



# WOMEN & COMMUNITY LIVELIHOOD FOUNDATION (WOCLIF)

## Quarterly Report 2<sup>nd</sup> Quarter – January 1 to March 31, 2017

Submission Date:

March 31, 2017

[Contract/Agreement] Number:

AID-620-A-14-00005

Activity Start Date and End Date:

July 22, 2014 to July 21, 2019

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## Acronyms

ARFH	Association for Reproductive and Family Health
CIT	Community Improvement Teams
CIYCF	Community Infant and Young Child Feeding
CV	Community Volunteer
DIs	Direct Implementing Teams
FHI-360	Family Health International 360
HES	Household Economic Strengthening
HIV/AIDS	Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome
IA	Implementing Agent
IP	Implementing Partner
LACA	Local Action Committees on Control of HIV/AIDS
LGA	Local Government Area
LLIN	Long-Lasting Insecticide Nets
LOPIN	Local Partners Initiative for Orphans and Vulnerable Children
NGO	Non-Governmental Organisation
NHIS	National Health Insurance Scheme
NOMIS	National Orphans & Vulnerable Children Management Information System
OVC	Orphans and Vulnerable Children
PEPFAR	President's Emergency Plan for AIDS Relief
QI	Quality Improvement
SACA	State Agency for the Control of HIV/AIDS
SCFN	State Committee on Food and Nutrition
SFH	Society for Family Health
SMART	Standardized Monitoring and Assessment of Reliefs and Transition
SPRING	Strengthening Partnerships, Results, and Innovations in Nutrition Globally
TOT	Training-of-Trainers
TWG	Technical Working Group
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
VC	Vulnerable Children
VSLA	Village Savings and Loans Association
WEWE	Widows and Orphans Empowerment Organisation

## 1. PROGRAM OVERVIEW/SUMMARY

<b>Program Name:</b>	Local Partners for Orphans and Vulnerable Children Project (LOPIN) region 2
<b>Activity Start Date and End Date:</b>	March 15, 2016 to July 21, 2019
<b>Name of Prime Implementing Partner:</b>	Widows and Orphans Empowerment Organization (WEWE)
<b>[Contract/Agreement] No.</b>	AID-620-A-14-00005
<b>Name of Sub awardees:</b>	1. Women and Community Livelihood Foundation (WOCLIF)
<b>Major Counterpart Organizations</b>	<ol style="list-style-type: none"> <li>1. Akwa-Ibom State Ministry of Women Affairs and Social Development</li> <li>2. Rivers State Ministry of Social Welfare and Rehabilitation</li> <li>3. States Ministry of Health, Akwa-Ibom, Anambra, Imo and Rivers</li> <li>4. State Agency for the Control of HIV/AIDS (SACA) (Akwa-Ibom, Anambra, Imo and Rivers)</li> <li>5. National Population Commission (NPOPC)</li> </ol>
<b>Geographic Coverage (cities and or countries)</b>	Ikot Idem, Ikot Udoe, Ikot Inyang and Ikot Obong Edong in Ikot Ekpene Local Government
<b>Reporting Period:</b>	January 1 – March 31, 2017

## 1.1 Program Description/Introduction

### Project Goals:

Women & Community Livelihood Foundation (WOCLIF) is a registered not-for-profit organization located at Plot 20, Holy Child International School Road, GRA Ikot Ekpene, Akwa Ibom State. The organization was established in January 2007 to positively change the lives of the poor in the community.

In order to achieve WOCLIF's vision of "a society where everyone enjoys good health and is empowered for better life and to key in to WEWE's mission of "harness the potentials of widows, orphans, and vulnerable segment to become productive entities in the society through advocacy, capacity building, economic empowerment and human right program", **WOCLIF is committed to improving the quality of lives of 2449 vulnerable children and 853 households (including HIV infected and affected households) and making the four communities of Ikot Obong Edong, Ikot Idem, Ikot Inyang and Ikot Udoe the best place to live in Ikot Ekpene Local Government Area of Akwa Ibom State for vulnerable children.**

### Project Objectives:

1. To improve the capacity of the community structures in the LGA, to provide quality services to 2449VCs and 853HHs in Ikot Obong Edong, Ikot Inyang, Ikot Udoe and Ikot Idem communities in Ikot Ekpene LGA of Akwa Ibom State.
2. To facilitate access to Education and Training, Psychosocial Support, Protection, Health, Shelter and Care, Nutrition and Food Security and Household Economic Strengthening to the targeted VCs and HHs
3. To develop a strong referrals system and PPP within the LGAs, to mobilize the resources for the provision of quality care and support to the targeted VCs and the HHs.
4. To facilitate HIV prevention for adolescent girls and addressing other gender norms affecting female caregivers and girls.

To achieve the aforementioned objectives, the following strategies adopted:

- Advocated for the support of the targeted communities and other key stakeholders where WOCLIF will be working
- Enrolled and trained credible and reliable community volunteers to help in providing services for vulnerable children and the households.
- Formation and training of Community Improvement Team in the four targeted communities of Ikot Obong Edong, /, Ikot Udoe, Ikot Idem and Ikot Inyang to serve as frontline responders identifying and responding to children and households having challenges.
- Conducted massive HCT in the targeted communities in other to know HIV status of already enrolled vulnerable children and households
- Identified HIV infected and affected households and enrolled them in the project
- Referrals of infected and affected households to the facility for ART services
- Conducted Counseling Support Service through Home Visit.
- Leveraged resources from other partners/facilities that are working with children and refer them for services that are not funded by WEWE-LOPIN project.

- Monitored to ensure all these activities are performed.

**1.2 Summary of Results to Date**

**1.1 \_\_\_\_\_ Summary of Results to Date**

<b>Standard Indicators</b>	<b>Baseline FY YYYY</b>	<b>Annual Target</b>	<b>Q1 FY17</b>	<b>Q2 FY17</b>	<b>Q3 FY17</b>	<b>Q4 FY17</b>	<b>Annual Performance Achieved to the End of Reporting Period (%)</b>	<b>On Target Yes or No (Y/N)</b>
OVC_SERD: # of active beneficiaries (VC) served by PEPFAR OVC programs for children and families affected by HIV/AIDS		47,303	49,449				118	Yes
# of Vulnerable Household newly enrolled		3,612	126					No
Cumulative # of Vulnerable Household enrolled		11,412	7,995					No
NC5.2D: # of Vulnerable Children newly enrolled		10,837	379					No
Cumulative # of Vulnerable Children Enrolled		36,709	26,251					No
# of care givers trained to improve their ability in caring for OVC		2,000	0				0	Yes
# of caregivers provided with economic strengthening		1,703	84				5	No
# of CITs formed and trained on Improvement Science and the National Service Standard on improving the quality of life of VC		6	0				0	No
# of persons trained on strategic information		25	0				0	No

<b>Standard Indicators</b>	<b>Baseline FY YYYY</b>	<b>Annual Target</b>	<b>Q1 FY17</b>	<b>Q2 FY17</b>	<b>Q3 FY17</b>	<b>Q4 FY17</b>	<b>Annual Performance Achieved to the End of Reporting Period (%)</b>	<b>On Target Yes or No (Y/N)</b>
# of State Improvement Team formed and trained on Improvement Science and National Service Standard on improving the quality of life of VC		2	0				0	No
# of VCs referred for services using the referral directory		-	0				0	No
# of Organizations with developed capacity improvement plan		7	0				0	No
# of Organizations with improved capacity		7	0				0	No
# of Organizations that have organizational policies in place.		9	0				0	No
# of CSO staff trained in the use of National Service Standard on improving the quality of life of VC		5	0				0	No
# of state VC TWG established/reactivated.		2	1				0	No
# of CSOs collaborating with line ministries to achieve their specific objectives		9	8				89	No
# of OVC receiving primary direct support (≥ 3 services)		5,000	6,454				129	Yes
# of OVC receiving supplemental direct support		41,980	52,426				125	Yes

Standard Indicators	Baseline FY YYYY	Annual Target	Q1 FY17	Q2 FY17	Q3 FY17	Q4 FY17	Annual Performance Achieved to the End of Reporting Period (%)	On Target Yes or No (Y/N)
(< 3 services)								
% of VC with improved wellbeing using CSI		30%	0				0	No
# of eligible adults and children who received food and/or other nutrition services		20,000	28,749				144	Yes
# Number of OVC receiving educational and training support		3,000	2,619				87	No
# of OVC provided with basic material needs of shelter/care		2,000	3				0.15	No
# of OVC provided with health support		10,000	29,238				292	Yes
# of OVC provided with psychosocial support		20,000	19,682				98	No
# of OVC provided with legal assistance and protective care services		10,000	1,074				11	No
GEND_NORM: Number of individuals completing an intervention pertaining to gender norms within the context of HIV/AIDS that meets minimum criteria.		5,859	0				0	No
PP_PREV: Percentage of individuals from priority populations who completed a		20%	129				4	No



<b>Standard Indicators</b>	<b>Baseline FY YYYY</b>	<b>Annual Target</b>	<b>Q1 FY17</b>	<b>Q2 FY17</b>	<b>Q3 FY17</b>	<b>Q4 FY17</b>	<b>Annual Performance Achieved to the End of Reporting Period (%)</b>	<b>On Target Yes or No (Y/N)</b>
standardized HIV prevention intervention during the reporting period.								
# of households graduated		1,703	0				0	No
# of children whose HIV status is known.		-	23,078					



## 2. ACTIVITY IMPLEMENTATION PROGRESS

### 2.1 Progress Narrative

Women & Community Livelihood Foundation (WOCLIF) is committed to ensuring that Orphans and vulnerable children enrolled into WEWE LOPIN 2 Project benefits from the services across FY 17 four key domains: **healthy**”, **“schooled**”, **“stable**” and **“safe”**. **In second quarter of FY 17**, A total number of 850 (M: 458 F:392 ) beneficiaries were provided with services across seven services area while 20 HIV infected and affected vulnerable households with a total of 57 OVC were enrolled into WEWE LOPIN 2 Project across the four communities of Ikot Obong Edong, Ikot Udoe, Ikot Idem and Ikot Inyang.

In order to ensure that the WEWE LOPIN 2 beneficiaries are healthy, WOCLIF team conducted community health outreaches with focus on pediatric health intervention. During the outreaches, 5 (M: 1: F: 4) OVC were referred for immunization, while nutritional assessment and growth monitoring was conducted for 220 OVC aged 0-5 years. Malaria test was conducted for 29 orphans and vulnerable children while 4 children that were reactive were given free malaria drug. Furthermore, during these outreaches, HCT was conducted for 77 (M: 35: F: 42) children and none of the children tested reactive for HIV. This make the beneficiaries with HIV known status to increase from **11111 to 2222222**

To ensure that the children enrolled progressed in the academic activities, academic performance of 149 (M: 75: F: 74) of children enrolled into public schools accessed through school visits and home visits. The outcome of the assessments were discussed with their caregivers and this has led to improvement in their academic performance.

Relatively, in order to ensure that the capacity of the caregivers are strengthening in order to provide for the children without depending on external assistance, WOCLIF team ensured that monthly caregivers forum across four communities were conducted. During these forums, better parenting manual was adapted to enable caregivers improve on their parenting styles and responsibilities. Similarly, capacity of 35 caregivers has been strengthened financially through formation of Village Saving and Loans Association in Ikot Idem and Ikot Obong Edong communities. This make the total number of functional VSCLA in WOCLIF’s communities to increase from 1 to 3. Furthermore, these associations provided an avenue for WOCLIF team to step down financial education and literacy to the caregivers as this is evidenced in their savings culture.

A total of 8 persons completed HIV prevention with adequate information on HIV, ABC messages and other life building skills that strengthened their capacity to say NO to societal pressure that may want them to be vulnerable to contracting HIV infection. Also working to achieve 90-90-90- USAID HIV epidemic control, a total number of 77 children (M: 35: F: 42) were tested for HIV/AIDS; Also In accordance with the 3<sup>rd</sup> 90 (Viral Load Suppression), escort services and regular home visits by WOCLIF team helped to ensure beneficiaries’ adherence to ART.

Finally, in order to ensure that OVC enrolled into WEWE LOPIN 2 Project are safe from any form of abuse and exploitation, WOCLIF team sensitized caregivers on importance of birth certificate and provided birth certificate for 17 (M: 9:F:8) children making the number of children provided with birth certificate to increase from 2222 to 22222

## 2.2 Implementation Status

In the 2<sup>nd</sup> quarter of FY 17, WOCLIF team conducted her activities in line with quarterly implementation plan. These services were provided in line with improving the quality of lives of OVC and their caregivers. A total number of 850 (M: 458 F: 392) beneficiaries served with services based on identified needs and the services were provided in line with improving the qualities of their lives. The resources for providing these services were derived through Public Private Partnership and with WEWE LOPIN 2 intervention.

Implemented program objectives include:

**Program Objective 1:** The following activities were planned and implemented in the quarter under reporting:

- **Orientation and training of additional community volunteers:** Following the successful collaboration with Village councils and Community Improvement Teams on selection, interview and engagement of additional 9 community volunteers to the existing 8 community volunteers. WOCLIF team oriented total of number of 17 community volunteers on (M: 9 F: 8) on overview of WEWE LOPIN 2 project and reaching out to orphans and vulnerable children. During the orientation meeting, CVs were exposed to overview of WEWE LOPIN 2 Project and reaching out to OVC through prioritized service provision. Apart from orientation meeting, step down trainings on improvement science and use of national services standard for OVC in Nigeria and facilitation of birth registration were conducted for the community volunteers.
- **Enrolment of New Beneficiaries:** A total number of 57(M: 33, F: 24) children in 20 households were newly enrolled in Ikot Udoe and Ikot Obong Edong communities. The enrolment of HIV infected and affected households was as a result of robust sensitization to ART unit of General Hospital Ikot Ekpene and Primary Health Centre across four target communities. Furthermore, the enrolment was as a result of the collaboration with SHERO a CBO implementing SIDHAS project in Ikot Ekpene LGA, WOCLIF team linked up with the support group member and enrolled the children of the support group member in WEWE LOPIN 2 Project.
- **Nutrition and Food Security:** In order to improve the nutritional status of the children in the households; nutritional education especially on the use of locally available food items, food preparation and utilization were provided to caregivers during the regular home visits and monthly caregivers forums. Nutrition assessment of children under five years was done using (MUAC tapes), during the children nutritional assessment, total number of 220 (M:106: F: 114) children accessed were green, an indicator that the caregivers were using locally available foods for their children and are adhering to

nutritional education and counselling provided during regular home visits and caregivers forum.

- **Health:** WOCLIF provided access to health to 274 (M: 124: F: 150) beneficiaries through community health outreaches, home visits and club activities. During the community health outreaches, health education such as maintaining personal hygiene and use of mosquito treated net was provided to the beneficiaries, apart from health education, free malaria test was conducted and beneficiaries tested for RDT were provided with free malaria drug, courtesy of collaboration with PHCs in WOCLIF's communities
- **HIV Testing and Counseling Services:** In fulfillment of the 90:90:90 HIV epidemic control, WOCLIF conducted HCT for 77 children (M: 35: F: 42) in Ikot Idem and Ikot Udoe respectively. All the children tested were negative while tracking and escort services were provided for PLHIV beneficiaries to ensure adherence to ART and viral load suppression.
- **Provision of birth certificate:** in order to ensure that orphans and vulnerable children enrolled into WEWE LOPIN 2 Project are protected from abuse and exploitation, WOCLIF team in collaboration with National Population Commission (NPOPC) registered and provided birth certificate for 17 (M:9:F:8) in Ikot Inyang and Ikot Obong Edong communities.
- **Village Savings and Loan Association (VSLA) Meetings:** Currently, WOCLIF has 3 functional VSLA groups across the 3 communities of Ikot Inyang, Ikot Idem and Ikot Obong communities. 2 of the VSCA groups were newly formed in the quarter under reporting. The newly formed VSCA groups has 35 members with agreement to be contributing N200 per share during meetings, the first saving will commence on 2<sup>nd</sup> April and 5th April in Ikot Idem and Ikot Obong Edong respectively.
- **Kids Club Activities:** Kids club meetings were conducted on monthly basis in 4 communities that WOCLIF is implementing. The meeting afforded WOCLIF team opportunity to provide 448 (M: 175: F: 190) children with group based psycho-social support. During these kids club meeting, Christian Aids kid's club manual was used to provide life building information that aimed at improving psycho-social wellbeing of the children. Apart from given life building information, various recreational activities were also incorporated in the kids club to ensure that the children psychosocial wellbeing is improved.
- **Gender Norms Intervention Sessions:** Gender Norms being one of the USAID key indicators, WOCLIF integrated gender norms to our adolescent boys and girls session, and as well as caregivers forum. WOCLIF team ensured that gender sessions were participatory and modules covering gender norms, gender based violence and HIV were discussed with the beneficiaries. For the quarter under reporting 20 (M:5:15) beneficiaries completed their standardized 10 hours gender session
- **Adolescent/Youth Club Meetings:** During the period under review, the club meetings for youths were held across the 4 communities that WOCLIF is implementing. Discussions centered on life building skills. Gender and HIV prevention messages targeted at behavioral change were also integrated into the sessions

- **Caregivers club:** The caregivers' forum meetings took place monthly in the four communities of Ikot Obong Edong, Ikot Udoe, Ikot idem and Ikot Inyang communities. During these caregivers forum, better parenting manual in Nigeria was used and topics such as parental responsibilities, culture and social norms and parenting styles were discussed with caregivers during the meetings.
- **Objective 2: Program objective 2:** In line with this objective which is aimed at building capacity of local service providers and structures to provide care and support for beneficiaries, the following activities were conducted.
  - **Volunteers' Monthly Review Meeting.** Volunteers monthly review meetings held in WOCLIF's office. The meetings afforded WOCLIF team opportunity to review data collected by the community volunteers, and gave feedback to the volunteers based on their volunteering services. Apart from monthly review meeting, WOCLIF team provided continuous mentoring for CVs and gaps identified especially in home visits and quality of information during home visits were bridged.
  - **Community Improvement Meetings:** Community Improvement Teams meetings were held in the month of January and March 2017. CIT monthly improvement meetings didn't hold in the month of February 2017 due to late release of funds. Meanwhile, during these improvement meetings, discussions were centered on formation of VSCA, administration of needs assessment tools for ready and struggling to grow households, empowerment and graduation of the households. However, in line with empowerment of the households to ensure financial resiliency, plans is on-going to empower one household with setting of fufu business for the caregiver by Ikot Udoe CIT. Furthermore, the CIT across the four communities are responsive and always showing commitment to issues of orphans and vulnerable children in the community.
    - **2-Day Training on Saving Group organized by WEWE for selected caregivers and community volunteers in WOCLIF's community.** This training was organized by WEWE State office on 13<sup>th</sup> -14<sup>th</sup> February 2017 WOCLIF's team and 8 participants across WOCLIF's community participated in the training. During the training, the capacity of the community volunteers and selected caregivers were strengthened in the area of establishing functional and sustainable community microfinance. The outcome of the training led to formation of VSCA in Ikot Idem and Ikot Obong Edong communities.
    - **2-Day Step down training on Better Parenting to Community Volunteers.** On 27<sup>th</sup> and 28<sup>th</sup> February 2017, WOCLIF team conducted 2 days step-down training for Community Volunteers working across WOCLIF's target communities. The step-down training afforded WOCLIF to strengthen the capacity of the Community Volunteers to facilitate Better Parenting sessions in the community. The methodology for the training were Discussion, Participatory Approach and Role Plays. The meeting was facilitated by WEWE Ikot Ekpene Direct Implementing Team representative, Donatus Anya, WOCLIF team and total number of 18 (M=8, F= 10) participants participated in the activity. During the training, topics facilitated covers Parenting Responsibilities, Culture and Social Norms, Parenting Styles, Children's Temperament, Stages of Development, Changing Needs as Children Grow Older, Children with Disabilities, Parent-Child

Communication, Good Listening Skills, Offering Praise, Setting Limits, Why Children Misbehave, Good Discipline, Raising Teens Can Be Hard, Treating Boys and Girls Equally, Better Mentoring, Good Role Modeling, Managing your Emotions, Promoting Adequate Nutrition Using Locally Available Food, Key Information on HIV: Know your HIV Status, Social Issues Around HIV: Disclosure, Stigma and Discrimination, Family Centered Care -not an orphanage, Child Protection: Children's Responsibilities and Rights, Pregnancy and Your New Baby and Understanding Gender Norms.

Apart from the facilitated sessions, participants also participated in the field trip to Ikot Idem community and facilitated Better Parenting sessions with the selected caregivers. The caregivers participated effectively, observations were made and notes were also taken for feedback. The community volunteers now facilitate better parenting sessions in their respective communities.

- **One day Step Down Training on Improvement Science and National Service Standard in Improving the Lives of OVC in Nigeria**

Following the engagement of additional 9 community volunteers to WOCLIF's volunteers' strength, on 8<sup>th</sup> March 2017, WOCLIF team conducted a-day step down training for 16 (M:8 F:8) community volunteers on improvement science and national service standards in improving the lives of OVC in Nigeria. The training afforded the community volunteers information on their roles in ensuring sustainable 6+1 services for the OVC in their communities. During the training, the CVs fully understood the concept of OVC programming; they understood that OVC programming is aimed at sustaining a better life for vulnerable children and their households. The CVs were further exposed to component of Improvement Science which is content and process of care. Also, improvement methodologies which are to identify the problem, analyze the problem, develop a change and test and implement the change were explained to the community volunteers. Apart from improvement methodologies, the community volunteers were exposed to prioritizing the VC needs and, analyzing root cause of VC problems, preference ranking and developing aim. The participants were tested and understood National Service Standard and how to apply it to community improvement activities. Finally, WOCLIF team used the training to reiterate to the community volunteers the needs to join WOCLIF in raising funds through Private Public Partnership (PPP) in order to provide care and support for OVC in their community.

**One day Step down Training on Birth Registration:** On 10<sup>th</sup> March 2017, WOCLIF conducted step-down training for 16 (M: 8: F: 8) community volunteers on registration of birth certificate. The step down training afforded WOCLIF team opportunity to strengthening the capacity of community volunteers to facilitate birth registration and provision of birth certificate in collaboration with National Population Commission (NPOPC) for OVC in their community.

**Apart from building the capacity of the local partners in improving the quality of lives of OVC in the community, WOCLIF team participated in the following trainings.**

- **A-4 day training on Better Parenting:** On the 17<sup>th</sup> January to 21<sup>st</sup> January 2017, WOCLIF team was at WEWE office Uyo and participated in four- day training on better

parenting. During the training, WOCLIF's team capacity was strengthened to facilitate better parenting and to conduct better parenting step down for the community volunteers. The step down training for community volunteers was conducted and they have started facilitating the sessions in the community.

- **1-day Step down training on SAVIX:** On 14<sup>th</sup> February, WOCLIF team participated in a day step down training on Savings Group. During the step down training, the participants were exposed to using SAVIX tool to collect data from saving group and to monitor their progress. The SAVIX tool will be administered on Ikot Inyang VSCA during their meeting on 2<sup>nd</sup> April 2017.
- **A-4 Day Financial Management, Internal Control, Audit Preparedness and Compliance Training in Owerri:** On 26<sup>th</sup> February- 3<sup>rd</sup> March 2017, WOCLIF team led by the Executive Director Mrs. Uduak Umoh participated in the financial Management and accountability, Internal Control, Audit Preparedness and Compliance training at Top Rate Hotel Owerri. The training which had in attendance WEWE PMT led by Chief of Party Dr. Josephine Ogazi featured implementing agencies implementing WEWE LOPIN Region 2 project across the four states of Anambra, Imo, Akwa Ibom and Rivers. During the training, asset management and safeguarding process was discussed, compliance for auditing purpose, internal control, documentation, retirement and financial reporting were discussed. At the end of the training, audit clinic was conducted and the gaps identified in WOCLIF's financial retirements has been addressed. Gaps such as office rent receipt, tenancy agreement, in complete signing of club activities has been addressed.
- **A 2-Day Financial Education training in Akwa, Anambra State:** on 13<sup>th</sup> and 14<sup>th</sup> March 2017, WOCLIF team participated in Financial Management Training Akwa, Anambra State. The training was facilitated by WEWE Quality Improvement Director Miss Ngozi Orame and co-facilitated by Catholic Relief Services HES Technical Specialist Mrs. Emily Oteyi. During the training, financial education and literacy. The training promote and develop knowledge, skills, attitude, practice and behavior that can improve how Household members can better manage their money in a way that can improve the standard of living of the family while financial education is not for convenience but an essential survival tool which when taking for granted can lead to poor financial choice and decision with undesirable consequences on households. Literacy in the other hand is the level of aptitude in understanding personal finance. And also saving money especially when there is surplus is a key way to financial freedom. In actual sense, seasonal calendar help us to track when we have more, when to save, borrow, and estimate your total income.

**Program Objective 3:** This section highlights Public Private Partnerships/collaborations from which resources were mobilized to meet the needs of children and households. Activities conducted include:

- Leveraging of 1000 copies of HIV IEC materials from Society for Family Health (SFH). In order to ensure that WEWE LOPIN 2 Project beneficiaries have access to pictorial



information on HIV prevention, WOCLIF team leveraged IEC materials from SFH and the materials were distributed during adolescent boys and girls session.

### 2.3 Implementation challenges.

- Late release of fund in the month of February 2017 affected project implementation in the communities. WOCLIF was unable to implement some of the monthly routine activities.

### 2.4 M& E Update

**Meetings:** LOPIN-2 M&E unit participated in various meetings within the quarter under review in order to strengthen partnership among the stakeholders, provide technical support to her implementing agencies and to update staff on the new OVC directions through weekly routine staff meeting where activities were planned, achievements and other issues were discussed in details. LOPIN-2 M&E team also participated in:

- Implementing Agencies and Direct Implementation Team review meeting
- M&E plan review meeting
- Orientation Workshop For Imo State Primary Health Care Development Agency (Imo SPHCDA) On Primary Health Care Under One Roof (PHCUOR)
- ANSACA Data Validation Meeting

**Mentoring and Supportive Supervision:** Routine monitoring, mentoring and supervision were regularly carried across all the project sites throughout the period under review. These were aimed at providing on the job mentorship to program and M&E team of the IAs and DIs in the area of monitoring of program activities, reporting, and proper documentation, and to enhance data quality. During the mentoring visit, the State M&E Officers provided mentorship on the new directives with emphasis on the implication of not serving all her beneficiaries, as it will result to the beneficiaries not being active and withdrawn from the project, hence, the cut down in the budget; therefore, encouraging IAs and DIs to always refer to the program implementation plan in order to be guided.

**Service Provision:** A total of 49449 (118%) of total target beneficiaries enrolled in the program were served within this reporting quarter in all the four LOPIN 2 implementing states of Akwa-Ibom, Anambra, Imo and Rivers. The beneficiaries of the services are enrolled VC and their Caregivers between the ages of 1-17 and 18+ respectively who are either infected and or affected by HIV/AIDS; and children and caregivers who are at high risk of HIV/AIDS as a result of their community traditions and environment. These services were provided in relation to identified needs using child status index (CSI) and care plan developed for the VC and their households; in line with the guidelines provided under the PEPFAR Guidance and National Standards for improving the quality of life of vulnerable children in Nigeria.

While providing these services, measures were taken to ensure data quality, by counting only individuals and not services and ensuring that all the VC and caregivers that are old, new and those that have received same services were properly identified during documentation so as not to count them again. The beneficiaries that were served and included in the total count for this

quarter are active beneficiaries, (caregivers and VCs) who have received at least HKID services within this period. Some of the beneficiaries also exited the program without graduation through:

1. Death ( VC and caregivers)
2. Migration: (VC and caregivers)
3. Withdrawal due to lack of interest

**Data Verification and Validation:** Data verification and validation is a routine exercise done to enhance data quality. The aim of validating and verifying data is to ensure correctness, validity, accuracy, consistency of data and proper documentation of service documents in line with USAID reporting standard before it is being reported.

The process of verification and validation followed accessing the service registers to compare the data reported on the MSF against the register, and data quality test to check for the accuracy and correctness. The process also reviewed the VC and caregivers registers, care plan, service forms and attendance of meetings, ensuring that all reporting source documents are available, correctly entered into the register, documented and properly stored.

**Data Quality Assurance:** LOPIN-2 M&E team, led by the M&E Director, carried out a state wide Data Quality Assessment (DQA) in the four implementing states between November 01 and 25, 2016. A total of 15 implementers (8 Implementing Agents and 7 LOPIN-2 Direct Implementing Agencies) were assessed within this period. The DQA reviewed the quality of programming and services rendered to the beneficiaries of the program over the past fiscal years. The exercise was also used to review the five main PEPFAR indicators (OVC Served, OVC\_KNOWN Status, Gender GBV, Gender Norms, and PP\_Prev) and the reporting processes. The DQA focused on four key assessment domains which include Data Availability, Data Consistency, Data Validity and Systems Assessments. The documents that were reviewed includes screening/eligibility tools, Enrollment tools and Service provision tools. The objectives of the assessment are:

- To assess the quality of data reported by all LOPIN-2 Implementing Agencies (IAs) and Direct implementers (Dis) in Akwa-Ibom, Anambra, Imo and Rivers states in relation to the USAID data quality standards
- To understand the level of LOPIN-2 data quality at the close of FY16 and use that as a basis for accessing any quality data at beginning of FY 17.
- To Update/educate the IAs and DIs on the new PEPFAR indicators and reporting procedures for FY17
- To assess the management information system used by the IAs and DIs to record, maintain, and report quality data

Some of the key findings include key findings of the assessments from the four states are summarized below based on key categories of the assessment tool. However, individual finds are contained in state specific report.

**Data Availability:** All the implementing Agents have their site copy of the screening, enrolment & service provision forms. Data source documents were all available but some were not properly signed and this affects data Validity.

#### **Data Consistency**

- There were clear cases of data inconsistency resulting primarily from data transcription from source documents to folder. This affected data accuracy and reliability.
- It was observed that services given were not in-line with CSI scores and care plan developed.
- Referrals were not completed for most of the documented referrals

#### **Data Validity**

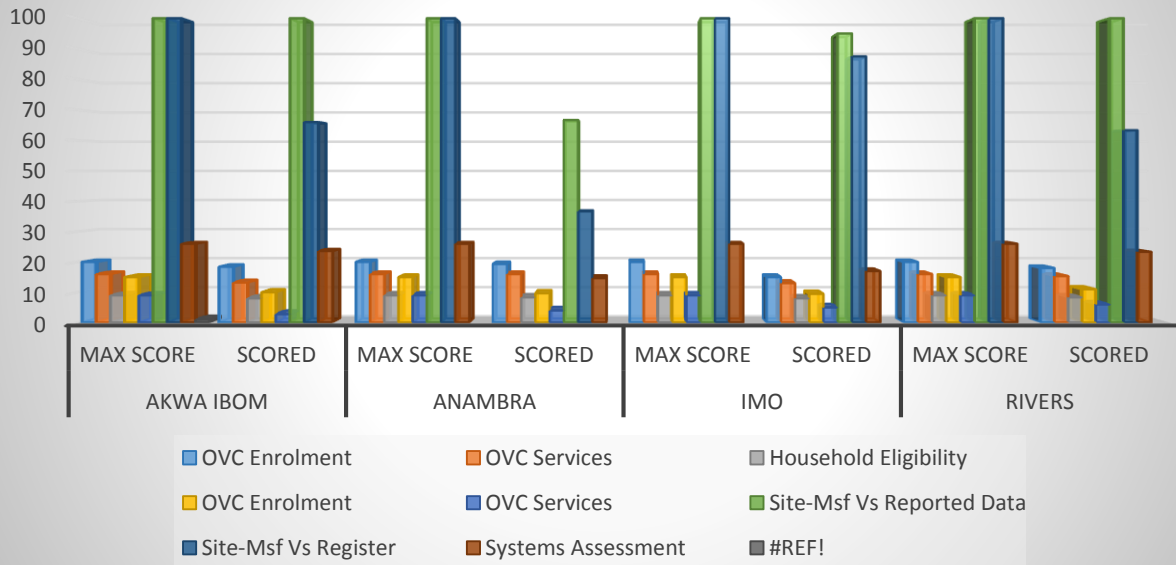
- Site copy of most of the Monthly Summary Forms (MSF) were in line with what was submitted to LOPIN-2 M&E office
- Recount of data reported on the MSF did not tally with that of the service register which made the validity of MSF data.
- Lost to follow-up data were not captured in the service register for the reporting month.

#### **Systems Assessment**

- Data quality control mechanism only exists in some of the IAs and DIs, while some of the IAs does not understand, neither put in place any data quality control mechanism to ensure quality at all level.
- Not all the M&E team understands enrolment and service provision and data reporting flow
- There was no improvement on the first and second CSI and HVI. This means the program was not having any effect on the quality of life of the HHs and VC.
- Some of the IAs and DIs Data Entry Clerk and M&E Officers were not formally trained by LOPIN-2 on M&E
- There were no dedicated budget line for M&E activities for FY16, and most of the IAs M&E officers had no idea of their M&E budget.

The charts below shows the comparative result of the assessment:

## STATES DQA RESULT PER SERVICE AREA



### **3. INTEGRATION OF CROSSCUTTING ISSUES AND USAID FORWARD PRIORITIES**

#### **3.1 Gender Equality and Female Empowerment:**

Gender session was incorporated into club activities, especially for caregivers and adolescent boys and girl. The gender sessions afforded WOCLIF team to expose beneficiaries' to discussions on values, values clarification, gender and sex, gender roles, gender based violence and HIV and sexual violence and HIV. WOCLIF team ensured that age appropriate information were given during the gender sessions for in-depth understanding.

#### **3.2 Sustainability Mechanisms:**

Part of LOPIN-2's sustainability mechanism is the formation of community improvement teams (CIT) in the various communities. These CITs has started improvement meetings with the aim of improving the lives of the vulnerable households in their communities. Community volunteers are oriented and mentored on conducting meeting with or no supervision. The volunteers fix and hold meeting without involving DIs/IAs program staff. In the same vein, the caregiver hold their VSLA meeting with little or no supervision every week.

#### **3.3 Environmental Compliance:**

Bio-degradable consumables are considered when making supplies and purchases for the LOPIN-2 state and DITs /AI offices.

#### **3.4 Youth Development:**

The adolescent boys and girls constituted the youth club in the LOPIN2 project. During the period under review. Peer education manual was used in engaging the youths on different life building skill like Negotiation and refusal skill, Stages in human development, ten top reasons to delay sex etc. The sessions were aimed at building their capacities to tackle the drivers of HIV/AIDs epidemic and also build their self-esteem.

## 4. STAKEHOLDER PARTICIPATION AND INVOLVEMENT

*. Prior to WEWE LOPIN 2 project implementation in Ikot Obong Edong, Ikot Idem, Ikot Udoe and Ikot Inyang, WOCLIF team enjoyed the active support and participation of community leaders and stakeholders such as State Ministry of Women Affairs and Social Development (OVC Desk Officer,), Ministry of Health, (Nutrition Unit and HIV unit), Akwa Ibom State Agency for Control of AIDs, National Population Commission, Ikot Ekpene Local Government Council, Ikot Ekpene Police Division, Local Government Education Authority, Operational Base and Primary Health Centers across the four communities, Social Welfare Department and Nutrition Officer Ikot Ekpene. All these stakeholders were involved in WEWE LOPIN 2 Project implementation. The advocacy visits conducted to these stakeholders contributed to the success recorded in first quarter of FY 17. The community halls were used in the activities with the active participation of representative of Village Council Members. The test kids for the HTC were gotten from AKSACA and Primary Health Centers across the communities.*

## 5. MANAGEMENT AND ADMINISTRATIVE ISSUES

During the reporting quarter, there was no administrative issues that affected project implementation.

## 6. LESSON LEARNED

## 7. PLANNED ACTIVITIES FOR NEXT QUARTER INCLUDING UPCOMING EVENTS

Planned activities for next quarter include:

1. Continue enrolment of vulnerable households
2. Conduct needs assessment for caregivers & older VC on HES
3. Identification and assessment of households for graduation
4. Conduct Monthly caregivers, adolescent and kids club meetings
5. Monitoring of Village and Savings Contributions

6. Continue tracking and escort services for positive beneficiaries
7. Conduct monthly Community Improvement Team Meetings
8. Conduct Volunteers Monthly Review Meetings
9. Re-enroll children back to school
10. Supportive supervision to CVs during home visit
11. Monitoring and Quality Assessment
12. Household monitoring and verification exercise
13. Advocacy visits to educational stakeholders to facilitate Education Block Grants to Government Primary and Secondary Schools with high VC intake
14. Provision of start-up/business enhancement materials and items for eligible caregivers preparatory for graduation in project communities in the state
15. Administration of HVI and graduation checklist on graduating households
16. Graduation of Households
17. Monthly review meeting for community volunteers

## **8. WHAT DOES USAID NOT KNOW THAT IT NEEDS TO?**

## **9. HOW IMPLEMENTING PARTNER HAS ADDRESSED A/COR COMMENTS FROM THE LAST QUARTERLY OR SEMI-ANNUAL REPORT**

Some of the issues raised during the audit clinic has been addressed. For example, incomplete signing of club activities attendance sheet were taken back to the communities for complete signing. Furthermore, the issue of office rent and tenancy agreement has been addressed.

## ANNEX A: PROGRESS SUMMARY

Achieved progress versus planned for the period disaggregated by gender, geographic area and other relevant factors (use table below). *This should be completed by the M&E Team...*

**Table 1(a): PMP Indicator progress - USAID Standard Indicators and Project Custom Indicators**

[Strategic Objective]											
Indicator	Data Source	Baseline data		FY 20[XX]		Quarterly Status – FY 20[XX]				Annual Performance Achieved to Date (in %)	Comment(s)
		Year	Value	Annual Cumulative Planned target	Annual Cumulative Actual	Q1	Q2	Q3	Q4		
<b>Intermediate Result (IR):</b>											
<b>Sub-IR:</b>											
<b>Sub-IR:</b>											
<b>Intermediate Result (IR):</b>											
<b>Sub-IR:</b>											





**Success Story: identifying the gap of using pictorial evidence for preventing HIV and leveraging of 1000 HIV prevention IEC materials is a plus to WOCLIF and our commitment to prevent new spread of HIV infection in the community.**