

# **REBUILDING LIVES:**

**MORE  
CHOICES  
AND  
CHANCES**

**ADVANCE  
2012-2016  
STRATEGIC  
PLAN**

# **REBUILDING LIVES: MORE CHOICES AND CHANCES**

**ADVANCE 2012-16 STRATEGIC PLAN**

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## **Executive Summary**

Looking back over the past half-decade, I am immensely encouraged by the many signs of God's blessing in our ministry. Over a year ago, ADVANCE embarked on a strategic planning process for 2012-2016. This plan, dependant on our learning experiences over the last 5 years, was developed and put into place to serve as a guide and a foundation for ADVANCE's ministry in the years that follow. Our ministry has evolved over the years, but we have always depended on three things: God's Grace, dedicated staff members, and generous friends. We have been a family to hundreds of Gods people over the years - clients, staff, volunteers, short-term missionaries, visitors, and donors alike - we hope more will join our family!

ADVANCE today is vastly different from anything we could have imagined at the writing of the last strategic plan document of 2006-2011 – access to ARVs is widespread through government efforts and our community has become everyone in need of love and care. People from different backgrounds, beliefs, and situations, both near and far are connected to the heart of ADVANCE as never before. This is through the compassionate work of various Community AIDS Response Teams, volunteers within and outside Nigeria, and the heart-warming work of the Donegore Centre that directly works with individuals, couples, families, groups, local congregations and the larger community in Ogugu. Since its inception in 2007, the centre programmes have been the home of hundreds of children and adults. Our staff, supporters and volunteers have put in countless hours and resources working to ease hurt, provide psychosocial support, and help local people in the community and surrounding villages experience the gospel first-hand.

In the face socio-economic and health challenges, ADVANCE builds its culture on the mission tradition of its founding organisation Mission Africa and its identity as a joint programme with the United Evangelical Church of Nigeria. We are committed to excellence in reaching the poor, the sick, the hungry and the broken with the love of Christ and the conviction of "doing good to everyone" (Gal. 6:10). We will continue to actively uphold our Christian value of embracing diversity with compassionate care. Our reach is everyone in need – this includes the hardest to reach, the poorest and the most isolated.

In purely statistical terms, the investment we made in staff, evangelistic outreach, and new initiatives in the past five years still has more fruit to bear. This may be in terms of conversions, volunteers, indigenously generated funds, full participation of local churches or increased understanding of the issues the church must invest its resources and personnel in. In these important indicators of spirituality as well as gospel influence, we still have so much to do and accomplish.

I believe in the immediate future we need to focus much more on our core priorities, our distinctive strengths and unique position in the community. We need to maximise the utilization of our assets, resources and existing personnel. We must also ensure our staff, leaders, volunteers, and UEC members are aligned to our 'engage-connect-transform' model of ministry and wholly support our Vision and 2012-2016 Five Year Plan.

To that end I submit these strategic priorities for ADVANCE for 2012-2016. I believe that, by God's grace, they will lead to the growth of not just ADVANCE but of the body of Christ in the years ahead and beyond.

Goal 1: Leadership and Discipleship

Goal 2: HIV/AIDS

Goal 3: Poverty Reduction

Goal 4: Child Protection and Well-being

Goal 5: Management and Organisational Development

Goal 6: Resource Mobilization and Sustainability

The six thematic goals are the core components of our integral mission or holistic ministry. These goals were a result of the information we have gathered over the past five years and from the participation of the various stakeholders within and outside the UEC through small focus groups, workshops, meetings, surveys and a study of our environment. These goals set our ministry in the direction of our Vision Statement, Mission Statement and the Preamble of the ADVANCE Constitution, which embrace a culture of reaching people so they know Jesus Christ and have life in its fullness. Rather than setting the goal of the growth of the ministry in a sense measured purely by the number of services we offer or number of people benefiting from our programmes or by the money value of our

investment, the ministry's growth strategy of this 2012-16 Strategic Plan focuses on growing in our Vision, by breaking down barriers and building bridges to segments of the church and surrounding communities who have needs that can be met by ADVANCE but who are not currently fully represented and served by our current programmes, care centres and outreach service. Through this strategy, we hope to develop a more vibrant and relevant Christ-centred organisation which will be both stronger in numbers of workers and volunteers and stronger in terms of its service to the surrounding communities.

This document is designed to help you understand the ministry and goals of ADVANCE and how ADVANCE plans to meet them. It is our roadmap for how we will continue to respond to the challenges of Nigeria's changing HIV/AIDS, child abuse, poverty, and religious demographics — what we will do and how we will do it.

We are well down the path of developing proposals around each of the Strategies identified to test the benefit they will deliver, their achievability and the resources required. The Strategic Plan is therefore an evolving document that will change over time to reflect our thinking and decisions. I look forward to keeping you informed of progress and to providing you with further opportunities to get involved in developing and delivering new services that will make a huge difference to our community.

Thanks to Mission Africa, the UEC Executives and Church, and all the Trustees, Advisory Board Members, National Response Committee, staff, volunteers, and partners of ADVANCE for your input to this strategic planning process.

Christ is all that matters



**Billy Abwa**

*Project Manager*

## **SECTION ONE**

### **1.0 Our mandate, Our Commitment**

At ADVANCE, we follow Christ's mandate to heal the sick and help the poor, and will continue finding innovative ways to help the most vulnerable in our communities. ADVANCE is dedicated to helping all vulnerable people within our reach to realize the quality of life that God intends. We will continue to invest our time, resources, and personnel in ventures that can help develop local skills and capacity so that successful initiatives and benefits of ADVANCE's ministry can be sustained into the future. We are thrilled to be making bold plans to enable local people take control of their future by strengthening the resources of individuals and families, and communities in Nigeria. We help people to help themselves because we believe everyone has the possibility of creating a better future for themselves.

From this vantage point, we articulate our Core Purpose, which is glorifying to God, biblically based, and faith stretching in scope.

ADVANCE seeks to effect transformational change in individuals, families, and communities around Nigeria. To do this we will continue to develop and use our spiritual, human and financial resources in partnership with people, communities and organizations for advocacy and action.

Our objectives, goals and strategies reflect a series of foundational shifts. These are grounded in a belief that it is relationships that are the core strengths of our work in communities across Nigeria. And, further, that these relationships live and flourish in a thriving network of Christian love. We will continue to build on the strengths of our diverse congregations and teams, opening our doors wide and embracing all who come to ADVANCE for compassionate people-centred care and services. Such a Compassionate people-centred culture will truly embody our ministry, staff, volunteers and partners working in collaboration. We will strengthen our commitment to the Donegore Centre and continue our significant investment in ministry and mission beyond the church boundaries. We will develop new partnerships and take our partnering to a new level. Expressing what it means to be a Christian in the 21st century Nigeria, we will get our hands dirty and our feet wet taking action in the communities we serve and we will thread the values of Christ's way of life into all of our efforts and programmes.

Therefore, the trustees, advisory board, management team, staff and volunteers of ADVANCE together are committed to the foundational objectives of Mission Africa. We commit ourselves to:

- a. make the Gospel of Jesus Christ known
- b. establish a strong indigenous church in Africa
- c. engage in evangelistic ministry, in areas where the Church is not well established or where special need becomes evident and through the specialised channels of:
  - i. youth work
  - ii. literature and audio-visual media
  - iii. medicine
  - iv. education
  - v. compassionate and humanitarian outreach.

To ensure that ADVANCE stays true to the objectives of the first generation of missionaries and of The Mission today, the organisation will strategically continue to:

- i. Engage everyone who comes to ADVANCE in a relationship with God, however and whenever they come.
- ii. Enhance our evangelistic outreach and compassionate service, making available a wide range of opportunities and choices that reach and welcome all to the gospel message and to expressions of acts of love.
- iii. Create a constant, visible and inviting presence at all our care centres through accessibility, information, counselling, visitation, psycho-social engagements, and user friendly environment.
- iv. Foster, develop and continue to expand a range of self-organizing Community Action and Response Teams (CART) – of small size and great impact.
- v. Reflect our learning and transformative history of Mission Africa and The United Evangelical Church to create an experience for staff, volunteers, visitors and partners that inspires and ignites a sense of hope for positive change through an understanding of how to be Christlike and express the values of his way of life.

- vi. Transform lives and communities by practicing and teaching the Christian way of Life embodying the six values of creative work, holy leisure, stewardship, diverse community, humility and peace.
- vii. Build sustainable capacity for raising-up a generation of young people who are healthy, productive and compassionate.
- viii. Identify and develop mutual partnerships, providing human expertise, funding and other key assets.

## **SECTION TWO**

### **2.0 History and Background**

ADVANCE is a Joint Programme of Mission Africa UK and the United Evangelical Church (UEC) Nigeria. Casual discussions about the need for a church response to HIV started in 2002 and by 2004 the church and Mission had launched an informal project named STILL WATERS. The first year of volunteers carrying out HIV prevention education steadily gathered momentum and in 2005 Mission Africa seconded a full time missionary to develop the project. In 2006 the UEC launched her HIV and AIDS Policy alongside a five year strategic plan for HIV prevention and care throughout the National church.

Mission Africa sent a second missionary in 2006, and in the first three years HIV prevention and Care teams were trained from over half of the church's Area Conferences. The name changed to ADVANCE Action Against AIDS Initiative in 2007 due to governmental registration requirements. By this time confidential HIV testing and counselling was available at only a few of the Area Conferences. Over the next four years however, through training and resourcing, there are now fifteen Area Conferences offering free HIV counselling and testing in their communities. The ADVANCE team grew to four staff at head office and one at the Donegore Counselling and Care Centre opened in one of the Area's where HIV was found to be well over the national average; Ogugu.

Through all these developments new areas of concern began to arise, care of People Living with HIV (PLWH) grew to care of their children and eventually other orphans and vulnerable children (OVC) in the active Area Conferences. Child Abuse was a recurring theme during HIV counselling of clients so a Child Protection Policy was developed and launched in 2009 and child protection training commenced. The suffering of PLWH and their children, due to poverty was a further challenge and income generation support has commenced on a small scale since 2010.

### **2.1 Projects**

#### **a. HIV Prevention**

ADVANCE aims to reduce the prevalence rate of HIV in Nigeria through two major preventions strategies; HIV prevention education and free HIV testing and counselling. Prevention Education is carried out through the church structures and church teams. Groups, like women's, men's and youth fellowship are required to include HIV education at least twice a year in their programming. As the major HIV prevention strategies come straight from scripture this is an opportunity to challenge many church goers and community members on the authenticity of their faith. The trained teams in each area are involved in annual visits to each congregation in their area for HIV prevention teaching and free HIV testing and counselling. Testing and counselling helps in the prevention of HIV by encouraging individuals to know their HIV status and make plans to stay negative or to avoid infecting others if they are HIV positive.

#### **b. HIV Care**

Once a client tests HIV positive one of the most vital things that a living and compassionate church must do is lend support and care. Stigma and ignorance has led to a very poor relationship between PLWH and the church in many areas. PLWH may fear revealing their status in case they are thrown out or put on church discipline. The deep seated prejudices of individuals are tough to change, but through stigma reduction measures and training of HIV care workers as part of the HIV team in each Area this situation is changing slowly. ADVANCE has a designated Centre for the counselling and care of PLWH in Ogugu, Kogi State. The Donegore Centre openly serves all the members of Ogugu community regardless of financial situation, faith or age. As clients come for counselling over this very painful and life changing issue, some are turning to Christ for the first time and others are realising the joy of a deeper relationship with their God.

#### **c. Child sponsorship**

With the original intention of sponsoring the children of our clients with HIV ADVANCE made a small plan to provide scholarship support for up to fifty children for one year. When the wider community in Ogugu learned about this project, children and guardians of orphans and vulnerable children began flocking to the Centre for help. After

much consideration and God's simultaneous provision of a volunteer in N. Ireland to run the project CIRCLE OF HOPE began. There are now almost two hundred children who receive monthly sponsorship from sponsors in UK and Nigeria. The money is primarily used to pay for their schooling and some nutritional support, but there is also provision for medical care and discipleship resources. The Circle of Hope care worker visits each child at home and spends time every week leading them in their discipleship groups.

#### **d. Child protection**

Child Abuse in Nigeria is generally unreported, undocumented and unnoticed by the majority of the over 168 million strong population. But the physical, sexual and spiritual abuse of children is a major issue which ADVANCE believes the church must now face. The Child Protection Policy of the church is based on the Child Rights Act of Nigeria and on Biblical principles. We believe the UEC church is one of the first national churches to have acknowledged the problem of child abuse and begun to deal with it. Advance manages an on-going programme of child protection awareness seminars in the Area Conferences and in the next few years will step up this project to train Child Protection officers for each Area Conference and train all children's workers within the National church.

#### **e. Poverty alleviation**

When a person is diagnosed with HIV many emotions overtake them. Many start their process of accepting their status by denial; they spend money going to other centres and hospitals hoping to have a different result, others enter a stage of bargaining with God by spending money for special prayers at 'prayer houses'. Yet more believe the stories of traditional healers who will sell them a cure for a significant amount of money. In this process, which is the normal grief reaction, many of our clients who are already poor lose all the savings that they may have had and often put themselves into debt. Poverty alleviation is a requirement of on-going care of PLWH and their families. ADVANCE has entered a new development since 2010 to provide grants for PLWH and their families to commence a sustainable business and in the coming years we hope to broaden the scope of this project.

### **2.3 How We Developed Our Strategic Plan**

Transparency and consultation with ADVANCE's stakeholder groups guided the development of our new strategic plan.

The development of the Strategic Plan 2012-16 has been a participatory and evidence driven process. Firstly, annual appraisals were done and a Mid-Term Review (MTR) of the 2006 to 2011 was also undertaken by ADVANCE through a participatory process. Stakeholders who helped conduct the MTR reviewed literature and also conducted interviews with a cross section of informants and beneficiaries of the work of ADVANCE. Secondly, the drafting of the plan included workshops with stakeholders form across Nigeria to validate the MTR recommendations and the strategic plan key objectives and strategies, as well as recommend coverage targets.

ADVANCE's management also conducted a three-step stakeholder's consultation:

1. We asked the communities we serve to tell us how they thought ADVANCE should move forward in the coming years. The management used this information to develop six Strategic Directions.
2. ADVANCE's management tested the six Strategic Directions in the broader community of stakeholders, using focus groups, one-on-one, interviews and print survey. We did our best to make sure that our clients, volunteers and staff knew about and had an opportunity to participate in all of these activities.
3. ADVANCE management reviewed and took into account the results of the community test of the Strategic Directions to develop a Draft Strategic Plan — then, tested the Draft with some selected community stakeholders.

*Rebuilding Lives: More Choices and Chances* reflects what ADVANCE learned and heard over the past five years during our work with clients and beneficiaries at the grassroots levels and our community consultations.

In addition, ADVANCE's strategic plan honours our dialogue, discussions and experiences with local People Living With HIV, orphans and vulnerable children, parents and guardians of our Circle of Hope Sponsorship project, church leaders, and other community members. Those interactions, through workshops, visitations, reports, and advocacy,

ultimately proved successful in enabling us develop a shared vision and joint Values statements and reaching a clearer understanding of the need for ownership and collaborative responses to changing realities as cornerstones to our plan.

Reflecting our commitment to on-going cooperation with the UEC, we invited its participation in our planning process. More than forty representatives from across the national church participated in ADVANCE's Multi-Stakeholder Workshop held on the 22<sup>nd</sup> – 25<sup>th</sup> August 2011. ADVANCE would like to express our thanks to them for their contributions to our strategic work.

We also developed our plan in the context of the Good News of Christ, the Nigeria National HIV and AIDS Response, Nigeria Child Rights ACT, and Nigeria Poverty Reduction Strategy Paper NEEDS. These documents provide the template for eternal purpose for doing the work of compassion and provide a guideline for what can be done to bring help and hope to the needy, transform communities and bring heal a broken nation. These strategic documents encourage ADVANCE and its local community-based groups and partners to look at innovative and integrated ways to deliver services to people. ADVANCE welcomes this way of working together, as a framework that offers more choices and chances for vulnerable people.

## **SECTION THREE**

### **3.0 The Landscape**

Using a business planning model, this chapter outlines the findings and conclusions of our five year's appraisal and multi-stakeholders workshop from customer, market and competitive study and reviews conducted (clients, environment and the past five years' appraisal) throughout the strategic planning process. The United Nations Millennium Development Goals, established in 2000, provided a framework for research and investigation in the second phase of environmental analysis.

The United Nations Millennium Development Goals:

1. Eradicate extreme poverty and hunger
2. Achieve universal primary education
3. Promote gender equality and empower women
4. Reduce child mortality
5. Improve maternal health
6. Combat HIV/AIDS, malaria and other diseases
7. Ensure environmental sustainability
8. Develop a global partnership for development

Research findings are described in two areas:

1. Customer and Marketplace Conditions
2. Competitive Environment and Best Practice Learnings

#### **1. CUSTOMER AND MARKETPLACE CONDITIONS**

Trends and conditions are considered from four perspectives:

- A. Mission Africa
- B. The United Evangelical Church congregations
- C. Service Users - individuals, families and local communities in Nigeria
- D. ADVANCE

##### **A. Mission Africa**

Mission Africa (The Qua Iboe Fellowship) is an Evangelical and Interdenominational mission working in northern Nigeria, Chad, Burkina Faso & Kenya in the areas of church planting, evangelism, theological education and medical work. The Mission is actively involved in efforts aimed at helping the marginalised and oppressed, focussing on those suffering from HIV/AIDS, street kids and women who are exploited. The Mission upholds the highest Christian values of love, respect, integrity, and unity in Christ.

The work of The Mission is controlled by its Council, who have the responsibility for setting the policies and strategic goals of The Mission, governed by the Articles of Association of Mission Africa. The operations of The Mission, at home and overseas, are directed by the Chief Executive, who implements the policies of The Mission. Those who join The Mission serve in various capacities at the head office and on the field.

Mission Africa works in partnership with like-minded churches and mission bodies in the various countries it is established to advance the cause of Christ. The Mission believes that it is the biblical pattern that the Church is the primary sending agency in mission, and as such its role is to facilitate the church in sending missionaries to the fields. The Mission runs Long-Term, Short-Term, Medical Electives, and Gap Year opportunities for people within the UK to come and serve in Africa. It sends out individuals, families, and teams to help and encourage local churches and share God's love with those who are marginalised and unreached. These individuals, families and teams go and work alongside our African partners such as The UEC to provide compassionate help, technical assistance and bring the gospel to all people.

## **B. The United Evangelical Church (UEC) of Nigeria**

The membership of UEC is approximately 6.2 million members, with 75% of the population in the Southern part of the country. Since the centenary celebration, and through 2011, the Church has seen increase in membership, steady attendance and economical and material growth. Ethnically, the church is non-diverse as there are only less than a dozen of the over 250 ethnic groups in Nigeria.

The UEC has 3 top National Conference executive officers – the National chairman, General Secretary and the national Treasurer. The church's Board of Trustees has 9 members. There are 12 Area Conferences, 13 Township Superintendencies and Districts, and 14 Institutions, Boards and fellowships including 2 medical facilities and three ministerial institutions, within the framework of the church. The church also has Nursery, Primary and Secondary Schools spread across the country, which are mostly run by its Local Churches. The Missions Board of the church has over 50 missionaries and presently 10 Mission Fields in 10 States of Nigeria, and is in the process of opening 2 non-domestic Mission stations in Liberia and Houston-USA. The nature of these various arms of the church is fluid as new ones added and functional structures are adjusted whenever the needs arise.

We conducted surveys, focus groups and interviews over the past five years and last year (2011) in our end-term evaluation to understand the diverse needs and interests of the UEC congregation and its host communities. The congregation expressed a strong desire for ADVANCE to build its future with consideration of its historical strengths from Mission Africa and its commitment to compassionate ministry.

## **C. Service Users – individuals, families and local communities in Nigeria**

Nigeria is the most populous country in Africa with population of over 167 million and over 250 ethnic groups. It has diverse cultures with very high level of illiteracy compounded with some other inhibitions such as scarcity of basic social needs including water, better health care, electricity and several others.

### **i. General**

- Life Expectancy: 47.7 years
- Infant Mortality rate: 75 (per 1000 live births)
- Deaths per 1000 population: 15
- Births per 1000 population: 41
- Over 55% Nigerians live below the poverty line
- High unemployment (23.9%) and one of the world's most unequal income distributions
- Second highest rate of maternal death in the world: One in every eight women die while giving birth
- Just over half of Nigerians have access to safe water and 32% have access to sanitation.

*Source: UNDP Human Development Report 2009*

### **ii. Religion and Spiritual Decay**

Nigeria is nearly equally divided between Christianity and Islam. The majority of Nigerian Muslims are Sunni and are concentrated in the northern area of the country, while Christians dominate the Middle Belt and south. According to a Pew study in 2011, Christians form a slight majority of the nation, comprising 50.8% (*Global Christianity: A Report on the Size and Distribution of the World's Christian Population, 2011*).

Religious people in Nigeria constitute the greatest number of the population, sadly however, corruption and inhuman treatment in private and public sector organizations have continued to thrive unfettered. It appears that the seemingly religious and sacred people of Nigeria have failed to identify with the good value system inherent in their religions and personal beliefs. As corruption rules in many private and public institutions, it also rules in many religious places of worship. The poor continue to suffer and bear the brunt of the suffering in the Nigeria system because religious institutions have failed to tackle the poverty within and outside its various establishments. These practices are gradually finding their way into mainline evangelical church operations, as the wind of 'prosperity gospel' and falsehood moves across the country and is being embraced by many. As noted by eChristianFinance, "*Christians today are ignorant of the Word of God and what it teaches. Too many people are simply seeking God's blessings and not the one that blesses. They readily believe that God wants us to be blessed materially because he loves us. They eagerly accept the teaching that since Christ suffered we shouldn't have to*"

(<http://www.echristianfinance.com/articles/prayer-of-jabez.htm>).

Fraud, exploitation and evil are no longer strange sins in the church. A report by the BBC says that a growing number of Nigeria's 70 million Christians are flocking after "*prosperity mega-churches*" which teach church members that economic and material blessings in the present life are the primary benefits of the "Gospel." According to the report, most of the Nigeria's "prosperity churches" are led by multi-millionaire pastors who present their personal material success as models of the benefits of "following Christ."

(<http://www.bbc.co.uk/news/world-africa-14713151>)

The following quote from Conrad Mbewe of Kabwata Baptist Church (KBC) in Lusaka, Zambia, summarises the present situation and terrain of the churches in Nigeria.

*"I have just returned from a consultative meeting in South Africa where the first day was spent surveying the spiritual state of the countries in the southern African sub-region. Central to all this was the state of evangelicalism in all these countries. Nation after nation reported on the arrival of "Nigerian religious junk" that was changing the landscape of what was once of evangelicalism. One or two of the countries were blessed exceptions. Evidently, this junk originated from mega-churches in the USA and then found ready soil in West Africa, and especially in Nigeria. Having given it an African flavour, it is now being exported across Africa at a phenomenal rate."*

(Source: A letter from Kabwata, [www.conradmbewe.com](http://www.conradmbewe.com))

The 'prosperity gospel' is nothing but a mixture of traditional religion, tribal spiritualism and hunger for money and power. The sermons of prosperity preachers are dominated by prayers and promises of economic and material wealth: new jobs, bigger salaries, new homes, new cars, business success, victory over enemies both spiritual and physical, babies for the barren, healing for the sick, and victory at the polls for the politicians who patronize them. Christlikeness, repentance, holiness and righteousness are absent in every church community that preaches the 'prosperity gospel'; even among the leadership are men and women who do not truly believe in the gospel of Christ or that the bible is inspired by God. As scholar James R. Goff noted, God is "*reduced to a kind of 'cosmic bellhop' attending to the needs and desires of his creation.*" (Source: James R. Goff, Jr., "The Faith That Claims," Christianity Today, vol. 34, February 1990, 21)

### iii. Nigerian and HIV and AIDS

- HIV prevalence among youth age 15-24 declined from 6% in 2001 to 4.3% in 2005, 4.2% in 2008 and 4.1% in 2010.
- More than 80% of HIV transmission in Nigeria is through heterosexual sex.
- Among key populations at higher risk, HIV prevalence is 24% among sex workers; 17% among MSM and 4% among IDUs respectively.
- The drivers of the epidemic in Nigeria include high illiteracy, high rates of Sexually Transmitted Infections (STIs) in vulnerable groups, poverty, low condom use and general lack of perceived personal risk.
- National Median HIV Prevalence (ANC): 4.1%
- Estimated number of people living with HIV/AIDS: 3.1 million
- Annual HIV positive births: 56,681
- Annual AIDS Death: 215,130 (Male – 96,740; Female – 118,390)
- Number requiring Antiretroviral therapy: 1,512,720 (Adult – 1,300,000; Children – 212,720)
- New HIV infection: 281,180 (Adult – 126,260; Children – 154,920)
- Total AIDS Orphans: 2,229,883
- Children are affected by the epidemic by contracting the disease from their mothers and/or by losing a parent to the disease.
- Even though awareness of HIV/AIDS is high (93%), comprehensive knowledge of HIV is low at 25% (NARHS, 2007)
- The uptake of HCT is low among the general population as the proportion of people tested is only 14.4% for females and 14.7% for males respectively.(NARHS, 2007)
- Less than 50% of women know where HCT can be obtained (NARHS, 2007).
- The desire by Nigerians to go for HIV testing increased from 43% in 2005 to 72% in 2007 (NARHS, 2007).

## Youth

- 43% of 15-19 year old girls have ever had sex
- Age of sexual debut is 16 years for females and 17 years for males. (NDHS, 2008)
- Unemployment is concentrated in the younger age group, with unemployment of 41.6% among 15-24 year olds, 11.5% among the 45-59 year olds, and 16.7% among those over 65
- Unemployment rates are higher for females (24.9%) than for males (17.7%)

## Abortion

- Abortion is a taboo subject in Nigeria; it is very difficult to find any woman who had had an abortion willing to speak about it openly.
- About 750,000 women have abortions every year, a rate of 25 abortions per 1,000 women aged 15-44
- Among women of reproductive age, one in seven (14%) have tried to have an abortion, and one in 10 (10%) have actually ended an unwanted pregnancy.
- 60% of those are "unsafe", an estimated 456,000 abortions.
- 20% are done by a traditional healer or the woman herself
- The cost of an abortion range between \$4 - \$15
- 20% of pregnancies in Nigeria are unplanned
- 50% of those end in abortion
- Women in the mostly Christian south are likely to experience unwanted pregnancy as women in the Muslim north
- 10,000 women die every year in Nigeria from unsafe abortions, carried out by untrained people in unsanitary conditions. That is 27 deaths every day (one sixth of the total number of women who die worldwide from such procedures). (*Unwanted Pregnancy and Induced Abortion in Nigeria: Causes and Consequences*, New York: Guttmacher Institute, 2006)

## Children and Child Abuse

- Nigeria has the largest burden of orphans and vulnerable children in the world estimated at 17.5 million (FMWASD, 2008).
- A staggering 15 million children under the age of 14 are working across Nigeria
- Many Nigerian working children are the victims of sexual abuse as consequence and result of child labour across the nation. (*Mohd, Azizah and Amuda, Yusuff Jelili, Nigerian Children Sexual Abuse as a Result of Child Labour (December 27, 2011)*.)
- World Health Organisation and the United Nations Development Systems estimated the prevalence of Female Genital Mutilation at approximately 60% of Nigeria's female population.
- About 38% and 28% of female and male in Nigeria have reported being initiated to sex before the age of 18 years. (*2000, African Journal of Reproductive Health*)
- Child sexual abuse is very common in Nigeria, but people affected prefer to treat the issue as top secret.
- Sexual violence is frequently directed toward young girls and youth, who lack the economic and social status to resist or avoid it.
- Adolescents and young women, in particular, experience abuses in the form of domestic violence, rape and sexual assault, sexual exploitation, and/or female genital mutilation.
- Accurately estimating the prevalence of sexual abuse and violence in Nigeria is difficult due to the limited amount of research done on the subject.
- There is an active trade in children both within and outside the country. This totally deviates from the traditional African culture of handing over children from indigent families to live with relations that are more affluent.
- Female children are given away in marriage before attaining puberty as a means of preventing the licentious act of premarital sex, others report that early marriages are strategies adopted by poor families to supplement negligible incomes (*AFROL Gender Profile-Nigeria: 2002*)
- Generally, working children have no time, money or energy to go to school. About six million working children in Nigeria, equally split between boys and girls, do not attend school at all, while one million children are forced to drop out due to poverty or because of parents' demand to contribute to the family income.
- The belief in child witches is wide spread across Nigeria and children are particularly vulnerable to accusations of witchcraft and the resulting stigmatisation.

- There is high number of Nigerian children who are stigmatised as witches and subsequently tortured, abused, abandoned and even killed as a result of this harmful traditional belief.
- Children who witness violence may experience many of the same emotional and behavioural problems that physically abused children experience, such as depression, aggression, disobedience, nightmares, physical health complaints and poor school performance.

## **Women**

- In Nigeria, 81 per cent of married women report being verbally or physically abused by their husbands. Forty-six per cent report being abused in the presence of their children. (*Odunjinrin O. Wife battering in Nigeria. Int J Gynaecol Obstet 1993; 41:159-164.*)
- The World Bank estimates that rape and domestic abuse account for 5 per cent of healthy years of life lost to women of reproductive age in developing countries. (*Heise LL, Pitanguy J, Germain A. Violence Against Women: the Hidden Health Burden. [World Bank Discussion Papers, no.255] Washington, DC: World Bank, 1994.*)
- One out of every four suicide attempts by women is preceded by abuse. (*Heise L. Violence against women: the missing agenda. In: Koblinsky M, Timyan J, Gay J, ed.. The Health of Women: A Global Perspective. Boulder, CO: Westview Press, 1993.*)
- Seventy per cent of those living in absolute poverty in the world - that is starving or on the edge of starvation - are female. In Nigeria, women and children are the mass of the poor and the poorest of the poor.
- Women and households headed solely by women are often the most chronically poor groups within rural communities.

## **D. ADVANCE**

Jointly established by Mission Africa and The UEC, ADVANCE's role is that of building local capacity so that programmes and improvements become more sustainable, allowing us (as the provider organization) to exit and transition full ownership to the church and the community. ADVANCE carries out its mission with strategies that are affordable, effective, replicable and sustainable. While our programmes are diverse and fine-tuned to better meet local conditions in the communities where we work, they share a unified approach, based on three pillars:

1. Mobilizing church clusters at the both local and national levels to build self-reliance;
2. Empowering individuals and groups as change agents; and
3. Forging effective partnerships with both local and international churches, organisations, professionals and the government.

These three pillars come together in a proven and systematic methodology based on true empowerment combined with the patience to work at a pace attuned to local needs, cultural sensitivity and genuine partnership. The result is sustainable, integrated development and the achievement of our objectives at the local level. Some of our achievements are as stated below.

- Been in action since 2005
- Head Office moved from Jos to Abuja in 2006.
- First HIV Policy and Strategic Plan in 2006
- Began development of a UEC Child Protection Policy and Strategy in 2008, drafted in 2009, and commissioned and published in 2011.
- Function as an in-community capacity-building organisation.
- Established the Donegore Centre in Ogugu in 2007.
- Conducted over 3,218 HIV Counselling and Testing.
- Trained 8 church marriage communities of 153 people on HIV Counselling and Testing.
- Trained over 500 core volunteers to carry out HIV prevention, Counselling and Testing programmes.
- Reached 1200 women with health and family development skills and knowledge through our REFRESH Women programme.
- Reached over 7000 youth abstinence and health improvement messages through our Purpose Driven Youth programme.
- Trained 506 men on HIV prevention, parent-child communication and the role of men in reducing the prevalence and mitigating the impact of HIV/AIDS.
- Empowered 506 church leaders to actively participate in HIV and child abuse programmes.

- Helping over 200 orphans and vulnerable children with nutrition, health care, scholarship, and psychosocial needs.
- Conducted 5 capacity building trainings for 151 primary and secondary school teachers to address child discipline and abuse issues within church and community own schools.
- Carried out over 59 HIV awareness at youth conferences and churches,
- Reached 18,472 people with HIV prevention messages.
- Have 15 active Community AIDS Response Teams in the UEC
- Developed and distributed hundreds of over a dozen of HIV/AIDS and child protection literatures.
- Organized and implemented 6 community outreach clinics reaching over 2000 people, including children and women.
- Provided a borehole for the Ogugu community.

**General themes of the analysis included:**

- i. Emphasis on youth towards building future Christian leaders
- ii. Providing a safe place for recreation, learning and support for children within the care of the church and the larger community
- iii. Improved care and support for children living with HIV and/or caring for sick parents/guardians
- iv. Enhanced opportunities for families with orphans and vulnerable children
- v. Expanded opportunities for service to community and those in need
- vi. Improved Care centre facilities
- vii. Serving as a voice of the voiceless with regard to key issues facing society.

### **3.1 Evaluation of 2006-2011 Strategic Plan of Action**

In January 2011 an evaluation team was drawn from seven Area Conferences to carry out surveys questionnaires and focus groups in their communities and surrounding areas. The seven Area Conferences were randomly selected: Aba, Kano, Ogugu, Port Harcourt, Toto, Uyo and Warri. Two of these areas are primarily rural, Warri is a township and therefore primarily urban the others are mixed rural and urban. Questionnaires were distributed to Pastors and church members in each area to find out about their knowledge of HIV, their attitudes towards people with HIV and their knowledge of ADVANCE activities in their area. Focus group discussions were held with small groups of Youths, Men, women and people affected by HIV in each area. One to one interviews were completed with people living with HIV in all areas. A total of 124 people were involved in giving information to the evaluation team.

For other information we consulted Area Conference Co-ordinators reports from 2006 'til date, and used information from Annual reports and annual church survey results to compile a complete picture of what has been achieved over the last five years.

We looked at our five main goals to find out if we had indeed achieved our purpose and to identify areas of our programming which was successful and other areas which should not be repeated.

#### **a. Thematic Area One: HIV Prevention**

Our goal was to stop the spread of HIV/AIDS in the Nation and we aimed to do this by creating a strong awareness of HIV/AIDS among local church/communities. The sentinel surveys which are a globally recognised measure of HIV prevalence in populations, show a steady decline in HIV prevalence since 2001.

"The national HIV prevalence trend showed a steady increase from 1.8% in 1991 through 4.5% in 1995 to a peak of 5.8% in 2001; it declined slowly to 4.4% in 2005. The national HIV prevalence trend appeared to stabilize between 4.4% and 4.1% from 2005 to 2010. The trend among women aged 15-24 years old (who are considered as an index of new infections) steadily declined from 6.0% in 2001 to 4.3% in 2005. The trend among this age-group (15-24years old) appeared to stabilize between 4.3% and 4.1% from 2005 to 2010." (ANC HIV Sentinel Survey Nigeria 2010 pg. 52)

We have contributed to this change since our inception because we have worked consistently towards prevention education. The results of our surveys show that the activities we carried out since 2006 have in fact achieved our initial objectives.

## Achievements

- 100% of people surveyed had heard HIV awareness preached from a UEC pulpit
- Over half the youth and women confirmed that the youth and women's fellowships had mainstreamed HIV into their annual schedules.
- Fifty youth conferences where specific HIV awareness and testing was given free of charge were carried out throughout the sampled areas in the last five years.
- Advance established, educated and trained implementation teams in 19 out of 21 area conferences of the church.
- These teams have reached over 15,000 people with HIV prevention messages since 2006.
- In each of the 19 area conferences where we have successfully carried out SAT training an average of ten people (total 190) have been trained to carry out testing under the supervision of the Area Conference HIV Coordinator.
- In the seven areas surveyed 168 volunteers have been trained and are actively providing free HIV testing to their churches and communities.
- These 168 volunteers tested 5957 people in the last five years, 524 of these were couples preparing to marry.
- 320 people reached with an intense training workshop on empowering families to low risk lifestyles, in several Area Conferences
- Up to 8000 men and women heard messages about age appropriate sex education and HIV prevention during their Annual National Women/Men Fellowship Conference.
- Up to 2000 Pastors and Reverends heard HIV prevention education messages through ADVANCE reports and presentations to National and Area Standing Committees
- 5000 UEC HIV Policies have been distributed throughout all Area Conferences of the church, communities and to our donor bodies.

## Concerns

- Only a few men stated that their church fellowship regularly includes HIV issues in their programming
- 11% of the PLWH who we interviewed had not disclosed their HIV status to anyone
- Only 2 out of the 18 PLWH who we interviewed had disclosed their status to their pastor.
- Forty of the 41 children in focus groups stated that young people in their school started having sex between the ages of 12-19. When asked what was the appropriate age to start having sex only four children said 'when you are married' the majority thought the normal age to start having sex is between the ages of 13-21.
- During the men's focus group we learned that when men consider talking to their children about sexuality they use words like 'warning', and 'stopping them from doing the wrong thing'. Several fathers said that they should not talk to their children about sexuality issues because it is a cultural taboo.

## Barriers to success

1. **Lower uptake of HIV awareness activities, and child protection issues amongst the men** in our communities. Focus group discussion demonstrated that they think HIV is the problem of young people alone, that people who are infected or at risk of being infected are immoral and that women deal with health issues, not men. Their attitudes towards child protection issues were also negative.
2. **Difficulty in penetrating the remaining Area Conferences** to train SATs in their area. For some of the teams already trained they also come up against **lack of support from their Area leaders** and therefore do not have the freedom to carry out prevention education to the extent that we expect.
3. **Inconsistent availability of HIV test kits** in Nigeria. There are delays in delivery to Nigeria from overseas support agencies, or in-country distribution of supplies.
4. **Clients do not disclose** their status to Pastors who they do not believe has the knowledge or discretion to deal with it sensitively. Stigma is again at work as one of the major barriers to caring for people living with and affected by HIV. To carry out appropriate training Pastors need to be given transport, accommodation appropriate to their status, feeding and resource materials. The church until recently has not been partnering with us significantly on funding. Therefore we were unable to do any large scale training of Pastors as we had hoped.

5. All our youth programming is focused at youths aged 15 or over. The survey results suggest that children around 12-13 are already facing challenges of sexuality and peer group pressure.

#### *Recommendations*

1. Scale up stigma reduction and role definition amongst men and church leaders to increase uptake of HIV prevention education and family leadership for HIV prevention
2. Advocate at national church leadership level for intense mobilisation of church leaders in every area conference, and task the church with appointing a full time National HIV Co-ordinator to engage the national church and advise ADVANCE.
3. Establish simple funding strategies for Area Conferences to support and fund their SAT teams.
4. Continue networking with National and local HIV organisations to ensure a supply of test kits is available and a budgetary provision by the church to buy HIV test kits when other avenues of procurement are not available.
5. Develop literature and programming on sexual health education in younger children so that they are prepared to face challenges of sexuality by age 12-13.
6. ADVANCE should employ more facilitators to make more training events available throughout the church network
7. Continuously develop and improve our partnership with the church by dialoguing with church leaders, producing quarterly newsletters, and showing a committed presence at National Church events.
8. Source for dedicated funding for Pastors training, with matching funds from the church which will enable us to carry out the training and promote the Pastors commitment to the programme.

#### **b. Thematic Area Two: Pastoral Care**

Goal: To provide sustainable holistic care to People Living Positively (PLP) and People Affected By AIDS (PABA).

Purpose: Pastors to help PLP/PABA to develop wholesome and edifying relationships with God and their communities.

A 2009 study of 250 PLWH in Kogi state where ADVANCE Donegore Centre is active, looked at the Quality of Life of PLWH. The study found that PLWH have a higher quality of life in spirituality/religion/personal beliefs than in other areas of life.

"... the PLWHA studied appear to have a higher QoL in the spirituality/religion/personal beliefs, physical, and psychological health domains, but a lower QoL in the social relationships and environment domains, which could be an indication of discrimination as well as poor living conditions in their physical environment." (Quality of Life of People Living With HIV/AIDS in Kogi State, Nigeria \*A. A. Fatiregun, \*K. C. Mofolorunsho, \*\*K. G. Osagbemi 2009 Accessed 20th Jan 2012 <http://www.ajol.info/index.php/bjpm/article/viewFile/48823/35172>).

Our aim over the last five years was to equip Pastors and other ADVANCE workers with the skills and opportunities to help improve all areas of their quality of life.

#### *Achievements*

- Stigma reduction was included as an element in all our training schedules from 2008-2010
- ADVANCE developed international partnerships to fund income generating activities for PLWH in greatest need.
- All PLWHA and PABA's interviewed reported having an improvement in their spiritual state since learning their status; they had been encouraged through visitation, support group and phone calls from their HIV counsellor.
- When we asked who had helped them deal with the changes positively 87% named an ADVANCE volunteer.
- 89% of all PLWH respondents said that relationships with their family had not changed since they found out they had HIV. 87% said that their relationships within the church family had not changed either.

#### *Challenges*

- We dialogued extensively within the church structures to have an annual offering to help churches care of PLWHA, however this was not successful in more than a few areas.
- Support groups were initiated at Port Harcourt, Oron, Ogugu, Okpo, Ayinba, although only the group at Ogugu is functioning at a regular and useful level now.

### **Barriers**

- a. **HIV continues to be associated almost exclusively with negative sexual behaviours.** When we asked Pastors to list the key elements of their pulpit teaching on HIV, they mentioned several helpful keywords but the following were also recorded: illicit sex, bad disease that kills, unbridled sexual appetite, rape, homosexuality, immorality. The battle of stigma has not been won, and until it has people will be reluctant to share HIV related issues with their Pastors and Pastors will fail to empathise and speak sensitively with those who they should be caring for.
- b. **Failure of support groups because they are related to the church, and lack of financial support;** PLWH did not want their status to be exposed to other church members, even other members who were HIV positive. Others didn't have the financial resources to travel to a support group for spiritual and psycho-social care and wanted to see practical benefits from their efforts if they were going to spend the transport money to get there.
- c. **PLWH 'felt stigma'** continues to hamper their interaction with Reverends and Pastors, however, the ACHC and SAT members are well placed to carry out the confidential and sensitive task of aftercare of newly diagnosed clients.

### **Recommendations**

1. Continue to include stigma reduction messages in all aspects of our training and programming. This should be with a special focus on helping Pastors to understand the broad issues which promote HIV spread in our society, and assisting them to differentiate between preaching biblical standards and promoting judgemental attitudes in their communities.
2. Focus on ACHCs and SAT members to provide support to individuals struggling with HIV related issues, rather than Pastors. Encourage PLWH to take up to roles of SAT members so that they can give peer support in a confidential non-threatening environment.
3. Refer positive clients to local hospital support groups where practical help is offered, then provide spiritual support on a one to one basis.

### **c. Thematic Area Three: Counselling**

Goal: To provide Godly counsel aimed at reducing transmission and impact of HIV/AIDS on the affected and infected.

Purpose: To empower PLP and PABA for behaviour change towards a hopeful future.

"IEC campaigns are often better at imparting knowledge and information than they are at inspiring behavior change" (11). In sub-Saharan Africa, for example, the level of AIDS awareness has increased significantly over the years, with more than 90% of people in the worst affected countries reporting awareness of the virus (8,12). There is little evidence to suggest, however, a concomitant decrease in HIV-related risk behaviors in most countries on the subcontinent. The awareness achieved is usually shallow and includes neither accurate knowledge nor the development of the skills needed to protect individuals from infection. (Adesegun O. Fatusi and Akin Jimoh (2009) 'The Roles of Behavior Change Communication and Mass Media' pg 225)

To ensure that our Behaviour Change Strategy was holistic and effective ADVANCE carried out a programme of producing accessible IEC materials which were combined with individual counselling to produce long lasting changes in behaviour.

### **Achievements**

- Over 5000 people received free HIV Counselling and Testing from 2008-2010
- 5 peer education programmes carried out with an average of 25 youths at each event
- 1500 children and young people received life-skills education in our schools project in Kogi State

- Sports outreach has impacted 50 young people with confidence building activities and life-skills related teaching sessions
- Training of 10 PLWH to deliver home based care to their peers
- Development of 5 easy to read education booklets in the Compassionate Action Series
- Publication and distribution of over 5000 Compassionate Action Series booklets
- On-going behaviour change counselling provided to all clients (HIV positive or negative) is available at 7 counselling sites (Abuja, Port Harcourt, Ogugu, Aba, Warri, Uyo and Oron)
- One 'Strengthen your marriage' Conference reached 25 couples with healthy marriage promotion messages.

#### ***Concerns***

- No follow-up reports from trained peer educators to assess how active they are in their communities
- Trained home based care volunteers are not actively included in the care programme due to financial constraints
- Out of 19 area's trained to give on-going counselling care only 7 are actively providing comprehensive services. The other 12 areas are providing occasional mobile HIV testing and counselling at various sites with one of referral to a local hospital

#### ***Barriers***

1. **Volunteers without access to significant funding or time** have reduced ability and less incentive to give proactive care to the same extent as our full time workers.
2. **Due to lack of funds and local support** many of our ACHC's do mobile counselling and therefore real follow-up counselling and on-going behaviour change counselling is not available
3. **The healthy marriage seminars did not work in all areas**, for example there was no uptake in Abuja where marriage seminars are common and people feel they have heard it all before

#### ***Recommendations***

1. Source for further funding to develop more care centres modelled on the Donegore Centre, where full time staff can give dedicated attention to our clients.
2. Build the capacity of participating PLWH to deliver peer support.
3. Develop permanent testing sites in areas where only mobile testing is available
4. Rebrand our unique marriage seminar to make it more appealing to church and community members

#### **d. Thematic Area Four: Care and Support**

Goal: To ensure that PLP and PABA live positive lives.

Purpose: To provide the basic physical and spiritual needs of PLP and PABA.

As stated in the previous quotation from the Quality of Life survey, PLWH often score lower on material QoL indicators than with spiritual issues. Our aim at ADVANCE was to train volunteers in all areas to carry out 'after care' for any client who tests HIV positive at any of our contact points.

#### ***Achievements***

- 120 people trained at Aba on Home Based Care of PLWH
- 15 Area Conference HIV Co-ordinators and 10 SAT members trained in home based care
- 10 PLWH trained in home based care at Ogugu
- Full time care co-ordinator employed at Donegore Centre, Ogugu
- 200 children affected by HIV (plus other orphaned or vulnerable children) receiving monthly financial, nutritional, health, and spiritual/emotional support, via our Circle of Hope project
- Over 50 PLWHA receiving ongoing counselling, ARV adherence support, and hospital escort assistance
- Financial support given to 10 families affected by HIV along with counselling and assistance to start income generating activities to increase independence and encourage behaviour change
- Annual children's party and holiday club for all Circle of Hope Children
- Play area constructed in Ogugu for Circle of Hope Children
- Monthly support group provides peer support for 10-20 people monthly at Ogugu
- No direct reports of stigmatisation displayed in the handling of burial service of one of our clients.

### *Concerns*

- **Scanty documentation and reporting** on home based care from the areas other than Ogugu made it impossible for us to really evaluate its effectiveness although anecdotal evidence would indicate that some home based care volunteers are making an impact.
- **Maintenance of Circle of Hope playground** is badly needed but funding is not available
- **Family income generating activities** has been an enormous challenge as capital funds have been used by families during times of sickness and crisis. Only two out of the ten families are independently managing their businesses, others are still dependent on ADVANCE for on-going financial input into the business.

### **Barriers**

1. **Transport costs and fear of implied financial contribution** by trained home based care volunteers has discouraged many from using their new skills
2. **Lack of full time co-ordinators** in areas other than Ogugu has resulted in home based care becoming disorganised, undocumented and unreported in other areas.
3. **Limited funding** means that non-essential areas like the playground are languishing.
4. **Lack of an experienced income generating coordinator** means that the family support project is not running at optimal standard

### *Recommendations*

1. Train fewer home based care volunteers but give them more extensive training and set out a clear plan of action and funding plan for them going back to their areas.
2. Employ full time Co-ordinators in all Areas and a full time experienced IGA co-ordinator.
3. Seek specific funding for small non-essential but important projects like the children's play ground

### e. **Thematic Area Five: Leadership and Management**

Goal: Efficient and dynamic church HIV leadership management systems.

Purpose: To equip the church leaders with management skills to effectively co-ordinate the QIC/UEC HIV programme.

ADVANCE involved leaders at all levels of training, and carried out advocacy at National Church Conference level plus Area Conference level advocacy in our most active areas. HIV Policies and more recently the Child Protection Policy was made widely available for all leaders. By keeping the leaders involved at all stages we hoped that they would provide excellent support for all our programming and make sure the information was stepped down to the local areas.

### *Achievements*

- 5000 HIV Policies disseminated throughout the church, firstly to church leadership
- Trustees inaugurated and actively working
- Advisory Board inaugurated and worked 2007-early 2009
- Transparent managerial and financial systems in place at head office Abuja, Zonal office Port Harcourt and Project Office Ogugu
- Partnership communication with Mission Africa maintained by ADVANCE ED and with UEC National Conference by the National HIV Co-ordinator
- National stakeholders were involved in the production of the Child Protection Policy in 2009
- 35 National Stakeholders came from all over Nigeria to take part in the work on the new strategic plan.

### *Concerns*

- Despite initial good response from the Theological Colleges and development of a curriculum for prospective church leaders the curriculum fell by the wayside and was not taught fully by the end of the first year
- The National HIV Co-ordinator was a part time volunteer post and despite the best efforts of the National Co-ordinator the required level of advocacy could not be attained.

- Lack of financial support for the Advisory Board made it impossible for us to have a quorum at our meetings from 2009 onward
- An Memorandum of Understanding (MOU) was put to the church leadership in 2010, there has as yet been no response.

#### *Barriers*

1. Poor follow-up of the theological colleges on such a new concept resulted in them losing the vision and dropping the HIV curriculum for Pastors
2. Lack of vision to support a full time paid National HIV Co-ordinator as the church liaison meant that the post could not be tasked with all the responsibilities which would have been ideal. This included active follow-up of the MOU
3. Lack of financial responsibility regarding the Advisory Board resulted in members paying for their own transport and this could not be sustained by all of them for a long period.

#### *Recommendations*

1. Reignite the relationship with the Theological Colleges and maintain follow-up and support for and curriculum or teaching events which are planned.
2. Lobby the church for a full time, paid National HIV Co-ordinator to liaise with ADVANCE and be an effective advocate.
3. Task the new National HIV Co-ordinator, and Trustees with setting out clear financial guidelines for Trustees and Advisory Boards meetings to avoid obstacles to regular meetings.
4. Budget for advocacy visits to all Area Conferences and regular update and advocacy meetings with National Church.

#### **Conclusion**

ADVANCE has achieved a great deal in the five years since her inception. Excellent teams are active in seven areas and in twelve other areas teams are active and working. Thousands of lives have been protected by the reception of HIV prevention training and the uptake of free HIV testing. Hundreds of PLWH have found comfort and support in the first days of learning they had HIV and practical and ongoing counselling in the days and years following their diagnosis.

Unfortunately we have found that stigma both felt and real still hamper the lives of PLWHA discouraging them from support groups, disclosure and confidence to move forward in life. ADVANCE has commenced excellent programmes of sports, income generating activities and vulnerable child support to improve the future outlook for many of our clients. We have also been active in cross-cutting issues like child protection, poverty alleviation and clean water accessibility for communities.

Church and community leaders have been involved and advocacy has been carried out, however, this needs to be stepped up to maintain and improve the vision of the leaders of our partners and founders.

The summary of the main recommendations of the evaluation are as follows:

1. **Stigma reduction** must remain a vital component of all our training programmes including cross-cutting programmes like child protection or poverty alleviation
2. **Men and Reverends/Pastors** require further envisioning, HIV awareness, and enlightenment on all other relevant issues especially child protection and age appropriate sex education for children
3. **Younger children** should be targeted with sexual health/HIV peer education in light of the evidence that they are facing sexual decision making around the ages of 12-14
4. **Advocacy** must be stepped up at local and national level through the appointment of a full time paid National HIV Co-ordinator and through regular reports, newsletters and local meetings
5. **Improved funding strategies** are required to support local volunteers through local funding and to establish donors for more staff, new permanent testing sites and care centres plus dedicated funding for smaller but important non-essential projects.
6. **Networking** with local and National bodies to provide test kits, expertise and grassroots referral systems for clients is paramount

7. **More full time staff** would be a huge benefit to ADVANCE at National Co-ordinator and Area Co-ordinator level. More facilitators are also needed if the training schedule is to be improved plus extra care workers if on-going counselling and home based care is to be scaled up.

We are grateful to God, the leaders of the UEC and Mission Africa, local and international partners, our dedicated and passionate staff and the local communities which respond and take part in our events and programmes for all that has been achieved in the last five years. We will endeavour to use all this information in the formation of the new strategic plan to make better progress in the next five years, eliminate our weaknesses and stand on our strengths. **We will continue to make a difference.**

## 2. COMPETITIVE ENVIRONMENT AND BEST PRACTICE LEARNING

Direct and indirect “competitors” were considered to both understand ADVANCE’s potential positioning and to learn from effective models employed elsewhere.

These findings fall into four areas:

- a. Church Growth and Development in Nigeria
- b. Education and Formation
- c. Community Centers
- d. Philanthropic and Outreach Organizations

### a. Church Growth and Development in Nigeria

The north of Nigeria is predominantly Muslim, the south Christian. Besides the large mission-founded churches such as the Anglicans, Catholics, Baptists, Methodists, etc., Nigeria has a large number of African Instituted, independent, and Pentecostal churches, which are very active in evangelism and church planting in neighbouring countries, in Europe, North America, and other parts of the world. The churches are organized into five distinct groups namely the Catholic Secretariat of Nigeria; Christian Council of Nigeria; Organization of African Instituted Churches; the Evangelical Church of West Africa (TEKAN/ECWA); and the Christian Pentecostal Fellowship of Nigeria , who make up the membership of the Christian Association of Nigeria, an umbrella body representing all Christians.

There are many Church-related organizations and ministries in Nigeria working proactively in encouraging and enabling grass-roots community based efforts on HIV prevention and care, poverty, orphan and vulnerable children support, good governance and provision of welfare and relief. Many of these organisations and ministries can be considered direct “competitors” of ADVANCE and its programmes. While in many ways these organisations represent ADVANCE’s competitors, given the diverse nature of the Nigerian population, geography and locations, cultures, and affiliations, we have found the true competitors range from relevance and accessibility to location and diversity within every community. As a result, we looked to other organisations primarily as a source of learning best practices.

There are churches and church-related organisations across Nigeria whose work is yielding exponential results and encouraging renewed interests in social development and continue to work towards contributing substantially to the achievement of the millennium development goals in Nigeria. **The ECWA AIDS Ministry (TEAM)** is a major player in promoting the mainstreaming of ECWA’s AIDS policy throughout the denomination. TEAM works alongside their over 70 District Church Councils to encourage and mentor their volunteers who are interested in various aspects of HIV/AIDS work. TEAM began work in 1996 as just an awareness unit but now has grown to include empowering and capacity building in areas of: Training of Trainers, Counselling Training, Home Based Care Training and Peer Education Training.

**The Church of Nigeria (Anglican Communion):** The Church of Nigeria as a faith-based organization has been on the frontline in the fight against spread of HIV/AIDS and other dreaded diseases in the country. In 2004 the Church came up with a National HIV/AIDS Policy with a primary objective to increase awareness and knowledge of HIV/AIDS among members of the Church and the public in general; as well as to establish networks and linkages within and outside the Anglican Communion to enhance the response of the Church to the HIV/AIDS epidemic. Since then the Church has not relented in her campaign to reduce the spread of HIV/AIDS by establishing Action Committee on AIDS at both diocesan and parish levels. This has helped to facilitate the accessibility of health care services to the

grassroots. Today, several dioceses in the Church are running full health care delivery to improve the living conditions of persons living with or affected by HIV/AIDS.

**The Christian Reformed Church of Nigeria (CRCN):** CRCN which grew out CRWM's work in Nigeria in the mid-1900s today consists of over 80,000 members from a broad range of ethnic backgrounds. The church's ministry in Nigeria focuses on Christian education, evangelism & discipleship, and leadership development. Under its evangelism and discipleship component, the CRWM and CRWRC jointly started an HIV and AIDS ministry called Beacon of Hope in 2001. In 2011, Beacon of Hope became an independent Nigerian organization. Beacon of Hope has a vision for working through established Nigerian churches and medical facilities to address issues related to HIV and AIDS and other healthcare-related community development issues. The CRWM in partnership with the national church also runs the Daniel Centre, which is a community of service and learning that trains and walks with leaders from a Biblical worldview through partnership. The Centre contributes to the formation of agents of transformation who integrate the Biblical worldview by promoting healthy churches, growth in Christ-centered knowledge, justice and peace in social relationships, and sustainable communities. This integral gospel restores all sectors of society—the local church, family, school, business, and government. Source: <http://www.crcna.org>)

**The Lutheran Church of Christ in Nigeria (LCCN):** The LCCN, a member of the Lutheran World Federation, is made up of over 1.7 million members in over 2,400 congregations. One archbishop, six diocesan bishops (one for each diocese), 605 pastors, 800 catechists, and 2386 evangelists compose the core pastoral leadership of the church. The LCCN emphasizes evangelism, social services, education, health ministry, and Christian/Muslim relations. The LCCN trains its own evangelists and sends them into rural communities, where they earn their livelihood as farmers while sharing their faith with their neighbours. Called *Aikaku* in Hausa, there are 105 evangelists working in Abuja and Taraba, two primary mission fields, and new faith communities are now forming. The LCCN operates Bronnum Lutheran Seminary, 11 Bible schools and 2 high schools. Bible schools train evangelists and catechists and develop quality leadership for the church. Pastors and church leaders receive their training at Bronnum Lutheran Seminary and at Theological College of Northern Nigeria, an interdenominational seminary near Jos Plateau State. In the area of health care, the LCCN runs 22 dispensaries, 3 maternity clinics and 2 medical centres. (Source: <http://www.elca.org/>)

**The Catholic Relief Services (CRS):** The work of CRS in Nigeria is carrying out the commitment of the Bishops of the United States to assist the poor and vulnerable overseas. We are motivated by the Gospel of Jesus Christ to cherish, preserve and uphold the sacredness and dignity of all human life, foster charity and justice, and embody Catholic social and moral teaching as we act to:

- Promote human development by responding to major emergencies, fighting disease and poverty, and nurturing peaceful and just societies; and,
- Serve Catholics in the United States as they live their faith in solidarity with their brothers and sisters around the world.

As part of the universal mission of the Catholic Church, CRS work with local, national and international Catholic institutions and structures, as well as other organizations, to assist people on the basis of need, not creed, race or nationality. Catholic Relief Services began working in Nigeria in the late 1960s, organizing the delivery of relief supplies to Nigerians in need during the Biafra War. CRS suspended programming in 1970, but following Nigeria's return to democracy, CRS opened an office in the capital, Abuja, in July 2000. Partnering with the Catholic Church and other community-based organizations, CRS works to meet the needs of Nigerians affected by the widespread communal violence stemming from ethnic, political, commercial and religious conflicts. In recent years, CRS has extended programming beyond emergency response to include peace building, governance, and HIV and AIDS projects. (Source: <http://crs.org/countries/nigeria>)

**The Presbyterian Church of Nigeria (PCN):** Presbyterian witness in Nigeria began in 1846 through the initiative of freed slaves from Jamaica, Scottish missionaries and the kings of Calabar. The church initially operated as a presbytery of Biafra, with its constitution in 1858, then as a synod of Biafra with its constitution of 1921, and following that as the Presbyterian Church of Biafra with the constitution of 1945. In 1952 the name was changed to Presbyterian Church of Eastern Nigeria, and with Nigerian independence in 1960, it became the Presbyterian Church of Nigeria (PCN). It now runs a four-court system of session, presbytery, synod and general assembly. The parishes are comprised of one to nine congregations, depending on their size. The PCN is part of the world-wide tradition of Reformed churches, and so believes in the gospel of God's sovereign grace in Christ over all realms of life. The church has adopted the

Westminster Confession of Faith and other confessions of the Reformed tradition as part of its doctrinal standards, subordinate only to the scriptures. The church is open to the ministry of women; the first woman minister was ordained in 1982, and today there are well over 50 women ministers serving the church. The church is currently engaged in mission work to traditionally non-Presbyterian and non-Christian parts of the Nigeria and West Africa. At present the PCN has 15 ordained ministers and eight un-ordained missionaries across Nigeria, apart from those outside the country. The PCN has churches in all the 36 state capitals of the country including Abuja, the federal capital territory. (<http://www.oikoumene.org/... /presbyterian-church-of-nigeria.html>)

**The Methodist Church Nigeria (MCN):** The MCN has been at the forefront of spiritual and social transformation, by spreading spiritual holiness and investing in medical-health services and social-economic welfare of the people. The church has established various institutions like the leprosy centre, three mentally ill-destitute centres, and an orphanage centre, for children orphaned by HIV/AIDS. These centres reach out to the rejected and less privileged members of society. They also ensure reintegration of those previously treated as outcast and subjected to various societal abuses. In the area of health MCN has established the Wesley Guild Hospital and several Methodist hospitals spread over the country which provide good healthcare services in their environments. In addition to all other services MCN has from the beginning placed a very strong emphasis on the need for education. Throughout the country the church has established numerous schools, from kindergarten through primary to senior secondary schools and theological institutions which have produced men and women who have contributed and are still contributing very significantly to all spheres of human endeavour. The MCN is now set to establish the Wesley University of Science and Technology (WUSTO) in Ondo, south-western area of Nigeria, with satellite campuses in the six geo-political zones of the country. (Source: <http://www.oikoumene.org/... /methodist-church-nigeria.html>)

**HOPE Worldwide (HWW) Nigeria:** HWW is a Christian faith-based relief and development organization founded in 1991 that is dedicated to serving the poor and needy. Its community of employees, trained volunteers and partner organizations bring hope and change lives by providing humanitarian aid. The organisation educates and serves people through disease control, medical training and care, community outreach, adoption and orphanage assistance, development assistance and disaster relief. The Nigerian program commenced in 1996 in Lagos and quickly expanded to offer services at over 40 sites across the country. Working in partnership with the Government at all levels, the private sector and other decision makers and professionals, HWW Nigeria takes a comprehensive and integrated, community-based approach to programming, including HIV/AIDS prevention, economic empowerment, community capacity development, Orphaned and Vulnerable Children and Care and Support services for adults and children. HWW Nigeria's annual strategic planning process is based on practical methodologies and formats, such as the Balanced Score Card which is easy to apply in practice and conveyed to all stakeholders. This plan, which is developed to integrate with day to day management, is kept current and is filtered down to basic task levels throughout the organization. Operational excellence is achieved through key technical, operational and training partnerships that use best practice methodologies to ensure predictable outputs, consistent in meeting community needs. The programs of HWW are developed in accordance to community needs and are fashioned to foster sustainability, replication while at the same time synergizing cost effectiveness, high impact and qualitative programming.

**Grace and Light International (GLI):** Grace and Light takes a unique church-centred approach to the HIV pandemic. The organisation integrates prevention, care, support and attitude change activities in communities through local churches. GLI views the HIV/AIDS pandemic as not just a medical emergency but also a spiritual and moral crisis. GLI developed a response that tackles all three areas within its operations, engaging both medical personnel and theologians to work together for the transformation of lives through the three principles of grace, openness and love. The work of GLI is implemented through the local churches of any denomination. The process begins with the minister and leaders of a local church, where their active support is secured; this is followed by addressing the entire congregation during a church service, giving basic information about the HIV, preaching the gospel and challenging the people. HIV testing is then offered on the church premises for all who are interested. Two options are offered; standard confidential testing or openness – sharing individual results with other people in the church who have also chosen to be open. For those who choose the second option, they are given the opportunity to make commitments to: belong to Christ, be open about their HIV status, whether positive or negative, and to meet together regularly in small groups to support and encourage each other. (Source: *Grace and Light UK, Unaudited Report and Financial Statements, December 2010*)

## **b. Education and Formation**

Education and Formation is one of the main prerogatives for churches. The Scriptures require that we do not just train children but to train them also in the way that they should go (Prov. 22:6). In other words, we are to educate and disciple people in the process too. This is a transformational process. It refers to the forming or shaping of the whole person, not just the cognitive but the spiritual, to take up and carry on the mission of Jesus Christ in the world. It helps individuals explore how to be Church in their context, how to live by Gospel values and how to work so that all people have a ‘fullness of life’. Such a transformed world is what Christians refer to as the ‘Kingdom of God’. The role of Education and Formation in the promotion of active church life, growth and relevance in the community cannot be underestimated.

The concept of Christian education for pastors, lay leadership and lay individuals has evolved from its traditional educational roots to a formative focus, incorporating a more experiential, holistic and multimedia-based framework. ADVANCE recognizes that formation is more than an intellectual pursuit.

## SECTION FOUR

### A Vision for the Future

ADVANCE and its local action teams within the UEC have a unique and powerful opportunity to identify the needs of its clients and to coordinate and link efforts to address the Millennium Development Goal outcomes and the needs for community and social transformation. In addition, our partnership with Mission Africa and the UEC and other organisations that share our vision is optimally positioned to provide assistance and relief to the sick, poor and under privileged, and to stand for the way of Christ when darkness falls.

As we have done from the start of ADVANCE, so we will continue to do – we will identify and respond to opportunities as they arise to address necessary immediate and long-term social change requirements through capacity building, activating partnerships, identifying and supporting leaders and organizing mission-focused interactions with all stakeholders. Our future can only be built on taking the necessary action needed to achieving our goals. We will shift from talking to doing, from thinking to action to ensure our vision for

#### 1. What we believe

**We believe in a God of love** who stands beside the poor and oppressed. Therefore:

- a. we speak out and act against those conditions, structures and systems which increase vulnerability and perpetuate poverty, injustice and the destruction of the environment in our society
- b. we stand alongside women, men, girls and boys suffering from oppression by supporting effective development, charitable and advocacy programmes
- c. we integrate peace-building, reconciliation and psychosocial aspects into our work with individuals, families and groups affected by HIV/AIDS trauma, child abuse, gender violence, and other related conflicts
- d. we will not act as an instrument of any particular donor's or government's policy nor accept conditions that would compromise our capacity to speak or act independently

**We believe we are called** to manifest God's gracious love for all people and work towards a reconciled human community. This is more clearly communicated when we work together. Therefore:

- a. we listen, learn from and share experiences with other partners in order to improve the quality of our work and draw on the rich diversity of our cooperation
- b. we build relationships, strengthen effectiveness and avoid duplication through our cooperation
- c. we recognise and value the unique gifts that each of us has been given
- d. we give priority to the role of local churches and their ministries in responding to the humanitarian and development needs of their local community
- e. we contribute to that vision through the inclusion of advocacy, capacity development of church and community members, spiritual development, peace-building and psychosocial support in our work

**We believe the earth and all it contains are God's gifts**, given out of love and care for all created beings. Therefore:

- a. we commit ourselves to act in ways that will protect and restore the Nigerian environment
- b. we work to change systems and structures that degrade the environment and thereby increase the vulnerability of poor and marginalised communities in Nigeria

**We believe that the resources available to us** are not our own, but are a gift from God. Therefore:

- a. we uphold principles of mutuality and transparency in relating to each other, including the provision of accurate and timely programmatic and financial information
- b. we meet the highest standards of truthfulness and integrity in all of our work
- c. we uphold high ethical and programme standards of accountability, recognising our accountability to those we seek to serve, to those who support us, to each other, and ultimately to God
- d. we prioritise the use of available local resources in our efforts and use approaches which strengthen existing community capacity

#### 2. Priorities

Our objectives, goals and strategies reflect a series of foundational and interrelated shifts. Many, if not all of these,

speak to our understanding that it is relationships that are the core strengths of our work in our various communities, and that these relationships live and flourish in a fluid network.

Building on the strengths of our richly diverse stakeholders, expertise and experiences, we will expand the doors of our ministry as wide as we can – embracing all who need our help – those within and those outside the church. We will guide our clients in all we do to find just the right path for each person that will lead them to God.

The culture of ADVANCE's ministry will continue to embody our vision for 'life in abundance' – with staff, volunteers and partners working in continuous collaboration to achieve our mission priorities. We are committed to ensuring that the full array of cultures and systems God has blessed us with are holistically working out harmonies for life and survival. Therefore:

- i. We will renew and strengthen our commitment to reaching the poor and needy in our communities.
- ii. We will continue our commitment to our local multiplier units (CART), bringing whatever resources and leadership we have to communities in need. We will ensure an appropriate focus balance between reaching all Area Conferences of the UEC and our service to our local care centre in Ogugu.
- iii. We will deepen and enlarge our partnerships with both local and international entities – by taking partnerships to a new level, by widening opportunities to share in our common mission, and by expanding the range of assets available for these tasks. We will focus on seeding lasting capacity for transformation while remaining lively enough to respond to new opportunities we discover with our partners.
- iv. We will get our hands dirty and our feet wet. We will take action in our various target communities, living a life that tells the world that to be a Christian in the 21st century requires living to honour God and working in service for all of humanity.
- v. We will articulate, translate and develop the values of a Christian Way of Life – a framework for living that will thread through all of our efforts, programmes, and policies.
- vi. We will use technology wisely, keeping current and finding ways to reach out far and wide to educate, inform and convene.
- vii. While our goals and strategies are focused around two broad themes, we will work to ensure that the interrelationships, interdependencies and synergies are exposed and optimized.

### **3. The Plan for Programme**

The plan that follows is a plan for the programme of ADVANCE. With the development of this Strategic Plan, the ADVANCE Resource Portfolio and the ADVANCE Financial Plan, we will have three plans, which together, will guide our organisation over the next five years. The plans embrace the full operations of ADVANCE.

### **4. The ADVANCE Resource Portfolio**

The strategic plan for resource mobilisation focuses on enhancing the value of ADVANCE's Resource Portfolio. It will do so consistent with the mission and values of ADVANCE.

### **5. The ADVANCE Financial Plan**

With respect to the financing of our programmes, ADVANCE is committed to building our "Circle Fund" – an endowment that, when fully funded, will provide significant support for our programme and help to protect the organisation from dependency and the vicissitudes of economic market.

## **SECTION FIVE**

### **Vision, Mission, Goals, Objectives, and Strategies**

#### **A. Rationale for Strategic Planning**

1. ADVANCE views strategic planning as a dynamic process influenced by the environment and the organizational climate. The forces in the internal functioning of the organization and the environment necessitate re-planning and re-organization that can only be realized through a comprehensive organization-wide planning expressed by strategic analysis, strategic choice leading to strategic implementation. In other words, such circumstances have emerged during the compassionate ministry work in the communities we serve through our holistic and integral development programmes.
2. Specifically, the strategic planning process seeks to develop a five-year strategic plan that would provide strategic guidance and direction for the period 2012-2016 based on ADVANCE vision, mission, and values that focus mainly on the proclamation of God's love, leadership development, HIV/AIDS prevention and care, poverty reduction, child protection and well-being, management and organisational development, and resource mobilization and sustainability.
3. The scope of the task includes the following:
  - a. Identifying critical/key issues facing ADVANCE in implementation of the evangelism and development work.
  - b. Assessing and determining programmes and areas that are successful, sustainable and which facilitate the achievement of ADVANCE mission and vision.
  - c. Assessing the sustainability ADVANCE structures, programmes and systems

#### **B. The Essence Of What We Do:**

Our goal is to be a transforming agent that effects change with purpose and power, thereby connecting all people with compassion and care that leads to knowing Christ. We aim to be an enduring provider of information, education, counselling, skills and related services that benefits the spiritual, emotional, social, and economic wellbeing of vulnerable populations.

##### **a. Mission Our Purpose**

Our mission is to provide life transforming and compassionate services to individuals and families, in partnership with local churches and community groups, through socioeconomic and spiritual engagements and capacity building.

##### **b. Our Vision**

ADVANCE envisions strong, empowered and compassionate communities seeking to restore lives broken by poverty, ignorance, disease, and abuse and provide appropriate opportunities for a better future.

##### **c. Our Values**

ADVANCE works to minister to its clients by providing services that meet their spiritual, physical, social, emotional and educational needs through diverse programmes and activities. This focused Christ-centred ministry assesses individual needs, receives clients into its programmes, and determines their personal areas of vulnerability and capability from which to nurture their transformation process. The organisation encourages and helps build or rebuild individuals and families by coordinating and providing skill training, resources and guidance. We encourage and value the attributes of love, compassion, honesty, acceptance, integrity, responsiveness, respect, humour and commitment in everything we say, decide or do. We apply these behaviours in our ministry and working practices.

- i. **Christ-Centred:** We believe in one God: Father, Son and Holy Spirit. We believe that a personal relationship with God is made uniquely possible for each one of us through faith in God's only Son, Jesus Christ, who enables us to know God as our heavenly Father. We desire to serve God in all we do and rejoice when His Kingdom on earth is extended.

- i. **Passionate:** Presenting the relevance of the Christian faith to both young people and adults and serving our communities with an undying commitment to show them the love of God. The compassion of Christ compels us to be present with others in their suffering and need, and to serve with a caring spirit.
- ii. **Valuing individuals:** We treat every person – man, woman, girl and boy with love, respect, care and acceptance. Embracing and honouring the dignity of each person is biblical call us to reverence the God-given life and dignity of each person at every stage and condition of life. We value each person as created and loved by God: children, families, donors, project staff, trustees and other volunteers. We celebrate the diverse gifts, experience and contribution made by each one. '*You created my inmost being; you knit me together in my mother's womb. I praise you because I am fearfully and wonderfully made*' (*Psalm 139:13-14*).
- iii. **Instilling optimism:** We assist people to find their own way forward. We believe everyone has been gifted by God with the possibility of creating a better future for themselves.
- iv. **Quality:** Bringing the best to all we do and building lasting relationships. It is our biblical mandate to emanate a commitment to excellence to serve competently and collaboratively.
- v. **Innovative:** Being continuously resourceful, creative and flexible, bringing purpose and fun to our ministry.
- vi. **Integrity:** Ensuring our Christian faith and values are embedded in all we do and that we are serving others with constancy. We believe that personal integrity and honesty within ADVANCE are essential. The resources at our disposal are not our own. They are in trust from God through donors on behalf of the individuals, children, and families we seek to serve.
- vii. **Social Justice:** God has called us to be a community of hope that works to achieve the common good, promote individual rights and responsibilities, and advocate on behalf of those with the greatest need.
- viii. **Children first:** We believe each and every child is a gift from God and that it is top priority to put children first in all that we plan and do. It is of utmost important for us to put the interest of children first and provide a child-centered environment where we work.
- ix. **Engendering resilience:** We strengthen the resources of local people and communities and help people to help themselves. We promote a participative, open, enabling style in working relationships where communities are central to identifying their own needs and assets, and in determining priorities, approaches and mechanisms for response.
- x. **Partnership:** As partners with the project team we are enabled to share in the joy of helping children and families in Nigeria. We are partners with them, and with all supporters, in a shared ministry. We acknowledge that: "*The man who plants and the man who waters have one purpose, and each will be rewarded according to his own labour.*" (*1 Cor. 3 v.8*)
- xi. **Gender equality:** We support women's participation and right to make decisions in all aspects of their own lives and that of their family and community.
- xii. **Integrated approach:** We promote an integrated approach to our work, which includes health, psychosocial support, development, humanitarian assistance, behavioural risk reduction, education, widows and orphans support, and advocacy.

## C. Our Strategic Direction

### A. Foundational Principles

Our goals for 2012–2016 Strategic Plan Framework are built upon two foundational principles highlighted in the book of Luke 10:27 (NIV):

1. "Love the Lord your God with all your heart and with all your soul and with all your strength and with all your mind...."
2. "Love your neighbor as yourself...."

i. **Love of God**

Love of God, as a thematic expression and a defining term for planning, articulates ADVANCE's intention to work to connect all peoples within our reach with God drawing upon our faith in God through Jesus Christ. Our ministry doors and our hearts are open wide to welcome all people, as we are strongly aware that we are all spiritual beings. We know that without an engaged and engaging Christ-centred Ministry, we have no beating heart to ensure our sustenance. We know that without a vehicle for inspiring those who approach us, in whatever way they come to us, we have no true vitality embracing all and each of God's people. And we know that without an understanding and realization of our Great Commission call, our potential for significant impact is diminished.

ii. **Love of Neighbour**

What does it mean to love a neighbour, to be a neighbour? To truly love a neighbour, to be a neighbour is to not only heal the afflicted on the side of the road. To be a neighbour is to make the road safer for all travellers. With this in mind, our Love of Neighbour goals reflect ADVANCE's commitment to social action and to service. We are a ministry of Christ in the community and our community are those in need of acts of compassion and in underserved communities in Nigeria. Our neighbours are the sick, poor and vulnerable children, women suffering gender violence and the less and the voiceless. We are committed to hands-on, on-the-ground, feet-wet, hands-dirty action. We will get out there, listen, hear need, relate, engage others in our shared mission and ministry. We will intentionally work to find partners – in the UEC, in Mission Africa network, in the host of organizations and communities we know, and will know, to work alongside us – investing, as we will, with expertise, labour, time and funds.

## B. Our Strategic Goals, Objectives and Strategies

### 1. LEADERSHIP AND DISCIPLESHIP

#### 1.0 Goal

Equip church leaders and laity to engage compassionately with the critical issues experienced by the communities they serve.

#### 1.1 Objectives

- i. Promote and support the development of leadership capacity among church leaders for effective action on spiritual development, HIV and AIDS, child abuse, poverty and gender inequality.

##### 1.1.1 Strategy

Advocate for a sustained leadership commitment to planning and providing resources for ADVANCE initiatives including staffing, empowerment and oversight.

- ii. Encourage lifelong learning amongst church leaders to promote holistic Christian mission in Christian Education, Theological Learning, Ministerial Training and meaningful Social Engagements.

##### 1.1.2 Strategy

- a. Provide study support to church workers and their families for pastoral, theological and social action training at suitable institutions.
  - b. Provide access to resources for the development of biblical perspectives and worldview.
- iii. Promote and strengthen the integration of health and holistic child development in theological programmes of the church.

### **1.1.3    Strategy**

Integrate ADVANCE priority areas into theological programmes and training of UEC.

Establish a Christian Leadership Resource Centre that will be a catalyst for personal transformation, promotion of awareness and enhancement of all aspects of an individual's life and the lives of those around them - at home and at work, in church and the society.

### **1.1.4    Strategy**

Build a Christian Leadership Resource Centre in Abuja, Ogugu and Bassa, as a network of focused programmes (in the short-term) and physical centres with a wide range of suites and spaces for services and programmes (in the longer-term).

- iv. Transform lives by helping people become and effectively grow as Christ's disciples, being equipped in discovering and nurturing their faith and gifts and learning the necessary knowledge and skills for living productive lives, both inside and outside the church.

### **1.1.5    Strategy**

Encourage church members to embody the values of discipleship, creative work, and stewardship.

## **2. HIV PREVENTION, CARE AND SUPPORT**

### **2.0 Goal**

Reduce the prevalence of HIV and give hope to the infected and affected through care and support initiatives.

#### **2.1    Objectives**

- i. Increase church awareness, acceptance and understanding of the needs and concerns of PLHIV and other vulnerable and marginalized groups through sustained advocacy at all levels.

##### **2.1.1    Strategy**

Ensure church leadership is engaged in anti-discriminatory and stigma reducing activities.

- ii. Promote and increase the active participation of PLHIV in designing and implementing prevention, care and support strategies.

##### **2.1.2    Strategy**

Increase PLHIV access to and participation in ADVANCE activities.

- iii. Improve and expand facility and non-facility based community HIV prevention and behaviour change services.

##### **2.1.3    Strategy**

Mobilize and strengthen the church's community-based responses to HIV and AIDS.

- iv. Scale up availability and accessibility of quality community and home-based care services.

##### **2.1.4    Strategy**

Increase capacity of families and community volunteers to provide care and support.

- v. Motivate and equip young people with knowledge and skills to make healthy choices in all parts of their lives.

##### **2.1.5    Strategy**

Promote active participation, behavioural change and essential life skills among young people.

vi. Strengthen partnership and collaboration with like-minded organisations at local and national levels.

**2.1.6 Strategy**

Build partnerships and integrate key action areas in collaborations.

### **3. POVERTY REDUCTION**

**3.0 Goal**

Empower vulnerable community members and households to improve their socioeconomic livelihoods to build a better future for their children.

**3.1 Objectives**

- i. Increase self-sufficiency of vulnerable women and their families, including widows and female-headed households, in targeted communities.

**3.1.1 Strategy 1**

Provide technical, vocational and financial empowerment for vulnerable community members.

- ii. Improve sanitation, hygiene awareness, and safe water supply, to reduce morbidity and mortality from waterborne diseases.

**3.1.2 Strategy 2**

Promote access to clean safe water and sanitation with a community based management system.

- iii. Strengthen the capacity of churches to integrate poverty reduction initiatives into their programmes and outreach events.

**3.1.3 Strategy 3**

Mobilize the church to make poverty reduction a priority.

- iv. Prevent malaria and TB related morbidity and mortality within poor and vulnerable target families and communities.

**3.1.4 Strategy 4**

Increase access to sustainable malaria prevention, treatment and care activities by community members.

### **4. CHILD PROTECTION AND WELLBEING**

**4.0 Goal**

Build safe communities that are committed to improving the wellbeing and protection of all children.

**4.1 Objectives**

- i. Mobilize churches and communities around the wellbeing and protection of all children, including Orphans and Vulnerable Children.

**4.1.1 Strategy**

Inform and educate the church and the larger society on all aspects and effects of abuse and neglect on children.

- ii. Ensure church-based child protection systems are in place to contribute to improving the quality of life of all children.

#### **4.1.2   Strategy**

Promote the UEC Child Protection Policy in the church to strengthen the development and implementation of child protection awareness and strategies.

- iii. Strengthen the organisational capacity of ADVANCE at all levels to deliver high quality and sustainable interventions for OVC.

#### **4.1.3   Strategy**

Promote and implement a holistic and participatory capacity building for ADVANCE.

- iv. Sustainably increase the participation of children in issues that affect them within their communities.

#### **4.1.4   Strategy**

Promote children's active involvement in issues that affect them.

- v. Provide education, health and socio- economic support to the orphans and vulnerable children.

#### **4.1.5   Strategy**

Secure long-term sponsorship and support for OVC, via the established Circle of Hope Project.

- vi. Improve maternal and child health by promoting safe motherhood practices, reducing harmful traditional practices, and improving access to maternal and infant health care.

#### **4.1.6   Strategy**

Promote maternal and adolescents' health and child survival.

- vii. Enrich and equip orphans and vulnerable children and their families with the Good News message of love, healing and life through Jesus Christ.

#### **4.1.7   Strategy**

Promote and facilitate a holistic children ministry for OVC.

### **5. MANAGEMENT & ORGANIZATIONAL DEVELOPMENT**

#### **5.0   Goal**

Improve the organizational performance, effectiveness, and efficiency of ADVANCE in achieving its objectives.

#### **5.1   Objectives**

- i. Develop and sustain a clear strategic direction for the next five years with realistic and achievable objectives and targets.

#### **5.1.1   Strategy**

Strengthen management and organizational capacity at Donegore Centre, Port Harcourt, Aba, Warri and Abuja to provide oversight and direction and achieve targets.

- ii. Strengthen ADVANCE staffing to provide in-depth core competencies, cultural and contextual expertise, and a basis for effective succession.

#### **5.1.2   Strategy**

Conduct capacity building assessment and interventions for all staff for continual improvement of service delivery.

- iii. Work collaboratively with ADVANCE's Advisory Board and National Response Committee (NaRC) to enhance the effectiveness of the Board and NaRC.

#### 5.1.3 **Strategy**

Encourage proactive participation of board members in achieving ADVANCE's purposes.

- iv. Develop communications strategies to enhance ADVANCE's interactions with all stakeholders.

#### 5.1.4 **Strategy**

Maintain a strong communication focus to increase awareness of ADVANCE mission and services.

## 6. RESOURCE MOBILIZATION AND SUSTAINABILITY

### 6.0 **Goal**

Ensure sustainability of ADVANCE by securing and managing all the resources required for carrying out its core functions and achieving planned organizational results.

#### 6.1 **Objectives**

- i. Build a stable and sustainable mixture of income streams that are suitable and sufficient to meet the organisation's core objectives and organisational short and long term costs.

#### 6.1.1 **Strategy**

Mobilise the necessary resources for ADVANCE's 5-year Strategic Action Plan and secretariat's core functions and governance.

- ii. Strengthen ADVANCE capacity for the management of resource mobilization (RM).

#### 6.1.2 **Strategy**

Formulate a RM strategy that incorporates capacity building for board, management and senior staff.

## SECTION SIX

### IMPLICATIONS FOR IMPLEMENTATION

What will be required for implementation? How will we move forward to put in place the structures, systems, culture, policies, practices that will guide us? How will we prioritize? Implementation of our plan presents a challenge: we need to create a way of living, with systems and practices that foster flexible and reciprocal networking and continuous collaboration – between partners, congregations, staff and volunteers – while, at the same time assuring a sharp, biblical model for accountability, strong management practices and measures for success.

Many mission-driven organizations face this challenge today. Our prediction, however, is that, as we move further into years ahead, we will need to become skilful as an organization in finding innovative, organic, people-driven solutions to building and sustaining our work within and outside the church. To do this we will need to build the knowledge and technical now-how of church leaders who know how to tap into the wisdom and talent of people at all levels and in all areas, gently guiding them to our vision and their results. We will need to develop clear measurements and continue to train a cadre of strong managers who manage for results and insist on highest performance standards.

We will continue to find ways to engage our staff, volunteers, partners, and UEC congregations in meaningful projects, in collaborative problem-solving and idea generation. We will create a vibrant culture that is informed, energetic and mission-focused.

Our implementation strategy will involve attention to the following aspects of our organisational life:

- 1 **Culture and Working Together:** The 2012-16 strategic direction presents us with a framework for enriching our organisational culture. By developing a way of working together with all our stakeholders that is guided by these values we can sustain communication, build horizontal relationships within and reaching outside of UEC. We will work together to understand how we can carry out our mission and identifying specific best practices that reflect these values.
- 2 **People and Talent:** Our commitment to building lasting relationships and networks requires that we develop our own capacity to identify and train talented leaders inside and outside our organization within the church. We will work to assure that we have a system in place for capacity review and skills acquisition that matches the needs of our strategies with the know-how necessary to accomplish them. We will develop and implement a diversity plan and a management succession plan and create learning programmes that build the capacity for compassion, facilitation and mission management. Our human resources strategy will work from a clear philosophy, guided by our core values and the requirements of our plan to develop leaders and volunteers equipped for the future work of ADVANCE and of the church in general.
- 3 **Diversity:** ADVANCE is committed to diversity and multiculturalism. This requires constant attention and focus as well as planning. We will develop our mission plans, involving our staff, UEC and Mission Africa, in creating and communicating methods and practices that will assure the diversity of our workers, communities we serve, and beneficiaries of our programmes.
- 4 **Structure and Organization:** Building a flexible and agile programme networks within and outside the UEC will require that we continue to revisit our current workers, communities and governing structures. As the 2012-16 plans unfold, we will assure that the structures we have in place enhance our ability to communicate and collaborate while assuring effective project management and executive decision-making. In addition to building a responsive structure, ADVANCE will identify new and integrated ministry priorities and develop a system to monitor results against specific outcomes.
- 5 **Branding and Publicity:** As our vision unfolds and our programmes to realize our goals and strategies begin to take shape, we will launch a church-wide branding initiative. This initiative coupled with a targeted publicity plan will send our message, clarify our identity and announce our intentions to the full range of our stakeholders, clients and partners across the country and outside Nigeria.

- 6 **Resource Mobilisation:** We will create a resource mobilisation infrastructure within the UEC to build robust relationships with those individuals and organizations that can support our programmes, projects, and general operations through providing financial resources. We will reach out to churches, to donors, to corporations, and to individual and family funding partners to help us to maximize the impact of our ministry vision. We will investigate a wide variety of funding opportunities that will allow us to realize the full power of our programme priorities.
- 7 **Communications and Technology:** ADVANCE will strategically position itself in using multimedia technology to reach out to people within and beyond the UEC. We will reach out to a wider community with our programme message, participate in media forums and dialogues, create and develop our multimedia system, and to advance our internal and external communications through the continuous development and maintenance of cutting-edge technology.
- 8 **Evaluation and Metrics:** An early and continual task will be to establish specific criteria for programme and partner selection, to develop milestones and interim steps, and identify measurements for success for each of our strategic initiatives. We also commit to continuing to evaluate our progress relative to our strategic goals, and to work with our governing board to make course corrections as necessary to reflect external and internal changes.
- 9 **Management Systems:** We will continue to streamline and sharpen our financial and management information systems and develop reports that provide up-to-the-minute data and analysis in support of our on-going decision-making and evaluation of results.

## **CONCLUSION**

Rebuilding Lives: More Choices and Chances is based on five key principles:

1. Client-centred and community-based planning and operational decision-making;
2. Transparent decision-making for deciding when and how ADVANCE should lead, collaborate with others, or support the work that others do so that clients will be served in the best possible way;
3. Active participation in the community focused initiatives — continuing and building on our past commitment to community-wide needs assessments and planning processes;
4. Investing in and showing “evidence-informed” decision-making (that is, making decisions based on formal information gathering and verification) about local needs, preferences, capacities, opportunities, constraints and what works best for different groups; and,
5. Accountability.

This year, we disseminated our long-term vision, our strategic direction, setting out a pathway by which we can achieve a future in which all people within and outside the UEC gain the opportunity to lead healthy and productive lives and build a better future for their children, families, communities and the wider Nigerian society. We aim to continually shift our culture and thinking away from short-term fixes and put more effort toward long-term, sustainable approaches that acknowledge every community member as key to the process. Our aim is to seize every opportunity to scale up our work as never before.

ADVANCE is committed to continuing to be a key player within the UEC and wider-community. This includes recognizing the need for flexibility and creativity in responding to the issues confronting PLHIV, those at risk of and affected by HIV/AIDS, and those traumatized by or vulnerable to child abuse and those living in poverty and oppression. We also recognize the value of collaborating to make the best use of all the available expertise and resources to meet the many challenges that lay ahead. We will continue to identify programming initiatives that are consistent with ADVANCE's vision, mission, values and strategic directions and determine our role as well.





**ADVANCE**

