



Report of Social Aid Fund project implemented by
**ANAYD in Nigeria for Adolescents and
Young Persons in their diversities**

Submitted by



AFRICAN NETWORK OF ADOLESCENT AND
YOUNG PEOPLE NETWORK (ANAYD)

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ACRONYMS



ANAYD	African Network of Adolescents and Young Persons Development
ASAP	AIDS Strategy, Advocacy, and Policy (Ltd)
AYP	Adolescents and Young People
AYPLHIV	Adolescents and Young People Living with HIV
CSS	Community Systems Strengthening
FGDs	Focus Group Discussions
FHI 360	Family Health International
FLHE	Family Life and HIV Education
HTS	HIV Testing Services
NACA	National Agency for the Control of AIDS
NASCP	Federal Ministry of Health-National AIDS and STI Program Control Unit (FMOH-NASCP)
NPTWG	National Prevention Technical Working Group
NYSC	National Youth Service Corps
PATA	Positive Action for Treatment Access
PEPFAR	US President's Emergency Plan for AIDS Relief
PMTCT	Prevention of Mother to Child Transmission of HIV
PrEP	Pre Exposure Prophylaxis
RSSH	Resilient and Sustainable Systems for Health
SACA	State Agency for the Control of AIDS
SFH	Society for Family Health
SIDHAS	Strengthening Integrated Delivery of HIV/AIDS Services
SRHR	Sexual and Reproductive Health and Rights
YFC	Youth Friendly Centre
YFSW	Young Female Sex Workers
YPWD	Young Persons with Disabilities
YMSM	Young Men having Sex with Men
YPWID	Young Persons Injecting Drugs





PREFACE

This report shares insight on the Social Aid support which we received from the Global Network of Young People Living with HIV (Yplus Global).

The Social Aid project delves into the impact of COVID-19, needs and realities of adolescents and young people living with HIV and young key populations to improve programming, and thus, the lives and well-being of this AYPs key vulnerable affected groups in Nigeria.

The project also provided tangible social aid support to AYPs key vulnerable affected groups in Nigeria, while evaluating the impact of such support young people.

It is therefore a handy document for AYP focused organizations, government, bilateral and multilateral agencies, in Nigeria and a baseline document amongst others for improving HIV-COVID19 response and measuring our progress.

I, therefore, appeal that the recommendations made by AYPs and the respondents for the government should be given paramount attention, and the necessary support channel to enable us sustain the gains made and maximize impact on HIV response amidst COVID-19.

Mr. Aaron Sunday
Executive Director ANAYD





ACKNOWLEDGEMENTS

The African network of adolescent and young people development (ANAYD) is exceedingly grateful to the Global Network of Young People Living with HIV (Yplus Global) through the Social AID Fund Pilot Project for the funding support that made this situation analysis on COVID-19 impact amongst adolescents and young people living with HIV and young key populations possible.

This briefing paper is part of a research and advocacy program on the impacts of the COVID-19 pandemic on Adolescent and Young People Living with HIV and young key populations in Nigeria undertaken by ANAYD. We are very appreciative of Mr. Aaron Sunday, the lead consultant whose leadership oversees the development of this situation analysis report. Also, we want to especially appreciate the two ANAYD resource persons Ekanem Itoro Effiong and Pascal Akahome who provided technical support and co-led the processes of the situation analysis report.

Very specially, we also acknowledged the active participation of the adolescents and young people living with HIV and young key populations who participated in the process. Their stories on how COVID-19 impacted them and participation will contribute to improving the health intervention of AYPs across Nigeria.

ANAYD would also like to thank the following organization for their contribution to the process and preparation of this situation analysis report:

- Education as Vaccine (EVA)
- No Hate Network Nigeria (NO8)
- The Network of People Living with HIV and AIDS in Nigeria (NEPWHAN)
- Association of Positive Youths Living with HIV in Nigeria (APYIN)
- National AIDS Control Agency (NACA)
- Federal Ministry of Health-National AIDS and STI Program Control Unit (FMOH-NASCP)
- Joint United Nations Programs on HIV/AIDS (UNAIDS) Nigeria

Finally, we thank all our staff who contributed in one way or the other to this process, you make us proud every time.



EXECUTIVE SUMMARY

Adolescents and Young People Living with HIV (AYPLHIV) (10 -24 years) are not the faces of this pandemic, however, they risk being among its greatest casualties. While they have fortunately been saved from many of the immediate impacts of COVID-19, the emergency still profoundly affects their mental and physical wellbeing. It is generally recorded that Adolescents and young people (AYP) especially AYPLHIV face extreme effects during crises.

The COVID19 pandemic maintains these outcomes considerably more, as the general well-being measures for the control of the infection place AYPLHIV at expanded dangers of an interrupted supply of lifesaving antiretroviral medications, especially pregnant young girls living with HIV, who may also be less likely to visit the clinic. These difficulties are more pronounced for AYPLHIV who are at a crossing point of sexual orientation, disability, and in networks confronting extra difficulties.

The Situation analysis, which was conducted from December 2020 to January 2021, gathered responses from AYPLHIV including the Young Key population living with HIV in 6 states covering the 6 geo-political zones in Nigeria. They are; Kaduna, Benue, Lagos, Rivers, Anambra, and Taraba states. The states were selected based on the COVID-19 cases , HIV prevalence amongst AYPs, availability of HIV youth networks, and Key population-led organizations. The Situation analysis was intended to measure the impact of COVID-19 on AYPLHIV in Nigeria and to provide key recommendations to influence policy and programmatic actions to Government and relevant stakeholders.

The principal challenge of AYPLHIV since the lockdown is access to life-saving antiretroviral medications. Next on the priority of the AYPLHIV is the fear of visiting Health facilities which has ultimately disrupted young positive clients from adhering to ARVs, interruption of support group activities, and returning to school. Additional challenges are the availability of food, cost of transportation to



visit facilities, and more.

In the course of this project 91 AYPLHIV and young key populations in 11 states (via 9 focal states) received social aid support in form of:

1. Food items
2. COVID-19 PPE
3. SRHR commodities
4. Moderate cash support for business
5. Transport to health facility for ART drugs collection, viral load or CD4
6. School fees

As the world struggles to recover from the impact of the COVID-19 pandemic, young people in Nigeria struggle with numerous vulnerabilities including loss of jobs/livelihoods, poor mental health, lack of food and relevant access. This is therefore the right time to invest in closing the gap, providing more social aid support to young people and equipping them with relevant skills to enable them excel in the new realities of the workplace.



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SECTION 1.0 BACKGROUND

This report documents the process of needs assessment, situation analysis, social aid support and post implementation assessment and advocacy activities conducted by the African Network of Adolescents and Young Persons Development (ANAYD).

According to WHO, the Corona group of viruses is a large family, getting their name from the crown-like spikes that can be seen on their surface with an electron microscope. They were first identified in the middle of the 1960s. The novel Coronavirus causing COVID-19 was first reported in Wuhan, a city in China. Symptoms in man range from the common cold to more severe symptoms like Severe Acute Respiratory Syndrome (SARS). So far, there have been over 63,000 cases identified in the African continent and more than 2,283 associated deaths according to Johns Hopkins University and the African centre for Disease Control. Since the virus was identified in December 2019, the preliminary data have focused on severe respiratory manifestations, predominately in adults, with scant data on the burden of COVID-19 in children.

The impact of the coronavirus disease of 2019 (COVID-19), which is caused by the novel coronavirus, has been widespread, with 155,076 confirmed cases, 132,544 discharged and 1,902 deaths recorded in 36 states and the Federal Capital Territory as at 26th February 2021, according to the Nigeria Centre for Disease Control (NCDC).



Figure 1: COVID-19 Case update

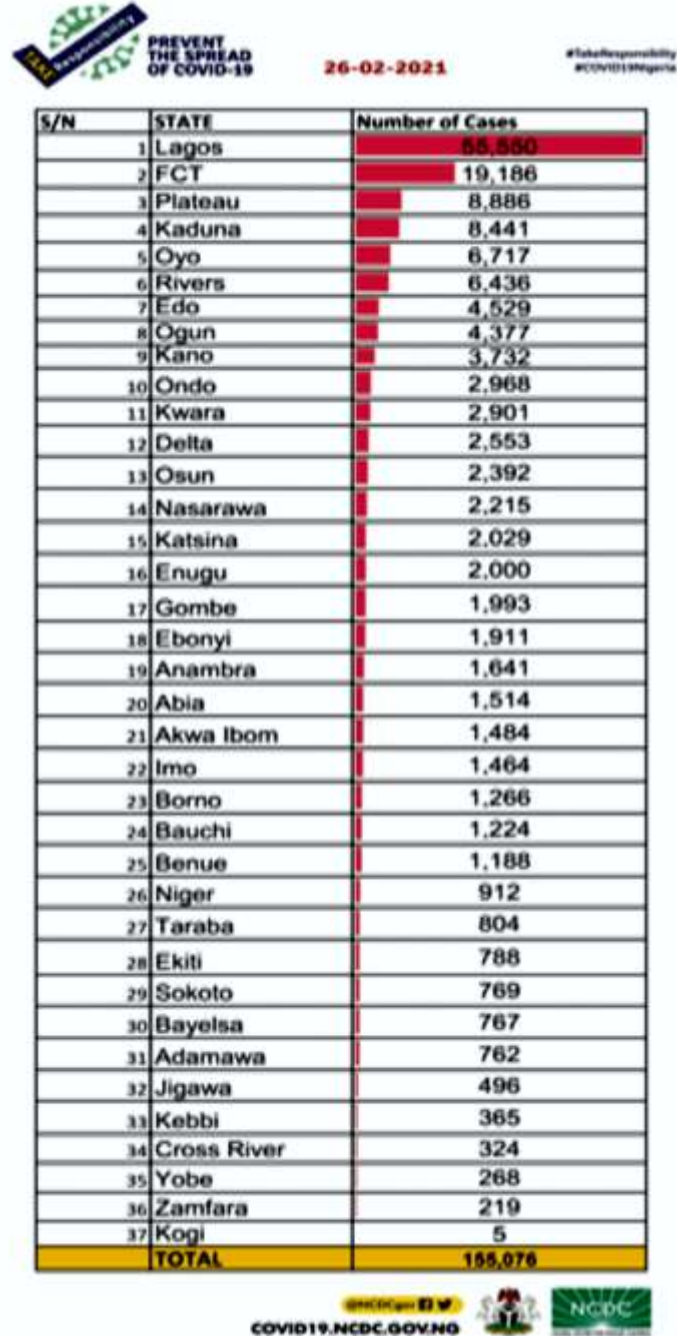


Figure 2: COVID-19 Case breakdown across 37 states of Nigeria



Nigeria has an estimated population of about 200 million with 48% constituting Adolescents and Young People (AYP). The HIV prevalence amongst AYP in Nigeria has risen from 0.2% for Adolescents age 15-19 years to 1.3% for female 20-24 years (NAIIS 2018).

The HIV burden amongst adolescents 10-19 years shows that 8% of people living with HIV are adolescents 10-19 years which accounts for about 247,293 AYP living with HIV in Nigeria and Female incidence of HIV is significantly higher than males, both in adolescents and adults.

Age group	Male	Female	Total
10-14	31,753	30,123	61,875
15-19	30,947	38,423	69,370
20-24	46,382	71,667	118,048
Total	109,082	140,213	247,293

(Source: 2020 Spectrum Estimates)

Table 1: HIV burden amongst AYPs in Nigeria

There is inadequate HIV knowledge amongst adolescents and young people in Nigeria with only 42.6% female and 33.7% males having comprehensive HIV knowledge.

Age group	Female	Male
15-19	38.1%	28.7%
20-24	48.1%	41.9%
15-24	42.6%	33.7%

(Source: NDHS2018- Nigeria Demographic Health Survey)



Table 2: HIV knowledge gap amongst AYPs in Nigeria

While COVID-19 has influenced health seeking-behaviour among AYPLHIV, there are reports that there are yet numerous AYPLHIV who keep seeking these services. As health services become overwhelmed in catering to infected people requiring treatment, AYPLHIV has been reported to be less likely to get standard consideration. Sexual and reproductive health services, HIV treatment, community-based peer support programs have been cut halfway or suspended. As Nigeria reacts to the COVID-19 emergency, HIV financing, and access to SRHR, including modern contraception, life-saving antiretroviral medications, may not be prioritized. In Nigeria, grassroots Youth-led organizations/networks are filling service gaps to guarantee SRHR of AYPLHIV is not kept separate from Government response and recovery plans.

In addition to its effect on health, the COVID-19 pandemic has disrupted every aspect of our lives. Even before the onset of the crisis, the social and economic integration of young people was an ongoing challenge. The response of governments around the world to the unprecedented and rapid spread of COVID-19 has resulted in a global economic slowdown. The impacts on people, jobs and businesses are likely to be long-term and has hit hard the most vulnerable populations (including young people) differently.

History has shown us that a crisis like the COVID-19 pandemic can have protracted and severe consequences for younger populations,² who are already starting to be termed the “lockdown generation” (ILO, 2020a). Recent studies are beginning to highlight the multi-dimensional challenge the pandemic poses for young people through the resultant disruption to education and training, amplified vulnerabilities among young workers, and a longer and more arduous transition into decent work (ILO, 2020b). Impacts such as these exacerbate inequalities and risk reducing the productive potential of an entire generation.

ANAYD received the UNAIDS Social Aid Fund from the Global Network of Young People Living with HIV (Y+), to provide support to Adolescents and Young People (AYPs) in their diversities impacted by the COVID-19 pandemic across in 11 states across the 6 geopolitical zones in Nigeria.



Purpose of the support

- To identify the impact of COVID-19 on AYPs
- To provide tangible support to AYPs as a way of cushioning the impact of the COVID-19 pandemic
- To conduct advocacy to relevant institutions based on key findings and recommendations

Process of delivery

- A. Call for application to identify the impact of the COVID-19 pandemic on AYPs, the priority needs and area of support.
- B. Situation analysis of impact. This included Focused-Group Discussions and Key Informant Interview (KII) with AYPs and relevant stakeholders.
- C. Implementation - Provision of social aid (based on identified needs and the most vulnerable) to 91 AYPs in 11 states across the 6 geopolitical zones of Nigeria.
- D. Post implementation analysis to measure the impact of the support and areas of improvement.
- E. Advocacy to relevant agencies to share findings and recommendations to improve service delivery for Adolescents and Young Persons in Nigeria



SECTION 2.0 METHODOLOGY

The project was implemented in 5 phases across the 6 geo-political zones of the country. As a result of the lockdown, and the COVID-19 restrictions most of the phases were implemented virtually, except the delivery of tangible support to selected beneficiaries.

Site Selection

ANAYD and its partners selected the states where the activities will be conducted based on National HIV prevalence data, the existence of AYP Networks, and partner organisations who could provide support to Program Officers (who delivered the COVID-19 social aid support to beneficiaries), amongst other key criteria.

States selected for the implementation were:

Geopolitical Zone	State Selected
North East	Taraba
North Central	Benue Abuja
North West	Kaduna Kano
South East	Anambra Edo
South-South	Akwa Ibom
South West	Lagos

Table 3: States selected for implementation



PHASE 1: CALL FOR APPLICATION

An online call for application (link: <https://cutt.ly/Lk77Fse>) was published on the 5th of January, 2021 and lasted until the 12th of January, 2021 for Adolescents and Young Persons along Nigeria to apply for social aid, and respond to questions relating to the impact of COVID-19.

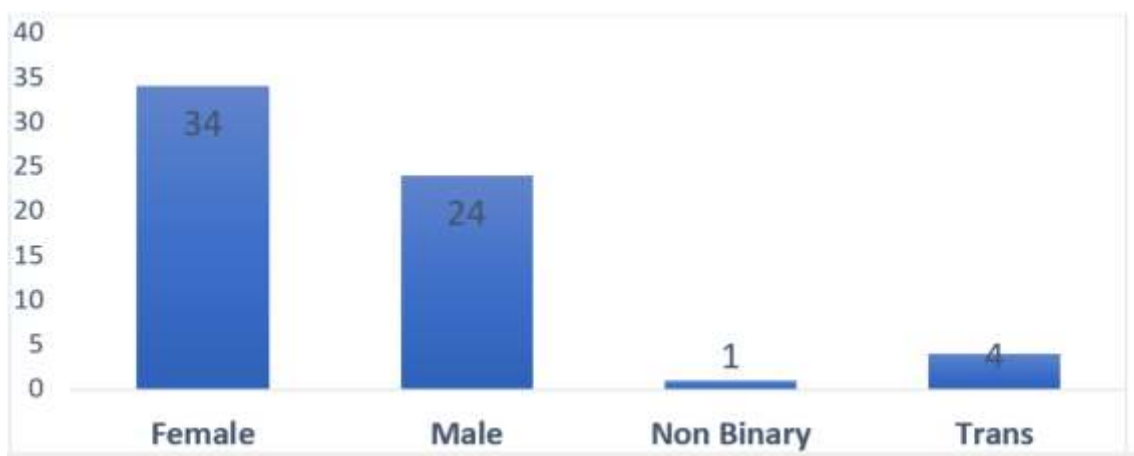


Figure 3: Sex disaggregation of applicants for COVID-19 social aid

65 adolescents and young persons filled the online application - 34 females, 24 males 4 transgender and 1 non-binary person applied.

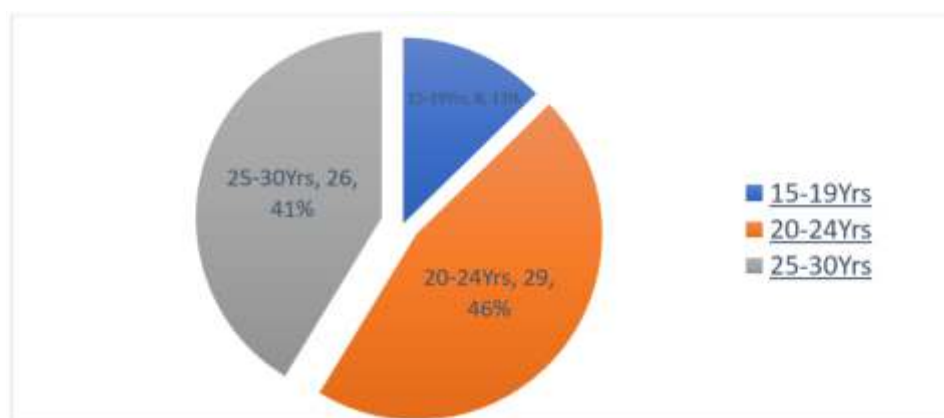


Figure 4: Age disaggregation of applicants for COVID-19 social aid

Among the 65 applicants - 46% of which are between 20 – 24 years; 41% of which are aged between 25 – 30 years; with the least number of applicants being within 15 to 19 years.



You identify as?

65 responses

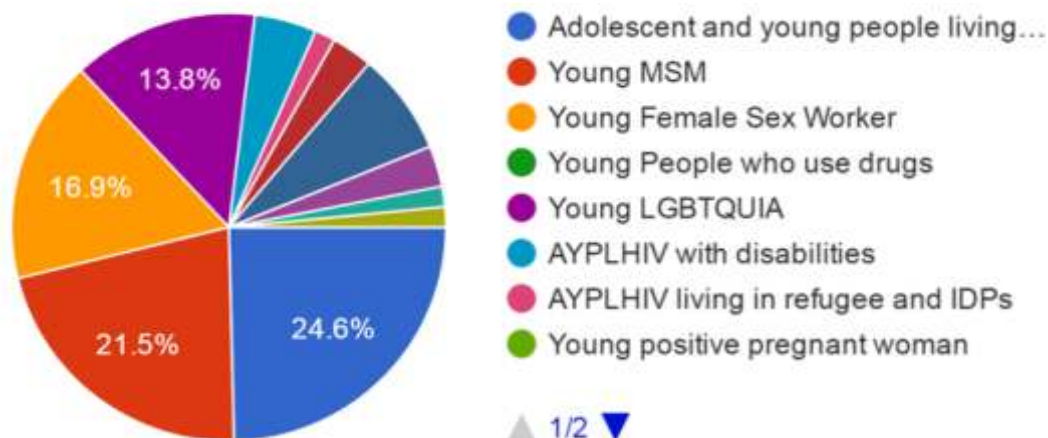


Figure 5: Diversity of applicants

The highest number 24.6% of applicants for the social fund were Adolescents and Young Persons Living with HIV (AYPLHIV); the least were Young Positive Pregnant Women at 1.5%.

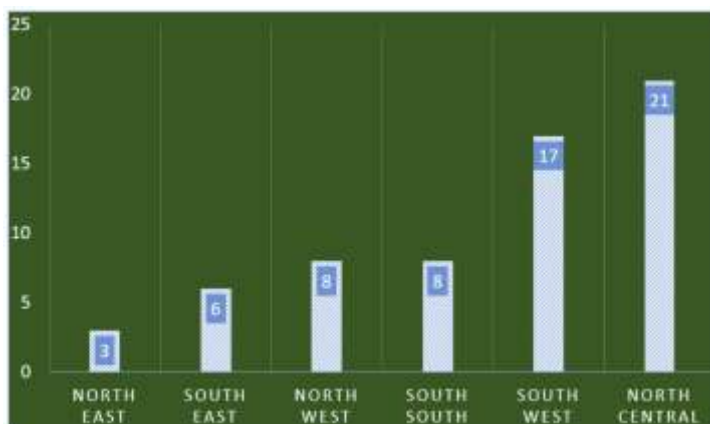


Figure 6: Geo-political distribution of applicants

A large number (21 persons) of the applicants reside in the North-Central region of Nigeria. The geo-political region with the lowest application is the North East, with only 3 applicants.



List the 3 things you felt it was hard for you to manage because of the lock down? Select only 3 key things amongst the options.

65 responses

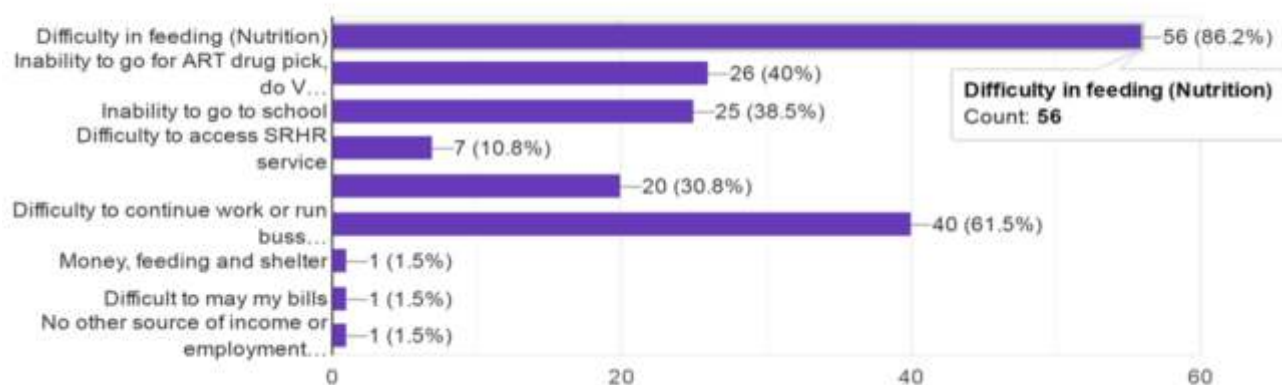


Figure 7: Challenges faced by AYPs as a result of COVID-19 (each respondent selected 3 major challenges faced)

The 3 major challenges faced by adolescents and young persons during the COVID-19 lock down include:

1. Difficulty to feed as a result of lack of funds – 86.2% of respondents
2. Difficulty to continue work or run business – 61.5% of respondents
3. Inability to access ART drugs – 40% of respondents

Other challenges faced include:

- Depression and mental health breakdown due to limited opportunities and lack of funds
- Lack of access to sanitary materials
- Family pressure

“First, my customers have reduced because most people because can't afford my former rates. And because my customer base dropped, and I don't have any other source of income, I accept every customer that comes my way under any condition of sex and this is dangerous. Since I don't have any other source of income, I'm usually afraid that if I turn them down, I may not be able to eat and pay for my accommodation.”

– FSW, Abuja, Nigeria



“Weeks before the lockdown, I started a Makeup class to help develop my makeup studio properly then boom! came the lockdown. It scattered all my dreams and plans because time was wasting while I was supposed to be learning. I became both financially and psychologically disturbed.” – **Female AYPLHIV, Lagos, Nigeria**

“The pandemic has really affected me greatly as am the first boy child of my parents who are just low scale farmers, and who deeply rely on me for much support. During this lockdown, I was relieved of my job as a Receptionist with the excuses that the market was bad as the customer-base had reduced greatly. As such I now find it difficult to cater for myself let alone look after my parents.” – **Male AYPLHIV, Benue**

“Am claustrophobic and having to stay in 24/7 was quite a traumatic experience for me. I was emotionally unstable.” – **MSM, Akwa-Ibom**

How meaningful or important will it be for you to receive the Social AID Support during the time of lock down?

65 responses

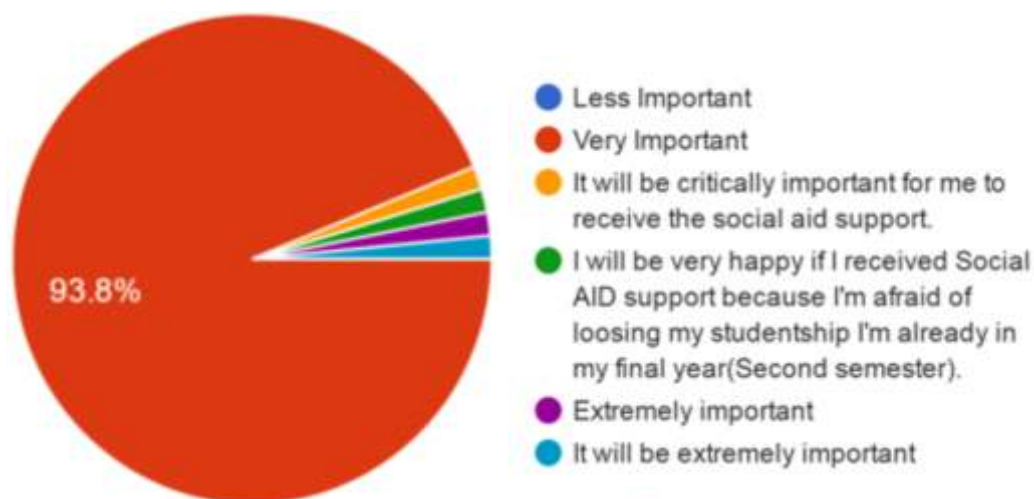


Figure 8: Importance of Social Aid support during lock down

When asked how important social aid support is for young people during lock down, 93.6% of the responses show that young people believe that it is very important for them to receive social aid support.



PHASE 2: SITUATION ANALYSIS OF IMPACT

This phase involved a literature review to assess already available data on the impact of the COVID-19 pandemic on the health and safety of AYP living in Nigeria. It also included Focus Group Discussion (FGD) with of male and female AYP living in urban and in rural communities aged (13-29 years) about the impact of the COVID-19 pandemic on their well-being.

Nine interactive Zoom sessions were conducted by engaging AYPLHIV and other relevant stakeholders in a learning and sharing dialogue focused on correcting myths and misperceptions about the coronavirus/COVID-19 disease and gathering information on the challenges AYPLHIV are facing in regards to their education, mental and sexual and reproductive health and their proposed strategies for how to mitigate the impact of the pandemic.

Objectives

The objectives of this Situation analysis were to:

- Assess the impact of COVID-19 on AYPLHIV
Improve quality and life of adolescents and young people living with HIV and young key populations.
- Provide key recommendations to influence policy and programmatic actions to Government and relevant stakeholders.

In total, 5 persons participated in the key informant interviews from the following institutions Association of Positive Youth Living with HIV in Nigeria (APYIN), Network of People Living with HIV/AIDS in Nigeria (NEPWHAN), Federal Ministry of Health-National AIDS and STI Control Program Unit (NASCP), National AIDS Control Agency (NACA) and Joint United Nations Programs on HIV/AIDS (UNAIDS). A total number of 12 respondents participated in the FGD. The research was conducted from December 2020 to January 2021 during the rapid spread of COVID-19 and the accompanying fewer restrictions on movement or travel. This meant that researchers experienced some challenges in conducting face-to-face meetings with AYPLHIV, HIV activists, HIV experts, and organizations/networks who work with AYPLHIV due to COVID-19 restrictions, at a time when the lives, safety, and livelihoods of AYPLHIV posed a threat.



Research Question	Method Used to Answer Question
What is COVID-19?	Verbal response
What were you doing before the COVID - 19 pandemic?	Verbal response
How did the COVID 19 Affect you?	Verbal response
How did you cope during the lockdown?	Verbal response
What would you want the national and sub - national government to do in addressing the challenge highlighted?	Verbal response
What were your biggest opportunities during the lockdown?	Verbal response
Will you accept the proposed COVID 19 vaccine?	Verbal response

Table 4: Methods used to answer research questions

Population Sample Distribution

A total of 12 samples size of AYPLHIV and YKPs respondent were engaged on focus group discussion (FGD) while 5 representatives of institutions were engaged with KII. Figure 1 below shows the distribution of the total population.

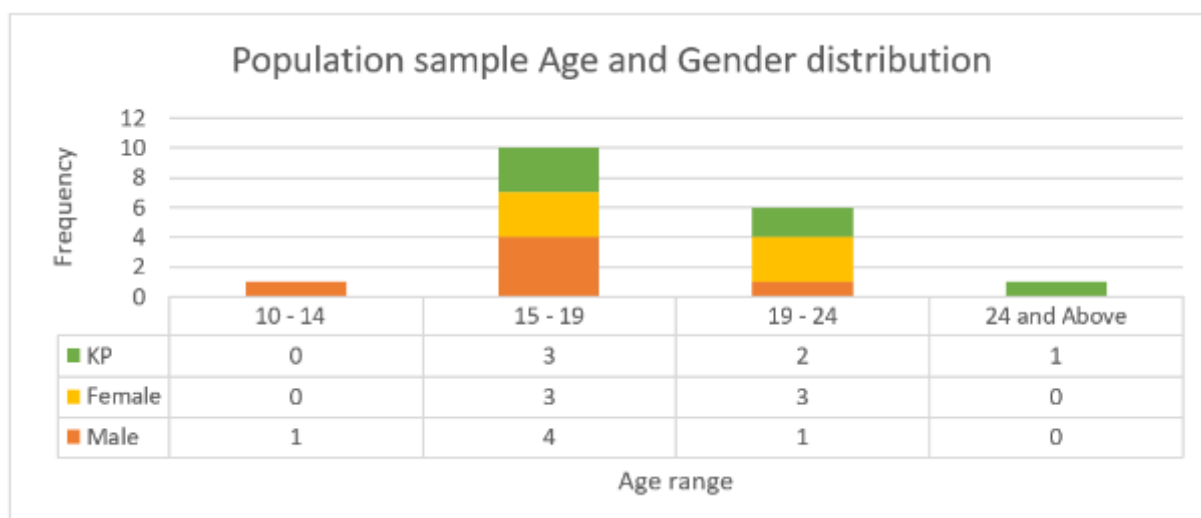


Figure 9: Respondents Age Distribution (Source: AYPLHIV and COVID-19, 2020)



Sociodemographic profile of residents

The distribution of respondents by State of residence is shown in the figure below.

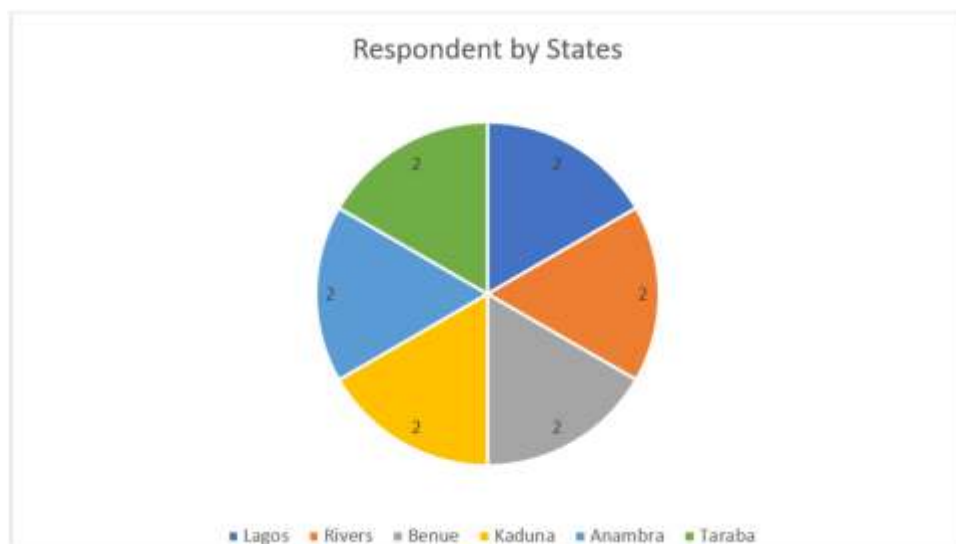


Figure 10: Distribution of respondents by states

2 respondents were picked from each state across the 6-Geopolitical zone through the Association of positive Youths living with HIV/AIDS in Nigeria (APYIN). The selection was done at the sub-National level to ensure proper coverage.

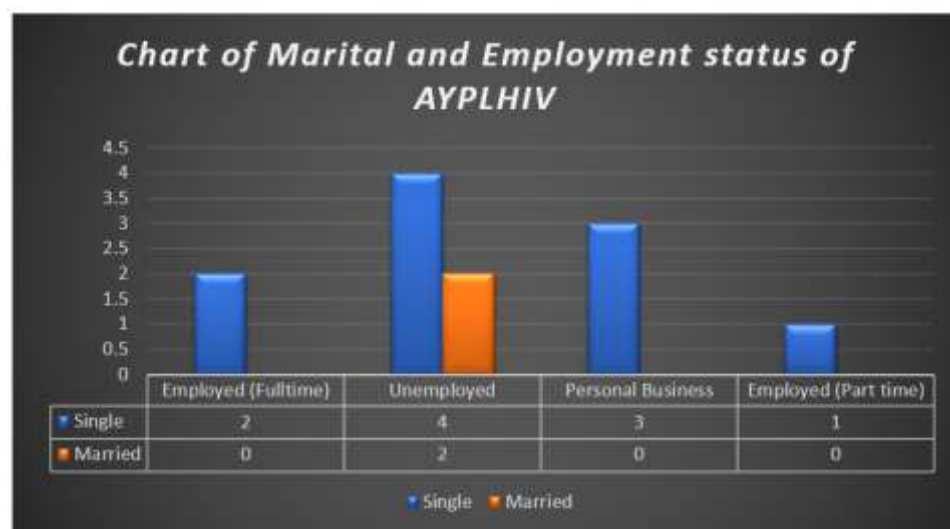


Figure 11: Chart of Marital and Employment status of AYPs
(Source: AYPLHIV and COVID-19, 2020)



FINDINGS - COVID Impact on AYPLHIV

“Due to the increase in transport cost, I could not access my ARVs. Also, most doctors were unavailable at the PHC and I could not access HIV treatment. My health deteriorated. Also, I could not access food for my family.” - **FGD Respondent**

The COVID-19 pandemic, like any pandemic, whether it is a disease or a natural disaster, has revealed substantial disparities in health services and checked the degree to which countries like Nigeria are still lagging in meeting the 90-90-90 commitments. As the general public grapples with its effects, the pandemic tends to disproportionately affect Adolescent and Young people especially AYPLHIV. Some of the major problems caused by COVID-19 are restrictions on access to healthcare, financial strain due to reduced livelihood sources, and increased high risk behaviours.

No doubt, the pandemic has impacted Nigeria's' economy. State Governments face conflicting priorities, especially in minority states, and have less financial capacity to enforce the equitable access to services amidst the pandemic. The burden on healthcare systems means that AYPLHIV have restricted access, including psychosocial help, to required health services such as HIV Testing Services, ARV, Sexual and Reproductive Health Services. For AYPLHIV in the states with extractive industry, the situation is particularly worse. Many AYPLHIV, particularly young positive KP, have fallen out of care due to limitations and lack of resources.

“A lot of treatment services were cut out. In my health facility, we stood outside the hospital and the drugs were thrown at us. So, we would not have contact with the providers. People who could not access drugs were forced to borrow from friends. This caused emotional trauma as well as adherence issues.” – **FGD respondent**

Another challenge that struck deeply during the disease outbreak among AYPLHIV is financial hardship. Some have reported job losses and, due to COVID-19 constraints, many are unable to operate. Those that are eligible during this era to get jobs are often denied the chance because of the stigma towards AYPLHIV. This implies that many cannot afford to feed or attend to their basic individual needs sufficiently.

“I could not get access to my drugs. Also, I was financially affected as I had to sell all my stock to feed.” - **FGD Respondent**



Results

The FGD conducted with respondents across the country showed gaps in the several categories.

1. Awareness: -The FGD documented a poor Knowledge of COVID 19. It was discovered on probing, that 9 out of 12 respondents neither understood the pathology of the virus or the cause of the disease condition. While it is a fact that there has not been a lack of materials available on the subject, it is instructive to note that more often than not, AYPLHIV is not taken into consideration when these materials are produced. Hence, there is a shortage in AYPLHIV focused advocacy materials being disseminated to ensure that AYPLHIV remains informed about the impact of SARS-COV-19.

“It is a disease caused by the new corona virus. It has symptoms close to Malaria.”

– **FGD respondent**

2. Mental Health: - In times like the pandemic, there are lots of uncertainties following the death of loved ones, increased media reporting, the escalating number of new cases, seeking information from unreliable sources such as social media. All these rumours can result in multiple forms of public conflict and encourage risky behaviour that can have consequences that are worse than the outbreak we are fighting. A majority of our respondents mentioned FEAR as an issue amongst their peers in the support groups they belong to.

A key informant from NEPHWAN responded that “When COVID came, PLHIV were afraid because they knew that people with underlying health issues were more vulnerable. There was a lot of fear because PLHIV were afraid of contracting the virus at health centres”.

A large number of respondents had no one to speak to about how they felt during the lockdown. Participants in the survey emphasized the need for mental health services to help cope with the impact of the lockdown. However, they all unanimously agreed that such services were grossly lacking. Hence, they resorted to speaking with family members and faith-based organizations to fill the gap and the need for a counsellor. Generally, it is also worthy to note that mental health champions specifically focused on AYPLHIV are few and far between within the context of the region.



3. Accessibility to services: During the lockdown due to the pandemic, however, inaccessibility to life-saving Anti-Retroviral Treatment (ART) medication, sexual reproductive health services (menstrual hygiene information, and sanitary pad etc), increased transport costs to healthcare facilities played a major role in limiting the access to services by AYPLHIV from their primary providers.

"I had a major challenge accessing drugs during the pandemic. Before the lockdown, I was living with my family in Lagos. They have no idea that I was gay or HIV positive. When I knew there was going to be a lockdown, I had to travel back to Uyo immediately, because that is where I access treatment, and my drugs were running low. I had to tell my parents that I was going back to school because of my project work. However, I went to get drugs. I could not return home through the lockdown, and I have been stuck here since then."

- FGD, Respondent

In many instances, in the cases where transport was available, the cost was prohibitive, and they had to resort to staying home, rather than attending clinic sessions. Also, participants mentioned the impact it had on their education as prohibitive. Other challenges were financial impact, as some lost their sources of livelihood due to the lockdown affecting their ability to make sales, as well as disruption in peer support group activities.

"During the lockdown, there was an effect on people living with HIV in the community as they could not access their livelihoods like farming and trading during the lockdown. Also, due to the disruptions in the transport system, and the hike in transport fare, they were badly affected. Going out, they were also threatened by security officers who ensured people stayed back at home instead of coming out". - Key informant, NEPWHAN
"We demand equity in the distribution of government palliatives in Kaduna State. Also, look into the content of what is given, e.g some people are given just two packs of indomie. Even though it does not get to the hands of AYPLHIV. The government has to consider the lives of AYPLHIV that have been shattered. Their education has been affected. They cannot afford the school fees because their caregivers have lost their source of income. Also, their nutrition should be looked into so they do not default on their drugs. We also know how movement affected a lot of them. A number of the AYPLHIV were affected by the lockdown. I personally experience rights violation in Kaduna State; I was forced by the police to appear before Mobile Court instituted by the government and also my car withheld by the police which I had to appear before the police DPO at their station to secure my car released and all this happened while I was



going out to discharge my service and provide support both to AYPLHIV and Government serving as a state COVID-19 response team member as surveillance officer.”

- **Key Informant, APYIN National Coordinator**

4. Economic Challenges: - Respondents were engaged in various forms of work, volunteering, educational pursuits, full-time work, and running small scale businesses which got impacted during COVID-19 lockdown.

“There were however elements of fear, due to the rise in gender-based violence and increased police brutality. A lot of young people lost jobs, leading to declined income and food security.” - **Key Informant, UNAIDS**

5. COVID-19 Vaccines: It was therefore not surprising that there was overwhelming support for vaccine acceptance, with a majority of participants saying they would receive the vaccine if made available to them, and a respondent mentioning that they will take the vaccine if proven safe and effective.

6. Opportunities Received: None of the respondents cited any opportunities received during the lockdown. However, it is worthy to note that in the area of available opportunities, there were untapped resources for AYPLHIV from the national government level. However, respondents did not receive this information, bringing to the fore, questions about the effectiveness of the information dissemination pattern at the national government level.

Government Recovery Plans and Programs

The Director General of the National Agency for the Control of AIDS (NACA) has been very involved in the COVID-19 Response team. A key informant from NACA reported that the agency put out information on COVID19 early that have been HIV specific and relied on community structures to disseminate information. This information was however not verified from youth networks working with AYPLHIV due to the limited time.

“Our approach has been to make the messages accessible by young people. We also have an active line that is toll free for people to call in for support on HIV services (6222). There was a challenge at some point getting YPs the drugs needed, so we linked them to a community-based organisation which helped them to get the drugs they needed. During the lockdown, there was a lot of communication around prevention, self-testing, specifically focused on AYPLHIV and they had the full support and backing of the NACA.”

- **Key Informant, NACA**



Also due to limited access to health facilities and services especially during the lockdown which had a negative impact on accessing HIV services and retaining AYPLHIV on treatment. UNAIDS Nigeria adopted the pharmacy drug distribution model, call in services for young positives, as well as promotion of HIV self-testing. UNAIDS conducted an online survey that tried to get the levels of impact of COVID on communities of PLHIV, worked with government to develop a mitigation plan, implement home delivery of drugs, and pharmacy models to ensure improved access.

Currently UNAIDS are working with NEPWHAN to facilitate community led monitoring across several states in Nigeria, and use the information obtained to improve advocacy, planning and programming that is data informed, also working with NEPWHAN and NACA to identify issues in several states to see how UNAIDS can provide palliatives and hygiene products to at least 10,000 people living with HIV in specific states. However, Youth HIV activist on ground is yet to verify this information as it was noted that they were not part of the planning engagement.

The COVID pandemic has brought so many questions and particular concern was the potential impact on HIV services. A Situation Room was established by NASCP to provide a forum for identifying and addressing emergent issues in order to prevent disruptions in the ARVs. The forum was started on March 27, 2020, with NACA, USAID, CDC, CHAI, WHO, FHI360/GF, AHF, LSMOH, and DOD representatives were present. This did not however mention an HIV Network or AYPLHIV representative who had more perspectives on what the realities of this community reflect on this forum.

However, the PSM Situation Room aims to continuously evaluate the impact on the National Program of global supply chain issues, exchange knowledge, and direct steps to ensure that supplies and other HIV services are provided on a sustained basis.

“NASCP is actively encouraging the involvement of State HIV Program Administrators of all government ministries of health in an online Leadership and Management course as part of their efforts to continue improving the National HIV Care and PMTCT Program (NTPP).” – Key Informant, NASCP



PHASE 3: IMPLEMENTATION – Provision of Social Aid Support

In this phase, Social aid support was provided for applicants - who responded to the online application COVID_19 social aid support during the first phase.

Beneficiaries selection:

Though there was a total of 65 applicants for the social aid support, ANAYD was able to support a total of 91 persons in 9 states across the 6 geo-political states of Nigeria. The additional 26 persons were identified as very vulnerable by AYP networks partners in the states.

S/N	STATE	Number of Male	Number of Female	Total
1.	Taraba	0	2	2
2.	Lagos (including Osun and Oyo states)	15	9	24
3.	Edo	0	2	2
4.	Anambra	5	4	9
5.	Abuja	2	4	6
6.	Benue	1	7	8
7.	Akwa Ibom	0	1	1
8.	Kaduna	19	16	35
9.	Kano	4	0	4

Table 5: Social aid support Beneficiaries disaggregated by state and sex

The highest number of beneficiaries were reached in Kaduna state (38%), while the least number of beneficiaries 1% were reached in Akwa Ibom state.



Groups reached with social aid support in Nigeria			
GROUP	MALE	FEMALE	TOTAL
AYPLHIV Orphans	22	17	39
YPWID	1	2	3
YMSM	17		17
YFSW		12	12
YLGBTQUIA	4	3	7
Young positive breast feeding mothers	-	2	2
Young positive couples	1		1
AYPLHIV with disabilities	1	1	2
AYPLHIV Refugees and IDPs	1		1
Adolescents girls and young women		1	1
Young positive pregnant Adolescent girl and Young women		3	3
Young positive widow mothers		3	3

Table 6: The diverse AYP groups reached with social aid support



TYPE OF SUPPORT	MALE	FEMALE	TOTAL
Food Items	15	22	37
COVID19 PPE	15	2	17
SRHR Commodity	0	3	3
Moderate Cash for Business	6	7	13
Transport support for ART, viral load or CD4	11	6	17
School fees	3	1	4

Table 7: Type of support provided to beneficiaries across the 9 states

Based on identified needs, beneficiaries were provided with food items, COVID-19 PPE (hand sanitizers and face masks), SRHR Commodity (sanitary pad), moderate cash for business, transport support particularly for AYPLHIVs, and school fees. About 41% of the beneficiaries identified nutrition as their most important need, thus, food items were delivered to them at their homes. Next to food items was COVID19 PPE (19%) and transport support (19%) for AYPLHIV to get to the health facilities. The least support received was SRHR commodity – 3%.



Figure 12: Social Aid Support - Food items



Figure 13: Social Aid Support – COVID-19 PPE





Figure 14: Beneficiary in Anambra state receiving SRHR commodity



Figure 15: Beneficiary in Kaduna state receiving food items



Figure 16: Beneficiary in Edo state receiving COVID-19 PPE



Figure 17: Beneficiary in Kaduna state receiving moderate cash support for business



Figure 18: Beneficiaries supported with transport for collection of ART Drugs



PHASE 4: POST IMPLEMENTATION ASSESSMENT

This phase was designed to evaluate and get feedback from beneficiaries on the social aid support they received. Beneficiaries gave feedbacks by filling an online form (link - <https://cutt.ly/Kk74WER>).

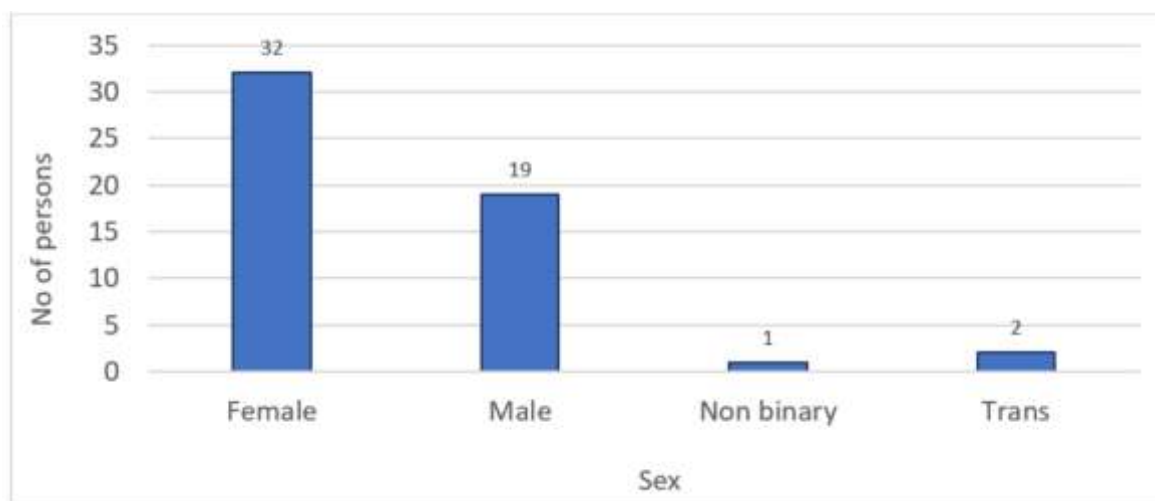


Figure 19: Gender disaggregation of respondents of post implementation assessment

Responses show that there was a total of 54 responses, 32 female respondents, 19 males, 2 transgender and 1 non binary respectively.

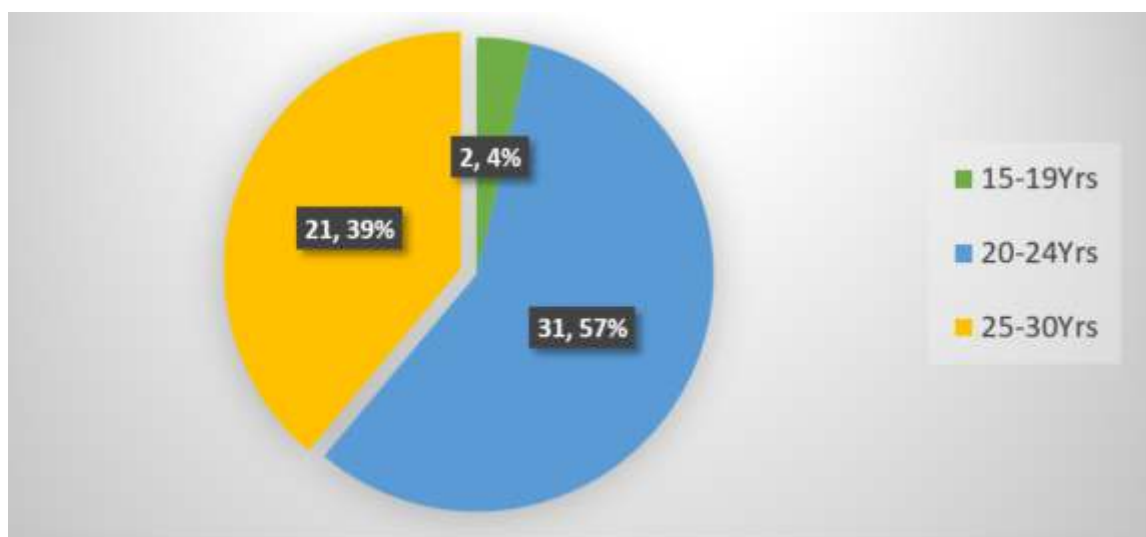


Figure 20: Age disaggregation of respondents of post implementation assessment



57% of the beneficiaries who responded to the post implementation assessment are aged between 20 and 24 years. The least responses (based on age) 4% came from respondents aged 15 to 19 years.

You identify as?

54 responses

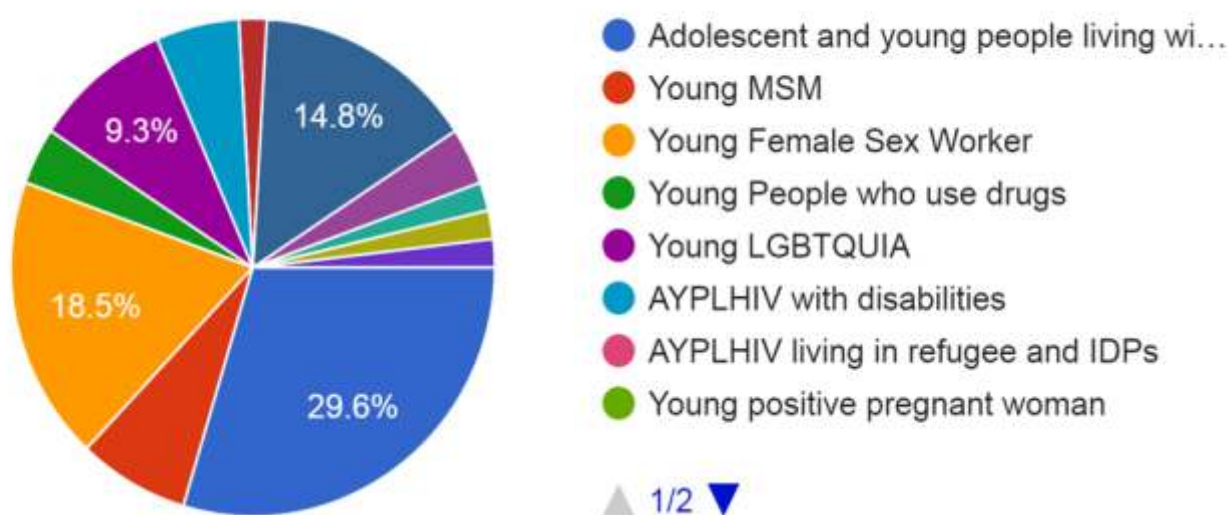


Figure 21: Diversity of respondents

The group with the highest responses was Adolescents and Young People Living with HIV (AYPLHIV) with 29.6% of the respondents, this was followed by Young Female Sex Worker (YFSW) at 18.5%.

Responding to “the 3 major challenges faced by young people after the lock down,” responses show:

1. Difficulty to feed as a result of lack of funds
2. Loss of job or business capita/patronage
3. Hike in cost of living

As the 3 main challenges faced by young people post lock down. Responses also show that poor mental health, loss of family members, school closure, and lack of access to ART drugs and SRHR commodities were also prominent issues in the responses.



List the 3 things you felt it was hard for you to manage because of the lock down? Select only 3 key things amongst the options.

54 responses

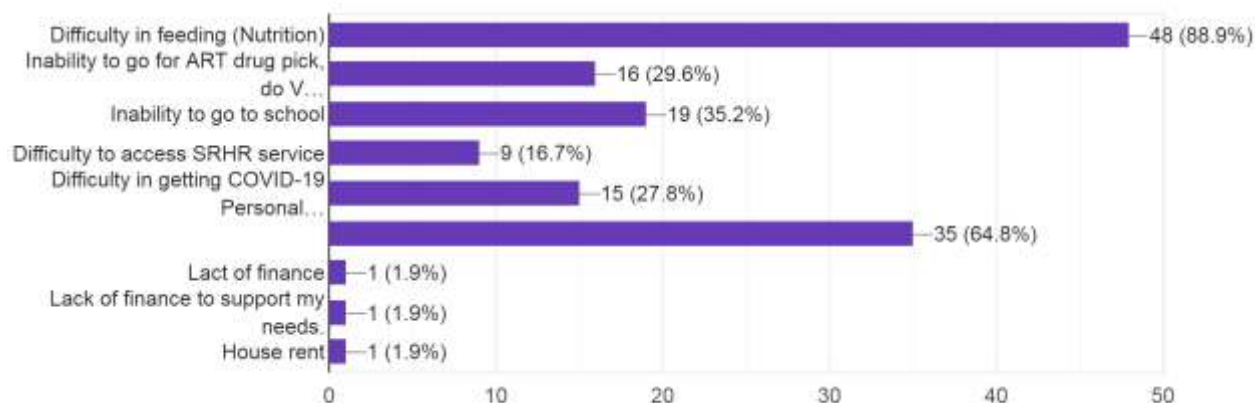


Figure 22: Challenges faced by young people as a result of the lock down

“It was difficult as the family tried to rebuild all that was lost during the lockdown. My Dad lost his job so my mum has to be indebted in order to pay our fees as we resume.” – **Male, AYPLHIV Osun**

“After the lockdown I was trying to go back to work without knowing that I have been listed among the sacked employees. It was like my world is crumbling, everything is changing, and I'm going backwardness. It is too painful and emotional to talk about.” – **Female, AYPLHIV Lagos**



How meaningful or important is it now that you have received the Social AID Support after the time of lock down?

54 responses

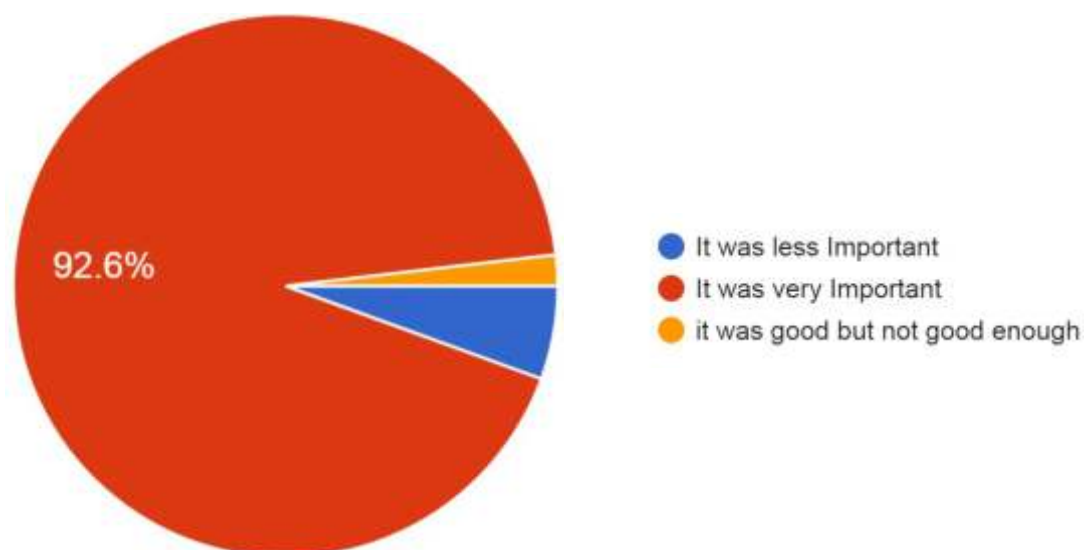


Figure 23: Importance of social aid support received

Responses show that young people – beneficiaries of the social aid support in Nigeria found the support to be timely and relevant to their needs.



"I thank the entire team for the support aid and I will appreciate if there are also other opportunities, we can be reached, such as a job or anything cool. God bless you." – 24 years Young **LGBTQUIA (Lagos state, Nigeria)**

"I deeply appreciate this support, to our community, it even came when schools reopened. Going for exams with a full stomach is a thing of joy. Thank you so much." – **25 years Young FSW (Benue state, Nigeria)**

"I really appreciate your support God will bless you all. Please it will be good if this support is continued so that people will be relieved from depression." – **25 years Young PWUD (Osun state, Nigeria)**

"The social aid impacted me positively because I am able to start up a mini business that will support me and provide monthly funds for upkeep." – **20 years Positive AGYW (FCT – Abuja, Nigeria)**

"I really appreciate the ANAYD/Y+ team for this relief. It went a long way. I didn't only kick start my business again, but I could also make another investment." – **27 years Young FSW (Benue state, Nigeria)**

"Due to the importance of hand sanitizer and facemask in this pandemic, these commodities became really expensive here in the country. So, getting this support was super nice and I appreciate." – 21 years Young FSW (Anambra state, Nigeria)
"I really appreciate the food support given to me; it will really help me. At least for now I have something to eat, I was almost starving." – **25 years AYPLHIV (Taraba state, Nigeria)**

"Thanks so much for the help, and the way you reached out to people, I'm sure this kind gesture will go a long way in my life and the lives of other beneficiaries." – **26 years Young FSW (Anambra state, Nigeria)**



PHASE 5: ADVOCACY

In furtherance of the findings of this project (particularly the situation analysis), advocacy efforts have been initiated with several agencies (government and not-for-profit), in a bid to leave no one behind, especially young people in Nigeria. In a time of crisis and uncertainty like the present pandemic, youth voices, needs and actions can all too easily be pushed to one side. This has been seen in the COVID19 response in Nigeria.

This is therefore a call for relevant government parastatals and agencies to ensure that young people are not left out in the design of responses, and that the already existing service gap is not widened by the current pandemic.

Agencies reached include:

1. National Centre for Disease Control (NCDC)
2. National Agency for Control of AIDS in Nigeria (NACA)
3. Federal Ministry of Health-National AIDS and STI Program Control Unit (FMOH-NASCP)
4. Joint United Nations Programs on HIV/AIDS (UNAIDS) Nigeria

Part of the advocacy strategy was the use of social media and media press conference.

FEDERAL MINISTRY OF HEALTH-NATIONAL AIDS AND STI PROGRAM CONTROL UNIT (FMOH-NASCP)

A virtual advocacy meeting was held with the NASCP Team on Tuesday 16th February, 2021. The discussions covered the findings from the situation analysis, with particular emphasis on the recommendations made.

The Unit acknowledged the absence of young people (particularly AYPLHIV and young key population) in the COVID-19 response, and accepted the report as a useful tool for their use. They committed to collaborating with ANAYD to ensure that young people's needs and services are given priority in future programs and plans.

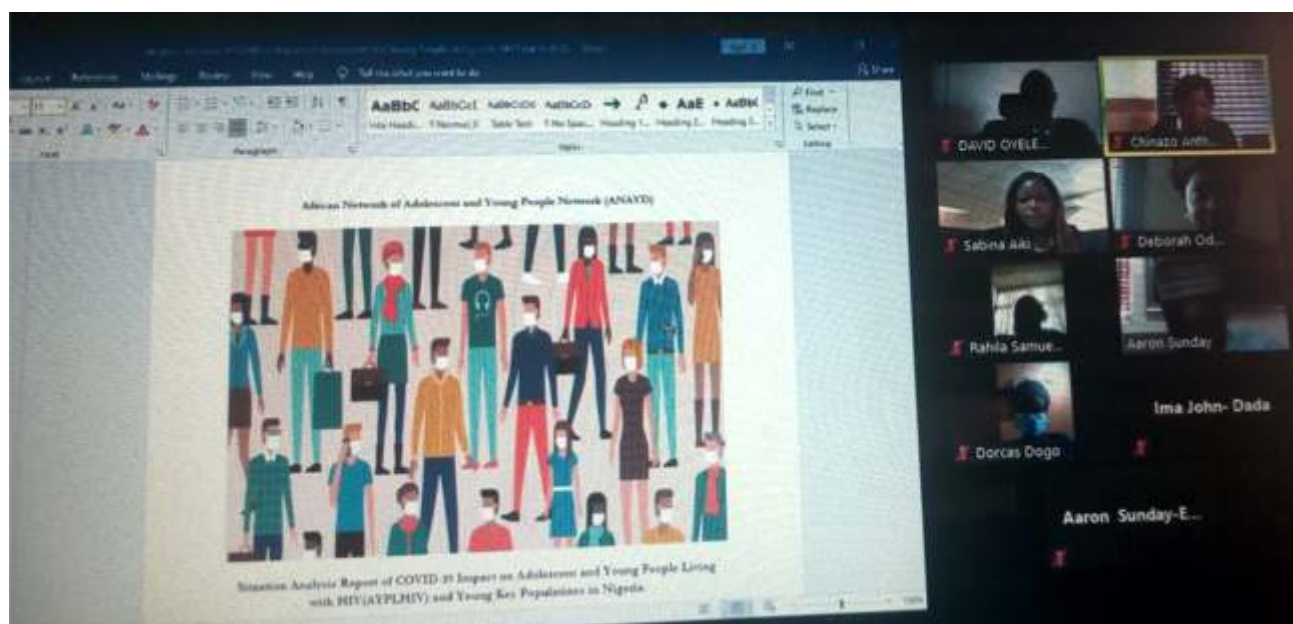


Figure 24: Participants at meeting with NASCP

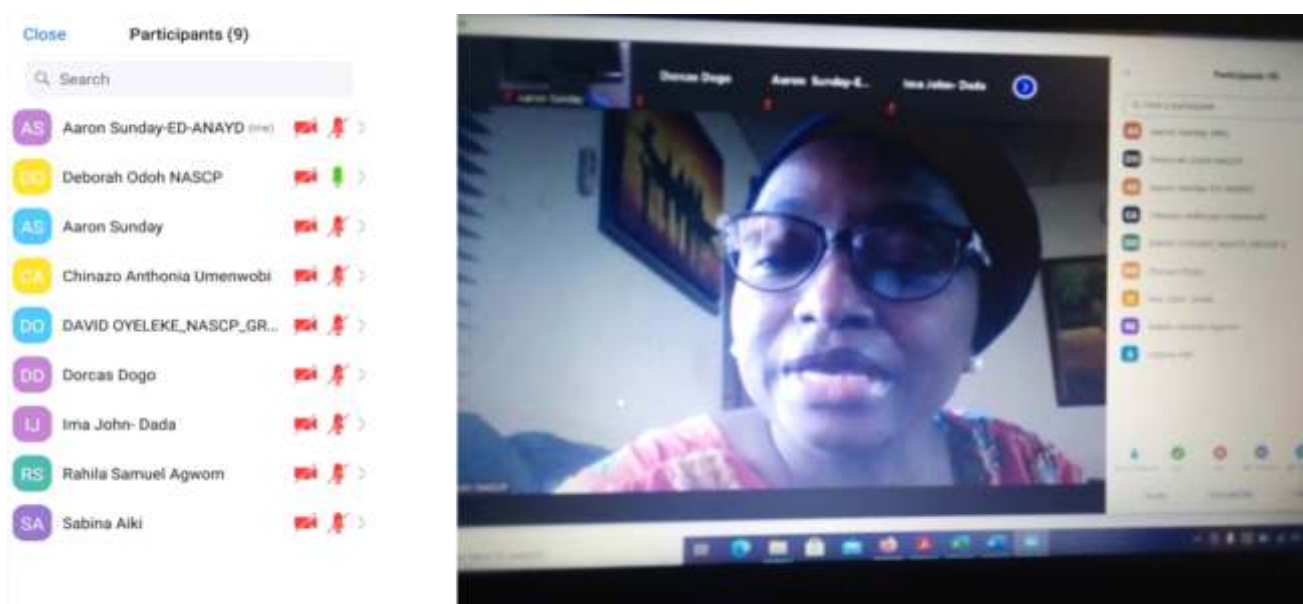


Figure 25: Meeting with NASCP Team



SOCIAL MEDIA ADVOCACY

On the 30th of January 2021, ANAYD engaged government and relevant agencies via social media advocacy, particularly Twitter. The findings of the situation analysis, COVID-19 related experiences of young people, and recommendations were shared. This was the first advocacy step taken as a call-to-action for relevant stakeholders to capture young people living with HIV and key population in the COVID-19 response.

It was also an opportunity maximized by young people to share their thoughts and give relevant feedbacks regarding service delivery and the challenges they face.

The Twitter engagement reached over 484,654 users, with an impression of over 4million.

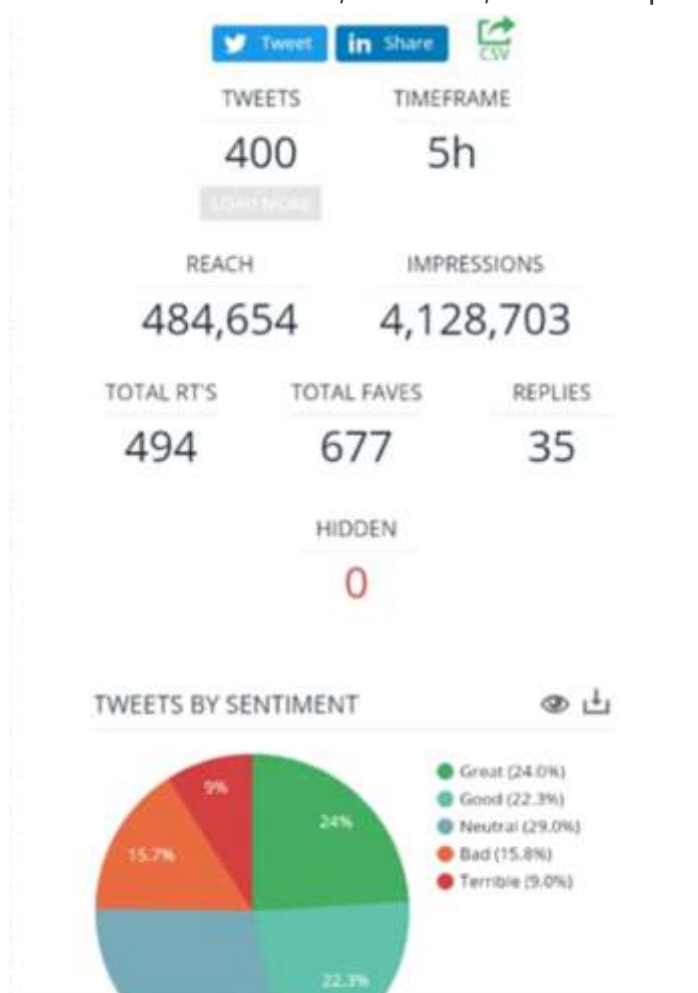


Figure 26: Twitter analytics for social media advocacy

MEDIA PRESS CONFERENCE

As part of the advocacy strategies for this project, ANAYD facilitated a press conference for 2 young people. The interview was conducted on Monday March 1st 2021, by the African Independent Television (AIT), and was aired nationwide.

In the interview, the young people (key population) shared their experiences – the impact of COVID-19, the situation analysis process, and social aid support; and the recommendations they would like to see implemented to ensure young people (especially key populations) are captured in the COVID-19 response in Nigeria.



Figure 27: Press conference on AIT



SECTION 3.0: CHALLENGES AND RECOMMENDATIONS

Challenges

- Slow response from stakeholders delayed the advocacy process, hence, advocacy will continue even after this pilot.
- Due to budget constraints, a lot of vulnerable AYPLHIV and key population identified by partners in the state were not reached with social aid support.

Recommendations

The implementation of this project has shown that large number of young people are currently very vulnerable as a result of the pandemic, with no hope or source of livelihood. To alleviate these conditions, another phase of the Social Aid Support should be implemented to provide support for more young people in dire need.

The sustenance of programs like this will greatly improve treatment adherence, better nutrition, and life outcomes for young people in their diversity.

Loss of jobs/livelihoods is one of the many ways the COVID19 pandemic has impacted young people in Nigeria. Thus, this is proper to invest in relevant skill acquisition trainings to boost young people's resilience and income generation.

The National/State emergency operations centre (EOC), the Risk Communication Pillar within the Presidential Task Force (PTF) to support and engage HIV Networks, HIV Youth activist as the state-level and Local Government Area Level risk communications officers to ensure PLHIV especially AYPLHIV to understand the risks of COVID-19 and how to behave in the context of COVID Pandemic and also maximize resources.

As we continue to navigate this rapidly evolving COVID-19 situation, AYPLHIV needs to stay informed on the latest news, updates, and resources about the virus and its effect on the public. The pandemic has both short-term and far-reaching implications for our generations.

It is a call for both suppliers and buyers to ensure smooth delivery and accessibility of ARV medicine for continued treatment by AYPLHIV

The National and State Government should also pull concerted efforts and create policies that will enable AYPLHIV to gain uninterrupted access to antiretroviral amid the current pandemic and beyond this National health crisis.

National and State Governments must respect the human rights and dignity of people affected by COVID-19. The experiences learned from the HIV epidemic can be applied to the fight against COVID-19.



The National and state governments should work with communities to find local solutions. AYPLHIV especially Positive Young Key populations must not bear the brunt of increased stigma and discrimination as a result of the COVID-19 pandemic. As lockdowns end and recovery plans are put in place, it will be imperative to ensure that AYPLHIV and positive young key populations do not face stigma and discrimination in resuming their jobs or reintegrating into the labour market.

The National and State Government should find innovative ways of continuing with HIV education, training, and HIV testing, including HIV self-testing, which offers service health care providers the possibility of undertaking preliminary screening in their privacy settings and then visiting a health facility only for a confirmatory test, counselling, and treatment, if necessary.

Sustainability efforts such as the HIV Trust Fund should be a priority. Advocacy efforts should be increased to encourage the private sector to continue its support despite the prevailing circumstances.

Political leaders at both the National and state-level should ensure that HIV remains on the national agenda. Given the risk that external assistance for HIV will fall.

“There should be a response phone line where PLHIV can call in for treatment and other services. PPE should be provided for free to PLHIV. The government should also help to provide care and support.” - 17 years, Positive breastfeeding young mother, Rivers

“The government should make all services and personnel available to PLHIV during a lockdown. Transport and security should be put in place too.”

- 19 years, Young Positive FSW, Anambra state

“I suggest that the government at all levels should ensure that the lockdown has a human face for everyone, especially AYPLHIV. The necessary provisions should be made available. An example is that the security agencies should be given good orientation to know who should be allowed to move.” – **20 years, AYPLHIV, Kaduna state**

“During a lockdown, government should ensure take seriously the need to make drugs available for People Living With HIV (PLHIV). Additionally, the movement pass should be given to networks like @NEPHWAN and @APYIN to increase access to drugs.”



“Hygiene products should be made available, and palliatives should be made available to everyone immediately, not to be stolen by government officials. Appropriate messages should be made available to everyone to know what to do.” 17 years, AYPLHIV, Kaduna state.

Lessons Learned

- In most situations, it is always easy to forget young people. For young people to remain relevant, conscious efforts must continuously be made by intentional actions and choices to keep young people's needs in the lime light.
- Young people are better served when they are consulted throughout the process of service delivery.
- Now more than ever, young people need global support. The COVID19 pandemic has changed the world in a way that young people must continue to gain new skills and expertise to remain relevant in the workplace.



SECTION 4.0: APPENDICES

CALL FOR APPLICATION QUESTIONS

PRE-ASSESSMENT SOCIAL AID SUPPORT

Congratulations once again if you are getting this message;

Africa Network of Adolescents and Young Persons Development (ANAYD) with support from Y+ Global is implementing "Social AID fund project" in Nigeria targeting Adolescents and young people in their diversities who have been impacted with COVID-19.

ANAYD will be providing aid support spanning across COVID-19 infection, prevention and control (IPC) commodities (facemask, hand sanitizer) school fee and educational resources (text books), nutrition and food items, SRH commodities (sanitary pad), moderate cash to support business, and transport support for HIV ART pick up, CD4 and Viral load testing for at least but not limited to 62 adolescents and young diver's groups impacted by COVID-19, lost their jobs or whose parents or care givers lost their job due to COVID-19.

To enable us proceed we need all successful applicant to response to this Pre-Assessment which is a compulsory requirement for everyone to enable further understand your needs, choice of support and afterwards measure how this social aid support has made impact.

Take few minutes to respond

*** Required**

Full Name *

Your answer

Email *

WhatsApp Number/ Number *

Sex *

- Male ☐
Female ☐
Trans ☐
Other: ☐

**Age ***

- 10-14Yrs ☐
15-19Yrs ☐
20-24Yrs ☐
25-30Yrs ☐
Other: ☐

Country ***Region/Zone ***

- North West ☐
North Central ☐
North East ☐
South West ☐
South South ☐
South East ☐
Other:

State *

- | | | | |
|-----------|--------------------------|-----------|--------------------------|
| Anambra | <input type="checkbox"/> | Akwa Ibom | <input type="checkbox"/> |
| Benue | <input type="checkbox"/> | Rivers | <input type="checkbox"/> |
| Edo | <input type="checkbox"/> | Sokoto | <input type="checkbox"/> |
| FCT Abuja | <input type="checkbox"/> | Taraba | <input type="checkbox"/> |
| Kaduna | <input type="checkbox"/> | Others: | <input type="text"/> |
| Kano | <input type="checkbox"/> | | |
| Lagos | <input type="checkbox"/> | | |
| Osun | <input type="checkbox"/> | | |
| Oyo | <input type="checkbox"/> | | |

Organization (If none write Nil) ***You identify as? ***

- Adolescent and young people living with HIV (AYPLHIV) Orphans ☐
Young MSM ☐
Young Female Sex Worker ☐
Young People who use drugs ☐
Young LGBTQUIA ☐
AYPLHIV with disabilities ☐
AYPLHIV living in refugee and IDPs ☐
Young positive pregnant woman ☐
Young Positive breast feeding mother ☐
Positive adolescents girl and young woman ☐
Young positive widow mothers ☐
Young positive couples ☐
Other:

What are the 3 main challenges you face during COVID-19 Lock down (Use bullet point)*



What is your major source of your income/ Occupation

(If you are under parental care, still a student or not working indicate

by writing either of the following " Under parent care, Student, Not Working") *

What was the situation at your home or where you stay during the lock down?

(Use bullet point or word not exceeding 50words max to explain) *

How was your income during the time of the lock down? 50words max

(This is to be answered by only those who are doing one work or the other and getting income)

List the 3 things you felt it was hard for you to manage because of the lock down?

Select only 3 key things amongst the options. *

Difficulty in feeding (Nutrition) ☐

Inability to go for ART drug pick, do Viral load or CD4 Test and other Treatment ☐

Inability to go to school ☐

Difficulty to access SRHR service ☐

Difficulty in getting COVID-19 Personal Prevention Equipment (PPE) Facemask and Hand sanitizer ☐

Difficulty to continue work or run bussiness ☐

Other:



How meaningful or important will it be for you to receive the Social AID Support during the time of lock down? *

Less Important ☐

Very Important ☐

Other:

Comment

Any Comment or Suggestions



FGD QUESTIONS

Research Question	Method Used to Answer Question
What is COVID-19?	Verbal response
What were you doing before the COVID-19 pandemic?	Verbal response
How did the COVID 19 Affect you?	Verbal response
How did you cope during the lockdown?	Verbal response
What would you want the national and sub-national government to do in addressing the challenge highlighted?	Verbal response
What were your biggest opportunities during the lockdown?	Verbal response
Will you accept the proposed COVID 19 vaccine?	Verbal response



POST ASSESSMENT QUESTIONS

POST-ASSESSMENT SOCIAL AID SUPPORT

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To enable us proceed we need all successful beneficiaries to respond to this Post-Assessment to enable further understand how the support meet your needs and afterwards measure how this social aid support has made impact.

Take few minutes to respond

*** Required**

Full Name*

Email*

WhatsApp Number/ Number *

Sex*

Male ☐

Female ☐

Trans ☐

Other: ☐

**Age ***

10-14Yrs ☐
15-19Yrs ☐
20-24Yrs ☐
25-30Yrs ☐
Other: ☐

Country ***Region/Zone ***

North West ☐
North Central ☐
North East ☐
South West ☐
South Central ☐
South East ☐
Other:

State *

Anambra ☐
Benue ☐
Edo ☐
FCT Abuja ☐
Kaduna ☐
Kano ☐
Lagos ☐
Osun ☐
Oyo ☐

Akwa Ibom ☐
Rivers ☐
Sokoto ☐
Taraba ☐

Others:

Organization (If none write Nil) ***You identify as? ***

Adolescent and young people living with HIV (AYPLHIV) Orphans ☐
Young MSM ☐
Young Female Sex Worker ☐
Young People who use drugs ☐
Young LGBTQUIA ☐
AYPLHIV with disabilities ☐
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Young positive pregnant woman ☐
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Inability to go to school ☐

Difficulty to access SRHR service ☐

Difficulty in getting COVID-19 Personal Prevention Equipment (PPE) Facemask and Hand sanitizer ☐

Difficulty to continue work or run bussiness ☐

Other:



How meaningful or important will it be for you to receive the Social AID Support during the time of lock down? *

Less Important ☐

Very Important ☐

Other:

Comment

Any Comment or Suggestions



REFERENCE

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AFRICAN NETWORK OF ADOLESCENT AND
YOUNG PEOPLE NETWORK (ANAYD)