Project Title: Institutional Support: Centre for Population and Environmental Development (CPED)

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1. Executive Summary

1.1 Research Quality

During the TTI phase 2, CPED research quality was enhanced by the ability of CPED to recruit and retain six full time senior research staff at the level of Research Professors and Senior Research Fellows. They took leadership positions in the various in-house research and externally supported research projects of CPED during the period. Furthermore, the services of two middle level research staff partly paid for by TTI Phase 2 were retained. The middle level research staff contributed to CPED research activities while they were simultaneously mentored by the senior research staff of CPED. Furthermore, due to the increased tempo of CPED’s research activities during TTI phase 2, the existing number of active associate senior research staff has been retained and additional ones were appointed. The associate research personnel were significantly involved in the implementation of some CPED in-house research and externally funded projects. The success of the research proposals prepared during the TTI Phase 2, which can be explained by the improved quality of research personnel, led to the enhanced funding available for research in CPED. Overall, CPED research programs were carried out in the six research themes of CPED’s strategic plan, 2014-2019 i.e. Climate change; Gender and development; Health Systems and health care delivery; Education and Development; Growth, development and equity in Nigeria; and Peace building and development in the Niger Delta region.

CPED’s Code of Research Conduct and Research Ethics which was developed during TTI phase 2, provides a framework for good research conduct and governance of all research programs carried out during the period. The Research Ethics Code underpins CPED’s commitment to maintaining the highest standards of integrity, rigour and excellence in all aspects of its research programs and for all research to be conducted according to the appropriate ethical, legal and professional frameworks and standards. One indicator of the improved overall quality of CPED research and the associated outputs is the number of external peer reviewed publications which increased from three per annum during the period before phase 2 to an average of ten per annum during TTI phase 2. Publications were in the form of journal articles, chapters in books, peer reviewed monographs and peer-reviewed occasional papers. Overall a total of fifty peer reviewed publications were made during TTI phase 2.

1.2 Organizational performance

During TTI phase 2, CPED improved its management system through a series of seminars, training, mentoring which were provided within CPED and by external bodies. One key area in which the management system of CPED was enhanced remarkably is its finance management. Training and mentoring was provided to the staff of the Finance Division on financial management issues. As part of the improvement in organisational management of CPED during phase 2, support for the training and mentoring of CPED middle level and lower level Research staff were provided. During TTI Phase 2, CPED adopted the policy of mentoring junior researchers because this has been found to be cost-effective rather than training PhD students
that takes a considerable time to materialise. Three of these mentees completed their PhD programs during TTI phase 2. Finally, as part of the mentoring of junior researchers, financial support was provided for some of them to undertake their own small scale research projects under the mentoring of senior researchers. During TTI phase 2, fifteen such small scale research projects were completed by mentees and ten peer review articles emanating from them were published.

During TTI phase 2, CPED strategic plan, 2015-2019 was prepared by CPED staff and approved by the Board of Trustees thereby enhancing the capacity of CPED to prepare its strategic plan without engaging the services of external consultants. In order to prepare for the end of TTI support of core funding to CPED by March 2019, the Management and Board of Trustees decided to intensify resource mobilisation by preparing a new resource mobilisation plan to cover the period 2017-2021. The plan is being implemented with some degree of success by sourcing for funds locally, nationally and internationally on the basis of the stipulations of the plan. The Mobilisation Plan will continue to guide the fund raising activities of CPED after the end of TTI in March 2019. However, the expected 15 per cent annual increase in core funding for CPED was not achieved during the TTI phase 2 because of the economic recession in Nigeria that has affected the capacity of public and private sectors to contribute to CPED activities.

The Board of Trustees of CPED has approved the appointment of Engr. Job Eronmhonsele as the Deputy Director of CPED in 2018 having acted in that capacity since 2017. Indeed, CPED benefitted from the Organizational Leadership, Management and Governance Support program of TTI in which Engr. Job Eronmhonsele who was the beneficiary was empowered by training within and outside Nigeria on the leadership and management of non-profit organisations.

1.3 Policy linkages/engagement, communications and outreach

A total of fifteen Community-based intervention projects were executed during TTI phase 2. A total of over 1,500,000 people have benefitted directly and indirectly from these programs. At the same time three Senior and five junior researchers have acquired skills in the conception and implementation of intervention/outreach programs. One significant outcome of this collaboration has been the scale up of the successful interventions by the relevant government agencies. During the TTI phase 2, CPED identified and worked with over 35 key public policy making organs/agencies with respect to each of the six research themes of CPED. In this context, CPED interacted and collaborated with these government organs to influence policy and build sustainable network links.

With the trainings and mentoring given to the Head of the communications Division of CPED during phase 2, there have been improvements in CPED website and social media practice. Apart from the empowerment of the Head of Communications Division, two other staff of the Division were also trained to improve their capability in dissemination of research outputs and outcomes to policy makers. As stated earlier, CPED web site was redeveloped and improved upon to enhance its effectiveness in communications. CPED has also revised the formant and orientation of its policy briefs to emphasize actionable policy recommendations. CPED is now more capable of delivering research communications with policy makers and other stakeholders including members of the public. As a result, the number of invitations to CPED staff and associates to
attend conferences and seminars and make presentations through CPED website has improved tremendously. There has also been a significant increase in the number of CPED followers through the social media pages. For example, the number of followers on the twitter page from October, 2015 to March 2019 increased with about 45%.

2. Synthesis of results

The core support provided by TTI since 2009 has added value to CPED’s policy-oriented research work. CPED has been concerned over the years with the translation of research results to policy and this has been a major challenge. The involvement of policy and decision makers as well as providers and users in most of CPED programs during TTI phase 2 has enhanced the translation of its research results into policy. With respect to research staff, the TTI core grant brought considerable capacities and behaviour changes primarily with respect to improved research capacities, participation in collaborative research as well as significant exposure to research networks. The action research projects implemented during TTI phase 2 provided opportunity for the participating junior researchers and project staff of CPED to acquire skills such as action research methodology, field data collection, data processing and analysis, research report writing, project management and presentation of research findings and recommendations to policy makers.

Changes in behaviour of those making policy decision on various aspects of governance and development were promoted by the participatory research methodology of CPED research projects, which was adopted in the implementation of TTI phase 2 projects. Stakeholder participation was promoted at all stages of these projects, from development of the project proposal to refinement of the research design and data collection instruments, to interpretation of research findings, translation of results into action programmes and strategies and to the eventual delivery of results to a broader array of stakeholders and interested parties. This approach has brought considerable changes to the way policy makers and other stakeholders view research output and those who carry out research in that they are now more willing to work with researchers to find evidence-base solutions to Nigeria’s varied development challenges. The new ideas and understanding generated by the collaborative research programs have contributed to influencing the intellectual and policy environments in which decisions regarding development strategies are made in different parts of Nigeria.

TTI core support coupled with other external grants empowered CPED to host a number of large scale collaborative research programs. This enabled CPED to assemble the best researchers on the issues examined in various research projects. Consequently, the different institutions and personnel from those institutions that are involved in the implementation of these collaborative projects have brought various skills and experiences that contributed remarkably to the successful implementation of various action projects. During the TTI phase 1 CPED moved from depending on project funding to core funding which stabilised its funding. This has been reflected in the success and achievements of TTI phase 2 in that many research activities were carried out without waiting for donor supported projects. The main lesson arising from this is that core funding coupled with capacity building support is absolutely necessary for the sustainability of think tanks in Africa where governments do not support research centres.
TTI phase 2 and other externally funded projects attracted by CPED led to collaboration between CPED and various universities and other think tanks in Nigeria. The execution of TTI phase two projects and other externally funded projects entailed partnership and collaboration with the University of Benin, Benson Idahosa University, Delta State University, Western Delta University, Women’s Health Action Research Centre (WHARC), Centre for the Study of the Economies of Africa (CSEA), Intervention Council for Women in Africa (ICWA), and over ten Federal and Government Ministries and Departments in different parts of Nigeria. With the enhanced research and management capacity of CPED arising from TTI core funding which started from phase 1 in 2009, CPED was able to attract project funding from various donors including IDRC, European Commission, UNDP, WHO, various government Ministries in Nigeria etc. These donors further enhanced the financial resources available to CPED for the execution of action oriented research projects. The relationship between CPED and these donors was managed by the respective project implementation committees set up and the Program Officers of the various donors who visit CPED and project sites regularly and interact with the project team and beneficiaries.

4. Problems and challenges

A key challenge of the process of implementing action research projects during TTI phase 2 refers to what we can call a novel approach to engaging policy makers in the research process in Nigeria. CPED TTI phase 2 action research programs provided unique experience in policy research in Nigeria and all stakeholders contributed to making success of CPED projects. The strategy of engaging policy makers was a major challenge because engagement in research with stakeholders including policy makers is still relatively new in Nigeria. This has led to devoting considerable time and energy to mobilising, consulting and soliciting the participation of key stakeholders in the implementation of the project. It was difficult organising meetings with policy makers they are generally quite busy. However, with patience and endurance there was relative successes in working with policy makers in different parts of Nigeria.

5. Reflections and Recommendations

The role and engagement of IDRC through the TTI program officers responsible for overseeing the implementation of TTI core funding have been very good and extremely supportive of the implementation of CPED TTI activities. We appreciate, considerably, regular communications with IDRC and the guidance provided in various aspects of the implementation of TTI phase 2. The visits by IDRC and TTI Program Officers to CPED over the period of implementation have been remarkable and valuable. We must emphasize one key positive role of IDRC/TTI in the implementation of phase 2. This relates to the appointment of consultants who are experts in various fields such as health, peace building, communications, project management, etc. These experts have worked with CPED to effect the changes brought to the organisation in the implementation of the various projects under TTI phase 2.

From the perspective of CPED Board of Trustees, Management, staff and other stakeholders, we make one major suggestion to IDRC. This relates to the fact that while we appreciate the contribution of IDRC/TTI to the development of CPED through the TTI core funding, think tanks in Nigeria and indeed other parts of Africa are yet to mature and be sustainable. We pray that policy makers in Nigeria will begin to appreciate the value of research. However, there is no doubt that IDRC and other donors must continue to play key roles in promoting policy-oriented
research in Nigeria and many other parts of Africa for many years to come as part of programs designed to alleviate poverty, promote socio-economic development and address the challenges of policy engagement. We strongly recommend that IDRC and its donor partners demonstrate their continuing commitment to supporting a sustainable research culture in Nigeria by providing some form of core funding to think tanks.

2. Objectives and Progress towards Milestones

This report outlines the progress and achievements made in the implementation of TTI Phase 2 support to CPED during the implementation period i.e. from 1st October 2014 to 31st March 2019. The report focuses on the overall organizational objectives related to the three pillars of (1) Research Quality, (2) Organizational Performance, and (3) Policy Engagement.

2.1 Research Quality

2.1.1 Objectives:

The objectives of the research quality component of TTI Phase 2 programme are as follows:

- Strengthen research capacity by ensuring a critical mass of in-house senior researchers is retained to lead key research priority areas within three years;
- Increase the annual success rate of research proposal submissions to national and international funding agencies;
- Carry out at least five high quality in-house policy and action-oriented research projects of CPED’s research agenda for 2014 – 2019;
- Implement and institutionalize quality assurance processes for research ethics and scientific quality of CPED’s action research outputs; and
- Improve overall scores received from external peer reviews, year on year.

2.1.2 Achievements and Progress towards Milestones

2.1.2.1 Strengthen research capacity by ensuring a critical mass of in-house senior researchers is retained to lead key research priority areas within three years

CPED was able to recruit and retain six full time senior research staff at the level of Research Professors and Senior Research Fellows which are partly paid for by TTI Phase 2. They took leadership positions in the various in-house research and externally supported research projects of CPED during TTI phase 2. It should be added that only three of these senior research staff are partially paid for by TTI Phase 2. This indicates the increasing sustainability of CPED in terms of retaining senior research staff during phase 2. It should be added that one of the former middle level staff supported by TTI Phase 1 funding, Dr. Johnson Dudu, who completed his Ph.D. and met the criteria for advancement has been promoted by the Board of Trustees to the rank of Senior Research Fellow. He was appointed the Acting Director of Research. This we believe will enhance his capability in research coordination, especially proposal writing.

Furthermore, the services of two middle level research staff partly paid for by TTI Phase 2 were retained during the period and they contributed to CPED research activities while they were at
the same time being mentored by the senior research staff of CPED. There are at present nine staff in this category. They have obtained their Masters degrees and some of them are working on their Ph.Ds. CPED has also retained the ten young graduates working as graduate assistants in its various in-house and externally funded projects. They, in addition, have the opportunity of being partially supported for postgraduate studies if they are admitted for higher degree programs. Due to the increased tempo of CPED’s research activities as a result of TTI phase 2 support and increased resource mobilisation, the existing number of active associate senior research staff has been retained. The associate and temporary research personnel are involved in the implementation of some CPED in-house research and externally funded projects.

2.1.2.2 Increase the annual success rate of research proposal submissions to national and international funding agencies

CPED research staff prepared an average of seven research proposals to international and national agencies per year during TTI phase 2 and on the whole twelve were successful with four funded by IDRC, one by European Commission and seven funded by the Nigerian Government and private donor agencies in Nigeria. The success of the research proposals prepared during the TTI Phase 2 enhanced the funding available for research in CPED. Consequently, research activities were carried out in the six research themes of CPED’s strategic plan, 2014-2019 i.e. Climate change; Gender and development; Health Systems and health care delivery; Action Research on Education and Development; Growth, development and equity; and Niger Delta region with focus on peace building and development.

2.1.2.3 Carry out at least five high quality in-house policy-oriented and action-oriented research projects of CPED’s research agenda for 2014 – 2019

The in-house research activities undertaken by full time research and associate research staff of CPED focused on the six research themes of CPED identified in its current strategic plan. Overall, a total of thirty-five different research projects were carried out by CPED’s senior and middle level staff during TTI Phase 2. As noted above, research activities were carried out on the six research themes of CPED identified in its current strategic plan, 2014-2019. Some examples of the research activities carried out are outlined below:

(i) Research activity on climate change in the wetland and coastal regions: With funding from TTI Phase 2 which has allowed research support to be provided coupled with resource mobilisation, research is on-going on this research theme. The specific research titles being investigated include: “Climate change induced migration and the savannah grasses invasion of the forest zone in Edo state, Nigeria” “Climate change, migration and conflict in Nigeria wetland areas” and “Empowering women as key leaders in promoting community-based climate change adaptation and disaster risks reduction initiatives in Niger Delta region”

(ii) Research activity on health systems and health care delivery: The research topics at present being investigated are: “Participation of community stakeholders in health care management in Nigeria”, “Patterns of primary Health care in Kogi State” “Improving Maternal and Child Health (MNCH) in Underserved Rural Areas of Nigeria through Implementation Research” funded by
TTI. There was also an IDRC externally funded research project on primary health care in Delta State which was successfully completed.

(iii) Research activity on growth, development and equity: Among the research topics investigated are: “Poverty patterns and indicators in Ondo and Delta States”, “The impact of poor power supply on small scale rural production in Nigeria” and “Patterns of income distribution among farmers in Delta State”.

(iv) Research activity on gender and development: With funding from TTI Phase 2 which has allowed research in this theme. The research topic at present being investigated is “The impact of social services distribution on the rural women in Nigeria” “Gender violence in the Niger Delta rural communities”.

(v) Research activity on Niger Delta region, peace building and development: The research topics investigated include: “Post amnesty peace building in Niger Delta and implications for development at the local level”. A book has been peer reviewed and published titled “Governance, Sustainable Development and Peace Building in The Niger Delta: Challenges and Pathways”.

(vi) Strengthening the health system in Nigeria through improved equitable access to Primary Health Care (PHC): The Case of Delta State, Niger Delta region: This research programme funded by IDRC/WAHO commenced in April 2013 and the findings have been presented to policy makers and other stakeholders including practitioners. The Steering Committee which was constituted in the Delta State Ministry of Health to promote policy engagement has been effective and novel at least in Nigeria. The project involved two senior CPED research staff, four associate staff, four middle level and five low level staff. A detailed report of the project was presented to IDRC/WAHO in Dakar in February 2016.

(vii) Amnesties for Peace in the Niger Delta: a critical assessment of whether forgiving crimes of the past contributes to lasting peace: This research programme funded by IDRC/Carnegie Peace Building programme commenced in October 2013 has been presenting the findings to policy makers and other key stakeholders at the state and federal government levels. The project involved two senior CPED research staff, three associate staff, three middle level and four low level staff. Four key peer reviewed monographs on the outcome of the research have been published and uploaded on CPED web site.

(viii) Other activities being carried out in promotion of the broader goal of improving research quality: CPED staff participated in various workshops, conferences, seminars, etc. during TTI phase 2.

The outputs and outcomes of the various research projects were reflected in policy changes in many states in Nigeria and also in peer review publications that enhanced the profile of CPED as a major Think Tank organisation in Nigeria.
2.1.2.4 Implement and institutionalize quality assurance processes for research ethics and scientific quality of CPED’s action research outputs

During TTI Phase 2, CPED research ethics document was approved by CPED Management and its Board of Trustees. It has been published and circulated widely to guide researchers working in CPED. CPED’s *Code of Research Conduct and Research Ethics* provides a framework for good research conduct and the governance of all research carried out by the CPED. The Code underpins CPED’s commitment to maintaining the highest standards of integrity, rigour and excellence in all aspects of its research. The *CPED Code of Research Conduct* is a fundamental component of CPED’s research environment, which is characterised by CPED’s culture of research integrity, good research practice, and the development and training of researchers at all stages of their careers. The *CPED Code of Research Conduct* outlines the duty of researchers including their responsibilities towards all participants of research including humans, animals, the environment and cultural materials, and it provides a basis for the transparent and appropriate communication and dissemination of research findings. The *Code* is consistent with the vision and mission of CPED as they relate to research and is the basis for applying research integrity in the Centre’s research activities.

2.1.2.5 Improve overall scores received from external peer reviews during TTI phase 2 years

During TTI Phase 2, CPED staff and associates were able to increase the number of and quality of publications emanating from the research projects carried out. One indicator of the improved overall quality of CPED publications is the number of external peer reviewed publications which increased from three per annum during the period before TTI phase 2 to an average of ten during TTI phase 2. Publications were in the form of journal articles, chapters in books, peer reviewed monographs and peer-reviewed occasional papers. Overall a total of fifty peer reviewed publications were made during TTI phase 2.

2.2 Organizational performance

2.2.1 Objectives

The objectives of the organisational performance component of the Phase 2 programme are as follows:

- Improve the organisational management system of CPED in order to pursue the Centre’s tailored objectives;
- Consolidate the Centre’s capacity in strategic planning process by preparing a new five-year strategic plan, 2015 – 2019;
- Promote CPED’s long-term sustainability strategy by institutionalizing RM planning and effective implementation.
- Through implementation of CPED’s Resource Mobilisation (RM) plan 2015-2016, achieve fifteen per cent increase in core funding of total institutional budget;
• Appoint a Deputy Executive Director for CPED in the third year of the TTI Phase 2 (2017) who will be mentored for two years for subsequent appointment as substantive Executive Director of CPED in 2019’’

2.2.2 Achievements and Progress towards Milestones

2.2.2.1 Improve the organisational management system of CPED in order to pursue the Centre's tailored objectives

During TTI phase 2, CPED improved its management system through a series of seminars, training and mentoring which were provided within CPED and by external bodies. One key area in which the management system of CPED was enhanced remarkably is its finance management. Training and mentoring was provided to the staff of the Finance Division on financial management issues. These trainings and mentoring resulted in the acquisition of the appropriate accounting software for CPED. The training of Finance Division staff on the use of the software was carried out. The improvement in the financial management of CPED was demonstrated when the IDRC Grant Administrator from Ottawa commended the financial management of CPED, although suggestions for improvement were also made by him. As part of the improvement in organisational management of CPED during phase 2, support for the training and mentoring of CPED middle level and lower level Research staff were provided. During the Phase 2 period, CPED adopted the policy of mentoring junior researchers because this has been found to be cost-effective rather than training PhD students that takes a considerable time to materialise. In this context, five junior researchers who are on their Ph.D. programs were mentored on research methodology as well as participation in major research projects. The knowledge they acquired from this mentoring were used in their higher degree training in various universities. Furthermore, some of them contributed remarkably to the research projects of CPED and also published peer reviewed papers. Three of these mentees completed their PhD programs during TTI phase 2. Finally, as part of the mentoring of junior researchers, financial support was provided for some of them to undertake their own small scale research projects under the mentoring of senior researchers. During TTI phase 2, fifteen such small scale research projects were completed by mentees and ten peer review articles emanating from them were published.

During TTI phase 2, CPED strategic plan, 2015-2019 was prepared by CPED staff and approved by the Board of Trustees thereby enhancing the capacity of CPED to prepare its strategic plan without engaging the services of external consultants. The strategic plan was later presented to key stakeholders and then distributed to partners and associates including policy makers in different parts of Nigeria. The CPED strategic plan 2015-2019 partly provided the framework for the implementation of TTI phase 2 activities. It also provided the framework for monitoring the achievement of the various targets set for CPED programs as a whole and those of TTI Phase 2 programs and activities.

2.2.2.3 Promote CPED’s long-term sustainability strategy by institutionalizing Resource Mobilisation planning and effective implementation

In order to prepare for the end of TTI core funding support to CPED by March 2019, the Management and Board of Trustees decided to intensify resource mobilisation by preparing a
new resource mobilisation plan to cover the period 2017-2021. The plan was prepared and approved by the Board of Trustees as the framework for the increased mobilisation of revenue for CPED activities. The plan is being implemented with some degree of success by sourcing for funds locally, nationally and internationally. The plan will still guide fund raising by CPED after the end of TTI in March 2019.

2.2.2.4 Through implementation of CPED’s Resource Mobilisation (RM) plan 2017-2021, achieve fifteen per cent increase in core funding of total institutional budget

The implementation of CPED’s resource mobilisation activities entailed visiting different states in Nigeria to solicit for collaboration in the execution of various development projects and preparing research proposals to national and external funding agencies. Some success was achieved in the approval of grants from some state governments in Nigeria as well as from external funding agencies. However, the expected 15 per cent annual increase in core funding for CPED was not achieved during the TTI phase 2 because of the economic recession in Nigeria that has affected the capacity of public and private sectors to contribute to CPED activities.

2.2.2.5 Appoint a Deputy Executive Director for CPED in the third year of the TTI Phase 2 (2017) who will be mentored for two years for subsequent appointment as substantive Executive Director of CPED in 2019

The Board of Trustees of CPED has approved the appointment of Engr. Job Eronmhonsele as the Deputy Director of CPED in 2018 having acted in that capacity since 2017. Indeed, CPED benefitted from the Organizational Leadership, Management and Governance Support program of TTI in which Engr. Job Eronmhonsele who was the beneficiary was empowered by training and mentoring within and outside Nigeria on the leadership and management of non-profit organisations. It is the hope of the Board of Trustees that Engr. Job Eronmhonsele would take over the leadership of CPED as Executive Director when the present incumbent steps aside some time in 2020.

2.2.2.6 Support for the training and mentoring of CPED middle level and lower level Research staff

During TTI Phase 2, CPED adopted the policy of mentoring junior researchers because this has been found to be cost-effective rather than training PhD students that takes a considerable time to materialise. In this context, five junior researchers some of whom are on their Ph.D. programs were mentored on research methodology as well as participation in major research projects. The knowledge they acquired from this mentoring were used in their higher degree training in various universities. Furthermore, some of them are contributing remarkably to the research projects of CPED and also publishing peer reviewed papers in international journals.
1.4 Policy linkages/engagement, communications and outreach

2.3.1 Objectives

The objectives of the policy linkage and communications’ component of the Phase 2 programme are as follows:

- Carry out outreach/intervention programmes on socio-economic development and poverty reduction activities from findings of CPED’s research;
- Implement and institutionalize communications strategy to promote the utilisation of independent policy research findings by various levels of government through effective engagement with policy makers;
- Provide communications staff training to build capacity based on skills self-assessments;
- Strengthen website and social media practice and usage monitoring systems within two years;
- Improvement of publications portfolio within three years;
- Develop policy influence and/or intervention strategies for development issues in i) primary health care, ii) climate change, and iii) peace building in Niger Delta region of Nigeria, within three years.

2.3.2 Achievements and Progress towards Milestones

2.3.2.1 Carry out outreach/intervention programmes on socio-economic development and poverty reduction activities from findings of CPED’s research

A total of fifteen Community-based intervention projects were executed during TTI phase 2. These focused on peace building, maternal and child health, primary health care, community empowerment, promoting participation in free and fair elections, climate change adaptation, etc. Most of these intervention/outreach programs were implemented successfully in collaboration/partnership with policy makers at the national, state and local governments as well as private organisations. A total of over 1,500,000 people have benefitted directly and indirectly from these programs. At the same time, three senior and five junior researchers acquired skills in the conception and implementation of intervention/outreach programs. One significant outcome of this collaboration has been the scale up of the interventions by the relevant government agency. An example of this collaboration and scale up is outlined below with respect to promoting key stakeholders in the conduct of free and fair elections in Nigeria.

“Promoting Community-embedded women and youth participation in the electoral process in the remote wetland areas of Nigeria’s Niger Delta region: An intervention project funded by TTI/IDRC”

The Challenge/problem

Informed and active citizens’ participation ensures genuine and competitive political processes. Elections must be inclusive, wherein all constituents are able to participate freely: men and
women, urban and rural populations, youth and all ethnic and religious groups. In Nigeria considerable efforts have been made to improve the performance of the National Electoral Commission (INEC) that conducts national elections over the years. However, there is the major challenge of conducting free and fair elections in the environmentally challenging wetland areas of the Niger Delta region. During elections, the wetland areas of Akwa Ibom, Bayelsa, Delta and Rivers States often report election results that are generally outrageous. In fact, elections in these states are known to be won by the fake results from the wetland areas. The difficult environment in these areas poses considerable challenges to electoral officials, security agencies and election monitoring personnel. Politicians in these states exploit the environmental constraints of the wetland areas to their advantage by engaging in different forms of election malpractices at the expense of the people in these localities. If fair and free elections are to be conducted in the wetland areas of the Niger Delta, there is need to build the capacity of key stakeholders, particularly the youth and women to play major roles in the election process. The project responded to the need to build the capacity of women and youth groups in the wetland localities of the Niger Delta region so that they can be effective participants in ensuring the conduct of free and fair elections in 2019 and beyond.

**Goal and Objectives**

The project’s goal was to promote increased women and youth participation in elections in the remote wetland areas of Nigeria’s Niger Delta region so as to promote improved election outcomes during the 2019 elections and thereafter. The specific objectives are: (i) To engage key policy makers in the Independent National Electoral Commission (INEC) and State Independent Electoral Commissions (SIECs) in the implementation of the action in order to enhance the adoption and scale up of the project’s outcomes; (ii) To document the challenges facing the conduct of free and fair elections in the wetland communities of the Niger Delta region; (iii) To develop and promote appropriate strategies that will ensure the participation of women and youth in the conduct of free and fair elections and other political processes in the wetland areas of the Niger Delta region; (iv) To build the capacity of women, youth groups and other vulnerable groups to participate in the conduct of elections in their communities; (v) To support the empowered women, youth organisations and vulnerable groups on responding to the challenges facing their participation in the electoral process; (vi) To facilitate networking among women and youth organisations and between them and INEC and SIECs on free and fair elections.

**Target groups and beneficiaries**

The target groups and beneficiaries were as follows: (i) 35 members of the Project Steering Committee comprising INEC/SIEC decision makers, project team members and other stakeholders including the representatives of political parties; (ii) 150 members of the 5 Local Government Project Implementation Committees comprising representatives of local government officials, women and youth groups, elders and other civil society groups; (iii) 500 leaders of community-based groups in the 5 target local government areas to be empowered to work with their members in ensuring free and fair elections; (iv) At least 1,500 members of the target local government areas to benefit from the empowerment and promotion of participation in the electoral process.
Activities Carried out

To achieve the project objectives three broad categories of interrelated activities were carried out as follows: The first category was designed to engage key policy makers including INEC/SIECs officials in the action entailing (i) Setting up Project Steering Committees in each target local government area; The second category of activities focused on the capacity building of women and youth groups entailing (ii) The design and development of community-based and gender-sensitive electoral participation process relevant to the challenges of the Niger Delta wetland areas; (iii) Training workshops for women and youth organisations on their participation in the electoral process (iv) Facilitating the establishment of networks of women and youth organisations and INEC/SIECs. The third category of activities focuses on (v) Working with the empowered women and youth organisations to raise awareness and support their participation in the electoral process in 2019 and beyond; and (vi) Monitoring the trends in the performance of the empowered women/youth organisations before, during and after the 2019 elections and in subsequent elections.

Outcomes and the influence of the project on public policy with respect to the conduct of elections

The successful implementation of the intervention project led to the following outcomes including the adoption of the policy recommendations in the conduct of the 2019 general elections in the Niger Delta region as follows: (i) The project led to increased engagement of rural women and youth organisations in the five target local government areas in the electoral process during the 2019 elections, which were often ignored in favour of urban-based ones; (ii) Women and youth groups were empowered on the challenges facing the electoral process in their communities as well as measures to improve the situation during the 2019 elections. This result was achieved by the various capacity building activities of the project; (iii) Women and youth groups were empowered to play active roles in the electoral process such as voter education, election monitoring and observation, participation in political party activities and seeking political offices through elections. These results were achieved through various capacity building and sensitization activities carried out by the project in the target communities; (iv) Women and youth organisations in the wetland areas of the Niger Delta which were isolated in various rural communities were networked with INEC/SIECs officials for active collaboration in promoting improved electoral process; (v) Increased response and adoption of the recommendations by the policy makers in INEC/SIECs to challenges facing free and fair elections in the wetland areas of Niger Delta. Consequently, INEC focused its social mobilisation activities in rural communities targeting women and youth during the preparation for the 2019 elections. This positive response by policy makers was achieved largely by their engagement in the implementation of the project; (vi) There was improved free and fair election results from the wetland areas of the Niger Delta during the 2019 elections compared with previous elections; and Policy makers in INEC/SIECs have integrated community-based mobilisation of key stakeholders as a key component of the promotion of free and fair elections in the wetland areas of Niger Delta in particular and other parts of Nigeria in general. The strategy is also adopted by State Electoral agencies (SIECs) in which community-based mobilisation for participation by using key community-based stakeholders as the major actors.
2.3.2.2 Implement and institutionalize communications strategy to promote the utilisation of independent policy research findings by various levels of government through effective engagement with policy makers

During the TTI phase 2, CPED identified and worked with over 35 key public policy making organs/agencies with respect to each of the six research themes of CPED. In this context, CPED interacted and collaborated with various government organs to influence policy and built sustainable networks. Publication and circulation of key policy makers of 45 policy papers and policy briefs on the main research themes of CPED were carried out during TTI phase 2.

2.3.2.3 Provide communications staff training to build capacity based on skills self-assessments

With trainings given to Head of the communications Division during the phase 2, there has been considerable improvement in CPED website and social media practice. Apart from the empowerment of the Head of Communications Division through exposure to a series of training and mentoring, two other staff of the Division were also trained to improve their capability to disseminate research results to policy makers and other relevant stakeholders. Furthermore, CPED web site was redeveloped and improved upon to enhance its effectiveness in communications. CPED has also revised the formant and orientation of its policy briefs to emphasize actionable policy recommendations. CPED is now more capable of delivering research communications with policy makers and other stakeholders including members of the public.

2.3.2.4 Strengthen website and social media practice and usage monitoring systems within two years

Following the implementation of the planned activities in TTI phase 2 with respect to the strengthening of its web site, there has been considerable improvement in CPED website and social media practice. The current website has witnessed some improvements such as integration of social media links - twitter handle, face book handle for easy access to CPED social media pages. Also the feedback mechanism of the current website has been enhanced. This has equally increased the number of visitors to the site. As a result, the number of invitations for CPED to attend conferences and seminars and make presentations through CPED website has improved tremendously. There has also been a significant increase in the number of CPED followers through the social media pages. For example, the number of followers on the twitter page from October, 2015 to March 2019 increased with about 45%.

2.3.2.5 Improvement of publications portfolio within three years

As noted earlier, publications in the form of journal articles, chapters in books, peer reviewed monographs and peer reviewed occasional papers increased remarkably, during TTI phase 2. Overall a total of fifty peer reviewed publications were made during the period.
2.3.2.6 Develop policy influence and/or intervention strategies for development issues in i) primary health care, ii) climate change, and iii) peace building in Niger Delta region of Nigeria, within three years

Following the successful implementation of three major projects focusing on primary health care, climate change, and peace building in Niger Delta region of Nigeria, CPED has in collaboration with policy makers articulated strategies adopted by policy makers for the improved delivery of primary health care, adaptation to climate change and peace building strategies in Niger Delta region of Nigeria. Three examples of this collaboration and influence on public policy are outlined below with respect to i) primary health care, ii) climate change, and iii) peace building in Nigeria.

1. “Improving Maternal and Child Health (MNCH) in Underserved Rural Areas of Nigeria through Implementation Research: An intervention project funded by TTI/IDRC”

The Challenge/problem

Maternal and child health (MNCH) are of great social and public health concern, because the causes of deaths are known and preventable. According to United Nations Fund for Population Activities (2012), maternal mortality ratio in sub-Saharan Africa is 500 per 100,000 live births, while World Bank (2013) estimate of maternal mortality ratio in Nigeria is 630 per 100,000 live births. Similarly, new born and child mortality rates show corresponding high rates. These high ratios are indications of poor maternal and child health which have been attributed to issues of availability, accessibility and non-use. Maternal and child mortality patterns in Nigeria are partly explained by social, cultural and environmental conditions. Often, maternal and new born danger signs are usually first treated with herbs and women only seek medical care when the condition worsens. This situation will likely continue to present a challenge unless some innovative strategies are put in place in rural areas. Much of the research on MNCH issues is done in the academic domain and they have focused on a few aspects of the demand side, largely in terms of physical access without simultaneously examining the supply side. Promoting change in MNCH care delivery and use in vulnerable rural communities is therefore challenging due to knowledge barriers and service delivery gaps, traditional cultural beliefs and practices, lack of social support networks, financial constraints and inaccessibility of health units. Furthermore, less attention has been paid to implementation research in Nigeria entailing the production of evidence on the best ways to support the adoption of, and optimize use of innovations in MCH care. The ability to test diverse MNCH implementation pathways and to identify what works in rural community settings is critical to the improvement of MNCH care in Nigeria.

The intervention program was conceived to contribute to the improvement of MNCH care in rural communities in Nigeria though implementation research entailing knowledge generation, proposing and testing innovative MNCH care approaches, and promoting knowledge translation and scaling up. The proposed project was therefore in line with the Innovating for Maternal and Child Health in Africa (IMCHA) of IDRC and focuses on the first of its four priorities i.e. “high-impact community-based interventions: implementing and evaluating technologies and services that directly affect maternal, newborn, and child health, by working through the communities
they live in”. The project was demand driven because MNCH care is a high development priority for the federal and various state governments in Nigeria. Consultations were made with the Delta State government where the project was carried out for its support and participation in the implementation. There was enthusiastic interest and desire for participation in its implementation as reflected in the involvement of key policy makers even in the preparation of the proposal.

**General and Specific Objectives**

The goal of the project is to improve MNCH care in rural areas in Nigeria through the implementation of an innovative community-based MNCH model. The specific objectives of the project addressed knowledge development (research), intervention (delivery of services) and knowledge translation (influencing policy and scaling up) as follows: Knowledge development: To examine the main characteristics of the delivery of MNCH care services in rural communities. The Intervention: To improve MNCH care in rural communities by strengthening the use and availability of services by implementing an intervention in selected rural communities; and Knowledge translation and intervention scaling-up: To translate the research evidence and intervention outcomes into policy and scale up.

**Activities Carried out**

The research component of the project entailed the conduct of across sectional survey using both quantitative and qualitative methods. Quantitative surveys of rural health facilities with particular focus on MCH issues. Five data collection tools for service delivery facilities, staff, client exit and annual number of antenatal registrations and births and household surveys focusing on household members, recently pregnant women, and mothers with children 12 to 23 months were used. Qualitative methods entailing the use of ethnographic technique, interview with key informants, focus group discussions and participant observation that facilitated more detailed exploration and linking of perceptions about determinants of access to MCH, the quality of care provided community participation in governance and possible options for improving equitable access were also used. Ethnographic technique interview to explore ways that socio-cultural traditions and customs as practiced by mothers in rural communities was used. Data analysis was based on the 4As of PHC with respect mainly to MCH – availability, accessibility, affordability and acceptability. Descriptive statistics were used to define the availability, accessibility, affordability and acceptability of MCH services as well as participation in governance.

The key intervention activities on improving MNCH outcomes implemented include: (i) Mobilisation of community members for participation; (ii) Constitution and training of Community-based Implementation Committees; (iii) Facilitated communities to develop action plans to address and monitor MNCH challenges; (iv) Supported the provision of some basic facilities for MNCH facilities; (v) Promoted community outreaches on ANC, PNC and immunization; (v) Worked with community groups to reduce under-five mortality from disease through hygiene promotion and increased access to clean water; (vi) Trained PHC health staff on the innovative delivery of MNCH; and (vii) Facilitated MNCH referral system to secondary and tertiary health institutions.
With respect to knowledge translation, a step-wise and multi-pronged approach was adopted to increase the likelihood that the findings generated by the action research were utilized in policy making and the scaling up of the outcomes in Delta State and other parts of Nigeria. The major components of the approach in the project include: (i) Involvement of the policy makers in the preparation of the proposal which facilitated the adoption of the policy outcomes; (ii) Setting up Implementation Steering Committee of policy/decision makers so that they can be integral part of the process that led to the policy recommendations; (iii) Inclusion of two policy makers as members of the Research Team which helped to tackle policy barriers to scale up; (iv) Policy dialogues with senior policy makers during which intensive discussion were held with policy makers; (v) Integration of intervention MCH services into the existing PHC systems; and (vi) Extensive communication of the project outcomes entailing the following: (i) Feedback meetings of research findings with stakeholders in the target LGA to which relevant state and local government officials will be invited. In addition, private sector and civil society personnel including the representatives of the target communities will also take part in the feedback briefing during which policy issues emanating from the findings will be discussed and the conclusions communicated to policy/decision makers. (ii) Organization of policy linkage meetings with senior policy makers in the Delta State Executive and Legislature during which the key findings and policy issues from the research and the intervention will be presented. (iii) Advocacy activities on the outputs and outcomes of the project will be largely implemented by the recently empowered communications and advocacy unit of the CPED, thanks to the Think Tank Initiative, which is responsible for CPED’s communication and interaction with policy makers on various socio-economic development issues in Nigeria. The tools used include: information leaflets, webinars, newsletters, summary reports, policy briefs and articles in peer reviewed journals.

Outcomes and the influence of the project on public policy

In the first place, the MNCH project in the course of its implementation reached some of the remote rural communities in Delta State that have not benefitted from any form of interaction with researchers for a long time. One major outcome of the project in the remote rural communities relates to the empowerment of users of MNCH. The project has promoted the empowerment process in the target rural communities that allows women in particular to gain the knowledge, skill-sets and attitude needed to cope up with MNCH utilisation.

Secondly, the establishment of the Community Health Insurance Scheme (CHIS) using Okwabude Primary Health Care (PHC) facility as the treatment and care centre was among the key intervention outcomes of the project. Although, registered members have long commenced receiving services, the project team saw the need to officially flagged-off the scheme so that other key stakeholders across the state can learn from the initiative and continue to reflect on possible scale up. The occasion which took place in August, 2017 at Okwabude Primary Health Care centre, was witnessed by eminent personalities across the state- including directors and permanent secretaries of key ministries and agencies in Delta state, local government executives across the state, community member within and outside the project location, community leaders including women leaders, local NGOs, Advocacy groups, private investors, business owners, among others
Thirdly, changes in behaviour of those making policy decision on MNCH in Delta State were promoted by the participatory research methodology. Policy makers’ participation was promoted at all stages of the project, from development of the project proposal, data collection, interpretation of research findings and the translation of results into action programmes. The major outcomes of their participation was the acceptance of the implementation activities and the outcomes which were translated into the scale-up of the outcome of the project in other communities in Delta State in particular and other parts of Nigeria in general.

The MNCH project recognised the fact that in the context of Nigeria, the most effective means of disseminating research to policy users is through direct, interpersonal contacts. In view of the critical issues examined in the project, policy makers must trust that the information they received is reliable and credible. In Nigeria, policy makers will often rely on personal contacts with researchers they trust. Sustained and substantive communication engenders trust. In the context of MNCH project the points of contact include policy makers with jurisdictional responsibility in the topic area of the research i.e. the Delta State Ministry of Health, the Delta State legislature and the various Okpe local government officials. The Steering Committee meetings have records of the commitment of the Delta State Ministry of Health to the scale up of the experiences of the project in other parts of the state if it is successfully implemented which is what the project aims at. In deed the Community based Insurance Program promoted in the intervention project has become a model which the Delta State Government is encouraging other communities to emulate. The Delta State Ministry of Health’s involvement has contributed to the acceptance by the policy makers of the outcome of the project since they were involved in the implementation. It should be added that CPED has collaborated with policy makers in the Delta State Ministry of Health on four health intervention projects in Delta State in the past five years and there is mutual understanding on the need for collaboration in the implementation of future projects on health related issues. Thus the impact of CPED action research projects on health policy formulation and implementation is remarkable.


The Challenge/problem

Most rural communities in Nigeria’s Niger Delta region are vulnerable to the impacts of climate change because of the high dependence on rain fed agriculture for their livelihoods. Yet the level of awareness of climate change is low. People still believe that the environmental problems of the Niger Delta are due only to oil exploration. Enhancing local adaptive capacities with the full participation of a range of community stakeholders would strengthen the resilience of communities. The project aims to contribute to the reduction of the negative impacts of climate change in the vulnerable communities of Bayelsa State by enhancing the capacity of two of the communities to respond to climate change through the implementation of adaptation strategies. Community-based adaptation to climate change refers to strategies that help communities adjust to the impacts of climate change so that they can have healthy lives and livelihoods. Building 'adaptive capacity' in communities depends on integrating local and traditional knowledge of women and men with new and innovative ideas and strategies.
Community-led initiatives are essential if ownership of adaptation efforts is to occur so as to ensure that efforts are sustained. Full community participation also relies on the strengths and knowledge that exists in communities, based on generations of working hard with the resources and capabilities that they have. The inherent resilience in communities in Niger Delta region must be built upon to enable local people to have a greater voice in determining their future and what options they have to face climate change impacts. A key lesson learned by CPED in working with communities to improve their socio-economic situation is that it is essential for the success of the community-based adaptation process to ensure awareness and sensitization to the issues. It is important that all community members, both women and men, agree on and are clear about the process. Gender equality in community-based adaptation is essential and the perspectives of both women and men enrich the process. It was against this background that the capacity of community-based farmers and groups was built to take active part in the implementation of adaptation approaches in their community.

**General and Specific objectives:**

The overall aim of the intervention program was to reduce the negative impact of climate change in vulnerable communities of Bayelsa State by enhancing the capacity of communities to respond to climate change through the implementation of relevant adaptation strategies. The specific objectives were:

1. To carry out a participatory diagnosis of the vulnerability of two rural communities in Bayelsa State (Adagbabiri and Igoni) to climate change;
2. To strengthen the technical and organisational capacities of key stakeholders and community-based organizations in Adagbabiri and Igoni communities to promote and implement climate change adaptation activities; and
3. To support the people of Adagbabiri and Igoni in the implementation of adaptation programmes.

**Description of activities:**

*Mobilisation of key stakeholders at the Local Government and community levels:* Intensive interactions were carried out with various community groups including the following: (i) Adagbabiri Future Production club; (ii) Adagbabiri Women Organisation; and (iii) Adagbabiri Community Development union in Adagbabiri Community. In Igoni interactions will be carried out with: (i) Igoni Women Council (AWC), (ii) Igoni Youth Congress (AYC), (iii) Igoni Farmers’ Cooperative, (iv) Igoni Community Development Committee, (v) *Adagbabiri* progressive Union and (vi) Igoni Christian Association.

*Setting up Community-based Project Implementation Committees:* Community-based project implementation committees were set up in the two communities and the members were trained for their responsibilities in the implementation of the action. The committees were used to promote some form of stakeholder ownership of the action. The Chairman of the Committee and the members were democratically elected.

*Participatory diagnosis of climate change in the target communities:* There were highly interactive dialogues with farmers and other community stakeholders to facilitate collective analysis and understanding of how climate change affect community assets and opportunities, and to create a collective vision of desired future conditions with respect to improved farming activities. The process also helped farmers and other community members to identify a
preliminary list of sustainable climate change adaptation options for improved livelihood activities in their community.

*Training of community groups on community-based climate change adaptation:* The members of the community groups were trained on advocacy and awareness raising strategies on reaching their peers. Rather than working with individual farmers, the strategy was to engage and strengthen existing groups, consisting of men and women who are largely farmers so that they can reach other farmers in their communities with climate change adaptation strategies and approaches.

*Working with community groups on the identification of relevant climate change adaptation approaches:* The project team worked jointly with the empowered community-based groups to identify relevant approaches which are appropriate to their communities. This approach focused on building farmers’ knowledge and skills, using local resources which they have and inputs that can be obtained locally. The following strategies were identified: Construction of culverts or channels, late planting and early harvesting of improved varieties, sand-filling to reclaim land now under water, and drainage systems and tree planting for carbon sequestration, construction of local foot bridges, construction of water channels to farmlands, construction of artificial lakes, fencing of ponds, fish traps, planting of cover crops to protect the land from direct rays of the sun, use of sand bags as barriers, etc.

*Working with community groups on selection and implementation of adaptation approaches:* Through advocacy and enlightenment activities by the empowered community groups’ leadership, community members were introduced to the various adaptation approaches relevant to their communities. The awareness-raising activities empowered the farmers and the grassroots population to understand the basic issues involved in climate change adaptation and helped them acquire skills needed to participate in the adoption of various adaptation approaches. The leaders of the various groups carried out their activities under the supervision of the project team and members of the community implementation committees. This approach allowed the project to reach a broader audience and ensure the development of a local capacity for the promotion of the adoption of adaptation approaches. In effect communities were encouraged to experiment on the various adaptation approaches.

**Outcomes, Impacts and the Influence of the Project on Public Policy**

The outcomes of the implementation of the project include: *(i)* An improved awareness of current vulnerability of Adagbabiri and Igoni to climate change was established; *(ii)* The capacity of stakeholders in Adagbabiri and Igoni to manage the implementation of adaptation programmes was established; *(iii)* Climate adaptation strategies relevant to the situation in Adagbabiri and Igoni were articulated; *(iv)* Adagbabiri and Igoni communities started implementing adaptation projects; and *(v)* The framework for and improved agricultural production and wellbeing among farmers was promoted in the target communities.

The impacts of the project are as follows: *(i)* Enhanced capacity of 10 women and youth community associations as key actors in the promotion of adaptation; *(ii)* The empowerment of about 20 community-based stakeholders resulted in the sustainable implementation of adaptation approaches; *(iii)* Empowerment for 250 women as key participants on adaptation approaches on an equal basis with men; *(iv)* Resilience of Adagbabiri and Igoni communities due to adaptation
approaches; (v) Cultural values integrated into community-based adaptation to increased resilience of the two communities; and (vi) Improvement in the quality of lives of about 5,000 people living in the communities.

With respect to influencing policy, the participation of the Bayelsa State Government officials in the implementation stimulated the interest of the State Government on the challenges of climate change. Consequently, the Bayelsa State Government decided to set up a Committee to prepare the ground work for the articulation of a climate change policy in the state. CPED was represented in the Committee which has completed its assignment. The report of the Committee has provided the background for the on-going formulation of the Bayelsa State Climate change policy which is yet to be finalised. Meanwhile the Bayelsa State Ministry of Agriculture is working with communities to promote adaptation activities so as to enhance their agricultural production and improve livelihood of poor farmers in vulnerable communities.

3. “Citizens and evidence informed policy making on peace building in Nigeria’s Niger Delta: An intervention project funded by IDRC/TTI”

Background

When oil exploration began in the Niger Delta region in the late 1950s, the people expected that it would make a huge difference to their lives. The massive machines and technology that they saw indicated that their lives would change positively. However, after over fifty years, they realized that oil had brought misfortune and misery. Their natural resource had become a curse. Their land was taken for exploration, exploitation, pipelines and platforms. The much that was left were polluted and degraded by numerous oil spillages. The rivers and water systems were polluted. The land was no longer arable and the rivers had been deserted by fish colonies. The air was polluted by gas flares and acid rain was tormenting their house roofs just as the people had become plagued by numerous diseases. The people had become under-employed and unemployed. These conditions of marginality, dispossession of resources, trickle benefits from resource endowments, developmental neglect in spite of resource contributions and mistreatment by the multi-national oil prospecting companies that are joint venture and therefore business partners of the Federal Government of Nigeria have combined to create multifarious crises in the region. The militant agitation was a forceful attempt to compel oil based benefits, redress grievances and seek resource control and self-determination. It was essentially a rebellion against state and corporate bad governance and a determined effort for reforms.

The idea of a political settlement in the strategic Niger Delta region or what is locally called the amnesty programme can be traced to the efforts of the administration of late President Umaru Musa Yar’Adua to chart pathways of peace in the region. The Amnesty was declared or proclaimed on June 25th 2009 by late President Yar’Adua. It was presented as a major effort to resolve the Niger Delta crisis and end the militancy in the region. Militants were expected to embrace the amnesty within the 60-day moratorium from August 6th to October 4th 2009. The amnesty was largely an executive declaration. The militants by the terms of the amnesty were pardoned for all offences committed in the course of their militant agitation. The current Amnesty in the Niger Delta has been fairly successful if indicated by the cessation of hostilities with few stray exceptions since 2009, the consequent substantial mitigation of violence and the security of oil and gas infrastructure.
Participatory policymaking on sustainable peace in the Niger Delta through an improved Amnesty Program

After five years of the implementation of the Amnesty Program, it became clear that the policy requires some modifications, based on the complaints of the various key stakeholders in the region, if it is to bring sustainable peace to the Niger Delta region. CPED felt that these modifications to the amnesty policy should not be imposed by policymakers without the participation of citizens in the Niger Delta region. CPED obtained a grant for this purpose from the International Development and Research Centre (IDRC) to carry out the project which has two components: participatory action research and participatory policymaking. The program was carried out between 2013 and 2015. However, the communication and dissemination activities were partly funded by TTI. The general process and activities outlined below show how the broad participation of the citizens of the Niger Delta was promoted in the modifications of the amnesty program by CPED as the knowledge broker which were accepted and being implemented by the national and sub-national governments in the Niger Delta region. This has contributed to peace building in the region.

Identification of the key actors and stakeholders

CPED carried out extensive mobilization in the various communities of the Niger Delta to identify and seek their cooperation and participation in the implementation of the program. In doing so CPED project team was conscious of the fact that rural populations in the Niger Delta are often disadvantaged in terms of their involvement in national level policy-making due to their remote location, lack of communications infrastructure, and the general tendency of governments to focus more on the interests and concerns of their urban constituencies. Consequently, adequate attention was paid to the mobilization and identification of key actors and stakeholders in both the urban and rural communities of the Niger Delta including civil society groups, women groups, youth groups, local leaders, militant groups and particular interest groups and carried out an initial analysis of their interests, influence and capacities.

Establishment of Implementation Committees

CPED was committed to promoting the ownership of the project by the key stakeholders so that when the project is formally concluded with the termination of funding by IDRC, the participation of the actors and stakeholders in policymaking on peace building in the Niger Delta region can be sustainable. It is against this background that a 25 Member Implementation Committees were set in each of the five target local government areas where the participatory policymaking activities were carried out. The members comprise representatives of the actors and stakeholder groups identified during the mobilization activities. The Committees were to oversee the implementation of all the activities of the program with the support of CPED team.

Organization of consultation and dialogue forums

A series of consultation and dialogue forums were organised over a three-month period in order to inform a broad range of stakeholders that are interested or affected by the amnesty policy and to elicit their feedback. During the consultative meetings which took place ten different
communities in the target areas, the key research questions for the project were presented, discussed and amended as follows: (i) What are the essential goals, components and methods of the Amnesty programme, what/whose voices, narratives, discourses and visions undergird the framing and content of the amnesty program?; (ii) How broad based and inclusive was the Amnesty in terms of participation of all key stakeholders?; (iii) How accommodative, equitable, fair and just is the amnesty program in relation to victims, marginal groups, vulnerable communities, women, minority ethnic groups, diverse segments of militias and non-militant youth?; (iv) What challenges of compliance, implementation and accountability exist and how have different actors and stakeholders responded to them?; (v) How have government efforts towards addressing the grievances and development challenges of the region reinforced the legitimacy and sustainability of the Amnesty?; and (vi) What changes should be incorporated in the amnesty program so that it can provide a basis for sustainable peace in Niger Delta?

Arising from the research questions discussed with the representatives of the actors and stakeholders, the four main objectives of the program were also presented, discussed and amended as follows: (i) Carrying out a comprehensive review and analysis of the nature, drivers and expressions of violent conflicts in the Niger Delta region and assessing the impacts that the amnesty program has had on conflict mitigation, peace building, national stability, and the potential for conflict re-occurrence; (ii) Mapping the experiences, challenges and lessons facing the amnesty program and the implications for sustainable peace in Niger Delta; (iii) Assessing the extent to which the amnesty program was inclusive of all the actors and stakeholders; and (iv) What changes should be incorporated into the amnesty policy so that it can provide an instrument for sustainable peace in Niger Delta.

**Participatory collection and analysis of information on the amnesty program and its impact**

An important element of the methodology employed in the action research is the participation of key stakeholders, especially the grassroots population and in particular women in the data collection process. Representatives of the key actors and stakeholders identified at the beginning of the project were interviewed, selected and trained in the administration of survey instruments to collect information from their peers on the implementation and challenges of the amnesty program. There were five research instruments; in-depth interviews, key informant interviews, Institutional Survey Questionnaire, social activists (ex-militant) interviews and focus group discussions. The Project Research Team had several meetings to finalise the research protocol entailing the production of the following seven survey documents: (i) Research Subject Information and Consent Form for Respondents; (ii) Key Informant Interview Guide; (iii) Institutional Survey Questionnaire; (iv) In-depth Interview Questionnaire; (v) Questionnaire for Social and Youth Activists; (vi) Community Household Survey; and (vii) Focus Group Discussion Guide. The formal process of data collection was completed under the supervision of the project team members. The collected data were analysed using largely qualitative methods entailing the use of content analysis. At the first step of the analysis, the transcripts and notes were reordered to the topics addressed by the discussion. At the second step of the analysis, issues that were brought forward repeatedly or were discussed at length by the participants, and relevant parts from each FGD and notes were ordered by these issues, using a ‘cut and paste’ method. The third step was to make a summary of the results for each FGD, based on the issues examined in the discussions.
A major finding of the survey which was of interest to the stakeholders relates to the fact that key actors were excluded from the amnesty program both in the conception and the implementation. It was found that key stakeholders relevant to sustainable peace in the Niger Delta region were excluded including: some ex-militants from the reintegration process, Exclusion of Some Ex-Militant Leaders from Benefits, Exclusion of Victims of the Niger Delta Crisis, Exclusion of non-violent youth, Gender Exclusion: Exclusion of Conflict Affected Communities and Exclusion of some ethnic groups within the region. It was clear to policy makers on the basis of the findings that the issues of exclusion in the current amnesty programme must be addressed and mechanisms worked out to ensure a system that is satisfactory, acceptable and supported by all segments of the Niger Delta people. The benefits should move beyond ex-militants to youths, women, vulnerable group, communities affected by the Niger Delta conflict, home communities of ex-militants, and social and community activists.

**Feedback meetings on the information collected with the key stakeholders, actors and beneficiaries**

Feedback meetings were arranged with the larger representatives of the actors and key stakeholders so as to present the key policy-relevance findings of the surveys to them. At these meetings were policy-makers and other decision-makers within the government/organization, as well as representatives of women, youth, elders, etc. to enable them to reflect on the implications of these findings for the new policy design on the amnesty for peace building in Niger Delta. After the presentation of the key findings with the stakeholders during which they made their observations and further input into the implementation of the amnesty program, there was agreement among participants that there was need for broad consultations and dialogue with critical actors in the Niger Delta region such as communal and ethnic group leaders, youth leaders, militia group leaders, leaders of active NGOs/CSOs and businesses and civil/environmental rights activists in the region. Such consultation with real leaders should produce agreements that reflect a broad spectrum of the feelings, interests and demands of the region that should constitute a basic platform for actions on accelerated development and peace building. These would then be incorporated into the revised policy on the amnesty program in the region.

**Workshop to discuss and agree on the policy options for the amendment of the amnesty program**

The broad based workshop of the representatives of key actors and stakeholders involved in the amnesty program in the Niger Delta was held as recommended by the participants at the feedback meetings with representatives from the following:

(i) **Policy makers at the federal, state and local government levels:** These policy makers whose activities have impact on the sustenance of the amnesty program are located in (a) the Presidency, specifically those responsible for the implementation of the amnesty program; (b) the Federal Ministry of the Niger Delta; (c) the Niger Delta Development Commission; (d) State Government Ministries responsible for development such as health, education, environment, etc.; and (e) Local Government Departments responsible for education and Health.
(ii) *The Government Security Agencies*: These agencies that play major roles in conflict management and therefore important in the success of the amnesty programme and based in the Niger Delta region comprise (a) the police, (b) Army, (c) Navy, (d) the Air Force and (e) the State Security Services.

(iii) *Leadership of militant and armed groups*: Militant leaders are major drivers of violence and peace building and they played key roles in negotiations that led to the amnesty programme and of course its sustenance.

(iv) *Political and ethnic leaders in Niger Delta*: Political and ethnic leaders in the Niger Delta region are key actors during the period of violence in the region even though they did not officially declare their support for violence. They work behind the scenes with militant leaders and they also played key roles in the discussions that led to the amnesty program and its sustenance.

(v) *Community elders and youth groups*: Violence in the Niger Delta region takes place in communities that should also benefit from the cessation of hostilities as a result of the amnesty programme. The key stakeholders in the communities characterized by violence in particular community leaders, men and youth groups were part of the group invited.

(vi) *Women leaders and their members*: The involvement of women in the participation of the policy workshop was to ensure gender balance by specifically making provision for women to participate.

(vii) *Private sector organizations*: Oil prospecting companies were negatively affected by the violence that characterizes the Niger Delta region and they are also beneficiaries of the amnesty programme. Representatives of this sector were also invited to take part in the policy workshop.

The workshop observed and recommended changes to the amnesty policy and program as follows:

(a) The amnesty programme needs to redesign its goals, content and benefit structure in such a way that they are more inclusive and comprehensive. This means that the programme should be connected or linked to or become part of a wider programme of economic recovery, transformation, transitional justice, reparation and resettlement.

(b) There should be a comprehensive programme for addressing the grievances of the region and transforming the conflict situation.

(c) There have to be a concrete programme of peace-building comprising relationship building, rebuilding of broken relations, social capital and mechanisms of peace and advocacy, peace works volunteering, early warning systems and conflict prevention.

(d) The issues of post reintegration training in terms of employment and economic empowerment should be comprehensively addressed because training ex-militants without employment in the post 2015 period is a clear pathway to another Armageddon. Therefore, intergovernmental and
inter-stakeholder structures for synergizing efforts for employment has to be put in place for not only ex-militants but for other Niger Delta youths.

(e) The issues of exclusion in the current amnesty programme must be addressed and mechanisms worked out to ensure a system that is satisfactory, acceptable and supported by all segments of the Niger Delta people. The benefits should move beyond ex-militants to youths, women, vulnerable groups, communities affected by the Niger Delta conflict, home communities of ex-militants, and social and community activists.

(f) There has to be inclusion within the ex-militants in the distribution of benefits. All ex-militants who passed through the eligibility process should be included. There should be provision of spaces for all disarmed militants rather than a situation where those who claimed to have disarmed are still excluded from reintegration benefits.

(g) The Federal Government should pay more attention to the developmental challenges of the communities of the Niger Delta. It has become imperative for government to review the NDDC Act to ensure the Commission's functions are limited in scope. The present Act gives the powers to do everything and that is why it does appear that nothing is being done that benefits the rural communities.

(h) The community development strategy in the Niger Delta area should emphasize extensive grass-root participation. The management of the development of the communities should be drawn from relevant community-based groups including the youth, the traditional rulers, religious groups as well as village associations.

(i) The success of the Amnesty package depends on the collaboration of the state governments, local governments, the oil companies, NDDC, the Ministry of Niger Delta Affairs and other intervention agencies. Each of these levels of government, corporations and agencies must strive to contribute their own quota to the success of the programme, practically in the area of training and skills acquisition.

**Participatory communication strategy on the modifications to the amnesty program**

There are two components of the communication strategy on the modifications to the amnesty program. The first is being carried out mainly by CPED communications Division and this focuses on dissemination of the outcomes of the project to key policy makers and other stakeholders who are not direct participants and beneficiaries of the project such as federal and state government development agencies, private sector agencies, civil society organisations and local government authorities and community leaders. This aspect of the project entailed holding a series of meetings with policy makers and other stakeholders at the national and sub-national levels during which the key policy recommendations of the project were presented and discussed. Strategies to improve the implementation of the amnesty programme were also discussed and recommendations made on how to revise the amnesty policy as suggested by the actors and stakeholders in the Niger Delta region. The second component of the dissemination is being carried out by the Niger Delta citizen groups to their elected representatives in local governments, state governments and federal government on the need to revise the amnesty policy.
as proposed by the actors and stakeholders. These communications and disseminations activities are still on-going with considerable positive effects on the revisions of aspects of the amnesty program.

**Response of policy makers to the proposed policy changes to the amnesty program**

There has been a series of changes in the amnesty program in line with the recommendations of the actors and stakeholders that participated in this policy research. Some of these policy changes recommended which have been accepted and being implemented include the following:

(i) The amnesty program has been extended beyond the terminal date of 2015 so that many excluded actors can be integrated;

(ii) A large proportion of the excluded actors such as non-violent youth, the youth from other ethnic groups in the Niger Delta region and women are now part of the beneficiaries of the policy;

(iii) The Niger Delta Development Commission (an agency of the federal government) is now playing a major role in the implementation of the program by focusing on the provision of infrastructural and social welfare services for marginalised communities in the remote communities of the Niger Delta region;

(iv) The citizen groups comprising non-violent youth and women that have been identified and empowered on participation in policymaking are now active in the engagement of policy makers and their elected representatives to pay attention to issues of promoting development in the Niger Delta through the implementation of the modified amnesty program;

(v) When conflict and violence resurrected after the 2015 general elections, the actors and stakeholders that were empowered through the project played key roles in the restoration of peace.

(vi) Existence of relative peace in the Niger Delta region despite the prevailing economic challenges in Nigeria because of the changes to the amnesty policy.

**3. Synthesis of results**

A key objective of the TTI core funding program was to generate outcomes for the beneficiary in terms of behaviours, relationships, actions, and activities of people and public and private sector organizations which will contribute to the sustainability of the beneficiary as a think tank. TTI phase 2, in defining outcomes as changes in behaviour, recognized the fact that, to be effective, a think tank committed to development research programme must go further than information creation and dissemination by engaging actors in development activities. It is in this context that CPED’s TTI phase 2 was conceived and implemented. This section reviews the outcomes of the TTI phase 2 with respect to CPED as a grantee, other key actors’/target groups, and individuals, within and outside Nigeria.
3.1 Changes in behaviour, capacities, actions, or relationships within your think tank, its researchers or organizational staff, relation to networks or other research institutions

As pointed out in various reports to TTI during phases 1 and 2, the core support provided by TTI has added value to CPED’s policy-oriented research work. CPED has been concerned over the years with the translation of research results to policy and this has been a major challenge. The involvement of policy and decision makers as well as providers and users in most of CPED programs during TTI phase 2 has enhanced the translation of its research results into policy. This has in fact added value to CPED which is appreciated by its Board of Trustees. Furthermore, the TTI core grant has added value to CPED in terms of the enhanced capacity of its research and management staff mentored by the IDRC Program Officers and other consultants appointed by TTI. With respect to research staff, the TTI core grant brought considerable capacities and behaviour changes primarily with respect to improved research capacities, participation in collaborative research as well as significant exposure to research networks. Lack of local funding for research and the inability of Nigerian researchers to attract competitive research grants from international funding organizations has restricted the exposure of many Nigerian researchers to large scale collaborative research. TTI phase 2 and the enhanced ability of CPED to attract other external grants facilitated such collaboration.

Furthermore, many graduate students and junior academics in Nigeria lack the opportunity for sustained mentoring and collaborative research. The action research projects implemented during the TTI phase 2 provided opportunity for the participating junior researchers and project staff to acquire skills such as the action research methodology, field data collection, data processing and analysis, research report writing, project management and publication of peer review paper in international journals. These junior researchers and project staff improved their ability in report writing; gained knowledge in the use of survey, interviewing and community research methodologies, in data analysis and in the preparation of presentations for a variety of stakeholder and academic audiences. Although the speed and ability of the junior research team members to acquire the skills being imparted to them was slow, there were improvements on their part. Some of them made presentations at international conferences while others published peer reviewed papers based on the data collected during the execution of research projects. The research interests of the junior researchers were stimulated by their participation in the implementation of the various TTI phase 2 research projects.

Finally, Facilities for the dissemination of the project outputs at CPED were enhanced by the redesigning of the CPED website and the policy brief format. The aim was mainly to a) make research content available – especially that of studies; and b) to improve navigation tools of the website to make it more dynamic. The website now includes brief summaries of the different project activities that CPED has implemented or still being implemented. This has resulted in an increased number of visits to the website over the past two years. The website continues to provide a location where reports, presentations, publications and summaries of CPED projects may be accessed by interested parties from anywhere in the world. The dissemination of action research activities through CPED website will continue after the formal termination of TTI phase 2 in March 2019.
3.2 Changes in behaviour, capacities, actions, or relationships of research users or those affected by the research process or findings

A key component of CPED’s implementation of TTI phase 2, was the engagement of key policy makers and other stakeholders in its research projects so as to enhance the adoption of the policy recommendations emanating from the various research programs. This has been a major challenge because community engagement in research with policy makers and a variety of stakeholders is still new in Nigeria after many years of military rule. This has led to devoting considerable time and energy to mobilising, consulting and soliciting the participation of policy makers and other key stakeholders in the implementation of CPED projects. This was done through the creations of organs such as Steering Committees and the Management Committees that managed the execution of the research projects. It has been difficult organising meetings with policy makers that are generally quite busy. However, with patience and endurance there were relative successes in working with the policy makers.

Changes in behaviour of those making policy decisions on various aspects of governance and development were promoted by the participatory research methodology which was adopted in the implementation of TTI phase 2 projects. Stakeholder participation was promoted at all stages of these projects, from development of the project proposal to refinement of the research design and data collection instruments, to interpretation of research findings, translation of results into action programs and strategies and to the eventual delivery of results to a broader array of stakeholders and interested parties. This approach brought considerable changes to the way policy makers and other stakeholders view research output and those who carry out research in Nigeria in that they became more willing to work with researchers to find evidence based solutions to Nigeria’s development challenges.

3.3 Policy influence (e.g., expanded policy engagement capacities of researchers; strengthened communications function; broadening policy horizons of policymakers; and specific policy influence stories, including any development outcome of the influence)

CPED projects, implemented in TTI phase 2, have generated new knowledge that have the potential to contribute to the formulation of new policies and programs in different parts of Nigeria. The new ideas and understanding generated by the collaborative research programs can eventually contribute to influencing the intellectual and policy environments in which decisions regarding development strategies are made in Nigeria. Knowledge is important to rapid development in a country such as Nigeria. The various research projects executed by CPED during TTI phase 2 generated knowledge made available to policy makers which can engender change in the future development in the country. During TTI phase 2, CPED appreciated the fact that in the context of Nigeria, the most effective means of disseminating research to policy users is through direct, interpersonal contact. Policy makers must trust the information they receive from CPED. In Nigeria, policy makers will often rely on personal contacts with researchers they trust. Sustained and substantive communication engenders trust. In the context of the implementation of research projects during the TTI phase 2, the points of contact include locally based users and policy makers with jurisdictional responsibility in the topic areas of the research. The activities to influence policy will continue after the end of TTI in March, 2019.
3.4 Lessons learned about approaches to elements for organizational strengthening, building capacity, or influencing policy or practice Problems that arose, and changes in orientation which occurred. Certain aspects of project design particularly important to the degree of success of the project.

It was noted elsewhere in this report that collaboration by institutions and researchers based in different institutions in carrying out research is not common in Nigeria because of lack of large scale projects and funding opportunities. TTI core support coupled with other external grants empowered CPED to host a number of large scale collaborative research programs. This enabled CPED to assemble the best researchers on the issues examined in various projects. Consequently, the different institutions and personnel from those institutions that are involved in the implementation of these collaborative projects have brought various skills and experiences that contributed remarkably to the successful implementation of the various projects.

In addition, TTI phase 2 has greatly improved the infrastructural capacity of CPED which has enabled the centre to carry out various action research projects. The institutional capacity of CPED was also enhanced in terms of the considerable experience gained in hosting the research collaboration between researchers from different academic fields, in particular interdisciplinary cooperation between different disciplines in the social sciences and between institutions. Furthermore, CPED, through the TTI phase 2, enhanced its skills in research administration in such areas as financial management, technology transfer, research ethics, etc. Nowhere is the value of research for development more striking than in its contribution to policy formulation and development. CPED projects executed during TTI phase 2, generated new knowledge that built on local insights which have the potentials to contribute to the formulation of new policies. By empowering key stakeholders in remote rural communities in different parts of Nigeria which have never benefitted from similar interaction over the years, CPED projects have contributed to laying the foundation to sustainable development in rural areas in various parts of the country. It is hoped that other programs executed by various organisations will adopt the strategies and lessons emanating from CPED TTI projects so that sustainable national, sub-national and community development, entailing the effective participation of national and local policy makers in decisions on sustainable development in the country can be promoted.

3.5 What contributed to these results and lessons drawn from the experience?

One major factor that contributed to the results achieved by TTI phase 2 can be identified. This relates to the fact that during the TTI phase 1 CPED moved from depending on project funding to core funding which stabilised its revenue and other resources. Before CPED became a beneficiary of TTI core funding, CPED was to some extent vulnerable due to its dependence on project funding and lack of core funding. This negatively affected CPED’s ability to employ more core staff, especially for action research activities. The project funding mode of funding CPED was to some extent useful in allowing CPED to work with more partners and to expand the range of its activities but project funding could not be a substitute for core funding. A think tank such as CPED needed to have a secure funding base to allow it to cover general running costs and to respond to new research opportunities. Too heavy a reliance on project funding forced CPED to become dependent on the research interests of donors who may not have a comprehensive approach to sustainable development and poverty reduction in the Nigerian context. Carrying project funding to an extreme basically reduced CPED to more or less a
consulting firm. The TTI core funding stabilised the sources of revenue to CPED during the TTI phase 1 which was reflected in the success and achievements of TTI phase 2. The main lesson arising from this is that core funding coupled with capacity building support is absolutely necessary for the sustainability of think tanks in Africa where governments do not support research centres.

3.6 The role of other organizations or donors in this project. How this relationship was managed?

Networking with other research institutions mainly universities in Nigeria to implement research projects is not common in the country because of lack of funding for large scale projects. TTI phase 2 and other externally funded projects attracted by CPED led to collaboration between CPED and various universities and other think tanks in Nigeria. The execution of TTI phase two projects and other externally funded projects entailed partnership and collaboration with the University of Benin, Benson Idahosa University, Delta State University, Western Delta University, Women’s Health Action Research Centre (WHARC), Centre for the Study of the Economies of Africa (CSEA), Intervention Council for Women in Africa (ICWA), and over ten federal and Government Ministries and Departments in different parts of Nigeria. Basically, the relationships between CPED and these various organisations with which programs were implemented were amicably managed by setting up a project management committee in which the representative of the various institutions participating in the implementation of a particular program are members. Such project committees took collective decisions on the various project activities being implemented without any organisation being sidelined.

With the enhanced research and management capacity of CPED arising from the core funding which started from phase 1 in 2009, CPED was able to attract project funding from various donors including IDRC, European Commission, UNDP, WHO and various government Ministries in Nigeria. These donors further enhanced the financial resources available to CPED for the execution of action oriented research projects. The relationship between CPED and these donors was managed by the respective project implementation committees and the Program Officers of the various donors who visit CPED and project sites regularly and interact with the project team and beneficiaries. It was during such visits that the program officers made inputs into the implementation of the projects. There was some form of mentoring by visiting program officers of donors to CPED through their visits and the learning by CPED staff associated with meetings held with them.

4. Problems and Challenges

A key challenge of the process of implementing action research projects during TTI phase 2 refers to what we can call a novel approach to engaging policy makers in the research process in Nigeria. It has been noted that the degree to which research is translated into policy action depends on the success of communicating research outputs between researchers and policymakers including practitioners. The processes of implementing policy-oriented projects in different parts of Nigeria were exciting to CPED research staff, especially the young researchers that are being mentored, the Project Management Committee and the Steering Committee of policy and decision makers. CPED TTI phase 2 action research programs provided unique experience in policy research in Nigeria and all stakeholders contributed to making success of
CPED projects. This was actually the driving force behind the implementation of TTI phase 2 projects.

The strategy of engaging policy makers was a major challenge because engagement in research with stakeholders including policy makers is still relatively new in Nigeria. This has led to devoting considerable time and energy to mobilising, consulting and soliciting the participation of key stakeholders in the implementation of projects. It has been difficult organising meetings with them because the members are key policy makers that are generally quite busy. However, with patience and endurance there were relative successes in working with policy makers in different parts of Nigeria.

5. Administrative Reflections and Recommendations

We have stated in our various progress reports on TTI phase 1 and 2 that the role and engagement of IDRC through the TTI program officers responsible for overseeing the implementation of TTI core funding were very good and extremely supportive of the implementation of activities. We appreciate considerably regular communications with TTI and IDRC and the guidance provided in various aspects of the implementation of TTI phase 2. The visits by IDRC and TTI Program Officers to CPED over the period of implementation were remarkable and valuable. The discussions and meetings with CPED management, the Board of Trustees and specific project staff also entailed learning and exchanges which were good for the implementation of TTI supported activities. We must emphasize one key positive role of IDRC/TTI in the implementation of phase 2. This relates to the appointment of consultants who are experts in various fields such as health, peace building, communications, project management, etc. These experts worked with CPED to effect the changes brought to the organisation in the implementation of its various projects under TTI phase 2. The involvement of these consultants has enhanced the implementation of CPED’s TTI phase 2 programs.

From the perspective of CPED Board of Trustees, Management, staff and other stakeholders we make one major suggestion to IDRC. While, we appreciate the contribution of IDRC/TTI to the development of CPED through the TTI core funding, thinks tanks in Nigeria and indeed other parts of Africa are yet to mature and be sustainable. We pray that policy makers in Nigeria will begin to appreciate the value of research. However, there is no doubt that IDRC and other donors must continue to play key roles in promoting policy-oriented research in Nigeria for many years to come as part of programs designed to alleviate poverty, promote socio-economic development and address the challenges of policy engagement. We strongly recommend that IDRC and its donor partners demonstrate their continuing commitment to supporting a sustainable research culture in Nigeria.

Often donors funding specific research projects, and attempting to measure the relative success of their programs focus, understandably, on the initial and end stages of research as reflected in the outcomes that a project delivers. Yet for long-term research capacity to be developed and sustained in a country such as Nigeria it is clear that donors need to take a much greater interest in the processes and mechanics of the research process itself, to understand why things do and do not happen, and the things that frustrate research in Nigeria. IDRC and other donors need to undertake substantive assessments of the resource base accessible to researchers and develop a
stronger understanding of the cultures and processes of research in Nigerian research institutions, particularly the universities and key research centres and think tanks. This would allow funding to be deployed more effectively, and would provide a way to acknowledge those areas requiring additional support. It is essential that IDRC should make funding flexible as was done in the TTI core funding, and ensure that it is delivered through systems which help to maintain flows of funding. This implies that greater attention must continually be given by IDRC and other donors to think tanks which are basically the major research centres focusing on development and policy issues in Nigeria. Having said this, we appreciate the contribution of IDRC and other donors through the Think Tank Initiative to building the capacity of key research institutions in Nigeria and other parts of the developing world.

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