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Health and Wellbeing

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WBFA 2025 IMPACT REPORT

From Evidence To Action: Transforming Policy & Frontline Delivery



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Founder's Message

It is with profound purpose that I present the 2025 Annual Report of the Wellbeing Foundation Africa, published under the theme From Evidence to Action, From Policy to Frontline Delivery.

At a time when the global health community is called to accelerate universal health coverage, strengthen primary health care, and protect the dignity of every woman, every newborn, and every child, this report serves as both a record and a statement of intent. It sets out the work we have undertaken across communities, schools, health facilities, and policy platforms throughout the year, and restates our conviction that health is among the most essential foundations of development, and never simply a by-product of it.

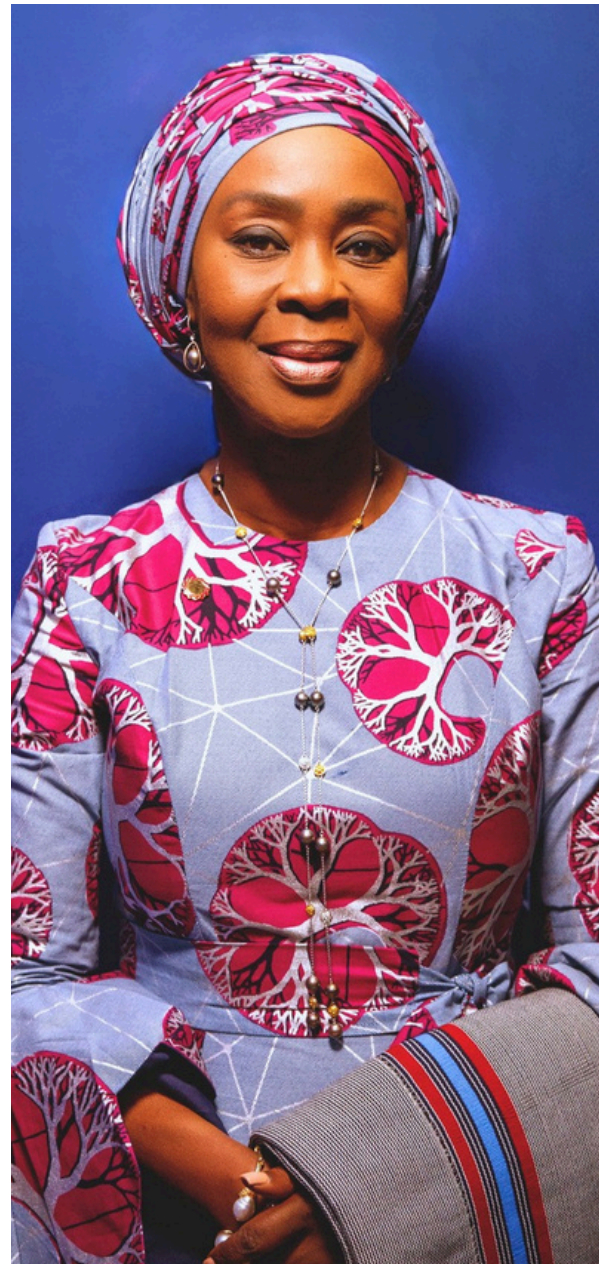
Since establishing the Foundation in 2004, I have remained steadfast in the belief that no society can prosper while women face preventable risks in pregnancy and childbirth, while newborn lives are lost to avoidable causes, or while families are denied equitable access to care. The true measure of a health system lies in its humanity as much as its infrastructure, and in whether those furthest from care are reached with safety, respect, and dignity.

This is why we have consistently advanced an approach rooted in the life-course perspective, the continuum of care, and people-centred programming. The health and wellbeing of women, girls, newborns, children, and adolescents cannot be addressed in fragments. We are stronger together, and this work requires integrated action connecting community trust with clinical quality, health workers with institutional support, and locally grounded practice with national and global accountability. In this, midwives, nurses, doctors, teachers, caregivers, and community champions remain indispensable agents of transformation.

Throughout 2025, WBFA continued to move from evidence to action, and from policy to frontline delivery, strengthening health systems from the ground up, supporting the workforce, expanding health education in schools and communities, and advancing preventive models of care that place women and families at the centre. This is the work of building resilience in institutions and in communities themselves, and of advancing equity, because health inequities are rarely accidental. They are shaped by the wider social determinants of health and by the persistent gaps that leave too many women and children behind.

Our mission has always extended beyond service delivery. WBFA serves as a bridge between community realities and global commitments, ensuring that the lived experience of women and frontline providers is represented in the spaces where priorities are set and resources are shaped. Whether with government, multilateral institutions, academic partners, or responsible private sector allies, our role is to help ensure that health for all is made real in practice and enacted in policy and never left as an aspiration on paper.

That responsibility has rarely mattered more than in 2025, a year defined by a significant contraction in overseas development assistance. Donor governments have reduced their commitments at the very moment countries are working to expand primary health care and sustain hard-won gains in survival. The effects are felt first at the frontline, in the facilities and communities that depend on these services. Globally, we make the case for resource mobilisation, domestic health financing, and partnerships that endure beyond a single funding cycle. In our states of operation, we work at the frontline, so that we continue to mobilise and reach those we serve across the life course, from birth through adolescence, through the reproductive years, and into older age.



The health workforce sits at the centre of every health system. Yet many countries are grappling with significant challenges, among them critical shortages, an inadequate mix of skills, inequitable geographical distribution, and gaps in competency, motivation, and performance. These strains bear directly on whether people can reach the accessible, quality care they need to live healthy lives. Our investment in midwives and nurses has therefore remained constant, because the distance between a national policy and a safe birth is most often measured by whether a skilled and supported health worker is present at the point of care.

What endures, year after year, is our certainty that respectful, quality, equitable, and accountable care must be the everyday standard of every health system, in every community, without exception. A positive pregnancy, a safe birth, a protected newborn, a supported mother, a well-trained midwife, a hygienic facility, and a resilient primary health care system are the foundations of national wellbeing, social justice, and sustainable development, and every family has a right to them.

I remain deeply grateful to every member of the WBFA family, to our partners, and to the communities whose trust guides our work. Their commitment makes possible the sustained work of systems strengthening, social change, and lifesaving action. Progress in global health is rarely achieved through rhetoric alone. It comes through persistence, partnership, courage, and care.

In the year ahead, we will continue to champion policies and programmes that reduce preventable deaths among women and newborns, strengthen responsive health systems, elevate the health workforce, and uphold the right of every family to survive and to thrive. This is the promise of wellbeing. This is the imperative of equity. This is the work to which the Wellbeing Foundation Africa remains wholly committed, in the certainty that we are stronger together.

Her Excellency Mrs Toyin Ojora Saraki

Founder & President, The Wellbeing Foundation Africa

TOYIN SARAKI

*Her Excellency Toyin Saraki
Global Policy & Philanthropy*

[Read The Toyin Saraki Global Office Policy
and Philanthropy Annual Report 2025](#)



THE WELLBEING
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Foreword

A Message from the Wellbeing Foundation Africa National Directorate

It is with great pleasure that we welcome you to the Wellbeing Foundation Africa's report for 2025. The year was a defining juncture for the Foundation, one in which the evidence generated across our frontline moved into national policy, and in which policy returned to the frontline as practice. The pages which follow set out that journey across our programmes, our partnerships and our institution.

Outcomes for women and newborns in Nigeria remain among the most urgent items of unfinished business in the 2030 Agenda for Sustainable Development. The distance between what is known and what is delivered is where those outcomes are decided. WBFA closes that distance. Through 2025 we worked as an implementing organisation, a convener, an advocate and a systems partner, so that implementation evidence drawn from service delivery informs national priorities and contributes to the normative direction of global health. Our work is directed towards the health and wellbeing of women, newborns, children and adolescents, and towards health systems which are equitable, resilient and sustainably financed.

The MamaCare360 Programme delivers structured antenatal and postnatal education through WBFA's globally trained midwives, extended beyond the facility by the MamaCare360 Digital Midwifery Service. The MamaCare360 NICU Plus Programme brings specialist lactation support, Kangaroo Mother Care and family-centred education to mothers of preterm and low birthweight newborns in neonatal intensive care. Project Oscar - Light For Life, a Neonatal Jaundice Screening, Treatment and Kernicterus Prevention Programme, is delivered with Reckitt alongside the London School of Hygiene and Tropical Medicine, NEST360, SCIDaR and the Lagos State Ministry of Health, and is founded on the advocacy of Oscar Anderson MBE. The WBFA-Dettol Nigeria Hygiene Quest Programme, delivered under the Clean Naija Initiative carries water, sanitation and hygiene education into schools, communities and health facilities. The WBFA and Liverpool School of Tropical Medicine Global Health Workforce Programme, delivered with the National Postgraduate Medical College of Nigeria, embeds the Advanced Obstetrics and Surgical Skills curriculum within postgraduate medical education through Centres of Excellence, and continued through 2025 under a costed extension. It is funded by the United Kingdom Department of Health and Social Care and managed by Global Health Partnerships, formerly the Tropical Health and Education Trust, with Ducit Blue Solutions as grant manager in Nigeria.



Each of these programmes closes the same distance. What our midwives, nurses and clinicians learn at the bedside and in the classroom is carried into curricula, national guidelines and government systems, in service of the Global Strategy for Women's, Children's and Adolescents' Health.

Institutional capacity was strengthened alongside delivery, because evidence becomes action only where the institution can carry it. As our programmes expanded, we recruited to meet them, growing to a team of ninety-six professionals across five states. Over the same period we brought governance and financial accountability into line with International Financial Reporting Standards, and provided technical leadership through national technical working groups and the multi-sector partnerships shaping Nigeria's health agenda.

This work is anchored in the multilateral system, which is where locally generated evidence becomes a normative standard. The Wellbeing Foundation Africa holds Special Consultative Status with the United Nations Economic and Social Council and is a Member of the United Nations Global Compact. WBFA is a member of the World Health Organization Civil Society Commission, is accredited as a non-State actor to the WHO Regional Committee for Africa, and is a member of the WHO Implementing Best Practices Network. As Nigeria's first and longest-standing country member of the Partnership for Maternal, Newborn and Child Health, the world's largest alliance for the health and wellbeing of women, children and adolescents, WBFA holds PMNCH Board Observer privileges. At the continental level, WBFA holds Observer Status with the African Union, and our programming is aligned to Agenda 2063 and to the continental frameworks on health and human capital. These accreditations carry an obligation, which is to bring Nigerian implementation evidence into the forums where global standards are set.

WBFA's distinct contribution is the bridge between the two halves of this report's theme, and that bridge is held up at both ends by others. We deliver at the frontline while working with government at federal and state level, development partners, health workers and communities to strengthen the policies, institutions and capacities which sustain long-term progress. This approach is grounded in country ownership and in the leadership of local actors, and it allows locally grounded practice to inform solutions of national scale. No single organisation transforms a health system. We are stronger together, and accountability for quality care is shared.

Our priorities for the period ahead follow the same logic. They are the acceleration of progress towards universal health coverage through climate-resilient primary health care, the integration of digital innovation into care for women and newborns, sustained investment in the health and care workforce, and the institutionalisation of proven models within government systems and domestic financing. Resilient health systems are built through collaboration, innovation and sustained investment in people, so that no woman, newborn or adolescent is left behind.

The Nigerian Directorate records its appreciation to our partners, donors, government counterparts, health workers, communities and to every member of the WBFA team, whose commitment makes this work possible.

Stronger together, we are moving from evidence to action, demonstrating that principled leadership, rigorous evidence and strong partnership can transform policy, strengthen frontline delivery and secure the right to health for every Nigerian.

The Team



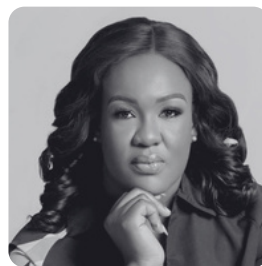
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Audrey Baffour
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Daniel Ikwong
Lagos State Team Lead



Kelvin Agagbe
F.C.T Team Lead



Peter Adegboroye
Kwara State Team Lead



Executive Summary

The year 2025 represented a pivotal phase in the Wellbeing Foundation Africa's (WBFA) two-decade journey to strengthen health systems and advance equitable wellbeing for women, children, and families across Nigeria. Operating at the intersection of community engagement, clinical excellence, and policy influence, WBFA continued to demonstrate that sustainable progress in maternal, newborn, and primary healthcare is possible when data, empathy, and accountability converge.

Amid persistent national challenges including high maternal and neonatal mortality and widening climate-related health risks WBFA delivered measurable results through flagship programmes that integrate evidence-based interventions into existing health structures.

Under Project Oscar – Light for Life, more than 8,300 newborns were screened for neonatal jaundice across sixteen public facilities, achieving a 98 percent treatment success rate and preventing avoidable brain injury. The MamaCare360 and NICU Plus programmes continued to anchor maternal and newborn care, reaching over 12,000 women across programme states through antenatal education, skilled birth attendance, and postnatal follow-up. The Global Health Workforce Programme, in partnership with the Liverpool School of Tropical Medicine, trained 65 additional doctors in Advanced Obstetric Surgical Skills, expanding Nigeria's cadre of emergency obstetric specialists to 266 clinicians. Meanwhile, the Dettol Hygiene Quest programme, delivered in collaboration with Reckitt, achieved statistically significant hygiene behaviour change among over 200,000 pupils and teachers across five states.

These programme achievements were underpinned by a strengthened institutional foundation. The organisation's workforce grew to 96 staff, 81 of whom serve directly in programme implementation, while financial management remained fully compliant with IFRS standards. Investments in monitoring, evaluation, and digital data systems enhanced the Foundation's ability to track impact, inform decision-making, and report transparently to partners and the public.

WBFA also reinforced its role as a bridge between grassroots realities and global health discourse. Her Excellency Toyin Ojora Saraki, President and Founder, represented the Foundation at One Young World in Munich as a Counsellor, mentoring the next generation of health equity advocates, and at the United Nations General Assembly, where her advocacy for climate-health integration contributed to Nigeria's inclusion in a new multi-country commitment on primary healthcare resilience. These engagements amplified WBFA's standing as a trusted African voice in international health diplomacy.

As global development partners increasingly prioritise country-led systems and co-financing models, WBFA is strategically positioned to serve as both an implementer and systems integrator delivering frontline results while informing the structural reforms needed to sustain them within government frameworks.

Looking ahead, the Foundation will advance climate-resilient primary healthcare, digital midwifery innovation, and the institutionalisation of proven models within government frameworks. The vision remains constant: to build a Nigeria where every woman survives childbirth, every newborn thrives, and every community enjoys the dignity of health and wellbeing.



Introduction



THE WELLBEING
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The Wellbeing Foundation Africa (WBFA) is a pan-African non-governmental organisation transforming and improving the quality of maternal, newborn, child, and adolescent health outcomes across Nigeria and the African continent. Established in 2004 by Her Excellency Mrs. Toyin Ojora Saraki, WBFA delivers evidence-based programmes and strategic advocacy initiatives that strengthen health systems, empower frontline workers, and improve community wellbeing.

At the core of WBFA's work is a steadfast commitment to achieving the United Nations Sustainable Development Goals (SDGs), particularly SDG 3, which seeks to ensure healthy lives and promote wellbeing for all ages. Through the continuum of care model, WBFA prioritizes measurable impact in maternal, newborn, child, and adolescent health (MNCAH), ensuring that women and children receive quality care from pregnancy through early childhood and adolescence. Healthcare workers in selected communities and facilities are trained and supported to identify life-threatening danger signs and deliver life-saving interventions, thereby contributing to reductions in maternal and neonatal mortality and improving long-term health outcomes.

Beyond SDG 3, WBFA advances Goals 4, 5, 6, 10, 13, and 17 through integrated programming that addresses education, gender equality, clean water and sanitation, reduced inequalities, climate and environmental sustainability, and partnerships for sustainable development. The Foundation develops and scales programmes that respond to health-related challenges while strengthening social determinants of health. While maintaining a broad development lens, WBFA's primary operational focus remains on health, gender equality, water, sanitation, and hygiene (WASH) systems that underpin resilient communities.

WBFA has pioneered extensive training and capacity-building initiatives through its flagship MamaCare360 midwifery-led programme, equipping healthcare professionals with global best practices in maternal and newborn care. Through pregnancy schools, antenatal and postnatal education sessions, and community-based outreach, mothers and families are empowered with accurate information, practical skills, and critical support systems necessary for safe pregnancy, childbirth, and early childhood development.

Recognising that wellbeing extends across the life course, the Foundation implements tailored programmes that support adolescents and young people in achieving optimal health, education, and personal development outcomes. Through structured personal, social, and health education curricula, young people receive age-appropriate, fact-based knowledge that strengthens their nutrition, hygiene, reproductive health awareness, and life skills enabling them to build healthy relationships and realise their full potential.

The Foundation's commitment to Water, Sanitation, and Hygiene (WASH) remains central to its preventive health strategy. Safe water supply, infection prevention control (IPC), handwashing facilities, and improved hygiene practices in health facilities and schools are fundamental to safeguarding mothers, newborns, healthcare workers, and communities. By strengthening WASH systems and promoting behavioural change, WBFA contributes to reduced infection risks, improved school attendance—particularly for girls and enhanced health system resilience.

Through strategic partnerships with government institutions, private sector stakeholders, multilateral agencies, and community-based organisations, WBFA leverages technical expertise and innovation to drive sustainable behavioural change. Policy advocacy, digital health innovation, frontline workforce development, and community engagement remain central pillars of the Foundation's operational model.

As the Wellbeing Foundation Africa advances into 2025, it remains steadfast in its mission to build healthier, more resilient communities across Nigeria and the African continent. Guided by integrity, compassion, and evidence-based practice, WBFA continues to ensure that every woman, child, adolescent, and family has the opportunity to live a dignified, healthy, and prosperous life.

Core Institutional Programmes



The Wellbeing Foundation Africa Core Institutional Programmes

Nigeria, considered Africa's most populous country, with a population of over 200 million, accounts for over 25% of all global maternal deaths. Currently, the estimated maternal mortality in Nigeria is about 1,047 per 100,000 live births, which means that a Nigerian woman has a 1 in 25 lifetime risk of dying during pregnancy, childbirth or the post-partum period. In 2022, the World Health Organisation (WHO) estimated that only 50.1% of births were likely attended by a skilled birth attendant. This signifies that over 45% of births are not assisted by skilled health workers, and are at risk of maternal and/or neonatal death.

Pregnancy and the first years of life are probably the most important stages in the life cycle. This is when the foundation for future health and wellbeing is laid down, and it is a time when parents are more receptive to learning and making changes. Evidence shows that the outcomes for both children and adults are strongly influenced by the factors that operate during pregnancy and the first years of life (Marmot, 2010). Consequently, the health of the mother is critical to the development of their children.

Globally, the Sustainable Development Goals (SDGs) have set an ambitious target of reducing the global maternal mortality ratio to less than 70 per 100,000 live births by 2030. In Nigeria, the adoption of the Safe Motherhood Initiative, the Integrated Maternal, Newborn and Child Health (IMNCH) Strategy, and the establishment of the Midwife Service Scheme (MSS) are just some of the few strategies that aimed to curb the high rate of perinatal deaths.

Since 2004, the Wellbeing Foundation Africa, founded by H.E. Toyin Ojora Saraki, has demonstrated pioneering leadership in the advancement of women's and children's health, including through community health workers and midwives. Through our flagship programme - MamaCare360, the Wellbeing Foundation Africa (WBFA) is working to improve maternal health by promoting Respectful Maternity Care (RMC) for all women during pregnancy, childbirth, and in the time after birth. Respectful maternity care is a universal human right due to every childbearing woman in every health system around the world (WRA, 2010). We believe that: "Midwifery is a vital solution to the challenges of providing high-quality maternal and newborn care for all women and newborn infants in all countries.

Key highlights in 2025 programme

69,793
Empowered
pregnant mothers

27,114
Lactating mothers
Empowered

18,058
Safe deliveries

1,002 babies and 894 mothers
Benefited from the **NICU Plus**
program

1,164,428 mls
Breastmilk **expressed** across
five hospitals

4,563
New mothers enrolled on our
MamaCare WhatsApp
platform

8,130 across 31 groups
Mothers reached on our
MamaCare WhatsApp
platform



It is also an effective means to promote the health and wellbeing of women of childbearing age, as well as their newborns and families, with a potentially rapid and sustained effect on population health outcomes.” (Lancet Midwifery Series 2014).

With guiding principles of care based on the World Health Organisation’s recommendations, the Wellbeing Foundation Africa puts training, equipping, and advocating for midwives at the center of its work. Midwives are responsible and accountable professionals who work in partnership with women to give them necessary support, care and advice during pregnancy, birth, and the postpartum period. The Foundation promotes respectful care and the involvement of pregnant women and their families in their care, as well as that of their babies.



MamaCare360 - Antenatal and Postnatal Education Programme



MamaCare360 Antenatal & Postnatal Education

The MamaCare360 Antenatal and Postnatal Education Programme is Wellbeing Foundation Africa's flagship maternal health initiative, designed to support women through pregnancy, childbirth, and the postnatal period. At its core, it is a strong commitment to Respectful Maternity Care (RMC), affirming the dignity, autonomy, and rights of women at every stage of the childbirth journey.

Grounded in the World Health Organisation's 2016 recommendations, MamaCare360 Antenatal and Postnatal Education Programme encourages more meaningful and consistent engagement between pregnant women and skilled health providers, shifting the focus from a minimum of four antenatal visits to at least eight quality contacts. This approach enables earlier risk detection, stronger birth preparedness, and better outcomes for both mothers and newborns.

Through community-based antenatal, postnatal, and childbirth education delivered by trained WBFA midwives, the programme equips women with practical knowledge and confidence to make informed health decisions. Sessions cover the full spectrum of Sexual, Reproductive, Maternal, Newborn, Child, and Adolescent Health and Nutrition (SRMNCAN+N), while reinforcing positive Water, Sanitation, and Hygiene (WASH) practices. Together, these interventions play a meaningful role in reducing preventable maternal and infant deaths in Nigeria.

What sets MamaCare360 apart is its holistic, woman-centered care model, which intentionally integrates maternal mental health support, an area often overlooked in routine care. Through psychosocial counselling, peer support, and community awareness, the programme addresses the emotional and psychological challenges many mothers face, helping to build resilience and long-term wellbeing.

WBFA Geographic Coverage:

Implemented across **Kwara, Lagos, Osun, Cross River, and the Federal Capital Territory (Abuja)**, MamaCare360 is delivered through structured group sessions and one-on-one counselling at participating health facilities. Antenatal sessions focus on pregnancy wellness, nutrition, danger signs, birth preparedness, neonatal jaundice, mental wellbeing, hygiene practices, and the importance of regular ANC attendance and skilled delivery. Postnatal sessions emphasize newborn care, exclusive breastfeeding, maternal recovery, family planning, neonatal danger signs, neonatal jaundice, and early childhood development.

The programme is led by formally trained and fully licensed midwives and strengthened through continuous follow-up, caregiver engagement, and digital support via WhatsApp platforms. By combining professional caregivers, trusted health education, emotional support, and timely referrals, MamaCare360 encourages positive health-seeking behaviour, safer pregnancies, improved delivery outcomes, and healthier mothers and babies.

Key Results:

In 2025, MamaCare360 reached **96,907 women** across 75 health facilities in the five implementing states, including **69,793 pregnant women** and **27,114 nursing mothers**. The initiative documented **18,058 safe deliveries**, indicative of enhanced birth readiness and a growing trust in clinical care. Furthermore, **5,333 family members**—specifically spouses and influential relatives—attended sessions, bolstering domestic support for maternal and neonatal well-being. Through its integrated, people-centered approach, MamaCare360 continues to strengthen respectful maternity care, improve health-seeking behaviour, and contribute to safer pregnancies and healthier outcomes for women, newborns, and families.

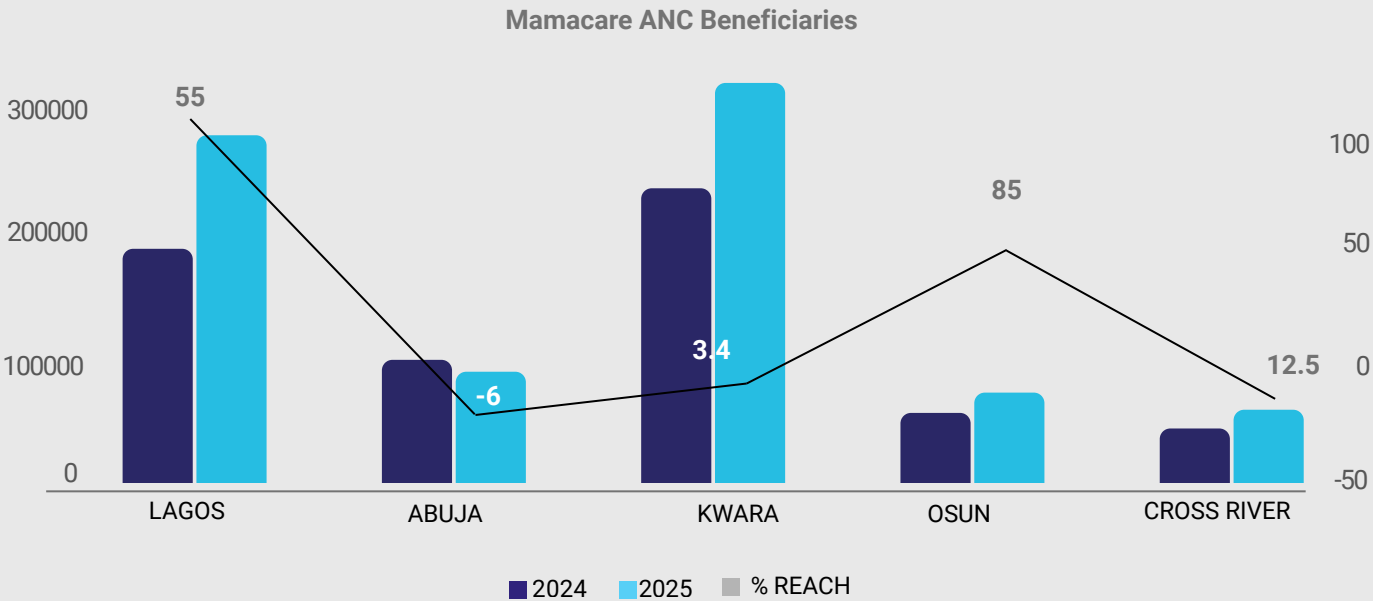


Indicator	Result (2025)	Notes
Pregnant women reached	69,783	Across 75 implementing Healthcare facilities in 5 states
Lactating mothers reached	27,114	
Safe deliveries recorded	18,058	100% increased rate against 2024 data

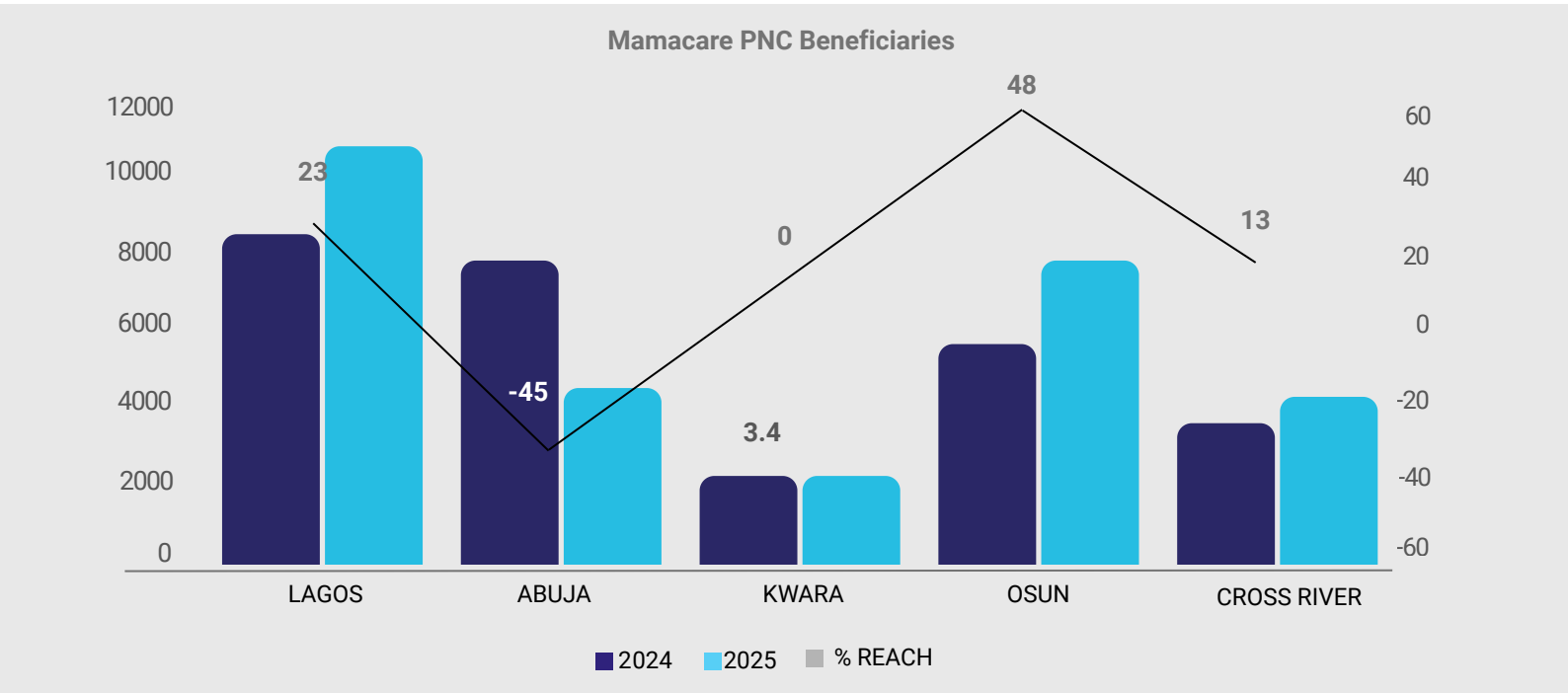
MamaCare360 – Facilities and Beneficiaries

State	Pregnant Women	Nursing Mothers	Influencers	Safe Deliveries
Lagos	20,242	9,629	1,698	5,361
FCT (Abuja)	14,369	4,619	935	2,798
Kwara	25,416	2,302	1,394	7,502
Osun	5,309	7,450	932	1,222
Cross River	4,371	3,089	386	1,175

MamaCare360 ANC & PNC Performance by State (2025)



Comparing the number of pregnant women reached in 2025 with 2024



Technical Comparative Analysis (2024–2025)

Lagos State: Strategic Integration, Driving Growth

Lagos recorded a clear upward trajectory in antenatal and postnatal engagement. This growth was not incidental. A key driver was the integration of Neonatal Jaundice (NNJ) facilities into the existing MamaCare360 ecosystem, effectively expanding the delivery of service points.

Abuja: Systemic Shock, Not Programme Failure

The sharp decline in Abuja must be understood within the context of its health system, not as a reflection of reduced programme relevance or quality. The period under review coincided with the resident doctors’ strike, which significantly disrupted facility operations, patient flow, routine ANC and PNC service delivery, and reduced clinical activity.

Osun State: Workforce Investment Yielding Returns

Osun recorded one of the strongest performances nationally. A key enabling factor was the addition of a midwife to the MamaCare360 workforce, which increased the frequency and consistency of ANC and PNC sessions.

Kwara and Cross River: Stability and Incremental Gains

These states reflect programme stability rather than rapid expansion or contraction.



MamaCare360 NICU Plus

The Wellbeing Foundation Africa's MamaCare360 NICU Plus Programme is a life-saving programme that promotes exclusive breastfeeding and strengthens neonatal care by equipping Neonatal Intensive Care Units (NICUs) with medical-grade hospital-use double breast pumps, providing specialised lactation support, and building the capacity of healthcare professionals through LactaHub training. Delivered by skilled MamaCare360 midwives and LactaHub-certified lactation experts, the programme empowers mothers with practical guidance on breastfeeding, breastmilk expression, safe milk handling, and kangaroo mother care, ensuring vulnerable newborns receive the life-saving benefits of mothers' own milk. By combining clinical equipment, professional training, and continuous maternal support, the initiative improves infant survival, enhances the quality of neonatal care, strengthens healthcare facilities, and fosters sustainable breastfeeding practices.

The WBFA MamaCare360 NICU Plus Programme provides comprehensive support for mothers and preterm or critically ill newborns, improving outcomes for babies affected by prematurity, low birth weight, respiratory distress, neonatal jaundice, perinatal asphyxia, and other complications requiring intensive care. Through LactaHub's evidence-based lactation education and mentorship for healthcare providers, alongside dedicated breastfeeding counselling for families, the programme helps establish early and sustained breastfeeding, strengthens neonatal nutrition, and builds long-term capacity within NICUs to deliver high-quality, family-centred care.

Geographic Coverage:

The programme is being implemented in five hospitals across Nigeria: (Lagos Island Maternity, in Lagos State, University of Ilorin Teaching Hospital and Kwara State University Teaching Hospital, both in Kwara State; and Asokoro District Hospital, and Maitama District Hospital, both in the Federal Capital Territory, Abuja.

Key Results:

In 2025, and across the 5 facilities, 1,002 babies and 892 mothers were reached and supported with 1,164,428mls of mother's milk, expressed using the Medela symphony double pumping breast pumps. This targeted intervention reflects the programme's ongoing commitment to improving neonatal health outcomes and empowering mothers through compassionate, expert-driven support.

To ensure consistent monitoring and continuous improvement, the MamaCare360 NICUPlus Programme implements daily and weekly reporting systems that track progress and achievements across facilities.

MamaCare360 midwives and Data Assistants play a pivotal role by:

- Instructing mothers on the correct use of symphony breast pumps.
- Providing daily updates on the condition of pumps and surge protectors.
- Submitting weekly data reports to capture utilization trends and outcomes.

The programme has continually addressed the knowledge gap on lactation practices by directly educating and supporting mothers of neonates with the essential and required information and behavioural change knowledge.



MAMACARE 360°
NICUPlus

Key Highlights in 2025 Programme

1,002 babies and 892 mothers
Benefited from the **NICU Plus Programme**

1,164,428 mls
Breastmilk Expressed Across Five Hospitals

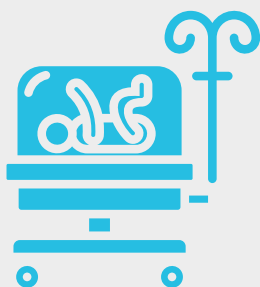
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Implementing Health Care Facilities



Indicator	Result (2025)	Notes
Preterm babies supported	1,002	Across 5 NICU hospitals
Mothers reached	894	Through lactation specific education and support
Breastmilk expressed	1,164,428 ml (about 294.5 gal)	Using symphony breast pumps domiciled in the HCFs

2025 NICU Admissions and Beneficiaries

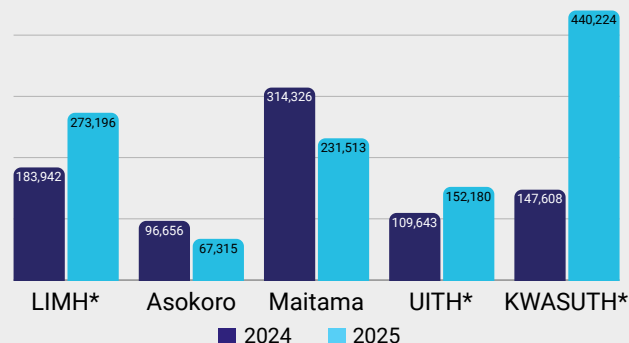
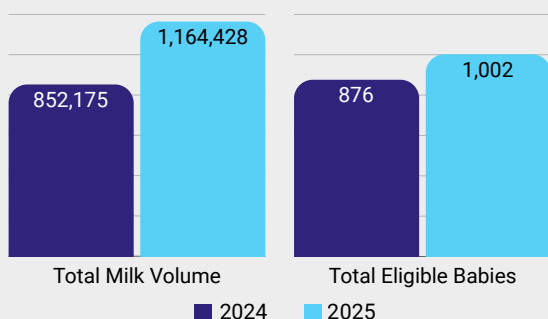
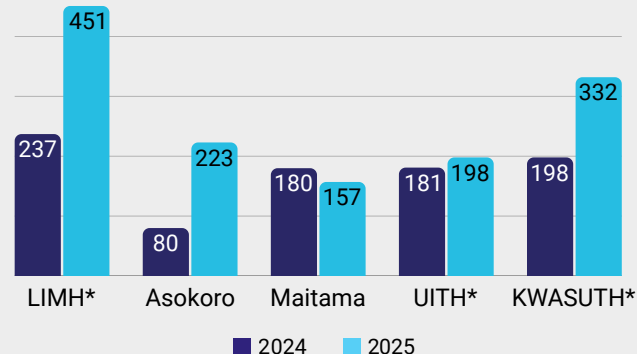
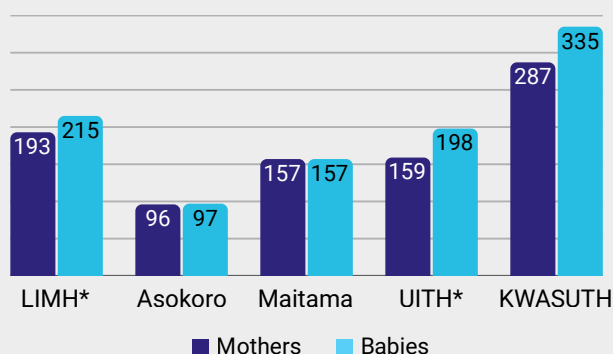
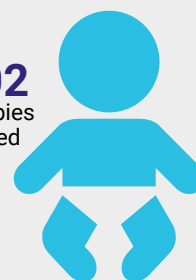
1,361
Total NICU
Admission



894
Total Mothers
Benefited



1,002
Total Babies
Benefited



*LIMH - Lagos Island Maternity Hospital, *UITH - University of Ilorin Teaching Hospital,
*KWASUTH - Kwara State University Teaching Hospital

Comparative Analysis (2024–2025)

Neonatal Admissions: Shifting Demand Patterns

Across facilities, neonatal admissions show mixed trends, reflecting both changing referral patterns and varying facility capacity.

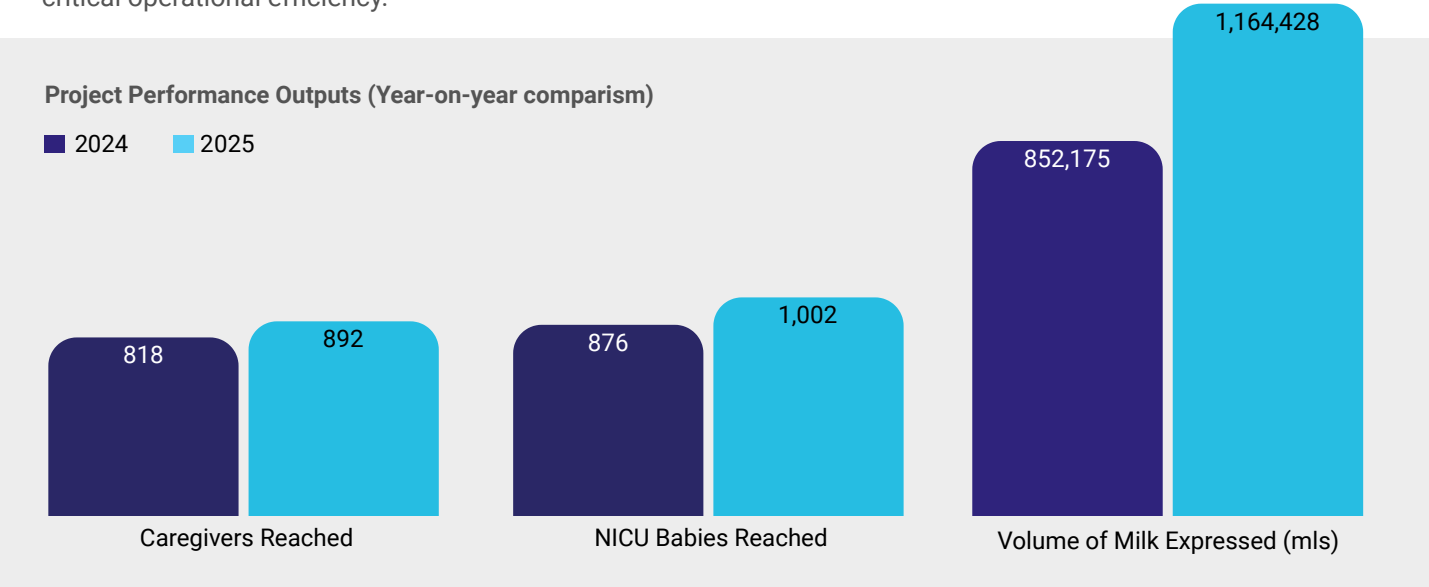
- Growth facilities such as GHI (+57%) and University of Ilorin Teaching Hospital (+9%) recorded notable increases in admitted babies, signalling rising demand for NICU services or improved referral confidence.
- Declines at Lagos Island Maternity Hospital (-11%) and Maitama (-16%) may suggest reduced admissions, possible system-level constraints, or redistribution of cases to other centres. Resident doctors' industrial actions, as well as the NICU outbreak quarantine, were contributing factors.

The data indicated that NICU Plus support remains most critical in high-burden facilities, particularly those experiencing rapid growth in admissions, where lactation support demand is likely to be highest.

Volume of Milk Expressed: The Core Output Indicator

The volume of breastmilk expressed offers the most direct measure of NICU Plus effectiveness.

- Lagos Island Maternity Hospital (+39%) and University of Ilorin Teaching Hospital (+39%) achieved substantial increases in milk volume despite stable or declining admissions, strongly suggesting improved lactation practices, effective pump utilization, and midwife-led support.
- Maitama (-26%) and Asokoro (-30%) experienced reductions, suggesting possible challenges with consistency of expression, equipment utilization, or staffing continuity.
- General Hospital Ikorodu (198%), with increased admissions, shows a sharp increase in milk volume, highlighting critical operational efficiency.



Mamacare360 NICU Plus Programme expanded its reach and strengthened service intensity, with total eligible babies increasing by 14.4% (from 876 to 1,002) and total milk volume expressed rising more substantially by 36.7% (from 852,175 to 1,164,428). The greater proportional increase in milk volume relative to admissions indicates improved lactation support practices and stronger maternal engagement, reflecting not only broader coverage but enhanced quality and effectiveness of milk expression support across participating facilities.

The chart above indicates a positive performance trend between 2024 and 2025 across all key NICU Plus indicators. The number of caregivers reached increased slightly from 818 to 85 (a 4% increase), while NICU babies supported rose from 876 to 1,002 (a 10% increase), indicating expanded programme reach and service delivery uptake. The most significant improvement was observed in the volume of breastmilk expressed, which increased from 852,175 mL in 2024 to 1,116,428 mL in 2025 (a 31% increase). This substantial growth suggests marked improvements in lactation to support effectiveness, caregiver engagement, and operational efficiency within NICU facilities.

Health Facility	Total Babies Fed	Babies Fed Own Mother’s Milk	EBF Rate (%)
Asokoro General Hospital	97	94	96.90%
Lagos Island Maternity Hospital	215	194	90.20%
Maitama District Hospital	157	140	89.20%
General Hospital Ilorin	335	298	88.90%
University of Ilorin Teaching Hospital	198	149	75.30%
Total	1,002	875	87.30%

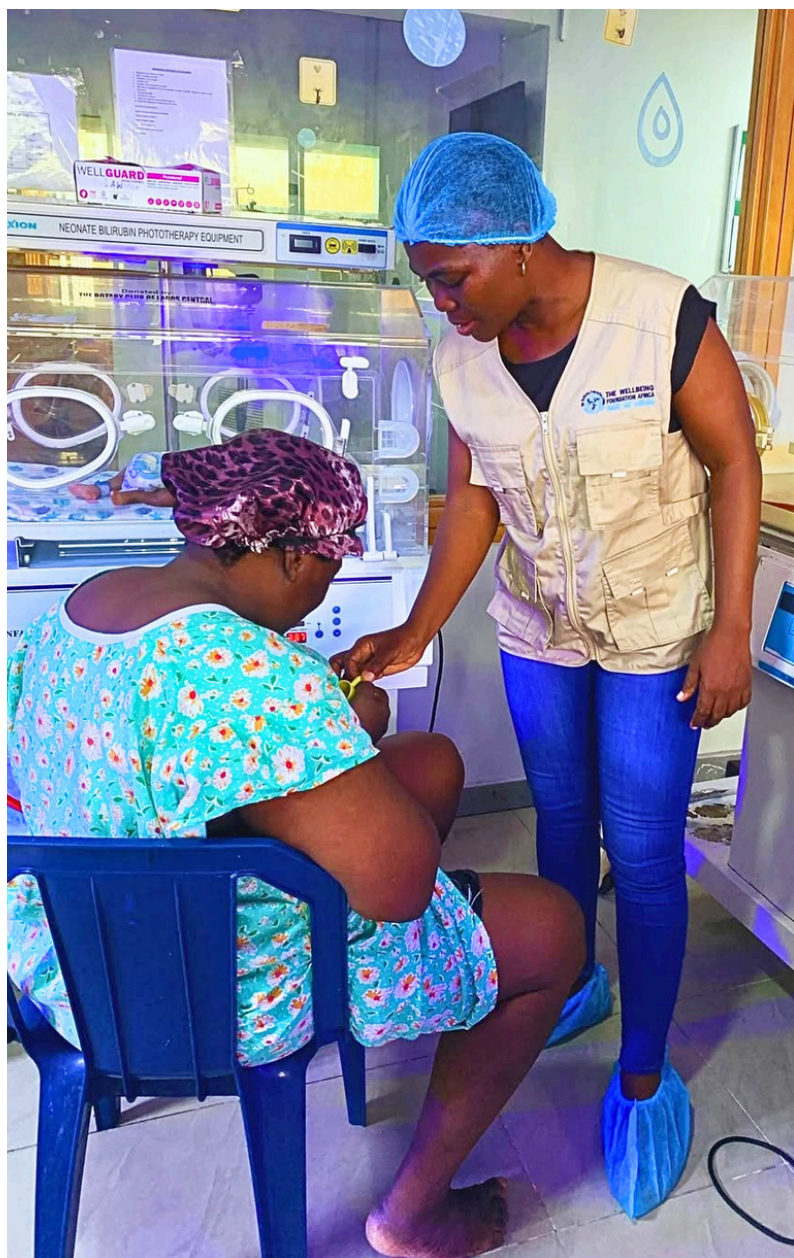
Exclusive breastfeeding rates across implementing HCFS in 2025

During the reporting period, a total of 1,002 neonates received feeding support across five MamaCare360 NICU Plus implementing health facilities. Of these, 875 neonates were fed exclusively with their mother's own milk, resulting in an overall weighted Exclusive Breastfeeding (EBF) rate of 87.3%.

Facility-level performance remained strong across most sites. Asokoro General Hospital recorded the highest EBF rate at 96.9%, demonstrating near-universal uptake of own mother's milk feeding. Lagos Island Maternity Hospital (90.2%), Maitama District Hospital (89.2%), and General Hospital Ilorin (88.9%) also sustained high performance, indicating effective lactation counselling, early milk expression support, and adherence to MamaCare360 NICU Plus feeding protocols.

However, UITH recorded a comparatively lower EBF rate of 75.3%, driven by higher proportions of mixed feeding. This variation suggests potential differences in case complexity, delayed lactation initiation, maternal health barriers, or system-level challenges requiring targeted quality improvement support.

The 87.3% overall EBF rate across all sites demonstrates that the MamaCare360 NICU Plus programme is effectively strengthening exclusive breastmilk feeding practices among admitted neonates. Focused supportive supervision and peer-learning exchange across facilities will further optimise equitable and sustained breastfeeding outcomes.



MamaCare360 Digital Midwifery



Key highlights in 2025 program

4,563
of Total New Mothers Added

31
Total WhatsApp Groups

12,329
Cumulative Participants

As a strategic extension of the MamaCare360 programme, the Digital Midwifery Service was established to enhance access to timely, accurate, and life-saving maternal health information while enabling prompt midwife-led responses to emerging concerns. The service supports pregnant women and nursing mothers with continuous guidance on pregnancy, labour, childbirth, newborn care, and postpartum wellbeing beyond physical classes, home visits, and community engagements.

The Digital Midwifery Service operates as a 24/7 health education and counseling platform, leveraging WhatsApp, a widely accessible and familiar communication tool to maintain consistent engagement with beneficiaries thereby ensuring continuous support for mothers.

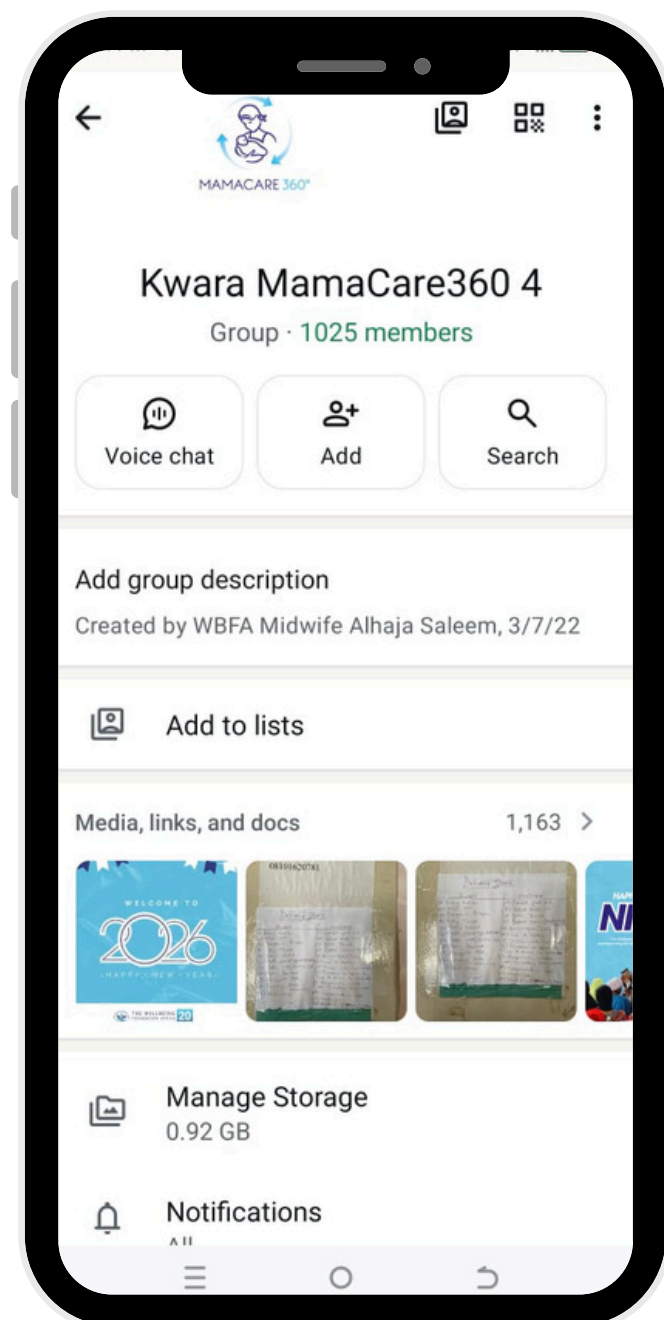
In 2025, thirty two (32) WhatsApp groups are currently active, which collectively have 8,130 pregnant women and nursing mothers actively engaging on the platform. Through these virtual communities, beneficiaries receive real-time, midwife-led support, including emergency counseling, appointment reminders, breastfeeding guidance, nutritional advice, and maternal mental health check-ins.

The Digital Midwifery Programme has proven instrumental in reducing barriers to care, particularly during periods of reduced facility attendance due to weather conditions, infrastructural challenges, or social events.

By ensuring continuity of care and personalized follow-up, the platform strengthens the MamaCare360 continuum of care model and reinforces WBFA's commitment to accessible, responsive, and woman-centered maternal health services.

Indicator	Result (2025)	Cumulative Total
New mothers added	4,563	12,329 total mothers supported in 2025
Active WhatsApp groups	32	Across 5 implementing states

Women reached via the digital Midwifery platforms





Upscaling Midwives' Access to Modern Training and Tools: Health Workforce Capacity Building for Continuous Professional Development



GE HealthCare – Ultrasound Initiative

The General Electric (GE) VSCAN Access Ultrasound Machine serves as a strategic intervention which empowers midwives with the skills and capacity to effectively run obstetric scans on pregnant women, this strengthens and complements antenatal services thereby ensuring continuum of care.

A total of eight (8) GE VSCAN Access Ultrasound Machines were distributed to eight healthcare facilities across four states—**Abuja (3), Kwara (2), Lagos (2), and Osun (1)**. This targeted distribution has significantly expanded access to essential diagnostic services for women attending antenatal care in underserved and high-burden settings.

In 2025, midwives across the eight beneficiary facilities conducted a total of 694 pregnancy scans using the VSCAN machines, underscoring the intervention’s contribution to improved service delivery, timely clinical decision-making, and strengthened continuity of maternal healthcare.



Number of scans conducted in the year under review

State	Scans
Lagos	180
Abuja	149
Kwara	306
Osun	59
TOTAL	694



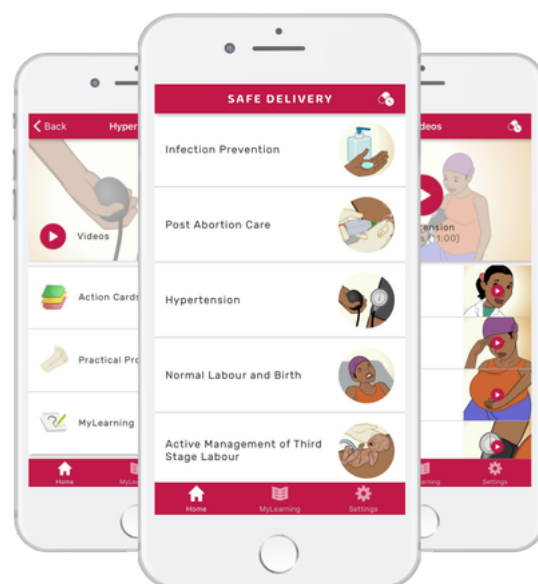
Laerdal Global Health – Simulation & Capacity Building

Through its partnership with Laerdal Global Health, the Wellbeing Foundation Africa (WBFA) has enhanced maternal and newborn care in low-resource settings. Laerdal's mission to save 400,000 lives annually aligns with WBFA's commitment to improving health outcomes. With Laerdal's support, WBFA has trained midwives in the use of simulation and anatomical models to strengthen breastfeeding counseling and maternal education. These tools are actively used in MamaCare360 classes to teach mothers early and exclusive breastfeeding, proper positioning, and correct attachment techniques. The Emergency Obstetric and Newborn Care (EmONC) programme has also benefited from Laerdal's teaching aids, enabling healthcare workers to adopt global best practices in newborn care. These efforts have significantly contributed to reducing maternal and newborn morbidity and mortality across supported communities.



Road testing of Maternity Denmark Safe Delivery App

The Wellbeing Foundation Africa (WBFA) and the Maternity Foundation have partnered for many years, with H.E. Mrs Toyin Ojora Saraki championing the Safe Delivery App as a tool for midwifery-led care, including delivering the goodwill address at the New York launch of Maternity Foundation Inc. In 2025, this collaboration gained global momentum. On 24 June, UNFPA and the Maternity Foundation launched the 10 Million Safer Births Initiative in Abuja, under the patronage of Her Majesty Queen Mary of Denmark, committing to 10 million safer births across sub-Saharan Africa by 2030 through the Safe Delivery+ programme, with Nigeria among the first three implementation countries. H.E. marked the Royal State Visit with a goodwill statement recognising WBFA's longstanding partnership in introducing the Safe Delivery App to frontline midwives in Nigeria.



Three months later, during the United Nations General Assembly, the Maternity Foundation joined UNFPA, the World Diabetes Foundation, PMNCH, Jhpiego and HRP to convene Uniting Efforts on Noncommunicable Diseases and Maternal Health: From Integration to Impact, highlighting the need to integrate NCD care within maternal and newborn services—a position reflected in WBFA's work on maternal anaemia, gestational diabetes and perinatal mental health. Against this backdrop, WBFA partnered with the Maternity Foundation in 2025 to assess the Safe Delivery App for integration into its maternal health programmes. Building on the Foundation's MamaCare360 programme, the App was incorporated into WBFA's Digital Midwifery Service to strengthen the continuum of maternal and newborn care and support reductions in preventable maternal and neonatal mortality.

App Assessment Findings:

The assessment demonstrated high levels of acceptability and usability among participating midwives, with the Safe Delivery App enhancing the quality and consistency of antenatal and postnatal education by improving their ability to explain maternal health concepts during counselling sessions. Overall user satisfaction was high, with an average score of 8.7/10, while the App achieved an overall usability score of 4.17/5, reflecting its relevance, practicality, and ease of integration into routine clinical practice. Midwives reported that the content aligned closely with the MamaCare360 Antenatal and Postnatal Education Manual, enabling seamless adoption within existing service delivery workflows. Participants recommended expanding the App to include breastfeeding, neonatal jaundice, and additional newborn care topics, while also proposing the development of a mother-facing version to strengthen maternal health literacy, reinforce health messages, improve self-care practices, and increase demand for quality maternal and newborn health services. These findings provide valuable implementation evidence to support Nigeria's participation in Phase One of the 10 Million Safer Births Initiative and have been shared with the Maternity Foundation to inform future scale-up.

Donor Funded Grants and Partnerships

In line with its mission to improve health outcomes and advance the Sustainable Development Goals, the Wellbeing Foundation Africa (WBFA) delivers impactful donor-funded programmes with local and international partners. These focus on maternal, newborn, and child health, hygiene promotion, and preventing avoidable illness and death. In 2025, WBFA expanded its reach through the following key initiatives:

LSTM–WBFA Global Health Workforce Programme LG 130 (GHWP)

In January 2024, WBFA and the Liverpool School of Tropical Medicine (LSTM) secured a grant funded by the UK Department of Health & Social Care, managed by Global Health Partnership (formerly THET) and Ducit Blue Solutions. This grant enabled collaboration under the Global Health Workforce Programme (GHWP). Building on this support, the Advanced Emergency Obstetric, Newborn Care and Surgical Skills (AOSS) Programme was formally launched in February 2024 in Abuja, in partnership with the National Postgraduate Medical College of Nigeria (NPMCN). The programme is designed to improve the availability of quality advanced emergency obstetric and newborn care in hospitals by strengthening NPMCN's capacity to deliver its competency-based curriculum to resident doctors in Obstetrics and Gynaecology. Since launch, the project has trained 225 doctors across four states and established two Centers of Excellence. Early outcomes already show a 15% increase in participants' knowledge and clinical competence, reinforcing Nigeria's capacity to respond effectively to obstetric emergencies and reduce maternal and neonatal mortality

WBFA–Dettol Nigeria Hygiene Quest Programme and Curricula

WBFA–Dettol Nigeria Hygiene Quest Programme and Curricula supported by our social impact partners Reckitt, has significantly advanced hygiene awareness and behaviour change across schools, communities, and healthcare facilities. As a key delivery partner of Nigeria's national Clean Naija Initiative, WBFA has aligned its PSHE-WASH efforts with the Federal Government's campaign to end open defecation and promote universal access to sanitation. The WBFA–Dettol Nigeria Hygiene Quest Programme and Curricula between February - September 2025 reached 238,235 beneficiaries, including 170,439 students, 42,998 pregnant and lactating mothers, and 24,800 community members. These figures represent a 122% achievement rate against the annual target, underscoring the programme's expansive reach and its critical role in strengthening infection prevention, maternal health, and community hygiene under the broader Clean Naija framework.

Project Oscar – Light for Life, a Neonatal Jaundice Screening, Treatment and Kernicterus Prevention Programme

In the last quarter of 2024, WBFA officially launched Project Oscar – Light For Life, an 18-month initiative focused on reducing neonatal jaundice-related morbidity and mortality in Lagos State, supported by our social impact partners Reckitt and implemented in partnership with NEST360, Solina, and the London School of Hygiene and Tropical Medicine LSHTM. The project equipped 12 Primary Health Centres (PHCs), 3 secondary, and 1 tertiary health facility with bilirubinometers, phototherapy units, and essential consumables. A total of 223 newborns were screened, 39 treated, and zero neonatal deaths recorded, marking a significant contribution to early neonatal survival. In addition, 1,222 mothers received targeted education on neonatal jaundice, and 60 healthcare workers were trained to improve detection and care.

Globally, the programme was amplified through WBFA's Light for Life Global Advocacy Letter, co-signed with partners on the International Day of Persons with Disabilities 2024. The letter called on the government to adopt universal bilirubin screening and integrate phototherapy into essential newborn care. This initiative demonstrates WBFA's approach of linking frontline action with global advocacy to reduce preventable disability and mortality.

Key highlights in 2025 Programme

LSTM–WBFA Global Health Workforce Programme LG 130 (GHWP)

65

Doctors trained across **2 states**

15% increase in participants' knowledge

WBFA–Dettol Nigeria Hygiene Quest Programme

102,350

students reached

44,504

pregnant & lactating mothers engaged

15,182

community members reached

576

Hygiene Quest Clubs

238,235 total beneficiaries

Project Oscar – Light For Life

8,366 newborns screened

837 newborns treated

29,871 mothers educated on neonatal jaundice

231 healthcare workers trained on CNCC & ENC to date

WBFA-Dettol Nigeria Hygiene Quest Programme

WBFA and Reckitt Nigeria PSHE - WASH Partnership in Schools, Healthcare Facilities and Communities.





WBFA
Primary and Adolescent
PHSE-WASH in Schools
Physical and Sexual Health Education and
Water, Sanitation & Hygiene

Wellbeing Foundation Africa-Dettol Nigeria Hygiene Quest Programme in Schools, Healthcare Facilities and Communities

The WBFA-Dettol Nigeria Hygiene Quest Programme is a comprehensive multi-sectoral hygiene promotion initiative implemented by the Wellbeing Foundation Africa (WBFA), in partnership with Reckitt-Benckiser (makers of Dettol antiseptics), across schools, communities, and healthcare facilities. The programme seeks to improve hygiene knowledge, attitudes, and practices through structured education, behavioural-change communication, and community engagement. The primary focus is on sensitisation, awareness-raising, and embedding hand washing into daily routines.

Poor hygiene practices remain a major contributor to preventable communicable diseases, particularly among children, pregnant women, and vulnerable populations. The WBFA-Dettol Nigeria Hygiene Quest Programme was designed to address these gaps through school-based, community-based, and facility-based hygiene education, aligned with national Water, Sanitation, and Hygiene (WASH) priorities and global public health standards.

The WBFA-Dettol Nigeria Hygiene Quest Programme, between February and September 2025, reached a total of 162,766 beneficiaries. The programme recorded significant scale and reach, delivering hygiene education to students, community members, pregnant and lactating mothers, and healthcare workers. Implementation focused on handwashing with soap, infection prevention, Baby WASH, menstrual hygiene, and institutional hygiene practices. The programme exceeded several planned targets and demonstrated positive health, behavioural, and educational outcomes.

The programme targets three core population groups:

Key highlights in the DHQ 2025 programme

162,766
Beneficiaries Reached

102,350 Students reached in
248 schools by school Nurse
Educators

44,504 Pregnant and
lactating mothers in
36 healthcare facilities

15,182 Community members
145 communities by community
field teams

730 healthcare workers through
542 TEACH CLEAN sessions

576 Hygiene Quest Pier to Pier
Clubs and 1,152 WASH
Ambassadors

Students and pupils in primary and secondary schools



Community members (men, women, boys, and girls)

Pregnant and lactating mothers and healthcare workers in healthcare facilities.



The Wellbeing Foundation Africa-Dettol Nigeria Hygiene Quest Programme in Schools

School nurse educators deliver the Hygiene Quest curriculum through a structured two-session model, an assembly session reaching the full student body and a classroom lesson covering the complete WBFA DHQ syllabus. Content spans handwashing with soap at critical times, infection prevention, menstrual health and hygiene, safe use of school sanitation facilities, and safe water handling, delivered within WBFA's Personal, Social, Health and Economic Education and WASH framework and aligned to national WASH in Schools standards.

In 2025 the programme reached 102,350 students across 248 schools, exceeding its annual student target by 102 per cent. WBFA established 576 Hygiene Quest Peer to Peer Clubs and inducted 1,152 WASH Ambassadors under the Clean Naija banner, institutionalising hygiene leadership among students rather than leaving behaviour change to a single lesson, and Abuja schools won both the primary and secondary DHQ Spelling Bee competitions.

Independent evaluation by the Slum and Rural Health Initiative recorded improved student attitudes towards handwashing across implementing states, among them Abuja, from 95.8 to 97.6 per cent positive, and Lagos, from 77.7 to 84.7 per cent. Absenteeism from diarrhoea, cough and other communicable illness declined in all three states, connecting hygiene practice to days of learning retained and to Sustainable Development Goal 4.a.



The Wellbeing Foundation Africa-Dettol Nigeria Hygiene Quest Programme in Healthcare Facilities

The facility component works at both ends of the health system, with the women who use it and the workers who run it. New Mom sessions through our MamaCare360 programming deliver hygiene education to pregnant and lactating mothers, covering handwashing with soap, Baby WASH, cord and newborn care, safe sanitation and infection prevention during the period when mother and newborn are most vulnerable.

In 2025 the programme engaged 44,504 pregnant and lactating mothers across 36 healthcare facilities through 973 facility visits, reaching 231 per cent of its annual target, the strongest performance against target of any WBFA Dettol Hygiene Quest population group.

WBFA also delivered the London School of Hygiene and Tropical Medicine's Soapbox Collaborative Training in Environmental Hygiene and Cleaning in Healthcare, reaching 730 healthcare workers through 542 TEACH CLEAN sessions. TEACH CLEAN equips cleaners, ward staff and clinical teams with standardised environmental cleaning and infection prevention and control practice, addressing the cadre most often trained last and most decisive for a clean and safe birth.

This work advances Nigeria's Roadmap to Hand Hygiene for All and the World Health Organization's SAVE LIVES: Clean Your Hands campaign, and is informed by WBFA's membership of the WHO WASH in Health Care Facilities Working Group, through which Nigerian implementation evidence contributes to global normative standards on environmental cleaning, waste management, sepsis prevention and the reduction of facility-acquired infection.



The Wellbeing Foundation Africa-Dettol Nigeria Hygiene Quest Programme in Communities

Community delivery extends hygiene practice from institutions into households, where behaviour is sustained or lost.

WBFA community field teams work with community members using the Reckitt Hygiene Quest manual, combining live demonstration of correct handwashing technique with return demonstration by participants, so that competence is observed rather than assumed. Educational materials are distributed through community heads, embedding the intervention within existing structures of local authority, while programme and monitoring and evaluation officers supervise sessions to secure data integrity.

In 2025 the programme reached 15,182 community members across 145 communities, achieving 132 per cent of its annual target. Reach extended beyond direct contact through the DHQ Radio Series and through national and global observances, among them the Children's Day Walk, Global Handwashing Day, World Water Day and World Toilet Day.

As a delivery partner under the Clean Naija Initiative, WBFA aligns this work with the Federal Government's Clean Nigeria: Use the Toilet campaign and the National Action Plan for the Revitalisation of the WASH Sector, supporting Nigeria's open defecation free commitment, safely managed sanitation under Sustainable Development Goal 6.2, and the Global Handwashing Partnership's case for handwashing with soap as a first line of defence against communicable disease.

Key objectives include:

- Raising awareness on the importance of hygiene.
- Promoting regular and correct handwashing practices.
- Strengthening hygiene behaviour change through demonstrations.
- Monitoring and evaluating hygiene-related outcomes.

This report details the implementation of strategies, activities conducted, successes recorded, and targets exceeded in reaching the intended audience. The designated schools, communities, and healthcare facilities were chosen based on the identified gaps in hygiene in the schools, the students' population size, and the opportunity to see visible changes in the communities. Additionally, the schools were chosen based on their existing affiliations and their proximity to health facilities and/or communities where the Hygiene Quest programme is being implemented.

The Wellbeing Foundation Africa's leadership in hygiene promotion is further strengthened through its participation as a member of the World Health Organization's Water, Sanitation and Hygiene (WASH) in Health Care Facilities Working Group. Through this global technical platform, WBFA contributes to advancing evidence-based approaches, shares implementation experience from Nigeria, and aligns the Dettol Hygiene Quest programme with international best practices for improving infection prevention and control, quality of care, and safe, resilient health systems.

Phase 2 Programme Implementation Activities in February - September 2025

To maximise the momentum of the Hygiene Quest project throughout schools, healthcare facilities, and communities, implementation was guided by a comprehensive work plan with weekly, monthly, quarterly, and annual targets. Prior to field deployment, WBFA conducted refresher training for existing staff and onboarding training for new programme personnel, to ensure standardised delivery of the DHQ curriculum. Programme delivery was supported by nurse educators, programme officers, monitoring and evaluation staff, and data assistants who ensured data accuracy, documentation, and reporting.



In 2025, the Dettol Hygiene Quest (DHQ) Programme, implemented in Kwara, Lagos, and Abuja, reached 102,350 students across 248 schools, 44,504 pregnant and nursing mothers across 36 healthcare facilities, 730 healthcare workers during 542 The Soapbox Collaborative Training in Environmental Hygiene and Cleaning in Healthcare (TEACH CLEAN) sessions, and 15,182 community members across 145 communities. The programme established 576 hygiene quest clubs, inducted 1,152 ambassadors, and saw Abuja schools win both primary and secondary DHQ Spelling Bee competitions.

DHQ in School sessions focused on a 2-session hygiene education delivery to students, strictly based on the DHQ School curriculum. The first session is an assembly session where a larger number of students get engaged. The second lesson is delivered to a streamlined number of students who are extensively lectured on the full DHQ lessons.

In the communities, the nurse educators enlightened the community members about the importance of personal hygiene using the Reckitt Hygiene Quest manual with a live demonstration of the step-by-step hand-washing techniques. Return demonstration sessions were also conducted on the step-by-step effective hand-washing techniques by the community members that participated in the sessions. Educational materials on proper hygiene practices were distributed to the community heads. The Programme Officer, as well as the Monitoring, and Evaluation Officer also supervised and monitored the sessions to ensure timely collection and integrity of the data for the project. For Communications and Social Media content, the data assistants made sure that important programme activities were accurately captured, recorded, and documented.

Healthcare facility New Mom sessions focused on hygiene education for pregnant and lactating new mothers, Baby WASH, and infection prevention, while delivering the London School of Hygiene and Tropical Medicine's the Soapbox Collaborative Training in Environmental Hygiene and Cleaning in Healthcare (TEACH CLEAN) components targeted healthcare workers to strengthen infection prevention and control (IPC) practices and reduce sepsis and facility acquired infections across Nigeria Health Care Facilities.

The DHQ Radio Series were also aired to further reinforce the DHQ impact to a larger audience. Ambassador induction workshops were conducted, which comprises all the beneficiary schools. Stakeholders' engagements and advocacy visits were regularly made to stakeholders to update them on the progress as well as continue to ensure their buy-ins.

The project focused on hygiene promotion and behaviour change in partnership with Reckitt-Benckiser.



We extend our sincere appreciation to SHRIN for their valuable partnership in conducting the WBFA–Dettol Nigeria Hygiene Quest Programme 2025 Impact Assessment. Their rigorous evaluation provides important evidence of the programme's reach, outcomes, and contribution to improving hygiene behaviours and health education across participating communities.



AN EVALUATION REPORT OF RECKITT'S DETTOL QUEST HYGIENE PROGRAMME ACROSS THREE STATES IN NIGERIA



Dettol School Hygiene Programme 2025 Impact Assessment

5



OBJECTIVES OF THE STUDY

- To assess the knowledge of hand-washing practices among beneficiaries (students, teachers, community members, mothers, pregnant women, and their families) in schools, hospitals, and communities across Lagos, Kwara, and Abuja.
- To evaluate the attitude towards hand-washing practices among beneficiaries (students, teachers, community members, mothers, pregnant women, and their families) in schools, hospitals, and communities across Lagos, Kwara, and Abuja.
- To determine the hand-washing behaviors, and practices among beneficiaries (students, teachers, community members, mothers, pregnant women, and family members) in schools, hospitals, and communities in Lagos, Kwara, and Abuja.
- To measure the effectiveness of the Dettol Quest Programme on enhancing hygiene and handwashing practices, as well as overall health outcomes among participants (including students, teachers, community members, mothers, pregnant women, and family members).
- To assess the rate of students' absenteeism due to communicable diseases (flu, cough, and malaria)

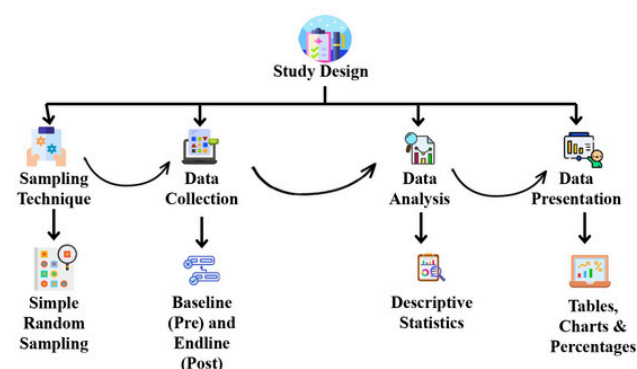
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STUDY LOCATIONS

2

METHODOLOGY



3

General demographic characteristics of participants

	Baseline				Endline			
	Abuja	Lagos	Kwara	Total	Abuja	Lagos	Kwara	Total
Nursing/Pregnant mothers	1067	1051	1045	3163	1049	1042	1042	3133
Students	3,172	3,165	3,168	9505	3,163	3,162	3,163	9488
Teachers	65	66	62	193	62	60	60	182
Community Members	393	405	408	1206	393	402	396	1191

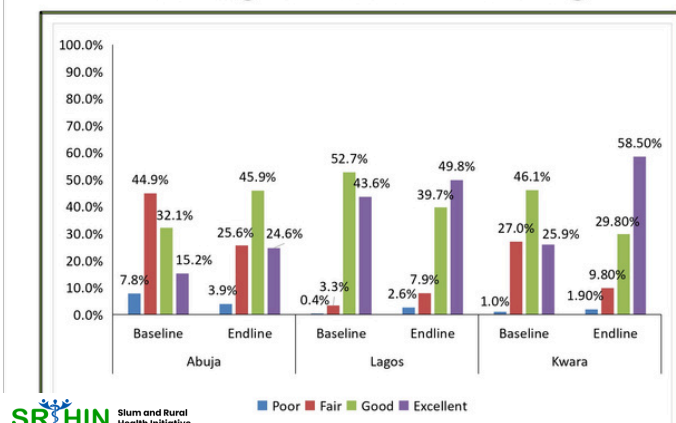
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Socio-demographics of students surveyed across three states in Nigeria.

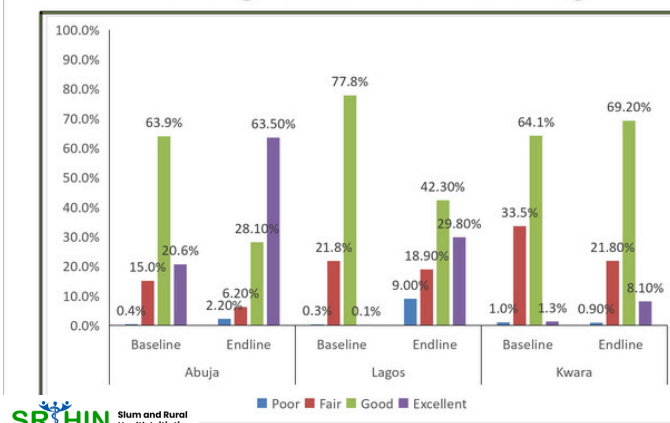
Variables	Abuja (%)		Lagos(%)		Kwara(%)	
	Baseline	Endline	Baseline	Endline	Baseline	Endline
Gender	Female	50.5	52	49.3	50.1	47.3
	Male	49.5	48	50.7	49.9	52.7
Age	13–18 years	46.5	47.2	12.3	14.5	20.5
	19 years & above	1	0.8	0.1	0.2	0
	8–12 years	22.1	21.5	33.5	31.2	59.6
	Below 8 years	30.5	30.5	54.2	54.1	19.9

6

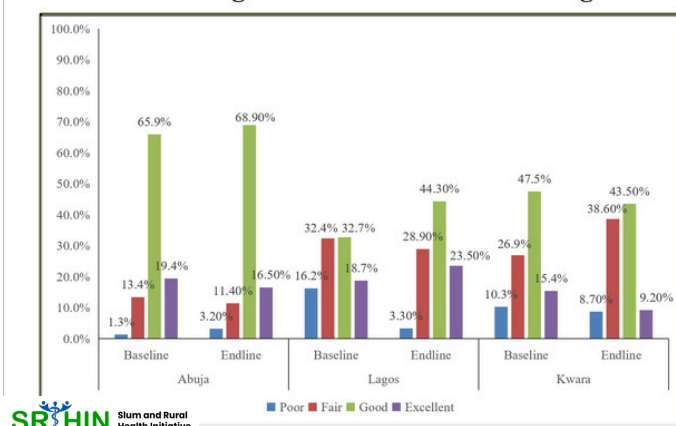
Knowledge of 'WHY' of handwashing



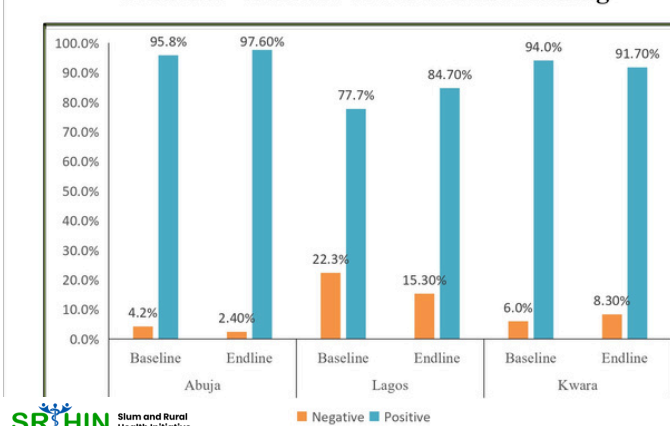
Knowledge of 'HOW' of handwashing



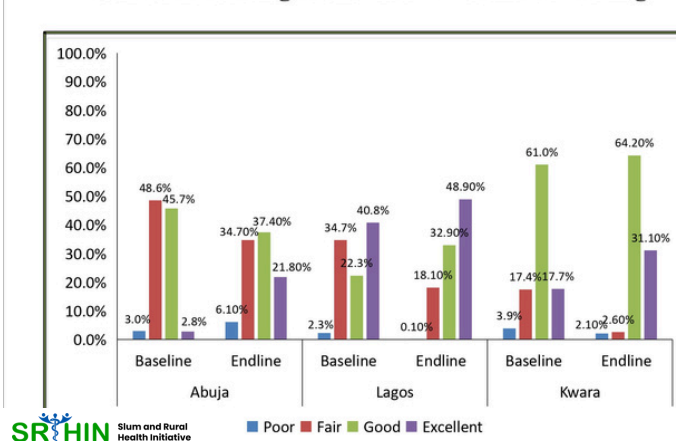
Knowledge of 'WHEN' of handwashing



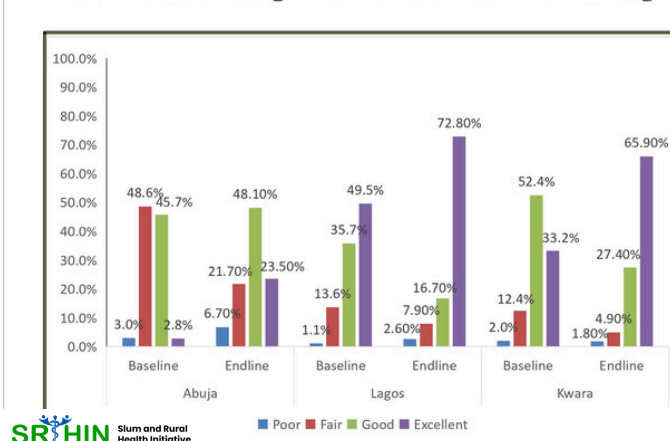
Students' Attitude towards handwashing



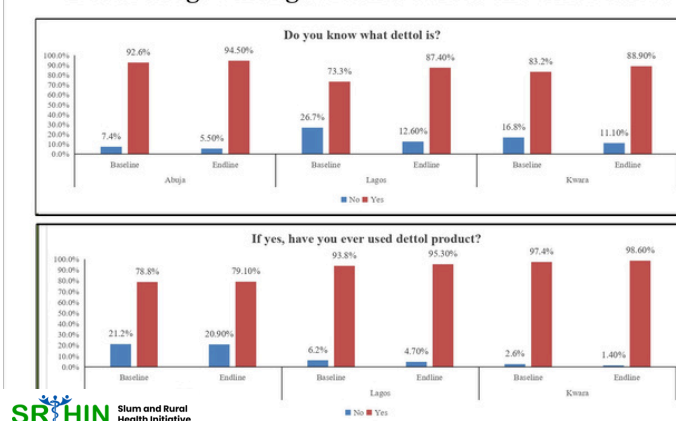
Behaviour relating to the "HOW" of Handwashing



Behaviour relating to the "WHEN" of Handwashing



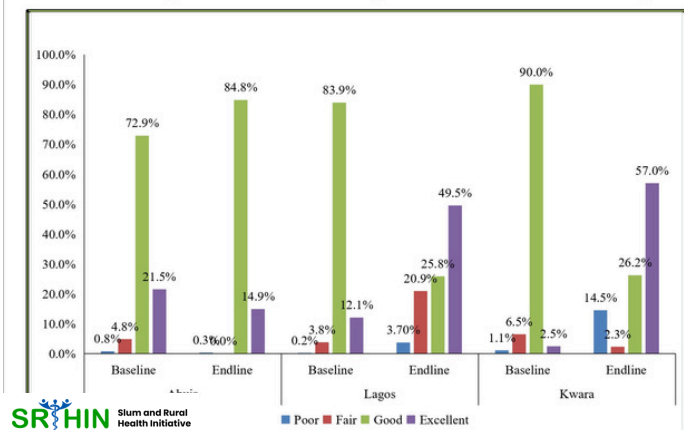
Dettol usage among students across the three states



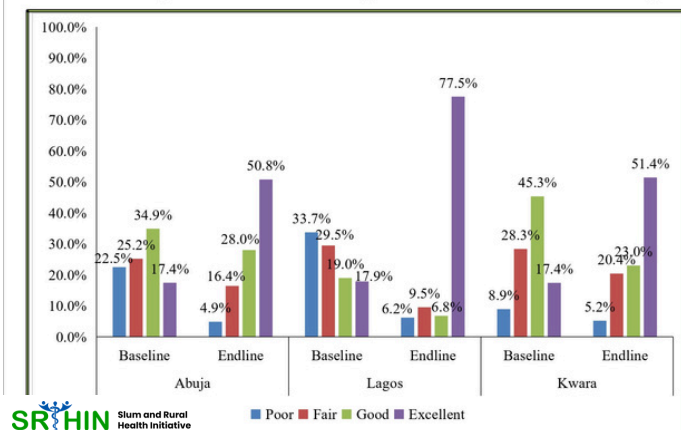
Socio-demographics of community members surveyed across the three states

Variables	Lagos (%)		Kwara (%)		Abuja (%)	
	Baseline	Endline	Baseline	Endline	Baseline	Endline
Gender						
Female	60.90	62.40	65.00	66.10	38.40	42.70
Male	39.10	37.60	35.00	33.90	61.60	57.30
Ethnicity						
Yoruba	10.50	11.20	57.40	58.00	78.30	79.50
Igbo	12.60	12.10	22.10	20.80	2.70	3.00
Hausa	24.80	24.30	4.50	5.20	5.40	5.10
Others	52.10	52.40	16.10	16.00	13.60	12.40
Highest Level of Education						
Primary	13.00	10.60	0.90	0.50	18.30	15.70
Secondary	76.20	75.50	38.80	37.40	43.80	42.00
Tertiary	3.30	8.20	59.60	61.30	24.10	30.20
None	5.80	3.70	0.00	0.00	6.70	5.10
Others	1.70	2.00	0.70	0.80	7.10	7.00

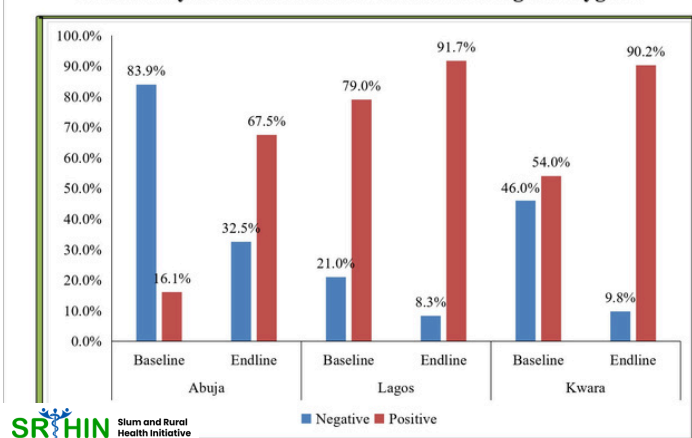
Community members' Knowledge of 'HOW' of Handwashing



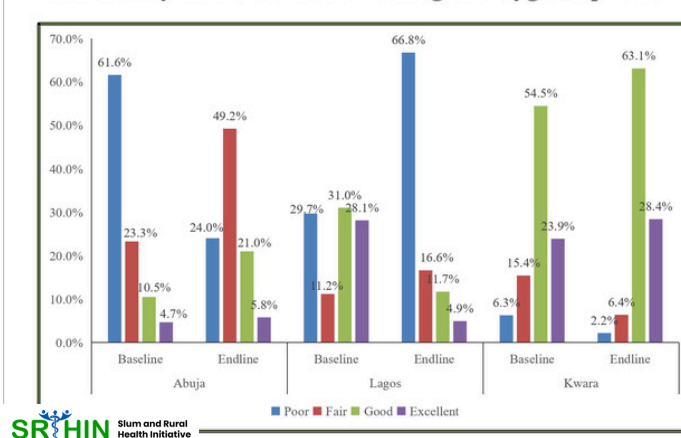
Community members' Knowledge of 'WHEN' of Handwashing



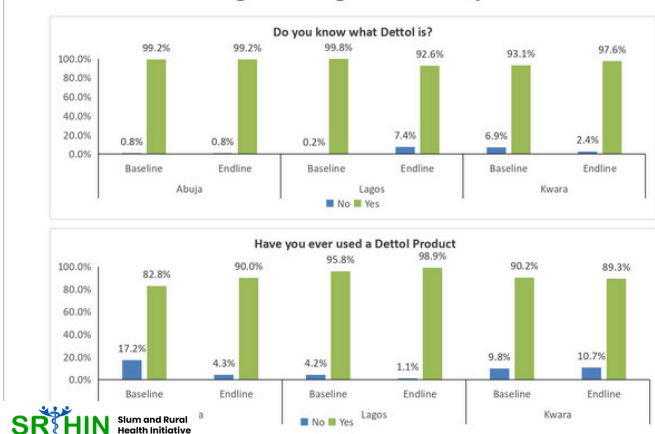
Community members' attitude of handwashing and hygiene



Community members' handwashing and hygiene practice



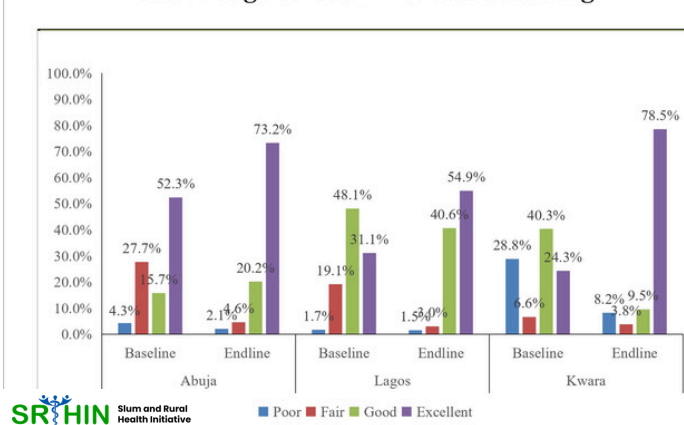
Dettol usage among community members



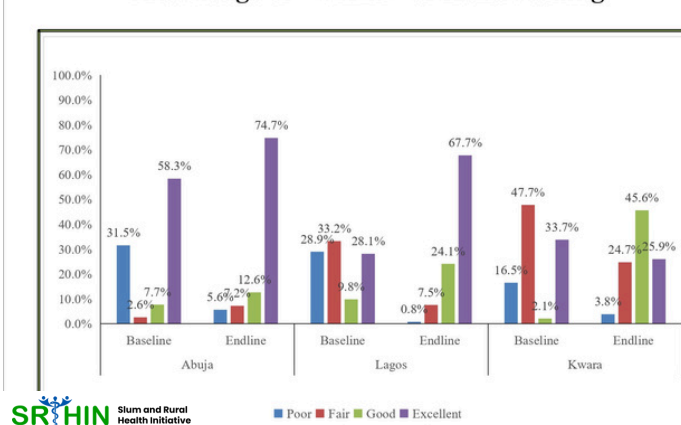
Socio-demographics of teachers surveyed across the three states

Variables	Abuja (%)		Lagos (%)		Kwara (%)	
	Baseline	Endline	Baseline	Endline	Baseline	Endline
Gender						
Female	64.70%	66.00%	77.40%	75.80%	54.70%	56.30%
Male	35.30%	34.00%	22.60%	24.20%	45.30%	43.70%
Age						
Below 26 Years	9.80%	8.40%	3.40%	3.10%	8.20%	7.50%
26-30 Years	22.10%	21.70%	17.90%	18.30%	29.20%	28.50%
31-35 Years	33.60%	34.10%	33.20%	32.70%	29.60%	30.30%
36-40 Years	23.00%	24.20%	36.60%	35.10%	14.80%	15.50%
41-45 Years	7.70%	7.50%	7.70%	8.20%	10.30%	10.60%
46-50 Years	1.70%	2.30%	1.30%	1.70%	7.00%	6.50%
51-55 Years	1.70%	1.50%	0.00%	0.50%	0.40%	0.60%
56-60 Years	0.40%	0.30%	0.00%	0.40%	0.40%	0.50%

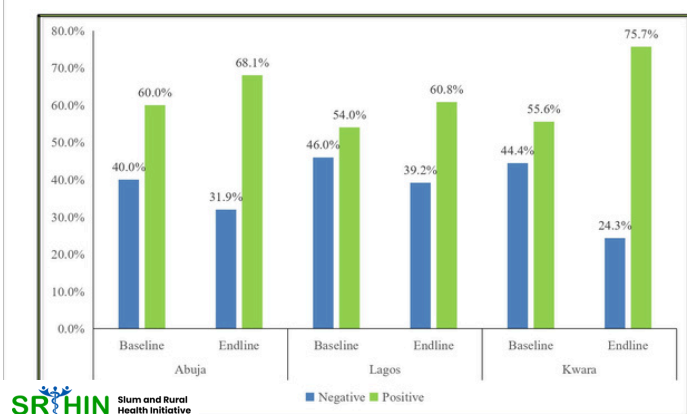
Knowledge of 'HOW' of Handwashing



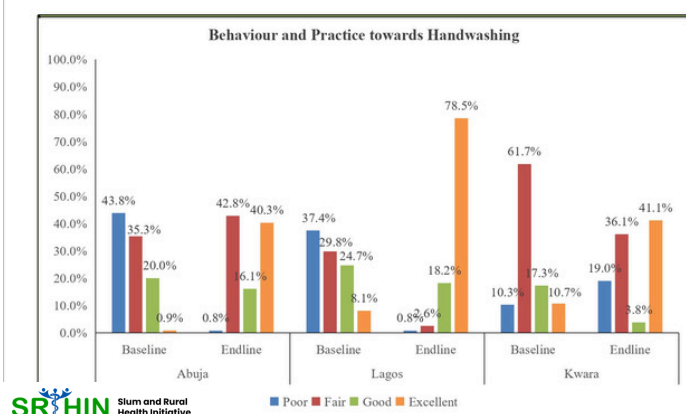
Knowledge of 'WHEN' of Handwashing



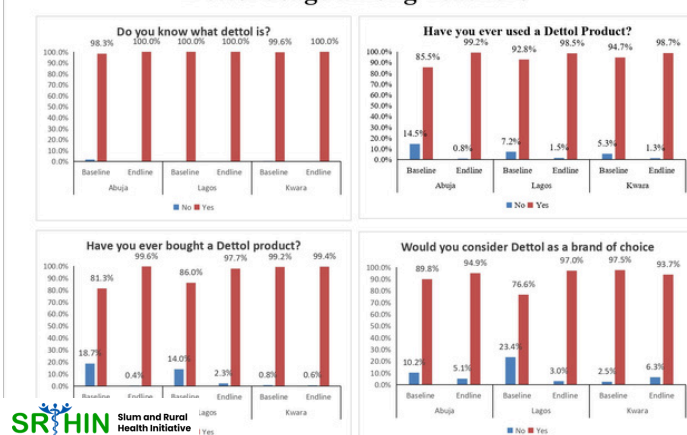
Attitude towards Handwashing



Behaviour and Practices towards Handwashing



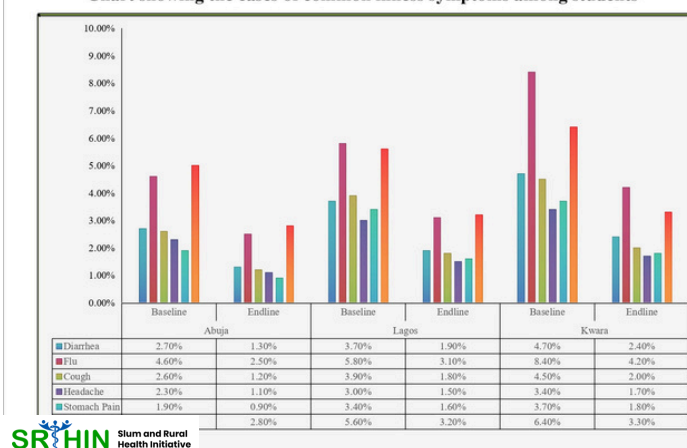
Dettol usage among Teachers



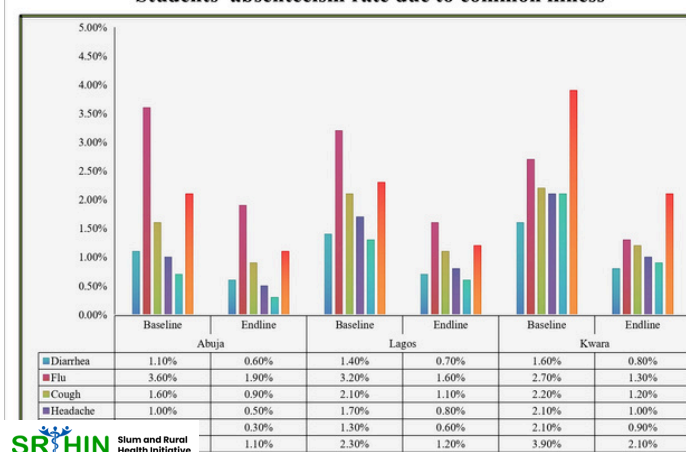
Reported Cases of Common Illness Symptoms Among Students



Chart showing the cases of common illness symptoms among students



Students' absenteeism rate due to common illness



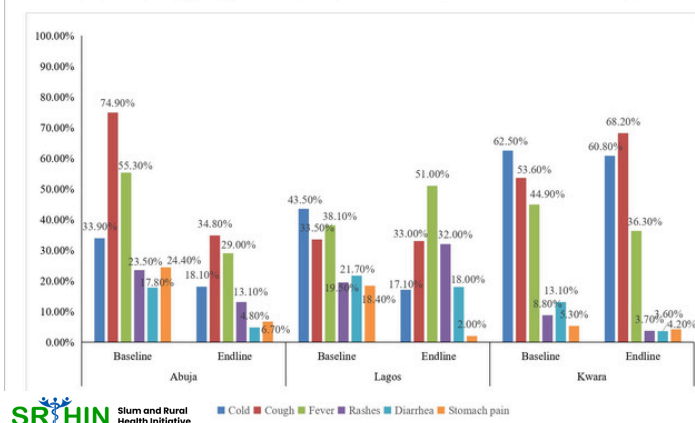
NURSING/PREGNANT WOMEN' RESULT



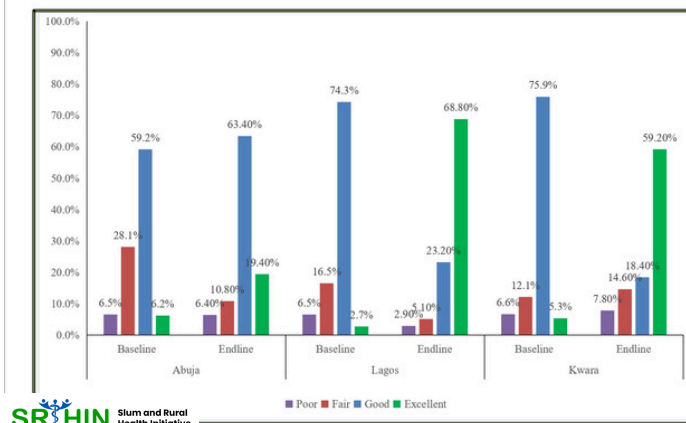
Socio-demographics of nursing / pregnant women surveyed across three states in Nigeria.

Variables	Abuja (%)		lagos(%)		Kwara(%)	
	Baseline	Endline	Baseline	Endline	Baseline	Endline
Age						
Below 26years	33.6	34.2	8.4	9.1	21.4	22
26-30years	29.5	30	22.4	23.5	41.4	42.1
36-40years	12.5	11.9	29.4	28.7	12.2	12
Educational Level						
None	2.2	2	1.5	1.3	4.5	4.1
Others	1.8	2.1	4.4	4.5	6.1	5.9
Primary	14.6	14.1	2.4	2.2	12.4	12.1
Secondary	52.4	51.9	31.3	30.8	35.4	34.6
Tertiary	29	29.9	60.4	61.2	41.6	43.3

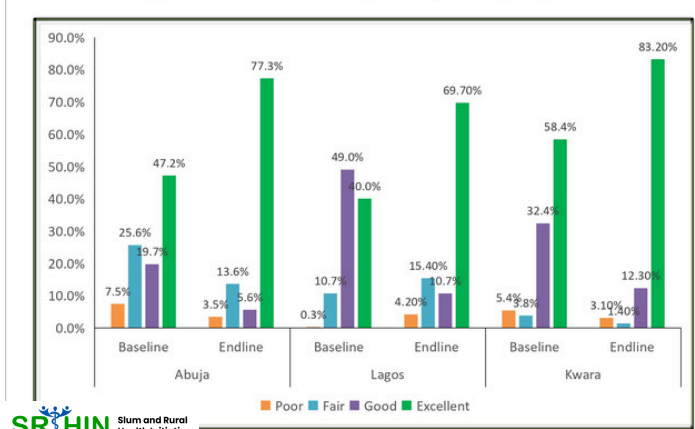
Chart showing Reported Childhood Illness in the Last One Month



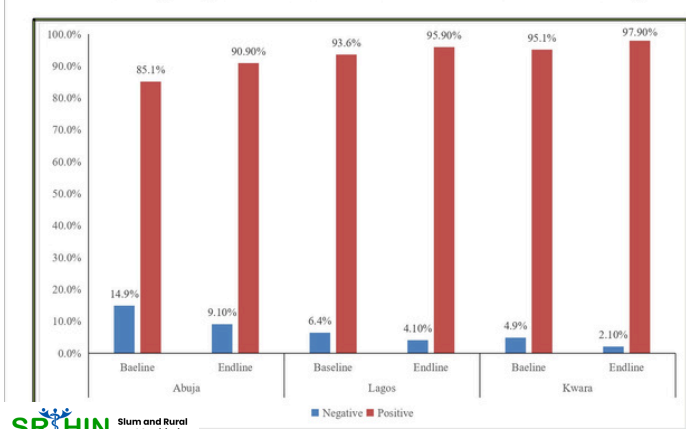
Knowledge of 'HOW' Handwashing Among Nursing/Pregnant Women



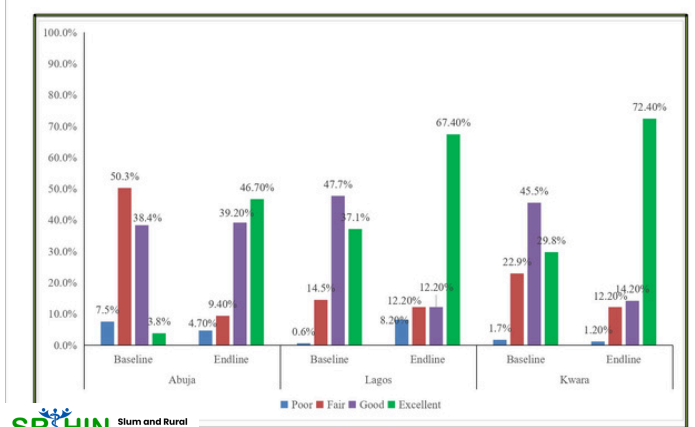
Knowledge of 'WHEN' Handwashing Among Nursing/Pregnant Women



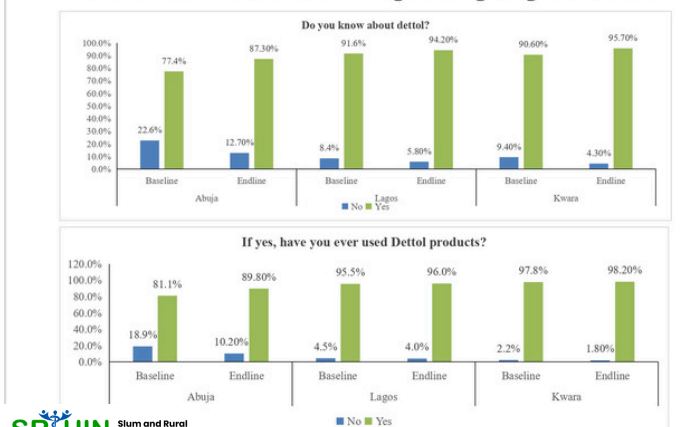
Nursing/Pregnant Women Attitude towards Handwashing



Nursing/Pregnant Women Behaviour and Practices towards Handwashing



Awareness & Use of Dettol Among Nursing/Pregnant Women



RECOMMENDATIONS

- Enhancing Dettol Usage and Ownership:** While awareness of Dettol products was high, usage and home ownership increased only modestly, especially among mothers/pregnant women in Kwara and Abuja. Targeted distribution campaigns, home-based demonstrations, and promotional incentives could help convert awareness into regular usage and product ownership.
- Reinforcing Hygiene Behavior Retention:** Although hygiene knowledge increased substantially across all states, practical handwashing behaviour showed uneven gains, particularly in community members in Lagos where good and excellent practice declined. Periodic refresher training, school-based hygiene challenges, and strategically placed visual cues in wash areas can help maintain and reinforce behaviour change.

SRHIN Slum and Rural Health Initiative

reckitt

LSTM–WBFA Global Health Workforce Programme LG 130 (GHWP)

Advanced Emergency Obstetrics, Newborn Care and Surgical Skills competency-based curriculum for resident doctors in obstetrics and gynaecology with the National Postgraduate Medical College of Nigeria.





This project is funded through the Global Health Workforce Programme (GHWP), which is funded by the UK Department of Health and Social Care (DHSC) for the benefit of both UK and partner-country health sectors.



Global Health Partnerships
FORMERLY THET



FEDERAL MINISTRY OF
HEALTH



LSTM–WBFA Global Health Workforce Programme LG 130 (GHWP)

Every day, too many women in Nigeria face life- threatening complications during childbirth. Despite global efforts to reduce maternal mortality, Nigeria remains among the countries with the highest burden, with 1,047 preventable maternal deaths per 100,000 live births - a figure that has remained stagnant for two decades.

A shortage of well-trained obstetricians with advanced surgical skills to manage emergency situations is at the heart of this crisis. The ability to perform safe caesarean sections, assisted vaginal deliveries, and emergency obstetric procedures can mean the difference between life and death for thousands of mothers and newborns. Yet, many obstetricians in training lack structured, competency-based training in these critical skills.

To bridge this gap, the Liverpool School of Tropical Medicine (LSTM), in collaboration with the National Postgraduate Medical College of Nigeria (NPMCN) and Wellbeing Foundation Africa (WBFA), has launched the Advanced Obstetric Surgical Skills (AOSS) programme - an initiative designed to transform maternal healthcare by building local capacity, strengthening health systems, and fostering sustainable change.

Programme Review

The Global Health Workforce Programme (GHWP) is a UK Department of Health & Social Care– funded initiative (managed by Global Health Partnerships, previously THET) that supports health partnerships across Nigeria, Ghana and Kenya. The goal is resilient health systems, workforce strengthening, and progress toward universal health coverage.

In Nigeria, the Liverpool School of Tropical Medicine and the Wellbeing Foundation Africa collaborated with the National Postgraduate Medical College of Nigeria (NPMCN) for the Advanced Obstetric Surgical Skills training.

Key highlights from the AOSS training programme 2025



266 Doctors benefited

Including 85 consultants, 168 senior registrars, 9 registrars, and 4 medical officers covering 48 hospitals across Nigeria's six geopolitical zones and the SOGON conference.



2 Centre of Excellence

Providing sustainable training hubs for future generations of obstetricians.



6 Additional regions

Demonstrating the scalability and demand for the programme.



94% Trained residents

Showed significant improvement in knowledge



92% Trained residents

Demonstrated enhanced surgical skills, ensuring better patient outcomes



Programme Objectives:

Establishing sustainable Centers of Excellence for postgraduate OBGYN revision courses, initially in Lagos and Abuja.

Training residents and examiners in the AOSS curriculum, strengthening clinical skill delivery, and embedding a standardized quality-assured training model.

By December 2024, the project had trained 82 NPMCN examiners and 119 residents across Abuja, Kano, Enugu and Lagos. Collectively, the GHWP Nigeria portfolio has trained over 2,577 health workers across clinical skills, leadership, education, and gender equity programming, demonstrating transformational impact.

A key milestone was the official transfer of OSCE simulation equipment including obstetric simulators, resuscitation mannequins, Kiwi cups, and Little Anne models to NPMCN's surgical skills center at LUTH in May 2025 for long-term institutional sustainability.



AOSS: Strengthening Surgical Skills, Saving Lives

The AOSS programme is an innovative, competency-based training initiative aimed at equipping obstetricians with the advanced skills needed to manage complex childbirth scenarios. It combines theoretical learning with intensive hands-on surgical training, ensuring that resident doctors and faculty members develop the confidence and expertise required to provide high-quality emergency obstetric care.

How the Programme Works:



Online Learning

Participants complete 15 hours of self-directed training via the World Continuing Education Alliance (WCEA) platform, allowing them to master theoretical concepts at their own pace.



Hands-on Training

This is followed by intensive, in-person surgical training at dedicated training Centres, where participants refine their skills through simulated surgical procedures.



Mentorship & Capacity Building

UK-based Nigerian obstetricians and senior trainers from Kenya, Nigeria and the LSTM staff provided direct mentorship, ensuring high standards of training and knowledge retention.

The National Postgraduate Medical College of Nigeria has officially integrated the AOSS programme into its residency curriculum, ensuring that all future obstetricians in Nigeria receive this vital training.



Through this Health Partnership Initiative, GHWP fosters cross-border learning and capacity strengthening, ensuring that health professionals are well-equipped to provide high-quality care where it is needed most.

H.E. Toyin Ojora Saraki, Founder and President of Wellbeing Foundation Africa



Through our close collaboration, we were able to tailor the training to reach more residents from affiliated institutions. Another key sustainability milestone is the integration of the Advanced Obstetrics Skills Course into the NPMCN curriculum.

Prof. Charles Ameh, Head of the Global Health Emergency Obstetric and Quality of Care Unit at Liverpool School of Tropical Medicine



Port Harcourt Centre of Excellence (Costed Extension)



Gombe Centre of Excellence (Costed Extension)

The Costed Extension Phase – Geographic Reach & Scope

Following the success of the initial Advanced Obstetric Surgical Skills training implementation, a costed extension was granted, which expanded to new centres in Port Harcourt and Gombe, completing coverage of all six geographical zones.

Key aspects of the extension:

Continued delivery of the Advanced Obstetrics Surgical Skills (AOSS) training for Obstetrics and Gynaecology residents, reaching 32 participants in Port Harcourt and 33 in Gombe.

Deployment of LSTM-trained National Postgraduate Medical College of Nigeria (NPMCN) examiners to deliver and assess the training

Strengthening the capacity of Obstetricians and Gynaecologists to provide high-quality, competency-based surgical training within their institutions through practical, hands-on learning.

Strengthening Postgraduate Clinical Training with Tools

In line with the commitment to enhance the quality of clinical training and assessment for postgraduate medical professionals in Nigeria, the Programme implemented a strategic investment in simulation-based learning. This culminated in the official donation of state-of-the-art Objective Structured Clinical Examination (OSCE) equipment to the National Postgraduate Medical College of Nigeria (NPMCN), hosted at the Lagos University Teaching Hospital (LUTH), a key Centre of Excellence in clinical education.

By embedding advanced simulation technology into national assessment systems, the programme aims to ensure standardised, high-quality, evidence-based evaluation of resident doctors across the country.

Equipment Donated

The OSCE equipment donated to the NPMCN includes advanced clinical simulators and diagnostic models designed to replicate real-life obstetric and neonatal emergency scenarios.

These include:

Lucy & Mum Obstetric Simulators: Realistic childbirth simulators designed to teach assisted vaginal delivery simulation.

Resusci Baby QCPR Wireless Unit: Advanced neonatal resuscitation manikin equipped with real-time feedback features for cardiopulmonary resuscitation (CPR) and airway management.

Little Anne Combo Models: Adult CPR training models used to enhance basic life support (BLS) and emergency response skills.

Kiwi OmniCups: Vacuum-assisted delivery simulation tools used to teach and evaluate instrumental vaginal delivery techniques.



Impact & Objectives

The Objective Structured Clinical Examination (OSCE) equipment handover is designed to serve multiple strategic goals:

Enhancing Clinical Competency: Empowering examiners and residents with the tools to practice and assess advanced obstetric skills under realistic, risk-free conditions.

Institutional Capacity Building: Supporting the NPMCN with permanent simulation resources that enable it to conduct nationwide standardised clinical assessments.

Promoting Objective Evaluation: Strengthening the use of OSCE methodology for more reliable and valid assessments of clinical competence in obstetrics and gynaecology.

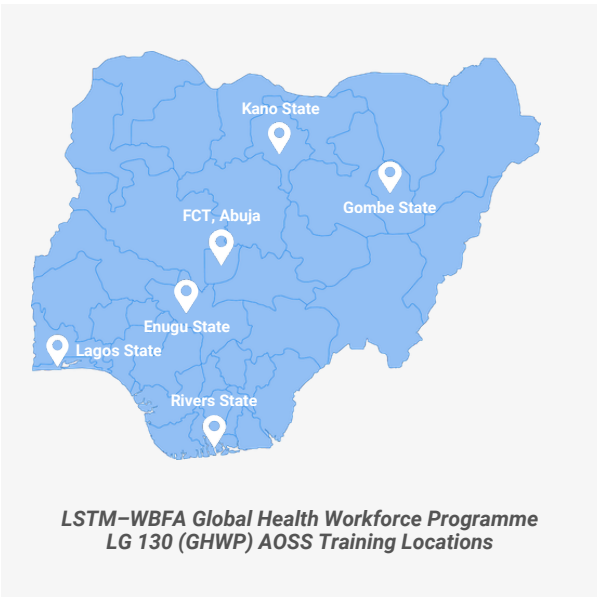
Supporting Faculty Development: The donation was accompanied by a two-day refresher training for NPMCN O&G examiners, reinforcing their capacity to deliver and supervise OSCE- based assessments.



The Power of Partnerships

The success of the AOSS programme is proof of the power of collaboration across governments, academia, civil society, and the private sector. At the core of this initiative is the National Postgraduate Medical College of Nigeria (NPMCN), the primary institution responsible for training and certifying obstetricians in Nigeria. Their leadership has been instrumental in institutionalising the AOSS curriculum and establishing sustainable training centres. The Liverpool School of Tropical Medicine (LSTM) brings over a century of expertise in global maternal health, providing technical leadership, training resources, and quality assurance.

The Wellbeing Foundation Africa (WBFA) plays a crucial role in advocacy, gender inclusion, and public engagement, ensuring that maternal health remains a national priority. Global stakeholders, the Royal College of Obstetricians and Gynaecologists (RCOG) and the UK’s National Health Service (NHS), have also lent their support by providing the initial cohort of expert trainers through the Nigeria Liaison Group (NLG), highlighting the programme’s potential as a model for regional and global maternal health workforce development. Through these partnerships, the AOSS initiative is not just a training programme - it is a blueprint for how governments, donors, and the private sector can come together to drive lasting improvements in healthcare delivery.



Participants’ Feedback

"It really refined my skills in terms of practice as well as implementing a lot of those skills in my own clinical setting. I started to implement them, discussing with residents, even doing practical procedures and demonstrations." - Prof. Jonah Musa, Chief Honorary Consultant OB/GYN at Jos University Teaching Hospital	"Judging from the pretest online, I know there's going to be a lot to learn, and I know I am going to become a lot better because I am an enthusiast for quality improvement." - Dr. Maryam Al-Makura, Registrar from the Federal Medical Centre, Abuja
"The course is the best I have attended in a long while. There was no dull moment. We learnt with ease, and it was very participatory. I learnt a lot, and I updated my knowledge. It will help in changing wrong practices." - Consultant	"I now do more teaching of my residents and interns as a result of my experience with the training, I learned that continuous teaching is more impactful than one off teaching." - Consultant
"This is the best aspect of my residency training so far, before now we were simply getting along on our own as there's no structured training or drills to improve skills and practice." - Resident	"Thank you so much for this wonderful training. Indeed, I'm a better obstetrician now than I was, and I will translate the impact the training has created in me to my centre in saving the lives of women." - Resident

 Improving capacity for advanced training in obstetric surgery: evaluation of a blended learning approach. READ THE ABSTRACT	 Programme Closeout Documentary - Empowering Obstetricians, Saving Lives: The AOSS Programme in Nigeria. WATCH THE CLOSEOUT DOCUMENTARY
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Project Oscar - Light For Life

Neonatal Jaundice Screening, Treatment, and Kernicterus Prevention Programme in collaboration with WBFA and Reckitt





Project Oscar - Light For Life

A Neonatal Jaundice Screening, Treatment, and Kernicterus Prevention Programme

Neonatal Jaundice (NNJ) is a major health concern in Africa and Southeast Asia, with Nigeria among the most affected countries. An estimated 5.5% of Nigerian newborns develop clinically significant NNJ, requiring interventions like phototherapy or exchange blood transfusion. The condition accounts for one in five neonatal admissions, highlighting its critical impact on newborn health, and the urgent need for effective prevention and treatment strategies. Recognising the critical need for early detection, effective treatment, and prevention of NNJ, WBFA, with funding from Reckitt Benckiser, launched a comprehensive initiative, Project Oscar - Light For Life a Neonatal Jaundice Screening, Treatment, and Kernicterus Prevention Programme aimed at reducing the burden of this condition. Project Oscar - Light For Life is an 18-month project - started in September 2025 and will be ending in July 2026 with a goal of reducing the incidence and complications of neonatal jaundice in newborns through early detection and treatment. The project focuses on equipping 16 healthcare facilities (12 PHCs, 3 Public Secondary facilities, and 1 Tertiary health facility) with screening and treatment equipment at primary, secondary and tertiary levels, providing capacity strengthening for health care professionals, empowering communities, and improving access to life-saving interventions to address gaps in neonatal care.

Project Oscar – Light For Life continues to advance neonatal health equity in Lagos State through a holistic approach to preventing, detecting, and managing Neonatal Jaundice (NNJ). Implemented by the Wellbeing Foundation Africa, in partnership with the Lagos State Primary Health Care Board, the project leverages community engagement, health worker capacity building, equipment support, data use, and policy advocacy to improve newborn outcomes.

Key highlights from the Project Oscar - Light For Life 2025 programme

- 8,366 Newborns Screened
- 231 Healthcare workers trained on CNCC & ENC to date
- 29,871 Mothers educated
- 879 Newborns with high bilirubin level
- 837 Babies treated



Continuous on-the-job mentorship and supportive supervision enhanced the competencies of frontline health workers in newborn care, effective use of phototherapy equipment, and referral coordination. This contributed to improved adherence to clinical protocols and strengthened routine jaundice screening practices across supported health facilities.

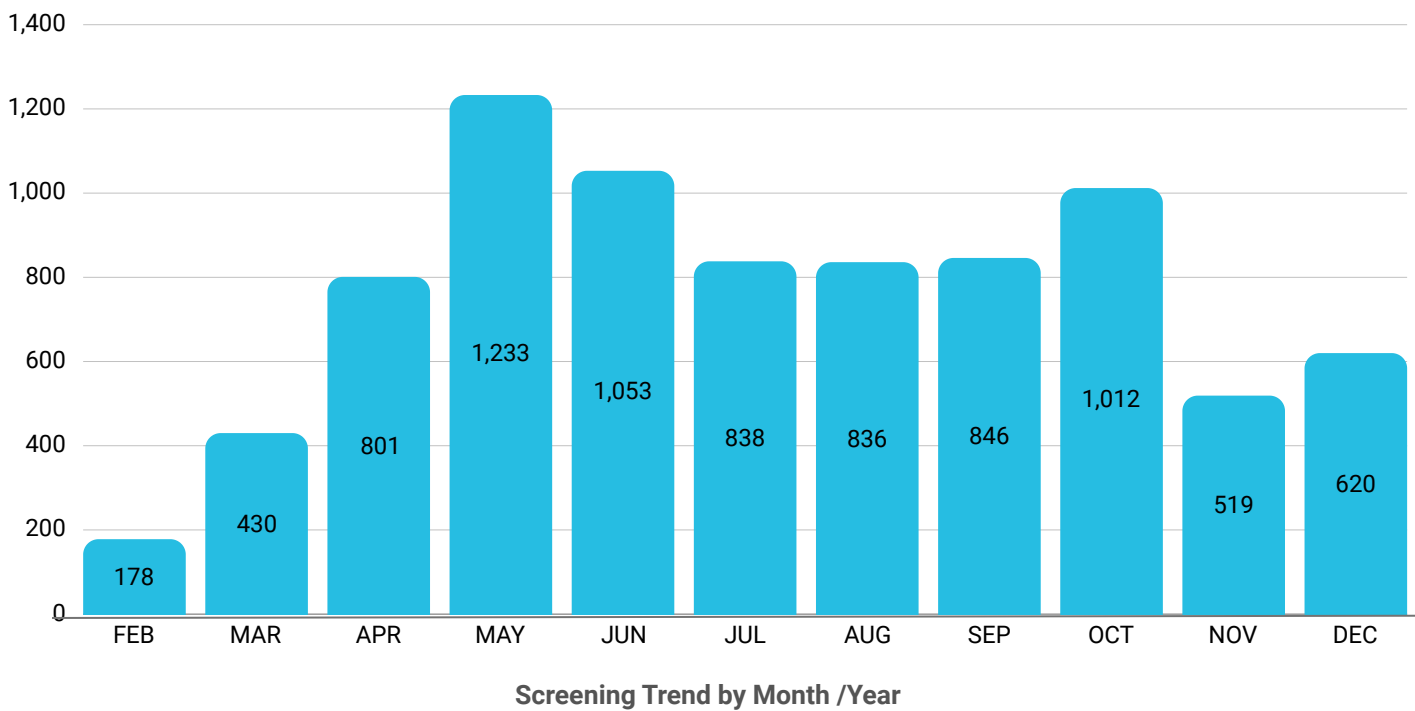


Project Oscar - Light for life 2025 Summary

Indicator	Result (2025)	Impact
Healthcare workers trained	231	CNCC & ENC certification
Mothers educated	29,871	Community-level awareness sessions
PHCs, secondary and tertiary facilities equipped	16	Independent and reliable screening
Newborns screened	8,366	Early detection across 16 healthcare facilities
Newborns with high bilirubin level	879 (10.5%)	Prompt identification of at-risk newborns
Referral to hub facilities	274 (32.1%)	Strengthened referral pathway for advanced care
Babies treated	837	98% success rate, very minimal mortality recorded



Project Oscar strengthened neonatal care capacity across 16 equipped primary, secondary, and tertiary health facilities in 2025. A total of **231 healthcare workers** were trained and certified in CNCC and ENC, while **29,871 mothers** were reached through community-level awareness sessions to promote early detection and care-seeking. The project screened **8,366 newborns** for neonatal jaundice, identifying **879 (10.5%)** with elevated bilirubin levels. Of these, **274 (32.1%)** were referred to hub facilities for advanced care. Overall, **837 babies** were successfully treated, reflecting a **98% treatment** success rate with minimal mortality, demonstrating effective screening, referral systems, and clinical management.



The chart showed a steady increase in newborn neonatal jaundice screening from January to May 2025, rising sharply from very low levels at the start of the year to a peak in May (1,233 screenings). This upward trend indicates a rapid expansion of programme activities and increased facility engagement in the first half of the year. From June to September, screening levels remained relatively stable at around 830–850 screenings per month, indicating consistent programme delivery. A second peak was observed in October (1,012 screenings), followed by a decline in November and December, which may reflect seasonal factors, reduced facility activity, or end-of-year operational slowdowns rather than a reduction in programme effectiveness.



Advocacy Campaigns & Social Behavioural Change Communications



Advocacy Campaigns & Social Behavioural Change Communications

WBFA strengthened and advanced its mission to strengthen health systems and improve population wellbeing through deliberate collaborations with multilateral agencies, government partners, academic institutions, and the private sector to advance equitable health systems, strengthen delivery, scale interventions, and enhance data systems that accelerate progress toward the Sustainable Development Goals.

Through collaborative engagement with United Nations agencies, government ministries, development partners, academic institutions, and the private sector, WBFA contributed to shaping Nigeria's reproductive, maternal, newborn, child, and adolescent health (RMNCAH) agenda, while championing youth empowerment, clinical excellence, and sustainable public health outcomes. This integrated approach positioned WBFA as both an implementing partner and a policy catalyst, driving measurable progress toward the Sustainable Development Goals and reinforcing the Foundation's commitment to equitable, people-centred healthcare.

In 2025, the Wellbeing Foundation Africa (WBFA) solidified its leadership in public health through a multi-channel strategy integrating policy advocacy, digital engagement, and community outreach. By collaborating with government's Ministries, Departments & Agencies (MDAs), healthcare professionals, and other local and global partners, WBFA successfully scaled its impact across Nigeria in maternal, newborn, and child health (MNCH), WASH, and health systems strengthening.

Strategic Programme Delivery & Innovation Flagship initiatives including MamaCare360, MamaCare360 NICU Plus Programme, and the WBFA-Dettol Hygiene Quest Programme bridged the gap between community education and institutional capacity building in Abuja, Lagos, and Kwara. A significant milestone was the launch of Project Oscar, a pioneering nationwide initiative for neonatal jaundice screening and prevention. Additionally, WBFA supported with communication and advocacy of Advanced Emergency Obstetric and Neonatal care training through the National Postgraduate Medical College of Nigeria.

At the policy level, WBFA addressed systemic barriers by participating in national technical working groups and global summits. By translating grassroots' evidence into high-level dialogue, the Foundation ensured that the lived realities of frontline workers and vulnerable families shaped national health frameworks, fostering a more responsive and equitable healthcare system.

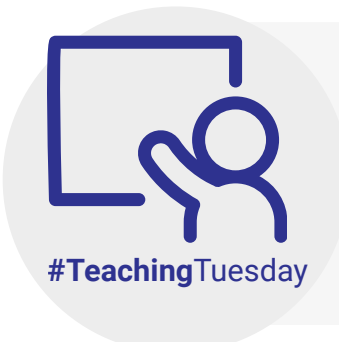
The Wellbeing Foundation Africa's Thematic Advocacy Framework

WBFA utilises a structured weekly digital architecture to drive behavioral change and policy influence:



#MaternalMonday:

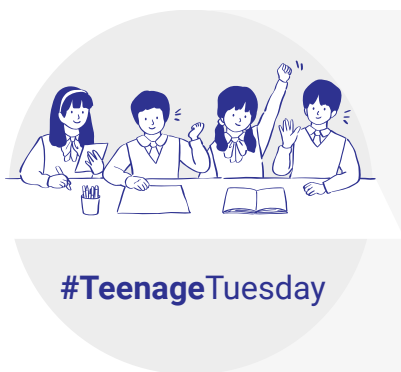
Focused on safe motherhood, reproductive rights, and access to skilled birth attendants.



#TeachingTuesday:

Champion health literacy and education across the life course, from classrooms and communities to the training of the health workforce.





#TeenageTuesday:

Addressed adolescent health, menstrual hygiene, and gender-based violence prevention through PSHE initiatives.



#WASHWednesday:

Promoted hygiene and infection prevention in schools and clinics, aligned with the "Clean Naija" campaign.



#ThriveThursday:

Highlighted nutrition, early childhood development, and mental health.



#FrontlineFriday:

Honored and advocated for the professional development and safety of midwives and nurses.



Global and National Activities, Advocacy & Engagements.

One Young World



In 2025, Her Excellency Toyin Ojora Saraki represented the Wellbeing Foundation Africa at the One Young World Summit in Munich, Germany as an esteemed One Young World Counsellor — part of a global fellowship of leaders guiding and mentoring the next generation of changemakers. In this role, she not only engaged in mentorship and dialogue with young leaders from Africa and beyond but also contributed to strategic reflections on youth leadership impact, and reinforced WBFA's commitment to connecting local action with global development platforms. Through her pre-Summit engagements, Summit participation, and post-event thought leadership, the President strengthened WBFA's global visibility and advocacy in youth leadership, equitable health, and sustainable change.

United Nations 80th General Assembly



During the 80th United Nations General Assembly High-Level Week in New York, Her Excellency Toyin Ojora Saraki led and participated in an array of strategic forums that advanced the Foundation's advocacy for holistic, people-centred health systems. She shared WBFA's insights at a high-level roundtable on consumer health and climate action, engaged with global policymakers and partners across key convenings, and reaffirmed the imperative of integrating mental into universal wellbeing at a WHO-led side event.

Through these engagements, Mrs. Saraki strengthened WBFA's leadership on global health, climate, and equity agenda reaffirming that health for all requires multi-sector collaboration and sustained action.

UNFPA – Advancing the ICPD Agenda



Through a strategic and mutually reinforcing collaboration with the United Nations Population Fund, WBFA contributed to advancing the implementation of the International Conference on Population and Development agenda in Nigeria. The Wellbeing Foundation Africa provided community-generated, rights-based evidence from its frontline maternal, newborn, adolescent, and sexual and reproductive health and rights (SRHR) programmes to complement national ICPD reporting and address existing data and policy gaps. This partnership reinforces WBFA's role as a bridge between grassroots realities and national development frameworks.

UNICEF – Strengthening Health Systems



The Wellbeing Foundation Africa also sustained its long-standing collaboration with the United Nations Children's Fund to promote resilient community health systems and strengthen primary healthcare (PHC) delivery across Nigeria. This engagement builds on an enduring partnership that began with the Nigeria First Child Rights Charter Implementation Conference, co-hosted with UNICEF, and has since evolved into joint advocacy and programme alignment in maternal, newborn, child, and adolescent health (MNCAH). Together, WBFA and UNICEF continue to advance inclusive health systems and uphold the rights and wellbeing of women and children.

Global Health Workforce Programme Nigeria Dissemination Event



The Wellbeing Foundation Africa and the Liverpool School of Tropical Medicine convened key stakeholders in maternal and newborn health to discuss the costed extension of the Global Health Workforce Programme and disseminate findings from the Advanced Obstetric Surgical Skills training initiative. The meeting provided a platform to review programme outcomes, share lessons learned from state-level implementation, and align strategies for strengthening public-sector capacity in emergency obstetric and newborn care. Through this engagement, WBFA and LSTM reinforced their shared commitment to evidence-based workforce development, sustainable skill transfer, and health-system resilience, ensuring that frontline healthcare professionals are better equipped to manage life-threatening maternal and neonatal complications across Nigeria.

WBFA-Dettol Nigeria Hygiene Quest Programme Phase 2 Close Out Event



The Wellbeing Foundation Africa marked the National Close-Out of Phase II of the WBFA–Dettol Nigeria Hygiene Quest Programme in Lagos, celebrating its achievements in advancing hygiene literacy, behaviour change and handwashing practices across schools, healthcare facilities and communities. The event recognised the contributions of government stakeholders, implementing partners, educators, healthcare providers and community leaders whose collaboration strengthened hygiene practices among children, mothers, caregivers and frontline health workers.

The close-out also marked the launch of Phase III under the WBFA–Reckitt Clean Naija partnership, building on Phase II achievements to deepen community engagement, strengthen hygiene promotion systems and expand sustainable health impact for women, children, families and communities across Nigeria.

Stride for HER Rights Maternal Walkathon



On Saturday, February 8, 2025, the Wellbeing Foundation Africa was invited to partner with Global Citizen on an exciting initiative to advance maternal healthcare and strengthen sexual and reproductive health rights (SRHR) in Nigeria. The event was called Stride for HER Rights, a Maternal Care Walkathon and its aim was to raise awareness about the critical importance of maternal and neonatal health in Lagos State, advocate for increased health financing to strengthen the role of community health workers (CHWs) and improve access to SRHR services.

WBFA's frontline midwives delivered a powerful address and walked alongside advocates, partners and citizens, carrying into a public arena the same practice they deliver each week in health facilities and communities. Their presence connected the policy demand made from the platform to the daily work of skilled birth attendance, respectful maternity care and continuous education that gives that demand its substance, positioning WBFA's advocacy where it belongs, in direct continuity with service delivery.

World Breastfeeding Month Webinar – Promoting Optimal Nutrition and Maternal Support

In August 2025, the Wellbeing Foundation Africa (WBFA) convened a high-level World Breastfeeding Month Webinar to reinforce best practices in breastfeeding, maternal nutrition, and early child health. The virtual dialogue served as a strategic platform to engage policymakers, healthcare professionals, and community advocates on the importance of exclusive breastfeeding as a foundation for lifelong wellbeing.

The event highlighted WBFA's continued leadership in advancing maternal and infant nutrition, strengthening lactation support systems, and aligning national practices with global recommendations from the World Health Organization and United Nations Children's Fund. Through evidence sharing and collaborative dialogue, the Foundation reaffirmed its commitment to promoting informed choice, family-centred care, and the health benefits of optimal breastfeeding practices across Nigeria.



Other Strategic Advocacy and Programmatic Impact

In 2025, WBFA translated global health and development targets into tangible frontline results through a combination of youth empowerment, clinical excellence, evidence-based advocacy, and policy influence. These efforts strengthened WBFA's leadership in maternal, newborn, child, and adolescent health while advancing Nigeria's progress toward the Sustainable Development Goals.

Youth Empowerment and Hygiene Advocacy



Hygiene Quest Ambassadors: Youth-led induction programmes equipped students to champion Water, Sanitation, and Hygiene (WASH) advocacy within schools, institutionalising hygiene leadership at the grassroots level.



Children's Day Walk: This national observance celebrated Nigerian children and showcased the success of the Reckitt–WBFA Dettol Hygiene Quest in promoting essential hygiene practices.



International Day of the Girl Child: Under the theme “The Girl I Am, The Change I Lead,” WBFA partnered with She Forum Africa to promote girls' leadership, education, and empowerment, particularly among vulnerable populations. The celebration was a reminder to every girl child the proper hygiene and wellbeing in an assest to their future and not just a procedure.

Clinical Excellence and Health Systems Strengthening



Africa Primary Health Care Forum: WBFA presented Project OSCAR – Light for Life as a best-practice model for achieving Universal Health Coverage (UHC) through evidence-based neonatal care.



International Day of Nurses and Midwives: WBFA honoured frontline healthcare workers whose dedication underpins maternal and child health outcomes.



Project Oscar - Light for Life and Neonatal Care: Continued national screening, treatment, and prevention efforts bridged the gap between community awareness and clinical intervention. Integrating innovation, compassionate care, and evidence-based education, Project Oscar strengthens neonatal health systems and improves survival outcomes for Nigeria's most vulnerable newborns.

National and Global Policy Advocacy



National Advocacy Engagements: High-level visits to the Federal Ministry of Health and Social Welfare, the Federal Ministry of Water Resources and Sanitation, and participation in the Sector-Wide Approach (SWAp) and Maternal and Neonatal Mortality Reduction Innovation Initiative (MAMII) strengthened policy coherence and programme alignment.



WBFA–Bayer Collaboration: Ongoing engagement advanced collaboration on maternal and reproductive health, family planning, and community-based health initiatives under the “Stronger Together” partnership framework.

Evidence-Based Research and Public Observances



Society for Adolescent and Young People's Health in Nigeria Conference 2025: WBFA presented abstracts highlighting digital innovation and youth engagement:

- Mamacare360: Leveraging WhatsApp to Support Young Mothers with Education and Counseling in Nigeria.
- Youth, Hygiene, and Climate Action: Advancing Health and Environmental Sustainability Through the Dettol Hygiene Quest.

Together, these partnerships and advocacy initiatives demonstrate WBFA's comprehensive approach to bridging policy and practice. By translating evidence into action, the Foundation continues to build systems that empower communities, strengthen institutions, and drive measurable public health outcomes.



Global Handwashing Day: WBFA mobilised schools and communities to reinforce hand hygiene as a fundamental defence against infectious diseases.

Global Advocacy Days Commemorated

World Water Day



On World Water Day, we shined light on the urgent need for glacier preservation, recognising the critical role glaciers play in providing fresh water for billions of people. At WBFA, through our DHQ programme, we empower individuals from mother in health facilities to families in communication and students in schools with essential knowledge on WASH and how daily actions influence the climate and, in turn, water availability.

International Day of the Midwife



We joined the world in celebrating the work of midwives, especially across Africa, where they are often the only healthcare providers available for women and newborn in hard-to-reach areas and times of crisis. On this day, we honour these everyday heroes. Because midwives are not just healthcare providers, they are a lifeline.

World Breastfeeding Week



We joined the global community under the theme 'Prioritise Breastfeeding: Create Sustainable Supported Systems', to call attention to the urgent need to ensure that every mother is equipped with right knowledge, resources, and enabling environments to breastfeed for as long as she chooses. Breastfeed is a shared responsibility that requires investment in skilled support and protective policies and the creation of systems within homes.

International Day of Persons with Disabilities



On International Day of Persons with Disabilities 2025, The Wellbeing Foundation Africa marked the first anniversary of Project Oscar – Light For Life, its neonatal jaundice screening, treatment, and kernicterus prevention program. As the United Nations calls for deeper commitments to disability inclusion across all development pillars, Project Oscar demonstrates how equitable, accessible and high-quality newborn care lays the foundation for more just, inclusive and sustainable societies.

Celebrating Nigerian Women's Leadership and Collective Progress



The Wellbeing Foundation Africa was represented by its Abuja team at the Voice of Women Conference & Awards 2025 and the African Women Leaders Network (AWLN) Nigeria Steering Council Dinner Reception at the United Nations House in Abuja. The Foundation's participation reflects its continued commitment to advancing women's leadership, promoting inclusive governance, and supporting reforms that strengthen women's participation in decision-making, peacebuilding, and security. As a Founding Member of the AWLN Nigeria Steering Council, WBFA remains dedicated to fostering partnerships that empower women and girls and accelerate gender equality across Nigeria and the African continent.

Women&Co Pathfinder International Strategy and Innovation Platform

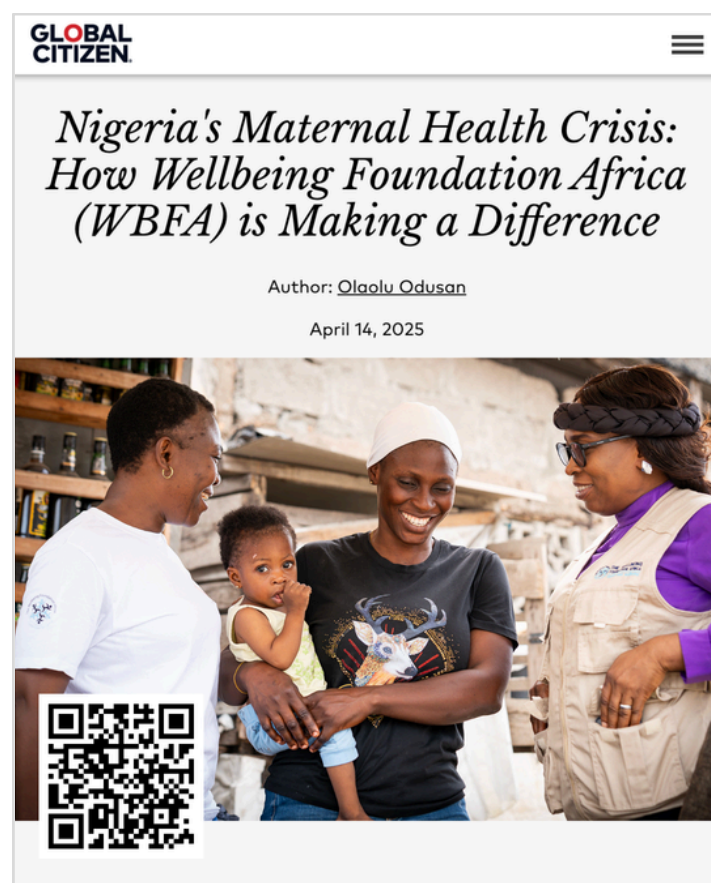


The Wellbeing Foundation Africa was pleased to be represented at the Nigeria launch of Women&Co, Pathfinder International's Strategy and Innovation Platform, in Abuja. The event celebrated the leadership of women driving innovative solutions across health, climate, and economic opportunity, while reinforcing the importance of women's participation in advancing sustainable development. WBFA commends Pathfinder International and the Women&Co leadership for creating a platform that fosters locally led innovation, strengthens partnerships, and empowers women to develop solutions aligned with Nigeria's development priorities.

Communications and Public Engagement

In 2025, the Wellbeing Foundation Africa (WBFA) leveraged a multi-channel communications strategy, combining traditional and digital media to amplify advocacy, share key milestones and drive behavioural change across Nigeria. Through radio, television, print, social media, digital publications and press releases, WBFA strengthened national and grassroots visibility, while key initiatives and milestones also secured coverage across external online publications.

- Broadcast Media: Strategic engagement across radio and television, including Wazobia FM, Nigeria Info, Diamond FM, Radio Nigeria, Arise TV and BBC Africa.
- Print & Digital Media: Press releases, features and news coverage across print and online publications, including BBC, Global Citizen, The Guardian, Punch, Tribune and Leadership.


[READ THE ARTICLE](#)

[WATCH THE DOCUMENTARY](#)

Communications and Digital Advocacy

In 2025, the Wellbeing Foundation Africa (WBFA) strengthened its visibility and influence through digital advocacy, traditional media and evidence-based storytelling, amplifying frontline impact and advancing public discourse on maternal, newborn, child and adolescent health.

Across Facebook, Instagram and X, WBFA reached a combined audience of over 200,000 people, translating programme evidence into accessible public health messaging. Weekly campaigns, including #MaternalMonday, #TeenageTuesday, #WASHWednesday, #ThriveThursday, and #FrontlineFriday, sustained year-round engagement across maternal and adolescent health, WASH, nutrition, and frontline healthcare.

This digital presence was reinforced through radio, television, print and online media, extending key messages beyond social platforms and broadening national and community reach. Communications were integrated across programmes, including MamaCare360, Project Oscar – Light for Life, and Dettol Hygiene Quest, using storytelling to build awareness, support behavioural change, and strengthen advocacy and accountability.

In 2025, WBFA’s communications strategy evolved beyond metrics to meaning, turning data into dialogue, visibility into voice, and advocacy into action across Nigeria’s diverse health landscape.

Digital Impact Snapshot

Expanding Reach • Strengthening Voices • Driving Behavioural Change

Platform	Total Reach	Followers	Audience Highlights
Facebook	48,710 reached	12,491 followers	40.6% women, 59.4% men; Top cities: Lagos, Abuja, Ilorin, Kano, Port - Harcourt
Instagram	63,640 reached	8,851 followers	67.5% women; strong engagement with maternal health and youth content
X (Twitter)	99,593 impressions	9,034 followers	Active participation in national advocacy hashtags (#MaternalMonday to #FrontlineFriday)
Traditional Media	Nationwide coverage	Partnerships with Wazobia FM, Arise TV, BBC Africa, The Guardian Nigeria, and others expanded WBFA’s reach beyond digital platforms	

Total Combined Reach: Over 200,000 people engaged across digital platforms.

Primary Engagement Drivers: Maternal Health, Neonatal Care, Hygiene Education, and Frontline Healthcare Workforce Recognition. The Wellbeing Foundation Africa’s communications ecosystem successfully transformed digital advocacy into measurable social impact, reinforcing behavioural change, promoting health literacy, and amplifying the Foundation’s visibility as a systems-oriented health partner in Nigeria.



WBFA Research and Development Publications and Position Papers

Redefining Primary Healthcare for Neonatal Jaundice Management: A Wellbeing Foundation Africa Capacity-Building Approach.

Abstract presented at the Africa Primary Health Care Forum in Abuja on the 14th and 15th of July, 2025.

Background: Neonatal jaundice (NNJ) is a major yet often neglected health issue, especially in low- and middle-income countries like Nigeria. Alarming, around 75% of jaundice-related neonatal deaths occur in South Asian and Sub-Saharan African countries, highlighting the urgent need for improved early detection and management strategies. Globally, NNJ affects about 60% of term and 80% of preterm newborns, with an estimated 1.1 million cases of severe hyperbilirubinemia each year. Nigeria ranks among the most affected countries, with NNJ responsible for 5–14% of neonatal deaths. Studies conducted by Olusanya et al in Lagos shows that NNJ accounts for 20–30% of neonatal unit admissions. Despite simple, affordable treatments, major gaps remain, poor diagnostics, low skills, low community awareness, myths and misconceptions, and ineffective or unavailable phototherapy equipment. The program is led by WBFA, with sub-implementation grant partners LSHTM NEST 360 Nigeria, SOLINA SCIDAR, Lagos State Govt., and funded by Reckitt. The overall goal is to reduce the incidence and complications of neonatal jaundice through improved early detection, timely treatment, and community awareness.

Methods: Community health education was integrated through maternal health sessions facilitated by midwives using digital follow-up platforms (via WhatsApp groups), with selected mothers supported to conduct home-based screening using Bilistrips, improving early identification and timely care-seeking for neonatal jaundice.

Results: A total of 139 healthcare workers were trained, and diagnostic and phototherapy equipment was deployed across 12 PHC facilities. The program reached 47,462 mothers with NNJ awareness messages and screened 1,748 newborns with universal bilirubin testing. Among newborns with elevated bilirubin levels, over 90% received timely treatment through strengthened referral linkages. Statistically significant improvements were observed in healthcare workers' knowledge and confidence across NNJ aetiology, complications, and management.

Conclusion: This initiative demonstrates that redefining the role of primary healthcare by equipping facilities, empowering health workers, and strengthening referral systems can substantially improve neonatal jaundice outcomes. Project Oscar offers a scalable, evidence-based model for integrating NNJ screening and treatment into national primary healthcare systems to reduce preventable neonatal deaths.

Mamacare360: Leveraging WhatsApp to Support Young Mothers with Education and Counseling in Nigeria

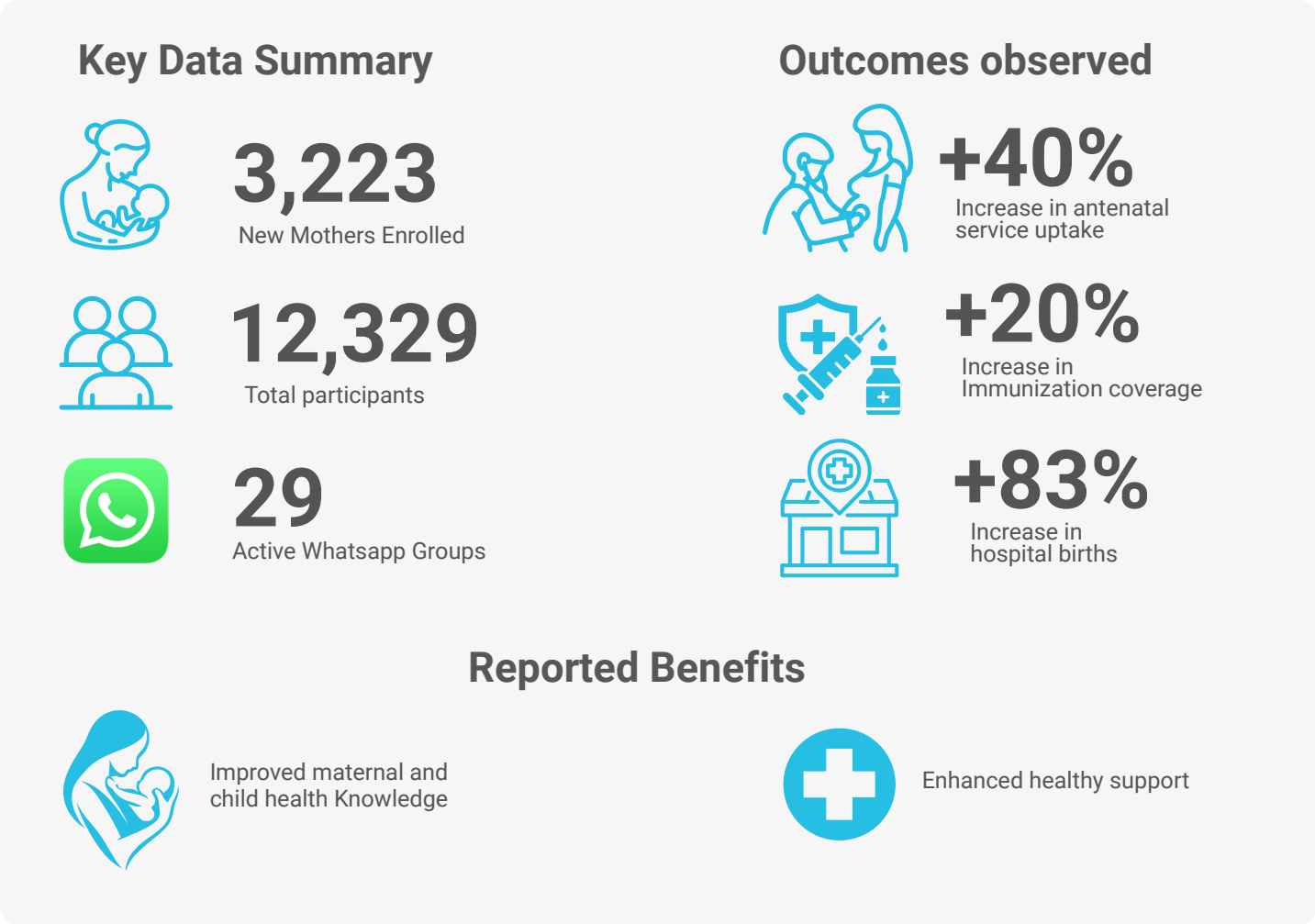
Abstract presented at the Society for Adolescents and Young People's Health in Nigeria (SAYPHIN) Conference in Port-Harcourt, August 15th -19th, 2025.

Program Description: The Wellbeing Foundation Africa (WBFA), through its flagship MamaCare360 program, launched a digital maternal and child health intervention leveraging WhatsApp, a widely used and accessible platform among adolescents. As an extension of MamaCare's in-person antenatal and postnatal education sessions, the Digital Midwifery Service was established in 2017 to provide continuous guidance on pregnancy, childbirth, newborn care, and postpartum recovery. This approach delivers evidence-based content on antenatal care, postpartum practices, breastfeeding, nutrition, and newborn health. It also offers individualized counseling and cultivates peer support networks that improve maternal mental health and health-seeking behaviors.

Statement of the Problem: Adolescent pregnancy and early motherhood in Nigeria are public health concerns associated with severe health, educational, and socio-economic consequences. 1 in 5 girls aged 15–19 has begun childbearing, contributing to one of the highest adolescent fertility rates globally. Complications from pregnancy and childbirth are the leading cause of death among adolescent girls, while over half of young mothers drop out of school, reinforcing cycles of poverty and gender inequality. Despite these risks, adolescent mothers often lack access to accurate, timely health information, experience social isolation and stigma, and have limited opportunities for supportive counseling and peer connection. Conventional maternal health services frequently fail to reach this vulnerable population with appropriate, youth-friendly interventions, leaving critical gaps in care, education, and empowerment that undermine their health and long-term prospects.

Objective: To improve maternal health outcomes, knowledge, and psychosocial well-being among pregnant adolescents and adolescent mothers in Nigeria through a digital health education and support model. The specific objectives are to increase access to accurate, evidence-based maternal and child health information using WhatsApp as a delivery platform and to enhance uptake of antenatal care, facility-based delivery, and immunization services among adolescent mothers.

MamaCare360: Digital support for young mothers 2024 impact Highlights



Tailored interventions in schools, healthcare facilities, and communities were complemented by mass awareness campaigns and data-driven monitoring. An Impact Assessment conducted in 2024 evaluated knowledge, attitudes, and practices across all participant groups.

Results: The program exceeded its student reach target by engaging 170,439 learners (114.5%), with significant improvements in hygiene knowledge: Abuja (50.5% to 79.8%), Kwara (38.4% to 62.8%), and Lagos (56.4% to 61.7%). Proper handwashing awareness and practices increased by over 25 percentage points in all areas. Illness-related absenteeism declined notably: Abuja (51.7% to 10.8%), Kwara (24% to 11.7%), and Lagos (33.1% to 17.1%). The project promoted youth leadership, climate resilience through reduced waterborne diseases, and environmental sustainability through responsible hygiene management practices.

Conclusion: The WBFA-Dettol Hygiene Quest has delivered significant, measurable improvements in hygiene knowledge, practices, and health outcomes across Nigeria's schools, communities, and healthcare facilities. By exceeding its reach targets and fostering lasting behavioral change, the program is building stronger, healthier, and more climate-resilient communities. This model demonstrates how integrated public health interventions can empower young people as agents of change for health and environmental sustainability.

Bridging the Gap: A Hybrid Model of Midwifery Care through the MamaCare360 Digital and Physical Health Education Program in Nigeria.

Abstract presented at the Public Health World Midwifery Conference (PHWMC) Boston USA (Hybrid) September 9th, 2025.

Introduction: The Wellbeing Foundation Africa (WBFA) is a leading non-governmental organization dedicated to advancing positive health outcomes and promoting holistic wellbeing across Nigeria and the African continent. Founded in 2004 by Her Excellency Mrs. Toyin Ojora Saraki, WBFA has, for over two decades, implemented frontline health programming and sustained advocacy efforts aimed at strengthening health systems, improving maternal and newborn outcomes, and advancing sustainable development. One of WBFA's flagship initiatives is the MamaCare360 program, a midwife-led antenatal, postnatal, and newborn care education model designed to support women throughout pregnancy, childbirth, and the postnatal period. MamaCare360 adopts a holistic approach that emphasizes comprehensive education, psychosocial support, and continuity of care, positioning midwives at the center of service delivery to improve maternal and newborn health outcomes. Building on the success of its in-person antenatal and postnatal education sessions, WBFA launched the MamaCare360 Digital Midwifery Service in 2017. This digital intervention leverages WhatsApp to extend the reach of maternal and child health education.

Through this digital platform, pregnant women, adolescent mothers, and new mothers receive continuous, evidence-based guidance on pregnancy, childbirth preparation, newborn care, breastfeeding, nutrition, postpartum recovery, and healthy practices. Beyond information dissemination, the service offers individualized counseling by trained midwives and facilitates moderated peer support groups that foster shared learning, emotional support, and improved maternal mental health, while encouraging positive health-seeking behaviors.

Objective: The objective of the MamaCare360 digital intervention is to improve maternal health outcomes, health knowledge, and psychosocial wellbeing among pregnant women and adolescent mothers in Nigeria through accessible digital health education. Specifically, the program aims to increase access to accurate and evidence-based maternal and child health information using WhatsApp as a delivery platform, while also enhancing the uptake of antenatal care, facility-based delivery, and routine immunization services.

Methods: The MamaCare360 model employs a structured digital health delivery approach tailored to the needs of pregnant women and young mothers. The program integrates three core components: structured antenatal and postnatal health education delivered through scheduled WhatsApp messages; individualized digital counseling provided by trained midwives who respond to questions and concerns in real time; and moderated peer support groups that encourage interaction, reduce isolation, and build confidence among participants. This hybrid model ensures that digital engagement remains personal, responsive, and grounded in trusted professional support.

Key Lessons: Implementation experience has generated important lessons. First, the human element remains critical to digital health success. Real-time interaction with trusted midwives and peer mentors significantly enhances credibility, trust, and sustained engagement beyond what automated messaging alone can achieve. Second, meaningful behavior change requires ongoing engagement. Regular, interactive communication, rather than one-off campaigns, reinforces positive practices such as antenatal attendance, immunization uptake, and facility-based delivery. Third, data-driven adaptation strengthens program impact. Continuous monitoring, feedback, and learning enable the refinement of content, identification of barriers, and adjustment of strategies to better respond to mothers' evolving needs.

Conclusion: The MamaCare360 program demonstrates that widely accessible, low-cost digital tools such as WhatsApp can effectively bridge critical gaps in maternal healthcare, particularly for adolescents and women in resource-constrained settings. By combining structured education, personalized counseling, and peer support, the program empowers mothers to make informed decisions, improves confidence, and promotes healthier maternal and newborn practices.

Men's Breastfeeding Knowledge and Male Involvement in Infant Feeding in Nigeria

Background: Optimal breastfeeding practices are among the most effective interventions for improving child survival, growth, and development. While breastfeeding is biologically performed by women, men play a critical role in shaping household decision-making, access to resources, and social norms that influence infant feeding practices. In Nigeria, male partner involvement in breastfeeding support remains limited, often constrained by gender norms, cultural perceptions, and insufficient knowledge of recommended infant feeding practices. Understanding men's breastfeeding knowledge is therefore essential for designing interventions that promote shared responsibility and strengthen male engagement in infant feeding.

Study Objective: This study assessed breastfeeding knowledge among men in peri-urban Nigerian communities and identified socio-demographic and informational factors associated with adequate knowledge, as a foundation for strengthening male involvement in breastfeeding support.

Methods: A cross-sectional study was conducted among 313 men residing in peri-urban communities in Nigeria. Data were collected using a structured interviewer-administered questionnaire. Breastfeeding knowledge was assessed using a composite Breastfeeding Knowledge Index developed from four items adapted from World Health Organization (WHO) and UNICEF Infant and Young Child Feeding (IYCF) guidelines. The index measured awareness of exclusive breastfeeding, correct understanding of its definition, knowledge of the recommended six-month duration, and belief in the importance of breastfeeding for child health. Scores ranged from 0 to 4 and were categorised as poor (0–1), moderate (2–3), or good (4) knowledge. Descriptive statistics and logistic regression analyses were conducted to examine knowledge levels and identify predictors of adequate breastfeeding knowledge.

Key Results: Most respondents were aged 20–39 years, reflecting men in their prime parenting and decision-making years. Overall awareness of exclusive breastfeeding was high, and nearly all respondents recognized breastfeeding as important for child health. However, significant gaps were identified in comprehensive knowledge, particularly regarding the recommended duration of exclusive breastfeeding. Most respondents demonstrated moderate knowledge, while a smaller proportion had poor knowledge; no respondent achieved complete knowledge across all indicators. Health workers emerged as the primary source of breastfeeding information, followed by wives or partners. Multivariable analysis showed that men aged 30–39 years, those with tertiary education, and those who received breastfeeding information from health workers were significantly more likely to have adequate breastfeeding knowledge.

This study assessed breastfeeding knowledge among men in peri-urban communities in Nigeria, with a focus on understanding the foundations for male involvement in breastfeeding support. The findings show that most respondents were aged 20–39 years, aligning with evidence that men in this age group are most likely to influence household and infant-feeding decisions. This demographic profile underscores the importance of targeting male-focused breastfeeding education to men during their active parenting years.

Health workers emerged as the dominant source of breastfeeding information, reported by just over half of respondents. This finding is consistent with studies from Nigeria and other sub-Saharan African settings, which demonstrate that facility-based counseling remains the most trusted pathway for accurate infant feeding information among men. In contrast, spousal transmission of breastfeeding information was less common, suggesting limited couple-level dialogue on breastfeeding. Similar patterns have been documented in previous Nigerian studies, where breastfeeding is often perceived as a woman's domain, restricting male engagement beyond financial provision.

Although overall awareness of exclusive breastfeeding was high, the absence of respondents with "good" knowledge highlights a critical gap between awareness and comprehensive understanding. Knowledge deficits were most evident regarding the recommended six-month duration of exclusive breastfeeding, a finding consistent with DHS and WHO reports across sub-Saharan Africa. This gap has important implications, as incomplete knowledge among men may limit their ability to support exclusive breastfeeding practices effectively, particularly in the face of family pressure or misinformation.

From a programmatic and policy perspective, these findings reinforce the need to intentionally integrate men into antenatal and postnatal breastfeeding education. Male-inclusive counseling, community-based education targeting fathers, and peer-led male discussion groups could strengthen knowledge and shift norms toward shared responsibility for infant feeding. Health workers, as trusted messengers, are strategically positioned to lead these efforts.

Indicator	Yes (%)	No (%)
Ever heard of exclusive breastfeeding	273 (87.2)	40 (12.8)
Correct definition of exclusive breastfeeding	185 (59.1)	54 (17.3)
Correct duration of exclusive breastfeeding (6 months)	185 (59.1)	128 (40.9)
Believes breastfeeding is important for child health	308 (98.4)	5 (1.6)

Breastfeeding Knowledge

Variable	Category	Category	Percentage (%)
Age group (years)	20–29	99	31.6
	30–39	147	47
	≥40	67	21.4
Marital status	Married	293	93.6
	Cohabiting	19	6.1
	Divorced/Separated	1	0.3
Religion	Islam	120	38.3
	Christianity	188	60.1
	Others	5	1.6
Education level	No formal education	11	3.5
	Primary	12	3.8
	Secondary	98	31.3
	Tertiary	192	61.3
Occupation	Trader	135	43.1
	Artisan	89	28.4
	Professional	78	24.9
	Unemployed	11	3.5

Socio - demographic characteristics of respondents

Knowledge Measure	Value
Mean knowledge score (SD)	2.72 (±0.65)
Knowledge Level	n (%)
Poor (0–1)	23 (7.3)
Moderate (2–3)	290 (92.7)
Good (4)	0 (0.0)

Breastfeeding knowledge score and level of knowledge

Indicator	Yes n (%)	No n (%)
Ever heard of exclusive breastfeeding	273 (87.2)	40 (12.8)
Correct definition of exclusive breastfeeding	259 (82.7)	54 (17.3)
Correct duration of exclusive breastfeeding (6 months)	185 (59.1)	128 (40.9)
Believes breastfeeding is important for child health	308 (98.4)	5 (1.6)

Source of breastfeeding n=313

Variable	Adjusted OR (95% CI)	P-Value
Age group		
30–39 vs 20–29	2.41 (1.01–5.74)	0.047
≥40 vs 20–29	1.88 (0.65–5.41)	0.245
Tertiary Education	2.76 (1.02–7.48)	0.045
Information from health workers	3.02 (1.29–7.05)	0.011
Positive belief in breastfeeding importance	4.98 (0.89–27.9)	0.067

Multivariable logistic regression predicting adequate breastfeeding knowledge (n = 313)

Variable	Adequate knowledge n (%)	Crude OR (95% CI)	P-value
Age group			
20–29 years	87 (87.9)	1	
30–39 years	140 (95.2)	2.63 (1.10–6.30)	0.029
≥40 years	63 (94.0)	2.25 (0.83–6.07)	0.109
Education level			
≤Secondary (Primary + Secondary)	176 (90.3)	1	
Tertiary	114 (96.6)	3.07 (1.14–8.27)	0.026
Source of breastfeeding information			
Non health worker	122 (88.4)	1	
Health worker	168 (96.0)	3.19 (1.38–7.38)	0.006
Belief breastfeeding is important			
Disagree/Strongly disagree	4 (66.7)	1	
Agree/Strongly agree	286 (93.1)	6.74 (1.17–38.9)	0.033
Bivariate analysis of adequate breastfeeding knowledge			

Interpretation of Findings

After adjusting for socio-demographic factors, three predictors remained independently associated with adequate breastfeeding knowledge:

Men aged 30–39 years: Men in this age group were more than twice as likely to have adequate breastfeeding knowledge compared with younger men. This likely reflects greater parenting experience and increased exposure to health services.

Higher educational attainment: Respondents with tertiary education had significantly higher odds of adequate knowledge, consistent with evidence that education is associated with improved health literacy.

Information received from health workers: Men who reported health workers as a source of breastfeeding information were three times more likely to demonstrate adequate knowledge, underscoring the critical role of facility-based counselling in engaging men.

Positive beliefs about the importance of breastfeeding showed a strong but borderline association, suggesting that knowledge and attitudes are closely linked but not interchangeable.

This study identified key predictors of breastfeeding knowledge among men in peri-urban Nigerian communities, providing important insights for male-inclusive infant feeding interventions. Age emerged as a significant determinant, with men aged 30–39 years demonstrating higher knowledge levels. This aligns with findings from Nigeria and other sub-Saharan African countries, where older men often assume greater decision-making roles within households and have increased exposure to maternal and child health services.

Education was also independently associated with breastfeeding knowledge, reinforcing evidence that formal education enhances health literacy and receptiveness to health messaging. Similar associations have been reported in studies from Nigeria, Ghana, and Ethiopia, where men with higher educational attainment were more likely to support recommended breastfeeding practices.

The strongest predictor of adequate knowledge was exposure to breastfeeding information from health workers. This finding is consistent with regional literature demonstrating that health professionals are trusted sources of infant feeding information for men. However, the relatively low reliance on spousal communication highlights persistent gender norms that frame breastfeeding as a female responsibility, limiting intra-household knowledge exchange.

From a programmatic perspective, these findings highlight the importance of deliberately engaging men during antenatal and postnatal care, integrating male-focused counseling into routine services, and extending breastfeeding education beyond women-only platforms. Policy efforts should emphasize couple-centered counseling and community-based male peer education to normalize male involvement in breastfeeding support.

Implications for Male Involvement in Breastfeeding: The findings highlight that while awareness of breastfeeding among men is widespread, inadequate knowledge may limit their ability to actively and effectively support breastfeeding practices. The strong influence of health workers underscores the importance of male-inclusive counseling within antenatal, postnatal, and child welfare services. Limited spousal communication on breastfeeding suggests persistent gender norms that position infant feeding as primarily a woman's responsibility, underscoring the need for couple-centered and community-based approaches.

Programmatic and Policy Relevance:

This study provides evidence to support the integration of male-focused breastfeeding education into routine maternal and child health services. Strengthening male involvement in breastfeeding through health facility-based counseling, community outreach, and peer-led male discussion platforms could enhance knowledge, shift social norms, and improve breastfeeding outcomes. The findings are directly relevant to national RMNCAH strategies and WBFA's programming, including MamaCare360, which promotes inclusive, family-centered maternal and child health interventions.

Global Citizen feature: "Nigeria's Maternal Health Crisis: How Wellbeing Foundation Africa is Making a Difference"

On April 2025, Global Citizen published a feature examining Nigeria's maternal and newborn mortality burden and the role of the Wellbeing Foundation Africa in confronting it. The article set out the scale of the challenge, with Nigeria accounting for close to a fifth of all global maternal deaths and a maternal mortality ratio that rose to 1,047 deaths per 100,000 live births in 2020, alongside child mortality figures showing that one in every eight Nigerian children does not reach a fifth birthday.

Against this evidence, the feature profiled MamaCare360, WBFA's flagship model of comprehensive support for mothers from pregnancy through early motherhood. It documented the weekly antenatal and postnatal education sessions delivered by qualified midwives across seven states, namely Lagos, Kwara, Abuja, Cross River, Osun, Kano and Sokoto, covering family planning, sexual, reproductive, maternal, newborn, child and adolescent health and nutrition (SRMNCAH+N), and water, sanitation and hygiene (WASH) practice. WBFA described how the combination of in-person engagement, digital midwifery and personalised education sustains continuous support and builds the trust that produces better outcomes.

The feature also recognised WBFA's attention to perinatal mental health, an area too often absent from maternal health programming, and documented the counseling, peer support groups and community outreach through which the Foundation responds to postpartum depression and anxiety. This work rests on an instrument WBFA created itself. The Perinatal Mental Health Checklist was developed by the Foundation and subsequently integrated and validated into Nigeria's Maternal and Child Health Handbook, providing a structured means of screening for depression, anxiety and mood disorders across both the antenatal and postnatal periods. Its placement inside the Handbook, the record a mother carries with her from her first antenatal contact through her child's early years, makes mental health screening a routine element of maternal care rather than an exceptional referral, and does so in a way that lowers the stigma attached to seeking help.

MamaCare360 carries the checklist into practice through the traffic light referral system WBFA designed alongside it, which sorts mothers into three tiers of response. Mild to moderate symptoms are managed at primary level, where trained midwives and nurses provide screening, counselling and follow-up. Moderate to severe presentations are referred onward to general hospitals where specialist care is available. Critical cases are escalated to tertiary facilities for urgent multidisciplinary attention, so that no mother in acute distress falls out of the system. Taken together with the training WBFA delivers to midwives and frontline providers, this gives Nigeria a tested, low-cost model for treating a mother's mental health with the same seriousness as her blood pressure or her baby's weight.

The article carried photography by Grace Ekpu, including portraits of WBFA midwives Eunice Akhigbe and Hannah Idowu at work in Lagos communities, and formed part of a content series supported by the Susan Thompson Buffett Foundation.

FINANCIAL REPORT 2024 - 2025

Statement Of Significant Accounting Policies

FINANCE REVIEW



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Statement Of Significant Accounting Policies

The significant accounting policies adopted in the preparation of these financial statements are set out below. These policies have been consistently applied to all years presented, unless otherwise stated.

- 1. Basis of Preparation:** The financial statements have been prepared under the historic cost convention, and this complies with the relevant IFRS issued and adopted in Nigeria.
- 2. Presentation Currency:** The financial statements are presented in the functional currency of the foundation, Nigerian Naira.
- 3. Property, Plant and Equipment:** Property, Plant and Equipment are stated at the cost less depreciation on a straight-line basis over the estimated useful life of the assets, taking into cognisance any residual value, excluding the costs of day-to-day servicing. An item of property, plant and equipment is derecognised upon disposal or when no future economic benefits are expected from its use or disposal. Any gain or loss arising on derecognition of the assets (calculated as the difference between the net disposal proceeds and the carrying amount of the asset) is included in the income statement in the year the asset is derecognised.
- 4. Depreciation on Property, Plant and Equipment:** Depreciation is provided to write off the cost of property, plant and equipment during their expected useful lives on a straight-line basis as follows:

Depreciation is not provided on property plants and equipment until they are brought into use.

Classification of PPE	Depreciation (%)
Plant and Machinery	20
Furniture and Fittings	20
Computer Equipment	20
Office Equipment	20
Motor Vehicle	25

- 5. Repairs & Maintenance:** Normal repairs and maintenance are written off as incurred, whereas capital-in-nature items are capitalised.
- 6. Income Recognition:** Income is recognised under the following:
 - Donations: These are accounted for on an accrual basis.
 - Interest income: This is accounted for on an accrual basis.

Statement of Income and Expenditures for the Year Ended 31st December, 2025

	31st December 2025 (N)	31st December 2024 (N)
REVENUE	404,425,126.34	1,131,837,584.08
EXPENSES		
Operating Expenses	138,794,838.80	276,479,650.74
Administrative & Personnel Expenses	242,723,938.58	208,346,576.57
TOTAL EXPENSES	381,518,777.40	484,826,227.31
Surplus/Deficit for the year	22,906,348.96	647,011,356.77

Statement of Financial Position items as at the Year Ended 31st December, 2025

ASSETS		
Non-Current Assets	31st December 2025 (N)	31st December 2024 (N)
Property, Plant & Equipment	276,500,000.00	27,000,000.00
Current Assets		
Cash and Cash Equivalent	167,949,238.21	420,748,082.49
Other Receivables	0	379,321,380.00
TOTAL ASSETS	444,449,238.21	827,069,462.49

Statement of Financial Position items as at the Year Ended 31st December, 2025

CURRENT LIABILITIES		
Fund and Liabilities	31st December 2025 (N)	31st December 2024 (N)
Payables/Accruals	20,370,248.77	15,063,279.12
Owners' Equity	401,172,640.48	
Net Surplus	22,906,348.96	
TOTAL LIABILITIES	444,449,238.21	15,063,279.12

Summary of 2025 Year End Financial Report

Cash and cash equivalent:

The amount in the 2024 year-end unaudited report was N420,748,082.49. However, it decreased to N167,949,238.21 at the end of December 2025, signalling a significant drop due to the implementation of the 3 new grants of the Foundation. The LSTM, DHQ 2 projects came to an end, hence the result.

Receivables:

Receivables stood at NIL, compared with N379,321,380.00 in 2024. This figure is linked to projects like the Dettol Hygiene Quest Phase 2 and the Neonatal Jaundice Project tagged Project Oscar, for which total grants were received at the year-end.

Property, Plant & Equipment:

The significant increase in the amount of Property, Plant & Equipment of N276,500,000 was due to additional tools for operations, such as new laptops procured in 2025 for the DHQ 2 projects and other sets of laptops and tablets in 2025 for projects Oscar and the DHQ 2. A landed property belonging to the Foundation in Ilorin, Kwara State, was revalued to N250 million, which had an impact on the value of the Non-Current Asset figure. This became necessary for the operational activities of the projects as new hires and frontline personnel were engaged for the implementation of the projects. The depreciation, though abridged, is charged in the period compared to the financial year 2024, as new assets were added to the asset register in the year 2025, which made the value increase.

Liabilities:

The value of the Foundation's liabilities as at the 2025 year-end was N20,370,248.77, while it stood at N15,063,279.12 as at the 2024 year-end, indicating an increase in liabilities due to adherence to statutory compliance requirements, and this is a welcome development as it suggests that the organisation is compliant with regulatory bodies for remittances.

Income:

The 2025-year-end income figure of N404,425,126.34, in comparison to N1,131,837,584.08 in 2024, was due to the decrease in the number of grants close-outs the Foundation carried out. The percentage of income variance comparison is 35.7%

Operating and Administrative Expenses:

The percentage of Total expenses, such as the Operating/Front line costs/Direct Project costs, Administrative and personnel costs, to the Total Income is 88.67%. This signifies that there is engagement of more frontline staff, hence incurring direct project costs for effective project delivery.

Net income:

There is a significant surplus over expenditure of N22,906,348.96, though less than N647,011,356.77 reported in the 2024 unaudited report. This is due to the project implementation and close-out.

Funds were received for financing the Foundation's activities from January to December, 2025 from the listed sources.

All Grants were used for the purpose in which the Donors' specified with positive impact deliveries.

Sources of Funds for 2025 Year

1. Founder's Endowment Grant
2. Reckitt Dettol Hygiene Quest phase 2
3. Neonatal Jaundice Project Oscar
4. Liverpool School of Tropical Medicine LSTM

Organizational Capacity and Human Resources



Organizational Capacity and Human Resources

Strengthening Teams, Systems, and Institutional Resilience

In 2025, the Wellbeing Foundation Africa (WBFA) strengthened its institutional capacity and human capital systems to meet the growing scale and complexity of its maternal, newborn, child, and community health programmes across Nigeria. As a frontline-driven organisation, WBFA continued to place midwives, nurses, educators, and programme officers at the centre of its service delivery model ensuring that organisational growth translated into measurable community impact.

Building a Skilled and Equitable Workforce

By the end of 2025, WBFA's total workforce stood at 96 staff members, reflecting measured expansion to match programme growth across five states — Lagos, Federal Capital Territory (FCT), Kwara, Osun, and Cross River. More than 84 percent of personnel were directly engaged in programme implementation, reflecting the Foundation's strong operational orientation. Gender equity remained a defining feature of WBFA's workforce, with women comprising over 60 percent of total staff and holding several leadership and coordination roles.

Strategic recruitment in 2025 focused on strengthening programme management, advocacy, research, and innovation. New technical and leadership positions improved cross-departmental coordination, donor compliance, and performance management systems.

Fostering Learning, Inclusion, and Wellbeing

WBFA sustained a culture of continuous learning and staff development through internal trainings, mentorship, and participation in external workshops. Capacity building efforts targeted programme design, compliance, monitoring and evaluation, and leadership development, equipping teams to deliver high-quality results aligned with national and international standards.

Institutional culture remained grounded in inclusion, equity, and staff wellbeing. The Foundation maintained policies that promote flexible work, professional growth, and welfare support ensuring a positive work environment and strong retention across teams.

Decentralised Operations and Institutional Footprint

WBFA's decentralised operational structure enabled culturally responsive service delivery and embedded local expertise within state health systems.

- Lagos served as the hub for flagship MamaCare360 and NICU Plus programmes.
- Abuja (FCT) functioned as the national coordination centre and policy engagement base, while implementing key projects for stakeholders.
- Kwara remained the model for integrated maternal and neonatal health programming.
- Osun and Cross River anchored MamaCare360 expansions and refugee-focused maternal services.

This vertically integrated framework ensured close coordination between the national office, regional hubs, and community service points — including antenatal classrooms, NICUs, primary health centres, and outreach sites.

Performance and Organisational Development

In 2025, WBFA strengthened its structured performance management framework, linking staff objectives to institutional priorities and measurable outcomes. Regular team reviews, supervisory feedback, and annual appraisals supported accountability and performance improvement.

Looking ahead, the Foundation will continue to invest in talent development, embed mental health and wellness support into its HR systems, and review compensation structures to remain competitive and equitable.

Through these efforts, WBFA is building an agile, skilled, and mission-driven workforce one that embodies the Foundation's values of empathy, excellence, and accountability in advancing the health and wellbeing of every woman, child, and family.

Indicator	2025 Result	Insight / Strategic Note
Total Workforce	96 staff	Expanded by 28 new hires to meet programme growth
Programme vs. Support Ratio	84% Programme / 16% Support	Reflects WBFA's field-driven model and operational efficiency
Gender Composition	61% Female / 39% Male	Demonstrates leadership in gender-equitable employment
Geographic Footprint	5 States – Lagos, FCT, Kwara, Osun, Cross River	Ensures decentralised service delivery and state-level integration
Staff in Programme Roles	81 Team Members	Midwives, nurses, educators, and community officers
Staff in Leadership / Technical Roles	15 Team Members	Policy, finance, HR, research, advocacy, and innovation
Retention Rate	94.80%	Strengthened by welfare policies, recognition, and inclusive culture
Learning & Development Activities	>25 internal and external trainings	Focused on programme management, M&E, and compliance



Sustaining Momentum, Deepening Impact

As the Wellbeing Foundation Africa concludes the 2025 reporting year, we reflect on a transformative period defined by disciplined growth, strengthened institutional systems, and renewed dedication to the frontline. This year stands as a testament to our enduring belief that sustainable progress begins at the community level where data meets compassion, and where every mother and child deserves the dignity of quality care.

Throughout 2025, WBFA's integrated model continued to bridge the divide between global health policy and grassroots realities. The sustained implementation of Project OSCAR – Light for Life, the successful conclusion of Dettol Hygiene Quest Phase II, and the continued expansion of MamaCare360 and NICU Plus exemplify our ability to combine clinical excellence with social and behavioural change communication (SBCC) to achieve measurable, life-saving outcomes.

All interventions adhered to national guidelines and World Health Organisation standards, underscoring WBFA's commitment to safe, effective, and ethical programming. Our systems are grounded in continuous learning, evidence generation, and accountability – ensuring that every action contributes meaningfully to Nigeria's health and development agenda.

The milestones recorded this year were made possible through the power of partnership. Collaboration with national Ministries, Departments, and Agencies (MDAs); global institutions such as the Liverpool School of Tropical Medicine; and corporate allies, including Reckitt and Bayer, amplified our collective impact. These alliances translated advocacy into action, influencing systemic reforms and keeping maternal health, newborn survival, and WASH standards at the forefront of national development priorities.

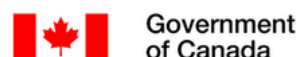
As WBFA looks ahead, we remain steadfast in our mission to strengthen systems, empower communities, and inspire accountability. The year ahead promises new opportunities to expand digital midwifery, integrate climate-resilient primary healthcare, and institutionalise proven interventions within public health frameworks.

WBFA enters the next chapter of its journey with gratitude to our partners, supporters, and the communities we serve and with renewed resolve to ensure that every woman survives childbirth, every child thrives, and every family enjoys the right to health and wellbeing.



Our Partners

Frontline Programme Delivery Partners



Global Advocacy Partners



PARTNERS AND INSTITUTIONAL ACCREDITATIONS

Alive & Thrive – Alive & Thrive Initiative (managed by FHI Solutions)
 Cross River State Ministry of Health
 Federal Ministry of Health and Social Welfare – Federal Ministry of Health and Social Welfare, Nigeria
 Ferring
 FHI360 – Family Health International 360
 GE HealthCare – General Electric HealthCare Technologies Inc.
 GHWP – Global Health Workforce Programme
 Government of Canada – Federal Government of Canada
 HERFON
 Johnson & Johnson Global Health
 Kano State Ministry of Health
 Kano State Primary Health Care Development Agency
 Kwara State Ministry of Education
 Kwara State Ministry of Health
 Kwara State Primary Health Care Development Agency
 Laerdal Global Health – Laerdal Global Health Foundation
 Lagos State Health Services Commission
 Lagos State Ministry of Education
 Lagos State Ministry of Health – Lagos State Ministry of Health, Nigeria
 Lagos State Primary Health Care Development Agency
 LSTM – Liverpool School of Tropical Medicine
 LSHTM – London School of Hygiene & Tropical Medicine
 Medela Cares – Medela Cares (CSR arm of Medela AG)
 NEST360 – Newborn Essential Solutions and Technologies 360
 Nutrition International – Nutrition International (formerly Micronutrient Initiative)
 Osun State Ministry of Health
 Osun State Primary Health Care Development Agency
 Partnership for Maternal, Newborn and Child Health – PMNCH (hosted by the World Health Organization)
 PSHAN - Private Sector Health Alliance Nigeria
 Reckitt – Dettol – Reckitt Benckiser Group (producers of Dettol)
 Solina Centre for International Development and Research – Solina Centre for International Development and Research (SCIDaR)
 Sokoto State Ministry of Health
 Sokoto State Primary Health Care Development Agency
 UK Department of Health & Social Care – United Kingdom Department of Health and Social Care
 UN Global Compact – United Nations Global Compact (Corporate sustainability initiative)
 UNESCO
 UNFPA – United Nations Population Fund
 United Nations High Commissioner for Refugees
 United Nations ECOSOC – (In Consultative Status)
 WHO (In Non-State Actor Consultative Status)
 WHO AFRO – (In Consultative Status)
 WHO Civil Society – World Health Organization – Civil Society Engagement Mechanism
 WHO IBP – World Health Organization – Implementing Best Practices Initiative
 WHO Nigeria



Closing Note

As we conclude 2025, WBFA reflects with gratitude and purpose on a year that reaffirmed the strength of our collective commitment to the health and dignity of women, children, and families across Nigeria and beyond. Each milestone recorded in the clinics we strengthened, the midwives we empowered, the youth we inspired, and the policies we influenced reflects the compassion and courage of those who stand with us in this shared mission.

The Wellbeing Foundation Africa (WBFA) continues to serve as a bridge between community realities and global commitments, transforming advocacy into measurable outcomes and hope into tangible health gains. In partnership with government, development allies, and the private sector, we have demonstrated that progress is not only possible it is sustainable when driven by collaboration, innovation, and accountability.

As we look to the future, our resolve deepens: to advance health equity, strengthen primary healthcare systems, and ensure that every mother survives, every newborn thrives, and every family lives in well-being.

LIST OF ACRONYMS

Alive & Thrive – Alive & Thrive Initiative (managed by FHI Solutions)

ANC – Antenatal Care

ARC – African Resource Centre

BAN – Breakthrough Action Nigeria

BCC – Behaviour Change Communication

BCI – Behaviour Change Interventions

CHAI – Clinton Health Access Initiative

DMCSA – Drug and Medical Consumables Supply Agency

DMA – Drug Management Agency

DPS – Director Pharmaceuticals Services

DQA – Data Quality Assurance

DRF – Drugs Revolving Funds

EBF - Exclusive Breastfeeding

E.S. – Executive Secretary

FA – Financial Assistance

FMoH - Federal Ministry of Health and Social Welfare

FHI 360 – Family Health International 360

GBV – Gender based Violence

GE – General Electric

GE HealthCare – General Electric HealthCare Technologies Inc.

GHSC-PSM – Global Health Supply Chain Programme – Procurement and Supply Management

GHWP – Global Health Workforce Programme

GC – Government of Canada

HERFON – Health Reform Foundation of Nigeria

HMB – Hospital Management Board

HSS – Health System Strengthening

ICPD – International Conference on Population and Development

IHP – Integrated Health Project

IMCI – Integrated Management of Childhood Illness

INGO – International Non-Governmental Organisation

LGH – Laerdal Global Health Foundation

LGA – Local Government Areas

LGCs – Local Government Councils

LMCU – Logistics Management Coordination Unit

LO-ORS – Low Osmolarity Oral Rehydration Solution

LSTM – Liverpool School of Tropical Medicine

LSHTM – London School of Hygiene & Tropical Medicine

M&E – Monitoring and Evaluation

MAMII – Maternal and Neonatal Mortality Reduction Innovation Initiative

MDAs – Ministry, Department & Agencies



MMSH – Murtala Muhammed Specialist Hospital
MNCH – Maternal, Newborn and Child Health
NCDC – Nigeria Centre for Disease Control
NEST360 – Newborn Essential Solutions and Technologies 360
NGF – Nigeria Governors Forum
NICU – Neonates in Intensive Care Unit
NPC – Nigerian Population Commission
NPSCMP – National Product Supply Chain Management Programme
NI – Nutrition International (formerly Micronutrient Initiative)
PHIMA – Private Health Institution Management Agency
PIT – Project Implementation Team
PMNCH – Partnership for Maternal, Newborn and Child Health
PNC – Postnatal Care
POLFL – Project Oscar Light For Life
PSHAN – Private Sector Health Alliance of Nigeria
PSHE – Personal Social Health Economic Education
RMNCAH – Reproductive, Maternal, Newborn, Child and Adolescent Health
SBCC – Social and Behavioural Change Communication
SCIDaR – Solina Centre for International Development and Research
SMoH – State Ministry of Health
SMS – Short Message Service
SNO – State Nutrition Officer
SOP – Standard Operating Procedure
SPHCB – State Primary Health Care Board
SPHCMB – State Primary Health Care Management Board
STL – State Team Lead
SWAp – Sector Wide Approach
TA – Technical Assistance
ToT – Training of Trainers
UNESCO – United Nations Educational, Scientific & Cultural Organisation
UNFPA – United Nations Population Fund
ECOSOC – United Nations Economic and Social Council
UNHCR – United Nations High Commissioner for Refugees
UITH – University of Ilorin Teaching Hospital
USAID – United States Agency for International Development
WASH – Water, Sanitation and Hygiene
WBFA – The Wellbeing Foundation Africa
WBW – World Breastfeeding Week
WDC – Ward Development Committee
WHO – World Health Organisation





**THE WELLBEING
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FOR RESEARCH & DEVELOPMENT

WBFA 2025 IMPACT REPORT

From Evidence To Action: Transforming Policy and Frontline Delivery

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