PATHFINDER

2025 ANNUAL REPORT

Expanding Equitable and Resilient Systems for Women, Adolescents, and Communities

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List of Abbreviations

Abbreviation	Full Meaning
ACEPHAP	Africa Centre of Excellence for Population Health and Policy
AIDS	Acquired Immune Deficiency Syndrome
AIM-MNCNH	Advocacy and Implementation of Maternal, Newborn, and Child Health and Nutrition Innovations
AOP	Annual Operational Plan
AYSRH	Adolescent and Youth Sexual and Reproductive Health
C4P	Cervical Cancer Prevention and Control Costing (WHO tool)
CARMNIS	Community Access to Reproductive, Maternal, Newborn, Child Health and Nutrition Innovations and Services
CBHW	Community-Based Health Worker
CCSI	Centre for Communication and Social Impact
CHEW	Community Health Extension Worker
CHIPS	Community Health Influencers, Promoters and Services
CHO	Community Health Officer
CHW	Community Health Worker
CLHFPA	Community Link for Health and Family Planning Advocacy
COVID-19	Coronavirus Disease 2019
DHIS2	District Health Information Software 2
DSN	Data Science Nigeria
FAHIO	Family Health Initiative Ogun
Fc2	Female Condom 2
FCT	Federal Capital Territory
FMoHSW	Federal Ministry of Health and Social Welfare
FP	Family Planning
GeoST4R	Geospatial Technology for Reproductive, Maternal, Newborn, and Child Health and Nutrition
GPS	Global Positioning System
HIV	Human Immunodeficiency Virus
HPV	Human Papillomavirus
IT	Information Technology
JCHEW	Junior Community Health Extension Worker
JHPIEGO	Johns Hopkins Program for International Education in Gynecology and Obstetrics
LGA	Local Government Area
M&E	Monitoring and Evaluation
MAMII	Maternal and Neonatal Mortality Reduction Innovation Initiative
MNCH	Maternal, Newborn, and Child Health
MNCNH	Maternal, Newborn, Child Health and Nutrition
MoU	Memorandum of Understanding
MWAN	Medical Women's Association of Nigeria
NACA	National Agency for the Control of AIDS
NDHS	Nigeria Demographic and Health Survey
NHSRII	National Health Sector Renewal and Investment Initiative
NPC	National Population Commission
NPHCDA	National Primary Health Care Development Agency
NFTI	Natview Foundation for Technology Innovation
PHC	Primary Health Care
PPD ARO	Partners in Population and Development, Africa Regional Office

Abbreviation	Full Meaning
PPFN	Planned Parenthood Federation of Nigeria
PPH	Postpartum Hemorrhage
PTA	Parent-Teachers Association
RMNCH	Reproductive, Maternal, Newborn, and Child Health
RMNCHN	Reproductive, Maternal, Newborn, Child Health and Nutrition
SASA	Smart Advocacy for Strategic Action
SRH	Sexual and Reproductive Health
SWAp	Sector-Wide Approach
TSTS	Task-Shifting Task-Sharing
ToR	Terms of Reference
TWG	Technical Working Group
UNICEF	United Nations Children's Fund
WHO	World Health Organization

Adolescent girls after a menstrual hygiene management session during the 2025 International Day of the Girl Child.

Message from Regional Portfolio Director, West and Central Africa

The year 2025 will be remembered as one of the most defining periods for the global development community. The abrupt cutoff of USAID funding at the beginning of the year disrupted health and development programs worldwide, placing immense pressure on organizations, governments, and the communities they serve. For Pathfinder Nigeria, it was a moment that demanded resilience, adaptability, and unwavering commitment to our mission.

Rather than allowing uncertainty to define us, we chose to respond with purpose. We strengthened existing partnerships, cultivated new ones, accelerated innovation, and remained focused on delivering meaningful impact for women, adolescents, and families across Nigeria.

Working alongside government partners, communities, frontline health workers, donors, and young people, we continued to strengthen health systems and expand access to quality, integrated care.

From training more than 1,590 health workers to deliver integrated health services, to empowering adolescents in urban Abuja with life skills and economic opportunities, to transforming reproductive, maternal, newborn, child health, and nutrition microplanning in Kano State through AI enabled geospatial technology, this report demonstrates what is possible when local leadership, evidence, and innovation come together.

This year also marked an exciting new chapter for Pathfinder Nigeria as we launched Women&Co, Pathfinder's global social innovation engine. Designed to accelerate bold, locally led solutions for women and girls, Women&Co creates space for collaboration across sectors, unlocks new approaches to persistent challenges, and advances innovations that strengthen health, economic opportunity, and climate resilience. Its launch reflects our belief that sustainable change is driven by local innovators and the communities closest to the challenges.

Our commitment to advocacy also delivered meaningful results. HPV vaccination coverage targets were exceeded in Lagos, Kaduna, and Kano States. National funding for family planning commodities was secured, reinforcing Nigeria's commitment to reproductive health. Across 16 states, governments are integrating reproductive, maternal, newborn, child health, and nutrition innovations into their operational plans, ensuring that proven approaches become institutionalized within public systems.

None of these achievements would have been possible without the dedication of our staff, the leadership of our government counterparts, the collaboration of our partners, and the trust of the communities we serve. Together, we proved that while funding landscapes may change, our commitment to improving lives remains unwavering.

As we look to the future, we do so with confidence, knowing that resilience, innovation, and partnership will continue to guide our work. We remain steadfast in our mission to build stronger health systems, expand opportunities for women and young people, and ensure that every community has the chance to thrive.

Thank you for your partnership and for believing in the power of locally driven, sustainable change.

With gratitude,

Dr. Amina Aminu Dorayi
Regional Portfolio Director,
West and Central Africa

About Pathfinder International Nigeria

Since 1965, Pathfinder Nigeria has worked to expand access to equitable and resilient health systems that enable women, adolescents, and communities to thrive. Our work integrates health, digital innovation, and climate-responsive solutions across 20 states.

Our Vision

A world that values and invests in leadership, health, and resilience for women and girls.

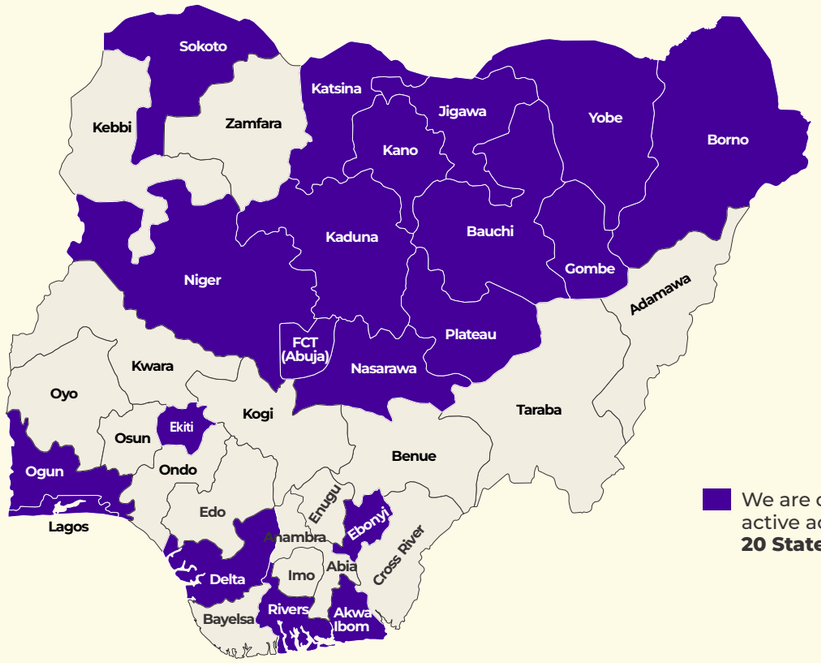
Our Mission

We catalyze women-led, locally grounded solutions that strengthen communities and enable women to navigate change, shape their own futures, and lead healthy lives.

THEMATIC FOCUS AREAS

- Maternal, Newborn, & Child Health
- Climate & Health
- Health Systems Strengthening
- Adolescents & Youth
- Advocacy & Policy
- Digital Health Innovations

OUR REACH IN 2025



We are currently active across **20 States** in Nigeria

2025 at a Glance

A snapshot of our reach, workforce investments, system-level change, and digital impact across Nigeria.

20 States + FCT Reached	**1,590+** Health Workers Trained	**1.1M+** Digital Campaign Users	**196%** HPV Vaccination Coverage in Nasarawa
222 Primary Health Care (PHC) Facilities Strengthened	**552** Unmapped Settlements Found	**4** Grants Awards	

REACH AND IMPACT IN NUMBERS

148,648
girls vaccinated across Ogun and Nasarawa States

600,780+
girls vaccinated across Lagos, Kaduna, and Kano States

$3.75M
secured nationally for family planning commodities

222
Community health extension workers and junior extension workers trained and mentored in delivering healthcare services in Kaduna and Kano

46
adolescents reached through peer mentorship in FCT, with SRH knowledge rising from 66% to 94%

196
maternal, newborn, and child health and nutrition champions identified and trained across 14 states

58.7M+
people reached with HPV messages through coordinated radio, TV, and digital media

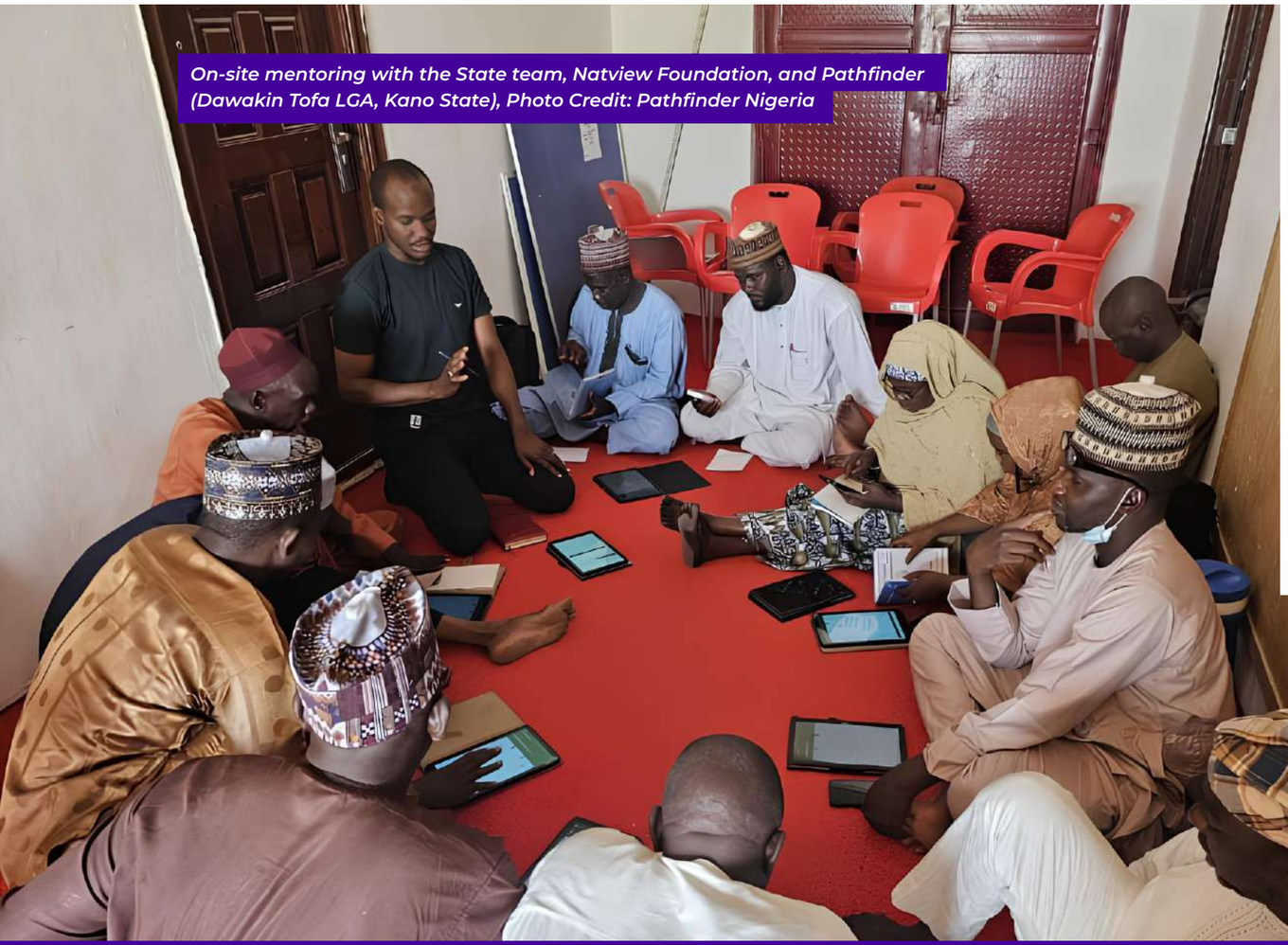
RECOGNITION

Gates Foundation Awards for Program Excellence
* Accountability and Reporting Excellence Award
* Collaboration and Joint Action Award

School-aged girls in Wamba Community, Nasarawa State, during an HPV vaccine outreach as part of the HPV Champions and Advocacy Engagement.

Data-Driven Health Systems and Decision-Making

Reliable data is the foundation of effective health planning. In Nigeria, fragmented information systems and paper-based microplanning have limited the government's ability to identify underserved communities and allocate resources efficiently. To bridge this gap, Pathfinder Nigeria supported federal and state governments to transform this through geospatial mapping, predictive modeling, and integrated data systems.



On-site mentoring with the State team, Natview Foundation, and Pathfinder (Dawakin Tofa LGA, Kano State), Photo Credit: Pathfinder Nigeria

GeoST4R: Geospatial Technology for Reproductive, Maternal, Newborn, and Child Health and Nutrition (RMNCHN) Microplanning

Funder: **Gates Foundation**

Lead: **Pathfinder Nigeria**

Intervention Area: **Digital Health Innovation**

Partners: **Natview Foundation for Technology Innovation** and **Data Science Nigeria**

THE DATA GAP

Despite decades of intervention, Nigeria continues to face critical challenges in maternal and child health, ranking among the highest globally for maternal mortality and under-five deaths.[1] In many priority local government area (LGAs), paper-based planning resulted in uncounted, unreached, and underserved communities. In Kano and Kaduna, conventional data systems could not answer basic questions, including: Where exactly do people live? Which health facilities can serve them? Where are the zero-dose children?

Building on successful geospatial approaches previously applied in Polio and COVID-19 microplanning, the project piloted its approach across nine Local Government Areas (LGAs) in Kano and Kaduna States before scaling implementation across Kano State's 15 priority zero-dose LGAs, engaging 170 wards and 497 health facilities. From April 2024 to March 2025, GeoST4R implemented a structured pilot to test the completeness of datasets, functionality of digital tools, and effectiveness of governance structures, combining field testing, document reviews, stakeholder consultations, and verification exercises before scale-up. Over a 12-month period, GeoST4R transitioned from the pilot phase to full-scale implementation across 15 priority zero-dose LGAs in Kano State.

[1] Oweibia, M., Elemuwa, C. O., Egberipou, T., Timighe, G. C., Sylvanus, P., & Wilson, T. R. (2025). Matenal and child health trends in Nigeria: A scoping review of NDHS 2018 vs. NDHS 2023 (medRxiv r2025.05.18.25327864) [Preprint]. medRxiv. https://doi.org/10.1101/2025.05.18.25327864

BUILDING A DIGITAL ECOSYSTEM FOR HEALTH DATA

Through the GeoST4R initiative, Pathfinder Nigeria and partners deployed a four-pillar digital ecosystem replacing fragmented planning with real-time actionable intelligence across 15 priority zero-dose LGAs in Kano State:

- **Geospatial Mapping Toolkit:** Defines accurate catchment areas and Reach Every Ward strategies, provides precise population estimates, and continuously validates digital settlement maps
- **Decision Support Dashboard:** A multi-interactive platform aggregating operational data, allowing stakeholders to visualize maternal and child health indicators, identify clusters of home births, and target resources with surgical precision.
- **Mobile Chatbot:** A real-time digital assistant providing healthcare workers with on-the-go clinical and administrative support.
- **Master Settlement Registry:** The state's definitive, harmonized database for all recognized settlements, geo-fenced and tagged with population estimates, that prevents the loss of settlements across planning cycles.

> ***"The Decision Support Dashboard has changed how we look at our state. We no longer guess where the gaps are; we can see them on the map and move our teams accordingly."***
> — State Ministry of Health Representative, Kano

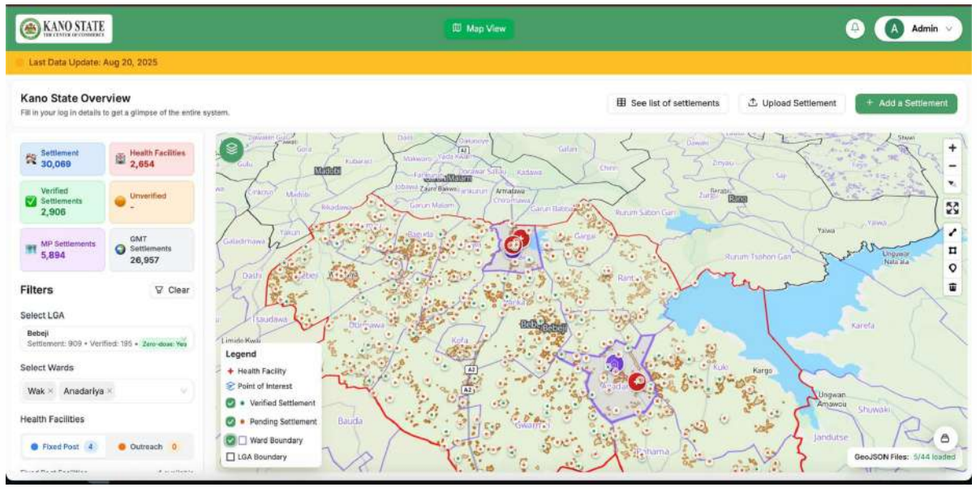


Figure 1: Kano State's Master Settlement Registry dashboard overview of settlement and facility counts

INSTITUTIONALIZING STATE OWNERSHIP

Institutionalizing State Ownership Pathfinder supported Kano State to establish a governance framework with State Steering and Technical Governance Committees, ensuring GeoST4R is sustainably managed as a government-owned digital public good beyond project implementation.

IMPACT

Now, these tools are integrated into the Kano State health data system, and government IT teams manage the dashboards. Previously underserved communities are now included in routine health planning and outreach services. The transition from guessing to knowing represents a structural change in how the state manages its own health priorities.

552 Previously unmapped settlements identified in priority LGAs

15 Zero-dose LGAs with live digital planning tools

2 Pilot states, with full implementation in Kano State

100% State-owned: Government IT teams now managing dashboards

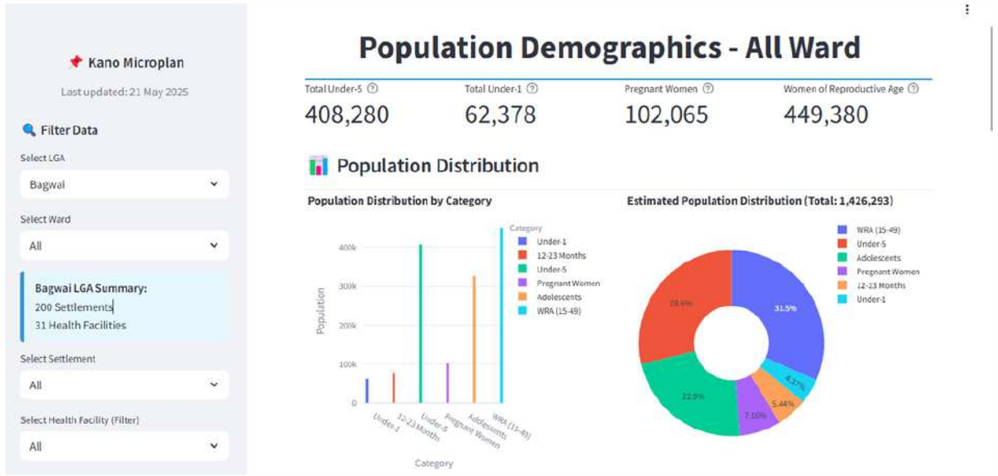


Figure 2: The population demographics view by ward for Kano State in the Decision Support Dashboard

Quantium: Modeling for Cervical Cancer Prevention

Funder: **Gates Foundation**

Lead: **Pathfinder Nigeria**

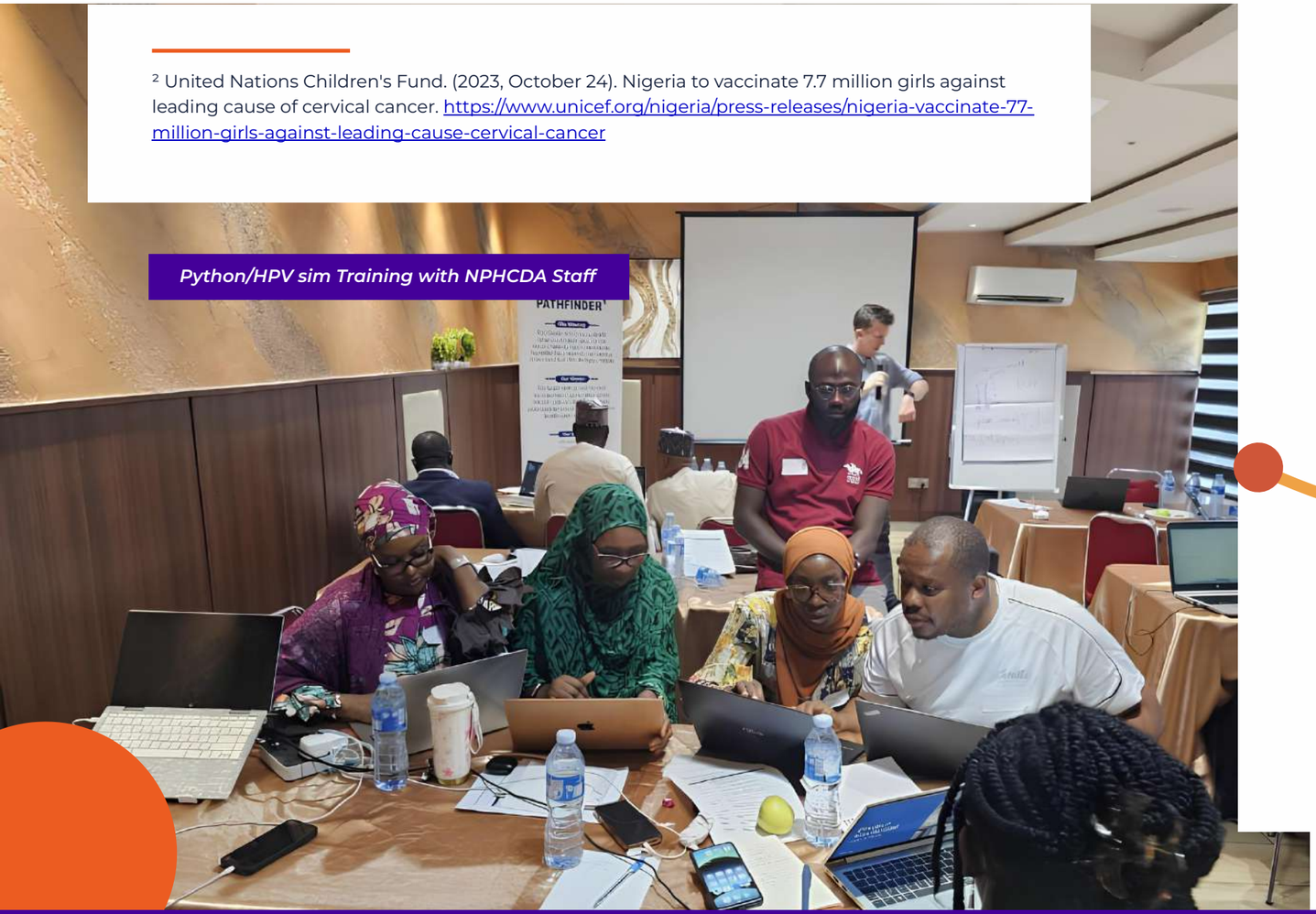
Intervention Area: **HPV Modelling**

Partner: **Quantium Health**

THE DATA GAP

Cervical cancer remains a leading cause of mortality among Nigerian women[2], yet the path to elimination has been obscured by fragmented, siloed data. Without granular, ward-level analysis, national averages masked critical gaps in HPV vaccine coverage, and policymakers lacked tools to understand the long-term impact of current versus alternative strategies.

[2] United Nations Children's Fund. (2023, October 24). Nigeria to vaccinate 7.7 million girls against leading cause of cervical cancer. https://www.unicef.org/nigeria/press-releases/nigeria-vaccinate-77-million-girls-against-leading-cause-cervical-cancer



Python/HPV sim Training with NPHCDA Staff

A NEW KIND OF PARTNERSHIP FOR CERVICAL CANCER ELIMINATION

Led by Quantium Health South Africa in collaboration with Pathfinder Nigeria, the University of Dar es Salaam, and the National Cancer Registry in South Africa, the project deployed sophisticated modeling tools (HPVsim and the WHO C4P tool) to provide Nigeria with a GPS for cervical cancer elimination.

Pathfinder serves as the critical link between technical modeling and health policy. Key activities included:

- Convening a broad national coalition, including the National PHC Development Agency, National Cancer Control Program, state PHC boards, international NGOs, and academic institutions.
- Leading DHIS2 data harmonization across tertiary hospitals and private
- implementers to ensure high-quality, validated model inputs.
- Developing an interactive HPV Coverage Dashboard that visualizes LGA-level performance (red/green mapping) and compares fixed-post strategies (clinics) versus outreach strategies (mobile team).
- Using HPVsim to simulate 10-, 20-, and 30-year impacts of current vaccination rates moving from 'how many vaccines were given' to 'how many lives will be saved'.
- Building institutional capacity for long-term sustainability by training government analysts in Python to manage models locally. Full handover of the dashboard and modeling infrastructure targeted for 2027.

IMPACT

- **National data consolidated and stakeholder buy-in secured.**
- **HPV Coverage Dashboard functional**
- **Strategic insights from models developed and shared with national stakeholders**
- **Capacity transfer program underway.**

Advancing Policy, Advocacy, and Institutional Change

Sustainable improvements in health outcomes require strong policies, adequate financing, and accountability mechanisms. Pathfinder Nigeria supported advocacy coalitions, trained champions, and facilitated high-level engagements that strengthened political commitment to maternal, newborn, and adolescent health across Nigeria.

HPV vaccine outreach at Wamba LGA of Nasarawa state

Enhancing HPV Awareness and Uptake & HPV Champions and Advocacy Engagement

Funder: **Gates Foundation**

Lead: **Pathfinder Nigeria**

Intervention Area: **HPV**

Partners: **Family Health Initiative Ogun (FAHIO)** and **Community Link for Health and Family Planning Advocacy (CLHFPA)**

FIVE BARRIERS TO HPV UPTAKE

Despite Nigeria's integration of the HPV vaccine into the routine immunization schedule, uptake remains uneven. Five interconnected barriers persist:

1. Low awareness and misinformation among caregivers and gatekeepers

2. Weak integration of HPV vaccination into routine immunization systems

3. Institutional ownership gaps at state and LGA levels

4. Limited monitoring due to weak health information systems

5. Low community trust, indicating a need for engagement of traditional and religious leaders.

A MULTI-LEVEL, COMMUNITY-LED SOLUTION

Pathfinder Nigeria implemented two complementary HPV-focused interventions to strengthen awareness, advocacy, and vaccine uptake across five states. The Enhancing HPV Awareness and Uptake Project was implemented in Lagos, Kaduna, and Kano States, while the HPV Champions and Advocacy Engagement Project was implemented in Ogun and Nasarawa States.

Together, these initiatives employed a multi-level strategy combining policy engagement, champion development, community-based norm change, and demand generation to improve HPV vaccine acceptance and uptake:

- Trained 26 HPV Champions and 6 super champions, including traditional leaders, religious leaders, and community influencers across 2 states.
- Conducted 52 high-level advocacy visits to government officials, media partners, religious groups, and traditional leaders.
- Held 17 media engagements, 18 radio programs, and 3 TV programs
- Distributed 2,000 fliers and 1,000
- HPV sermon guides for Muslim and Christian leaders.
- Established 7 partnerships in Ogun State and 11 in Nasarawa State, spanning Ministries of Health and Education, media, faith-based organizations, implementing partners, and Parent-Teachers Associations (PTA).
- Conducted 89 community and school sensitization sessions reaching 23,119 people.
- Trained 47 journalists and health producers on HPV advocacy.

A vaccinator administers the HPV vaccine to eligible girls in Wamba Community, Nasarawa State, during an HPV vaccine outreach as part of the HPV Champions and Advocacy Engagement. Nigeria, 2025. (Photo: Bayo Ewuola)

IMPACT

Lagos, Kaduna, and Kano States

181,586
girls vaccinated in Lagos State — 136% of annual target

186,002
girls vaccinated in Kaduna State — 174% of annual target

233,262
girls vaccinated in Kano State — 120% of annual target

5M+
people reached through media campaigns in Ogun and Nasarawa States

Ogun and Nasarawa

70,102
girls vaccinated in Ogun State — achieving 100% of the annual target

78,348
girls vaccinated in Nasarawa State — achieving 196% of the annual target

Across all implementation states, HPV interventions have strengthened awareness and confidence in the HPV vaccine through sustained community engagement, stakeholder advocacy, and demand generation activities. These efforts contributed to reducing vaccine hesitancy, increasing uptake among eligible girls, and prioritizing HPV vaccination within routine immunization programs.

SASA: Smart Advocacy for Strategic Action

Funder: **Gates Foundation**

Lead: **Population and Development Africa Regional Office (PPD ARO) Uganda**

Intervention Area: **FP and MNH**

Partners: **JHPIEGO Kenya, Pathfinder Nigeria**

AN ACCOUNTABILITY MECHANISM FOR FAMILY PLANNING (FP) AND MATERNAL, NEWBORN, AND CHILD HEALTH (MNCH) COMMITMENTS

The SASA Advocacy Initiative strengthened the capacity of local partners, civil society organizations, and non-traditional champions to design evidence-based advocacy strategies and hold decision-makers accountable for FP/MNCH commitments in Kano, Kaduna, and Lagos States.

SASA Launch Photo.

ACHIEVEMENTS

- Led two comprehensive SMART Advocacy capacity-building trainings for 50+ participants including non-traditional champions, local implementing partners, and media storytellers.
- Supported three functional advocacy coalitions: Kaduna Maternal Accountability Mechanism, Public Health Sustainable Advocacy Initiative, and Kano State Accountability Mechanism to improve coordination, leading to more unified advocacy efforts.
- Radio programs reached 1.8 million listeners (Express Radio Kano alone).
- Secured public statements from the National President, National Union of Journalists and Lagos State Special Adviser on Health to the Governor to ensure media use their platforms to seek for accountability from the government, and follow up to see that approved memo are backed up with fund releases for FP and MNCH commodities and services, respectively. Lagos State approved 4 pending FP/MNCH memos following high-level advocacy engagements.

IMPACT

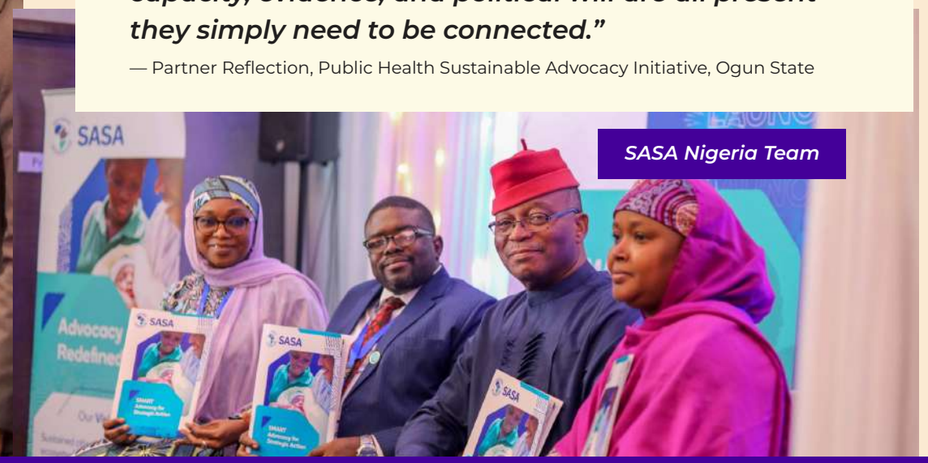
$3.75M secured for family planning commodities across the 2024 and 2025 national budgets

1.8 M Listeners reached through Radio programs (Express Radio Kano)

45 published journal articles, 75% of which focused on FP/MNCH

"SASA's advocacy efforts demonstrate that local capacity, evidence, and political will are all present — they simply need to be connected."

— Partner Reflection, Public Health Sustainable Advocacy Initiative, Ogun State



SASA Nigeria Team

AIM-MNCNH: Advocacy and Implementation of Maternal, Newborn, and Child Health and Nutrition (MNCNH) Innovations

Funder: **Gates Foundation**

Lead: **ACEPHAP (Africa Centre of Excellence for Population Health and Policy**

Intervention Area: **MNCNH**

Partners: **ACEPHAP, Centre for Communication and Social Impact (CCSI), Medical Women's Association of Nigeria (MWAN)**

BEYOND SERVICE DELIVERY

The AIM-MNCNH project is transforming the institutional landscape for maternal, newborn, and child health in Nigeria by integrating community-led advocacy into the core of the health systems across 16 states. Rather than temporary service delivery, the project builds a cadre of champions who can influence policy, drive demand, and ensure lasting institutional accountability.

The Honourable Commissioner of Health, Dr. Faruk Umar, during the SMART advocacy training for the Maternal, Newborn and Child Health Innovations project in Sokoto State

BUILDING A CADRE OF CHAMPIONS

- Identified and built capacity of AIM-MNCNH Champions across 16 states with formalized Terms of Reference. Champions were selected from the government, academia, media, and non-governmental sectors.
- Delivered two-phased SMART Advocacy training across Kano, Kaduna, Lagos, Bauchi, Gombe, Yobe, Plateau, Borno, Nasarawa, Ebonyi, and Rivers States.
- Produced state-specific advocacy briefs, action plans, and situation analyses enabling Champions to engage policymakers with data-driven, tailored solutions.
- Engaged religious leaders in Bauchi, Rivers, Nasarawa, and Plateau States to integrate MNCNH messaging into sermons, reaching thousands at household level.
- Maintained sustained engagement with Sector-Wide Approach (SWAp) Desk Officers, Health Sector Coordination, MAMII Technical Working Group (TWG), and Sexual and Reproductive Health (SRH) TWG platforms.

IMPACT

- E-MOTIVE bundle included in state Annual Operation Plans in Plateau State.
- Policy timelines and accountability mechanisms defined for maternal health in Borno State.
- Community-level institutional structures addressing care-seeking barriers established in Nasarawa State.
- High-impact practices and MNCH best buys integrated into Kaduna's Annual Operation Plans.

196
advocacy champions identified across 14 states

129
champions trained across 7 states, with remaining states underway

Accelerating the Expanded Adoption of RMNCH Innovations and Health Reforms

Funder: **Gates Foundation**

Lead: **TA Connect**

Intervention Area: **RMNCH**

Partners: **Pathfinder, ACEPHAP**

MEETING THE MATERNAL HEALTH NEEDS OF BORNO STATE

Postpartum hemorrhage (PPH) remains the leading cause of maternal mortality in Nigeria. In Borno State, clinical practices were inconsistent across facilities, limited by inadequate PPH supplies and equipment, weak data use, fragmented coordination, and gaps in skilled human resources. These constraints prevented standardized, evidence-based PPH management from taking hold at scale.

Hands-on skills demonstration during State Training of Trainers session

STRENGTHENING HEALTH SYSTEM CAPACITY FOR MANAGING PPH

- Convened joint maternal and newborn health (MNH) stakeholder and co-creation workshops producing a state-endorsed scale-up workplan implemented across 90 PHC facilities and secondary facilities.
- Established a hub-and-spoke referral model linking PHC facilities (spokes) with secondary referral hospitals (hubs), embedding structured cross-level mentorship.
- Led State Training of Trainers producing master trainers, with Low-Dose High-Frequency cascade trainings reaching frontline providers across 18 LGAs.
- Established 100 PPH skill stations for continuous simulation practice, with master trainers serving as ongoing technical resources.
- Advocated successfully for integration of essential PPH supplies and equipment (heat-stable carbetocin, tranexamic acid, misoprostol, calibrated drapes, and oxytocin) into state procurement systems.
- Reactivated Maternal Perinatal and Child Death Surveillance and Response systems and strengthened MNH data tools and DHIS2 reporting.
- Secured integration of MNH and PPH priorities into the 2025-2026 Annual Operational Plans.

> ***"We appreciate Pathfinder International for supporting our health workers with the skills and tools needed to save mothers' lives. This effort will contribute significantly to reducing maternal deaths in our communities."***
>
> — Chairman, Kwaya Kusar LGA, Borno State

IMPACT

- 100+ frontline healthcare workers reached through training with measurable gains in knowledge, confidence, and clinical competencies in PPH management.
- Facilities better equipped with essential PPH supplies and equipment, improving emergency readiness.
- Strengthened data systems, improving MNH reporting and coordination.
- Southern Borno cluster training completed, ensuring equitable geographic coverage.
- High-level political endorsement secured from Local Government Chairmen — a key driver of long-term sustainability.

Director PHC Biu LGA, Christopher Markus, giving an opening remark during the PHC PPH training in Southern Borno

Strengthening Primary Health Care and Community Systems

Strengthened PHC is the backbone of Nigeria's health system. Pathfinder Nigeria supported large-scale workforce training and task-shifting initiatives that expanded the scope and quality of PHC services, reaching communities in Kaduna, Kano, Ekiti, Akwa Ibom, and Borno States.

Mentee Gift Timothy of Tachira PHC provides essential newborn care immediately following a safe delivery.

Task-Shifting Task-Sharing (TSTS): Kaduna and Kano States

Funder: **Gates Foundation**

Lead: **Pathfinder Nigeria**

Intervention Area: **Health Systems Strengthening**

Partner: **Impact Catalysts**

THE WORKFORCE GAP

Nigeria has only 1.83 health professionals per 1,000 people [3], a shortage more pronounced in rural and underserved areas, including those Kaduna and Kano where Community Health Extension Workers (CHEWs) are the major health care providers. Baseline assessments across 222 PHC facilities revealed that while 84% of facilities reported task-shifting, less than 40% of providers had received relevant training. This resulted in quality, safety, and accountability gaps that limited the system's ability to deliver consistent, evidence-based care.

[3] **Yakubu, K., et al. (2023).** *Scope of health worker migration governance and its impact on emigration of skilled health workers from Nigeria.* Human Resources for Health.

TSTS Mentor-mentee checking of service delivery data quality entries

TOWARD INSTITUTIONALIZING TSTS

In collaboration with Impact Catalysts and with support from the Gates Foundation, Pathfinder is implementing a two-year TSTS initiative (2024-2026). Working with State Ministries of Health, PHC Development Agencies, and LGAs, the project:

- Domesticated the national TSTS policy into costed, state-owned implementation frameworks with defined scopes of practice, supervision structures, and financing pathways.
- Trained 222 CHEWs and Junior Community Health Extension Workers (JCHEWs) across 222 PHCs in antenatal care complication management, PPH prevention and management, and newborn resuscitation by combining classroom learning, simulation, and supervised clinical practice.
- Deployed 35 clinical mentors and 35 monitoring and evaluation (M&E) officers to provide ongoing supervision, real-time feedback, and data accountability.
- Embedded a structured performance-based mentorship model with monthly coaching, case reviews, and register validation against DHIS2.
- Distributed standardized clinical job aids to support adherence to national guidelines and improve service delivery.

IMPACT

- Providers now demonstrate improved competence in managing antenatal complications, PPH, and newborn resuscitation.
- Cases previously requiring referral are increasingly stabilized and managed at PHC level.
- CHEWs now managing normal deliveries, postpartum family planning, immunization, and integrated PHC services in a structured, supervised way.
- Real-time data validation during facility visits helps facilities see how documentation gaps affect reported performance.

222
PHC facilities strengthened

222
CHEWs/JCHEWs upskilled

35
Clinical mentors deployed

35
M&E officers strengthened

> ***"Before TSTS, we were afraid to provide some services because we were not sure if it was allowed. Now, with clear task-sharing guidance, we know what we can do, and management supports us to perform those roles confidently."***
> — CHEW Trainee, Kaduna

PHOTO CREDIT:

***L:** At PHC Maigero, mentee Patience Bala monitors an infant's growth during a routine immunization visit and provides nutrition counseling to the mother.*

***R:** Trained mentee Hadiza Abdullahi of Mando PHC demonstrates postpartum hemorrhage (PPH) management using the EMOTIVE Bundle Action Plan while her mentor observes.*

Refresher Training for Frontline Health Workers: Ekiti and Akwa Ibom

Funder: **NPHCDA**

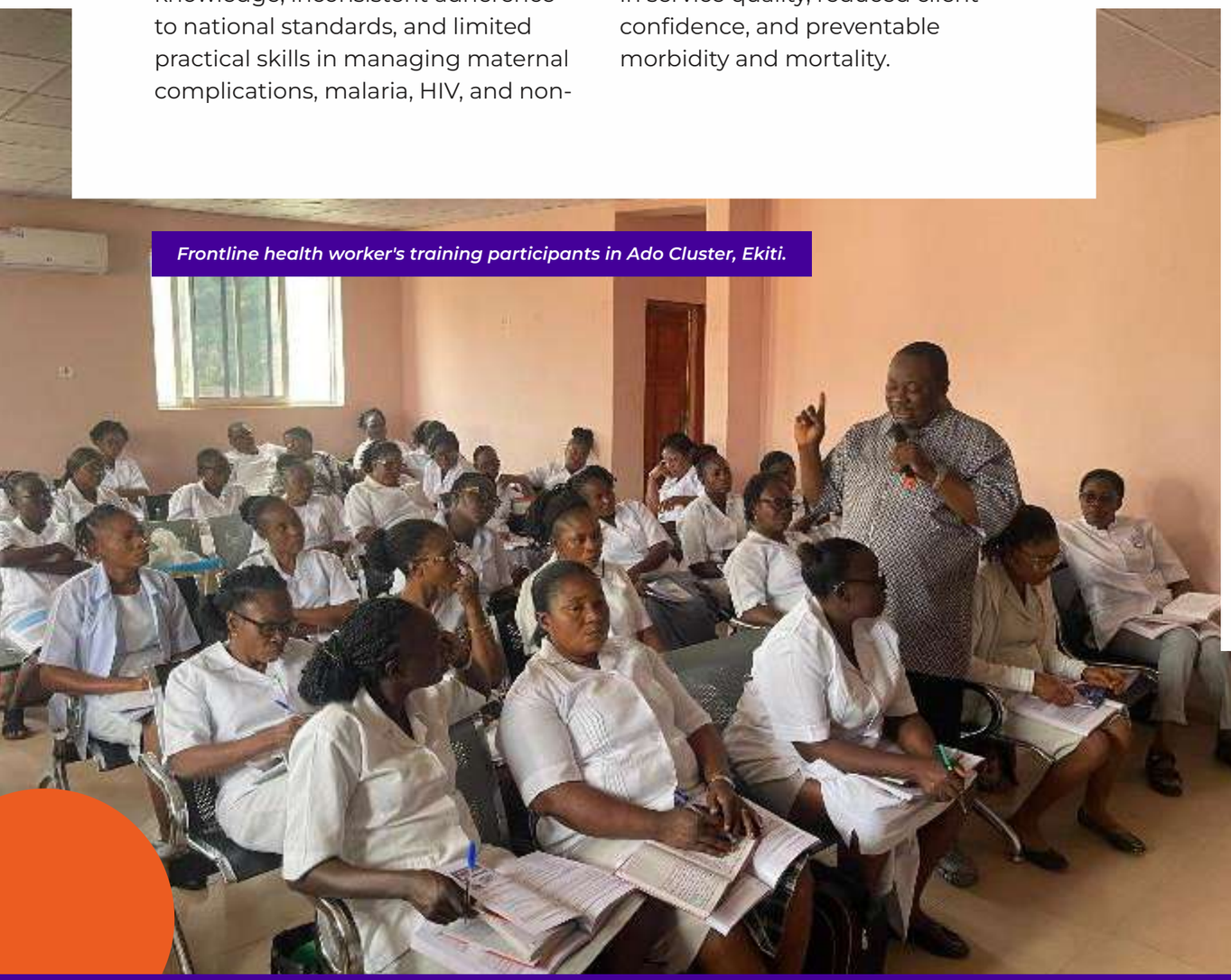
Lead: **Pathfinder Nigeria**

Intervention Area: **Human Resource for Health**

Partner: **N/A**

THE WORKFORCE GAP

PHC facilities across Nigeria face persistent gaps in frontline workforce capacity. Outdated clinical knowledge, inconsistent adherence to national standards, and limited practical skills in managing maternal complications, malaria, HIV, and non-communicable diseases affect service delivery and quality of care. These gaps contribute to variability in service quality, reduced client confidence, and preventable morbidity and mortality.



Frontline health worker's training participants in Ado Cluster, Ekiti.

STRENGTHENING PROVIDER CAPACITY THROUGH HANDS-ON TRAINING

Pathfinder supported the facilitation and quality oversight of large-scale refresher trainings in Ekiti and Akwa Ibom States, aligned with the Federal Ministry of Health and Social Welfare's Renewed Health Sector Vision (2023-2026) and the National Health Sector Renewal and Investment Initiative (NHSRII) led by the National Primary Health Care Development Agency (NPHCDA).

The 13-day training model combined refresher and specialized modules across maternal and newborn health (PPH management), malaria case management, HIV prevention and care, adolescent and reproductive health, non-communicable disease management, nutrition, water, sanitation and hygiene, and data management.

Participants included doctors, nurses, midwives, Community Health Officers (CHOs), CHEWs, and JCHEWs. Pre- and post-training assessments confirmed significant knowledge gains, improved confidence in managing clinical cases, correction of outdated practices, and strengthened delivery of patient-centered, integrated care.

IMPACT

800 frontline health workers trained across all 16 LGAs of Ekiti State

465 frontline health workers trained across all 31 LGAs of Akwa Ibom State

Labor tray evaluation by participant during practicals.

Cross section of Frontline Health Workers Participants at Ido, Ekiti.

CARMNIS: Laying the Foundations of Nigeria's Redesigned Community Health System

Funder: **Gates Foundation**

Lead: **Pathfinder Nigeria**

Intervention Area: **Human Resource for Health & Service Delivery**

Partner: **Impact Catalysts**

ADDRESSING COMMUNITIES' LOW TRUST IN HEALTH SYSTEMS

Despite decades of community health programs in Nigeria, the gap between communities and the formal health system remains wide[4]. The 2023/24 NDHS showed that 59% of deliveries nationally still occur outside health facilities, reaching 74% in Kaduna and 67% in Kano[5]. Skilled birth attendance has barely improved between 2018 and 2024, and zero-dose children have increased sharply from 19% to 31% of children nationally[6]. Previous community health programs, including the government's CHIPS initiative, stalled due to fragmented financing, weak supervision, and lack of state ownership. The redesigned national Community-Based Health Worker (CBHW) model led by NPHCDA and aligned with NHSRII provides the policy foundation to do this differently. CARMNIS is how Pathfinder is operationalizing that vision.

[4] Ozor, O., Etiaba, E., & Onwujekwe, O. (2024). Strengthening the effectiveness of community health system: Assessing the factors that enhance or constrain the delivery of health services within communities in Nigeria. Health Research Policy and Systems, 22, 124

[5] Federal Ministry of Health and Social Welfare (FMoHSW), National Population Commission (NPC) [Nigeria], & ICF. (2025). Nigeria Demographic and Health Survey 2024. Abuja, Nigeria, and Rockville, MD, USA: FMoHSW, NPC, and ICF.

[6] Federal Ministry of Budget and Economic Planning & United Nations Children's Fund (UNICEF). (2024). The State of Nigeria's Children 2024: Summary of the Updated Situation Analysis of Children and Adolescents in Nigeria. UNICEF Nigeria.

INSTITUTIONALIZING COMMUNITY-BASED HEALTH SYSTEMS

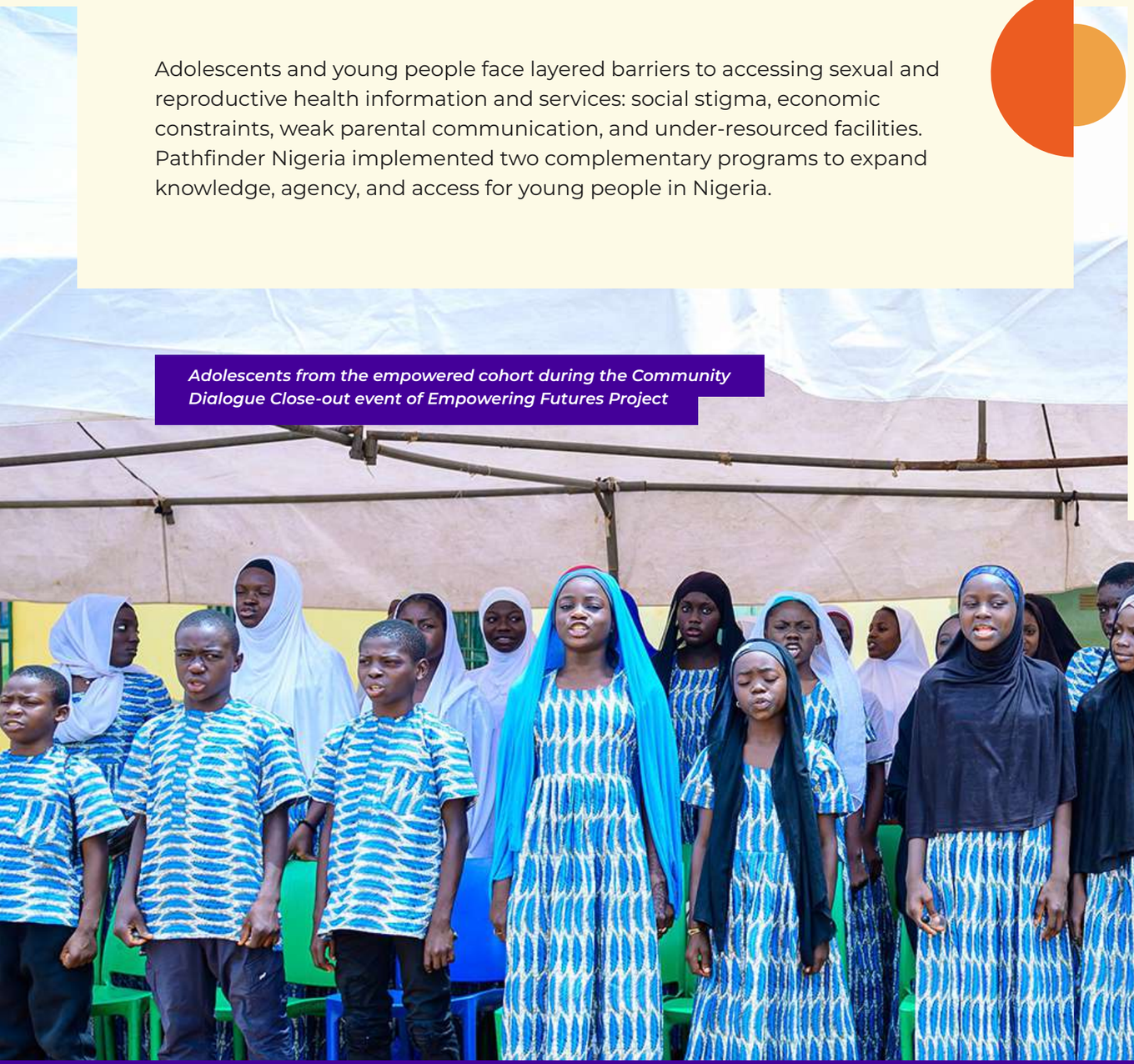
CARMNIS is state-led program with a blended financing model with a four-year pathway to full state ownership. The model deploys almost 2000 CBHWs across the four states, with a focus on the wards with the highest maternal and child mortality burden. Through CARMINIS, each supported ward receives trained CBHWs, digital decision-support tools, Ward Development Committee oversight, referral dashboards, and community scorecards.

> ***"The redesigned Community Health Worker (CHW) model strongly recommends a focus on contextualization and subnational government ownership in the adoption and roll-out in a way that takes cognizance of state-to-state peculiarities, including health system maturity, service utilization patterns, fiscal space, and political will."***
>
> — NPHCDA, Redesigned National Community Health Worker Program Framework, 2024

> ***"Unlike past initiatives that stalled due to over-reliance on donor financing or lack of government absorption, CARMNIS explicitly ties sustainability to localization, fiscal realism, and state ownership — leaving behind a professionalized, state-financed, community-accountable CHW system."***
>
> — CARMNIS Program Design, 2025

Enabling Informed Choice for Adolescents and Young People

Adolescents and young people face layered barriers to accessing sexual and reproductive health information and services: social stigma, economic constraints, weak parental communication, and under-resourced facilities. Pathfinder Nigeria implemented two complementary programs to expand knowledge, agency, and access for young people in Nigeria.



Adolescents from the empowered cohort during the Community Dialogue Close-out event of Empowering Futures Project

Empowering Futures: Community Systems for Adolescents and Youth

Funder: **Organon**

Lead: **Pathfinder**

Intervention Area: **AYSRH**

Partner: **N/A**

YOUNG PEOPLE'S BARRIERS TO SOCIAL AND ECONOMIC INCLUSION

Adolescents in urban settings like Gwarimpa, FCT, face intersecting informational, social, and economic barriers. Many lack access to accurate, age-appropriate SRH information, with misconceptions persisting around menstruation, contraception, and sexually transmitted infections[7]. Social norms discourage open discussion, especially for girls. Economic constraints restrict access to sanitary products and healthcare, increasing vulnerability to transactional sex and early marriage.

Building on Empowering Futures 1.0 and 2.0, Pathfinder, in partnership with the PHC Board, reached adolescents and young people with sexual and reproductive health information, referrals to health facilities, and vocational training.

[7] Wado, Y.D., Bangha, M., Kabiru, C.W. et al. Nature of, and responses to key sexual and reproductive health challenges for adolescents in urban slums in sub-Saharan Africa: a scoping review. Reprod Health 17, 149 (2020). https://doi.org/10.1186/s12978-020-00998-5

IMPACT

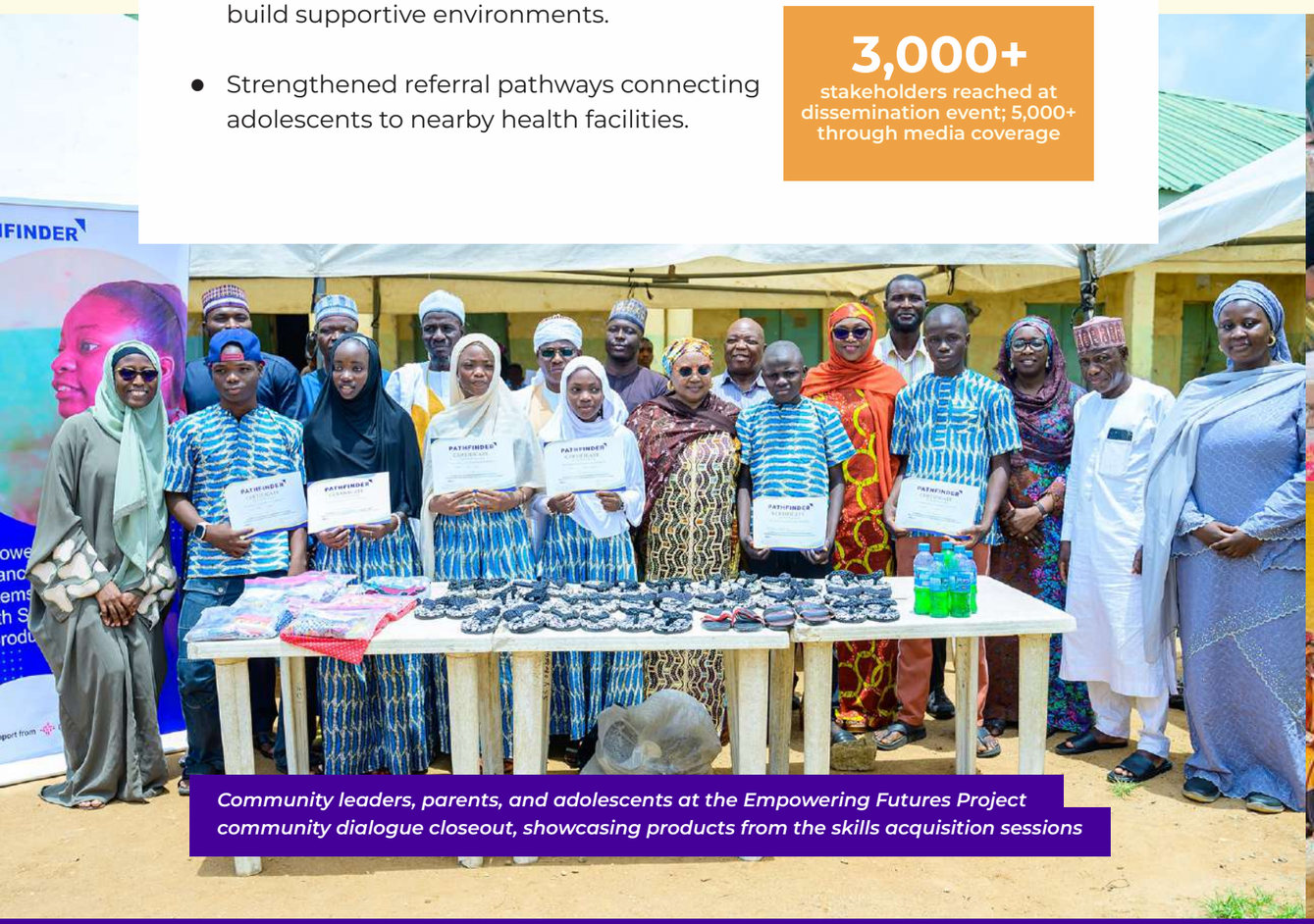
- Delivered 17 peer mentorship sessions using a structured curriculum covering communication, decision-making, contraception, consent, healthy relationships, and financial literacy.
- Provided vocational training in reusable pad production, liquid soap making, and shoemaking, strengthening adolescents' economic agency and practical autonomy.
- Engaged 248 community members through dialogues with parents, caregivers, and local leaders to reduce stigma and build supportive environments.
- Strengthened referral pathways connecting adolescents to nearby health facilities.

28%
increase in SRH knowledge (average test scores improved from 66% to 94%)

46
adolescents reached through peer mentorship (30 girls, 16 boys)

20
girls independently producing and selling reusable sanitary pads

3,000+
stakeholders reached at dissemination event; 5,000+ through media coverage



Community leaders, parents, and adolescents at the Empowering Futures Project community dialogue closeout, showcasing products from the skills acquisition sessions

"The peer mentorship sessions have not only helped me learn how to keep myself clean during menstruation but also taught me how to make reusable sanitary pads. Pads are expensive, but now I can make them from materials in my community."

— 14-year-old participant, FCT

"My child now communicates better at home and has become more confident in setting goals. He has even started practicing shoemaking and talks about one day starting his own small business."

— Parent of a male peer mentor participant, FCT

Adolescents during peer mentorship sessions and skills acquisition session on making reusable sanitary pads.

The FC2 Multi-Country Project

Funder:
Female Health Company

Lead:
Pathfinder Nigeria

Intervention Area:
Family Planning and HIV

Partner:
National Agency for the Control of AIDS, Federal Ministry of Health and Social Welfare, Network of People Living with HIV and AIDS in Nigeria, Association of Women Living with HIV/AIDS in Nigeria, Association of Young People Living with HIV in Nigeria, Female Sex Workers

WOMEN'S AUTONOMY, BY DESIGN

The FC2 female condom provides women-initiated dual protection against unintended pregnancy, HIV, and sexually transmitted infections. This is a critical option for women who cannot rely solely on men-initiated protection. In 2025, the FC2 project expanded awareness, acceptability, and access across multiple Nigerian states through integrated service delivery, digital outreach, and partnership with the National Agency for the Control of AIDS (NACA).

GFCD-FC2XHIKING

DELIVERING EXPANDED ACCESS TO FC2

- Trained 114 service providers and 30 trainers across multiple population groups including sex workers, people living with HIV, religious bodies, people living with disabilities, and young people.
- Delivered integrated community outreach through social events, peer mentorship, and facility-based services across urban, peri-urban, and underserved communities.
- Launched an influencer-led digital campaign that normalized conversations among younger audiences and drove offline demand.
- Partnered with NACA to embed FC2 within national HIV prevention frameworks, improving integration, reach, efficiency, and sustainability.
- FC2 hiking activation event created a stigma-free space for engagement and awareness in urban settings.

IMPACT

1,195	210K	1.1M+	86K+
People reached through outreach	Influencer campaign views	Users reached digitally	Advocacy campaign reach

Gloria Asuquo demonstrates the use of female condom while sensitizing community members during an outreach in Yelwa Community, Nasarawa State, as part of activities marking World Contraception Day. Nigeria, 2025. Photo, Bayo Ewuola

Women&Co: Pathfinder's Social Innovation Platform

Nigeria played a founding role in Women&Co. In October 2025, Pathfinder Nigeria launched Women&Co through a co-design event that convened women leaders from health, climate, leadership, governance, social innovation, business, finance, and media to invest in women-led innovation.

> ***"Women&Co represents the next era of international development: innovation with a power shift so that women are active leaders solving problems, securing new kinds of investments, and influencing broader, structural change."***
>
> — Dr. Tabinda Sarosh, President and CEO, Pathfinder International

Dr. Amina Aminu Dorayi, Regional Portfolio Director, West and Central Africa, at the 2025 Women&Co launch in Nigeria

Women&Co formalizes what Pathfinder has always practiced: investing in innovative and localized solutions that create opportunities for women. It brings together a multidisciplinary group of women who are experts, innovators, and changemakers at the convergence of health, leadership, and resilience to co-design and lead sustainable solutions and businesses.

The platform is structured around three stages:

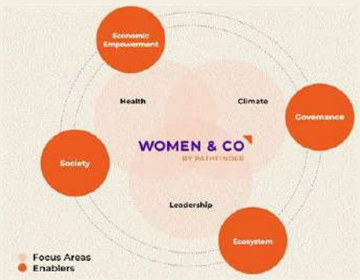
Co-Design
Community-led solutions rooted in the history, values, and lived realities of the communities we serve. Nigeria completed this phase in October 2025.

Incubate
We factor in enablers for women's leadership and consider national development goals. Nigeria's women-led concept pipeline is now entering this phase.

Scale
Successful solutions expand through networks, partnerships, and sustainable business models.

Pathfinder Staff at the Launch of Women&co Nigeria

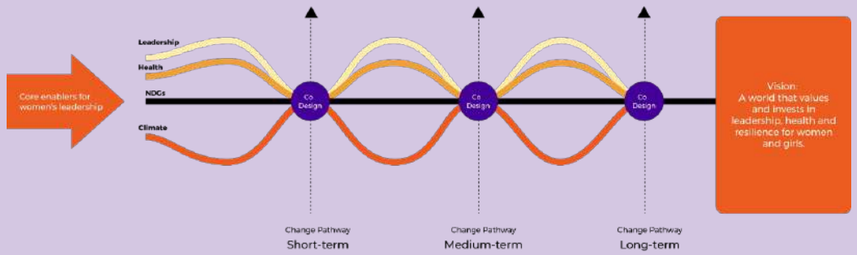
Women&Co focus areas: health, leadership, and climate at the intersection of community impact



Women&Co ecosystem: economic empowerment, governance, society, and climate enablers

WHERE NIGERIA STANDS

Nigeria's October convening produced a Nigeria-focused manifesto, a clear action agenda, and a concrete pipeline of women-led solutions. The platform is now moving from co-design to incubation, selecting concepts to pilot, deepening partnerships with government and the private sector, and building pathways for women-led enterprises to grow and sustain.



"Women&Co is more than a platform, it is a movement to put women's leadership, innovation, and enterprise at the center of Nigeria's future."

— Dr. Amina Aminu Dorayi,
Regional Portfolio Director,
West and Central Africa, Pathfinder.

Chinwendu Iroegbu, Media Programme Officer, Nigeria Health Watch and Jemimah Jatua, Gender and Social Inclusion Specialist, presenting output from their co-design session.

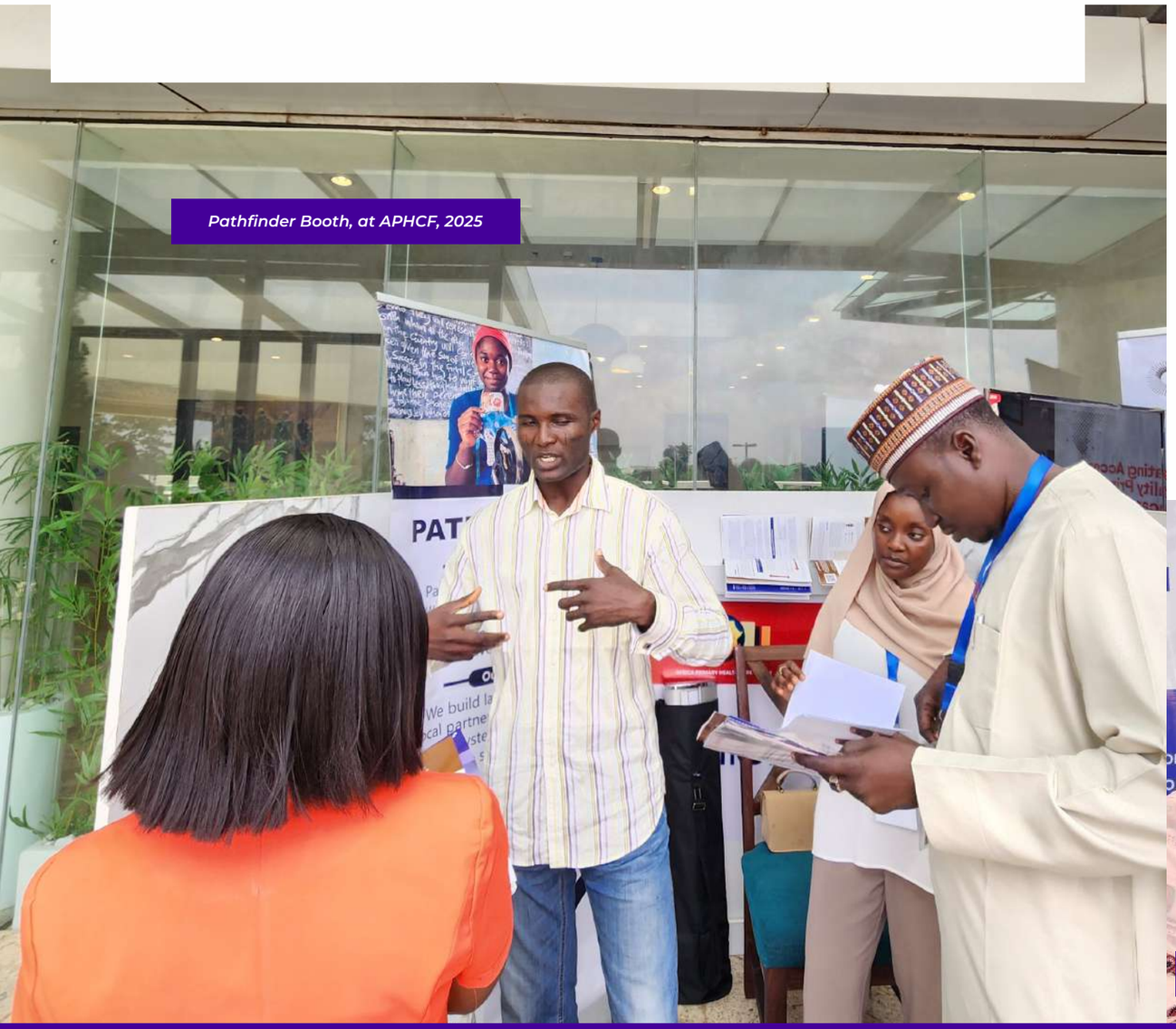
Cross section of participants during co-design session of Women&co-

Participants at the Co-design of Women&co Nigeria.

Haj. Hauwa Liman, Dr. Amina Aminu Dorayi and Dr. Salma Ibrahim Anas during the launch of Women&Co.

Learning, Adaptation, and Innovation

Our approach embeds continuous learning within implementation. Across all projects, we used routine data, stakeholder insights, and community feedback to refine strategies in real time. Learning was built into co-design, supportive supervision, and iterative review cycles.



Pathfinder Booth, at APHCF, 2025

Key Lessons from 2025

01 Integrated, multi-channel approaches consistently outperform standalone interventions

02 Community ownership (parents, religious leaders, local institutions) — is essential for sustained behavior change

03 Provider training must be paired with commodity availability and system readiness to translate knowledge into impact

04 Embedding interventions within government systems from the start is the single strongest predictor of long-term scale

05 Data-backed advocacy, — combining predictive modeling with community evidence to accelerate policy action

06 Digital and media engagement significantly expands reach, especially among young and urban populations

Knowledge Products and Global Engagement

7+	11+	10+	3,000+
Technical briefs produced and disseminated	Major conferences attended	TWG engagements	Stakeholders reached

Dr. Amina Aminu Dorayi at APHCF

Dr. Amina Aminu Dorayi with Options Africa Director and Helad of Consulting for Africa Business Health at the Gates Goalkeepers Event 2025

Pathfinder at NISA conference during Poster Abstract Presentation

Looking Ahead

STRENGTHENING AND INSTITUTIONALIZING PROVEN APPROACHES

Across all programs, we will continue to deepen integration within government systems, ensuring proven approaches in RMNCHN, adolescent and youth health, digital health, and policy and advocacy are institutionalized, financed, and sustained. We will expand our reach through community-led models, provider capacity strengthening, and integrated service delivery across additional geographies.

At the same time, we will strengthen investments in women's leadership, locally led innovation, and climate-responsive solutions, enabling women and communities to drive resilient systems that respond to evolving health and development challenges. Through stronger partnerships and locally grounded approaches, we will continue to build resilient communities where women, adolescents, and underserved populations remain at the center of everything we do.

2026 Strategic Priorities

- Scale CARMNIS across Gombe, Jigawa, Kaduna, and Kano States
- Advance RMNCHN innovations in humanitarian settings in Borno and beyond
- Deepen TSTS institutionalization in Kaduna and Kano toward full state ownership
- Expand HPV vaccination routinization beyond mass campaigns into integrated immunization systems
- Accelerate Women&Co from co-design to piloting and investment mobilization
- Strengthen DHIS2 data systems and Quantium modeling toward Ministry handover by 2027

Pathfinder Team at APHCF

Acknowledgement

Pathfinder Nigeria extends deep gratitude to the government stakeholders, donors, and implementing partners whose trust, collaboration, and commitment made 2025 possible.

GOVERNMENT PARTNERS

BORNO STATE
Ministry of Health & Human Services

DONORS AND IMPLEMENTING PARTNERS

Partners in Population and Development (PPD)
An Inter-Governmental Organization
Promoting South-South Cooperation

PATHFINDER

www.pathfinder.org

For nearly 70 years, Pathfinder International has been a catalyst for systems transformation, inclusive growth, and resilient communities in over 120 countries across the world. With a global footprint spanning Africa, South Asia, and the Middle East, we invest in women, girls, and communities by expanding access to essential health products and services while advancing health systems, unlocking leadership pathways, and strengthening economic and climate resilience. Through strategic partnerships with civil society, governments, and the private sector, we scale innovations and data-driven models that deliver measurable impact. We advance this work alongside men and communities, co-creating and building environments and systems to ensure every woman has the agency to shape her future and lead a healthy, fulfilling life.