing technical assistance to partners in establishing and	<ul> <li>Number of organisation receiving sub grants</li> <li>Type of technical assistance</li> </ul>	

		of harmful practice on children and young people  Facilitating the establishment and strengthening of community committees to reduce/eradicate harmful practices and beliefs that militate against the well being of children and young people.	<ul> <li>Number reached</li> <li>Number of committees established and functioning</li> <li>Number and type of activities organised</li> <li>Number of community members reached</li> <li>Number of community members, religious and traditional leaders speaking against harmful practices</li> </ul>
SERVICE DELIVERY Increased utilization of child and youth friendly services	To improve quality of ASRH & HIV&AIDS and protection services.	Sourcing, reproducing and disseminating existing guidelines for improving quality of services to partners  Acquiring and providing appropriate equipment and materials at the organisation's service delivery points  Building capacity of service providers (EVA staff, CSPs, young	<ul> <li>Number and type of guidelines assembled, reproduced and disseminated</li> <li>Number of facilities receiving and using guidelines</li> <li>Number and type of equipment provided</li> <li>Number of service delivery points established</li> <li>Number reached</li> <li>Type of capacity building</li> </ul>
	To increase access to ASRH, HIV&AIDS and protection services	people) to provide quality services  Developing and implementing innovative service delivery models  Expanding and sustaining networks/ linkages with service delivery sites in private and public sectors for referral	<ul> <li>Number and type of models established</li> <li>Number of organisations adopting EVA models</li> <li>Number of service delivery sites involved</li> </ul>

effective r	<ul> <li>Number of referred clients linking and utilising services at referral sites</li> <li>Number of clients expressing satisfaction with services</li> </ul>
available	<ul> <li>and mobilising young people on rvices and their their growth and</li> <li>Type of mobilisation activities</li> <li>Number of children and young people reached</li> <li>Number of children and young people utilising services</li> </ul>
	<ul> <li>Number of children and young people supported</li> <li>Type of support</li> <li>Number of children and young people supported</li> <li>Type of support</li> <li>Number of children utilising services</li> </ul>

# INSTITUTIONAL CAPACITY DEVELOPMENT STRATEGIC FRAMEWORK

The review of the implementation of EVA revealed a number of achievements as well as gaps. The strategic plan is therefore a response and road map that consolidate those achievements while also strengthening the weak areas. Findings of the organizational assessment also validated the information presented as weak areas. Presented below is a table of areas of institutional strengthening that will receive adequate attention in the plan period for EVA to transform into a strong, viable, competitive and sustainable organisation

Leadership and management		Infrastructure,		Human Resources		Financial		
structure		Equipment and					Management and	
		Ma	ıterials			Ad	ministration	
•	Members of board are not	•	Need more space in	•	Inadequate staff at	•	Shortage of staff	
	always active in all		HQ/FCT office to		HQ and Cross River		in Finance team	
	committees. Difficult to		accommodate growth		office, have to rely		especially at HQ;	
	sustain interest, since most		and decentralization		heavily on volunteers		Benue and Cross	
	are abroad. Need capacity	•	Need more equipment	•	Staff retention (loss		River offices	
	building to better		such as computers and		of trained staff) is	•	Capacity of	
	understand roles		furnishing in all offices		low as compensation		finance team	
•	Roles of SMT needs to be		as they are inadequate		is inadequate. Need		needs to be	
	clarified and capacity		for the number of staff		to review salary scale		strengthened	
	developed	•	Poor IT facilities as		to compete with	•	Structure of	
•	Organogram needs be		there is no internet/IT		other local		finance team	
	reviewed to better		support in state offices		organizations		needs to be	
	accommodate growth and	•	Need to source for	•	Need more technical		reviewed with	
	development		permanent office		staff at HQ level to		clearer roles and	
•	Position for Program		space or develop land		support the states		reporting	
	Director has been vacant		to reduce cost		especially for		structure	
	due to lack of funds, which		especially in the FCT		finance; programs	•	All staff needs	
	places a lot of technical and		and for sustainability		and M&E		training on	
	management burden on ED	•	Need vehicle	•	Need to sustain staff		financial	
•	All organizational policies		especially in Benue		motivation activities		management	
	need to be reviewed based		and Nassarawa states		as stated in the	•	Financial	
	on new external and		where communities		policy		management	
	internal developments –		are hard to reach	•	Inadequate financial		tools needs to be	
	especially finance and	•	Location of Nassarawa		resources for		reviewed	
	administration		office limits the		implementing	•	Administration	
			visibility of EVA in the		capacity		staff is	
			state		development plan		inadequate and	

Need to review constitution	•	HR coord	linator	capacity is weak
and bylaws based on		capacity needs	to be	for volunteers
changes		greatly strengtl	hened	
All Team leaders have				
inadequate leadership skills				

Organization or institutional capacity development is a planned, top-down (but at the same time participatory), organization-wide effort to increase the organization's effectiveness and health. It is a long range effort to improve organization's problem solving and renewal processes, particularly through more effective and collaborative management of organizational culture, often with the assistance of a change agent or catalyst and the use of the theory and technology of applied behavioral science. Organizational development is an ongoing, systematic process to implement effective change in an organization. In the strategic plan period, EVA will intensify actions in a proactive manner to build, grow, nurture and develop the organisation to attain greatness, remain competitive, improve its performance, and increase its effectiveness and sustainable impact. Such efforts seek to change the approaches, culture, beliefs, attitudes and structure of an organisation so that they can better adapt to stimulus in the environment, new technologies, challenges and markets. Presented below is the framework for EVA institutional capacity building in the plan period.

Strategic area and goal	Strategic objectives	Main activities	Verifiable indicators	Means of
INSTITUTIONAL CAPACITY DEVELOPMENT: Improved organizational efficiency and effectiveness	To strengthen organizational systems	Reviewing, developing, updating, implementing organizational policies and manuals (HR, Finance, Operations, staff orientation and child protection policies)	Number of policies and manuals reviewed, developed and updated	verification
		Reviewing and updating the tools and guidelines for implementation of organizational policies	Number and mix of tools and methods developed and in use	
		Monitoring and appraising the implementation of organizational policies and procedures.	<ul><li>Type and frequency of appraisal</li><li>Number amended based of findings</li></ul>	
		Creating and upgrading ICT systems	<ul> <li>Number and type of ICT facilities</li> <li>Number and type of equipment</li> </ul>	
		Acquiring and upgrading infrastructural facilities and materials	Number and type of infrastructural facilities	
		Establishing and implementing effective control system (including audits) in managing organisational resources	Type of control systems established and implemented	
	Improve capacity of human resources	Developing and implementing human resources (staff, volunteers) capacity strengthening plan	<ul> <li>Number and type of capacity building activities</li> <li>Number benefiting</li> <li>Number of organisations (domors) or partners providing support (technical, material, financial)</li> </ul>	
		Providing knowledge and skills development opportunities (training workshops, study tour, shadowing) for board staff and volunteers	<ul> <li>Number of staff, volunteers and board members reached</li> <li>Number and type of capacity building intervention</li> </ul>	

T	T		
		Reviewing and revising staff and volunteers remuneration and incentives package	Number of survey on remuneration
		Establishing and maintaining structures for promoting team work among staff and volunteers	<ul> <li>Number and type of activities</li> <li>Number of staff participating</li> <li>Number of staff reporting improved team work</li> </ul>
mar	engthen board and magement capacity for ective leadership	Updating knowledge and skills of senior management team to perform management responsibilities effectively	<ul> <li>Number of management staff benefiting</li> <li>Number and type of knowledge and skills improvement activities</li> </ul>
		Updating knowledge and skills of the board committee to perform its oversight responsibilities	<ul> <li>Number of committee members benefiting</li> <li>Number and type of knowledge and skills building activities</li> <li>Type of contributions of the board to growth and development</li> </ul>
		Developing, updating and implementing board and management operational guidelines	<ul> <li>Number of operational guidelines</li> </ul>
		Providing support to board and its committees for effective operations	<ul> <li>Number of board meetings</li> <li>Number in attendance</li> <li>Number of decisions taken</li> <li>Number of active committees</li> </ul>
		Producing and providing quarterly report of organisational and project activities to members of the Board	<ul> <li>Number and quality of reports</li> <li>Number of board members providing feedback</li> </ul>

### **ORGANISATIONAL STRUCTURE**

Organisational structure is the formalized arrangement of interaction between and responsibility for the tasks, people and resources in an organisation. It is one in which tasks, people and technologies necessary to do the work in the organisation are divided into separate but complementary functional groups with increasingly formal procedures for coordinating and integrating their activities to provide the business' products and services. One of the options for growth and development of EVA reviewed and agreed on at the strategy formulation retreat is EVA organizational structure and organogram. In view of the expanded scope of programs and operations, it follows that the structure of the organisation should change and or expand to enhance efficiency, effectiveness, growth and development in the plan period. A corollary to this is the recruitment of required human resources to occupy strategic positions while also building and strengthening the capacity of existing staff for increased quality of outputs, productivity and performance.

The proposed structure takes into consideration the three program areas of EVA; namely, sexual and reproductive health, HIV&AIDS and Child Protection and its strategies of advocacy, capacity building, service delivery and strategic behavior change communication. EVA will have a national office (headquarters) which will have overall responsibility for coordinating EVA technical operations including leadership and technical assistance to the zones or states, setting and maintaining standards in operations, resource mobilization, visibility through participation in partners' activities and advocacy at the national levels, providing guidance, initiating and concluding partnership arrangements, program design and monitoring and evaluation. Staffing at the headquarters will take into consideration these strategic roles and responsibilities. The zones will have overall responsibility for program/project implementation ensuring quality, contribute to program design, document and report activities, maintain visibility and contribute to corporate image of EVA at zonal/state levels, participate in partner activities, resource mobilsation and providing link between the community (field) and national office. The organogram has the Board of Directors at the apex, the Executive Director, Programs Director, Managers, State Coordinators (zonal coordinators overtime), officers and assistants.

## Description of organizational structure

#### a. **Board of Directors**

The board is the highest governing body for EVA and will have responsibilities for policy formulation, good governance and providing strategic leadership and direction to EVA, marketing and promoting the corporate image of EVA and engaging in high level advocacy at national and state levels for enabling environment and support to EVA and resource mobilization. It will appoint, support and review the performance (appraisal) of the Executive Director in accordance with organizational guidelines.

#### b. Executive Director

The Executive Director will have full Executive powers with responsibilities for day to day strategic leadership and management of the organisation and its programs, facilitating linkages with government and local partners, quality assurance, technical backstopping, resource mobilisation including proposal development, representing EVA at strategic outside engagements and partners' activities, support to EVA Board to perform its functions and prepare and disseminate quarterly reports to the Board. The ED is the Chair of the Senior Management Team.

### c. **Programs Director**

This Directorate will have responsibility for leadership, coordination and technical and management oversight of program development and implementation, including project planning and proposal development, documentation and dissemination.

#### d. Unit Managers

There will be 5 Managers to provide leadership in specific areas of the organisation's operations namely Knowledge Management, Business Development and Resource Mobilisation, ASRH and HIV&AIDS, Child Protection and Operations (Support Services). The purpose of these units will be to provide overall leadership and managerial and technical inputs and coordination in planning, developing, implementing, and evaluating operations in the various operational areas. Each Manager will provide leadership and coordinate technical inputs in the area assigned. The Managers may provide oversight guidance to the State Coordinators in managing and implement different EVA programs/projects and will report directly to the Programs Director but with occasional contacts with the Executive Director on strategic management issues relating to their portfolios.

#### e. State Coordinators

The State Coordinators are EVA State representatives/leaders with responsibility for effective leadership and coordinating state level operations including management and development of the office, implementation of EVA programs/projects at the state/LGA/community levels ensuring focused actions in line with program goal and objectives, participate in partners' activities, facilitate access of EVA to state resources, maintain EVA visibility and contribute to building corporate image of EVA, managing program and support staff, documentation and reporting of activities including data collection and submission in a timely manner and provide link between the state/zone and national office.

#### f. Internal Audit

The purpose of this section is to coordinate and supervise the internal control system of EVA accounts and assets and reporting directly to the Executive Director and to the Board when required.

#### g. Officers

The program officers will provide support to the Unit Managers as the national level as appropriate while program officers will provide technical support to State Coordinators

## h. **Assistants**

This category of staff provides management and logistics support to program and administrative and financial management activities at national and state levels.

## **HUMAN RESOURCES: SKILLS MATRIX**

A strategic planning process also involves choices on human resources/staffing in the plan period taking a number of factors into consideration, including expanded scope of operations, organizational structure, program and organisation's strategic focus. In addition, the process involves decisions on retaining, attracting and building the capacity of its human resources which must be available in the right quantity (number) and quality (mix of skills) while ensuring gender balancing. Human resources refer to staff (full and part time), board members, consultants, volunteers, and interns who will contribute technical knowledge, skills, experience, talents and expertise on periodic basis to support EVA in achieving its mandate in the plan period.

The strategic planning process involved undertaking a skills matrix of EVA human resources and it enabled an assessment of strengths and weaknesses (gaps) of existing human resources to the extent possible and requirements to fill the gaps through recruitment, training, outsourcing (engaging consultants) and engaging volunteers, interns and youth corps members. Though the skills matrix exercise had its limitations, however, it provided some useful information that EVA could consider and use in taking decisions in the plan period. EVA will on continuous basis assess and develop its human resource (including skills) requirements to inform decisions. Below is the output of the skills matrix developed at the workshop.

Skills	A	vailable	Not a	available		Actions required	
	Adequate	Not adequate	Required	Not required	Recruitment	Capacity development	Others
Counseling (including HCT)		<b>√</b>				✓ ·	
Communication							
Research		<b>√</b>				<b>√</b>	
Evaluation		<b>√</b>				<b>√</b>	
Planning		<b>√</b>				<b>√</b>	
Organisating		<b>√</b>				<b>√</b>	
Public speaking		<b>√</b>				/	
Analytical			/			/	
Problem solving		<b>√</b>				/	
Writing		1				1	
Data collection		<b>√</b>				/	
Data Analysis		<b>√</b>				<b>√</b>	
Advocacy		<b>√</b>				<b>√</b>	
Materials development – IEC, training		<b>√</b>				<b>√</b>	
Leadership		<b>√</b>				<b>√</b>	
Accounting and financial mgt		<b>√</b>				<b>√</b>	
Public relations and Marketing			1			<b>√</b>	
Presentation		<b>√</b>				<b>√</b>	
Facilitation		<b>√</b>				<b>√</b>	
Program management		<b>√</b>				<b>√</b>	
Resource mobilisation		✓			<b>√</b>		
ICT – Internet search, use of computer (excel, powerpoint, information management etc)		1				1	
Publication			/			<b>√</b>	
Time management		<b>√</b>				√ ·	
Event management			/			√ ·	
Budgeting and budget management		1				1	
Guidance and career counseling			/			1	
Monitoring & Follow up		1				1	
Documentation		1				1	
Office management		1				1	
Child development			/			√ ·	

Business management	✓			✓	
Proposal development	✓			✓	
Syndromic STI management		✓		✓	
Media engagement	✓			✓	

#### PARTNERSHIP DEVELOPMENT

Strategic area and goal	Strategic Objectives	Main activities	Verifiable indicators	Means of verification
Enhanced collaboration and partnership with other organisations involved in children and young people's	To maintain systems for collaboration and partnership	Undertaking and updating a map of relevant organisations and donors for internal use	Number and mix of donors and organisations by location and interest/area of focus	
protection		Linking up with potential partners for joint bids	<ul> <li>Number of partners linked with</li> <li>Number of joint bids</li> <li>Number of successful joint bids</li> <li>Number of organisations linking up with EVA</li> </ul>	
		Participating in the programs and activities of other organisations	<ul> <li>Number and type of activities/events attended and participated in</li> <li>Number and mix of organisations</li> </ul>	
		Sharing information with partners on regular basis	<ul> <li>Number of partners receiving information from EVA</li> <li>Number of organisations receiving information (publication, newsletter) from EVA</li> </ul>	
		Partnering with individuals, groups and organisations in advocating for full domestication and implementation of laws that protect children and women such as CEDAW	<ul> <li>Number of advocacy events</li> <li>Number of partners involved</li> </ul>	

	Full domestication of	
	relevant laws	

# **RESOURCE MOBILISATION**

Strategic area and	Strategic Objectives	Main activities	Verifiable indicators	Means of verification
RESOURCE MOBILISATION Strengthened and diversified resource base for sustainance	To improve structures for co-ordinating the implementation of organisational resource mobilization strategy	Recruiting and building capacity of staff and board for resource mobilization including proposal development  Developing and maintaining the	<ul> <li>Number of staff and board members involved</li> <li>Type of capacity building activities</li> <li>Number of staff with skills and able to write proposals</li> <li>Number and type of proposals written and marketed</li> <li>Number funded by type</li> <li>Number and mix of donors funding EVA activities (international donors, government and private sector)</li> <li>Number of consultancies</li> </ul>	
		organisation's consultancy outfit to provide technical services for income	<ul> <li>Mix of services</li> <li>Number and mix of organisations engaging EVA</li> <li>% or proportion of contributions of consultancies to EVA income</li> </ul>	
		Providing support to the relevant committee of the board for effective resource mobilisation activities	<ul> <li>Number and type of support provided</li> <li>Number of board members actively involved in resource mobilisation</li> <li>Proportion of EVA income from Board members</li> </ul>	
		Organising and conducting special events to mobilise resources for the organisation	<ul> <li>Number and type of events</li> <li>Proportion of contributions of special events to EVA income</li> <li>Number and mix of people participating</li> </ul>	
		Reviewing, developing and implementing organisation's investment policy/strategy	<ul> <li>Mix of investment options</li> <li>Proportion of contributions of investment to EVA income</li> </ul>	

To enhance organizational image for effective resource mobilization	Developing, reviewing and implementing public relations strategy for resource mobilization	<ul> <li>Mix of public relations activities</li> <li>Number and type of people making positive comments on EVA capabilities</li> </ul>	
		•	
	Reviewing, developing, producing and disseminating marketing and publicity materials.	<ul> <li>Number and type of marketing materials produced and disseminated</li> </ul>	
	Developing and marketing organisation's capacity and capability for consultancy services/ opportunities	<ul> <li>Type and mix of marketing strategies adopted/utilised</li> <li>Number and type of organisations receiving materials from EVA</li> <li>Number of organisations and donors linking up/engaging with EVA</li> </ul>	

## **MONITORING AND EVALUATION**

Strategic area and goal	Strategic Objectives	Main activities	Verifiable indicators	Means of verification	Frequency of monitoring/evaluation
Improved knowledge management for sustainable and result oriented	To improve data collection and management for decision making.	Developing and implementing organisational M&E plan	<ul> <li>Organisational M&amp;E         Plan     </li> <li>Level of implementation</li> </ul>	M&E Plan	Bi-annually
outcomes		Creating, updating and maintaining organisation wide data base	• Organisational Data base	Reports and records	Annually
		Generating, processing and utilizing data for decision making including project design (proposal development)	Type of decisions made based on available data	Records and reports	Periodically
		Developing and updating tools and methods for monitoring and evaluation	Package of tools and methods		Periodically
		Organising, conducting and producing monitoring reports of project and organisational activities including budget implementation	Periodic monitoring reports	Monitoring reports	Periodically
		Sourcing and using data generated by other organisations	<ul> <li>Number of publications acquired</li> </ul>	Reports	Periodically
	To enhance documentation and dissemination of	Organising, conducting and producing findings (reports) of project evaluation	Number of project     Evaluation conducted	Evaluation reports	As indicated in project proposals
	organisational experience in project implementation	Producing and disseminating publications including project evaluation and organisational annual reports using various media	Number and type of publications	Publications Annual Report	Periodically
		Organising and conducting periodic (quarterly) in-house project review meetings	<ul> <li>Number and type of in-house review activities</li> </ul>	Reports	Quarterly/Bi-annually

Attending national and international conferences	<ul> <li>Number and type of conferences attended</li> <li>Number of staff attending conferences</li> <li>Number of new partnerships and funding oportunities arising from participation in conferences</li> </ul>
Writing and submitting abstracts for presentations at national and international conferences	<ul> <li>Number of successful abstracts</li> <li>Number of conferences attended for presentations</li> <li>Records of abstracts</li> <li>Periodically</li> </ul>
Establishing and standardising reporting requirements	Number of staff Reports On going producing quality reports

## ORGANISATIONAL STRUCTURE

