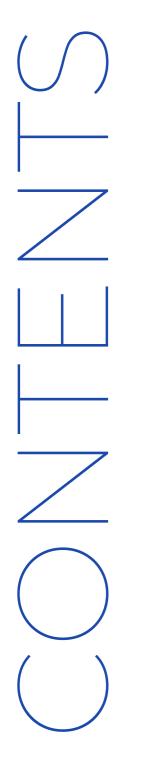


CENTRE FOR HEALTH ETHICS LAW AND DEVELOPMENT

ANNUAL REPORT



Table of Contents



01.

Introduction

02.

Message from the Executive Director

03.

Advocacy against Gender-Based Violence

04. Mental Health Advocacy

O5. Mental Health Programme

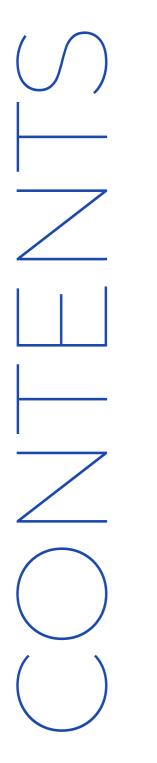
06. Disability Programme

01

07.

Migration

Table of Contents



08.

Legal Support and Advisory to States

09. NCDs Advocacy

10. Public Health Support

11. Notable Days

12. Company Information Centre for Health Ethics Law and Development (CHELD) is a not-forprofit, non- governmental organization registered in Nigeria and established in 2010. We are a research think-tank and an implementer in the area of publichealth, mental health, child health and survival, gender-based violence, NCDs and migration, and their intersections with health, amongst other areas of interest.

In support of the principle of "Health for All," the human right to health and universal health coverage, CHELD provides research, analyses of issues, and reasoned solutions, bringing extensive understanding of health law and policies to various cross-cutting issues such as migration, human rights, gender amongst others. We provide services to governments, regulatory authorities, global health agencies, development organisations, international donors, and persons involved in health development. CHELD provides policymakers with ongoing, systematic, and informed international and comparative analyses and reflections on policy options and their implications from legal, social, and ethical perspectives.

CHELD's multidisciplinary team consists of a group of experienced legal practitioners and specialist consultants with several years of experience in policy advocacy, developing legislation, and conducting research in the areas of law, public health, migration, gender, genderbased violence and youth development. The team is led by Prof. Cheluchi Onyemelukwe, a Professor of Law, and a leading health lawyer in Nigeria who has been involved in health law reform nationally and internationally.

Our Mission

Our vision is to promote health through Law, Education, Research and Advocacy.

Our Vision

Our vision is to see a truly healthy world where the right to health is recognised in laws and policies and health services are inclusive of the needs of vulnerable populations. in-laws and policies and health services are inclusive of the needs of vulnerable populations.

MESSAGE FROM OUR EXECUTIVE DIRECTOR

Strategic Highlights

2021 started with enthusiasm for all of us at CHELD. The success of 2020, despite the challenges of COVID, only spurred us to aspire to make greater impacts in our world.

CHELD provided expertise and improved health rights across our programmes, working with new donors and clients. Three highlights: We provided support to the British Council and the European Union a Country Gender Profile for Nigeria, an important document not only for general information but to inform the EU's work in Nigeria. We also provided support for the African Union with the support of GIZ on understanding the intersections of migration and health and improving the health rights of migrants.

We provided consultancy services to organizations such as the British Council and the Centre for Rural Development, HumboldtUniversity of Berlin. We also received support for our gender-based violence work from ALIGN (ODI). Work in our core areas of mental health, disability and gender-based violence yielded fruit as set out in this Report.

One of the key highlights of the year was the naming of CHELD to the Board of Decide Hub, a value for health initiative of the WHO, in July 2021.



MESSAGE FROM OUR EXECUTIVE DIRECTOR

Looking Ahead

At CHELD, we envision a society where everyone enjoys the right to health. Our work supports this vision by applying the tools of law and policy reform and implementation in Nigeria and Africa. For the next year, we are looking to amplify our work in NCDs Awareness which we have already begun this year. We will endeavour to take on more research work and engage more in our programme areas, to ensure a wider reach for the communities we serve.

On behalf of the CHELD team, we would like to thank our governing board, partners, friends and funders for their support. With your continued support, we look forward to wider recognition and implementation of the right to health for all, including vulnerable populations.

Prof. Cheluchi Onyemelukwe Executive Director December 26, 2021

For the year 2021, our watchword was "justice for all". Our work was centred on addressing the various forms of injustice arising as a result of a person's disposition due to their gender with mental health, disability, immigrant status etc.



Gender-Based Violence (GBV)refers to all acts perpetrated against women and girls which cause or could cause them physical, sexual, psychological verbal, emotional or economic harm. This harm could emanate from domestic abuse, sexual assault and harassment, financial abuse, child or forced marriage, sex trafficking, 'honour' crimes, female genital mutilation, coercion, or arbitrary deprivation of liberty among others. The World Health Organisation (WHO) has shown that one in every three women suffers from abuse or violence globally.

GBV not only devastates women's and girls' lives and divides communities, but it also undermines development efforts and the building of strong democracies, as well as the sustenance of just and peaceful societies.

In 2021, CHELD contributed towards the elimination of GBV in Nigeria by contributing to the 16 Days of Activism against Gender-Based Violence (Orange the World), an annual international led by activists and organizations around the world to call for the prevention and elimination of violence against women and girls. For 16 Days, we raised awareness of the dangers of female genital mutilation via social media.

Under engagement with the British Council (on behalf of the European Union) from the British Council, CHELD undertook a Country Gender Profile for Nigeria, to provide an evidence-based for the EU's interventions in the country for the next five years.

As part of its activities in gender-based violence, CHELD also facilitated a national consultative meeting for the Centre for Family Health Initiative. The consultative meeting was held to strengthen the role of civic voices in participating in decision-making and policy reform at the local as well as state and national levels and called for more political will to help fight Violence Against Women and Girls (VAWG).



16 days of Activism against Gender-Based Violence Against Women and Girls (VAGW)

This campaign is used to raise awareness on the need to prevent and eliminate violence against women and girls because about **1 in 3** women globally aged **15 years and above** have been subjected to a form of VAGW.

07

STAKEHOLDERS' TRAINING ON THE DYNAMICS AND UTILITY OF THE LAGOS STATE DOMESTIC AND SEXUAL VIOLENCE UNIFIED RESPONSE PROTOCOL AND REFERAL PATHWAY (URPRP) ORGANISED BY THE LAGOS STATE DOMESTIC AND SEXUAL VIOLENCE RESPONSE TEAM

CHELD was invited for a stakeholder training session on the dynamics and utility of the Lagos State Domestic and Sexual Violence URPRP. The training was held at the AdeyemiBero Auditorium, Alausa-Ikeja on Tuesday, 27th July 2021. CHELD was represented by its legal officer Ifeoma Arowolo.

Stakeholders were CSOs and various organisations were duly represented. The facilitator took stakeholders through an overview of the URPRP. The Unified Response Protocol and Referral Pathway (URPRP) is a multi-sectoral survivor-centred approach for responding to domestic and sexual violence. It outlines the procedure to be used in responding to, investigating, and persecuting cases of domestic and sexual violence.

The protocol defined domestic violence to include physical abuse, sexual abuse (rape, incest sexual assault, defilement, indecent exposure, degrading sexual imagery, voyeurism, cyber harassment, trafficking, and sexual exploitation) starvation, emotional, verbal and psychological abuse, exploitation, intimidation, harassment, stalking, hazardous attack including an acid bath with offensive or



08

poisonous substances, damages to property, entry into the complainant's residence without consent where the parties do not share the same residence, any other controlling or abusive behaviour towards a complainant, where such conduct harms or may cause imminent harm to the safety, health or well-being of the complainant or deprivation.

The protocol is aimed at ensuring coordination and cooperation between all agencies involved in domestic and sexual violence cases, to increase the efficiency of all agencies handling such cases and to minimize the stress created for the alleged survivor by the legal and investigatory process.

The URPRP seeks to enhance access to survivor services, perpetrator accountability, knowledge and skills for survivor services, the appropriate response from the criminal justice system, and strengthen and unify the existing protocols.

The facilitator took participants through the general considerations in the management of domestic and sexual violence and the rights of survivors. She explained that persons experiencing domestic and sexual violence have a right to have control over their lives and always have the choice of accepting information, they have a right to be acknowledged as being in the best position to understand and express to the support service worker(s) their need for assistance. They have a right to privacy and confidentiality with regard to client information. They have a right to be treated with compassion and courtesy and expect reliable assistance of high quality.

The head of the DSVRT team emphasized the need for all NGOs providing direct and indirect services for survivors of sexual and gender-based violence to be duly verified and registered with the Ministry of Women Affairs & Poverty Alleviation, Ministry of Youth and Social Development, Ministry of Health and Ministry of Education is applicable.

She explained that regular training and professional development help build knowledge and expertise to respond to domestic and sexual violence. Training facilitates knowledge sharing among groups and between the responder agencies and community services.

She further emphasized the need for responder agencies to keep records of domestic and sexual violence in accordance with relevant laws. She encouraged all responder agencies to accurately input data/records of cases of domestic and sexual violence into the domestic and sexual violence case management system, which will be collated and forwarded to the Lagos Bureau of Statistics.

Participants were informed of the app which would be out soon and everyone was encouraged to download and use the app once it becomes available.

10

MENTAL HEALTH ADVOCACY

Creating Hope Through Action

"

A good place to begin in our quest to create hope is reform of mental health laws and policies.

-Prof. Cheluchi Onyemelukwe

#SayNoToSuicide

Attempted suicide through an indicator of mental illness is a crime under the Lunacy Act in Nigeria. Our project known as the "Decriminalise Attempted Suicide Project" solely advocates for the removal of this provision from the law, providing therapy to people who have either been charged with this crime or have thought of attempting suicide. The project also provides free legal aid to people charged with attempted suicide as we have done since inception.

In 2020, we assisted a young man1 charged with attempted suicide, providing him with psychiatric care, legal aid, shelter and finance. This year, 2021, the criminal charges against him stand withdrawn and the matter struck out. The matter stands concluded.

We have continued to support him and are glad to share that he has just completed his Senior School Certificate Examination (SSCE) with flying colours. We are thrilled to see him make good

MENTAL HEALTH ADVOCACY

use of available opportunities with a firm decision to positively improve his life. He is currently learning graphics design and we do not doubt that he does not harbour any form of suicidal thoughts.

Our work in this area has been featured by the Commonwealth Foundation, World Health Organization (WHO) amongst others.



STRUGGLING DOES NOT EQUATE TO FAILING OR BEING WORTHLESS. IT MEANS YOU'RE TRYING.

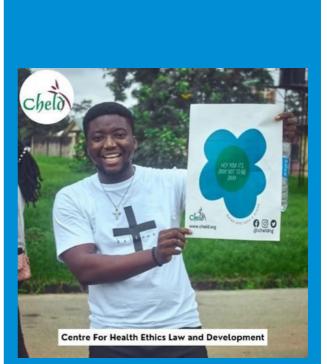


www.cheld.org

MENTAL HEALTH PROGRAMME

Whilst health has scarcely ever been a Legislative priority in Nigeria, mental health, in particular, has received an infinitesimal level of attention in law and policymaking. The Lunacy Act, dating from a 1916 Ordinance, is the extant federal law on mental health. Although it provides a process for involuntary commitment, its references to 'lunatics' 'idiots' and 'asylums' and provisions relating to the 'arrests' of persons suspected to be mentally ill, are discriminatory. In 2003, an unsuccessful Mental Health Bill was introduced in the Senate and another was not introduced until a decade later in 2013. However, attempts to pass a national Mental Health Bill which reflects the needs of persons with a mental health conditions, protects their rights and provides optimum support and care are yet to produce concrete results.

CHELD worked assiduously with partners such as the World Health Organization to redraft the Mental Health Bill which is currently waiting for Presidential Assent.





MENTAL HEALTH PROGRAMME

In commemoration of Suicide Prevention Day, we supported a march by students at the University of Uyo creating awareness on the imperativeness of decriminalizing attempted suicide as well as encouraging people who bear suicidal thoughts that life is worth living again.

On World Mental Health Day, we used our social media platforms to advocate for a society where mental health is prioritisedt life is worth living again.



Centre For Health Ethics Law and Development

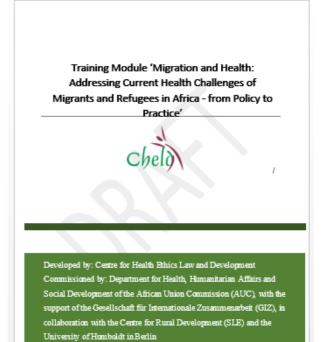
DISABILITY PROGRAMME

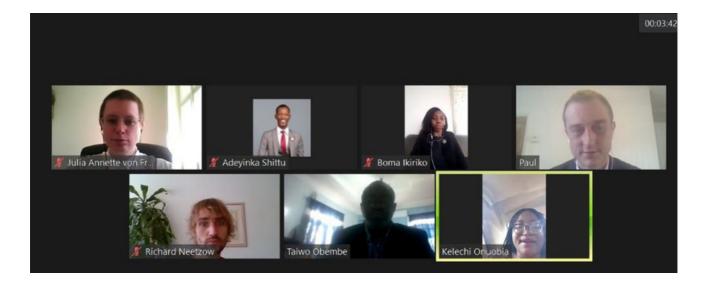


For the International Day of Persons with Disabilities (IDPD) observed to promote the full and equal participation of persons with disabilities and to take action for the inclusion of persons with disabilities in all aspects of society and development, we hosted a virtual event with stakeholders in the educational system as well as stakeholders in the Disability Advocacy Space on how we can achieve disability inclusion in our schools.

MIGRATION

The Centre for Rural Development (SLE) and the University of Humboldt in Berlin contracted CHELD to develop the training module given our expertise in Migration. Considering the health needs of migrants is of great importance as they are often both victims and vectors of health risks and exposed to a variety of health-related threats. CHELD successfully developed a training module for officials and practitioners in the Member States. The 150-page training module is due to be deployed across the African Continent with plans underway for CHELD to facilitate the roll-out under the auspices of the Department for Health, Humanitarian Affairs and Social Development of the African Union Commission (AUC), with the support of the Gesellschaft für Internationale Zusammenarbeit (GIZ).





MIGRATION

CHELD with the support of IOM is conducting the Service Provision for Mapping, assessment and capacity building of VoT protection service providers to enhance cross border cooperation for the protection and reintegration of VoTs in Kano, Katsina, Jigawa, Sokoto and Zamfara States.

CHELD also delivered a pilot training addressing current challenges of migrants and refugees in Africa. The pilot training was held in Accra, Ghana.



LEGAL SUPPORT AND ADVISORY TO STATES

In furtherance of our vision, CHELD provided advisory and support to some States in Nigeria by training staff of designated institutions, reviewing their laws, as well as drafting new laws that are not only ethically compliant with international standards but are also in tune with our reality.

CHELD provided assistance with the Edo State Family Court Guidelines for Child offenders, a critical review of the Edo State Child Right Law, and an amendment of the Edo State Child Right Law.

For the pieces of the training in Edo State, CHELD developed a Leadership Training Manual which is intended to be administered by a facilitator in a manner that provides for an interactive session between the facilitator and the participants. The segments were designed in a way that they could be taught online or offline in a classroom setting.

CHELD also assisted IOM on the elimination of gender-based violence, harmful practices and their inter-linkages with sexual and reproductive health's rights which has been a source of concernfor the international community and was made a priorityby the international community

CHELD assisted the Kano State government with drafting a holistic health regulation for Kano State.

NCDS ADVOCACY

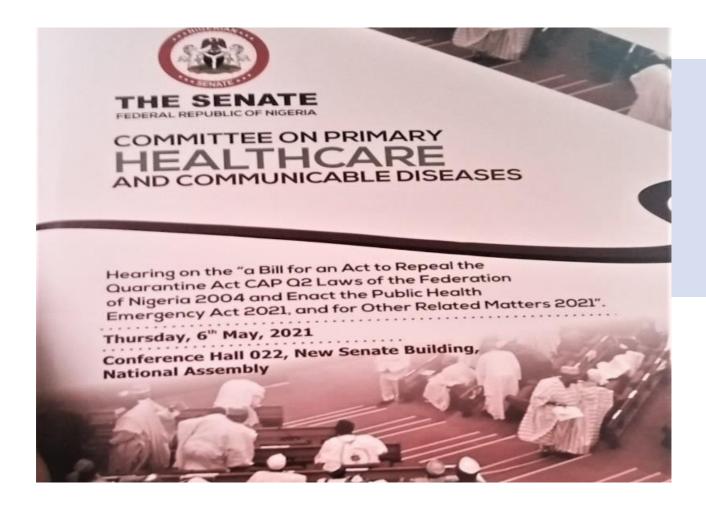
Global Week for Action on NCDs

6-12 September 2021 www.cheld.org

Non-communicable diseases (NCDs) are diseases that cannot be transferred from a carrier to another person or persons. It includes heart disease, stroke, cancer, diabetes and chronic lung disease, which are collectively responsible for almost 70% of all deaths worldwide. According to WHO, almost three-quarters of all NCD deaths, and 82% of the 16 million people who died prematurely, or before reaching 70 years of age, occur in low- and middleincome countries. NCDs account for about 24% of total deaths in Nigeria. The WHO reported that the probability of dying prematurely from NCDs in Nigeria is 20%.

According to the International Diabetes Federation, the projected prevalence estimate of diabetes in Nigeria is 4.04%, it is also projected thatin 2020, cancer incidence in Nigerian males will rise to 90.7/100,000 and 100.9/100,000 for females. With these overwhelming statistics, CHELD commenced an advocacy program using videos, infographics and a detailed Policy Brief to create awareness and educate the public on the importance of avoiding habits, nutrition and lifestyle that encourages NCDs.

PUBLIC HEALTH SUPPORT



CHELD was invited to the public hearing on the "Proposed Bill for an Act to repeal the Quarantine Act CAP Q2 Laws of the Federation of Nigeria 2004 and enact the Public Health Emergency Act 2021 and for other related matters 2021". CHELD was well represented and our contributions were highly revered at the hearing. The pandemic exposed the lacunae inherent in our response to public health emergencies and it was only expedient that we tackled it efficiently as a nation.

NOTABLE DAYS

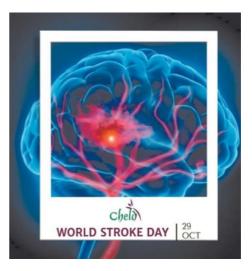


Throughout the year, CHELD in commemoration of internationally recognised awareness days, engaged in several initiatives to improve public awareness of health issues such as diseases with debilitating consequences, discrimination and stigmatization, and COVID-19 to mention but a few. Below are examples of our public health literacy campaigns.



People living with diabetes require access to resources such as medicine, care and technology.

If these resources are not provided now, **then when**?



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