REPORT OF THE 1-DAY TRAINING FOR CIVIL SOCIETY ORGANIZATIONS (CSOS) ON THE WHO ABORTION GUIDELINES AND EFFECTIVE ADVOCACY STRATEGIES.

ORGANIZED BY: SGBV JUSTICE NETWORK (SJN)

VENUE: Presken Hotels & Resort 16, Mojidi, Toyin Street, Ikeja Lagos State

DATE: *February 4, 2025*

Introduction

The 1-Day Training for Civil Society Organizations (CSOs) on WHO Guidelines and Effective Advocacy Strategies was organized to enhance the capacity of CSOs to understand and utilize WHO guidelines in their advocacy efforts.

The training also aimed to equip participants with strategic tools for advancing health-related human rights issues and improving advocacy for policy changes, especially the Safe Termination of Pregnancy guideline.

Training Objectives

The objectives of the meeting were to:

- 1. Build participants' knowledge of WHO guidelines on safe abortion and their relevance to SRHR.
- 2. Equip CSOs with practical advocacy tools and techniques to engage stakeholders and influence policy.
- 3. Foster collaboration among CSOs to create a cohesive and unified advocacy framework.

Training Highlights

The meeting began with participant introductions and a national prayer, followed by a welcome address delivered by Mrs. Eni Ayeni, the *SJN* Southwest Zonal Coordinator. She commenced by acknowledging the presence of all participants and emphasizing the importance of the training in strengthening advocacy for reproductive health rights. Mrs. Ayeni recognized the commitment and ability of partners attending the training to navigate the complexities of advocacy in the SRHR space. She encouraged participants to engage actively, collaborate, and maximize the opportunity for learning and networking. She concluded by wishing everyone a fruitful discussion and success in the advocacy efforts.

Overview of Training Objectives

Jerome Uneje, the SJN National Coordinator, outlined the objectives of the training, emphasizing the use of effective advocacy tools for policy change,

particularly regarding the Safe Termination of Pregnancy guideline. She also highlighted the topics to be covered during the training session:

- Understanding WHO Guidelines on Abortion Care
- Contextualizing WHO Guidelines to Local Realities
- Advocacy Tools and Techniques for Policy Influence
- Collaboration and Action Planning
- Developing Context-Specific Advocacy Strategies

Technical Session on Understanding WHO Guidelines on Abortion Care:

Ifechi Aleke, a Legal Officer with Lawyers Alert (LA), facilitated a session on understanding WHO's guidelines on abortion care. Before the session began, a question was posed to the participants on whether abortion was criminalized in Nigeria before the precolonial period. Seventy percent of the participants answered in the affirmative, but during the training, they realized that abortion was not criminalized in Nigeria during the pre-colonial era.

She highlighted international standards and best practices on safe medical abortion. The session was interactive, with participants actively engaging in discussions about the practical implications of WHO recommendations in local contexts, especially the WHO recommendation that traditional and complementary medicine professionals can carry out services related to abortion, such as vacuum aspiration for induced abortion at gestational stages of up to 12 weeks. The participants, especially nurses, vehemently objected to the propriety of the recommendation on the grounds that traditional and complementary medicine professionals are not well-trained in Nigeria to provide certain abortion-related services.

Contextualizing WHO's Guidelines to Local Realities

The session was facilitated by **Olufemi Olusola**, the *Executive Director of the Life Agenda Initiative* in Ogun State. According to **Olufemi Olusola**, even though the World Health Organization (WHO) provides evidence-based guidelines on abortion care to ensure safe medical practices and reduce maternal mortality caused by unsafe abortions, for the successful application of the recommendation of the guidelines in Western Nigeria, the legal, sociocultural, and healthcare realities must be considered. In the Western States of Nigeria, except for Oyo and Lagos State, Safe Termination of Pregnancy guidelines only provide some leeway for medical professionals to perform abortions in life-threatening situations, and aligning WHO guidelines with these local guidelines means emphasizing permissible medical interventions while advocating for broader legal reforms.

Western Nigeria has a mix of Christian, Muslim, and traditional beliefs, many of which view abortion as morally or religiously unacceptable. These cultural and religious perspectives significantly shape public attitudes toward abortion services and access to care. To address these concerns, Advocacy

efforts must involve traditional and religious leaders to foster acceptance of safe medical practices.

The WHO recommends that a wide range of trained healthcare providers, including traditional and complementary medicine professionals, should be allowed to provide abortion-related services such as vacuum aspiration for induced abortion at gestational stages up to 12 weeks. To implement this recommendation, the training of midwives and other skilled health workers to provide safe abortion services where legally permitted can bridge service gaps because, in many parts of Western Nigeria, access to comprehensive reproductive healthcare is limited.

Advocacy Tools and Techniques for Policy Influence

Jerome Uneje, the SJN National Coordinator, facilitated a session on Advocacy Tools and Techniques for Policy Influence in SRHR. Effective advocacy for Sexual and Reproductive Health and Rights (SRHR) requires legal, social, and policy-based approaches. Evidence-based advocacy relies on research, statistics, and case studies to support policy influence. Data on maternal health, contraception access, and gender-based violence strengthen advocacy efforts. Strategic litigation and legal reform help challenge discriminatory laws and promote policy alignment with international human rights frameworks.

She stated that effective media and digital advocacy tools leverage social media campaigns, traditional media, and multimedia to promote identified advocacy issues, challenge harmful practices, and combat misinformation. Multi-sectoral partnerships strengthen advocacy efforts through collaboration with CSOs, legal experts, and medical professionals. Drafting policy briefs, petitions, position papers, etc., influences advocacy engagements with policymakers, especially (law and policy reforms) legal and budgetary decisions. Monitoring and accountability mechanisms track policy changes, implementation, and government actions in every advocacy journey and help sustain advocacy efforts. A combination of these strategies ensures a comprehensive and effective SRHR advocacy approach.

At the end of the session, participants were divided into groups based on their respective states. They were then asked to develop at least three (3) compelling social media advocacy messages tailored to their state's unique context. These messages should aim to mobilize support from key stakeholders and the public, ensuring they are clear, engaging, and aligned with our advocacy goals. For each message created, participants should identify the specific stakeholder groups being targeted. Additionally, they should explain how the message resonates with these stakeholders' interests, responsibilities, or values and how it appeals to their consciousness.

Developing Context-Specific Advocacy Strategies

Post the training sessions, all participants collaboratively developed contextspecific advocacy plans, identifying activities, tasks/steps that need to be carried out to reach the project goal, target stakeholders, setting advocacy objectives, and establishing timelines as part of a practical exercise.

Summary of Key Learnings and Commitments.

At the end of the training sessions, participants were asked to write down two things they learned. More than 50% of the participants underscored the importance of strengthening advocacy efforts, whether through media engagement, strategic litigation, multi-sectoral collaboration, or other advocacy tools, to address unsafe abortion, reduce maternal mortality, and eliminate legal barriers. In addition, Participants expressed concerns about the sociocultural and religious resistance to safe abortion practices, emphasizing the need for a tailored approach in each state.

Next Steps and Action Points

- Partner with media organizations (MHR) to launch campaigns using radio and social media to raise awareness and distribute posters on SRHR
- Advocacy Visit to key stakeholders.

Conclusion and Closing Remarks

The WHO Abortion Care Guidelines and Advocacy Tools & Techniques for Policy Influence training has provided critical knowledge and skills for driving policy change and ensuring access to safe abortion services in the project States of Western Nigeria. Key takeaways include evidence-based advocacy, multi-sectoral collaboration, integrating human rights principles, effective communication strategies, and stronger advocacy efforts to challenge restrictive abortion laws and reduce maternal mortality. The training emphasized the need for a state-specific, community-centered approach and encouraged proactive steps in policy engagement, legal reform, community education, and service provision. The training aimed to advance comprehensive reproductive health and ensure every woman and girl in Western Nigeria has the right to make informed choices about their reproductive health.

The training concluded with a vote of thanks delivered by Jerome Uneje, who appreciated the dedication and active participation of the partners during the training sessions. She emphasized the importance of continued collaboration as the project progressed and wished all participants a safe journey back to their respective states.

Pictures from the training:



Fig. 1: Photo of Barr. Ifechi of Lawyers Alert facilitating the session on the WHO Guidelines



Fig. 2: Photo of Cross Session of Participants during the CSOs training in Lagos



Fig. 3: Group Photo of Participants at the CSOs training in Lagos