



## **DIVAF CORPORATE PROFILE**

### **Legal Status**

Registered with The Corporate Affairs Commission (RC. 14,855) on May 20<sup>th</sup>, 1998.

### **Historical Background**

DIVAF, an NGO, was founded in 1998 in response to the immediate situation analysis followed by health needs assessment of the communities. DIVAF's aim is to educate women and youths, empowering them to know their rights thereby complementing the efforts of governments and other organizations.

### **Mission**

Using professionals to create an enabling environment for women and youths through Reproductive Health and Sexuality Education.

### **Thematic Focus/Area of Specialization**

- Promoting the Rights of the Child;
- Health: Adolescent/Women's Reproductive Health & Sexuality Education;
- Youth Participation/Empowerment;
- Leadership, Life Training & Skills Acquisition;
- Gender-Specific Development Initiatives.

### **Service Type**

- Advocacy/Awareness Creation;
- Sensitization & Mobilization;
- Community Development;
- Policy Formulation;
- Capacity Building/Training.

### **Objectives**

- To develop women and children, especially girls through gender-specific initiatives;
- To promote the advancement of education and health care need of women and children;

- To initiate, Encourage and Support programmes/research that Improve and promote prevention and control of HIV/AIDS;
- To evaluate of Drug Therapy and Disease Management in children especially those Living in Orphanages and those living with HIV/AIDS.

### **Future Trends and Way Forward**

#### **(i) Short-Term Goals:**

- Monitor and Evaluate on-going Programmes as a means of Ensuring Compliance, and Performance;
- Consolidate Achievements/gains thus far;
- Establish Academy of Youth Against HIV/AIDS Initiative in every State of the Federation;
- Network with Reputable Organizations working on Reproductive Health & Sexuality Education and Gender-specific Issues.

#### **(ii) Medium-Term Goals:**

- Initiate and Develop Community Projects that Target Women and Youths, and Promote their Participation in the Management, Monitoring, Evaluation and Sustainability of such Projects;
- Train Mothers as Effective Care-Givers in Malaria;
- Train Mothers as Effective Care-Givers in HIV/AIDS;

#### **(iii) Long-Term Goals:**

- Ensure that both Short- and Medium-Term Goals are realised and Sustained;
- Reach the Unreached Women Farmers, Fisher-Women and Itinerant women traders.
- Overcome Health Challenges as they affect Women and Children.

### **Target Beneficiaries**

Women and Youths and Children in disadvantaged position and People Living With HIV/AIDS (PLWHA).

### **Geographical Coverage**

National and International

### **Branches**

Lagos State, Abuja, Sagamu (Ogun State), Ado-Ekiti (Ekiti State).

### **Organizational Strength**

Forty (40) members: ten (10) paid staff; six zonal co-ordinators and twenty four (24) volunteers.

### **Management Structure**

Seven member Board of Trustees; Board of Directors; Executive Director; Directors; Programme Managers and Project Coordinators.

### **Linkages/Affiliations/Partners**

Strong Tower Mission; Little Saints Orphanage; Health Systems Management Consultants Limited; UNICEF; Abidjan-Lagos Corridor Organization (ALCO); Swisspharma; National Association of Community Health Practitioners of Nigeria.

### **Sources of Funding**

Health Systems Management Consultants Limited; Donations by members: Board of Trustees; UNICEF.

### **Financial Management Systems**

Operates a bank account; Annual budget and reports prepared by the Executive Director, financial officer and accounting staff. Services of an external auditor are employed periodically.

### **Key Competencies Claimed**

Resource mobilization; IEC development; Project Management; Monitoring & Evaluation; Training, Capacity Building and Capability Strengthening.

### **Board of Trustees**

Dr. Kemi O. AILOJE, Chief Executive Officer and Founder  
Professor 'Fola TAYO , Chairman.  
Professor (Mrs) Ibironke AKINSETE;  
Professor 'Wale BALOGUN;  
Professor (Mrs) Mbang N. FEMI-OYEWO;  
Mr. Francis Olajide OGUNBANJO,  
Hon. Justice (Mrs) Ibitola SOTUMINU (Rtd).

## **DIVINE AMBASSADORS' FOUNDATION (DIVAF)**

We involve the beneficiary communities in the Planning, Implementation, Monitoring and Evaluation of projects making our expertise readily available for their use. Such community projects include:

- ***Malaria;***
- ***HIV/AIDS;***
- ***Vaccine Preventable Diseases;***
- ***Rational Use of Drugs : Patient Adherence (Compliance), Storage of Drugs at Home, etc.***
- ***Public Health Education;***
- ***Adolescent Reproductive Health and Sexuality Education;***
- ***Gender-Sensitive Initiatives.***

All Community-based trainings have local Capacity Building and Capability Strengthening as our major focus to ensure Sustainability of any particular project when the donor agencies leave.

Our outreaches include universities and polytechnics where we collaborate and encourage researches that are more community-oriented. We have been front-liners in our crusade to make researches more relevant to the needs of the nation. To this end, we help academic establishments to source for research funds locally and internationally.

In addition, we are in close contact with relevant healthcare industries. We help in establishing laboratories and Research and Development because it is our belief that no nation can advance without a viable Research and Development focus in its industries. Our team of consultants are eminent scientists and technologists who know and understand industry very well.

Our interaction with Herbal Medical and Traditional Medicine Practitioners has greatly helped our understanding of their operation. Based on this, we are acting as a bridge of understanding, communication and collaboration between them and orthodox practitioners. Some of their products are undergoing clinical trials as a result of our determined efforts to ensure that they are recognized and that our natural resources are used for the benefit of the people.

**SOME OF OUR COMMUNITY-BASED PROJECTS EXECUTED JOINTLY WITH OUR  
SISTER ORGANIZATION, HEALTH SYSTEMS MANAGEMENT CONSULTANTS  
LIMITED.**

**ANTI-HIV/AIDS CLUBS, BORDER-POST EXPERIENCES WITH COMMERCIAL SEX  
WORKERS (including University undergraduates on part-time week-end  
prostitution), IMMIGRATION & CUSTOMS OFFICIALS.**

**Anti-HIV/AIDS Clubs**

- In recent times, our organizations (Divine Ambassadors' Foundation and Health Systems Management Consultants Ltd) have invested much of our time, expertise and resources into the crusade against HIV/AIDS in particular among the youths and women who are usually seen as the under-privileged. This came out of a passion for these groups. In June 2003, we launched a sustainable Initiative called Academy of Youths Against HIV/AIDS (AYAHA) in a private Secondary School (Caleb International College in Magodo, Lagos) in which we trained and empowered the youths against HIV/AIDS through prevention of infection and control. Impact assessment after 3 months post-intervention showed that out 500 peer educators, 450 had taught and recruited an average of 6 each. After 6 months, the figures have increased. In addition, they are now able to communicate the message to their parents and their older siblings at home.
- In 2004 – 2005, DIVAF was commissioned by UNICEF to revitalize Anti-HIV/AIDS Clubs in 24 Unicef Child-Friendly Schools in 8 States of South-Western Nigeria. This we did by teaching and interacting with the kids successfully and impact assessment suggested increased awareness and great understanding of what to do and what not to do.
- Currently, our combined organizations were commissioned by UNICEF to conduct an Assessment of Knowledge, Understanding and Behavioural Change of Peer Educators in Reproductive Health Education and HIV/AIDS in Secondary School Students in Delta, Edo, Ondo and Lagos States involving 800 Students per State, i.e, a total of 3,200 Students. The ultimate aim is to do the assessment in all the Zones of the Federation, conduct a

quiz at the State level, and finally, a National competition before June 2005.

- Building the Capacity of Teachers in UNICEF Child Friendly Schools in Life Building, Conflict Resolution, Crisis Management, Negotiation and Refusal Skills in Lagos State in collaboration with Lagos State Primary Education Board (Nov. 2004).
- Training School Children in Lagos, Oyo and Ogun State Critical Thinking Skills (in collaboration with UNICEF) (Oct. 2004).
- Formation/Revitalization of Anti-HIV/AIDS Clubs in Primary Schools (UNICEF Child Friendly Schools) in Delta, Edo, Ekiti, Lagos, Ogun, Ondo, Osun & Oyo States (Apr – July, 2004).
- Capacity building of Provosts of Colleges of Education in Adolescent Reproductive Health with emphasis on HIV/AIDS (UNICEF-sponsored) (Jan. 2004).
- Empowerment of Mothers as First-line care-givers in Home-Based Malaria Treatment (2004).
- Capacity building of Community Health Practitioners in Malaria Therapy in 17 Local Govts. In Lagos State in collaboration with Swipha Pharma (2004).
- Development of HIV/AIDS & Reproductive Health Education Curriculum for Colleges of Education in the South-West Zone (UNICEF sponsored) (Oct/Nov. 2003).
- Collaborated with the Primary Health Care and Community Health Department of Lagos State University College of Medicine on training of medical students on HIV/AIDS and Support for PLWHA (2003).
- Community Participation in the Control of Spread of HIV/AIDS, Management and Support/Care for PLWHA (2001 – 2003).
- Orientation Training on HIV/AIDS, Malaria, Opportunistic Infections and Tuberculosis complications in the society (2003 on-going).
- Training of Auxiliary Health Workers and giving Information about Community and Behavioural habits (in collaboration with the National Association of Community Health Practitioners of Nigeria, Lagos State) (2002).
- De-worming exercise for the School age pupils of Amuwo-Odofin LGA of Lagos State in collaboration with Neimeth Pharmaceutical plc. and Network of NGOs (2002).
- Training of Market women on hygiene procedures in Breast-feeding and the exclusive breast-feeding methods (2002).

- Training of 30 selected child-bearing women on Safe Motherhood Reproductive Health (2002).
- Training of Market Women on enhancing Economic Capabilities from local skills, (mat making, large scale fish production, etc.) Poverty Alleviation & Women Empowerment (2002).
- Leadership and Personal Skill, Development and Management (2002 on-going).
- Peer Health Education on Adolescent Reproductive Health: A sustainable Initiative with emphasis on HIV/AIDS Prevention (2000 – on-going).
- Supports programmes/research that improve and promote awareness campaign on HIV/AIDS, STI, and Opportunistic Infections.
- Design and development of IEC materials on HIV/AIDS programmes at the Local Govt Area & State, Levels.
- Public Enlightenment Campaigns for HIV/AIDS programmes on Prevention and Control.
- Collaboration with Networks of NGOs in areas of health, National Programme on Immunization (NPI), Life water sanitation, Environment, Child rights, Nutrition, Women empowerment.
- Building the Capacity of Teachers in UNICEF Child Friendly Schools in Life Building, Conflict Resolution, Crisis Management, Negotiation and Refusal Skills in Lagos State in collaboration with Lagos State Primary Education Board (Nov. 2004).
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## **Border-Post Experiences**

### ***Inter/Intra Border Marketing:***

Our organizations have interacted through counseling with young women (undergraduates included) who usually travel through the border posts with no valid travel documents to buy some wares for re-sale and to purchase Ivorien braids for their hairs. Because most of them do not have valid travel documents, they seek favour of immigration, customs, NDLEA, and other security officials who usually would demand sex in exchange for official requirements.

### ***Human Trafficking:***

Often times, some of these “occasional” sex workers hang around with men who live in border towns who in turn expect gratification in sex and/or cash. Also when these young women cross to Benin Republic, it becomes relatively easier for them to cross into Europe (women trafficking). In the desperate bid to cross the border, they offer themselves for sexual exploitation. Such illicit sex is usually unprotected thereby exposing the partners to the risk of sexually transmitted infections especially HIV.

### ***Alcohol, Sex and Hard Drugs:***

In addition to all these, availability of alcohol and hard drugs at these border posts, predispose to irrational sexual behaviour.

### ***Homosexuality:***

Homosexuality is another major factor there because in most cases women officers are not posted to the village.

### ***Health Facility and Universal Precaution:***

Healthcare facilities may be inadequate or lacking in most of these border posts. Attacks by bandits and smugglers on officers may result in bleeding episodes and if universal precautions are not taken, this may lead to fresh infection and spread with other officers helping the injured colleague. Their HIV status may not be known and, in addition, anti-retroviral drugs may not be available, if available, they may not be accessible and/or affordable.

### ***Transient Immigration/Settlement:***

In addition, because most of these officers are on transient posting, and the big

markets are far away, they engage in pseudo-communal living in the bid to improvise for their immediate needs. For example, they may share razor blades for shaving, needles for sewing, clippers for barbing, etc, putting them at high risk of STIs and HIV infection.

Sometimes these male officers have surrogate wives at the border posts because they are far away from home. This continuous immigration will definitely encourage the spread of the virus and other STIs.

Long absence from home encourages loneliness and there is a natural desire to satisfy sexual feeling even in the absence of officer's spouse. Sexual intercourse with 'strange' partner(s) who may be infected already. The ease of spread of infection when officer returns home to his/her spouse without knowing s/he has been infected already since a period of about 3 or more months may elapse before infection manifests.

Male officers are often exposed to promiscuous women traders and smugglers who may want to offer sex for favour at a time such officers are away from home and are very vulnerable indeed.

### **Medical Waste Management**

Planning, implementing and managing medical waste along the Abidjan-Lagos Transport Corridor as Consultants to Abidjan-Lagos Corridor Organization (ALCO) in HIV/AIDS. This includes capacity building of healthcare professionals, community and youth leaders, people living with HIV/AIDS and others.