

How was FAROF initiated and Why focused on Young persons



FAROF was Founded as a charitable non-profit organization, to fight stigma and discrimination, end gender base violence against young women/girls, with her



thematic areas centered on Preventive intervention programs and sexual reproductive health and rights SRHR activities of Adolescents and young people living with HIV, FAROF coordinates HIV response on adolescents, young people and youth living with HIV/AIDS in Nigeria.

Adolescents and Young People experience numerous degrees of developmental challenges at varying pace, which includes: evolving sexuality, increasing need for independence, peers and broader social connections. The adolescent period is also marked by increased involvement in risk behaviors that may predispose young people to poor long-term outcomes. Many of these risky behaviors are relatively transitory in nature and are resolved by the beginning of adulthood.

The increase in ignorance by our community leaders of Adolescents and young people, is leading to increase in new HIV infected young person's and has put the organization to stand against such ignorance and getting more young people aware of their rights, as well as creating wider awareness of the SRHR programs to reduce risky behaviors amongst young people within our community.

FAROF identifies factors (individual, social, environmental and systemic) that increase vulnerability of young people, transgender youth and young people with disability to HIV & AIDS and develop a preventive strategy for programming for Adolescent and Young people who inject drugs, Adolescent and young female who sell sex, Adolescent and young men who have sex with men using the Combination Prevention Approach (Behavioural intervention, Biomedical intervention and Structural intervention);

Target Group:

Adolescents: 10-15 and 15-19years old

Young persons: 20-24 and 25-30 years old

GOAL: To reduce new HIV infections among adolescents and young people in Nigeria

Adolescents and young people Statistics

According to the National AIDS and Reproductive Health Survey (NARHS) 2012 conducted in Nigeria indicates that the HIV Prevalence among Adolescents

End GBV, Fight HIV Today (Saving lives one at a time)



Aged 15-19 years as 2.9% and HIV prevalence among young people aged 20-24 years as 3.2%. Among age 20-24 years old, young women are more infected than young men (37% vs. 24%), over 400,000 Adolescents and Young People Living with HIV in 2014.

HIV/AIDS outlook: Estimated number of new HIV infections among adolescents (aged 15-19) in Nigeria shows that an estimated number of AIDS-related deaths among adolescents (aged 10-19), 2001-2020 rising from 4% in 2001 to 95% in the year 2020 (Source: UNAIDS 2015 HIV and AIDS estimates, 2016).

Adolescents and young people (AYP) Assessment Conducted by FAROF and UNICEF

FAROF engaged in the Adolescents and young people (AYP) Assessment program conducted in two pilot states of Nigeria, namely: Kaduna state and Benue state supported by UNICEF and State AIDS control Agency SACA as the host. These Assessment was conducted on the following dates, in Kaduna state from 13th June, 2016 to 17th June, 2016 and Benue state from 17th June, 2016 to 21st June 2016 respectively.

Representatives of UNICEF from the office of new York was present, the following stake holders where present during this Assessments, these include: Local Government AIDS Control Agencies (LACA) M&E officers, CSOs, representatives from the office of UNICEF.

Assessment carried out was focused on the following interventions:

1. HIV testing and counselling for adolescents
2. Antiretroviral therapy (ART) for adolescents living with HIV
3. Condom use among adolescents
4. In-school life skills-based HIV prevention and reproductive and sexual health education

AYP Assessment Results findings

Identified Key bottle necks during AYP Assessment in Kaduna state and Benue state:

End GBV, Fight HIV Today (Saving lives one at a time)



A rapid assessment conducted by FAROF and her partners revealed the following gaps on HIV programs for Adolescents:

1. Only 5% of adolescents (aged 15-19 years) who report ever testing for HIV
2. Only 0% of ART sites offering HIV treatment that have youth friendly services (per national norm/local definition)
3. 0% of health facilities providing HIV testing that is adolescent/youth friendly (per national guidelines).
4. Only 1% of adolescents (aged 10-19 years) initiated on treatment who are virologically suppressed (viral load below 1,000 copies) at 12 months after initiating treatment
5. 0% of adolescents (aged 15-19 years) who know a source of condoms
6. Only 4% of sexually active adolescents aged 15-19 years who reported ever using a condom(female)
7. Only 50% of secondary schools with at least one teacher trained on teaching LSBE/CSE
8. National program recording template not segregated by age
9. Have poor or no records of various HIV/AIDS support rendered for Adolescents and young persons in the last 2 years.
10. The Overall average country rating score for National policies, strategies, plan of action (score 9) compared with Adolescent and youth participation which is zero(score 0)
11. 0% of primary schools providing LSBE/CSE in the fifth year of primary school within the current academic year.

Other identified Key bottle necks discovered are: Only 20% of adolescent girls have comprehensive knowledge of HIV&AIDS. Only about 3% of facilities have skills and are providing AYP friendly health and social services. Less than 1% of Adolescents living with HIV (ALWHIV) were placed on ART , Condom usage amongst girls is 17% while boys is 40%,(Source: UNAIDS 2015 HIV and AIDS estimates, 2016)