

Policy Initiation for FLHE



BACKGROUND



- FLHE is a planned process of education that fosters the acquisition of factual information, formation of positive attitudes, beliefs and values as well as development of skills to cope with the biological, psychological, socio-cultural and spiritual aspects of human living (*NERDC, 2003*).

GOAL

To
promote
awareness
and
prevention
against
HIV and
AIDS

OBJECTIVES

- To assist individuals having a clear and factual view of Humanity;
- To provide individuals with information and skills necessary for rational decision making about their sexual Health;
- To change and affect behaviors on Humanity; to prevent the occurrence of HIV & AIDS (NERDC 2003)



SFH Involvement

FLHE is an initiative of the Government of Nigeria to reach in-school young people with factual reproductive health and HIV prevention information using the curricular approach.



SFH was selected as the Principal Recipient (PR) and the Federal Ministry of Health (FME) as the Sub Recipient (SR).

The implementation was conducted in 21 disease burden states in Nigeria. The programme was injected with various structures like:

1. Project Implementation Team (PIT) and
2. the Project Advisory and Advocacy Committee (PAAC)

who were saddled with the responsibility of coordinating FLHE implementation and mobilizing resources at the state level.

The programme was designed in view of the National response which provides a guideline for behavior change communication programming;

The guideline takes cognizance the drivers of the epidemic as it relates to the target population with emphasis on dosage, intensity, and recognition of individual, community, structural and environmental influences of behavior and process of behavior change.

According to the guideline, minimum of three prevention intervention strategies have been selected from the National HIV and AIDS Prevention Plan (2010 – 2012) NPP for the implementation of this SDA.

SFH Involvement Cont'd



A key stream of the programme was also the training of about 8000 teachers who were saddled with the responsibility of skillfully delivering health and HIV education to students (In the upper primary and lower secondary schools)

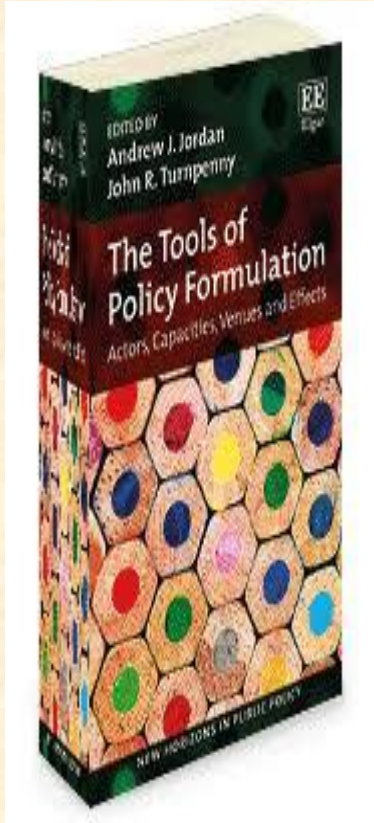
The project reached over 655,000 with effective Comprehensive HIV prevention package through:

- ✓ Classroom teaching
- ✓ Community awareness
- ✓ Peer Education plus (Zip up Plus).

Quasi-Experimental survey was introduced to measure the outcome of key indicators such as:

- ✓ Increase HIV comprehensive knowledge
- ✓ Delay in sexual debut
- ✓ Stigma Reduction

Innovating Policy Reforms



■ Promoting Program Ownership and Sustainability:

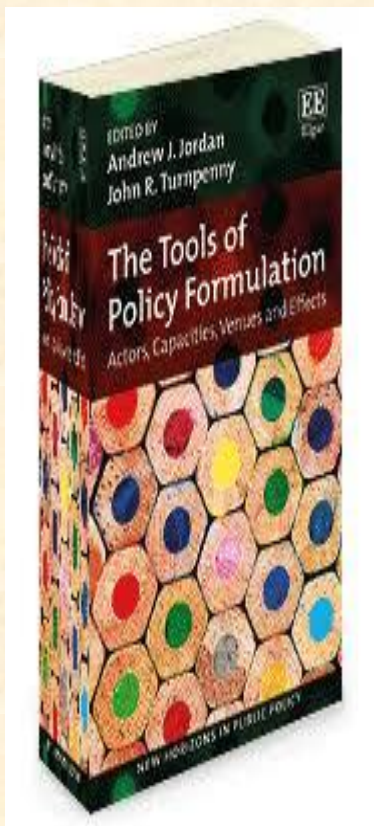
- Institutionalization of Anti-AIDS club activities (In states where it hasn't been)
- To include budgetary line and release of funds for FLHE/ZUP implementation into the State budget
- Integration and Linkages into SACA/NACA line activities
- Scale up dosage of training to universities and other higher institutions

■ Advocacy to Policy makers

Advocacy to Commissioners, perm sec, SACA EDs, LACA, SUBEB Chairmen, PPSMB, ANCOPS, Director Higher Learning, National Teachers Institutes and all other education managers for the following reasons;

- To support institutionalization of Health clubs in schools
- To mainstream FLHE into quality assurance instruments/ checklist
- To institutionalize FLHE in pre- service academic curriculum

Innovating Policy Reforms Cont'd



- **Sensitization of Education managers**
- This is expected to further aid the following;
 - Better understanding of the HIV epidemic among in school youths
 - For a clearer understanding of the FLHE intervention
 - To encourage and strengthen health club activities in their schools
- **Cluster Model (Linkages to referral)**
- There is a need for linkage of in-school programming to existing Youth Friendly Centers for sexual and reproductive Health referrals and linkages for services.
 - The programme will Leverage on existing youth friendly centers for SRH referrals and linkages for services.
 - Reduction of age of HIV test from 18 years to 14 years of age and approved by National Council of Health

Innovating Policy Reforms Cont'd

- **System Strengthening**
- **Mainstreaming FLHE into existing system**
 - Solicit to NCCE and NTI for increase in dosage and intensity of training of students on FLHE during Pre-service training. Also enlists other higher institutions other than colleges of education to hold Pre-service training for students. Integration and linkages with SACA, to synchronize and harmonize resources to further aid standardization of programs and subsequent scale up.
 - Adequately engage NUC buy-in to include FLHE into their curriculum and also initiate curriculum review to mainstream FLHE into tertiary education curriculum.
 - Institutionalize and strengthen Health clubs in schools by ensuring mentoring by the school Principals
 - Collaboration with the Organized Private Sector through Public Private Partnership (PPP)
 - Facilitate Inclusion of SMOE desk officer into SACA technical Working Group and SACA included in the FME critical mass.
 - Build capacity of HIV desk officers to initiate inclusion of FLHE support in SACA activities and budget
 - Training and strengthening the Guidance counselors and Inspectors
 - Establishment and/or strengthening of an HIV/AIDS unit in all states
 - Strengthen government structures that are part of FLHE implementation
 - Advocacy for review and implementation of the National Education Sector HIV&AIDS Strategic Plan-NESP (2006-2010) to reflect current realities



Innovating Policy Reforms Cont'd

■ Strengthening Programme Monitoring and Supervision

- Training of Quality assurance staff on monitoring checklist and supervisory structure.
- Training/workshop for stakeholders to mainstream FLHE into school register and data quality assurance checklist/instrument.
- Build the capacity of quality assurance/inspectorate on:
 - -Use of mainstreamed monitoring instrument/checklist
 - -Methodology of data retrieval from the schools
- Conduct advocacy to SACA to provide support for the retrieval of data by the Quality Assurance / Inspectorate department of SMOE
- Incorporation of reproductive education records as an aspect of mandatory annual school report.
- Institute process for implementation of the Monitoring and Supervisory mechanism in the National Education Sector HIV&AIDS strategic plan-NESP(2006-2010)
- Train M&E focal person in HIV&AIDS unit on the use of NESP monitoring tools. SUBEB/SACA/SMoE/Teachers.
- Equip HIV&AIDS unit at all levels with necessary tools (hardware and software) for data management.
- Integration of NESP Monitoring indicators into the school inspectorate schedules.



DISCUSSIONS

