

Joint SDG Fund

Joint Programme Final Narrative Report

PORTOFLIO ON INTEGRATED POLICY AND LNOB

Cover page

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Programme Title, Number and Country

Country: Nigeria Joint Programme (JP) title: Institutionalizing Social Protection for Accelerated SDG Implementation in Nigeria MPTF Office Project Reference Number¹: 00119082

Programme Duration

Start date²: 01/01/2020 **Original End date**³: 01/30/2022 **Actual End date**⁴: 06/30/2022

Have agencies operationally closed the Programme in its system?: Yes Expected financial closure date⁵: June 30,2023

Participating Organizations / Partners

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¹ The MPTF Office Project Reference Number is the same number as the one on the Notification message. It is also referred to as "Project ID" on the project's factsheet page on the <u>MPTF Office GATEWAY</u>.

² The start date is the date inserted in the original ProDoc submitted and approved by the Joint SDG Fund.

³ As per approval of the original project document by the relevant decision-making body/Steering Committee. ⁴ If there has been an extension, then the revised, approved end date should be reflected here. If there has been no extension approved, then the current end date is the same as the original end date. The end date is the same as the operational closure date which is when all activities for which a Participating Organization is responsible under an approved MPTF / JP have been completed. As per the MOU, agencies are to notify the MPTF Office when a programme completes its operational activities. Please see <u>MPTF Office Closure Guidelines</u>.

⁵ Financial Closure requires the return of unspent balances and submission of the <u>Certified Final Financial Statement and</u> <u>Report.</u>

⁶ Federal Ministry of Finance, Budget and National Planning



Programme Budget (US\$)

Total Budget (as per Programme Document, without co-funding): **2,000,000 Agency/Other Contributions/Co-funding** (if applicable):

Joint SDG Fund Contribution⁷ and co-funding breakdown, by recipient organization:

Agency/others	Joint SDG Fund contribution	Co-funding	Total
UNICEF	750,000	N/A	750,000
ILO	500,000	N/A	500,000
UNDP	400,000	N/A	400,000
WFP	350,000	N/A	350,000
Total	2,000,000		2,000,000

⁷ Joint SDG Fund Contribution is the amount transferred to the Participating UN Organizations – see <u>MPTF Office GATEWAY</u>.



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Executive summary

This final report highlights achievements of the Institutionalizing Social Protection for Accelerated SDG Implementation in Nigeria (Joint SDG Fund) programme. Since the launch of the Joint SDG Fund, participating United Nations organizations (PUNOs) focused on strengthening the capacity of government to respond to needs of the most vulnerable populations, particularly women and children and informal workers of marginalized groups, for an inclusive shock responsive social protection system. PUNOs working together laid the foundation for a legal framework and innovative financing towards a shock responsive social protection system for all at the federal level and strengthened Sokoto State Government social protection system including the multi-sectoral coordination and domestic funds mobilization for social protection. In light of the ongoing COVID-19 pandemic, efforts towards rights-based social protection (SP) became even more relevant, critical, and catalytic for the country, considering the number of affected citizens both in rural and urban areas.

The main objective of the Joint Programme (JP) is to accelerate key SDG targets by fostering synergies through cross-sectoral coordination while establishing a SP legal framework and expanding social protection coverage. In achieving this, PUNO's in partnership with the Government, began the work on accelerating the SDGs through SP by developing its legal framework, policies, and programmes. The primary results achieved: (1) government leadership in revising a strategic document the national Social Protection Policy and its accountability framework, as well as a draft harmonized social protection policy; (2) strengthened the Sokoto state's capacity for cash-based transfers through the production of digital cash transfer processes with integrated data and information systems for vulnerability including cash transfer provided to over 620 pregnant and lactating women; (3) institutional arrangements by establishing continuous cross-sectoral coordination and capacity building; (4) alleviate out-of-pocket expenses through provision of health insurance coverage; and (4) appropriate financing mechanism (identification of sustainable financing and study on budget allocation). These building blocks are strongly aligned with the outputs of the JP funded by the Joint SDG Fund, which revolve around three results coherent with the government's strategy.

Result 1: The implementation of a legally and financially strengthened social protection system (SDG 1.3). The JP developed a draft harmonized SP bill which includes financial provisions on social protection expenditure of the Government therefore reinforcing institutional framework to accelerate progress of social protection in Nigeria. The draft bill is yet to be presented to the Nigerian National Assembly. Estimated rate of completion as of JP end date: 95%

Result 2: The integration of cash transfer programme to alleviate out-of-pocket expenditure in contributory health insurance under a state-financed health insurance scheme for the poorest and most vulnerable (SDG 3.8). 6,000 poorest and those from the most vulnerable groups were identified and enrolled in the Sokoto state health insurance scheme. In addition, 620 pregnant women were provided with transportation reimbursement through cash transfer and basis for cash transfer to pregnant women was established in Sokoto state. In particular, the state cash transfer institutions were provided with a foundation to adopt a shock-responsive social protection approach using their cash transfer mechanism in the event of future shocks. Estimated rate of completion as of JP end date: 95%

Result 3: Established and built the capacity of six state SDGs offices to serve as an innovation hub for other states' SDGs offices. The six pilot states in Nigeria's six geopolitical zones were identified with capacity to develop and share implementable innovative solutions using social protection to overcome bottlenecks and expand financing in order to accelerate SDG achievement. The six JP hubs served as a connection for learning and sharing across states. Estimated rate of completion as of JP end date: 90%



I. Overall progress and priority, cross-cutting issues

I.1 Context and the overall approach

Ensuring an adaptive and strategic JP

The pandemic underscored the importance of accelerating social protection progress amidst the expansion of existing social protection programmes. This created a window for policy review and laws to transform the social protection system in Nigeria into a more adaptive, inclusive, and effective social protection, the overall goal for the JP. The COVID-19 epidemic delayed the implementation of some activities, but after adjustments to the project document and workplan the below highlighted were adapted for strategic implementation.

- The JP adjusted its approach across all three result areas to accelerate implementation and ensure that the results are achieved during the extension period. All planned activities were successfully completed by June 2022. The key reasons for the initial delay in 2020 were political challenges and longer-than-expected timelines experienced in establishing digital cash transfer processes in hard-to-reach communities, aggravated by the impact of COVID-19.
- Since the launch of the JP, the UN supported the Nigerian Government to review the National Social Protection Policy (NSPP) and supported the drafting of a Harmonized Social Protection Law. The initial goal of the JP was to draft a new law to cover all areas of social protection; however, through JP activities (legal mapping and engagement of stakeholders), a National Social Investment Programme (NSIP) Bill⁸ was identified, which recently passed the second reading at the National Assembly. This Bill will institutionalize social assistance and provide the necessary legal backing needed by the Ministry of Humanitarian Affairs to implement social assistance programming. The JP changed its strategy to support the NSIP Bill to ensure it follows a rights-based approach and support the drafting of a Harmonized Social Protection Bill, which brings all existing laws covering social protection with clear funding source and proper coordination.
- The JP also contributed significantly to inter-agency discussions to advocate expanded and universal SP, particularly focusing on vulnerable and marginalized communities, and contributed to the development of the Common Country Assessment (CCA) and Development Partner's Group Action plan on SP.
- The Theory of Change targeting pregnant women and newborn infants as the target cash transfer beneficiaries were adjusted to broaden the coverage to include lactating women and children under-two. This thereby addresses, through this gender-mainstreamed cash transfer activity, transportation to primary healthcare (PHC) of the needs of women most in need to increase uptake of basic healthcare services within their locality.

Link with UNDAF/ UNSD Cooperation Framework

- In line with the President's vision to lift 100 million Nigerians out of poverty by 2030 through social protection programmes and UNSDPF Outcome 6 (Protection) to implement adequately financed national and state social protection policies and systems, the Joint SDG Programme contributed to the scorecard of the UNSDPF (2018 to 2022), identified new areas of focus in the newly crafted UNSDCF (2023 to 2027) and supported the Government of Nigeria (GoN) at the national level in the drafting of the revised National Social Protection Policy (NSPP) including holding statewide and high-level consultations with ministers of key social sector ministries as well as production of draft action plan (Implementation/ Operational Plan and the Monitoring and Evaluation Framework).
- The JP at the state level supported Sokoto State Government to establish a State Social Protection Technical Working Group (SP - TWG), a coordination platform with the <u>first task of developing the Sokoto State Social</u> <u>Protection Policy</u>. With support provided to monthly TWG meetings and policy development capacity building, a draft Sokoto State Social Protection Policy (SSSPP) was developed through extensive stakeholder's engagements constituting the SP TWG, Local Government Council Chairmen, traditional and religious leaders, communities' members, and women groups representatives.
- In terms of social protection financing, the JP identified and generated evidence to inform decisions on financing options for Social Protection as well as study to generate evidence through analysis of both public and private funding allocation and spending for SP. The JP through advocacy visits to the social sector ministers, facilitated conversation for increased budget allocation to social protection. In the 2022 budget,

 $^{^{8}}$ The NSIP covers only social assistance a component of social protection.



the Government allocated 3 per cent of its budget to social investment and poverty reduction from the previous 1.8 per cent. This represents a significant percentage increase from previous years.

- The JP supported the improvement of cross-sectoral and inter-ministerial coordination for SP between the UN and government as well as between the UN and development partners.

COVID-19 impact

- The JP programme did not repurpose funds in 2020 due to COVID-19 but experienced delays due to COVID-19 mitigation and safety measures introduced by the federal and state governments as well as PUNO staffing changes. Modifications to the budget and activities in 2021 are outlined in the updated Programme Document.
- The JP, however, contributed to the United Nations Framework for the Immediate and Mid-Term Socio-Economic Recovery to COVID-19, which the UNCT developed to mitigate the COVID-19 pandemic. The UN SERP outlines four pillars to protect the needs and rights of people living under the duress of the pandemic, focusing on the most vulnerable groups and people who are at risk of being left behind. The work of JP particularly aligns with pillar 2, strengthening social safety nets through cash transfers, including through the extension of existing conditional cash transfers for the rural poor. Through the JP, the UN scaled up and expanded pro-poor social protection systems by supporting the Government of Sokoto to provide contributory health insurance coverage to 6,000 vulnerable groups and implemented cash transfers to 2,000 pregnant women and children under two who utilized the health insurance.

I.2 Update on priority cross-cutting issues

UN development system reform - UN coherence at the country level

- The participating UN organizations (PUNOs) under the leadership of the Resident Coordinator's Office (RCO), organized monthly in-person/virtual meetings of the JP team for steering the day-to-day implementation of the programme and provided updates to head of agencies and the UN RC for further advocacy at a higher level of government. In addition, the JP programme manager provided a monthly programme update to the UNCT PMT.
- For better communication outcomes and enhancing delivery as one, PUNOs contributed funds to a single source where UNICEF as the lead agency with guidance from United Nations Information Centre (UNIC) ensured that communications related to the UN Joint SDG programme were implemented holistically through a joint lens.
- In addition, PUNOs under the leadership of the RCO coordinated the contributions of all UN agencies on the National Social Protection Policy review.
- PUNOs reduced operation costs by leveraging each other's existing resources. For example, with UNICEF being the only agency amongst PUNOs with an office in Sokoto State, PUNOs relied on using UNICEF's office space for trainings, meetings and staff support as appropriate.

Going beyond "business as usual" to produce catalytic results at scale

- The traditional cash transfer mechanism in Sokoto State was physical cash through an "over the counter" method, but the JP during implementation enhanced the CBT process through the introduction of digital cash transfer, which improved the confidentiality and financial processes. Also, the noticeable digital leap of adopting a creative digital tool transformed the trained desk officers' tasks on complaint handling, confidentiality, and loop closure processes by using the digitized CFM tool. This means that all CFM-related activities will be submitted in real-time for further action using tablets, thereby drastically reducing the use of paper to collect information and hand-carried at the end of daily tasks.
- The JP also ensured that policies drafted went beyond providing narrative document and provided actionable policies by providing technical and financial support to the government to develop costed action plan and monitoring and evaluation frameworks for both the National and Sokoto State SP Policies.
- In addition, the JP implementation in Sokoto state broadened stakeholder collaboration on social protection, where 13 distinct government agencies worked together as a single entity with a clear-cut division of labor to ensure segregation of duties as well as checks and balances while striving to achieve an overall objective. Also, the JP also successfully demonstrated the way to implement the humanitarian development- peace (triple nexus) which the UN has championed for a long time. It brought both humanitarian and emergency responders in the state together with the social protection institutions, thereby setting the stage for a transformational and phenomenal Shock Responsive Social Protection model in the state.



 To help ensure that no one is left behind, PUNOs promoted an inclusive approach during the beneficiary selection by involving the community to nominate and validate the beneficiaries for the health insurance and cash transfer social protection programme implemented in the state.

SDG acceleration

The joint programme supports accelerating the implementation of the SDGs in Nigeria by focusing on specific SDGs (1, 2, 3, 4, 5, 10, and 16) and seven indicators (1.3, 2.2, 3.8, 4.1, 5.1, 10.4, 16.9 & 17.1). Each of the SDGs is intricately linked and interdependent.

- SDG 1.3 Social Protection Floors: The JP conducted legal mapping of the social protection landscape, the first step towards the creation of the Social Protection Bill. Following the mapping report, the Attorney General of the Federation engaged legal drafters to draft the Bill, and a capacity-building retreat was held to deepen the drafters' understanding of SP and promote understanding of the ILO Convention 102 and Recommendation 202. A draft bill was developed to establish social protection as a right for all Nigerian citizens and residents, adopting SP policies that will progressively achieve greater equality (10.4). An extremely important building block to establish a minimum social protection floor in the country. The JP also supported through advocacy the signing of the National Health Insurance Authority bill into law. The law made health insurance mandatory for all. The law also established the vulnerable group fund that makes available health insurance for over 80 million vulnerable Nigerians. Similarly, the JP supported the National Social Protection Policy review including the costing and fiscal space analysis for social protection as well as developed an implementation plan. In addition, the JP supported the drafting and establishment of the Sokoto State Social Protection Policy and a costed action plan.
- **SDG 3.8 Universal Health Coverage:** The JP supported the capacity enhancement of the health insurance scheme at the national and state level to ensure coverage acceleration. The recent data released by the NHIS shows that coverage has increased, though more effort is needed to reach the informal sector, which constitutes over 60 per cent of the Nigeria Labor Force. To achieve universal health coverage, including financial risk protection and access to quality essential healthcare services, the JP conducted a diagnostic study of NHIS⁹, and a capacity needs assessment of SOCHEMA¹⁰, which gave valuable insights into both institutions' challenges and opportunities. The JP also facilitated the signing of MOU between NASSCO and NHIS to ensure the use of the National Social Register for mining of beneficiaries for the Basic Healthcare Provision Fund (BHCPF). This was piloted by the Joint SDG using the NSR to mine beneficiaries for the 6,000-health insurance support. In collaboration with NHIS an actuarial valuation was performed, building capacity within NHIS on actuarial valuation which will serve other states to start their schemes based on actuarial projections and validate their parameters. For SOCHEMA (in Sokoto), the JP will provide health insurance coverage to 6,000 vulnerable groups (the poorest of the poor) and adolescent girls, including cash transfer to 620 pregnant women, lactating mothers, and newborn children (SDG 2.2). With the provision of health coverage to pregnant women, hospital birth would result in birth registration contributing to legal identity for all (SDG 16.9). In addition, preliminary results from the health and cash transfer to pregnant women in Sokoto State revealed increased enrollment of children in school (SDG 4.1).
- SDG 17.1 Domestic Resource Mobilization and 17.8 enhance the use of enabling technology. The JP supported the study for fiscal space for social protection both the national level and in Sokoto state to improve domestic capacity for tax and other revenue collection while establishing stakeholder coordination and policy coherence. The JP influenced through advocacy the creation of new budget line for social protection intervention as well as increased budgetary provision from 25 million Naira (approx. USD \$60,000) in 2021 to 220 million (approx. USD \$520,000) in the approved 2022 fiscal year state budget in Sokoto. Efforts are being made by the State Ministry of Budget and Economic planning to access these funds for the continued implementation of JP sustainable implementation plan. In addition, the digitization of the Cash Transfer programme by handing over the Management Information System to Sokoto State ministries, departments and agencies (MDAs) which aimed at facilitating key MDAs working on social protection related activities with information which will aid coordination efforts toward fostering operationalization of technology and innovative capacity-building building an inclusive, and resilient prospect. The CBT enabled information management systems(MIS) solution is key in advancing the specific SDG 1, 2, 5, and 17 goals in the JP and especially in Nigeria.

⁹ National Health Insurance Scheme

¹⁰ Sokoto State Contributory Health Care Management Agency



Policy integration and systems change

- The JP supported the drafting of the revised National Social Protection Policy (NSPP) and the Harmonized Social Protection Bill (HSPB). The JP facilitated a series of stakeholder engagement and ensured that all critical stakeholders were brought on board during the drafting process, including persons with disabilities groups, CSOs, and the private sector. This enables the NSPP and Bill to be coherent with the plan of individual MDAs implementing social protection programmes in Nigeria. The revised NSPP addresses emerging issues such as ensuring coverage to informal workers, coordination of SP, insecurity, and coverage for the urban poor. The JP also supported the development of an implementation plan and M&E framework for the Policy, which the previous Policy did not have, the plan brings together multiple agencies with the mandate on social protection to work together.
- At the Sokoto state level, the CWG is a collection of many agencies which hitherto do work in silos prior to the SDG project. The JP also supported the development of the State Social Protection Policy. The Policy was developed through an extensive stakeholder engagement, including creating the State Technical Working Group on Social Protection, review from Local Government Council Chairmen, traditional and religious leaders, communities' members, and women groups representatives. The final copy of the draft policy had been validated by the State Executive Council, which is being chaired by the State Governor.

Contribution to improvement of the situation of vulnerable groups

- JP supported the operationalization of the Sokoto State Healthcare Management Agency. As a result, the scheme kickstarted enrolment for poor and vulnerable households under the Basic Healthcare Provision Fund. With the support of the JP, over 6,000 (over 4,100 females including 1,800 pregnant and lactating women and 500+ adolescent girls, as well as over 1,600 children under 5) poor and vulnerable individuals from the four local governments areas (LGAs) of Sokoto State (Bodinga, Wamakko, Tambuwal and Wurno) have been integrated into the State Contributory Health Care Management Scheme/Agency (SOCHEMA) to enable them access free health care services for one-year through SOCHEMA. The JP supported through advocacy the signing of the law that makes health insurance mandatory for all. This law makes provision for the Vulnerable Group Fund.
- In addition, the JP provided cash support to over 620 beneficiaries comprising of pregnant and breastfeeding women and children under-two for a period of six months. The six rounds of monthly cash transfers allowed for ease of transportation to the health facilities, thereby increasing uptake of visits to the PHCs to access health services. Some beneficiaries also used surplus savings from the transfer value to cater for their food and nutrition needs. Additionally, others were innovative enough to invest the surpluses plus income from other sources to empower themselves, thereby enhancing income security through investing in some form of livelihood.
- The JP supported the state in building the capacity of 46 graduates (50 per cent women) to identify, enroll, and verify poor and vulnerable individuals for health insurance programme in line with the national and global guidelines and programme criteria. Following this development, the state also engaged these graduates in identifying and enrolling 43,000 poor and vulnerable individuals for free health care services funded by the Federal Government of Nigeria through the National Health Insurance Programme. The JP also trained 18 community volunteers to encourage beneficiaries to utilize the health insurance, building their knowledge and capacity on SP and rights to access quality health care services.
- In addition, the NSPP and Bill, both at the national level and in Sokoto state, ensure coverage for all vulnerable groups, including children, elderly, survivor and disability pensions; unemployment, sickness/injury, and health insurance; and maternity/paternity benefits, etc. Furthermore, the Bill, once approved, will ensure a rights-based approach to social protection. This, in turn, will create an obligation on the government side to provide benefits to all, including these vulnerable group. During the Policy review, the JP supported the GoN in hosting a consultation for the association of persons with disability and other CSOs to provide input to the Policy Document.
- After a subsequent advocacy visit to the Ministry of Humanitarian Affairs, there was an increase in the numbers of beneficiaries for the different social assistance programmes implemented.

Estimated number of individuals that were reached through JP efforts: Total number 6,000 direct reach, whole of Nigeria through the Policy 206,139,587

Percentage of women and girls: 71% direct reach, 49.3% of Nigerian population



Mainstreaming Gender equality and women empowerment

- The outcome of the UN Joint SDG programme accelerated SDG 5 as an outcome and addressed gender mainstreaming, ensuring that women were part of every decision-making process within the CWG and primarily trained desk officers for the cash transfer implementation. Desk officer (men and women) were trained to handle complains confidentially bearing in mind challenges that women could encounter as a result of the transfer. Thus, the scheduled cash transfers evidently reduced structural inequality and influenced plans to promptly facilitate Sokoto state government efforts to harmonize and broaden social protection coverage in the state.
- JP provided capacity-building support to local and national government officials on child rights and women's care in policy development to ensure the policy benefits women by responding to their specific rights and needs. Policy reviews also ensured women and men participation during the consultation, interview, and focus group discussions. The legal mapping study also reviewed relevant policies, legislation, and international human rights instruments related to women's rights.
- In 2020, a diagnostic study on the National Health Insurance Scheme (NHIS) was conducted through desk review and interviews. Several gender-related research questions were included in the study. The results showed that NHIS could do a lot to improve its understanding and address gender-related challenges with regard to health and health insurance. In addition, gender-aggregated and specific data is especially underlined throughout the actuarial valuation study performed by the NHIS.
- The JP also ensured that persons with disabilities and women's groups participated in the initial consultation held to facilitate the JP's focus on removing key social exclusion factors mitigating against access and utilization of basic social services by the poor, vulnerable person. Out of 226 participants during the consultation, 108 women participated (48 per cent).

Estimated % of overall disbursed funds spent on gender equality and women empowerment by the end of JP: 38%

Human rights

- The JP focused on the government's commitment to achieving sustainable development, specifically the SDGs, part of the Agenda 2030's rights-based policy framework. The Universal Periodic Review (UPR) of Nigeria from 2018 mentioned two important points related to strengthening the legal framework regarding human rights in Nigeria: (1) Continue to strengthen the implementation of policies and measures relating to democracy, the rule of law, and good governance for the effective realization of human rights in the entire country; and (2) Sustain its determined efforts in strengthening its legal and institutional frameworks to ensure the full enjoyment of human rights by its people. The Social Protection Bill developed took into account these provisions and others of the UPR.
- In addition, the JP also incorporates three CEDAW recommendations from 2017 in its implementation (1) Provide adequate human, technical and financial resources to the Ministry of Women Affairs and Social Development to enable it to effectively undertake its activities as the national machinery for the advancement of women; the JP trained 18 (13 female) CFM desk workers on PSEA¹¹; (2) Take measures to holistically address structural problems facing rural women so as to meet their needs in respect of health care, family planning services, education, employment and other basic services the JP provided health insurance coverage to over 3,000 women and girls from four rural local governments in Sokoto State; and (3) Intensify its efforts through existing and new innovative programmes that target women with disabilities to facilitate their access to health care, education, and employment and to combat all forms of discrimination against them. Through the health insurance and cash transfer programs, the JP addressed access to health care for women and persons with disability.
- The JP used a human rights lens in its implementation efforts by ensuring that all social classes and demographic populations (e.g., women, persons with disabilities, young people) who lack one form of social protection are included in consultations held and ensure that key human rights considerations are included in social protection efforts.

Partnerships

 At the federal level, the JP built-up a sustainable collaboration with the MFBNP, the Ministry of Humanitarian Affairs, and the Ministry of Labor, ministries charged with social protection in Nigeria. The JP focal person at MFBNP also chairs the project committee of the JP programme as well as the coordinator of the TWG of the NSPP Review, deepening the relationship with the Government in line with the UNDAF. During the NSPP review, ensuring that young persons are seen as partners and not beneficiaries, the JP supported the MNBP

¹¹ Preventing Sexual Exploitation and Abuse



in a two-day consultation with 30 youth groups to capture youth's comments and feedback on the NSPP review.

- The JP partnered with the Office of the Senior Special Assistant to the President on SDGs and Save the Children in organizing state consultations, advocacy, dialogues, and capacity building.
- At the state level (Sokoto State), PUNOs have a close working relationship with the Ministries of Budget and Economic Planning through its *Delivering as One* approach. Focal points were appointed from all relevant ministries, departments, and agencies (MDAs), and PUNOs held multiple group consultations. This led to the establishment of the State TWG on SP and the SP-CWG.
- The JP also partnered with the UNICEF's Communication for Development (C4D) section towards mobilizing programme beneficiaries to accelerate demand for primary health care services among the programme beneficiaries.

Mobilizing additional funding and/or financing

- The JP held its close out meeting to discuss sustainability plans and lessons learned in the implementation of the program with the government, donors and UN agencies. One of the key successes of the JP is linking cash transfer to the health sector. As a result, UNICEF's health section through funding for EU is working on expanding the programme investing ≈\$450,000 to enroll additional beneficiaries to the health insurance scheme and cash transfer. The work in Sokoto focusing on expanding cash transfer and health insurance with innovative funding streams has become a blueprint for other states to follow. In additional feedback from the donor meeting held at the end of 2021 was positive as donors expressed interested in expanding the project. The JP has identified potential in the SP space, including EU and FCDO, who are already aware and interested in the activities in Sokoto.
- The JP also supported the costing of the Implementation Plan and conducted a fiscal space analysis for SP in Nigeria which identified among others that six of the eight fiscal space options researched hold promise for financing the revised social protection plan. However, several risks exist to these options including the availability of political will, capacity to implement the recommendations. To ensure the NSPP has clear strategies, targets, tasks and responsibilities, and an effective assessment and reporting tracking goal, one of the PUNO using internal funds supported developing an implementation plan and M&E framework for the policy.
- The JP is held multiple consultations and advocacy with the government and private sector to showcase the Sokoto State insurance scheme and advocated for the continuance of health insurance coverage to the poor and vulnerable as well as cash transfer for pregnant women.
- Furthermore, to ensure a sustainable social protection programme in Sokoto, the JP influenced the creation of a specific state budget line and allocation of funds for social protection programme in the State in 2021 as a result, there was an increase in budgetary provision from 25million Naira (approx. USD \$60,000) in 2021 to 220 million (approx. USD \$520,000) in the approved 2022 fiscal year state budget.
- The JP conducted consultations in six geopolitical zones in partnership with Save the Children and OSSAP-SDGs. Save the Children supported the consultation by funding one of the consultations.
- The SDG hubs implementation was in partnership with OSSAP-SDGs. OSSAP-SDGs has commenced the expansion of the six hubs, by awarding contracts to build and equip mini complexes for each hub in the six geopolitical zones.

Type of event	Yes	No	Description/Comments
Annual JP development partners'/donors' event* ¹²			Donor meeting was held in Q3 2021 with 10 out of 12 JP global development partners.
Final JP event (closing)	\square		The final event was held with participation by government both federal and state, beneficiaries, donors and UN agencies.
Other strategic events			 High level dialogue with key social sector ministries was held on the review of the National Policy and the Harmonized Bill Lessons learnt session and framework for sustainability for Sokoto State CWG in Q2 of 2022

Strategic meeting

¹² * This refers to any event that included representatives of the Joint SDG Fund's global development partners/donors (Denmark, European Union, Germany, Ireland, Luxembourg, Monaco, Netherlands, Norway, Portugal, Spain, Sweden, Switzerland.) Please note that this event can be held together with a launch event or other partners' event.



Innovation, learning and sharing

- To ensure no one is left behind, the SDG joint programme accelerated improved healthcare by expanding the health insurance while boosting the integration of poor, especially women and adolescents, in the scheme. The project experiments the model of transferring directly the monthly 1,000-Naira (approx. USD \$2.50) premium per targeted women and adolescent girls living in poor households to the Sokoto State Contributory Healthcare Management Scheme (SOCHEMA). This was done with high mobilization of the community structures playing an important role in identifying the poor and vulnerable. The approach improves participation in the decision-making by women and adolescent girls through their access to health care. It also increases the understanding of health insurance among the vulnerable and poor, thereby creating trust.
- In addition, the creation of SDGs Accelerator/Innovation Hubs in the six states proffered tailored technical solutions to each sub-region in Nigeria. In particular, the SDGs Innovation Hubs is playing a key role in facilitating state-level policy advocacy, including feeding to state-level planning and policy implementation, acting as a learning/knowledge center on SDGs; conducting dialogues on critical development challenges at the zonal level with key stakeholders including the private sector, academia, CSOs, youth, persons living with disabilities (PLWD) and women. The hub provides experimentation on innovative solutions to critical development challenges to achieve SDGs through pilots, including funding strategies, utilizing key data evaluation and reporting mechanisms to feedback on SDG implementation progress, documenting and replicating good SDG practices, especially in regards to the use of inclusive and sustainable technologies and participatory processes, and coordination with states in the respective geopolitical zones for inclusive partnerships on SDGs.
- The JP produced studies, such as federal analysis of budget allocation and spending towards social protection, fiscal space analysis for social protection, as well as the study on health needs and supply gaps of the Sokoto State population for effective delivery of PHC service, which were shared broadly among stakeholders including government partners and broader UN agencies leveraging on the very holistic and comprehensive approach to the extension of social protection. The JP cross-sectorial approach to social protection serves as a very good example for collaboration among ministries and will be leveraged in the discussions at the policy planning level.
- Project activities and outcomes are being documented and shared with government partners and UN agencies, facilitating knowledge transfer and lessons learned to other joint UNCT programs.
- The JP has successfully introduced an innovative digital process to the cash-based transfer processes in Sokoto state, thereby strengthening the use of digital approaches and solutions in the state. With the JP handing over IT equipment to the state CWG is an assured way to promote sustainability of the digital processes and ensure sustainability.

II. Final Results

Overall progress

- □ All expected results achieved
- \boxtimes Majority of expected results achieved
- Only some expected results achieved

While the JP experienced significant delays in the first year of programming due to COVID-19, which exacerbated national limitations and structural gaps already present in the country, it achieved all expected results, specifically (1) Improving the Social Protection System at the federal level with a reinforced legal framework (Harmonized Social Protection Bill) and a financial mechanism integrated in the national budget and planning efforts; and (2) Operationalized the NSPP in Sokoto State ensuring gender-sensitive social development with reduction in poverty and improvement in nutrition, education and health for women and children (health insurance, cash transfers, policy development and coordination). The Bill was not presented to the National Assembly by the end of project, but efforts are on-going.

Contribution to Fund's global results

- **Contribution to Joint SDG Fund Outcome 1 (as per targets set by the JP)** Integrated multi-sectoral policies to accelerate SDG achievement implemented withgreater scope and scale
 - As previously highlighted, the JP supported the review of the National Social Protection Policy as well as the drafting of the National Social Protection Bill. The Policy and Bill contributes to the implementation of a legally and financially strengthened social protection system (SDG 1.3), including improved health (SDG 3.8) and education of boys and girls (SDG 4.1) and poverty (SDG 1.2) and inequalities (SDG 10.4)



reduction. Additional resources by the PUNO for the draft implementation plan and M&E framework at the national level will bring effectiveness and efficiency to the implementation of social investment programmes in Nigeria.

- The JP also completed the development of the Sokoto State Social Protection Policy in 2021. The Policy was developed through an extensive stakeholder engagement, including State Technical Working Group on Social Protection, Local Government Council Chairmen, traditional and religious leaders, communities' members, and women groups representatives.
- ➡ Contribution to Joint SDG Fund Output 3 (as per targets set by the JP) Integrated policy solutions for accelerating SDG progress implemented N/A

JP Outputs and Outcomes

Achievement of expected JP outputs

<u>Output 1.1:</u> Strengthened national social protection legal framework with the development of a social protection bill, aimed at realizing the rights to social protection for consideration by the National Assembly

- Upon completion of the Legal Mapping report in Q1 of 2021, the Attorney General of the Federation inaugurated a team of Legal Drafters to draft the Harmonized Bill. A capacity-building session for the Professional Legal drafters was held in Q2 of 2021 to deepen their understanding of the concept of social protection and promote understanding of the ILO Convention 102 and Recommendation 202.
- The legal drafters held three technical sessions for a 30-day duration to draft the Bill in the third quarter of 2021 Q3. During the technical sessions, efforts were made to convert intent into law. Pre-consultation engagement was also held with the legal advisers of the three key ministries (FMBNP, Ministry Labor and Employment, Ministry of Humanitarian Affairs) to ensure the Bill is in line with existing law and ensure their buy-in of relevant stakeholders. As a result, a draft bill was produced in the last quarter of 2021.
- Technical and capacity-strengthening support was provided to key government stakeholders to integrate shock responsiveness Social Protection approach through the development of a reinforced guideline and costed work plan to be incorporated in the state budget processes. The capacity support to the Nigerian Government and relevant stakeholders led to the completion of the national social protection policy document in at the end of 2021 ensuring that private sector groups, CSOs, and other stakeholders' input was captured through the lifecycle of the JP.
- The JP held pre-consultation engagements with the legal adviser at the three key ministries (Ministry of Finance, Budget and National Planning (MFBNP), Ministry Labor and Employment, Ministry of Humanitarian Affairs) to ensure the bill is in line with existing law and ensure their buy-in of relevant stakeholders.
- The JP supported the MFBNP in December of 2021 to convene a high-level stakeholder engagement with key ministers to discuss strategies for the approval of the Policy and the draft bill. During the engagement, the various ministers of stakeholder's ministries commit to ensuring the approval of the Policy and Bill by the Federal Executive Council (FEC).
- Through the Ministry of Budget and Economic Planning (MBEP), the Sokoto state government committed to facilitating the development of the state's multi-sectoral social protection implementation framework, which serves as a blueprint for a well-coordinated social protection programme in the State. The final copy of the draft policy was presented before the State Executive Council in the last quarter of 2021, which is being chaired by the State Government with all commissioners, Secretary to the State Government, and the State Head of Service as members of the Council.
- PUNO's internal committed resources were deployed to recruit two consultants, seconded to the Federal Ministry of Finance, Budget and National Planning to draft "*Implementation Plan"* and "*M&E Framework"* documents to enhance speedy approval of the revised National Social Protection Policy (NSPP) and promote effective implementation that is measurable.

<u>Output 1.2:</u> Increased and institutionalized social protection financing with reinforced institutional framework through identification and creation of fiscal space and setting-up of innovative financing for social protection

- The JP commissioned and completed in 2021, the study reviewing government revenue and allocation to SP in Nigeria.
- The assessment recommendations shaped the Bill's financing component and encouraged creating a trust fund and a single budget line for social protection-related expenses.
- The JP also conducted a report on the costing, prioritization and fiscal space for SP in 2022. The cost for a
 total of 19 social protection policies across four categories were assessed using the RAP model and capacity
 provided to the MFBNP to utilize the tool and adjust any three parameters per the policy described in the
 RAP model to obtain different costs scenarios. The report identified innovative ways to increase tax and



contributory revenues by 2026 to support the financing of SP as well as acknowledging that the doubledigit inflation will pose a critical risk as a key cost driver for social protection in Nigeria. For example, the current government cash transfer program provides N5,000 (approx. USD \$12) per beneficiary per month in 2022 but would need to increase by at least 56.92 per cent to N7,846 (approx. USD \$19) by 2025 due to the cumulative effect of inflation from 2022 to 2026 to provide the same benefit in the market; a similar effect resonates across all 18 policies evaluated.

<u>Output 1.3:</u> SDGs Innovation and Accelerator States identified and established with proven innovative solutions and financing towards achieving Social Protection

- From 2020 to Q1 2021, the JP successfully organized six zonal consultations in six geopolitical zones in Nigeria. The consultations identified nine innovative financing solutions and 21 quick wins for states to implement. Some innovative finance solutions include dedicating 1 per cent of state internally generated revenue (IGR) to social protection implementation, allocating 1 per cent of the state allocation to social protection and SDG implementation, and using endowment funds for health care service delivery through Public-Private Initiatives.
- For implementable quick wins, states during the consultations shared that utilization of a single state register for all beneficiaries' interventions improved social protection systems. Other quicks wins included creating or reviewing existing social protection policies every three years to ensure their responsiveness to emerging issues and challenges, and to address fundamental challenges identified during the M&E process, and lastly establishment of the State Technical Working Group (TWG) on SP with members from relevant MDAs and capacity building trainings on SP for TWGs.
- Also, the JP concluded in 2021, the zonal level consultation and training phase towards the establishment of the proposed SDG Innovation Hubs in six states and held an advocacy dialogue to harness private sector support in SDG hub establishment. The SDGs innovation hubs have been saddled with ensuring the implementation of these quick wins and innovative financing across each region. The organized Private Sector Advisory Group (PSAG) has pledged to support the establishment of the hubs. An effort is being made to group states according to the PSAG SDGs cluster for effective support.
- During the advocacy dialogue, some of the commitments made by the private sectors include a pledged by a communication giant (MTN, a network service provider) to provide an internet network to one of the state hubs (Gombe). Similarly, the recently inaugurated Amina J Mohammed Skills Acquisition Center pledged to partner with SDG hub to provide skill acquisition to the indigenes of the region. And in another state (Nasarawa), a solar tech company (ASG) pledged to train 1,300 youth on solar energy infrastructure and repairs across the state and provide solar energy technology to power the North-Central SDGs Innovation Hub.
- In 2022, the JP successful supported the hubs with working tools (laptops) and as part of its sustainability in constructing new structures (buildings) that will be fully furnished for hubs expansion in partnership with Office of the Senior Special Assistant to the President on SDGs (OSSAP-SDGs).
- The JP provided capacity support to the Nigerian Government and relevant stakeholders to strengthen national institutions responsible for SP service delivery, including issues related to transformative governance, policies, and innovation in advancing sustainable development.
- The JP successfully brokered new partnerships to achieve SP related to the SDGs, created an environment for advocacy, knowledge transfer, promoted greater awareness and understanding of various sustainable development issues related to social protection.

<u>Output 2.1</u>: The existing cash transfer scheme is expanded and basis for universal cash to pregnant women and newborn children in Sokoto laid down.

- A Capacity Needs Assessment (CNA) was conducted in 2020 for state agencies which resulted in constituting a Sokoto state-level Social Protection Cash Working Group (a subset of SP TWG) in Q2 2021
- Strengthened the capacity of the 23 CWG members from 13 MDAs to effectively implement digital CBT processes which were measured through an index, that measures a self-assessed process, and an average of the scoring of all the pathways make the final index for the capacity index. The approach adopted under this project (Training and learning by doing, otherwise referred to as the handholding approach) seems to have worked very well in improving the capacity and boosting the confidence of the Sokoto state Cash Working Group members and institutions, thereby achieving about 80 per cent improvement during the



programme period. The Capacity index at baseline was 1.2 and it increased to 2.1 at the end of the project implementation.

- The implementation of the joint SDG cash transfer led to a more inclusive TWG for social protection at the national level and also the establishment of Sokoto State CWG to anchor cash-based transfers for the state. It also strengthened the cash transfer processes by setting up a digital cash-based transfer system by provision of CBT enabled MIS solutions.
- The CWG members developed a Transfer Mechanism Selection (TMS) document in 2021 that was signed by the high-level Government TWG stakeholders, which identified the most effective cash transfer mechanism approaches feasible in the state.
- Key support is provided to CWG members to integrate shock responsiveness SP approach in the development of Standard Operating Procedures (SOPs) specific to fundamental cash transfer processes. Also, the CWG Terms of Reference (TOR) was reviewed for common learning, operational and technical collaboration, and to ultimately promote appropriate timely and quality social protection programming and implementation during emergency response and preparedness activities in Sokoto state. The CWG is able to implement, monitor, process, and report on cash distribution in Sokoto state
- The CWG members and desk officers, who are all state civil service workers, developed and successfully implemented the first digital cash transfer in the state for pregnant women and newborn children.
- Six rounds of monthly cash transfers in Sokoto state to pregnant, breastfeeding and children under-two
 allowed for ease of transportation to the health facilities, thereby increasing uptake of visits to the PHCs to
 access health services.
- The working relationship between the state agency (Sokoto CWG) and a financial service provider (FSP) was also established after a thorough financial landscape analysis, thus empowering the state institutions with adequate increased capacity to handle a large-scale cash transfer collectively with FSPs.
- Overall, the JP successfully introduced digital cash transfer processes in Sokoto State, where the state personnel led the implementation and handled Management Information Systems (MIS) through learning by doing, enrolling and processing cash transfers to the targeted beneficiaries, including the establishment of Complaints Feedback Mechanism (CFM) helpdesk.

<u>Output 2.2</u>: Universal Health Coverage at state level accelerated using the Basic Health Care Provision Fund & community-based insurance mechanisms

- The JP worked with the SOCHEMA, State Zakat and Endowment Commission (SOZECOM), and Ministry of Women and Children Affairs to identify, integrate and provide health insurance coverage to 6,000 vulnerable individuals for one-year. Distribution of ID cards was completed in 2021 for all identified beneficiaries of the JP SDGs health insurance programme commenced in the 4 LGAs in Sokoto State. Beneficiaries are able to access care..
- Prior to the implementation of the enrolment of beneficiaries into the health insurance scheme, the JP assessed the organizations capacity to fulfil its functions and developed job description for the staff of SOCHEMA to ensure alignment of organization goals and objectives to the day-to-day responsibilities of staff members across units. In addition, fifteen Training Manuals for the staff of SOCHEMA were developed and validated by the National Health Insurance Scheme (NHIS).
- The JP supported Sokoto State Government to commemorate 2021 World Universal Health Coverage Day in December 2021 as part of the state strategies to increase public awareness on the need for strong and resilient health systems to achieve universal health coverage through multi-stakeholder partners collaboration. At a press conference organized by SOCHEMA, Sokoto State Commissioner of Health, called for state and local governments and philanthropists to make bigger and smarter investments in health, and encourage diverse groups to make commitments to help move the state and the nation, in general, achieve a greater result for UHC by 2030.
- At the federal level, the JP held eight technical session and a retraining on Actuarial Valuation with the staff of NHIS on actuarial valuation, data requirement and data collection process and conducted a diagnostic study of the national health insurance scheme. This led to the passage of the National Health Insurance Authority Bill into law. The law guarantees the establishment of the vulnerable group fund and makes health insurance mandatory. There was also an increase in the coverage for health.

⇒ Achievement of expected JP outcomes

Outcome 1: By 2021, the Social Protection System has improved at Federal level with a reinforced legal framework and a financial mechanism integrated in national budget and planning efforts. A draft Harmonized Social Protection Bill has been submitted to the MFBNP for submission to the FEC and National Assembly. The



revised NSPP was also presented to the key Ministries ready for FEC approval. The financing mechanism for Social Protection is also included in the Bill based on the studies conducted. With support from the JP, there has been increased financing for social protection at the federal and state levels.

Outcome 2: By 2021, The National Social Protection Policy (NSPP) is operationalized at Sokoto State ensuring gender-sensitive social development with reduction in poverty focusing on improvement in nutrition, education and health for women and children. A state social protection policy has been developed and is ready for approval at the State Executive Council to operationalize SP in Sokoto State. Gender-sensitive social protection programmes such as health insurance and cash transfer were also implemented. The Sokoto state capacity to implement digital cash-based transfers in either humanitarian or development situation has improved from an index value of 1.2 to 2.1, (approx. 80 per cent) and the state is ready for a Shock Responsive Social Protection roll out. With capacity provided to SOCHEMA, state health insurance enrollment grew by 90% this includes the 6,000 the JP supported advocacy as well conducted in state to promote private sector in providing coverage to vulnerable population. The JP also support a billboard which provided health insurance enrollment information.

Monitoring and data collection:

In order to ensure important information in respect of inputs, processes and results are well documented, the program prioritized monitoring activities but experienced some challenges in achieving the monitoring plan due to late implementation among others. During implementation, the JP:

- Trained all stakeholders on concepts and approaches on SP to improve reporting by partners in the most
 effective way. Sessions were also conducted specifically on M&E to enable provision of oversight in
 implementation of activities as well as in the generation of activity reports. Such trainings also included
 trainings on beneficiary selection and registration for the health insurance coverage and results-based
 monitoring at the community level (i.e., open data kit (ODK) based tool and focus group discussions
 (FGDs)), health facility (standards and coverage assessment) for institutional/ operational groups such as
 the Cash Working Group and the Social Protection Technical Working Group using KIIs and FGDs guides to
 understand progress since inception.
- In addition to the trainings, data capturing tools were developed to enable enumerators to collect data for beneficiary enrollment, management as well as reporting.
- The implementing partners were supported to undertake monitoring for both processes and results, however failed to follow up as needed.

Whether the arrangements worked: To assess the different areas of the intervention (community, clinic, Cash Group and TWG) in Sokoto for baselines and progress, the JP established teams to monitor and report on each domain. The FGDs were cross tabulated across LGAs and health facilities to provide insight on advocacy issues for program improvement while the program was ongoing, while the community data served as a baseline to be used to assess progress when compared to the final program results. Follow up FGDs were done with beneficiaries to assess the change of practices and if they found the intervention useful. From the follow up FGDs, it was found that the beneficiaries became more favorably disposed to clinic-based care as against the reservations they had before the intervention. They also appreciated the intervention and particularly used the Cash Transfer to improve HH livelihood.

- The cash transfer also implemented a post-distribution mechanism to ensure that beneficiaries received the support as planned and effectively through the Complaints and Feedback Mechanism (complain desk handled by Ministry of Women Affairs) where the beneficiaries were able to provide information either positively or negatively and also the post-distribution monitoring after cycles of cash transfers. However, in a very traditional and conservative setting, some of the beneficiaries who had issues might have not come forward and could have been missed for redress.

What could have been done better: The JP acknowledges the importance of M&E in project management and should have been more emphasized during implementation, both at the different agencies level and collectively at the general coordination stage.



III. JP finalization and evaluation

Final JP evaluation and lessons learned

The date when the evaluation was launched (month/year):06/2022 The date when the evaluation report was approved (month/year): N/A^{13}

Focus for the final months of the programme were on the JP evaluation; therefore, at the time of reporting conclusions, recommendations, and lessons learned could not be incorporated into the final report. <u>An in-depth and comprehensive analysis will be provided to JP partners in September 2022, following fieldwork completion</u>. While data collection for this evaluation is not yet finalised, preliminary findings pertaining to focus group discussions (FGDs) with beneficiaries highlighted the JP's impact on these beneficiaries' lives. Beneficiaries who took part in FGDs notably emphasised the **impact of healthcare coverage at every level of the household**, i.e., fathers are less preoccupied by the lack of financial resources to adequately care for sick children, mothers can take their children to the hospital as needed without seeking approval from fathers, and children get medical treatment when they are sick – this is particularly critical during the rainy season for instance, which often triggers a peak of malaria cases. In some cases, women who received cash transfers were **able to invest those extra financial resources** into an already existing, or an entirely new, business.

By focusing on health insurance coverage, which appears to have been interpreted as the primary issue affecting healthcare provision and reception in Sokoto state, the JP however **failed to address underlaying vulnerabilities**. While the reception of healthcare coverage likely prevents residents from seeking healthcare, beneficiaries cited **damaged roads, the absence of a nearby facility, and the lack of medical staff** as the main factors preventing them from accessing healthcare. In addition, despite targeting people with disabilities, it appears that the JP did not seek to make arrangements to facilitate their obtention of healthcare, i.e., in cases where those beneficiaries have mobility issues, the provision of health insurance does not solve their most critical issue in access to healthcare.

Furthermore, the **limited number and depth of monitoring exercises** throughout the JP's lifespan prevented implementing agencies from verifying the conditions of health insurance provision and the reception of monetary assistance by cash transfer beneficiaries. This was apparent during the evaluation, where many beneficiaries on the lists shared by the JP claimed that they did not receive assistance, had a different name than the one indicated on the list, and were unaware of who the intended beneficiary was. Both **monitoring exercises and the evaluation** also identified cases where **beneficiaries across several areas said they received none or only part of the cash transfers**, but not all that they were told they were entitled to. SOCHEMA further indicated that some beneficiaries received health insurance after the JP's closure, in July 2022.

After the JP: follow-up and possibilities for sustainability of the impact and further scaling

From a high-level perspective, the evaluation captured several preliminary achievements, which will be further elaborated upon in the evaluation report. The JP primarily worked to tackle coordination issues and the lack of stakeholders engaged in the Social Protection (SP) field, both at the Sokoto state and federal level, scoring several achievements. First, advocacy and capacity-building performed by the JP, compounded by the shocks caused by COVID-19, contributed to an increase in the federal budget allocated to SP, from 1 per cent in 2019 to 3 per cent in 2021. In addition, the government approved the National Health Insurance Act in 2022 and is working to improve (expand and verify) the national registry that includes information tied to Nigerians, to facilitate and centralise health-related interventions, thereby ensuring an increased SP coverage as well as mitigating duplicates in SP programs and activities. On that note, a spokesperson for the Humanitarian Affairs Ministry stated that the SP bill at the federal level addressed a gap by clearly laying out ministries' roles and responsibilities, while another informant emphasised the role played by the CWG in Sokoto state in centralising cash transfers from various institutions.

The JP's overall strength is to have brought together multiple government stakeholders, both at the Sokoto state and federal level, at a time where it was challenging to do so due to the COVID-19 pandemic. The JP has

¹³ Due to data collection challenges reaching beneficiaries, the evaluation experienced some delays and final report is yet to be approved. It is expected that final evaluation report will be sent to the Secretariat by September 30, 2022.



also sought to engage private entities, to secure their financial contribution to SP. However, question marks remain on government institutions' ability to act as SP relays, both in terms of capacity and resources. Several key informants notably mentioned that a change in government may lead to this current SP approach to be dropped, in favour of a SP strategy designed by that new government.

While it is premature to identify the JP's contribution to SDGs, it is likely to be minimal at this stage but may have a cascading impact if state institutions capitalise on the JP's outputs. In addition, a key informant highlighted that the JP's SDG innovation hubs are not meant to be SDG acceleration labs, i.e., they seek to identify, rather than implement, innovative approaches towards the achievement of SDGs. While it will remain difficult to identify a causal link between what happens at the federal and state levels, and the JP, the work carried out by implementing agencies in Sokoto state may have inspired other states. In Zamfara state, the UN Coordinator's Office reports that government stakeholders designed an SP policy.

In addition, some sustainability plans instituted by implementing agencies include, WFP is planning to leverage the JP achievement to direct efforts to deploy the capacity of the CWG in Sokoto state to respond to the affected population by banditry as an SRSP approach. UNDP partnered with OSSAP-SDG to place the six hubs management under the state SDGs offices to ensure sustainability and monitoring hubs, UNDP in partnership with OSSAP-SDGs has included this activity in their joint SDGs work plan, and subsequently, OSSAP-SDGs will champion the sustainability of these hubs. UNICEF is developing a concept note to expand the insurance coverage and cash transfer in Sokoto using the established framework, CWG and MIS set by the JP. With the state allocating more resources to SP, the TWG meetings will continue to hold bimonthly strengthening coordination and implementation. UNICEF and ILO would continue to support the finalization of the Harmonized Social Protection Bill and coordination efforts at the federal level.



Annex 1: Consolidated Final Results

1. JP contribution to global Fund's programmatic results

Global Impact: Progress towards SDGs

Select up to 3 SDG *indicators* that your Joint Programme primarily contributed to (in relation to SDG targets listed in your JP ProDoc)

SDG:1.3

SDG:2.2

SDG:3.8

Global Outcome 1: Integrated multi-sectoral policies to accelerate SDG achievement implemented with greater scope and scale

Outcome indicators	Expected final target	Final result	Reasons for variance from planned target (if any)
1.1: Number of integrated multi-sectoral policies that accelerated SDG progress in terms of scope ¹⁴	1	2	N/A
List the policies: National Social Protection Policy Sokoto State Social Protection Policy 			
1.2: Number of integrated multi-sectoral policies that accelerated SDG progress in terms of scale ¹⁵	1	2	N/A
List the policies: • National Social Protection Policy • Sokoto State Social Protection Policy			

Global Output 3: Integrated policy solutions for accelerating SDG progress implemented

Output indicators	Expected final target	Final result	Reasons for variance from planned target (if any)
3.1 Number of innovative solutions that were tested (disaggregated by % successful-unsuccessful)	2	2	N/A
3.2: Number of integrated policy solutions that have been implemented with the national partners in lead	1	1	N/A

Did your Joint Programme contribute to strengthening of national capacities to implement integrated, cross-sectoral SDG accelerators?

Yes: Reason – The JP in Nigeria promoted inter-ministerial approach to social protection in the country and a strong foundation was laid on how to enhance humanitarian – development peace (triple nexus) in Sokoto state where both humanitarian and social protection institutions worked collaboratively to implement digital cash transfer.

🗌 No

Explain briefly:

¹⁴Scope=substantive expansion: additional thematic areas/components added, or mechanisms/systems replicated.

¹⁵Scale=geographical expansion: local solutions adopted at the regional and national level, or a national solution adopted in one or more countries.



2. Results as per JP Programmatic Results Framework- Present final JP results in the following template as per JP's Programmatic Results Framework

Result / Indicators	Baseline	Expected final target	Final result	Reasons for variance from planned target (if any)
Outcome 1a: Existence of holistic social protection bill/law	No	Yes	Yes	No Variance (N/A)
Outcome 1b: Share of public spending on social protection	1%	3%	3%	There has been an increase in SP spending by the Government since 2020 to cushion the effects of COVID-19 through the provision of food packages and cash transfers.
Output 1.1 - Strengthened national socia social protection for consideration by the N		framework with the	development of a s	social protection bill, aimed at realizing the rights to
Output 1.1a. % of key stakeholders with increased capacity/knowledge on social protection system development (gender disaggregated)	TBD	90%	80% Women = 32% Men = 68%	The JP conducted trainings on policy drafting, financing and legal frameworks for social protection. All relevant MDAs from the federal level were present. Outreach to state actors, CSOs, workers and employers was also conducted. Over 200 key stakeholders trained however, it included low participation of women due to low appointment of women in selected agencies.
Output 1.1b. Existence of social protection bill technically validated by stakeholders	No	Yes	Yes	A draft bill has been drafted and validation by the TWG.
Output 1.2 - Increased and institutionaliz fiscal space and setting-up of innovative fina			inforced institution	al framework through identification and creation of
Output 1.2a. Fiscal space determined for Social Protection	No	Yes	Yes	N/A
Output 1.2b. National Priorities in SP costed	No	Yes	Yes	N/A
Output 1.2c. New strategy designed and signed by Government.	No	NA	NA	NA
Output 1.3 - SDGs Innovation and Accele Social Protection	rator States ident	ified and established	d with proven innov	ative solutions and financing towards achieving
Output 1.3a. Number of quick wins identified for immediate implementation at the sub-national level	No	10	21	The target was exceeded.
Output 1.3b. Number of accelerated financing methods for the SDGs	0	8	10	Target was exceeded.



				zed at Sokoto State ensuring gender- rition, education, and health for women
and children				
Output 2.a. Indicator Percentage of girls/boys with access to education (disaggregated by gender)	Boys 68% Girls 54%	Boys 70% Girls 60%	Boys 70% Girls 60%	Baseline was conducted and target for 2020 set. The JP advocated for the release of funds for education cash transfer.
Outcome 2.b. Indicator. % of poor with access to health care (disaggregated by gender)	Male 27.7%; Female 72.2% (Out of 31,362 enrolled beneficiaries)	50,000 enrolled beneficiaries with access to state health care Male 40%; Female 60%	59,615 enrolled beneficiaries	Target was exceeded however; gender disaggregated data is in process but not available at the time of submission of the report. This can be provided later. Total number of people in Sokoto State with access to health care grew from 0.65% to 1.25%. A 90.08% increase from baseline.
Outcome Indicator: Percentage of poor/vulnerable girls covered by cash transfer program (disaggregated by gender)	0	2,000 pregnant and lactating women.	620 Females 100%	The lack of adequate capacity on the government side to update data of pregnant women between the time of data collection and the program implementation reduced the beneficiaries' figure after validation.
Output 2.2. Universal Health Coverage at st		ted using the Basic H	lealth Care Provisio	n Fund & community-based insurance mechanisms
Output Indicator: Percentage of girls and women covered by health insurance (disaggregated by gender)	Male 27.7%; Female 72.2% (Out of 31,362 enrolled beneficiaries)	5,000 Male = 35% Female= 65%	6,000 Male =30.1 Female = 69.9%	



Annex 2: Strategic documents

2.1. Contribution to social protection strategies, policies and legal frameworks

Strategic documents developed or adapted by JP

Title of the document	Date when finalized (MM/YY)	Focus on extending social protection coverage (Yes/No)	Focus on improved comprehensiveness of social protection benefits (Yes/No)	Focus on enhancing adequacy of social protection benefits (Yes/No)	Focus on improving governance, administration and/or implementation of social protection system (Yes/No)	Focus on cross- sectoral integration with healthcare, childcare, education, employment, food security, etc. (Yes/No)	If published, provide the hyperlink
Capacity Needs Assessment of Sokoto State Government MDAs on its cash-based transfer projects and framework processes.	04/2021	Yes	Yes	Yes	Yes	Yes	
Capacity Needs Assessment of the Sokoto State Contributory Healthcare Management Agency (SOCHEMA)	11/2021	Yes	Yes	Yes	Yes	No	
Transfer Modality Selection	09/2021	Yes	Yes	Yes	Yes	Yes	
Sokoto State Social Protection Policy	09/2021	Yes	Yes	Yes	Yes	Yes	
Report on the State Zonal Consultations to accelerated SGD implementation through Social Protection in Nigeria	06/2021	Yes	Yes	Yes	Yes	Yes	<u>June 2021</u>
Study on the review of Budget Allocation and Expenditure to Social Protection in Nigeria	09/2021	Yes	No	No	Yes	Yes	<u>September</u> 2021
Draft National Social Protection Bill, Nigeria	12/2021	Yes	Yes	Yes	Yes	Yes	August 2021
Assessment of health needs, supply gaps of PHC services for Pregnant women and newborn children, and the contributory capacity of	09/2021	Yes	Yes	No	Yes	No	November 2021



Sokoto state population to cover health insurance							
Diagnostic study of the NHIS	09/2020	Yes	Yes	Yes	Yes	Yes	
Costing, Prioritization and Fiscal Space Assessment for Social Protection in Nigeria	06/2022	Yes	Yes	Yes	Yes	Yes	June 2022
Sokoto State Social Protection Policy Implementation Plan and M&E Framework	06/2022	Yes	Yes	Yes	Yes	Yes	<u>June 2022</u>
Costed plan for Sokoto State Social Protection Policy	06/2022	Yes	Yes	Yes	Yes	Yes	<u>June 2022</u>
National Social Protection Policy Implementation Plan and M&E framework	Awaiting stakeholder validation; Draft completed March 2022	Yes	Yes	Yes	Yes	Yes	
Report titled "Narratives on strengthened capacity of Sokoto state to implement effective digital cash transfers	June 2022	Yes	Yes	Yes	Yes	Yes	

Strategic documents for which JP provided contribution (but did not produce or lead in producing)

Title of the document	Date when finalized (MM/YY)	Focus on extending social protection coverage (Yes/No)	Focus on improved comprehensiveness of social protection benefits (Yes/No)	Focus on enhancing adequacy of social protection benefits (Yes/No)	Focus on improving governance, administration and/or implementation of social protection system (Yes/No)	Focus on cross- sectoral integration with healthcare, childcare, education, employment, food security, etc. (Yes/No)	If published, provide the hyperlink
National Social Protection Policy	12/2021	Yes	Yes	Yes	Yes	Yes	

2.2. Focus on vulnerable populations

Strategic documents developed or adapted by JP

finalized wome	er Focus on children	Focus on youth (Yes/No)	Focus on older persons (Yes/No)	Focus on other group/s	Focus on PwDs (Yes/No)	Included disaggregated data by disability - and whenever possible by age, gender and/or type of disability
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	(MM/YY)	(Yes/No)				(List the group/s)		(Yes/No)
National Social Protection Policy	12/2021	Yes	Yes	Yes	Yes	Yes	Yes	No
Draft National Social Protection Bill, Nigeria	12/2021	Yes	Yes	Yes	Yes	Yes	Yes	No
Transfer Modality Selection	09/2021	Yes	Yes	Yes	Yes	Yes	Yes	No
Sokoto State Social Protection Policy	10/2021	Yes	Yes	Yes	Yes	Yes (Out of School, Displaced Persons etc.	Yes	No
Assessment of health needs for pregnant women and children	11/2021	Yes	Yes	Yes	Yes	No	No	No

Strategic documents for which JP provided contribution (but did not produce or lead in producing)

Title of the document	Date when finalized (MM/YY)	Focus on gender equality and women empowerment	Focus on children (Yes/No)	Focus on youth (Yes/No)	Focus on older persons (Yes/No)	Focus on other group/s (List the	Focus on PwDs (Yes/No)	Included disaggregated data by disability - and whenever possible by age, gender and/or type of disability
		(Yes/No)			(103/10)	group/s)		(Yes/No)
Situation Analysis of Children in Sokoto State	July 2021	Yes	Yes	Yes	No		Yes	

Annex 3: Results questionnaire

- Completed online using the following link: <u>https://forms.office.com/r/DfvPvaGfsg</u>.

Annex 4: Final report on JP evaluation

- The final evaluation report experienced some delays due to data collection and access to beneficiaries' challenges. The report would be submitted upon approval by the JP Nigeria Evaluation committee, UN RC and PUNO's by September 30, 2022.

Annex 5: Communication materials produced by JP

- Video produced on the SDG JP Implementation, Close out meeting Video
- Factsheet, Infographics, End of Programme summary PPT- Other materials including HIS stories produced by the JP