

UNFPA and the Accomplishment of Millennium Development Goals in Nigeria (2000-2016)

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Abstract

Although the Millennium Development Goals gave way to the Sustainable Development Goals in 2015, the question of how countries fared with regard to the MDG is still much a topic of discussion. Available records show that a good number of UN member states could not meet the commitments of the MDG. For some, the success they recorded in their partial accomplishment of the commitments was as a result of the help given by different agencies of the United Nations. A major player in this regard is the United Nations Population Fund. The Fund played a pivotal role in assisting Nigeria towards the accomplishment of the commitments stated in the MDGs. This study examines how the Fund has played a role in the accomplishment of the commitment in each of the eight goals specified in the MDGs. The study deployed the multidisciplinary approach towards the study and analysis of its findings. The study finds out that the UNFPA has played a major role in helping Nigeria accomplish some of the commitments of the eight MDGs. This study hopes to help situate how the agency is pivoting the accomplishment of the SDGs which is currently operational.

Keywords: UNFPA, Sexual and Reproductive Health, Millennium Development Goals, Accomplishment.

Introduction

Nigeria is the most populous nation in Africa, and it comprises of over 250 socio-linguistic groups. The country is expected to conduct its census every ten (10) years interval. The first of such exercise took place in 1956, followed by those of 1963, 1973, 1988, 1991. Based on the 1961 population figure of 35million, just a year after Nigeria's independence, the country's population jumped to 41million in 1963 and 45million in 1965. The quantum jump as exemplified by 1963 figures is indicative of 17.1% increase in two year period. Such growth rate of the country's population figure even though it is on a two year bases is a significant increase. The country's population showed consistent and rapid increases both in absolute and relative terms. 1961 with a modest population figure of 35 million people, by 2008 the figure had quadrupled. Such rapid and significant population increases portends a lot of socio-economic implications for policy makers, development practitioners as well as the general public.¹

As a member of the international community and a member of the global organization, the United Nations, Nigeria benefits from the activities of the global body. As a global body which operates largely on the wings of its specialized agencies, the UN has established itself as an organization which is all out to fulfill its mission of ensuring and promoting

development of member-states. Nigeria, as a member-state, is not left out in this situation. There are many specialized agencies of the United Nations which are operational in the country ranging from the Food and Agricultural Organisation (FAO), United Nations Educational, Scientific and Cultural Organization (UNESCO), United Nations Children's Fund (UNICEF), to the United Nations Population Fund (UNFPA) among others. Our interest in this study will however be hinged on one of these specialized agencies, the United Nations Population Fund (UNFPA).

In 1967, UN Secretary General, U Thant, proposed a fund that would assist countries in areas related to population, including research, training, and advising. When the fund became operational in 1969, its name became the United Nations Fund for Population Activities, or UNFPA. At this time, the Fund was transferred to the United Nations Development Program (UNDP), and then in 1972 it came directly under the General Assembly, but was still linked with UNDP through a shared governing council.² In 1980, UNFPA finally became a full member of the Administrative Committee on Coordination (ACC), the principal coordinating mechanism of the UN system.³

The Fund began its operation in Nigeria in 1997.⁴ It works with the Government through a "Country Framework of Cooperation" (Country Programme) and the United Nations Development Assistance Framework (UNDAF). We are present in all the thirty six (36) states of country, including the Federal Capital Territory (F.C.T), with three (3) sub-offices in Lagos, Kaduna and Cross Rivers states. The Fund's intervention within the past eighteen years (18) has helped build structures for a potentially vibrant and strong health system in Nigeria and the West Africa Region. In 2015 for example, for the first time in the history of the country, a comprehensive bill on reproductive rights and gender based violence was enacted.

Methodology

This study will make use of multidisciplinary approach in the area of data collection and analysis. It will make use of primary and secondary sources.

The primary sources include archival materials (both online and offline) from the archives of the United Nations Population Fund (UNFPA), the United Nations Children's Fund (UNICEF), United Nations Development Programme (UNDP), the World Health Organization (WHO), the Ministry of Budget and Planning, Ministry of Health, Ministry of Women Affairs, and the other ministries with a Department of Social Development, and unpublished government records. Oral information was obtained from officials of the Fund as well as beneficiaries of their social protection schemes in the North-East and other parts of the country. Other primary sources are newspaper reports from the Fund and archival sources from the National Archives, Ibadan and others.

The secondary sources used include books, journal articles, seminar, and conference papers from the UNFPA Library in Abuja amongst others. Materials were also obtained from various online platforms. There were also field work visits to the UNFPA offices in Abuja and New York respectively, the offices of the UNDP, WHO, and UNICEF in Abuja as well as the

Northeastern states of Borno, Yobe, Adamawa, Bauchi, Gombe, and Taraba. Structured interviews were conducted for Directors and officials in the several field trips.

This study employs the multidisciplinary approach by employing methods from other related disciplines such as political science, international relations, medicine, education, sociology, and statistics.

Statement of the Problem

While the initial mandate of the United Nations Population Fund (UNFPA) in 1993 to focus on population development has since changed in 1997 and expanded to ensuring universal access to reproductive health, including family planning and sexual health and population development, the question of whether or not the agency has contributed to development in Nigeria is one that is still begging for an answer. The fact that it is questionable if this agency has not been functioning as an agent of neo-imperialism or if it has actually stuck to its stated mandate makes this study necessary. It is in this context that this work is problematized using the examples of the UNFPA in Nigeria.

The idea of creating specialized agencies of an international organization is to be able to allow the international organization meet its objectives of catering to the needs of its member-states, foster development of member-states, and widen the scope for engagement in international relations. In view of the fact that the international organization cannot attend to all needs of member-states by using its various arms, creating specialized agencies become a necessity as they will be saddled with specific responsibilities and mandates that ensure the unity of purpose. This study therefore seeks to examine how well the UNFPA has been able to dispense of her mandate in Nigeria. A related issue is the extent to which the cultural agencies stick strictly to their cultural work. Many have been suspicious of the cultural institutes and perceive them as agencies established to undermine the interest of the receiving states.

More importantly, the United Nations Population Fund is one of the specialized agencies of the United Nations that has enjoyed little of no patronage and reportage from the mass and new media in the country. In fact, very few people are aware of the activities of this agency. Hence, this study aims to look at how the agency has contributed to Nigeria's social development in our time.

The study proposes to examine the origins and activities of the United Population Fund in Nigeria as well as the nature and impact of her activities on Nigeria's social development. The study examines the extent of the activities and programmes of the Fund as well as the successes of their programmes viz-a-viz the mandate and mission statement of the Fund to its beneficiary nations. The study sets out by examining the history of Fund as well as the concept of social development and how they have grown overtime. The activities and programmes of international agencies are often assumed to be of benefit to the beneficiary nation while some hold otherwise. In the light of this contestation on what the effect of the activities of international agencies have been, it is pertinent to interrogate the validity of these assumptions in Nigeria using the UNFPA as a case study.

Theoretical Framework

The theory to be deployed in this research is the social protection theory. Social protection is one of the facets of social development practice, the others being human capital development, social capital development, social planning, employment creation, asset building, microenterprise and microfinance, among others.⁵ Although there have been different definitions of social protection, depending on the perspective that it is looked at. Social protection is best captured thus:

A common definition of social protection is one which includes all public and private initiatives that provide income or consumption transfers to the poor, protect the vulnerable against livelihood risks and enhance the social status and rights of the marginalised. The overall objective is to reduce the economic and social vulnerability of poor, vulnerable and marginalised groups and, in particular, to support the poor to overcome the demand-side barriers which prevent them from accessing basic economic and social services. Such interventions may be carried out by the state, non-governmental actors or the private sector, or through informal individual or community initiatives.⁶

Before we proceed, it is important to differentiate between social protection and related terms. These related terms are social security and safety nets. Social security is primarily associated with the developed world while safety nets is primarily associated with the developing world.⁷ It is also important to point out that there are different arguments on how social protection can generally be divided. While there is a school of thought that opines that it can be divided into two⁸, there is another school of thought that opines that it can be divided further into five.⁹ Thus, we know social protection can be divided into the social insurance, social assistance, labor market interventions, traditional or informal social protection, and social care/support.

Social insurance refers to mandatory scheme that requires regular monthly contribution which serves as the pass to gain access to services in the future. Social insurance is used to manage risks such as death of one's spouse, sickness, unemployment, work hazards, and disability. On the other hand, social assistance, also referred to as public subsidies, refer to instruments used in public management to reduce the financial risk on households for procuring basic goods and work schemes.¹⁰ Labour market interventions refer to those interventions, either active or passive, for poor people who are able to work and aim to ensure and protect their right to work.¹¹ Traditional or informal social protection comes in where the formal social protections has failed and they are mostly self-funded although there can be external donations from the state or donors.¹² Social care or support are those supports the government gives the vulnerable through services such as family support systems and home-based care.¹³

The theory of social protection is viewed from three perspectives which also determines the angle from which a state or institution views and approaches it. It also determines the policy trend. It can be viewed as a human right, a tool of risk management, and an expression of minimum basic need for citizens in our civilized world¹⁴.

The rights-based approach is traceable to the International Labour Organization (ILO). This approach had its foundation in 1948 when it was stated clearly in the Universal Declaration of Human Rights that social protection is a basic human right.¹⁵ Thus, it became acceptable to the international community. In the same vein, in 2001, the ILO General Assembly also declared social security as a basic human right and later reviewed its mission statement to involve efforts to *"secure decent work for women and men everywhere" moving social protection from a policy option to an obligation for states and international governance structures*"¹⁶. This rights approach is what is adopted by developmental specialized agencies of the United Nations. This is because the history of the United Nations is replete with reaffirmations of the right of the individual to social protection.

The right to social protection is catered for in Articles 22 and 25 of the Universal Declaration of Human Rights, Article 9 of the International Covenant on Economic, Social and Cultural Rights, Article 11 of the Convention on the Elimination of All Forms of Racial Discrimination, Articles 26 and 27 of the Convention on the Rights of the Child, Article 27 of the Convention for the Protection of Migrant Workers and their Families, Articles 11 and 14 of the the Convention on the Elimination of All Forms of Discrimination against Women, and the Convention on the Rights of Persons with Disabilities.¹⁷

When viewed as a tool for risk management, social protection is examined based on its objectives which include reducing the incidence of the vulnerability of low income households with regard to consumption and access to basic services. The basis of social risk management is the protection of human capital. This protection is essentially targeted at protecting the middle class whom such vulnerabilities threaten a reduction in their lifestyle.¹⁸ The importance of this stems from the fact that the middle class plays a vital role in the development of any economy.¹⁹ The third perspective emphasises social protection as a basic need. It is often traced to the United Nations which refers to social protection as: *"a set of public and private policies and programmes undertaken... in response to various contingencies to provide assistance to families with children as well as provide people with basic health care and housing"*²⁰. This perspective is also critical to the United Nations as well as UNFPA and other specialized agencies. This explains why the UNFPA dedicates so much fund to pursuing its fundamental objectives which are entirely woven round social protection.

It is however necessary not to take for granted the rationale for social protection policy. The rationale include but not limited to the need to: develop social support for reform programmes; promote social justice and equity – and make growth more efficient and equitable; provide policy-led support to those outside the labour market/with insufficient assets to achieve a secure livelihood; provide protection for all citizens against risk (including financial crises); ensure basic acceptable livelihood standards for all; facilitate investment in human capital for poor households and communities; enable people to take economic risks to pursue livelihoods; promote social cohesion and social solidarity (social stability); compensate for declining effectiveness of traditional and informal systems for enhancing livelihood; security; ensure continuity of access for all to the basic services

necessary for developing human capital; and meeting basic needs.²¹ These rationales for social protection are classified as protective, preventative, promotive, or transformative.²² This theory is germane to this study because the role of the United Nations Populations Fund in Nigeria's social development is hinged on the principle of social protection which the Fund undertakes. Hence, the Fund seeks to ensure protection of vulnerable segment of the population and create a better living condition for Nigerians.

Findings on the Role of UNFPA in the Attainment of MDGs

With the signing of the United Nations Millennium Development Goals in September, 2005 and with the a target to hit the mark of these goals by 2015, the United Nations Population Fund (UNFPA) has been in a major player in assisting countries in the attainment of these goals.

On the first goal which is that there must be the eradication of extreme poverty and hunger, the UNFPA has been very instrumental in the achievements that Nigeria made as regards living up to the Millennium Development Goals. The UNFPA throughout the operation of the MDGs worked with government (at both the Federal and the State level), other agencies of the United Nations, and her partners to improve access to sexual and reproductive health care in Nigeria.²³

One of the concerns of the Goal 1 of the MDG is as regards the girl-child education and the UNFPA has played a very major role here. Knowing full well that Northern Nigeria is most badly affected by the issue of Girl-Child education, the UNFPA beamed its searchlight on the region by intensifying efforts in the region, particularly in Kebbi, Sokoto, and Kaduna State.²⁴ In conjunction with the Ahmadu Bello University's Population and Reproductive Health Initiative and the Bixby Centre for Population, Health, and Sustainability of the University of California, Berkeley, the UNFPA was able to create the Adolescent Girl Initiative (AGI) in Northern Nigeria through the Centre for Girl Education.²⁵ Within the over ten years of its operation, the Centre has been able to register and put over 100,000 girls back in school. This initiative involves the training of teachers, subsidy and food for the pupils, as well as funding of the education infrastructure.²⁶ Little wonder, the 2010 MDG report reads: *"The net enrolment ratio in primary education in Nigeria was 68 per cent in 2000. Since then, it has shown a slow but steady increase, especially over the past couple of years. As at 2008 the gross enrolment ratio stood at 88.8 per cent. Progress recorded from 2004 to 2007 shows that net enrolment has been on the increase"*.²⁷

The activity of the UNFPA towards promoting the education of the girl-child is also in alignment with the goal 2 of the MDG which is to achieve universal primary education. The UNFA had a collaborative effort with the Universal Basic Education Scheme to also promote this drive. The UNFPA rendered and still renders technical assistance and funding for the Scheme, particularly in the North, not just in the area of primary education but also in the place of youth literacy. With other agencies of the United Nations like the UNICEF and UNESCO as well as support from the Government of Canada and the Government of the Federal Republic of Nigeria, the efforts at ensuring universal basic primary education and

youth literacy in general yielded some positive results. For instance, the 2010 MDG²⁸ report notes that there was an improvement in youth literacy, from 64.1 per cent in 2000 to 80 per cent in 2008, thereby showing a good improvement. However, there was a much greater improvement in the enrolment rate by 2014 at it had increased to 93.67% while the survival rate (the number of kids who are able to complete their primary schooling education) is 79.9%.²⁹

The third goal of the MDG is to promote gender equality and empower women. The status of gender equality in Nigeria is encapsulated in the British Council Gender in Nigeria Report 2012 is one in which women are largely gender inequality personified.³⁰ The situation of the Nigerian woman is one of the worst in Africa in particular, and the world at large. An example of this is seen in reproductive health where maternal and child mortality rate is among one of the highest globally.³¹ In other sectors, they are way behind the men and they suffer various forms of discrimination at all fronts. The situation is worse in all the areas of focus of the Convention on the Elimination of the Discrimination Against Women (CEDAW) i.e. gender equality and empowerment in employment and income generating opportunity, education, political representation and participation, as well as health.³²

The activities of the UNFPA as regards this third goal of the UNFPA come in different phases.³³ The first phase is the efforts of the UNFPA in engaging in capacity building for programme managers as well as the sensitization of critical stakeholders such as parliamentarians, Civil Society Organizations, and policy makers at large on gender issues. The agency has always worked closely with the Federal Ministry of Women Affairs and Social Development, House Committee of the Senate, House of Representatives, as well as replicates of the committee at the level of the State Houses of Assembly, and other critical stakeholders in the area of gender equality and women's rights to achieve a lot of its proposed plans³³. One, the agency facilitates sensitization programmes for lawmakers on issues bothering on gender equality with a view to inundating them on the need to be abreast of recent trends in the call for gender equality as well as solicit the support of lawmakers towards institutionalizing gender equality in the Nigerian discourse framework.³⁴

The agency has also been at the forefront of the enactment and passage of gender sensitive policies and laws. The agency keeps sponsoring and supporting advocacy moves by Civil Societies and government partners in making sure that such laws are passed. The agency does this providing material, technical, equipment, and training support to female lawmakers so that they can promote gender sensitive legislations. For example, the UNFPA was strongly involved in the action lobbying of lawmakers towards the passage of the Child Marriage Act and the Violence against Persons Prohibition (VAPP) Act which included a proscription of all forms of FGM/C practice. This feat was made possible with the close collaboration between the UNFPA, Federal Ministry of Women Affairs and Social Development, the House Committee of both the Senate and House of Representatives on Women Affairs, women lawmakers, and the Legislative Action Coalition Against Violence Against Women (LACVAW). This collaboration has also been at the forefront on the drive

to domesticate the passage of the Conventions on the Elimination of All Forms of Discrimination Against Women (CEDAW). CEDAW is an international law which proscribes every form of discrimination against women and was ratified by Nigeria in 1985, the optional protocol was signed in 2000 and ratified in 2004 by the Obasanjo administration³⁵. The UNFPA has also supported (technical and funding) the funding of landmark cases in courts bothering on women's rights. A good instance of this is the landmark case bothering on female inheritance in Igboland where the Supreme Court ruled that the custom of not allowing a female child to inheritance in her father's house is against the principles of natural justice and thus invalid. This particular case was an ice breaker for pulling down the fabrics of gender inequality in the region.³⁶

Through its support for researches on gender-based violence and dissemination of the report of such research to its partners, the agency has been able to promote the advocacy on the need to eradicate gender-based violence in the country. These researches are passed to lawmakers and Civil groups and the outcome of such researches have been instrumental to the passage of gender-based violence laws across states in Nigeria. To the credit of the UNFPA and its partner agencies and groups, passage of gender-based violence laws have sailed through in the South but faces much opposition in the North where Section 55(1)(d) of the Penal Code allows for the beating of a woman for correction. They have also supported prosecution for people who have been involved in gender-based violence in a bid to make it serve as deterrent to others.³⁷

The UNFPA has not ceased to continue to partner with the media and political parties as well as INEC to implement the 35% affirmative action. Between 2000 and 2015, the UNFPA liaised with the People's Democratic Party, the Alliance for Democracy, the Conference of Nigeria Political Parties, and other political parties on the need to increase the number of political slots and offices allocated to women. This has yielded some results as some political parties did not just reduce the amount paid as nomination forms by women seeking elective offices but also ceded some slots to women politicians in their parties. A good example is the Peoples Democratic Party action in 2011 and 2015 in this regard.³⁸

The Goals 4 and 5 of the MDG are both in the area of reproductive health. Goal 4 bothers on the reduction of child mortality while Goal 5 bothers on improving maternal health. These two goals are very important for Nigeria given the fact that the country has the highest record of child mortality in the world and also contributes 10% of the world's maternal mortality.³⁹

The UNFPA has played and continues to play a pivotal role in the reduction of child mortality. The role it has played in bringing about a drop in child mortality and improving maternal health takes different forms. On the first plane, we have the UNFPA assisting in the evolution of quality health services including obstetric and neonatal care in public and private facilities across the country through its idea of supporting advocacy activities and policy interaction aimed at ensuring an implementation of all maternal health and child mortality policies. The UNFPA provided technical support to both the Federal Ministry of Health and the State Ministries of Health to encourage them to harness her (UNFPA's)

existing partnerships with the Maternal Neonatal and Child Health (MNCH) Centre as well as work closely with the Reproductive Health Working Group for the implementation of National maternal health and child mortality policies of the government at both the centre and the states.⁴⁰ The UNFPA advocated the funding and implementation of the roadmap for the reduction of maternal and neonatal mortality and Integrated Maternal, Neonatal and Child Health strategy.⁴¹ Given that the mandate to ensure the reduction in child mortality and improve maternal health is a joint mandate to the UNFPA and other UN specialized agencies such as the UNICEF and the WHO, the UNFPA partners with these concerned agencies of the UN and other stakeholders in the health sector to strengthen state chapters of MNCH groups in the country. This technical support provided by UNFPA included supporting the Federal and State Ministries of Health and the National Primary Health Care Development Agency (NPHCDA) towards developing an effective Strategic Health Development Plan across the states of the federation. The support also included the training of Community Health Extension Workers, nurses, doctors, and midwives from select Primary and Secondary Health Care facilities across the country with a view to improving their knowledge in the provision of maternal health services.⁴²

The agency ensured that it funded the sector by procuring equipment for select facilities as well as the renovations of some underprivileged centres, particularly those in remote communities in the Northeast and Northwest regions. This has been made possible with the help and support of its donor partners such as the Department of International Development, the United States Agency for International Development, the Canadian International Development Agency, and the Japan International Cooperation Agency.⁴³

The success of the move to reduce child mortality and improve maternal health services is seen in how the country's rating in child mortality, infant mortality (Infant mortality rate is the number of infants dying before reaching one year of age, per 1,000 live births in a given year), neonatal mortality (Neonatal mortality rate is the number of neonates dying before reaching 28 days of age, per 1,000 live births in a given year), and maternal mortality (Maternal mortality ratio is the total number of women who die at pregnancy and childbirth, per 100,000 live births. The data gathered are estimated with a regression model using information on fertility, birth attendants, and HIV prevalence) has improved between 1960 and 2016 which marked the end of our period.

As at 2016, the child mortality rate for Nigeria was 104.3 deaths per 1,000 live births. It fell gradually from 307.4 deaths per 1,000 live births in 1967 to 104.3 deaths per 1,000 live births in 2016.⁴⁴ The same also applies to maternal mortality ratio. The maternal mortality ratio for Nigeria fell gradually from 1,250 deaths per 100,000 live births in 1996 to 814 deaths per 100,000 live births in 2015.⁴⁵ In 2016, neonatal mortality rate for Nigeria was 34.1 deaths per 1,000 live births. Neonatal mortality rate of Nigeria fell gradually from 71.4 deaths per 1,000 live births in 1967 to 34.1 deaths per 1,000 live births in 2016.⁴⁶ In the same vein, infant mortality rate of Nigeria fell gradually from 182.8 deaths per 1,000 live births in 1967 to 66.9 deaths per 1,000 live births in 2016.⁴⁷

Table 1: Rate of child mortality, maternal mortality, neonatal mortality, and Infant mortality between 2004 and 2016

Date	Child mortality rate per 1,000 birth	Maternal mortality rate (Deaths per 100,000 births)	Neonatal mortality rate (Deaths per 1,000 births)	Infant mortality rate (Deaths per 1,000 births)
2016	104.3		34.1	66.9
2015	108.0	814.0	34.7	69.0
2014	111.6	820.0	35.5	71.0
2013	115.6	821.0	36.3	73.3
2012	120.0	819.0	37.0	75.7
2011	124.6	824.0	37.9	78.3
2010	129.6	867.0	38.8	81.1
2009	134.8	883.0	39.7	83.9
2008	140.3	829.0	40.7	87.0
2007	146.0	884.0	41.6	90.0
2006	151.9	890.0	42.6	93.2
2005	157.9	946.0	43.7	96.5
2004		986.0		

The table was culled from <http://knoema.com/atlas/Nigeria>

The goal 6 of the MDG bothers on combatting HIV/AIDS, malaria, and other diseases and this had been discussed in the previous subtopic. The study revealed that the intervention of the UNFPA is anchored on improving gender-responsive and equitable HIV/AIDS preventive services for women and youth in different states of the federation and at the Federal level⁴⁸. The pilot programme was meant to take care of twelve states but has now been extended to twenty-four states.⁴⁹ The Fund has been able to achieve this by partnering with stakeholders – both government, agencies, and civil societies – to help states develop and execute the Youth Action Plans in their states in line with the National Plan of Action. These stakeholders have been instrumental in facilitating and supporting the review, dissemination, and use of relevant national policies.⁵⁰

Goal 7 of the MDG is about ensuring environmental sustainability. This goal encompasses a lot of issues but that which concerns the UNFPA is as regards the provision of good water, sanitation, and hygiene which in the overall create burden for both women and children. Suffice that the high child mortality rate is attributed to diseases and infection. Safe drinking water is a human right and a basic requirement for good health. Microbiological contamination of drinking water can lead to diarrhoea diseases including shigellosis and cholera. Other pathogens in drinking water can cause hepatitis, typhoid, and polio myelitis. Drinking water can also be contaminated with chemicals with harmful effects on human

health. Thus, the need to ensure supply of good water is necessary to stem the tide of child mortality. Access to safe water and sanitation is a serious challenge for Nigeria. This crisis is heightened during emergencies where the plight of women and children is given little attention. The sanitation sector suffers from weak institutional capacities, a low level of professional manpower and low levels of private sector capacity and participation, coupled with an absence of rural water-supply infrastructure. There is often no single accountable line ministry or clear budget line. This results in weak sector leadership, poor coordination between actors, wastage of resources and a lack of accountability. Additionally, the lack of priority accorded to sanitation in national and international development strategies results in low levels of investment by governments and aid agencies alike.⁵¹

Climate change affects every country in the world – from extreme weather events and changing weather patterns to the rising sea level and disrupted national economies. These effects will only grow worse with time. Urgent action is needed to reduce greenhouse gas emissions and to mitigate and adapt to climate change's impacts.

To this end, the UNFPA, during such emergencies, distributes '*dignity kits*' to women. These kits contain menstrual pads, soap, underwear, and other essential supplies to help women and girls maintain their health, hygiene and sense of dignity, even under dire circumstances.⁵²

In view of the fact that urban migration takes a toll on the facilities in such urban communities, the UNFPA worked with its partners in both the Federal Ministry of Housing and Environment as well as the States Ministries of Housing and Environments to promote inclusive urbanization, including by improving access to health care and opportunities in urban slums. UNFPA also advocates for the welfare and sustainability of urbanizing communities, and helps gather data about their needs. In concert with government at both the centre and in the states, the UNFPA worked with governments to better understand how population dynamics affect the changing climate and how people can become resilient in the face of these changes. With partners, UNFPA developed Demographic Exploration for Climate Adaptation (DECA), which has been of immense help to policymakers to see where vulnerable populations are and what hazards they might face. This information can form the basis of policies for planning more sustainable infrastructure and reducing disaster risks.⁵³

Goal 8 of the MDG concerned the development of a global partnership for development. By this, it is aimed that developed countries will give a hand to developing ones to help the latter develop. The UNFPA kept undertaking this goal through its global partnership with government agencies of developed countries such as the Department for International Development (United Kingdom), United States Agency for International Development (United States), the Canadian International Development Agency (Canada), and the Japan International Cooperation Agency (Japan); and other non-governmental agencies such as the Bill and Melinda Gates Foundation among others. The UNFPA gets funding from these agencies which it invests into its plan in Nigeria as well as other countries where it operates.⁵⁴

Conclusion and Recommendations

One cannot deny the fact that the UNFPA has broken many grounds within its less than four decades of being in the country. The coming of the Programme led to many things in government circle and this includes increased government attention to things that really matter. The country has been able to make some leaps but that is far from saying all is well. This is what is captured on the Programme's website.⁵⁵

While after our period, the UNFPA has proceeded to working on new areas such as the Sustainable Development Goals which came into operation in 2016 and the Programme has started recording some landmark achievements in that regards. Essentially, Nigeria has been a huge financial workload for the Programme, hence, it has to rely on financial support from donors and partners. It is important to note that the achievements recorded by the UNFPA can be premised on various factors. A first factor is its ability to collaborate with a lot of stakeholders, both on the local front as well as on the international front. The local partners help in carrying the message to the end users while the international partners provide the technical and financial support to push its plans. Another factor is the use of the media, particularly the electronic media. The UNFPA leveraged on this to make some milestones which made it possible for the message to reach many. One of the most successful media outreach was the TV series titled, *I Need To Know*, which was a UNFPA-packaged programme for Adolescent Sexual and Reproductive Health purposes. The programme which ran on air for over two years was such a success that the Ghana office had to adopt the series⁵⁶. The soap succeeded in education adolescents on their sexual and reproductive health. Other success stories included its joint media campaign on the use of condom, family planning, among other things. While the media usage comes at a huge cost, inspite of the waivers given at times by the media stations, they have become the most effective tool for couriering the message of the UNFPA.

Major recommendations derived from this study are germane to addressing the low areas in Nigeria cultural diplomacy practice. Thus, the study provides the following recommendations:

1. As much as there is government collaboration with the agency, there is still need for better collaboration with the agency. It is important that government shows commitment by profiling the officials that interact with the agency so that they will be individuals who will not want to stifle their operations all in search for tips or feathering their nests.
2. UNFPA, even in the face of a yearly audit of its actions and finances, still needs to profile Non-Governmental Organizations that it partners with because it is discovered that some of them are actually with the intents of just having access to the finance which the agency gives for her project.
3. There is also the need for intensive media engagement by the agency. It is quite pathetic that in spite of her activities, very few know about such activities. The agency will need to deploy the instrument of both conventional and new media to push out its projects to the people.

4. The government should make available effective funding for the propagation of cultural diplomatic activities abroad by Nigeria. Nigerian cultural attaches abroad should be strengthened and accorded more financial and material attention to effectively portray a positive image for Nigeria cultural richness. This should be a stop-gap measure pending when a dedicated cultural institute is established.
5. As much as the activities of the UNFPA are positive, there is the need for the government to put in place necessary and comprehensive legislation and reinforce existing ones which will regulate the activities of international agencies.

Conflict of Interest

I declare that there is no conflict of interest whatsoever in the undertaking of this research.

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Endnotes

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