



SECTION THIRTEEN

NATIONAL POLICY ON POPULATION

FOREWORD

At the Arusha, Tanzania, 1984 Conference, a precursor of the World Population Conference in Mexico, Nigeria reported that 'its population was growing at a faster rate than the rate of food production. This observation was repeated at the Mexico 1984 World Population Conference.

On February 4, 1988, the Federal Government approved the National Policy on Population for Development, Unity, Progress and Self-reliance. As a result of the diversities in the country, attempts were made in the articulation of the policy to consider the diverse interests of the generality of the people of Nigeria.

Fifteen years after the enunciation of the 1988 Policy, the exigencies of emerging new activities and issues (the 1991 National Population Census, 1994 International Conference on Population and Development, the 1999 HIV/AIDS Summit in Abuja, poverty and food security and the population-environment-development nexus issues) make a revision of the National Population Policy necessary.

This reviewed policy is designed to improve the standard of living and quality of life of the people, promote maternal, child and reproductive health, achieve a lower population growth rate through the reduction of birthrates by voluntary fertility regulation methods compatible with the national policy to achieve even distribution of population between urban and rural areas, prevent the causes and spread of HIV/AIDS pandemic and address the problems of internal migration and spatial distribution of population; as implied in the Dakar/Ngor Declarations (1992), the United Nations Conference on Environment and Development (1992) and International Conference on Population and Development-Programmes of Action (ICPD-PA, 1994).

The document has been arranged into sections with concise and clear statements of the major platforms that are necessary for understanding and implementing the population policy and programmes. One of the fascinating features of the Nigerian approach is the respect for the right of each couple to determine voluntarily the number and spacing of their children. The success of such an approach therefore requires a well articulated national programme of information, education and communication directed to specific target groups such as men, women, children, adolescents, youth, the elderly and the disadvantaged or vulnerable - groups to mention but a few.

The policy as presented herein requires the active involvement of, and implementation by both the public and private sectors in bringing about* the

realization of the goals and objective of this important document. Without doubt, the National Population Commission with its coordinating role will ensure close interaction, monitoring and cooperation of all concerned for the successful implementation of the population policy.

In line with the current political dispensation and the concern of this administration for the security and welfare of every Nigerian in order to eradicate poverty, corruption and other vices and promote sustainable development. I am pleased to present to the general public the full text of the National Policy on Population for Sustainable Development. It is my hope that this document will be given wide publicity and effect at all the three tiers of government and by the private sector.

OLUSEGUN OBASANJO

28th January 2004

LIST OF ABBREVIATIONS

AIDS	-	Acquired Immune Deficiency Syndrome
BCC	-	Behaviour Change Communication
CSOs	-	Civil Society Organisations
EMOC	-	Emergency Obstetrics Care
FCT	-	Federal Capital Territory
GDP	-	Gross Domestic Product
GHS	-	General Household Survey
HIV	-	Human Immunodeficiency Virus
ICPD	-	International Conference on Population and Development
IEC	-	Information, Education, Communication
LGA	-	Local Government Area
LGPAC	-	Local Government Population Advisory Committee
MICS	-	Multiple Indicator Cluster Survey
NCPM	-	National Council on Population Management
NDHS	-	National Demographic and Health Survey
NFS	-	Nigeria Fertility Survey,
NGO	-	Non-Governmental Organisation
NISH	-	National Integrated Survey of Households
NSS	-	National Sentinel Survey
PABA	-	People Affected by HIV/AIDS
PAG	-	Population Advisory Group
PLWHA	-	People Living with HIV/AIDS
PTWG	-	Population Technical Working Group
STI	-	Sexually Transmitted Infections
TFR	-	Total Fertility Rate
VVF	-	Vesico-Vaginal Fistula

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PREAMBLE

In 1988, the Government of the Federal Republic of Nigeria adopted the National Policy on Population for Development, Unity, Progress and Self-Reliance. This population policy was designed to improve standards of living and quality of life, promote maternal and child health, achieve a lower rate of population growth, and address questions of internal migration and population distribution. In part, because of protracted political instability and poor governance, limited progress was made in implementing the 1988 policy.

But the commitment of government to improve the quality of life of the Nigerian population is expressed in the series of development plans it has embarked upon since 1960. The government recognises the intricacy of population development relationship and the importance of population factors in the development of the country. At present, there is an increased awareness of population issues and the need to integrate population elements into development planning. All stakeholders need to appreciate the linkages of population factors with broader developmental issues like housing, education, health, agriculture, energy, environment, gender concerns, food security and the security of life and property.

However, it is pertinent to note that population management has been in existence from time immemorial in the cultural life of the people of Nigeria. Nonetheless, certain cultural practices over time have tended to contribute to growth of population of different areas of the country in ways militating against the interest of national development in contemporary times. A serious attitudinal change is therefore, required in such circumstances so as to mitigate any tendencies towards overpopulation.

In addition, the emergence of new issues makes a revision of the National Policy on Population desirable. The appearance of HIV/AIDS has further affected the quality of national life, and the epidemic is now a serious health and development issue in Nigeria. For example, HIV/AIDS is associated with increases in the number of orphans and rising death rates among men and women of economically active age. Other issues that have received equal attention since the 1994 International Conference on Population and Development (ICPD) in Cairo include reproductive and sexual health for all persons at all stages of the life cycle, reproductive rights, adolescent reproductive health, special needs of the girl-child, women empowerment, and gender equity and equality. Population-environment-development relationships

have also received renewed emphasis. These emerging issues are critical to any effort to improve the health and living conditions of Nigerians.

Also, Nigeria has new sources of information since the formulation of the 1988 National Policy on Population to necessitate policy revision and new management techniques in the population and development sector. The 1991 Census and the 1999 Nigerian Demographic and Health Survey are particularly important sources of this-new information.

Government has introduced new measures to improve the state of the economy and make progress towards long-term sustainable development. Some macro-economic initiatives have been put in place and government has begun the restructuring of the economy. Government is also committed to improving health status, ensuring basic education for all, and providing other basic social services. In this context, Government is aware of the policy implications and consequences on the well being of the population. It is the intention of Government, therefore, to remove all constraints to accelerated growth in the Nigerian economy and improvements in standards of living.

In the light of the foregoing consideration therefore, the government has decided to revise the National Policy on Population. The aim is to ensure that the policy contributes to long-term sustainable development in Nigeria and provides a basis for improved and more effective population and development management. The policy addresses the relationships between population, social and economic development and the environment. It also addresses related issues of poverty, literacy, reproductive health and rights, including maternal health, family planning, adolescent reproductive health, HIV/AIDS and other sexually transmitted infections, involvement of men in reproduction, women empowerment, gender equity and equality, and the special needs girl-child. The policy recognizes the importance of data collection, dissemination and use; highlights the critical management issues, including advocacy, behavioural change communication strategies, and a streamlined institutional framework as crucial elements of effective implementation strategies. The entire policy is based on respect for the rights of couples and individuals.

Chapter One

POPULATION SITUATION IN NIGERIA

A. THE POPULATION PROFILE

The Federal Republic of Nigeria covers an area of 923,768 square kilometres and consists of 36 states and a Federal Capital Territory (FCT). The States and FCT are subdivided into 774 local Government Areas. The country extends from the Atlantic coast in the south to the edges of the Sahara Desert in the north. It is linguistically, culturally and ethnically diverse. At least 70 percent of Nigerians live below the national poverty line in spite of her rich natural resources.

1.1 Population Size

Nigeria is by far the most populous country in Africa and is among the ten most populous countries in the world. According to the 1991 census, Nigeria had a population of about 89 million persons. The estimated population in the year 2003 is about 126 million.

1.2 Population Growth Rate

Population growth rate is determined by three main factors: fertility, mortality and migration. International migration has played a negligible role in determining the population growth rate of Nigeria. Rather, it is past fertility and mortality trends that have resulted in a very high rate of population growth. The Nigerian population is now estimated to be growing by about 2.9 percent per year. At that rate, the population will double in size in just 24 years. This means that Nigeria has one of the fastest growing populations in the world.

1.3 Age Structure

As a result of fertility and mortality trends, there is a preponderance of young persons in the population. About 44 percent of Nigerians are currently under 15 years of age. Consequently, the nation has a high dependency ratio of 89 dependents to 100 persons in the productive ages of 15-64. As a contrast, in developed countries, there are often 50 dependents to 100 persons in the economically productive ages of 15-64.

1.4 Fertility

Fertility is a major determinant of growth rate of a population. Although there is some evidence of a slight decline, the level of child bearing has been historically high in Nigeria. One reason for the high , fertility rate is the large number of births to teenagers. At the current level of fertility, the total fertility rate (TFR) is 5.2. The current crude birth rate is 38.40 births per 1,000 persons in the population.

1.5 Morbidity and Mortality

Childhood diseases such as malaria, acute respiratory tract infections, diarrhoea and vaccine preventable diseases (measles, tuberculosis, diphtheria, whooping cough, polio and tetanus) constitute the most common forms of morbidity. Most infant and child deaths occur as a result of these diseases. Malnourished children and infants are the most vulnerable. Malaria, dysentery, hepatitis and chronic conditions such as hypertension and diabetes are reported among the major causes of adult morbidity. HIV/AIDS is an increasingly important cause of sickness and death.

Maternal Morbidity and mortality are most commonly associated with high-risk pregnancies and births. High-risk pregnancies and births include too early (pregnancies and births to mothers under 18 years), too close i.e. (birth interval of less than two years), too many (more than four previous births) and too late (pregnancies after age 35). The commonest causes of maternal mortality include abortion-related problems, excessive bleeding, anaemia, infections and pregnancy-induced hypertension. Poverty, ignorance and lack of access to quality health care are major underlying causes of maternal morbidity and mortality in Nigeria.

The crude death rate was almost 14 deaths per 1,000 persons in 1991 according to the census conducted in that year. The infant mortality rate and child mortality rate remain high. A Federal Office of Statistics survey reported the infant mortality rate to be 105 deaths per 1,000 live births and the child mortality rate to be 178 deaths per 1,000 live births in 1999. By current estimates, maternal mortality ratio is between 700 and 800 maternal deaths per 100,000 live births. Abortion is a major contributor to maternal mortality. The census estimated life expectancy at birth at 54 years in 1999. Life expectancy at birth was slightly higher for women than for men.

1.6 Population Distribution, Urbanization and Migration

The population of Nigeria is unevenly distributed. About 60 percent of the population lives in rural areas, but the urban areas are growing more rapidly. The urban areas have

grown by about 3.7 per cent per annum in the past decade. The proportion of the population that is urban is currently estimated to be about 39 percent and some projections show the proportion rising to 42 percent in 2010 and 46 per cent in 2020. The overall density of population in 1991 was 96 persons per square kilometre. This estimate however masks huge regional variations. Density ranged from 27 persons per square kilometre in Taraba State to 1,712 persons per square kilometre in Lagos State. Migration takes two forms, internal and international. Internal migration includes rural to rural, urban to rural, rural to urban as well as urban to urban movements. However, rural to urban migration is the most significant. The young and able bodied usually dominate this movement from the countryside to cities in search of employment, social amenities and other opportunities. The resulting rapid growth of the cities has created serious problems of housing, food shortage, sanitation, unemployment, underemployment and crime. While data on international migration is sparse, it appears that this movement has been dominated by a "brain drain" of talented and well-educated Nigerians to developed countries.

1.7 Population Projection

The National Policy on Population for Sustainable Development is largely concerned with what happens to the Nigerian population in the future. The National Population Commission has prepared a set of population projections that suggest a range of possible future population sizes. The three projections are called the high, medium and low projections and different assumptions are used about the future course of fertility, mortality and migration in Nigeria. In the year 2015, the population would be 189 million persons in the high projections; 179 million in the medium projection; and 141 million in the low projection. The National Population Commission recommends medium projection for use and application.

1.8 Sources of Population Data

An accurate and up-to-date population database is a critical tool for good planning and governance. Nigeria still faces major challenges in developing a timely and high quality population database. Major sources of population data in Nigeria include censuses, surveys, vital statistics and administrative records. The last population census was conducted in 1991, and a post-enumeration survey provided additional data on population characteristics and dynamics. Censuses are supposed to be conducted every ten years to provide up-to-date data on population characteristics and

dynamics. Major demographic surveys conducted in the past include the 1981-82 Nigeria Fertility Survey (NFS), the 1990 and 1999 Nigeria Demographic and Health Surveys (NDHS), the 1994 and 1999 National Sentinel Surveys (NSS), the Multiple Indicator Cluster Surveys (MICS) and the General Households Surveys (GHS). Detailed characteristics on fertility, mortality and morbidity are usually derived from these surveys.

B. CONSEQUENCES AND IMPLICATIONS OF THE POPULATION SITUATION

While population is a natural resource, if its growth rate is not properly managed, it could be one of the constraints to the effort of government to fulfil its commitment to improve the quality of life and standards of living for the people of the country. In the past two decades, population growth has outstripped the social and economic development of the country. Gross Domestic Product per capita (in real terms) for example, remains lower now than it was in 1980. About 70 per cent of Nigerians live below the poverty line. The United Nations Human Development Index 2000 ranked Nigeria 151 out of 174 countries and among the 25 poorest nations in the world. The consequences and implications of rapid population growth will need to be considered in the national effort to achieve sustainable development.

1.9 Population Momentum

Nigeria has a powerful momentum for future population growth built into its age structure. High fertility over a long period of time has resulted in a population with a large proportion of young persons. Because today's children, who are the parents of the future, are already so numerous, an irresistible momentum for growth is built into the age structure of the population. This phenomenon has consequences for the future size of the country's population. The implication is that, even if the prevailing high level of fertility should decline in the immediate future to the point that each couple has only two children to replace itself, the population of the country would still continue to grow for the next 40-50 years until the disproportionately large number of young people moves beyond the reproductive span.

1.10 Population Pressures at Family and Household Levels and Resources Management.

High fertility and consequent large family size places pressures on families and

households- A large number of children make it difficult for families, especially poor families, to provide adequate nutrition, education, health care, shelter, care and support for all family members. At the family level, the most adverse effect of high fertility is its impact on the health of mothers and children. Among urban families, high fertility contributes to overcrowding and poor living conditions. Among rural families, the majority of whom are engaged in subsistence agriculture, large family size contributes to high levels of malnutrition. Increased land fragmentation, a consequence of large family size and higher population density, results in lower productivity and makes it difficult for subsistence families to produce sufficient food to care for a large number of children. The continued high rate of growth of the population if not properly managed alongside other resources, will worsen pressures on Nigeria families and households in the future.

1.11 Population and National Development

If the present high rate of population growth continues, the population of Nigeria would double in size in about 24 years. That implies that Nigeria will have 118 million more people in the country in 2025 than in 2001. This trend suggests that Nigeria would have to double its entire infrastructure for food production, health services, education, water supply, housing, energy and services in 24 years just to maintain today's low standard of living. Doubling infrastructure in the next 24 years in a country where the GDP per capita is currently low will be a difficult task. For living standards to rise, the rate of growth of the economy and the provision of social services would have to be much higher than the rate of population growth. While efforts are being made to improve the economy, an effective population programme should be aggressively pursued to manage population growth rate.

1.11.1 Education

Government has long recognized improved education opportunities as being critical to development. Since 1976, the major focus of the educational policy has been provision of free primary education. However, in order to address the persistent problem of high levels of illiteracy in the country, the Government of Nigeria replaced the policy of Universal Primary Education with the Universal Basic Education policy, which stipulates a nine-year basic education period for children instead of six years. A reported 23.7 million students were enrolled in the basic education programme in 1999, equal to about 80 per cent of the 6-14 year old age group. However, enrolments

included large numbers of under-age and over-age students, so the actual enrolment rate of 6-14 year olds in the schools is much lower. With the continued rapid growth of the population, both the number of school-age children in the population and school enrolments will increase phenomenally. Expanding enrolments will likely result in a worsening pupil/teacher ratio, overcrowded classrooms, shortage of educational materials, and a need for a greater funding in education.

1.11.2 Health and Nutrition

An important development goal of the government is to provide adequate health care for the entire population by the year 2010 through the expansion of primary health care, improved services at secondary and tertiary health care delivery levels, implementation of alternative health financing through National Health Insurance Scheme and finally, the integration of trado-medical practice into orthodox health systems. As the population expands rapidly, it will become more and more difficult to provide sufficient personnel, facilities and financial resources to maintain and improve health services and standards. Also, the rapid increase in the number of children under five years of age and women in their childbearing years the groups with the greatest health care needs will result in increased pressure on the health system. With adequate and improved health care, it is possible to achieve significant reductions in child and maternal mortality.

The Nigerian Demographic and Health Survey conducted in 1999 indicated that 46 per cent of children under three years of age were stunted, 12 per cent were wasted, and 27 per cent were underweight.

1.11.3 Urbanization

The level of urbanization has been on the increase in Nigeria. The 1991 census showed that urban population was 36 per cent of the total population, and it was estimated to be about 39 per cent in 2000. The rate of urbanization is estimated to be 3.7 per cent per annum. It is projected that the proportion of urban population will be 42 per cent in 2010 and 46 per cent in 2020. This trend will lead to the emergence of new urban centres and an increase in the size of the existing cities. At present, most urban residents live in squalid and congested environmental conditions. Poverty is widespread and underemployment and unemployment are high. Many urban inhabitants lack access to adequate health services, potable water, good roads, and electricity. Crime rates are high, and residents lack security with regard to their lives

and property. Continued rapid growth of the cities will make it increasingly impossible to provide adequate social services and infrastructure for the urban populace.

1.11.4 Housing

Housing is one of the basic necessities of life. In the past, the Federal Government of Nigeria adopted a National Housing Policy that stated that every Nigerian should have access to adequate shelter as a right. However, this is not the reality in the country. In urban areas, the major problems are severe shortages of housing, overcrowding and the spread of slums and shantytowns. In the rural areas, most houses are poorly constructed, unsafe and lack basic amenities such as potable water and electricity. The rapid rate of growth of both the urban and rural populations and inadequate funding has made it extremely difficult to provide sufficient housing to make up for current shortfalls and to provide adequately for the ever-increasing population.

1.11.5 Labour Force and Employment

While our population is the primary asset of the nation, rapid population growth places extraordinary demands on the ability of the economy to provide jobs for all new entrants to the labour force. According to the 1999-2001 National Rolling Plan, the year 2000 labour force is about 45.7 million persons. However, only 4.5 million of these workers are in the modern sector of the economy. With the high rate of population growth, the number of people in need of employment will rise dramatically each year. It will be difficult to create enough jobs for such large numbers of people even with the government policy of job creation through the National Poverty Eradication Programme.

1.11.6 Gross Domestic Product (GDP) Per Capita

The economy declined in the 1980s, but GDP has grown steadily (in constant values) from N90.4 billion in 1990 to N116.0 billion in 1999. However, the population grew at about the same pace as the economy during the 1990s. GDP per capita (in real terms) in 1999 was lower than it was in 1980 and was about the same as it was in 1990. The standard of living of most Nigerians declined during the 1980s and did not improve during the decade of the 1990s. Continued rapid population growth will make it difficult for Nigeria to make real gains in raising GDP per capita.

1.11.7 Agriculture and Food Security

Agriculture is the largest sector of the economy, employing nearly 70 per cent of the active labour force, but contributing 38 per cent of GDP, and providing means of subsistence for the large and growing population. It also provides raw materials for the agro-industrial sector and contributes 88 per cent of non-petroleum foreign exchange earnings. The sector will need to double food production over the next 24 years just to maintain today's low nutritional standards. Food production increased faster than the growth of the population during the 1990s, although the country is yet to achieve food security and still imports food. In 1998 and 1999 respectively, staple food production increased by 2.9 per cent and 3.6 per cent, very close to the rate of population growth in those years. Adverse climatic conditions such as drought and flooding, reliance on traditional farming techniques and the increasing population hinder the country from achieving long-term food security. Land fragmentation continues as the large numbers of children in each new generation make their claims on the land. This leads to smaller agricultural holdings, continued reliance on traditional techniques and reduced productivity. Additionally, land fragmentation can lead to communal clashes arising from the competition for increasingly scarce land resources. In areas adjacent to urban centres, the conversion of arable land to non-agricultural uses further diminishes productivity.

1.11.8 Environment

The present high rate of population growth is already contributing substantially to the degradation of the environment. In the urban areas, pollution, accumulation of solid and liquid wastes, complete deforestation of neighbouring woodlands and the rapid spread of shanty towns are all critical problems. In the rural areas, over-cultivation, overgrazing, deforestation and land fragmentation themselves, the outcome of rapid population growth have led to serious soil erosion, desertification, and incursion into marginal lands and shelterbelt regions. The overall impact is a continued degradation of the ecosystem. If rapid population growth is not properly managed, the situation of the environment will further worsen.

1.11.9 Energy Resources

Rapid population growth will also adversely affect the nation's energy sector. For instance, wood is still a major source of energy for most of the rural population and a significant proportion of the urban population. At present, serious imbalances

between the demand for wood and the supply exist in many parts of the country. This has led to a rapid destruction of the forests. With rapid population growth, the demand for fuel wood would increase further, thereby leading to greater depletion of forest resources, worsening desertification, and erosion. For the past three to four decades, petroleum has been an important segment of the national economy and a major foreign exchange earner. It accounts for about 11 per cent of the Gross Domestic Product, between 90 and 95 per cent of the value of the nation's exports and about 80 percent of the government's revenue. However, in 1998, the petroleum sector declined in value by 5 per cent and in 1999 it dropped by 4 per cent. At the same time, the population grew by about 2.9 per cent per year between 1996 and 1999. The consumption level of petroleum products in Nigeria has been increasing rapidly, but more because of the growth of the population than the level of industrial and economic development.

1.11.10 Public Sector Services

As noted, rapid population growth exerts pressure on a number of public sector services. For example, only about 40 per cent of households have access to potable water. The availability of water for industrial and other uses is also inadequate. Electricity is in short supply in both rural and urban areas and the increasing demand is outstripping the rate of new electricity generation. Communication services have also failed to keep pace with the rapid growth of the population. Proper management of population growth will ameliorate the situation in the public sector services.

1.11.11 Safety and Security

Safety and security of lives and property are necessary for the development of the nation. The increasing volume of crime in both urban and rural areas has become an issue of great concern in Nigeria. Many factors lead to this condition, including the growth of the population. Poverty, high underemployment and unemployment, the breakdown of traditional constraints, and squalid living conditions in the rapidly growing cities, for example, are clearly associated with rising crime in the urban areas.

C SPECIAL POPULATION ISSUES

In addition to the consequences and implications of the population situation, other population issues have to be taken into account in the national effort to achieve sustainable development. Some of these issues are discussed in this chapter.

1.12 HIV/AIDS and Other Sexually Transmitted Infections

In the last decade, HIV/AIDS has emerged as a major threat to health status and the socio-economic conditions "of the nation. Estimates based on the sentinel surveillance surveys indicate that HIV prevalence among Nigerian adults increased from 1.8 per cent in 1993 to 5.4 percent in 1999. The survey showed that the epidemic is found in every part of the country with varying levels of prevalence. The HIV/AIDS Emergency Action Plan reports that more than 2.7 million Nigerians are now infected. It is also estimated that 500,000 new infections occur per year and one new infection per minute. Equally worrisome is the large number of children infected through mother-to-child transmission. What happens with HIV/AIDS will have an important influence on mortality and population growth rates and on reproductive health status now and in the future.

Other sexually transmitted infections (STIs) constitute a silent epidemic and are a serious health problem. If left untreated, STIs can lead to secondary infertility, some types of cancers in women, miscarriage and premature birth, damage to heart and eyes, and other long-term reproductive morbidities. Untreated STIs also increase the risk of HIV infection and transmission.

1.13 Reproductive Rights

The concept of reproductive rights is critical to both the reproductive health of the population and sustainable development. Reproductive health is a state of complete physical, mental, and social well being, and not merely the absence of disease or infirmity, in all matters related to the reproductive system, and to its functions and processes. Reproductive rights embrace certain human rights that are already enshrined in Nigerian laws, international human rights documents, and other consensus documents to which Nigeria is a signatory. These rights rest on the recognition of the basic right of all couples and individuals to decide freely and responsibly the number, spacing, and timing of their children, and to have the information and means to do so, and the right to attain the highest standard of sexual and reproductive health. Reproductive rights also include the right to make decisions concerning reproduction free of discrimination, coercion, and violence. In the exercise of this right, individuals are expected to take into account the social, economic, and emotional needs of their living and future children, and their responsibilities towards the community. Respect for the reproductive rights of all Nigerians is a cornerstone of the National Policy on Population for Sustainable Development.

1.14 Women's Status and Empowerment

The status of Nigerian women is lower than that of men. Predominant cultural practices determine the low status of women. Beginning from childhood, women are made to accept the superiority of men in all aspects of socio-cultural life. The girl-child is not given equal place in some homes, nor is she given the same opportunities for schooling. Girls carry heavier burden with regards to household chores. Girls have less access to education at all levels: As a result of gender stereotyping, women have proportionately fewer professional and modern sector positions, less access to credit and economic resources, and lower participation in the political life of the country. Maternal morbidity and mortality are very high. Factors responsible for these include lack of decision-making power by women, inadequate reproductive health knowledge, poverty, denial of reproductive rights, the poor state of reproductive health services, and other social and cultural factors.

Harmful practices against women are common in Nigeria and include gender-based violence, female genital cutting, and widowhood rites. In some circumstances, widows are inherited but cannot inherit property.

1.15 Role of Men

In Nigeria, men are generally regarded as the heads of households and they dominate sexual and reproductive health decision-making. Men often have greater say in sexual relations, use of family planning methods, access to productive resources and property inheritance. In addition, certain male sexual behaviours (multiple sexual partners, relations with sex workers, non-use of condoms) can jeopardize women's reproductive health and can contribute to the transmission of HIV and other sexually transmitted infections. Men who deny their sexual partners the use of contraception to space children or to prevent high-risk pregnancies also contribute to poor reproductive health among women. To date, male participation and involvement in reproductive health issues have been low. Reproductive health programmes have focused mostly on women and children, and have failed to adequately target and provide men with appropriate information and services. Culture, religion, and socially sanctioned gender roles pose additional challenges.

1.16 Children and Young People

Nigeria has a young population. The 1991 census reported that children under the age of 15 years comprised nearly 44 per cent of the population. Adolescents (ages 10-19)

comprised 23 per cent of the population, while young people (ages 10-24) accounted for nearly 32 per cent of the total population of the country. As long as fertility remains high, the age structure will not change very much. The large number of children means that a significant proportion of development resources needs to go to meet the education, health, housing, food and protection needs of the young. As a group, children face particular problems child abuse, child labour, street children, the exploitation of almajirai children, malnutrition, HIV transmission, special needs of the girl-child, declining school enrolments, high dropout rates for boys in some areas, amongst others.

Young people in Nigeria face a number of reproductive health and other developmental challenges. Early exposure to sex and a high level of childbearing have been recorded in various studies. Adolescents (15-19 years) account for about 11% of all births and for a high proportion of maternal deaths. Induced abortion, which is illegal and often carried out by untrained practitioners, is a leading cause of death among young females. Vesico-vaginal fistula (WF) is an important reproductive health problem among young girls in some parts of the country. The rates of HIV/AIDS and other sexually transmitted infections are also high, and on the increase among young people. Major factors associated with the poor reproductive health situation of young people in Nigeria include low level of reproductive health knowledge and lack of access to appropriate quality health care services. Early marriage is also a major contributory factor; one of every four women in Nigeria was married by the age of 15.

1.17 Elderly

According to the 1991 census, the elderly usually defined as persons 65 years and above, constitute about 3.3 per cent of the population of Nigeria. About 3.7 per cent of the rural population was 65 years or older as opposed to 2.5 per cent of the urban population. Traditionally, the extended family system has cared for the Nigerian elderly. Most aged persons expect support from their relatives and friends, but most especially from their children. Traditionally, the need for old age security was one of the motivations for large family size in the country. However, because of the declining economy, many children are no longer in a position to provide care and support for their aged parents. Urbanisation has also broken down the traditional sense of family responsibility. Lack of a social security scheme worsens the predicaments of the elderly. The HIV/AIDS epidemic, which leads to rising mortality among working

adults, means that children will die before their parents in some cases, leaving the elderly with reduced support and the additional responsibility of caring for orphans.

1.18 Persons with Disabilities

The 1991 census, showed an estimated 4.8 disabled (physically or mentally challenged) people per 1,000 populations, representing about 0.5 per cent of the total population. This implies that there were more than 550,000 persons with disabilities in the year 2000. Among disabled Nigerians, 24.5 per cent are deaf, 8.3 per cent are dumb, 12.5 per cent are deaf and dumb, 18.2 per cent are blind, and 12.9 per cent are crippled. 10.2 per cent have some form of mental illness and 11.4 per cent have other forms of impairments. The prevalence of disability is about the same for males and females and for urban and rural residents. Generally, disability levels increase with age. Persons with disabilities have not been able to participate fully in national development and have little or no access to special facilities that enable them to be productive while adapting to their disability.

1.19 Refugees and Displaced Persons

Nigeria has several thousand international refugees in the country; most of these refugees have fled conflicts in other parts of West Africa- The country also has a recurrent problem of displaced persons. While man-made causes, such as political and social disturbances and communal clashes, displace large numbers of people, natural causes, such as flooding and desertification, also result in the displacement of populations.

1.20 Socio-Cultural Issues

Some cultural norms and practices affect the health of women and children and influence fertility and childbearing practices in Nigeria. Examples include polygyny, son preference, widow inheritance, child marriages, female circumcision, bride price, property inheritance, land tenure practices, gender-based violence and child labour.

Chapter Two

PRINCIPLES

The guiding principles for the National Policy on Population for Sustainable Development are derived from the Programme of Action of the International Conference on Population and Development and are in accordance with the Constitution of the Federal Republic of Nigeria. The guiding principles are also consistent with the provisions of other existing national policies, for example, the National Policy on Women, Poverty Alleviation Policy, National Reproductive Health Policy, National Health Policy, National Policy on the Environment, and National Adolescent Health Policy and the National Policy on Education. The principles are as follows.

Principle 1

The people of Nigeria are the most important and valuable resource of the nation. They are at the centre of concerns for sustainable development. All Nigerians are entitled to a healthy and productive life. The Government of Nigeria shall ensure that all individuals are given the opportunity to make the most of their potential. They have the right to an adequate standard of living and improved quality of life for themselves and their families, in the areas of health, education, food, clothing, housing, water, environmental protection, security of lives and property, and other basic needs.

Principle 2

To achieve sustainable development and a higher quality of life for all the people, Nigeria shall promote appropriate policies including population-related policies, to meet the needs of current generations without compromising the ability of future generations to meet their own needs. Sustainable development is a means to ensure human well-being, equitably shared by all people today and in the future. It requires that the interrelationships between population, resources, the environment and development, be fully recognized, publicized, properly managed and brought into harmonious balance.

Principle 3

Everyone has the right to the enjoyment of the highest attainable standard of physical and mental health. All tiers of government in Nigeria shall take appropriate measures

to ensure, on a basis of equality of men and women, universal access to health care services, including those related to reproductive health care, such as family planning and sexual health. Reproductive health care programmes shall provide the widest range of services without any form of coercion or discrimination. All couples and individuals have the basic right to decide freely and responsibly the number and spacing of their children and to have the information, education and means to do so.

Principle 4

The family is the basic unit of the Nigerian society and as such shall be strengthened. It is entitled to receive comprehensive protection and support. Marriage must be entered into with the free and informed consent of the intending spouses at the legally accepted age.

Principle 5

Every Nigerian has the right to information and education, which shall be directed to the full development of human resources, dignity and potential, with particular attention to women and children. Education shall be designed to strengthen respect for human rights including those relating to population and development. The best interests of the child shall be the guiding principle of those responsible for his or her education and guidance; that responsibility lies in the first place, with the parents. The government shall ensure strict compliance to the policy of basic education for all children in Nigeria.

Principle 6

Nigeria shall give the highest possible priority for the well-being of the child. The child has the right to standards of living adequate for his/her well-being and the right to the highest attainable standards of health, and the right to functional and quality education. The child has the right to be cared for, guided and supported by parents, families and society and to be protected by appropriate legislative, administrative, social and educational measures.

Principle 7

Young people are the future leaders of the nation. Government shall recognize their special needs and make appropriate provision for their growth and development and meaningful participation in national development, including the provision of an enabling environment for gainful employment.

Principle 8

Government shall pursue issues relating to gender equality before the law, equity and women empowerment, and the elimination of all forms of gender-based violence and all forms of harmful practices.

Principle 9

Government shall recognize the potentials and address the special needs of vulnerable groups such as persons with disabilities, widows, the elderly and refugees in accordance with the principles of the fundamental human rights of all Nigerians.

Chapter Three

GOALS, OBJECTIVES AND TARGETS

The population policy is designed to influence population-related policies, strategies and programmes that contribute to the sustainable development of the country. The policy recognizes that population factors, social and economic development, and environmental issues are irrevocably entwined and are all critical to the achievement of sustainable development in Nigeria.

3.1 Goals

The overall goal of the National Policy on Population for Sustainable Development is improvement of the quality of life and the standards of living of the people of Nigeria. The specific goals are the following:

1. Achievement of sustained economic growth, poverty eradication, protection and preservation of the environment, and provision of quality social services.
2. Achievement of a balance between the rate of population growth, available resources, and the social and economic development of the country.
3. Progress towards a complete demographic transition to a reasonable growth in birth rates and low death rates.
4. Improvement in the reproductive health of all Nigerians at every stage of the life cycle.
5. Acceleration of a strong and immediate response to the HIV/AIDS epidemic and other related infectious diseases.
6. Progress in achieving balanced and integrated urban and rural development.

3.2 Objectives

To achieve these goals, the objective of the population policy shall be to:

1. Increase understanding and awareness of the interrelationships between population factors, social and economic development, and the environment and their mutual importance to the long-term sustainable development of Nigeria.
2. Expand access and coverage and improve quality of reproductive and sexual health care services.
3. Strengthen and expand a comprehensive family planning and fertility management programme that ensures that all couples/individuals who want

them have uninterrupted access to a reasonable range of contraceptive methods at affordable prices, and is also adequately responsive to the needs of infertile and sub-fertile couples.

4. Strengthen and improve safe motherhood programmes to reduce maternal mortality and morbidity and enhance the health of women.
5. Reduce infant and child mortality and improve the health and nutritional status of Nigerian children through expanded access to high-quality promotive, preventive and curative health care services.
6. Promote Behavioural Change Communication (BCC) programmes to increase reproductive and sexual health knowledge, awareness and behavioural change among Nigerians.
7. Empower women to participate actively and fully in all aspects of Nigeria's development and effectively address gender issues.
8. Enhance involvement of men in reproductive health programmes and care.
9. Increase the integration of adolescents and young people into development efforts and effectively address their reproductive health and related needs.
10. Increase and intensify coverage of population and family life education programmes.
11. Accelerate the integration of reproductive health/family planning concerns into sectoral programmes and activities
12. Use effective advocacy to promote and accelerate attitudinal change towards population and reproductive health issues among public and private sector leaders.
13. Reduce and eventually eliminate harmful social and cultural practices that adversely affect the reproductive health of the population through the promotion of behavioural change and appropriate legislation.
14. Strengthen the national response to HIV/AIDS to rapidly control the spread of the epidemic and mitigate its social and economic impacts.
15. Encourage the integration of population groups with special needs, including nomads, refugees and displaced persons, the elderly, and persons with disabilities and remote rural dwellers into the development process.
16. Accelerate progress towards integrated urban and rural development and balance population distribution.
17. Increase enrolment and retention of children, especially girls, in basic education and raise literacy levels among Nigerians.
18. Accelerate the integration of population factors into development planning at national, state and local levels.

19. Improve the population, social and economic database, promote and support population and development research, and help leadership groups recognize the important contribution that planning and data utilization make to the good governance of Nigeria.
20. Improve systems for monitoring and evaluating the implementation of the population policy and for reviewing the policy at periodic intervals.

3.3 Targets

Targets are useful tools to monitor and evaluate implementation of the National Policy on Population for Sustainable Development over time. The Government of Nigeria has set a goal of a 2 per cent population growth rate by 2015 or beyond in its National Economic Policy. The targets for reduction in the total fertility rate and increases in modern contraceptive prevalence indicated below are consistent with this goal. The following key targets have been set to guide policy, programme planning and implementation.

1. Achieve a reduction of the national population growth rate to per cent or lower by the year 2015.
2. Achieve a reduction in the total fertility rate of at least 0.6 children every five years.
3. Increase the modern contraceptive prevalence rate by at least 2-percentage point per year.
4. Reduce the infant mortality rate to 35 per 1,000 live births by 2015.
5. Reduce the child mortality rate to 45 per 1,000 live births by 2015.
6. Reduce maternal mortality ratio to 125 per 100,000 live births by 2010 and to 75 by 2015.
7. Achieve sustainable universal basic education as soon as possible prior to the year 2015.
8. Eliminate the gap between men and women in enrolment in secondary, tertiary, vocational and technical education and training by 2015.
9. Eliminate illiteracy by 2020.
10. Achieve a 25 per cent reduction in HIV adult prevalence every

IMPLEMENTATION STRATEGIES

The population policy is ultimately about improving quality of life and achieving sustainable development in Nigeria. This means that the complex interrelationships between population, resources, the environment, and social and economic development, need to be recognized and taken into account in our national vision. The implementation strategies for the population policy necessarily focus on population related issues, while recognizing that the country has to address many other concerns to achieve sustainable development.

4.1 Health Concerns

A. Reproductive and Sexual Health

The strategies for ensuring high quality reproductive and sexual health services will involve creating a supportive environment, broadening the content and range of reproductive and sexual health services, increasing access to services, strengthening community participation and improving management. These strategies shall be implemented at all levels of the national health system in collaboration with all the relevant sectors, with emphasis on an integrated approach to programme planning and implementation.

1. Comprehensive reproductive and sexual health services that are of good quality, equitably accessible, affordable and appropriate to the needs of all members of the community, including the underprivileged, shall be provided.
2. Reproductive and sexual health services shall be delivered as an integral part of the primary health care and shall be appropriately integrated into the health care delivery system at all levels.
3. Referral systems for reproductive health services shall be strengthened and improved.
4. The scope of reproductive and sexual health advocacy and behavioural change communication (BCC) programmes shall be expanded to reach all individuals and groups.
5. Political, legal, socio-economic, cultural, religious, attitudinal and gender based barriers that limit access to quality reproductive health services shall be

- discouraged with a view to eliminating them.
6. Participation and involvement of the community in the provision and management of reproductive and sexual health services shall be encouraged.
 7. Public-private partnership in the provision of reproductive and sexual health services shall be promoted.
 8. Minimum package, protocols, and guidelines for the provision of high quality reproductive and sexual health services at all levels of health care delivery shall be developed and implemented.
 9. Reproductive health concept using a multi-sector approach shall be promoted throughout the country.
 10. Pre-marital genetic screening and counselling shall be encouraged and provided to address the problems of sickle cell disease and other genetic-related illnesses.
 11. All existing laws and policies shall be reviewed in order to ensure the protection of the reproductive and sexual rights of individuals, including the right of individuals to make decisions concerning their reproductive health free from coercion, violence or discrimination.
 12. Governments at all levels shall ensure compliance with relevant treaties, policies and laws supporting the attainment of the highest standard of reproductive health services for all citizens.
 13. Comprehensive plan for training and retraining of health care providers in integrated reproductive health service delivery shall be developed and implemented.
 14. Collaboration, partnerships and networking among all stakeholders in reproductive and sexual health programme design and implementation shall be promoted.
 15. Mechanisms shall be established to coordinate all reproductive health activities in order to facilitate the mobilization and effective use of resources.
 16. All tiers of government shall provide adequate funding for reproductive health programmes through creation of appropriate budget lines, increased and timely financial contributions, judicious and transparent use of available funds and the implementation of relevant health sector reforms.
 17. Basic and operational reproductive health research shall be promoted and the results utilized for improving the quality of services.
 18. Monitoring and evaluation mechanisms and framework shall be strengthened,

and quality assurance processes integrated into all reproductive health service delivery activities.

B. Family Planning and Fertility Management

Available evidence suggests that there is a high level of unmet need for family planning in Nigeria, and the use of modern contraception is low. Activities shall be expanded at all levels to provide wider availability, choice, and increased utilization of family planning, child spacing and related fertility management services.

1. Government at all levels shall ensure the availability and accessibility of affordable family planning services to all couples and individuals who voluntarily seek them.
2. Family planning services shall include services to sterile and sub-fertile couples as well as individuals who want to have children.
3. Services shall include a variety of family planning methods to ensure free and informed choices by all couples.
4. Commercial distribution outlets shall be increased in order to improve access of family planning services to the population.
5. Government at all levels shall use Behavioural Change Communication to promote acceptance of family planning.
6. Government and other stakeholders at all levels shall commit and provide adequate resources to improve planning and management for effective delivery of family planning services.
7. Contraceptive supply and logistics management system shall be strengthened to ensure constant availability and prompt delivery of contraceptives to service delivery points, and to provide comprehensive service statistics.
8. Community-based family planning activities shall be promoted and participation of non-governmental and private organizations shall be encouraged.
9. Appropriate measures shall be taken to protect and support the family and the institution of marriage.

C. Women's Health and Safe Motherhood

Complications related to pregnancies and childbirth are among the leading causes of morbidity, mortality and health impairment among women of child bearing age. Maternal morbidity and mortality also have serious consequences for family welfare

and national development. A concerted effort is needed to promote women's health and ensure safe motherhood.

1. Women's health and safe motherhood shall be promoted through effective antenatal, delivery and post-natal care programmes.
2. Health and nutrition status of women, especially pregnant women and nursing mothers, shall be improved through health promotion and nutritional programmes at all levels.
3. The risk of maternal and peri-natal deaths shall be reduced through improved access to Emergency Obstetric Care. (EmOC).
4. Easily accessible, affordable, acceptable, and effective methods of family planning shall be promoted and provided to reduce the incidence of unplanned pregnancies.
5. Accessible, well-staffed and well-equipped health services at all levels shall be provided for use of women while the referral system shall be improved, particularly in the rural areas.
6. Efforts to collect data on women's special health needs shall be intensified.
7. Measures to detect, prevent and manage high-risk pregnancies and births shall be promoted.
8. Curricula of health training institutions in the area of emergency obstetric care shall be strengthened to enhance the availability of skilled care at service delivery points at all levels.
9. Behavioural change communication to discourage unsafe delivery practices and enhance utilization of modern services shall be promoted.

D. Child Health and Survival

Child survival is closely linked to the timing, spacing and number of births and to the reproductive health of mothers. Early, late, numerous, and closely spaced pregnancies are major contributors to high infant and child morbidity and mortality. In turn, high child mortality contributes to high fertility and frequent childbearing. Childhood diseases, such as malaria, diarrhoea, acute respiratory infections and vaccine-preventable diseases are major causes of childhood morbidity and mortality.

1. Special attention shall be given within the context of primary health care to encourage breast-feeding, the provision of adequate nutrition, clean water, basic sanitation, immunization, oral dehydration therapy, and family planning services.

2. Access of children to appropriate and quality health care services at all levels shall be expanded.
3. Information, education and communication about parenting and childcare, including the advantages of breast-feeding, shall be provided to parents.
4. The quality, accessibility, equity and affordability of education from early childhood shall be improved.
5. Promote an enabling environment for mothers to breast feed their infants exclusively for a minimum of the first six months, and to continue breast feeding with appropriate and adequate complementary food up to and beyond the age of two years.
6. Training of health personnel in management of breast-feeding-related problems and integrated management of childhood infections shall be promoted.
7. Compliance with the code of marketing of breast milk substitutes shall be enforced.
8. Health and nutrition status of children shall by legislation be improved through the fortification and supplementation of common food items with iodine and other micro-nutrients.
9. Impact of malaria among children and pregnant women shall be reduced through the use of insecticides, treated nets and other anti-malaria measure.
10. Routine immunization shall be made accessible and available to all children and pregnant women.
11. Practical and immediate steps shall be taken to provide early detection and appropriate management of genetic disorders and developmental abnormalities in children.

E. HIV/AIDS

With an adult prevalence rate now 5 per cent, Nigeria has crossed a threshold where the epidemic could expand at a rapid rate. An intensified national, regional and sectoral response is needed to stem the spread of HIV.

1. The government shall mobilize and commit resources sufficient to respond to the magnitude of the HIV/AIDS epidemic and implement national action plans.
2. Behavioural Change Communications that address sexual behaviours and cultural practices associated with HIV transmission shall be strengthened.
3. Information, education and communication programmes that contribute to

4. community awareness and mobilization shall be promoted.
5. programmes for voluntary and confidential counselling and testing for HIV, and early detection and treatment of other sexually transmitted infections shall be strengthened.
6. Use of male and female condoms shall be promoted and commodities shall be provided through appropriate outlets.
7. HIV/AIDS control programmes targeting people at high risk of HIV transmission shall be strengthened.
8. Relevant agencies and civil society organizations shall integrate HIV/AIDS issues into pre-marital and family counselling.
9. Government at all levels shall encourage public, private and non-governmental organizations and communities to develop supportive, non-discriminatory HIV/AIDS related policies and practices that protect the rights of people living with HIV/AIDS (PLWHA) and people affected by HIV/AIDS (PABA).
10. Legislation shall be enacted to protect the rights of PLWHA and PABA.
11. Legislation to make unlawful the deliberate spread of HIV by infected individuals shall be enacted.
12. Multi-sectoral collaboration for the control of HIV/AIDS and other sexually transmitted infections shall be promoted.
13. Establishment of HIV/AIDS awareness clubs for young people and integration of HIV/AIDS activities into existing youth activities shall be encouraged.
14. Government, NGOs the private sector and communities shall provide care and social support for persons living with HIV/AIDS and for those otherwise affected by the epidemics such as orphans and other relations.
15. Government shall initiate efforts to improve the access of PLWHA to antiretroviral drugs and related medications at affordable prices.
16. Efforts to control HIV/AIDS by addressing unsafe health care practices and drug abuse shall be strengthened.
17. Programmes to address poverty, low status of women, youth unemployment, and other underlying factors contributing to HIV transmission shall be promoted.

F. Male Reproductive Health

Men are currently underserved and inadequately targeted by reproductive health programmes. This situation deserves to be addressed for a number of reasons. First,

men have particular reproductive health needs of their own. Second, the reproductive and sexual behaviour of men has implications for, the health and well being of their spouses and children. Third, men play a dominant role in decision making about reproduction and sexual matters in the family and community settings. There is therefore, urgent need to involve them in all reproductive health programmes both for their own benefit and that of other family members.

1. Appropriate information, education and communication programmes shall be designed and implemented to promote awareness by men of their responsibilities in the area of reproductive and sexual health, including promotion of the health and well-being of their spouses and children.
2. Awareness about male reproductive health issues, such as HIV/AIDS and other sexually transmitted infections, prostate cancer, impotence, infertility/sterility, and andropause, and their management shall be promoted.
3. Adequate information, education and counselling services on appropriate methods for contraception shall be promoted among male groups.
4. Behavioural Change Communication programmes that promote positive reproductive health and sexual behaviour shall be targeted to men in the work place, home, recreation and health facilities.
5. Access of men to counselling, preventive and clinical services in the area of reproductive and sexual health shall be expanded.
6. Health workers shall be appropriately trained, and health services oriented towards more responsive male reproductive health needs, shall be provided.

4.2 Gender Concerns

A. Gender Equity, Equality, and Women Empowerment

Gender disparities exist in every sphere of human development in Nigeria. These disparities reflect the generally lower status of women compared with men. Women generally suffer marked disparities in education, health care and economic opportunities. The power relations that impede women's attainment of healthy and fulfilling lives operate at many levels from the most personal to the highly public. Achieving change requires policy and programme actions that will improve women's access to secure livelihood, economic resources, and other development opportunities. The full participation and partnership of both men and women is required to achieve gender equity and equality.

1. Government and other agencies shall ensure that women have full access to

credit facilities and other economic resources to ensure full participation in the national economy.

2. Government and other agencies shall ensure women's access to contraceptives at affordable prices to help couples and individuals make responsible decisions about family size and spacing.
3. Mechanisms for women's equal participation and equitable representation in all aspects of national life (social, political, economic and cultural) shall be established.
4. Efforts to ensure the fulfilment of women's potential through education, skill development and employment shall be promoted.
5. Government shall promote universal girl-child education as a tool for women empowerment.
6. Efforts to eliminate all discriminatory practices against women shall be intensified.
7. Appropriate measures and regulations shall be put in place to enable women to combine the roles of childbearing, breast-feeding and childrearing with participation in the labour force.
8. Women's right to inheritance shall be fully protected through enactment and implementation of appropriate legislation.
9. Legislation and increased advocacy against all harmful practices that affect health and development of girls and women shall be promoted.
10. Women's participation in decision-making, at home, community and society shall be promoted.
11. Gender concerns shall be integrated into all development policies and programmes.
12. Advocacy and behavioural change communication to promote the value and development of the girl-child shall be undertaken.

4.3 Environment

A. Population, Development and Environment Interrelationships

Population, social and economic development, and environment are all pillars of sustainable development, and it is therefore important to adopt strategies that foster increased understanding and awareness of the complex interrelationships among them.

1. Government and NGO partners shall develop tools and materials to promote

2. understanding of population-development-environment interrelationships.
2. National leadership training programmes shall integrate population, development, and environment interrelationships into curricula.
3. Population education curricula shall be broadened to incorporate related development and environment issues.
4. Population advocacy and information, education and communication programmes shall include key messages about sustainable development interrelationships.
5. Population programmes shall promote media partnerships to expand understanding about population-development-environment interrelationships.

4.4 Education

A. Population and Family Life Education

Population and family life education enable individuals to protect and enhance their own reproductive health, and understand how population factors affect the quality of life of the family, community and nation.

1. National population and family life education programme shall be strengthened, expanded and implemented.
2. Population and family life education, including education on sexuality, HIV/AIDS and gender relations, shall be incorporated into the curricula of all primary, secondary and tertiary institutions.
3. Population and family life education, including sexuality, HIV/AIDS and gender relations instruction, shall be incorporated into non-formal and vocational training to assist young people prepare for responsible parenthood.
4. Reproductive and sexual health counselling, including family life and genetic counselling, shall be integrated into the formal and informal education system to reach young persons.
5. Special opportunities for population and family life education shall be created for out-of-school youths, especially the girl child, in vocational and women development centres.
6. Reproductive health clubs and related organizations shall be encouraged in educational institutions and the society large.
7. Family life, reproductive health, and- population- environment-development interrelationships shall be integrated into mass literacy and adult education

programmes.

8. Population and families education, as well as reproductive and sexual counselling, shall be made available to persons with disabilities and other population groups with special needs.

B. Basic Education and Literacy

Education and literacy are key factors in efforts to achieve sustainable development. Education is also closely related to demographic and social change, including changes in fertility, mortality, marriage, mobility and economic activity. Increases in education for girls and women contribute to greater empowerment, later marriage, and smaller family size.

1. Access to basic education shall be expanded to increase enrolments and eliminate gender disparities through full implementation of the Universal Basic Education scheme.
2. Increased attention shall be paid to the curricula and quality of education at all levels to enhance the acquisition of relevant knowledge and skills for development of the individual and nation.
3. Investments in education, literacy, and job training shall be given high priority in development budgets at all levels.
4. Government shall ensure that educational institutions have adequate equipment, trained staff, and facilities to ensure quality instruction.
5. Non-formal education and skill development programmes for out-of-school youth and adults shall be promoted.
6. Efforts to eliminate illiteracy shall be intensified through improved and expanded mass literacy, adult and non-formal education programmes.
7. Content of educational curricula at all levels shall be improved to promote greater awareness of the interrelationships between population, reproductive health, gender concerns and the achievement of sustainable development.

4.3 Communication

A. Behavioural Change Communication (BCC)

Poor health practices and inappropriate health-seeking behaviour are factors underlying low reproductive health status in Nigeria. To address this situation, BCC constitutes a key component of the population and development programme.

1. Appropriate cultural and gender-sensitive information, education,

- communication (IEC) and counselling materials in support of reproductive and sexual health shall be developed, produced and widely distributed.
2. A national BCC strategy, plan and programme shall be developed and implemented, with active participation of communities.
 3. The scope, content and coverage of population and reproductive health messages, including HIV/AIDS, shall be increased using appropriate channels of communication.
 4. Institutional capacity of government at Federal, State, and LGA levels, civil society organisations, and the private sector shall be strengthened to undertake BCC programme.
 5. Training of skilled personnel for BCC shall be promoted.
 6. BCC research in the field of population and reproductive and sexual health shall be encouraged and supported.

B. Advocacy and Leadership Commitment

Political will and commitment are critical ingredients for the successful implementation of the population policy. Leaders at every level of Nigeria society need to promote the policy and support its effective implementation through appropriate declarations and allocation of adequate resources. Advocacy as a strategy to promote awareness, gain commitment, and sustain support among Leadership groups will be required.

1. Advocacy programmes shall be developed to help leaders understand the importance of reproductive health, reproductive rights, gender concerns and population- environment-development interrelationships to national development.
2. Information on population and sustainable development shall be made available in appropriate and understandable formats to government leaders at all levels, and to NGO community, religious and traditional leaders.
3. Content of National Policy on Population for Sustainable Development shall be widely disseminated to mobilize public opinion and build leadership support for effective implementation of population programmes.
4. Advocacy efforts shall be targeted at political leaders to ensure that sufficient resources are committed to and released for population and reproductive health programmes.
5. Advocacy efforts shall be targeted at members of legislatures at all levels to

encourage them to enact appropriate legislation for achievement of the goals and objectives of the population policy.

6. Advocacy programmes shall be developed to encourage policy makers to remove institutional, legal and other barriers that hinder women and youths from becoming partners in decision-making and development.
7. Training in advocacy skills and approaches and the development of advocacy networks shall be promoted.

4.6 Population Dynamics

A. Population Distribution, Urbanisation and Migration

Population distribution and migration issues and achievement of balanced urban-rural development are important in the context of sustainable development. The rate of urban growth is high and results from a combination of a high rate of natural increase in the cities and rural to urban migration. Rapid urban increase leads to overcrowding, poor environmental conditions and increased pressure on social and health infrastructure in urban centres. Other migration and displacement issues, such as refugees and brain drain, will also affect the population situation.

1. A comprehensive urbanization policy shall be integrated into the overall development planning process and shall aim, among other things, at reducing the current high rate of migration to large urban centres to contribute to balanced rural-urban development.
2. Rural economies shall be improved through skills development and strengthening and expansion of micro, small and medium-scale industries, including those that are agro-allied.
3. Infrastructure and social amenities shall be strengthened and expanded in the rural areas to improve living conditions and enhance economic development.
4. Programmes shall be developed to retain rural labour force and reduce the current flow of young people from the rural areas to the urban centres.
5. Measure shall be taken to improve services and infrastructures in urban centres, with particular focus on slum areas, to enhance quality of life.
6. Special and appropriate measures shall be taken to regulate, protect and assist international migrants and refugees to protect their rights and safeguard their lives and properties.
7. Government shall adopt measures and promote incentive schemes that will facilitate the voluntary return of highly skilled emigrants and promote their

- eventual integration into the national economy.
8. Appropriate measures shall be instituted to ensure that displaced people are protected and rehabilitated as early as possible.

B. Population Groups with Special Needs

I. Nomads

Nomads, including pastoral nomads and migrant fishermen, are a population group with special needs. The constant movement of these groups has implications for their health, education and general development. Government has established a programme of education specially targeted at this group to integrate them into national development. However, educational enrolments among nomads remain low.

1. Primary and adult education programmes for nomads shall be expanded, and curricula made compatible with aspirations and lifestyles of nomads.
2. Academic support services provided through university-based Nomadic Education Centres shall be strengthened.
3. Government shall ensure adequate budgetary allocation and timely release of funds for education and other development programmes for the nomads.
4. Awareness creation and BCC programmes targeted at nomads shall be strengthened to promote their participation in education, health and other development programmes, and to address harmful practices.
5. Population and family life education shall be integrated into the curricula of nomadic education.
6. Government and relevant agencies shall ensure that nomads have access to good quality reproductive and sexual health care services.

II. Elderly

The elderly, ages 65 and above, constitute about 3.3 per cent of the population, and this proportion is likely to increase in the future. With the erosion of traditional sources of support, the care of the elderly needs to receive greater attention.

1. Appropriate programmes shall be developed to integrate the elderly into relevant aspect of national life.
2. Social security and related support systems shall be reviewed, strengthened and expanded to address needs of the elderly.
3. Information, education and communication programmes shall be developed to increase awareness about needs of the elderly, family responsibilities, health

- promotion measures and other interventions.
4. Community-based social workers shall be trained to meet the special concerns of the elderly, including reproductive health needs.
 5. Curricula of health training institutions shall be reviewed and revised to strengthen instruction and skill acquisition in care of the elderly.
 6. A national advisory council for welfare of the elderly shall be established to promote their interests and well-being.

III. Persons with Disabilities

Persons with disabilities have fundamental rights that need to be protected by the society, and appropriately integrated into national development processes.

1. Appropriate strategies shall be developed to integrate the disabled into relevant aspects of national life.
2. Appropriate measures shall be taken to provide facilities for the disabled to allow them to perform to the best of their ability.
3. Appropriate legislation shall be enacted to protect the rights of persons with disabilities.
4. Information, education and communication programmes shall be developed to increase awareness about needs of the disabled, family and community responsibilities, and other interventions.
5. Community-based personnel shall be trained to meet the special needs of the disabled, including reproductive health needs.
6. A national advisory council for welfare of the disabled shall be established to attract public attention to the needs of the physically and mentally disabled and promote their interests and well-being.
7. Government at all levels and relevant agencies shall strengthen existing institutions that provide care and support for persons with disabilities.

IV. Refugees and Displaced Persons

The issues of refugees and displaced persons have attracted government attention. Government initiatives in this direction include the establishment of the National Emergency Management Agency.

1. Government shall strengthen programmes to respond to the reproductive and sexual health needs and safeguard the reproductive rights of refugees and displaced persons.

2. Appropriate interventions shall be developed to address other population and developmental concerns of refugees and displaced persons, including educational needs.
3. IEC and BCC programmes shall be established to promote dialogue and a culture of non-violence in conflict resolution.
4. Appropriate measures shall be taken to restore refugees and displaced persons into national life.

4.7 Youth And Adolescents

A. Adolescents and Young People

Adolescents and young people face many reproductive and sexual health challenges, such as teenage pregnancies, abortions, HIV/AIDS and other sexually transmitted infections, and female genital cutting. Other issues such as social and mental adjustment, drug abuse, accidents, education, career and employment, compound their reproductive and sexual problems. The fertility behaviour of adolescents and young people will also be critical to future population growth. For these reasons, the reproductive and sexual health of adolescents and young persons need to be addressed as part of a comprehensive population policy.

1. Responsible and healthy reproductive and sexual behaviour, including sexual abstinence, among adolescents shall be encouraged to reduce the incidence of high rate of teenage pregnancies, abortions and HIV/AIDS and other sexually transmitted infections;
2. Sexuality education, including life skills, gender relations, information on consequences of unprotected sex and adolescent pregnancies, and transmission of HIV and other STIs, shall be provided in formal and informal settings to all young people.
3. Access of young people to appropriate youth-friendly health and counselling services to effectively address their reproductive and sexual health needs shall be expanded.
4. Laws establishing minimum legal age-at-marriage at 18 years for females shall be enacted and enforced.
5. Programmes targeted at preventing substance abuse, sexual and physical abuse, suicide and accidental injuries among young people shall be strengthened and expanded.
6. Comprehensive youth development programme including education,

- vocational guidance and training, sports and recreational facilities, and appropriate legal support shall be developed and implemented.
7. Opportunities shall be provided for the involvement and full participation of young people in social life and developmental activities of their communities.
 8. Appropriate programmes shall be developed and implemented for young people with special needs, such as those in conditions of extreme poverty, homelessness, unemployment and those with physical or mental disabilities, to integrate them into national development processes.
 9. Peer education and counselling approach shall be promoted to Achieve improved reproductive health knowledge and behaviour among young people.
 10. Programmes that address parenting and parent-child communication shall be strengthened and expanded to support the health and development of young persons.
 11. Advocacy efforts shall be strengthened to secure and sustain the commitment of government, community leaders, and other stakeholders to support reproductive health and development programmes for young people.

4.8 Social-Cultural Barriers and Legal Support

Certain cultural practices and customs in Nigeria violate the reproductive rights and are harmful to the reproductive health of individuals, especially girls and women. These include early and forced marriages, female genital cutting, widowhood rites and gender-based violence.

1. Appropriate legislation shall be enacted and enforced to eliminate all harmful practices, including early marriages, female genital cutting and violence against women.
2. Legislation that protects the family and the institution of marriage shall be promoted and enforced.
3. In view of the health implications of early marriage and childbearing, appropriate legislation shall be enacted to raise the age at first marriage to at least 18 years for females.
4. Couples shall be required to lawfully acknowledge and register marriages with the National Population Commission.
5. Appropriate legislation shall be reviewed, revised and enforced to protect under-age females from sexual abuse and exploitation.
6. Appropriate legislation shall be promulgated to ensure that men provide

- paternal support for any children they father.
7. Appropriate legislation shall be promulgated to help improve the rights of children and thereby control all forms of child exploitation, neglect and abuse.
 8. Intensive behavioural change communication programmes shall be undertaken at National, State and Local levels to raise awareness about child marriage and other harmful practices and promote appropriate behavioural changes.
 9. Advocacy efforts targeted at leaders at all levels to facilitate the elimination of harmful practices and the removal of socio-cultural barriers to good reproductive health, shall be strengthened.

4.9 Population and Development Planning

A. Integration of Population Variables into Development Planning

Population factors affect planning and programmes in all social and economic development sectors. It is, therefore, essential that population variables be integrated into socio-economic development planning to speed up the pace of sustainable development and poverty alleviation.

1. Population variables shall be integrated into all aspects of development planning at Federal, State and LGA levels.
2. Government at all levels shall undertake timely and periodic reviews of their development plans with the aim of assessing progress towards integrating population variables into development planning.
3. Advocacy and IEC programmes shall be developed to strengthen political commitment and ensure adequate resource allocation to integrate population variables into development planning.

B. Integration of Reproductive Health Concerns into Sectoral Programmes and Activities

Population management and reproductive health programmes require intersecting or collaboration.

1. Reproductive and sexual health information and services, including HIV/AIDS, shall be integrated into sectoral programmes and activities at all levels.
2. Appropriate persons shall be trained at the sectoral level to integrate reproductive and sexual health concerns into population and development.

3. Appropriate framework and strategy shall be developed for intersectoral collaboration.
4. Regular consultative intersectoral networking shall be undertaken to ensure effective programme implementation.

4.10 Population Statistics

A. Data Collection and Analysis

Demographic and health data are essential to national planning and management of the population programme. Efforts shall be intensified to generate reliable and timely population and health data for socio-economic development planning.

1. National censuses and population and health surveys shall be undertaken at regular intervals and on a timely basis.
2. Priority attention shall be accorded preparatory activities prior to censuses and population surveys to help ensure quality results.
3. Legislation and regulations governing vital registration of births, marriages and deaths shall be enforced, and collection systems shall be strengthened.
4. IEC programmes shall be intensified to increase awareness of leadership groups and general population on the importance and processes of national data collection systems, such as censuses, vital registration and surveys, for good governance and rapid social and economic development in Nigeria.
5. Efforts shall be devoted to achieving complete and timely processing, analysis, and dissemination of census and survey data for economic and socio-economic development planning.
6. Efforts shall be intensified to collect, process, analyse, and disseminate statistics from all sectors to be used for planning and programme implementation at Federal, State and LGA levels.
7. Platforms for population data producers and users to communicate with one another shall be established and institutionalized, including sharing through the Internet.
8. Training activities on the use of demographic and health data for development planning shall be promoted.
9. Databanks shall be developed, strengthened and made fully operational at all levels.
10. Appropriate measures shall be taken to collect and disseminate data on international migration.

11. Compilation of gender-disaggregated data shall be promoted

B. Monitoring, Evaluation and Research

Monitoring and evaluation are integral elements of population programme management. They provide a basis for assessing the progress of programme implementation, and the effectiveness of activities and strategies. Applied research provides information and analyses that can be used as a basis for improving programme design and implementation.

1. Monitoring and evaluation shall be integrated into every population activity and programme in support of population policy implementation.
2. Regular monitoring of population-related sectoral activities shall be carried out.
3. Relevant agencies shall carry out impact evaluation of the population programme periodically.
4. Relevant organisations shall generate specific data required to periodically assess the implementation of national population programme.
5. Applied research in support of population policy implementation shall be encouraged and supported.
6. Relevant agencies, civil society groups, and national experts shall collaborate to develop research agenda in support of policy implementation.
7. Policy-oriented research in area of gender and development shall be undertaken.



Chapter Five

RESOURCE MOBILISATION

Government and civil society will need to mobilise sufficient resources from internal and external sources for implementation of the population policy. For adequate support and successful management of population programmes, critical resource requirement will include human, material and technical, and financial resources at Federal, State and LGA levels. The Government of , Nigeria recognizes and appreciates the role that donor support has ; played in funding population activities. However, in line with our commitment to the ICPD Programme of Action and the spirit of self- reliance, the Government will endeavour to increase its funding level for population and development programmes commensurate with the scope and scale of activities required to achieve the goals of the population policy,

5.1 Human Resources

To improve the human resource base for population policy implementation, the following should be undertaken:

1. Comprehensive manpower policy for population programmes shall be formulated and implemented.
2. Nigerian universities and other appropriate tertiary institutions shall promote institutionalisation of training of population and health manpower.
3. Short-term in-service training through workshops and seminars at local and international levels shall be encouraged.
4. Government shall offer overseas scholarships for special training in population and development.

5.2 Financial Resources

The sources of funding shall be both internal and external.

1. Government and people of Nigeria shall strive to increase internal funding for population programmes.
2. Federal, State and Local Government shall provide annual budgetary allocations and release for implementation of the population policy and programmes.

3. The National Population Commission and its relevant Committee and Agencies at all levels shall mobilize other sources of internal funding.
4. Federal Government shall mobilize external funds from development partners for population policy implementation.
5. Federal, State and Local Government shall provide necessary counterpart funding and contributions for the implementation of donor-assisted programmes and projects.
6. Government and development partner shall ensure transparency and accountability in the disbursement and utilisation of funds for population activities
7. Government shall encourage organized private sector to support population programmes, including a possible private sector trust fund for population and development.
8. Government of Nigeria shall explore all possibilities of debt swap to help fund implementation of the National Policy on Population for Sustainable Development.

5.3 Material and Technical Resources

Material and technical resources will be essential in the process of implementation of the population policy.

1. Government shall procure and provide technical equipment for the provision of quality reproductive health services, the conduct of population census and surveys; development of data banks and other relevant population-related activities.
2. Government shall procure contraceptives and strengthen the logistic system and distribution network to ensure regular availability of commodities at service delivery points and prevent leakages and wastage.
3. Government shall ensure the availability of technical resources, including instructional, advocacy and IEC materials, relevant for the achievement of the goals of the population policy.
4. Government, in collaboration with other development partners, shall ensure the availability of technical expertise and support, including national and international consultants, for the implementation of the population policy.

5.4 Inter-agency Coordination

Many partners, including external donors, shall be involved in the implementation of the population policy. Coordination is required to ensure the most efficient use of available resources.

1. Periodic assessments to identify resource needs in the population sector shall be carried out by government and shall be reviewed by implementing partners.
2. Government, donor agencies, civil society organizations and organized private sector shall work together to ensure that the country derives maximum benefit from internal and external resources in the implementation of the population policy.

INSTITUTIONAL FRAMEWORK

The implementation of the national population policy is a complex, multi-sectoral activity. All tiers and relevant agencies of government, the private sector, non governmental organisations and communities should be actively involved in its implementation. An appropriate institutional framework is required to harness the activities of all sectors and to facilitate close interaction and cooperation for the achievement of population policy goals. To achieve the objectives of the policy, there should be a distinct institutional arrangement for coordination, on one hand and implementation on the other.

6.1 THE NATIONAL COUNCIL ON POPULATION MANAGEMENT (NCPM)

This shall be the highest policy making body for the implementation of the National Population Policy for Sustainable Development Membership of the NCPM shall consist of

The President, Federal Republic of Nigeria	-	Chairman
Vice-President	-	Deputy Chairman
Minister of Finance	-	Member
Minister of Health	-	Member
Minister of Education	-	Member
Minister of Labour and Productivity	-	Member
Minister of Environment	-	Member
Minister of Housing & Urban Development	-	Member
Minister of Information & Nat. Orientation	-	Member
Minister of Agric. & Rural Development	-	Member
Minister of Women Affairs & Youth Dev.	-	Member
Minister of Sports & Social Development	-	Member
Minister of Internal Affairs	-	Member
Attorney-General of the Federation & Minister of Justice	-	Member
Minister of Science & Technology	-	Member
Secretary to the Govt. of the Federation	-	Member

Head of the Civil Service of the Federation	-	Member
Economic Adviser to the President	-	Member
Chairman, National Population Commission	-	Member
Chairman, Senate Committee on Population	-	Member
Chairman, House of Representatives Committee on Population	-	Member
Surveyor-General of the Federation	-	Member
Representative of the Armed Forces	-	Member
Representative of the Police	-	Member

The National Council on Population Management (NCPM) shall:

- i. Oversee the implementation of the National Population Policy
- ii. Provide guidance for overall policy implementation
- iii. Ensure political commitment at the highest level towards integrating population and development as part of the National Development Strategy
- iv. Approve a strategic plan for policy implementation
- v. Ensure that sufficient resources and funding are available for policy implementation
- vi. Mobilize donor resources and facilitate international partnership in population issues
- vii. Report progress on the implementation of Policy to the Federal Executive Council and to the nation
- viii. Promote legislative processes that support population issues

6.2 POPULATION COORDINATION

The National Population Commission as the statutory body responsible for population policy coordination shall coordinate the multi-sectoral implementation of the programmes. To achieve this task, the Commission shall be advised and supported by two Committees, namely Population Advisory Group and Population Technical Working Group. These two groups are desirable to ensure full participation of key stakeholders in the coordination process. -

6.2.1 The Population Advisory Group (PAG)

The Population Advisory Group shall consist of representatives of civil society, traditional and religious leaders, and other eminent citizens in the field of population

Head of the Civil Service of the Federation	-	Member
Economic Adviser to the President	-	Member
Chairman, National Population Commission	-	Member
Chairman, Senate Committee on Population	-	Member
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The Population Advisory Group shall consist of representatives of civil society, traditional and religious leaders, and other eminent citizens in the field of population

and development. All the members shall be selected by the Commission. Membership of the Group shall not exceed 15 persons. The Group is to meet bi-annually under the chairmanship of the Commission.

The PAG shall be constituted at the Federal and State levels. Representation at these levels shall reflect geographic- distribution, gender and other social interests.

The mandate of the Reputation Advisory Group (PAG) shall be as follows:

- i. Provide direction and guidance for the overall implementation of the policy
- ii. Review and recommend a strategic plan for the policy implementation.
- iii. Advise Commission on means of mobilizing internal and external resources to support the implementation policy and programmes
- iv. Review policy coordination reports

6.2.2 Population Technical Working Group (PTWG)

Population Technical Working Group shall consist of representatives of all implementing sectoral ministries and agencies including relevant research institutions. Representatives from implementing ministries and agencies shall be of the level of Director. The body shall meet every two months to carry out its mandate and be chaired by the Director-General of the National Population Commission at the national level. The Group shall also be replicated at the state level. The mandate of PTWG shall be as follows:

- i. Interpret, review from time-to-time, and recommend appropriate changes in the population policy of the country and advise the Commission accordingly
- ii. Provide direction and guidance on operational strategies and targets for programme implementation at Federal, State and LGA levels
- iii. Ensure inter-sectoral cooperation among programme implementing ministries and agencies as well as full participation of Development Partners, civil organizations and the private sector in the process of policy implementation
- iv. Function in other ways that would promote effective coordination of the population policy.

The Federal and State PTWG shall meet periodically as may be determined by the NPC.

In addition to the advisory roles of the PAG and the PTWG, the National Population Commission shall carry out the overall coordination of the policy programmes and activities throughout the country. It shall facilitate and coordinate the

implementation of the policy and supporting programmes and shall *foster* linkages and harmonize activities at Federal, State and LGA levels. To achieve these, the Commission shall build appropriate human resource base trained in population field. Specifically, the Commission shall have the following roles and responsibility.

6.2.3 Federal Level

1. Recommend strategies for policy implementation to the Council
2. Advise the Council on policy revisions.
3. Prepare and submit bi-annual reports on policy implementation to the Council.
4. Provide technical and administrative support to both PAG and PTWG
5. Maintain liaison with relevant agencies of Federal, State and Local Government, the private sector, development agencies and non-governmental organizations involved in population activities to ensure adequate coordination, integration and harmonisation of population and development policies and programmes
6. Work closely with relevant agencies to coordinate the forms and levels of external assistance for population activities
7. Provide technical assistance for policy and programme implementation at Federal, State and LGA levels
8. Establish a national programme for monitoring and evaluating implementation of the policy and related programmes.
9. Identify and develop strategies for providing the human resources needed for successful policy implementation.
10. Serve as a national resource centre on population and development issues and provide information and background materials to relevant agencies.
11. Monitor the flow of materials needed for the effective management of programmes, and review the functioning of supply, logistics, and inventory systems.
12. Undertake or commission, when necessary, behavioural and policy-oriented studies and preparation of relevant technical materials and documents.
13. Work closely with relevant agencies to integrate population factors into development planning.
14. Work closely with relevant agencies to develop a database essential to policy and programme monitoring and evaluation.
15. Function in other ways that would promote effective implementation of the

- population policy.
16. Carryout other functions as assigned to foster successful implementation of the population policy

6.2.3 State Level

1. Provide technical and administrative support to both the State PAG and the PTWG
2. Provide local governments with technical support for policy and programme implementation
3. Carryout other functions as may be necessary to support implementation of the policy at State level
4. Ensure inter-sectoral collaboration with relevant institutions for population programme performance.
5. Co-ordinate, monitor, evaluate and promote implementation of population policies, programmes and activities in the state.
6. Mobilise resources to support the implementation and monitoring of population activities.
7. Promote collaboration among government agencies, civil society organisations, and private sector groups engaged in population programmes and activities in the states.
8. Work closely with relevant agencies to integrate population variables in state development planning.
9. Submit quarterly progress report to the NPC Headquarters on the implementation of population programmes and activities.
10. Work closely with federal agencies with a mandate for statistical and data collection to develop population database and guidelines' and indicators essential to policy and programme monitoring and evaluation.

6.2.5 Local Government Level

1. Coordinate, monitor, evaluate and promote implementation of population policies, programmes and activities in the LGA
2. Promote collaboration among departments and NGOs engaged in population programmes and activities in LGA
3. Work closely with Planning Unit and other relevant departments to ensure integration of population variables in LG development planning

4. Lead and facilitate the formulation and review, from time-to time of local government population plans of action
5. Assist the Local Government Planning Unit to prepare an annual work plan for population programmes
6. Advise the Local Government Executive Council on means of mobilizing resources to support implementation of specific population activities
7. Organise and carry out activities that would promote population policy implementation in the LGA
8. Promote collaboration among NGOs engaged in the field of population and development in the LGA
9. Maintain and strengthen, in collaboration with federal statistical agencies based in the state and local government, LGA population data bank
10. Report to the Local Government Executive Council progress in the implementation of specific population activities
11. Carry out any other functions that would be assigned to it by the LGPAC towards the successful implementation of population programmes and activities in the LGA

6.3 IMPLEMENTING ROLES OF GOVERNMENT AND NON-GOVERNMENTAL ORGANISATIONS

While National Population Commission will co-ordinate the population policy and programmes, the various ministries and agencies at three tiers of government will implement the programmes and activities relevant to their respective mandates. Whereas the following paragraphs deal essentially with the institutions at the federal level, it is recognised that the institutions with equivalent responsibilities at state and LGA levels will undertake similar activities.

6.3.1 Office of the President

1. Appoint and/or approve the appointment of members of the National Population Commission as provided for in the constitution of the Federal Republic of Nigeria.
2. Provide support including financial resources for successful implementation of the National Policy on Population for Sustainable Development.
3. Encourage traditional institutions, including community, religious and opinion leaders, to act as agents of change.

4. Direct the process of integration of population concerns into development planning
5. Oversee the implementation of the national HIV/AIDS response.
6. Oversee the implementation of poverty eradication programme.
7. Process and present initiated relevant bills of the National Population Commission to the National Assembly for enactment into laws.
8. Ensure appropriate and adequate budgetary allocations for population and development programmes.

6.3.2 National Assembly

1. Support the implementation of the National Policy on Population for Sustainable Development.
2. Make appropriate legislation in support of Vital Registration, reproductive health and other population-related activities.
3. Ensure timely and adequate financial approval for population-related activities.

6.3.3 National Planning Commission

1. Ensure sufficient budgetary allocations for population activities.
2. Ensure integration of population factors into development planning in all sectors.
3. Promote and extend technical assistance to sectoral agencies, in the integration of population variables into the development planning processes.
4. Develop guidelines for the incorporation of population-variables at both micro and macro planning levels.
5. Coordinate international co-operation and support for population activities.
6. Promote South-South cooperation in support of population, programmes.
7. Integrate population data into the national data bank.

6.3.4 National Population Commission

1. Collect, analyse, interpret and disseminate demographic data through censuses and sample surveys.
2. Collect, analyse and disseminate vital statistics through the operation of effective vital registration system.
3. Monitor and evaluate the implementation of national population programmes in collaboration with other appropriate bodies and agencies.

4. Disseminate regional and gender disaggregated demographic data.
5. Collect and publish all migration statistics.
6. Provide data on a regular basis to the national data bank and other relevant agencies and institutions.
7. Coordinate training on population related programmes.
8. Expand and promote the production, dissemination and utilization of population-related IEC and advocacy materials using a multi-media approach.
9. Provide training opportunities to journalists and other media practitioners in the population and development fields.
10. Strengthen media facilities for enhanced and sustained population-related IEC and BCC.
11. Provide policy guidelines on dissemination of population-related information.
12. Ensure that population concerns are integrated into training curricula of medical and other health institutions.
13. Support, promote and coordinate research activities in population, including reproductive and sexual health, reproductive rights and gender issues.

6.3.5 Federal Office of Statistics

1. Collect, analyse, interpret and disseminate socio-economic data to facilitate monitoring and evaluation of population programmes.
2. Disseminate regional and gender disaggregated socio-economic data.
3. Provide data on a regular basis to the national data bank and other relevant agencies and institutions.

6.3.6 Ministry of Finance

1. Ensure sufficient budgetary allocation and timely release of funds for population activities and full accountability of money released.
2. Support the establishment of specific budget lines for population-related activities for different line ministries and other government agencies.

6.3.7 Ministry of Health

1. Implement reproductive and sexual health services, including family planning at all levels.
2. Ensure the constant supply of contraceptives to all service delivery points.
3. Support health sector response for the prevention and control of HIV/AIDS and

4. Disseminate appropriate facility-based reproductive health messages and materials at the clinical service points.
5. Provide appropriate information and raise awareness on issues affecting healthy life style such as nutrition smoking, consumption of alcohol, harmful drugs and other substances of abuse.
6. Train reproductive health personnel to provide clinical services at all levels.
7. Support operational research activities on clinical aspects of reproductive and sexual health.
8. Set policies, standards and guidelines for reproductive health service provision.
9. Ensure the appropriate integration of reproductive health into primary health care and other level of services.
10. Update health facilities in terms of structure, personnel and equipment to ensure the provision of quality reproductive health services.
11. Ensure preventive, promotive and curative health services.
12. Strengthen referral mechanisms between various levels of health care.
13. Promote and implement the national nutrition and food security programmes.
14. Collect, analyse, interpret and disseminate health service statistics.

6.3.8 Ministry of Education

1. Intensify efforts to achieve Universal Basic Education and eliminate illiteracy.
2. Expand the integration and teaching of population and family life education into relevant subject curricula at all levels and various institutions, including nomadic schools.
3. Support population and family life education research programmes.
4. Expand the training of teachers in population and family life education.
5. Introduce population and family life into mass literacy, adult and non-formal educational programmes to cater for the out-of-school youths and adults.
6. Ensure the provision of extra-curricula population and family life education in schools.
7. Monitor the standard of teaching activities and the performance of students in relation to population and family life education at all levels.
8. Collect, analyse, interpret and disseminate education service statistics.

6.3.9 Ministry of Information and National Orientation

1. Support the dissemination of population information through the national orientation strategies at all levels
2. Mobilise available organisational structures and institutions to support population programme implementation

6.3.10 Ministry of Agriculture and Rural Development

1. Integrate population and family life education activities into the training programmes of extension workers.
2. Equip extension workers with knowledge and skills to promote reproductive health services.
3. Promote women's access to land, agricultural credit and other productive resources.
4. Promote environment-friendly and sustainable agricultural practices.
5. Collect, analyse and disseminate data on agricultural products and services.

6.3.11 Ministry of Labour and Productivity

1. Strengthen training programmes in population and family life education for workers.
2. Ensure the regular collection, analysis and dissemination of gender disaggregated employment statistics.
3. Promote policies that will ensure equitable access to employment opportunities for men and women.
4. Monitor labour practices to discourage child labour and other harmful practices in work place.
5. Promote woman and child-friendly programmes at workplaces, including creches, day care centres and breast-feeding support.
6. Promote policies that will ensure the rights of all workers, including those living with HIV/AIDS and those affected by HIV/AIDS.
7. Promote enterprise development and youth employment.

6.3.12 Ministry of Environment

1. Educate people on the impact of population and resource management on the environment and natural resources.
2. Promote the understanding of the interrelationships between population,

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7. Promote enterprise development and youth employment.

6.3.12 Ministry of Environment

1. Educate people on the impact of population and resource management on the environment and natural resources.
2. Promote the understanding of the interrelationships between population,

- development and environment.
3. Monitor the impact of population factors on the environment.
4. Monitor the generation and handling of domestic and industrial wastes.
5. Promote effective interventions for conservation of natural resources and protection of the environment for sustainable development, including tree planting.
6. Promote appropriate legislation to discourage tree-felling, bush-burning and other practices that have negative consequences on the environment.
7. Ensure that environmental impact assessments are conducted for potential development activities to assess their possible impact on the population.
8. Collect, collate, analyse and disseminate data on population-environment development interrelationships.

6.3.12 Ministry of Housing and Urban Development

1. Keep track of trends in the demand for housing in both rural and urban area and harmonise these demands with population needs.
2. Design medium to long-term plans for the development of towns and cities.
3. Promote and design programmes to improve housing and other relevant infrastructure in both rural and urban areas.
4. Collect, analyse and disseminate data on housing and related issues.

6.3.14 Ministry of Works

1. Provide and regularly maintain roads and other rural infrastructure.

6.3.15 Ministry of Power and Steel

1. Ensure sustainable energy and power supply to support productive livelihood and development initiatives.
2. Undertake IEC activities to increase understanding of the impact of energy utilisation on sustainable development.
3. Collect, analyse and disseminate data on energy generation and utilization.

6.3.16 Ministry of Women Affairs and Youth Development

1. Promote awareness of population and family life issues among women at various levels.
2. Promote and ensure the implementation of measures and activities that will

3. improve and enhance the status of women, their children and the family.
4. Advocate the mainstreaming of gender concerns into development planning at all levels.
5. Advocate the elimination of harmful practices that hinder the development of women and children.
6. Undertake IEC activities to sensitise the public on gender issues,
7. Mobilise, sensitise and integrate youth in population and development activities.
8. Advocate the support facilities such as creches, day care centres in workplaces and within local communities for working mothers.
9. Collect, analyse and disseminate data on women and youth development programmes and activities.
10. Promote the collection of gender-disaggregated data.
11. Promote economic development and self-reliance among women and other vulnerable groups through training and skill acquisition opportunities.

6.3.17 Ministry of Justice

1. Review and revise, if necessary, laws pertaining to population issues.
2. Review and amend existing laws relating to harmful practices and gender related discrimination against women.
3. Provide legal guidance and facilitate enactment of necessary laws on matters concerning population and reproductive health and rights.
4. Promote laws directed at curbing environmentally harmful activities.
5. Promote the integration of relevant international and regional charters on population and development issues into domestic laws.
6. Undertake IEC activities to increase awareness on laws pertaining to population and reproductive health and rights issues.

6.3.18 Ministry of Sports and Social Development

1. Promote and ensure the implementation of measures and activities that will improve and enhance the status of the elderly and persons with disabilities.
2. Promote awareness of the needs of the elderly and persons with disabilities.
3. Introduce social services and educational programmes to promote the family as the integral unit for supporting the elderly.
4. Introduce special programmes to support the development and integration of

- persons with disabilities into the mainstream of the society.
5. Provide recreational and other facilities for youth development activities.

6.3.19 Ministry of Internal Affairs

1. Regulate the outflow, in-flow and stay of immigrants in the country.
2. Collect data on international migration and transmit same to National Population Commission for analysis and dissemination.

6.3.20 Tertiary Education Institutions and Research Institutes

1. Provide training on population and development concerns.
2. Undertake research activities in population, reproductive health, HIV/AIDS and other STIs, reproductive rights, gender concerns, and other related issues.
3. Provide advisory services on population, reproductive health and development, including HIV/AIDS.
4. Assist in the evaluation of programmes related to the population policy.
5. Disseminate research findings widely to the public and policy makers.

6.3.21 National Leadership Training Institutions

1. Incorporate population education programmes into the curricula of institutions such as the National Institute for Policy and Strategic Studies, the Administrative Staff College of Nigeria, and other such institutions.
2. Undertake and promote research on relevant population; related concerns.
3. Encourage graduates to influence population and development policies and integrate population variables into development planning through advocacy efforts and networking.

6.3.22 Armed Forces and Police

1. Undertake IEC and BCC programmes for the promotion of reproductive and sexual health and reproductive rights of their members and families.
2. Provide quality reproductive health services to members and families.
3. Integrate population and family life education into military and police training.

6.3.23 Civil Society Organisations

1. Complement government efforts in the formulation, financing, implementation, and monitoring and evaluation of population projects and programmes.

2. Promote and support networks for reproductive health, gender, access and human rights.
3. Expand reproductive health services delivery to the community, especially to hard-to-reach areas.
4. Undertake operational research activities in innovative methods of reproductive health service delivery.
5. Collaborate with relevant line ministries and government agencies in the implementation of reproductive health, reproductive rights, BCC and other relevant population areas.
6. Collect and submit service statistics to relevant government agencies on regular basis.
7. Advocate the relevant policy changes in population-related matters.

6.3.24 Religious Organisations

1. Provide moral and spiritual instructions that will promote positive reproductive and sexual health behaviour.
2. Sensitise their members and communities on population and reproductive health-related issues including HIV/AIDS and other STIs.
3. Advocate the appropriate policy changes and programmes in reproductive health, reproductive rights and other population-related areas.
4. Promote reproductive health services consistent with their religious beliefs.
5. Promote programmes that will enhance reproductive health status, reproductive rights, and gender equity and equality.

6.3.25 Political Parties

1. Support the implementation of population programmes.
2. Provide information and education on population-development-environment interrelationship to their members.
3. Promote and advocate the appropriate policy changes in the area of population and development,
4. Integrate population concerns into party manifestos, plans and programmes.

6.3.26 Mass Media

1. Produce programmes and disseminate information on population, reproductive health and other related development issues.

2. Collaborate with other agencies in undertaking BCC campaigns on population reproductive and sexual health, gender concerns, environment and related issues.
3. Advocate the policy changes and programme in population-related areas.
4. Assist relevant agencies in dissemination of population and health data.

6.3.27 Organized Private Sector.

The organised private sector will be essential partners in policy change implementation and will complement the efforts of the Government.

6.3.28 Special Committees

The National Population Commission may choose to set up, from time to time, special committees or advisory groups to advise on particular population issues. The Commission shall liaise with donor agencies, civil society, and the organized private sector to ensure that the country derives maximum benefit from donor assistance in the implementation of the population policy.