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**Roadmap for**

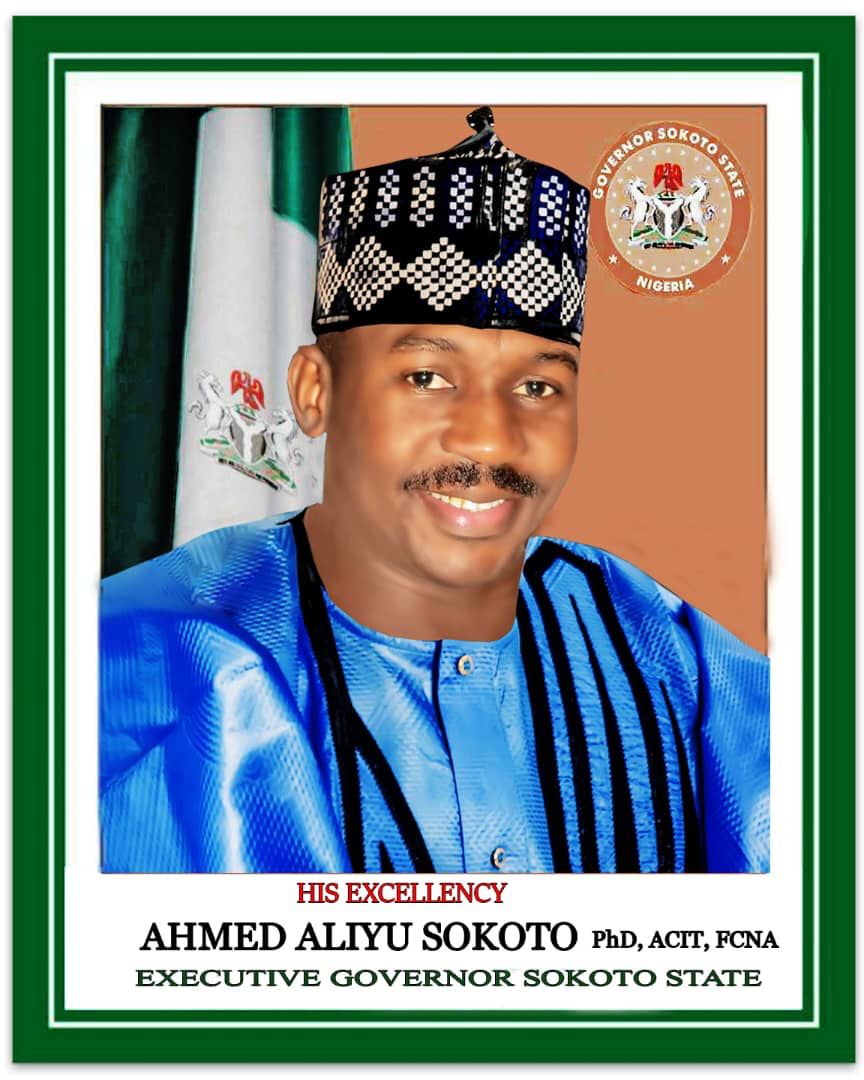
**Harnessing Demographic Dividend in Sokoto State, Nigeria**

**Prepared by:   
Health Policy Training and Research Programme (HPTRP)  
University of Ibadan, Nigeria**

**Submitted to**

**Ministry of Budget and Economic Planning, Sokoto State, Nigeria**

**June 2021**





**HIS EXCELLENCY**

**ALH. IDRIS MOHAMMED GOBIR**

**Deputy Governor, Sokoto State**

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**HON. BALARABE MUSA KADADI**

**Hon. Commissioner.**

**Ministry of Budget and Economic Planning**

**FOREWORD**

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 Demographic Dividend is the accelerated economic growth generated by the decrease in mortality and fertility of a country, followed by a progressive change in the age structure of the population; the young dependent population becomes shrinking relative to the population of working age.

The Sokoto State Demographic Dividend Roadmap was developed in May,2021 and validated in September 2021 with the broad objective to domesticate the Nigerian Demographic Dividend Roadmap to reflect the peculiarities of population structure and dynamics in Sokoto State.

The implementation of Sokoto State Roadmap will add value to governance in terms of informed plans and programmes targeted at sustainable economic growth and development of the State.

The roadmap is made up of four (4) Thematic Pillars: Health and Wellbeing, Inclusive Education, Sustainable Economic Development and Good Governance with each Pillar having its own specific objectives, investment options and key activities.

As a State with diverse developmental issues, we are challenged by values and will use globally accepted standards as instruments to formulate our policies and assess our progress and achievements.

The Demographic Dividend Roadmap serves as a tool for raising standards and informing the way policy and institutions work on the four Thematic Pillars carefully designed for the State and unanimously adopted by key stakeholders.

The approval of the Demographic Dividend Roadmap by the State Executive Council clearly testifies to the commitment and readiness of the State Government in its institutionalization and implementation.

**HON. BALARABE MUSA KADADI**

Honourable Commissioner

Ministry of Budget and Economic Planning, Sokoto

**PREFACE**

**ACKNOWLEDGEMENTS**

The process that culminated in the development of this Roadmap started in May,2021 and was completed in September 2021 while the final document was approved by the State Executive Council in September 2022.

The development of the roadmap was made possible through the existing partnership between the United Nations Population Fund (UNFPA) and Sokoto State government under the coordination of the State Ministry of Budget and Economic Planning.

We highly appreciate the support of the UNFPA for solely financing the development processes of the roadmap from the beginning to the end.

The immense contributions of Ms. Mariama Darboe, the then Head of Kaduna Sub-office of the UNFPA, Mr. Audu Alayande, and Ms. Gloria Enueze, the UNFPA Programme Officer in Sokoto State to the process of conceptualizing and developing this Roadmap must be acknowledged and appreciated.

We also acknowledge the dedication and resourcefulness of the Consultants from Health Policy Training and Research Programme (HPTRP), University of Ibadan under the guidance and leadership of Prof Olanrenwaju Olaniyan, who undertook the review of the Global, African and National Demographic Dividend Roadmap models which resulted in the domestication of the State Roadmap.

Various key officials of government Ministries, Departments and Agencies at both State and Federal levels, Non-governmental Organisations and other key stakeholders are highly commended for the manner in which they cooperated to ensure successful development of this document.

Finally, we commend the untiring efforts of the immediate past Director, Abubakar Ahmad Muhammad and Staff of the International Cooperation Department of the Ministry of Budget and Economic Planning which has placed Sokoto State as a forerunner in the development and validation of Demographic Dividend Roadmap in Nigeria.

Maryam Ahmad Barade

Permanent Secretary

Ministry of Budget and Economic Planning, Sokoto.

**LIST OF ABBREVIATIONS AND ACRONYMS**

ASRH Adolescent Sexual and Reproductive Health

AYFCs Adolescent and Youth Friendly Centres

AYP Adolescent and Young People

CCT Conditional Cash Transfer

EXCOs Executive Councils;

HOS Head of Service

HOS Head of Service

ICT Information and Communication Technology

IGR Internally Generated Revenue

LGAs Local Government Areas

MCH Maternal and Child Health

MOA Ministry of Agriculture

MOBEP Ministry of Budget and Economic Planning

MOCI&T Ministry of Commerce, Industry and Tourism

MOF Ministry of Finance

MOSM Ministry of Solid Minerals

MOW Ministry of Works

MOWCA Ministry of Women and Children Affairs

MOYD Ministry of Youth Development

MSW Ministry of Social Welfare

NGOs Non-Governmental Organizations

SSBS Sokoto State Bureau of Statistics

SSOHA Sokoto State House of Assembly;

SSPHCDA Sokoto State Primary HealthCare Development Agency

SRH Sexual and Reproductive Health

SSHMB Sokoto State Hospital Management Board

SSMOBEP Sokoto State Ministry of Budget and Economic Planning;

SSMOF Sokoto State Ministry of Finance

SSSMoH Sokoto State Ministry of Health

SSMoI Sokoto State Ministry of Information;

SSSMoJ Sokoto State Ministry of Justice;

SSMOWCA Sokoto State Ministry of Women’s Affair;

SSMYD Sokoto State Ministry of Youth and Development;

TV Television

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**EXECUTIVE SUMMARY**

The population of Sokoto State has increased from 3.70 million persons in 1996 to 6.03 million persons in 2020 representing over 60 percent growth in 14 years. This age structure of the population shows that the children below age 15 years are about 50 percent of the population and this owing to the very high fertility rate. In 2018, the State ranks fourth (4th) highest, with average woman giving birth to seven (7) children, among the 36 States in the country. In the same vein, the attendant youth bulge was remarkable with about 30 percent being youth aged 15-35 years and about 48 percent falling within the working age bracket of 15-64 years. This could pose either a peculiar challenge or blessing for economic development of the State. The State boasts of economic potentials and good investment opportunities, particularly in agro-allied industries such as flour mills, tomato processing, sugar refining, textiles, glue, tanning, fish canning, dairy etc. Nevertheless, only 33.6 percent of the working population age 15-64 years were fully employed in 2020. The implication is that the bulk of the human resources in the State are either not productively engaged or looking for decent jobs. The provision of seamless opportunities for decent jobs for its teeming youth can potentially spur rapid development leading to demographic dividend.

Demographic dividend (DD) is the economic growth potential that can result from shifts in the age structure of a population, which makes workforce grow relative to the number of dependants, that is, the working age (15 to 64 years) population becomes larger than the non-working-age share of the population (below 15 and above 64 years). Reaping the benefit offered by the changing population structure is not automatic, rather a deliberate implementation of social and economic policies and investments to improve the productivity of the teeming youth is mostly required. Conscious and sustained investments in education, skills development, health, employment opportunities, and rule of law and good governance. Demographic dividend is usually in two stages. The first dividend, arising from the change in the age structure results in low dependency ratio, that ensures wealth accumulation during working years, which generates surplus to finance investment to meet the needs of the dependants. The first DD is transitory because the prosperity is only for a limited period. People are therefore encouraged to invest their labour income surplus during their working age towards asset accumulation. The second dividend is an outcome of the benefits derived from the first dividend that allows for assets accumulation and reaping the second dividend is dependent on the extent to which the first dividend was harnessed.

The readiness of Sokoto State to develop the roadmap to harness demographic dividend is a demonstration of the desire to fully explore the massive human capital potential of the State youthful population. Thus, Sokoto State Government, through the Ministry of Budget and Economic Planning, in collaboration with United Nations Population Fund (UNFPA) Nigeria and Health Policy Training and Research Programme (HPTRP), University of Ibadan is taking steps to strengthen the capacity and understanding of the nature and magnitude of demographic dividend in the State by building the capacities of state bureaucrats on how to harness demographic dividend. A five-day workshop was organized for the selected statisticians, planners and programme officers in strategic MDAs and within the State academia in May 2021 to develop the Roadmap for harnessing demographic dividend in the State. The Roadmap sought to guide and facilitate the development of measures for creating a conducive environment and pathway to harnessing demographic dividend in the State within the shortest possible time. It outlines the necessary investments and interventions required to harness the demographic dividend in the State under four (4) relevant thematic pillars - ***Health and Wellbeing; Inclusive Education; Sustainable Economic Development and Good Governance.*** Each pillar highlights details of the key objectives, appropriate investments options as well as clear and achievable activities to be implemented. It also contains the performance and monitoring indicators with the set timelines and deliverables necessary to ensure the realisation of the stated objectives.

The first pillar, which covers the **Health and Wellbeing** of the populace, seeks to promote equitable access to comprehensive and quality healthcare services. This pillar has seven investment options and 54 key activities assigned to it. Since achieving demographic dividend is hinged upon reducing fertility and mortality, there is need to improve access to Sexual and Reproductive Health (SRH) and improve child survival as well as increased investment in birth control, family planning, and continued education of girls. **Inclusive Education** is the second pillar for DD Roadmap because educated citizens are pivotal to the attainment of the demographic dividend. More educated citizens would help reduce early marriage, teenage pregnancy and insurgencies which creates the conducive environment for the attainment of demographic dividend. The State seeks to provide equal access to quality education delivery at all levels. This pillar consists of six investment options and 31 key activities stated. The third pillar is **Sustainable Economic Development**. This is intended to create vibrant economic environment for flexible and equal employment opportunities, entrepreneurship development and poverty reduction for all. This is required to allow citizens to save and acquire assets that would allow them reap the second dividend in the future. There are five investment options under this pillar and 32 activities. The fourth pillar, which is **Good Governance,** aims to improve the governance system in the State by focusing on the quality of institutions through improved accountability, rule of law, transparency, efficiency, participation and adequate security for the people. Good governance is of great importance to make demographic dividend work. The pillar consists of six investment options and 21 key activities.

The key vision, mission, goals, strategies and actions of the State Government engrained in the Sokoto State Development Plan (2020-2025), which focuses on accelerating structural transformation of the economy through agriculture, improved industrialization, and human capital development was the premise on which the Roadmap was built. The Roadmap has four thematic pillars considered to be peculiar to the population dynamics and demographic needs of Sokoto State. In summary, the State DD Roadmap has 4 thematic pillars, 4 broad objectives, 24 investment and 138 actionable activities. The activities suggested are assigned to their responsible MDAs who must familiarize themselves with the pillars and their investments options. The Roadmap will be validated by the respective stakeholders after which the State is expected to estimate the Demographic Dividend Profile for Sokoto State. This profile will estimate entry into, exit from and duration of the surplus of the State’s dividend. The amount of the surplus, lifecycle deficit as well as the support ratio of the State will be determined. The final stage will be to conduct the baseline monitoring and implement the observatory strategies for Demographic Dividend in Sokoto State. In all, Demographic Dividend is the window of opportunity the State cannot afford to forgo.

**CHAPTER ONE**

**Introduction and Background**

The population of Sokoto State has increased from 3.70 million persons in 1996 to 6.03 million persons in 2020 representing over 60 percent growth in 14 years. This age structure of the population shows that the children below age 15 years are about 50 percent of the population and this owing to the very high fertility rate. In 2018, the State ranks fourth (4th) highest, with average woman giving birth to seven (7) children, among the 36 States in the country. In the same vein, the attendant youth bulge was remarkable with about 30 percent being youth aged 15-35 years and about 48 percent falling within the working age bracket of 15-64 years. This could pose either a peculiar challenge or blessing for economic development of Sokoto State.

Sokoto State is largely agrarian and over 80 percent of the inhabitants are in agricultural sector. As a result, the state is a major trade centre in leather crafts while producing crops such as millets, guinea-corn, maize, rice, potatoes, cassava, peanuts (groundnut) and beans for subsistence and possible export. Also, the State ranks second in livestock production in the country with animal population of well over 8 million. The State boasts of economic potentials and good investment opportunities, particularly in agro-allied industries such as flour mills, tomato processing, sugar refining, textiles, glue, tanning, fish canning, dairy etc. Nevertheless, only 33.6 percent of the working population age 15-64 years were fully employed in 2020. The implication is that the bulk of the human resources in the State are either not productively engaged or looking for decent jobs. The provision of seamless opportunities for decent jobs for its teeming youth can potentially spur rapid development leading to demographic dividend.

Demographic dividend (DD) is the economic growth potential that can result from shifts in the age structure of a population, which makes workforce grow relative to the number of dependants, that is, the working age (15 to 64 years) population becomes larger than the non-working-age share of the population (below 15 and above 64 years). Reaping the benefit offered by the changing population structure is not automatic, rather a deliberate implementation of social and economic policies and investments to improve the productivity of the teeming youth is mostly required. Conscious and sustained investments in education, skills development, health, employment opportunities, and rule of law and good governance, (Federal Government of Nigeria 2017).

Demographic Dividend comes in two successive phases - first and second dividend. The first dividend, arising from the change in the age structure results in low dependency ratio, that ensures wealth accumulation during working years, which generates surplus to finance investment to meet the health and education needs of children and needs of other dependants. The first dividend is transitory in nature and it usually lasts between 30 to 50 years. The second dividend is an outcome of the benefits derived from the first dividend that allows for assets accumulation and reaping the second dividend is dependent on the extent to which the first dividend was harnessed. Old age survival is primarily dependent on the second dividend (Lee and Mason 2006).

For the development of the key action plans needed to harness demographic dividend, African Union (AU), in line with the Assembly Decision (Assembly/AU/Dec. 601 (XXVI), and its year 2017 theme, developed “The Roadmap for Harnessing the Demographic Dividend through investments in Youth”. A key recommendation was that each member country should adapt the plan within its context (African Union 2017). Consequently, the Federal Republic of Nigeria developed and launched its Roadmap in the same year and subsequently estimated the Demographic Dividend Profile for the country. The population dynamics of Nigeria shows that the federation is highly heterogenous, the federating states are fundamentally different and the factors determining the demographic structure differ widely (Olaniyan *et al.* 2018). This has led to the clamour that the federating states should accord proper attention to the demographic dividend in their respective development efforts. Therefore, it is expedient that, in addition to the national roadmap, each state should develop its own roadmap which will take into consideration the peculiarities of the state.

The readiness of Sokoto State to develop the roadmap to harness demographic dividend is a demonstration of the desire to fully explore the massive human capital potential of the State youthful population. Thus, Sokoto State Government, through the Ministry of Budget and Economic Planning, in collaboration with United Nations Population Fund (UNFPA) Nigeria and Health Policy Training and Research Programme (HPTRP), University of Ibadan is taking steps to strengthen the capacity and understanding of the nature and magnitude of demographic dividend in the State by building the capacities of state bureaucrats on how to harness demographic dividend. A five-day workshop was organized for the selected statisticians, planners and programme officers in strategic MDAs and within the State academia in May 2021 to develop the Roadmap for harnessing demographic dividend in the State.

The key vision, mission, goals, strategies and actions of the State Government engrained in the Sokoto State Development Plan (2020-2025), which focuses on accelerating structural transformation of the economy through agriculture, improved industrialization, and human capital development was the premise on which the Roadmap was built. The Roadmap has four thematic pillars considered to be peculiar to the population dynamics and demographic needs of Sokoto State. The pillars; health and wellbeing, inclusive education, sustainable economic development, and good governance outlines the necessary investments and interventions required to harness the demographic dividend in the State.

**CHAPTER TWO**

**Population Dynamics and Demographic Transition in Sokoto State**

The interaction of fertility, mortality and migration are vital components of the population dynamics of a State, region or country. Consequently, this has implication for the size, age structure and composition of the population. Demographic transition, on the other hand, occurs when the population age structure of countries change overtime. The interplay of these drivers (births and deaths) in Sokoto State has resulted in progressive changes in the size of her population from about 3.7 million in 2006 to over six million in 2020 (Figure 2.1), representing over 63 percent increase in the population of the State over a period of 14 years. This has implication on access to education, healthcare services and availability of employment opportunities for the teeming population.

**Figure 2.1: Total Population of Sokoto State (2006 to 2020)**

**Source:** National Population Commission (2020)

This drastic change is also slightly reflected in the gender composition of the population. The gender distribution of Sokoto State reveals a marginal transition from a period of male dominance to female dominance in the population. This is evident in the observed transformation in the gender composition of 50.3 and 49.7 percent male and female respectively in 2006 to a reverse of about 49 percent male and 51 percent female (Figure 2.2) in 2022. Some of the factors which might account for this change are higher likelihood of the male migration from the State in a search for better economic opportunities, possibility of lower life expectancy for men due to their engagement in rigorous and engagement of men in more risky activities in a bid to meet the needs of the household.

**Figure 2.2: Gender Composition of Sokoto State Population (2006 to 2022)**

**Source:** National Population Commission (2020)

**2.2 Age Structure of Sokoto State**

In addition to the observed variations in the size and gender composition of the State population, the age structure of Sokoto State also reveals an interesting dynamics, as almost 50 percent of the State’s population are below age 15 (Figure 2.3). Furthermore, about 80 percent of the population of the State are between the ages of 0 and 35 years. This reveals that Sokoto State has a largely young population. This population can pose either an opportunity if well harnessed or a threat if ignored. There is therefore an urgent need to explore how the largely dominant young population of Sokoto State can be empowered and productively engaged to build a strong human capital for the State to harness its Demographic Dividend.

**Figure 2.3: Age Structure of Sokoto State, 2018**

**Source:** National Population Commission (2020)

Furthermore, changes that have occurred in the distribution of the age structure of Sokoto State population is more evident from the State’s population pyramid (Figure 2.4). From the pyramid, a specific age group is represented by each layer, with higher layers representing older ages separated across gender. Two obvious differences between the 2006 and 2020 Sokoto State pyramid are the nature and distribution of both the bottom and upper layers. In comparison with the 2006 pyramid, the 2020 pyramid reveals a more consistent increase in the survival of women of child bearing age as seen in the protruding rise on the right hand side of the pyramid. Two is the nature of the upper tip which though reflects but low life expectancy as evident in its narrow tip. The female component of the pyramid in 2020, (depicted on the left hand side) appears more consistent upward when compared with the 2006 pyramid.

It is also apparent from the pyramids that the population of both male and female has increased. Although the female population is increasing as a result of the natural gap between fertility and mortality, that of the men increased as a result of movement of men in and out of the State as evident in the sudden increase and decrease across the left hand side of the pyramid. The Sokoto State 2020 pyramid, however, further reveals sudden reductions in the population of female between age 20 and 34. Since this is the period of women’s reproductive years, this reveals possibility of high level of maternal mortality within that age group.

**Figure 2.4: Population Pyramid of Sokoto State (2006 and 2020)**

**Source:** National Population Commission (2020)

**2.3 Age Dependency in Sokoto State**

Age dependency, broadly grouped into child and old age dependency, measures the extent of burden bore by the working population. It is the sum of the young population (under age 15) and elderly population (age 65 and over) relative to the working-age population (15 to 64 years). Evidences from the age composition of Sokoto State reveals that the State has a huge bulge of younger dependents (over 80 percent of the population below 35 years) and very few elderly. The working age are the economically active cohorts (workers) in the economy, while the economically dependents are the children and elderly who are the non-working population. Age dependency, measured as the number of dependents per 100 working age population, has a significant economic implication as it reveals the relative economic burden of the workforce.

In Sokoto State, the child dependency is 1.08 while the old age dependency is 0.08, summing up to a total dependency rate of 1.16. This demographic indicator gives insight into the number of people of non-working age, compared with the number of those of working age. Thus, it shows that in Sokoto State, 100 working age individuals support about 108 children and only 8 elderly, such that 116 dependents are being supported or catered for by only 100 workers. The higher share of the working age population shows that there are few workers taking care of the entire population. This value is huge given that a large proportion of the working population are not currently productively engaged. This is a call to ensure that the individuals willing and able to work should be provided with adequate skills, decent jobs and the necessary enabling environment to either be gainfully employed or empowered to develop their entrepreneurial skills.

**2.4 Demographic Transition in Sokoto State**

The size of the population can be captured by its growth overtime while changes in its composition reflects the extent of dependency, population ageing and the life expectancy of its people as evident in the population size and demographic transition. Demographic Transition involves the movement of countries or regions from high population and dependency rates to lower population and dependency. Generally, the fertility and mortality rates; including migration, are the fundamental drivers of demographic transition (Olaniyan et al., 2018).

**2.4.1 Fertility in Sokoto State**

Fertility, which is the number of children a woman has in the course of her childbearing years, is a major driver of population size. In Nigeria, this rate as evident in the Total Fertility Rate (TFR) varies across the 36 States of the country and the Federal Capital Territory. The TFR across the States in 2018, varied from 3.4 live births per woman in Lagos State, which is the lowest to 7.3 live births per woman in Katsina, which is the highest in the country. This represents significant variation from the national value of 5.3 live births per woman in the nation (Figure 2.5).

**Figure 2.5: Total Fertility Rates by States in Nigeria, 2018**

Source: National Demographic Health Survey (NDHS, 2018)

In the same period (2018), Sokoto State reported a TFR of 7 live births per woman, which was the same TFR in 2013 and a 24% percent decline from 8.7 live births per woman in 2003 (figure 2.6). Evidences from this trend shows that the TFR in Sokoto, though initially decline, but then stalled at 7 live births per woman since 2013 through 2018. The high fertility, which is the fourth highest in the country has implication for creating and harnessing the demographic dividend in the State. This is because demographic dividend commences with fertility decline, higher fertility rates result in higher dependency, and lower support ratio.

**Figure 2.6: Total Fertility Rates in Sokoto State**

Source: National Demographic Health Survey (NDHS, 2008, 2013 and 2018)

**2.4.2 Some Drivers of Fertility in Sokoto State**

The observed high rate and subsequent stall in the TFR of Sokoto State are driven by a number of factors. Some of these factors include the age of commencement of childbearing, proportion of teenage girls, aged 15 to 19 who are currently married, use of contraceptive and girl-child education. Early marriage increases the fecundity of women because when women marry early, they also commence childbearing early which increases the number of children they will have during their childbearing years. 54.9 percent of the adolescent girls in Sokoto State, have begun childbearing, this very high when compared with comparison with only 22.2 percent of adolescent girls in the whole. The State has the highest proportion of teenage marriage in the North West, only closely preceded by 53.5 percent in Zamfara State (Figure 2.7).

Sequel to the high prevalence of teenage marriage in the State is the equally high rate of teenage pregnancy. A similar observation was observed with Sokoto State having the highest prevalence of teenage pregnancy of 32.1 percent. The fecundity of a woman is higher in the early ages, even though the reproductive organs might not be fully developed for demands of pregnancy and childbirth, thereby resulting in pregnancy-related complications.

**Figure 2.7: Percentage of women age 15-19 who are currently married or in union and percentage who have begun childbearing**

Source: NDHS 2018

Another important driver of high fertility in the State is the extent of contraceptives use. In the State, over 97 percent of the women of childbearing age are not currently using any form of contraceptive. This is quite alarming because failure to use any form of family planning implies an inability to limit or space birth, which results in higher births. This is an impediment to the creation and harnessing of DD in Sokoto State. The joint interaction of women not using contraceptive as well as the proportion of women aged 15 to 29 who are in union and had begun childbearing accounts for the observed high births in the State (Figure 2.8). Even though teenage pregnancy as observed has declined considerable, it still remains high and significant. Although, given the current insurgency and security challenge being experienced in the region, further decline in TFR is expected as households are currently dispersed and the focus is on safety rather than procreation. However, care should be taken to ensure there is no rise in adolescent pregnancy as a result of the vulnerable and displaced girls being exposed to violence.

**Figure 2.8: Interaction of Some Drivers of Fertility in Sokoto State**

Sources: NDHS 2008, 2013 and 2018

**2.4.3 Mortality in Sokoto State**

Child survival is very critical for the creation of demographic dividend. The death of a child necessitates the need to replace such child and consequently increased fertility. In order to ensure fertility decline, which is the starting point of creating demographic dividend, death of children should be reduced. In Sokoto State, Infant and under-five mortality which represents the likelihood of a child dying between birth and first birthday; and birth and fifth birthday respectively is quite high. In 2011, infant mortality was 107 deaths per 1, 000 live births, which declined to 51 deaths per 1,000 live births in 2016 and then increased to 102 deaths per 1,000 live births of infants under 1 year. The under-five mortality was initially 178 deaths per 1,000 live births in 2011, declined to 119 deaths per 1,000 live births and then further rose to 197 deaths per 1,000 live births in 2016 and 2018, respectively (Figure 2.9).

**Figure 2.9: Infant and Under-five mortality in Sokoto State**

Sources: MICS 2011 and 2016; NDHS 2018

The whooping increase in death of school age children in Sokoto State is an indication of challenges in the areas of child nutrition, immunization services and adequate healthcare these young ones, which results in low survival of these children. It therefore becomes highly imperative for government to put in deliberate efforts to increase child survival rates in the State. As more children survive resulting in lower child mortality, fertility will decline and the transition from the period of high births to low births can begin to occur, thereby creating a platform for demographic dividend to be harnessed. This will set the pace for the State to enjoy the window of opportunity created by the demographic dividend.

Spaced births, reduction in early marriage, increase education of the girl-child are all necessary to improve the health of women. In order to create and harness the demographic dividend, there is a need to increase access to maternal and child health, ensure the provision of sexual and reproductive healthcare services for the young adults, especially adolescent girls. It is also important to reduce unmet need for contraceptive so as to limit births. The need to limit and space birth for the health of the mother is important. Advocacy programs to men and religious leaders and household heads, community leaders should be promoted so as to ensure women are encourage to seek care. Family planning programs need to be implemented in the state. Increase in contraceptive use will invariably limit childbearing, reduce fertility and spur the society on the path to creating the demographic dividend. There is also a need to ensure the availability of well-skilled human resource particularly, encouraging the involvement of women as healthcare providers to meet the reproductive health needs of the female. Summarily, it is necessary to foster inter-sectoral activities that covers health care provision for women, newborn, children and adolescent in the State.

**CHAPTER THREE**

**The Thematic Pillars of the Roadmap**

**3.1 Objectives of the Roadmap**

The broad objective of the Sokoto State Demographic Dividend Roadmap is to set Sokoto trail to intentionally create, harness and reap the dividends of its demography within the shortest possible time. The roadmap will also promote inter-linkage of resource use and flow of inter-sectoral interactions among key stakeholders. This is to be achieved by propelling the State on the right trajectory necessary to channel and utilize its rich human and physical resources on appropriate investments and specific activities targeted at maximising the window of opportunity created by the demographic dividend. This cannot actually be done in isolation, as such this Roadmap is integrated with the Sokoto State Development Plan, as well as the AU and Nigerian DD Roadmap.

The Sokoto Demographic Dividend Roadmap, therefore specifically aims to:

1. Domesticate the Nigerian demographic dividend to reflect the peculiarity of population structure and dynamics in Sokoto State.
2. Develop a healthy population by increasing child survival and improving maternal health.
3. Ensure education is available for all gender and all ages.
4. Create vibrant economic environment for flexible and equal employment opportunities, entrepreneurship development and poverty reduction for all.
5. Improve the governance system in the State by focusing on the quality of institutions through improved accountability, rule of law, transparency, efficiency and participation as well as ensuring adequate security for the people.
6. Provide a performance-based monitoring and evaluation framework to monitor demographic dividend activities in the State.
7. Provide direction for appropriate policies and programmes and ensure funds are well-channelled for necessary demographic activities.

In order to achieve the above, there is need for inter-sectoral linkages which will promote interaction of key stakeholders in achieving the above objectives.

**3.2 Basic Issues to be considered for Harnessing Demographic Dividend**

The agenda setting and issues to be considered necessary for harnessing DD in Sokoto State will involve the following:

1. Integration of the State Development plans with specific focus on population issues paramount to the development of the State. As it relates to all sectors in the State, there is need to also engage relevant stakeholders in integrating demographic dividend into Sokoto State DD Roadmap.
2. Stakeholders’ Engagement: The involvement of key stakeholders in government, private organizations, Non-Governmental Organization (NGOs) and Civil Society Organisations (CSOs) will be necessary to attain the objectives of the roadmap. The buy-in of these stakeholders in the DD programming will promote ownership and ensure the diversion of resources into the programming.
3. Investment in Physical and Human Capital: In addition to the fertility decline which is necessary to create the window of opportunity, Infrastructural development is also germane to harnessing DD. Improvement in healthcare and educational services are important pre-requisite necessary to set DD in motion. The human resources (especially children and youths) should be well-equipped with the necessary resources in terms of provision of quality health and education services.
4. Provision of Decent and Productive Jobs: Government needs to prioritize job creation to engage the teeming young population in the State. In addition to the provision of jobs, it is important to unleash the potentials inherent in the youth and women through diverse economic empowerment and the use of Information and Communication Technology (ICT) in the State.
5. Financing of the Demographic Dividend Agenda: Financial resources are necessary for the attainment of the DD Agenda. Public-private partnership can also be fostered in a bid to provide the financial resource necessary to set DD in motion.
6. Creation of an Enabling Environment for DD Activities to thrive: The macroeconomic environment should be made conducive for government policies and programs aligning with Demographic Dividend activities to effectively thrive. This will encourage investments opportunities in the State
7. Development of an Integrated Monitoring and Evaluation Framework: As changes occur, it is important that a monitoring framework be developed wherein DD activities can be monitored, as well as progress towards achieving each milestone is measured.

**3.3 Thematic Pillars of the Roadmap**

Sokoto State Demographic Dividend Pillars, following from the African Union and Nigerian Demographic Dividend Roadmaps comprises of four (4) thematic pillars:

**Pillar 1: Health and Well-being**

A healthy population contributes to the economy through the maximisation of returns from human capital investment. More importantly, good health and well-being of women and children is imperative as they are strategic in the creation of the demographic dividend. Currently, Sokoto State has the highest number of adolescent girls (aged 15 to 19 years) who are married or in union. Compared to a national average of about 22 percent teenage girls, 54.9 percent of teenage girls in the State are already married or in union (NDHS, 2018). This young age at marriage has also promoted a high proportion of teenage pregnancy, as over 32.1 percent of teenage girls in Sokoto State have begun childbearing or currently pregnant (NDHS, 2018). Adolescent mothers of ages 15 to 19 years are twice more likely to die during childbirth when compared to their older counterparts.

The high teenage marriage and childbearing has given rise to the observable high Total Fertility Rate (TFR) of 7 live births per woman consistent in the past 5 years (NDHS, 2013 and 2018). In spite of this high fertility, only 17.4 percent of pregnant women and girls in the State receive care from a skilled provider. Furthermore, although births can be spaced or limited by the use of contraceptives. The high unmet and low met need for family planning of 13.0 and 2.3 percent respectively in Sokoto State is a point of huge concern. Consequently, the total demand for family planning, which comprises of both unmet need for family planning and the current contraceptive use (any method) remains quite low at 15.3 percent. In all, only 2.3 percent of women in the State use any method of contraceptive.

In terms of child health, only 21.8 percent of children age 12 to 23 months in Sokoto State received all basic vaccinations. The morbidity and mortality of children is quite high as seen in the Infant, Child and Under-five mortality of 102, 106 and 197 deaths per 1000 children. This high mortality of children can also account for the high fertility rate observable in the State as parents would want to replace the loss of a child. Child Survival in Sokoto State is threatened by nutritional deficiencies and illnesses which account for most of the morbidity and mortality in childhood. The necessary fertility decline which is vital for the creation of demographic dividend can only be achieved if improvement occurs in Child Survival. The combination of high mortality and fertility serves as a disadvantage factor towards the creation of DD.

It is therefore very important that the State make strategic efforts geared towards improving access to sexual and reproductive health especially as it pertains to the women, while also making efforts to improve child survival rates in the State. Adequate nutrition, receipt of immunization programs, prevention of infectious diseases and other measures are necessary to ensure the children live longer. Women and girls in the State should be encouraged to access healthcare services. Child and teenage marriage should also be discouraged across the State. Promoting education of the girl child will discourage early marriage and consequently delay childbearing while will lead to fertility decline.

The role of health and well-being in achieving the demographic dividend is germane for Human Capital Development and creation of the demographic dividend. In order to create and harness the demographic dividend, it is critical that Sokoto State make deliberate and tactical investments in health of children and women to improve their health outcomes. There is the need for an enabling environment through well-articulated policies, projects, and programmes to ensure wholesome development of the health and wellbeing of children, young adults and women in order to enhance their quality of life. Therefore, the roadmap identifies the following key investments in the Health and Well-being pillar of Sokoto State:

1. Review, domestication and provision of a conducive policy environment for laws related to Adolescent and Young People especially children and mothers.
2. Promotion of culturally sensitive and religious-tolerant advocacy and stakeholder engagement programmes
3. Increased Utilization of Essential Package of Health Interventions especially universal access to family planning services
4. Foster sustainable investments in the development of Quality Human Resource for Health
5. Ensure adequate financing of health care services
6. Use of innovative and technologically relevant means of providing healthcare
7. Foster sustainable provision of Infrastructural facilities necessary for the provision of quality healthcare services.

**Pillar 2: Inclusive Education**

The education sector plays important role in human capital development of an economy. In Sokoto State, recruiting and retaining quality teachers is a priority, while other intervention efforts include technical and management reforms. This is seen as critical input to produce an educated population and skilled workforce with improved female access to education. However, the menace of out-of-school remain high. For instance, about 65% of primary school-age children in the State are out of school with high incidence of child-hawking, prolonged festivities, and parental lukewarm attitudes. This is also evident in the low enrolment rate where only 49% of children of primary school entry age are enrolled in school.

According to the Sokoto State Annual School Census (ASC) conducted during the 2019-2020 session, total enrolment in public pre-primary and primary schools during the 2019/2020 session stood at 965,535 out of which 44% were girls. In junior secondary schools, total enrolment was 128,110 out of which 39% were girls during the 2019/2020 session. This proportion reduced to 36% at the senior secondary level out of the total enrolment of 86,136. In science and technical school, the proportion was even lower at 19% and 27% for junior and senior classes respectively. This may have implication for the involvement of girls in medical and high-tech professions.

School infrastructure in the State requires major attention especially at the pre-primary and primary levels. The ASC show that the percentage of classrooms in pre-primary and primary schools without a good blackboard during the 2019/2020 session was 34%, while those with insufficient seating stood at 58%. The percentage of pre-primary and primary schools without health facility was 69%. Many schools are also deprived of basic Water, Sanitation and Hygiene (WASH) commodities. For instance, 66% of schools are without water facility and the pupil-toilet ratio is 353. The percentage of classrooms without a good blackboard in secondary and science and technical schools hovered around 29%. Furthermore, 46% of junior secondary schools and 29% of senior secondary schools have insufficient seats. Moreover, the percentage of schools without health facility was 63% for primary, 25% for junior secondary and 8% for senior secondary. Water, Sanitation and Hygiene commodities are also very limited in these schools as pupil-toilet ratio in primary, junior and senior secondary stood at 353, 150 and 139 respectively during the 2019/2020 session.

Sokoto State must also increase its efforts at improving the quality of education. While the State appear to record moderate achievement in terms of the number of qualified teachers employed, other areas of quality require adequate attention. For instance, pupil-qualified teacher ratio (63) is high at primary level but moderate at 31 and 23 in junior and senior secondary levels respectively. Also, student classroom ratio remained around 58 both in junior and senior secondary schools. An improvement in education in terms of access, quality and infrastructures, as well as other critical aspects are important to improve educational outcomes, including literacy rate which stood at 20.1% among young women and 47.1% among young men (MICS Nigeria, 2016-2017). This is key to the development of human capital to build capacity and empower the working age population for economic development. This pillar is therefore aimed at providing equal access to quality education delivery at all levels.

The following investments are hereby suggested to improve education and skill development in Sokoto State.

1. Improving Access to Education at All Levels
2. Improving Quality Education at all levels
3. Strengthening M&E activities by establishing M&E unit across the education MDAs in the State
4. Improving Infrastructural Facilities in schools/centres
5. Improving second chance opportunities for adult and women education, as well as the Almajiri School/IQS System of Education in the State
6. Improving collaboration between teacher training institutions and Education MDAs in the State

**Pillar 3: Sustainable Economic Development**

Sokoto State is one of the States in Nigeria with huge human resource potentials, with increasing population that are largely youthful. According to the Nigerian Population Commission (2020), the youths (ages 15-34 years) make up about 27% the population while the working population (ages 15-64 years) of 48%. While this may suggest large labour force pool that is important for growth, the high unemployment and large number of people that are out of labour force in the State remains a great concern. By the second quarter of 2020, about 22% of the Sokoto State population are out of labour force, with more than 70% of whom are women. Again, over 30% of this population are either unemployed or underemployed. The implication of this development is that only 16% of Sokoto State residents are working to support the total population of the State. This constantly exerts pressure on both individual and State revenue as every adult worker potentially supports more than six people on the average.

The large youth population in the State can be a huge asset which the State can effectively utilized for the purposed of harnessing the associated demographic dividend. Thus, sound policies, programmes and activities must be designed and implemented. The sustainable economic development pillar, therefore, seeks to create vibrant economic environment for flexible and equal employment opportunities, entrepreneurship development and poverty reduction for all.

Agriculture represents the main economic activity in Sokoto State, as the sector provides means of livelihood for over 80 percent of the people. The State is particularly blessed with the Fadama plains of the Sokoto- Rima River which provides a rich alluvial soil that supports the cultivation of a variety of crops as well as livestock grazing. The State produces a considerably large quantities of both food and raw materials that are key inputs for agro-industries. These crops include wheat, cassava, potatoes, groundnut, cotton, cane sugar, tobacco, onion, garlic, millet, guinea corn, maize, rice and beans. The State also has many untapped tourist attraction and cultural heritage sites such as the Sultan of Sokoto Palace, Surame Cultural Landscape, Tomb of Usman Dan Fodio, Waziri Junaidu History and Culture Museum, Sokoto Museum, Usman Danfodiyo University, Sultan Abubakar III International Airport and Goronyo Dam.

Despite the huge human and natural endowments in Sokoto State, economic productivity of the priority sectors remains low. The State ranks among the poorest in the country where as high as 88% of the residents are considered poor. The situation becomes more worrisome as only 1.6% of SMEs in the State offer paid employment. The following investments are therefore recommended for sustained economic development of the State:

1. Development and implementation of Sokoto State Labour, Employment and Tax Policies to promote involvement of women, youths and vulnerable in the effective labour workforce
2. Promote youth entrepreneurship in the State
3. Promote agriculture as a priority sector with high employment potentials
4. Support non-agricultural sectors with high employment potentials such as manufacturing, agro- industries, and tourism
5. Establishment of State Central Data base of Unemployed & Underemployed youths across the State

**Pillar 4: Good Governance**

Good governance involves the pursuance of an inclusive system of government by taking concrete actions aimed at promoting transparency, accountability, participation and adherence to the rule of law. This can be achieved through the effectiveness and efficiency of the institutional bodies including executive councils, legislative councils, judicial councils, religious bodies and traditional rulers, all of which constitute the core decision making bodies in the state. Good governance strives towards embracing equity, access to justice and protecting the lives and properties of the residents of the State. Hence, good governance is central to creating and sustaining an environment which fosters strong and equitable development; hence it is an essential complement to sound socio-economic policies. It is therefore a crucial tool for harnessing demographic dividend because without good governance, demographic dividend in the State can be a mirage.

Sokoto State has recorded a very low or rather no case of female genital mutilation (FGM) despite its high prevalence rate in Nigeria. FGM is very rare in the North West zone of Nigeria, Sokoto State inclusive. However, a major aspect of concern in the State is the high percentage of victims experiencing physical, sexual and emotional violence in the State. Specifically, about 36 percent of women in the State confirmed that they have experienced physical, emotional and sexual violence (NDHS data, 2018). In addition, 359 cases of abused children in the State were reported in 2020, while 167 cases of abused women were reported in 2020 (Sokoto State Ministry of Women Affairs, 2021). In order to eradicate this form of violence, consistent campaigns against all forms of violence should be carried out using the media platforms, community, traditional and religious leaders. The State must ensure that the public complaint units are accessible for victims while offenders are punished and prosecuted without delay.

Another challenge is the insecurity witnessed in some parts of the State, especially with more reported cases of banditry and kidnapping which is becoming more alarming. The local government areas (LGAs) mostly affected are: Isa, Rabah, Goronyo, Sabon-Birni, Tangaza, Dande Shuni, Tureta and Kebbe. These areas are no longer accessible as residents are not feeling safe because of the fear of being attacked by armed bandits and deprived of their lives or properties. Also, cases such as substance abuse, rape, attempted rape, trafficking and sodomy must be properly dealt with. Proper engagement of youths in productive activities would go a long way in eradicating all these criminal issues rather than being threats to the society.

Women participation in governance in the State is still quite low. This could be traced to the gaps in defending and protecting their rights as well as misconception of their social status based on the religious and moral beliefs. Although there are three female commissioners and 72 female councillors, their involvement in politics is less than the 35 percent affirmative action. In addition, there is low youth participation in the State’s decision-making processes (Sokoto State House of Assembly, 2020). Therefore, there is need for an inclusive participation of citizens (especially the youths and women) in order to allow them to positively contribute to the wellbeing and governance of the people and the State. This would also provide platforms for youths and women to influence public decisions and pursue justice at all levels.

Given the foregoing, this pillar seeks to improve the governance system in the State by focusing on the quality of institutions through improved accountability, rule of law, transparency, efficiency and participation as well as ensuring adequate security for the people. The following investment options are considered:

1. Domesticate, review and implement non-discriminatory policies to enhance good governance
2. Eradicate all forms of violence and abuse in the State
3. Sensitize with various stakeholders to buy-in into Demographic Dividend
4. Ensure the affirmative action for women and youth in leadership position is considered
5. Combat all forms of crime and ensuring adequate protection of lives and properties and engage community-based security networks
6. Promote transparency, accountability, rule of law and access to justice

**CHAPTER FOUR**

**Implementation and Monitoring Framework**

**4.1 Implementation Framework**

The execution of the various activities recommended in this Roadmap is expected to follow the procedure suggested by the implementation framework. The successful execution of the various recommendations of the Roadmap and the resulting outcomes may largely depend on the clarity and effectiveness of the implementation, monitoring and evaluation of the process as well as the associated activities. The implementation process must address critical questions of “what” programmes and projects must be undertaken and “who” is responsible for the associated activities. It must also give timelines to the commencement and completion of all individual programmes and projects, while explaining “how” each of these will be undertaken. The process of implementation must effectively utilize all human and physical resources across all MDAs, LGAs, as well as private sector. Implementation procedure must cover all aspects of the execution of every activity for each investment and for each pillar at all levels, using suitable policies, frameworks and funding; investment in capacity building; and engaging adequate partnership.

The implementation plan begins with validation of the Roadmap, after which a Steering Committee is set up. This committee is headed by the Executive Governor of Sokoto State (or represented by the Deputy Governor) as the Chair with the main task of coordinating all related activities as well as performing oversight functions. He will be assisted by the Commissioner of Budget and Economic Planning. The Committee is expected perform the following functions among others:

* Sets appropriate administrative procedures
* Institute clear reporting structures transcending from the highest level of administration to the various MDAs. This ensures responsibility and accountability from all relevant stakeholders.
* Meet biannually to review the implementation status
* Re-strategize where necessary as advised by the technical committee.

It is also important to set up the Implementation Committee who will provide technical support throughout the period of implementation, and provide feedbacks to the Steering Committee. The Commissioner of Budget and Economic Planning provides the leadership role for the Committee, and assisted by the Statistician General of the Sokoto State Bureau of Statistics. All MDAs that are central to the demographic dividend thematic pillars has Desk Officers who are expected to be members of the Committee. These MDAs may include, but not limited to, the following:

* Ministry for Women and Children Affairs
* Ministry of Agriculture
* Ministry of Education
* Ministry of Health
* Ministry of Justice
* Ministry of Information, Home Affairs, and Culture
* Ministry of Youths and Sport Development
* Ministry of Rural Development

The representative of the Health Policy Training and Research Programme (HPTRP) is also a key member of the Committee. Detailed implementation plan is developed by the Implementation Committee containing activities, timeline for delivery and financing strategy. The Committee meets quarterly to document progress of the planned activities with report submitted to the Steering Committee. For effective implementation, the Roadmap is expected to be adequately integrated into the core pillars of Sokoto State Medium-Term Expenditure Framework (MTEF), Medium Term Sector Strategies (MTSS) and annual budget.

**4.2 Monitoring Framework**

Monitoring the implementation of the various projects and programmes associated with each activity recommended in the Roadmap is critical to measuring the progress towards harnessing demographic dividend in Sokoto State. The Coordinating or Steering Committee oversees all operations and activities. A Monitoring and Evaluation (M&E) Committee is set up, headed by the Commissioner of Budget and Economic Planning, and assisted by the Statistician General of the Sokoto State Bureau of Statistics. The Steering Committee determines the membership of the M&E Committee after due consultation. The M&E Committee will develop the indicators to track the implementation progress of the various aspect of recommended activities in the Roadmap. The Committee is expected to set timelines and targets which must be strictly observed with feedbacks provided to the Steering Committee.

The implementation progress of the various activities must be effectively monitored with a work plan schedule that provides the benchmark against which progress is measured. Efforts are expended to ensure that quality output are delivered in time by all stakeholders involved in the implementation. This is especially important to identify technical and human resource constraints as well as financial challenges that may arise in order to inform quality recommendations and lessons learnt. Useful and relevant data must be collected through the execution of the various projects and programmes, through sound and continuous collection process.

Performance evaluation assesses the effectiveness of the implementation of the recommendations of the Roadmap by examining the output each investment and activity against each investment targets. Progress made towards achieving the objectives of each investment and pillar is measured using key measurable indicators identified for each activity. As revealed in Figure 4.1, manageable number of performance and monitoring indicators recommended to track progress recorded for each suggested activity in a way that minimizes Computational error. Annex 1 presents the monitoring and evaluation template. Such indicators must also enhance easy comparison across States and nations.

Figure 4.1: Monitoring and Evaluation Framework for the Roadmap

Source: Authors

A critical aspect of the monitoring and evaluation framework is the capacity to coordinate, monitor and report implementation progress towards harnessing the demographic dividend in Sokoto State. A five-year demographic dividend report is recommended to present the results of the progress assessment using specially designed evaluation index or observatory. The report, which documents progress towards harnessing demographic dividend in Sokoto State, should subsequently be published and publicly available to all stakeholders through the State’s website.

**CHAPTER FIVE**

**Conclusion and Way forward**

The need to reap the demographic dividend in Sokoto State through investments in its human capital is imperative for the State. The examination of Sokoto State demographic structure reveals a large proportion of children and youths, which reveals an opportunity for a large potential of opportunity if well harnessed. The demographic dividend is not automatic, the State, however has the potential to enjoy this huge window of opportunity given that the government embraces policies that will be focused on its children and young people, while also making deliberate efforts towards fertility decline. The Roadmap has identified four thematic pillars necessary to drive this course. These pillars are health and wellbeing, inclusive education, sustainable economic empowerment and good governance. These pillars have also identified specific investments with various activities aligned to achieve the objective of each pillar. Each of the activities also have specific monitoring and performance indicators with timelines set for the attainment of each activity. Various Ministries, Departments and Agencies (MDAs) responsible for the activities of each investment were also stated. Appropriate monitoring and evaluation frameworks have also been put in place to monitor progress towards the objective.

The Sokoto State roadmap will consequently be validated by all stakeholders who will thereafter take ownership for the activities assigned to them for onward implementation of the DD roadmap. The Roadmap has already been integrated into the State Development Plan serving as a guide to spur the State on the path of development. Sequel to the validation of the Roadmap, a comprehensive Demographic Dividend Profile will be conducted for the state. This profile will estimate entry into, exit from and duration of the surplus of the State’s dividend. The amount of the surplus, lifecycle deficit as well as the support ratio of the State will be determined. The final stage will be to conduct the baseline monitoring and implement the observatory strategies.

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**APPENDIX: DRAFT ROADMAP ACTIVITY MATRIX FOR HARNESSING DEMOGRAPHIC DIVIDEND IN SOKOTO STATE**

1. **Pillar Matrix with timelines and responsible bodies**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **S/N** | **Investments** | **Activity** | **Performance Indicators** | **Monitoring Indicators** | **Responsible MDAs** | **Timeline** |
| **Pillar 1: HEALTH AND WELL-BEING:**  **Broad Objective:** To promote equitable access to comprehensive and quality healthcare services. | | | | | | |
| 1 | **POLICY:**  Review, domestication and provision of a conducive policy environment for laws related to Adolescent and Young People especially children and mothers. | Review of health laws and policies on MCH services | Number of obsolete healt. laws reviewed | Proportion of obsolete health laws reviewed among the obsolete health laws | SSMoJ, SSMoH, SSPHCDA, SHMB | Annually |
| Develop operational guidelines for Adolescent Youth Friendly Centres (AYFCs) for the provision of ASRH services | Number of AYFCs using the operational guidelines | Level of adoption of ASRH information and services | SSMoJ, SSMoH, SSPHCDA, SHMB, SSMYD | Annually |
| Domesticate the existing National Adolescent and Youth related Reproductive Health Policies | Number of National AYP policies domesticated | Proportion of existing policies domesticated | SSMoJ, SSMoH, SSPHCDA, SHMB, SSMYD | Annually |
| Domestication of health laws and policies on Maternal and Child Health | Number of reviewed health laws domesticated | Proportion of reviewed health laws domesticated among the obsolete health laws | SSMoJ, SSMoH, SSPHCDA | Annually |
| Promote policies and programmes to improve MCH and ASRH | MCH and ASRH policies and programmes promoted | Level of involvement of women, children and youths in MCH and ASRH programmes promoted | SSMoJ, SSMoH, SSPHCDA, Media | Annually |
| 2 | **ADVOCACY:**  Promotion of culturally sensitive and religious-tolerant advocacy and stakeholder engagement programmes | Conduction of advocacy in collaboration with religious and community leaders | Number of advocacies conducted among religious and community leaders | Amount of collaboration of religious and community leaders | Religious, Community and Traditional Leaders, SSMoJ, Media houses, SSMoH, SSPHCDA | Quarterly |
| Involvement of religious and community leaders in advocacy programs of ASRH | Number of religious and community leaders involved in advocacy | Level of adoption of ASRH among religious and community leaders | Religious, Community and Traditional Leaders, SSMoJ, SSMoH, SSPHCDA | Quarterly |
| Participation of youths and adolescents in family planning and ASRH policy discussion | Number of youths and adolescents participating in family planning and ASRH policy discussion | Level of participation of youths and adolescents in ASRH discussion  Increased demand for FP services | Religious, Community and Traditional Leaders, SSMYDSSMoJ, SSMoH, SSPHCDA | Bimonthly |
| Involvement of women leaders (Sarkin anguwa) in advocacy programmes | Number of advocacies conducted involving women leaders | Level of participation of women in ASRH and FP discussion | Community and Traditional Leaders, SSMoJ, SSMoH, SSPHCDA | Quarterly |
| Advocate for exclusive breastfeeding and support for women in the workplace | Number of babies exclusively breastfed | Proportion of babies exclusive breastfed | SSMoH, SSPHCDA  SSHMB | Quarterly |
| Empower communities and involve men in improving access to sexual and reproductive health services for girls and women | Number of men involved in SRH programs in communities | Level of participation of men in SRH and FP discussion | Community and Traditional Leaders, SSMOI, SSMoH, SSPHCDA | Quarterly |
| Scale up age-appropriate and culturally sensitive programmes for the youths | Number of culturally sensitive programmes conducted | Involvement of youths in specific programmes | Community and Traditional Leaders, SSMOI, SSMoH, SSPHCDA | Quarterly |
| Promotion of behavioural change measures to encourage access of women and girls to sexual and reproductive health information and services through TV/Radio slots and other media platforms | Attitudinal change observable  Number of TV/Radio slots provided | Level of AYP who have access to SRH information and services | Media and Print media, SSMOI, SSMYDSSMoH, SSPHCDA  SSHMB | Daily and Weekly jingles |
| Conduct community engagement for all interventions initiated to promote community participation in Health activities | Number of community intervention health activities conducted | Level of adoption of existing and new interventions | SSMoH, SSPHCDA  SSHMB SSMOI  Media platforms | Quarterly |
| Production of quarterly health sector performance report | Number of health sector performance report produced | Level of awareness of healthcare services | SSMoH, SSPHCDA  SSHMB SSMOI  Media platforms | Quarterly |
| Organize quarterly partners coordination meeting for all partners supporting health in Sokoto | Number of quarterly partners coordination meeting organized | Level of awareness of healthcare services and programs | SSMoH, SSPHCDA  SSHMB SSMOI  Media platforms | Quarterly |
| Dissemination of quarterly health sector performance report | Number of health sector performance report disseminated | Level of awareness of healthcare services and programs | SSMoH, SSPHCDA  SSHMB SSMOI  Media platforms | Quarterly |
| 3 | **HEALTHCARE SERVICE UTILIZATION:**  Increased Utilization of Essential Package of Health Interventions | Undertake targeted integration of Sexual and Reproductive Health (SRH) health programs into PHC activities | Number of SRH programs integrated | Level of involvement of rural dwellers in SRH programs | SSMoH, SSPHCDA  SSHMB  SSMYD | Annually |
| Undertake targeted integration of Maternal and Child Health (MCH) programs | Number of MCH programs integrated | Level of involvement of rural dwellers in MCH programs | SSMoH, SSPHCDA  SSHMB  SMoWA | Annually |
| Establish integrated adolescent and youth friendly health services | Number of youth friendly centres established | Number of youths visiting the YFCs | SSMoH, SSPHCDA  SSHMB, SSMYD | Annually |
| Ensure community access to family planning services | Number of community family planning services available | Increased demand for and utilization of FP services | SSMoH, SSPHCDA, SSHMB, SMoWA | Annually |
| Promote intervention measures targeted at inaccessible rural communities. | Number of inaccessible rural areas now accessed | Proportion of inaccessible areas now accessed | SMoRD, SMoW, SSMoH, SSPHCDA, SSHMB | Annually |
| Involvement of household heads and family heads (Megida) in healthcare sensitization programs especially care of mothers and children | Number of household and family heads involved in the care of children and women | Increased child survival.  Reduced maternal mortality | Community and Household heads, SSMoI, SSMoH, SSPHCDA | Annually |
| Provide media outlets to NGOs and CSOs with ASRH mandates | Number of media outlets with ASRH mandates | Level of healthcare service utilization promoted by CSOs and NGOs | CSOs, NGOs, Media, SSMoI, SSMoH | Annually |
| Increased availability of family planning commodities and services | Number of family planning services provided | Increased met need of FP services | SSMoH, SSPHCDA, SSHMB | Annually |
| Promotion of services for women with Obstetric Fistula | Number of girls with obstetric fistula cases treated | Reduced girls’ mortality | SSMoH, SSPHCDA, SSHMB | Annually |
| 4 | **HUMAN RESOURCE:**  Development of Quality Human Resource for Health | Conduct a Human resource need assessment | Human resource need assessment conduct | 1. Data on human resource need in the State 2. Identification of HRH resource gap( HRH Needs assessment report) | SSMoH, SSPHCDA, SSHMB, SSMoI, SSBS | Annually |
| Recruitment of human resource for health | Number of healthcare workers recruited | Improved physician-patient ratio | SSMoH, SSPHCDA  SSHMB  SMBEP | Annually |
| Training of professional health workers | Number of healthcare professionals trained | Proportion of HRH trained of the total recruited | SSMoH, SSPHCDA  SSHMB | Annually |
| Encourage recruitment of female health care Provider | Number of female health care providers recruited | Proportion of female healthcare providers of the total number recuited | SSMoH,  SMoE,  SSPHCDA  SSHMB | Annually |
| Training of community health volunteers (TBAs and Naturalists) | Number of TBAs and Naturalists trained | Proportion of TBAs and Naturalists trained | NGOs, SSMoH, SSPHCDA  SSHMB | Annually |
| Organize System thinking for health manager at all level | Number of health managers trained | Proportion of health managers trained on system thinking | SSMoH, SSPHCDA, SSHMB, SSBS | Annually |
| Strengthen midwifery services by training more midwives | Number of midwives trained | Proportion of midwives trained | SSMoH, SSPHCDA  SSHMB | Annually |
| Encourage and incentivize healthcare workers in rural areas | Number of healthcare workers in rural areas | Proportion of midwives stationed in rural areas | SSMoRD SSMoH, SPHCDA, SSHMB | Annually |
| Attain WHO targets for healthcare personnel | Attainment of the WHO target of patients per doctor, nurse and midwives | Improved healthcare services | SSMoH, SSPHCDA, SSHMB | Annually |
| Conduct a Human resource need assessment | Human resource need assessment conduct | 1. Data on human resource need in the State 2. Identification of HRH resource gap( HRH Needs assessment report) | SSMoH, SSPHCDA, SSHMB, SSMOI, SSBS | Annually |
| **5** | **HEALTHCARE FINANCING:**  Ensure adequate Financing of health care services | Foster public-private partnership in financing health services | Number of PPP established | Level of activities involving PPP | SSMoH, SSMoF, SMB&EP, SPHCDA, SSHMB | Annually |
| Advocate for budgetary provision for Adolescent, Sexual and Reproductive Health (ASRH) services. | Specific budgetary allocation to ASRH programmes | Number of ASRH activities conducted | SSMoH, SSMOF, SMB&EP, SSPHCDA, SSHMB | Annually |
| Increased budgetary allocation to the health sector | Percentage increase in health budgetary allocation | Increase financial resources in the health sector | SSMoH, SSMOF, SMB&EP, SSPHCDA, SSHMB | Annually |
| Prompt release of funds for healthcare programmes | Month of release of funds | Timely disbursement of funds for activities | SSMoH, SSMOF, SMB&EP, SPHCDA, SSHMB | Annually |
| Speed up the implementation of the State Health Insurance Scheme | Number of residents on board the scheme | Level of uptake of the State Insurance Scheme | SSMoH, SSMOF, SMB&EP, SPHCDA, SSHMB | Annually |
| **5** | **TECHNOLOGY:**  Provision of Technologically relevant means of providing healthcare | Generate state-specific data on adolescent health issues | Extent of Data generated | Data available on ASRH issues | SSMoH, SSMOI, SMB&EP, SSPHCDA, SSHMB | Annually |
| Adopt the use of social media platforms to disseminate information on ASRH | Number of media jingles conducted on ASRH | Subscribers to the social media handles | Social media platforms, SSMoH, SSHMB, SSPHCDA | Annually |
| Operationalize tele-health in the State | Adoption and Spread of tele-health activities | Proportion of e-health users | SSMoH, SSHMB, SSPHCDA | Annually |
| **6** | **INFRASTRUCTURE:**  Development of necessary Infrastructure for the provision of healthcare services. | Conduct infrastructural needs assessment | Infrastructural needs assessment report | Number of infrastructures provided based on the gaps identified | SMoH, SSHMB, SPHCDA | Annually |
| Establishment of integrated adolescent and youth friendly centres in public and private health facilities | Number of adolescent and youth friendly centres established in the wards | Proportion of wards with adolescent and youth friendly centres | Ministry of Education, NAPPS, SMoH, SSPHCDA | Annually |
| Establishment of school clinics in schools especially girls’ only schools | Number of school clinics established | Proportion of girls’ only schools with school clinics | Ministry of Education, NAPPS, SMoH, SSPHCDA | Annually |
| Equipping the school clinics in schools especially girls’ only schools | Number of school clinics fully equipped | Proportion of schools with well-equipped school clinics | Ministry of Education, NAPPS, SMoH, SSPHCDA | Annually |
| Renovation of dilapidated healthcare facilities | Number of healthcare centre renovated | Proportion of healthcare centre renovated | Ministry of works, SMoH, SHMB, SSPHCDA | Annually |
| Equipping of the renovated healthcare facilities | Number of healthcare centre equipped | Proportion of healthcare centre equipped | MoW, MoF, Procurement Unit, MEP&B, SMoH, SSPHCDA | Annually |
| Renovation of cold chain facilities | Number of cold chain centres established | Proportion of cold chain centres in the state | Ministry of works, SMoH, SSPHCDA | Annually |
| Availability of family planning services | Number of family planning services available | Proportion of women who now have access to family planning services | SMoH, SSPHCDA | Annually |
| Resuscitate mobile ambulances and clinics in remote areas | Number of mobile ambulances and clinics | Proportion of mobile ambulances and clinics available in the wards | SMoH, SSPHCDA | Quarterly |
| Mobilize resources for infrastructural development | Amount of resources allocated to infrastructural development | Proportion of resources allocated to infrastructural development | SSMOF, SMoH, SSPHCDA | Annually |
|  | | | | | | |
| **Pillar 2**: **INCLUSIVE EDUCATION**  **Broad Objective:** To provide equal access to quality education delivery at all levels | | | | | | |
| 1. | **EDUCATION ACCESS:**  Improving Access to Education at All Levels | Conduct annual enrolment drive campaign at state, local government and community (including parents) levels to increase enrolment, retention, completion and transition in school. | 1.Number of sensitization campaign conducted  2. Number of LGAs sensitized  3. Number of communities sensitized  4. Number of pupils/students enrolled at all levels | 1. Proportion of LGAs sensitized  2. Proportion of communities sensitized  3. Enrolment rate | Education MDAs, DPs, CSOs. | 2022 |
| Provision of cash transfer for girls and vulnerable children to support their enrolment and retention in schools | 1. Number of girls and vulnerable children provided with cash transfer  2. Number of pupils and students enrolled at different levels | 1. Proportion of pupils/students and vulnerable children provided with cash transfer  2. Enrolment rate  3. Retention rate  4. Transition rate  5. Completion rate | MBSE, SUBEB & DPs | 2024 |
| Award of scholarship to orphans and vulnerable children for their education. | 1. Amount of scholarship offered to orphans and vulnerable children  2. Number of orphans and vulnerable children with scholarship offers | Proportion of orphans and vulnerable children offered scholarship | MBSE & SUBEB | 2024 |
| Provision of sports and recreational facilities in schools/centres to support attendance and retention. | Number of schools with sports and recreational facilities support attendance and retention provided | Proportion of schools with sports and recreational facilities | Education MDAs and DPs | 2025 |
| 2. | **EDUCATION QUALITY:**  Improving Quality Education at all levels | Recruitment of qualified teachers/facilitators to schools/centres. | Number of qualified teachers/facilitators recruited to schools/centres | Proportion of teachers/facilitators that are qualified | Education MDAs | 2024 |
| Training and re-training of teachers and facilitators | Number of teachers/facilitators trained | Proportion of teachers/facilitators trained | Education MDAs | 2024 |
| Provision of adequate learning materials to schools and centres | Number of schools with adequate learning materials | Proportion of schools/centres with adequate learning materials | Education MDAs | 2024 |
| Establishment of guidance and counselling office in schools/centres | 1. Number of schools/centres with guidance and counselling office  2. Number of schools/centres with adequate number of guidance and counsellors  3. Number of guidance and counsellors employed | 1. Proportion of schools/centres with guidance and counselling office  2. Proportion of schools/centres with adequate number of guidance and counsellors | Education MDAs | 2025 |
| Provision of incentive and allowance to teachers posted to hard-to-reach areas | 1. Amount of incentive and allowance provided to teachers posted to hard-to-reach areas  2. Number of teachers posted to hard-to-reach areas provided with incentive and allowance | Proportion of teachers posted to hard-to-reach provided with incentive and allowance | Education MDAs | 2025 |
| Training of teachers, pupils and learners on gender-based violence in schools | Number of teachers and learners trained on gender-based violence in schools | Proportion of teachers and pupils trained on gender-based violence. | Education MDAs & DPs | 2024 |
| Provision of wash facilities in schools/centres | Number of schools/centres provided with wash facilities | Proportion of schools/centres provided with wash facilities | Education MDAs & DPs | 2024 |
| Training and re-training of teachers on ICT | 1. Number of teachers trained on ICT 2. Number of teachers with adequate ICT skills | 1. Proportion of teachers trained on ICT 2. Proportion of teachers with adequate ICT skills | Education MDAs & DPs | 2025 |
| Equip EMIS offices across the state with ICT facilities | Number of LGEA EMIS offices equipped with ICT facilities | Proportion of LGEA EMIS offices equipped with ICT facilities | Education MDAs & DPs | 2025 |
| 3 | **MONITORING EDUCATION SERVICES:**  Strengthening M&E activities by establishing M&E unit across the education MDAs in the State | Provision of Offices for M&E units | 1. Number of offices provided for M&E units 2. Number of M&E offices equipped | 1. Proportion of LGAs with M&E offices 2. Proportion of M&E offices equipped | Education MDAs | 2024 |
| Recruitment of qualified M&E staff | 1. Number of qualified M&E staff recruited. 2. Number of M&E offices with qualified M&E staff | Proportion of M&E offices with qualified M&E staff | Education MDAs | 2024 |
| Review of the State M&E policy to cover the emerging challenges under education | Whether or not the State M&E policy is reviewed | Whether or not the State M&E policy is reviewed | Education MDAs & DPs | 2024 |
| Training and re-training of M&E Staffs | Number of M&E staffs trained and re-trained | Proportion of M&E staffs trained and re-trained | Education MDAs & DPs | 2024 |
| 4 | **EDUCATIONAL FACILITIES:**  Improving Infrastructural Facilities in schools/centres | Establishment of child friendly ECCDE Centres | Number of child friendly ECCDE Centres established | Proportion of LGAs with child friendly ECCDE | MBSE, SUBEB & DPs | 2025 |
| Construction of new classrooms and renovation of existing ones in primary, as well as junior and senior secondary schools | 1. Number of primary schools with new classrooms in each LGA  2. Number of primary schools with renovated classrooms in each LGA  3. Number of junior secondary schools with new classrooms in each LGA  4. Number of junior secondary schools with renovated classrooms in each LGA  5. Number of senior secondary schools with new classrooms in each LGA  6. Number of senior secondary schools with renovated classrooms in each LGA | 1. Proportion of primary schools with new classrooms in each LGA  2. Proportion of primary schools with renovated classrooms in each LGA  3. Proportion of junior secondary schools with new classrooms in each LGA  4. Proportion of junior secondary schools with renovated classrooms in each LGA  5. Proportion of senior secondary schools with new classrooms in each LGA  6. Proportion of senior secondary schools with renovated classrooms in each LGA | MBSE, SUBEB & SDG | 2025 |
| Construction of laboratories in schools and renovation of existing ones | 1. Number of schools with new laboratories in each LGA 2. Number of schools with renovated laboratories in each LGA 3. Number of schools with functioning laboratories in each LGA | 1. Proportion of schools with new laboratories in each LGA 2. Proportion of schools with renovated laboratories in each LGA 3. Proportion of schools with functioning laboratories in each LGA | Education MDAs | 2025 |
| Construction of library and equipping existing ones in schools and communities | 1. Number of libraries established 2. Number of schools with functioning library 3. Number of communities with functioning library | 1. Proportion of schools with functioning library  2. Proportion of communities with functioning library | Education MDAs | 2025 |
| Establishment of ICT centre and materials in schools | 1. Number of new ICT centres built in schools 2. Number of schools with functioning ICT centres 3. Number of schools with well-equipped ICT centres | 1. Proportion of schools with new ICT centres 2. Proportion of schools with functioning ICT centres 3. 3. Proportion of schools with well-equipped ICT centres | Education MDAs & DPs | 2025 |
| 5. | **INFORMAL EDUCATIONAL SERVICES:**  Improving second chance opportunities for adult and women education, as well as the Almajiri School/IQS System of Education in the State | Establishment of women centres for learning across the 23 LGAs in the State. | 1. Number of women centres for learning established in the State  2. Number of women centres for learning established in each LGA  3. Number of women centres for learning with adequate facilities in each LGA  4. Number of women enrolled in the centres | 1. Proportion LGAs with functional women centres for learning  2. Proportion of women centres for learning in each LGA with adequate facilities  3. Enrolment rate in the centres  4. Completion rate in the centres | Education MDAs & MWA | 2024 |
| Establishment of more adult education classes for learning across the 23 LGAs in the state | 1. Number of new adult education classes for learning established in each LGA  2. Number of adults enrolled in the classes | 1. Proportion of LGAs with functional adult education classes for learning  2. Proportion of adult educational classes in each LGA with adequate facilities  3. Enrolment rate in the classes  4. Completion rate in the classes | Education MDAs | 2024 |
| Sensitize women and adult on the available second chance opportunities | 1. Number of women enrolled in the centres  2. Number of women that completed studies in the centres | 1. Enrolment rate in the centres  2. Completion rate in the centres |  | 2024 |
| Provision of qualified teachers/facilitators to women learning centres and adult classes | 1. Number of qualified teachers/facilitators in women learning centres and adult classes in each LGA 2. Number of women learning centres and adult classes with qualified teachers in each LGA 3. Number of Almajiri/IQS Schools with qualified teachers in each LGA | 1. Proportion of women learning centres in each LGA with qualified teachers/facilitators and adult classes in each LGA. 2. Proportion of adult classes with qualified teachers/facilitators in each LGA 3. Proportion of Almajiri/IQS Schools in each LGA with qualified teachers | Education MDAs | 2024 |
| Provision of adequate learning materials and nutritious meal to learners in Almajiri/IQS Schools | 1.Number Almajiri/IQS Schools with adequate learning materials  2.Number of Almajiri/IQS Schools providing adequate and nutritious meal  3. Number of learners being fed  4. Number of learners enrolled | 1.Proportion of Almajiri/IQS Schools with adequate learning materials  2.Proportion of Almajiri/IQS Schools providing adequate and nutritious meal  3. Proportion of learners being fed  4. Enrolment rate  5. Completion rate | Education MDAs, DPs & CSOs | 2024 |
| Provision of hygiene and first aid materials for children Almajiri/IQS Schools | 1.Number Almajiri/IQS Schools with hygiene materials  2.Number of Almajiri/IQS Schools first aid materials | 1.Proportion Almajiri/IQS Schools with hygiene materials  2.Proportion of Almajiri/IQS Schools first aid materials | Education MDAs, | 2024 |
| Provision of Sports and Recreational facilities in all the Almajiri/IQS schools/centres | 1. Number of Almajiri/IQS schools/centres with functional Sports and Recreational facilities  2. Number of learners enrolled | 1. Proportion of Almajiri/IQS schools/centres with functional Sports and Recreational facilities  2. Enrolment rate  3. Completion rate | Education MDAs, & DPs | 2024 |
| 6 | **COLLABORATION AMONG EDUCATIONAL INSTITUTIONS:**  Improving collaboration between teacher training institutions and Education MDAs in the State | Create in-service teacher training unit at State and LGEA level | 1. Number of In-Service Units created across the State  2. Number of LGAs with in-service units for teacher training  3. Number of teachers benefiting from in-service | 1. Proportion of LGAs with in-service units for teacher training  2. Proportion of teachers benefiting from in-service | Education MDAs | 2024 |
| Create a platform for collaboration between the teacher training institutions and Education MDAs on teacher demand and supply. | 1. Number of meetings / engagement conducted  2. Number of teachers benefiting from in-service | 1. Number of meetings /engagement conducted  2. Proportion of teachers benefiting from in-service | Education MDAs, & DPs | 2024 |
|  | | | | | | |
| **Pillar 3: SUSTAINABLE ECONOMIC DEVELOPMENT**  **Broad Objective:** To create vibrant economic environment for flexible and equal employment opportunities, entrepreneurship development and poverty reduction for all. | | | | | | |
| **S/N** | **Investments** | **Activity** | **Performance Indicator** | **Monitoring Indicator** | **Responsible MDAs** | **Timeline** |
| 1 | **POLICY:**  Development and implementation of Sokoto State Labour, Employment and Tax Policies to promote involvement of women, youths and vulnerable in the effective labour workforce | Sensitize Executive Council and House of Assembly members on the need for Labour, Employment and Tax Policies for the State | 1. Sensitize Executive Council and House of Assembly members organised  2. Number of Executive council and House of Assembly members sensitized. | % of Executive council and House of Assembly members sensitized. | MOBEP/HOS/MOF | 2022 |
| Legislation of a bill to eliminate discrimination in all forms against women and persons with special abilities in labour and employment opportunities | One (1) bill passed and ascented to in addressing the elimination of all forms of discrimination against women and persons with special abilities | One (1) bill passed and ascented to in addressing the elimination of all forms of discrimination against women and persons with special abilities | MOBEP/HOS/MOF | 2023 |
| Develop and implement labour and employment law that is more favorable to persons with physical diasbilities and to be gender friendly. | Development of Labour and law that is more favorable to persons with physical diasbilities and gender friendly | Development of Labour and law that is more favourable to persons with physical disabilities and gender friendly | MOBEP/HOS/MOF | 2023 |
| Establish functional reporting mechanisms for victims of labour and employment discrimination | 1. Number of centres/mechanisms created  2. Number of cases reported  3. Number of cases successfully resolved | 1. Proportion of centres created 2. Proportion of reported cases 3. Proportion of reported cases successfully resolved | MOBEP/HOS/MOF | 2023 |
| 2 | **YOUTH ENTREPRENEURSHIP**:  Promote youth entrepreneurship in the State | Renovation of the existing Skill Acquisition Centres in each LGA | Number of skill acquisitions Centres renovated | Proportion of Skill Acquisition Centres renovated | MOWCA /MSW | 2025 |
| Procurement of basic equipment for the Skill Acquisition Centres across the State | 1. Number of Skill Acquisition Centres with furnished and provided basic equipment  2. Number of youths enrolled in the centres  3. Number of enrolees who completed training  4. Number of LGAs with well-equipped and functional skill acquisition centres | 1. Proportion of equipment provided to each center  2. Proportion of unemployed youths enrolled in the centres in each LGA  3. Proportion of enrolees who completed training | MOWCA /MSW | 2025 |
| Equip and patronize trained from skill acquisition centres | 1. Number of trained youths that are adequately equipped  2. Number of trained youths patronized  3. Number of patronages of youth business after training  4. Quantity of items purchased from youth businesses after training | 1. Proportion of trained youths that are adequately equipped  2. Proportion of trained youths patronized  3. Proportion of government purchased sourced from youth-owned businesses | MOWCA /MSW | 2025 |
| Assess trainable youths on use of technology and ICT facilities for entrepreneurship | Number of trainable youths assessed on use of technology and ICT facilities for entrepreneurship. | Proportion of trainable youths assessed. | MOYD/ICT DEPT | 2024 |
| Organize intensive training for youths on use of technology and ICT facilities for entrepreneurship | 1. Number of youths trained on use of technology and ICT facilities for entrepreneurship.  2. Number of female youths trained on use of technology and ICT facilities for entrepreneurship.  3. Number of male youths trained on use of technology and ICT facilities for entrepreneurship.  4. Number of local governments covered for the training. | 1. Proportion of youths trained on use of technology and ICT facilities for entrepreneurship  2. Proportion of female youths trained on use of technology and ICT facilities for entrepreneurship  3. Proportion of male youths trained on use of technology and ICT facilities for entrepreneurship  4. Proportion of local governments covered for the training. | MOYD/ICT DEPT | 2023 |
| Procurement and distribution of basic tools and ICT facilities, gadgets and equipment to the trained youths. | 1. Number of trained youths provided with basic ICT tools, gadgets and facilities  2. Number of trained youths provided with adequate ICT tools, gadgets and facilities | 1. Proportion of trained youths provided with basic ICT tools, gadgets and facilities  2. Proportion of trained youths provided with adequate ICT tools, gadgets and facilities | MOYD/ICT DEPT | 2024 |
| Establishment of innovation and mentorship support centre for youth entrepreneurs | 1. Number of youth entrepreneurs on the innovation and mentoring programme  2. Number of youth entrepreneurs successfully mentored.  3. Numbers of mentors engaged | 1. Proportion of youth entrepreneurs on the mentoring programme  2. Proportion of youth entrepreneurs successfully mentored.  3. Numbers of mentors engaged | MOCI&T/ MOYD | 2024 |
| Provision of soft credit and low interest/free interest loan to youth entrepreneurs | 1. Number of youth entrepreneurs provided with soft credit and low/free interest loans  2. Amount of soft credit and low/free interest loans provided to youth entrepreneurs | 1. Proportion of youth entrepreneurs provided with soft credit and low/free interest loans  2. Proportion of soft credit and low/free interest loans disbursed to youth entrepreneurs | MOCI&T/ MOYD | 2024 |
| 3. | **AGRICULTURAL SECTOR:**  Promote agriculture as a priority sector with high employment potentials | Recruitment of agricultural extension workers per ward | 1. Number of agricultural extension workers recruited  2. Number of wards with new agricultural extension workers | 1. Number of agricultural extension workers recruited  2. Number of wards with new agricultural extension workers | MOA | 2024 |
| Train agricultural extension workers on modern farming methods, livestock management, processing and preservation methods and value chain | 1. Number of trainings conducted for agricultural extension workers.  2. Number of agricultural extension workers trained | Proportion of agricultural extension workers trained | MOA | 2023 |
| Procurements and distribution of modern farm implements and machinery to all political wards through | 1. Number of farm implements and machinery procured  2. Number of farm implements and machinery distributed  3. Number of political wards covered | 1. Proportion of targeted number of implements and machinery procured  2. Proportion of procured implements and machinery distributed  3. Proportion of political wards covered | MOA | 2025 |
| Drilling of 10 tube wells per ward for irrigation purpose. | 1. Number of tube wells drilled in each ward  2. Number of wards with adequate number of tube wells | 1. Proportion of targeted wells actually drilled  2. Proportion of wards with adequate number of tube wells | MOA | 2024 |
| Resuscitation of existing dams for irrigation purpose across the State | Number of existing dams resuscitated for irrigation purpose | Proportion of existing dams resuscitated for irrigation purpose | MOA | 2024 |
| Procurement and distribution of assorted fertilizer to farmers in all wards | 1. Number of assorted fertilizers procured  2. Number of assorted fertilizers distributed to farmers across the State  3. Number of assorted fertilizers distributed to farmers in each ward  4. Number of wards with assorted fertilizer distributed to farmers | 1. Proportion of targeted assorted fertilizers actually procured  2. Proportion of procured assorted fertilizers distributed to farmers across the State  3. Proportion of assorted fertilizers distributed to farmers in each ward  4. Proportion of wards with assorted fertilizer distributed to farmers | MOA | 2023 |
| Procurement and distribution of improved seeds to farmers in all political wards. | 1. Number of improved seeds procured  2. Number of improved seeds distributed to farmers across the State  3. Number of improved seeds distributed to farmers in each ward  4. Number of wards with improved seeds distributed to farmers | 1. Proportion of improved seeds procured  2. Proportion of improved seeds distributed to farmers across the State  3. Proportion of improved seeds distributed to farmers in each ward  4. Proportion of wards with improved seeds distributed to farmers | MOA | 2023 |
| Procurement and distribution of insecticides and pesticides to farmers in all political wards. | 1. Number of insecticides and pesticides procured  2. Number of insecticides and pesticides distributed across the State  3. Number of insecticides and pesticides distributed at ward level 4. Number of wards with insecticides and pesticides distributed | 1. Proportion of targeted insecticides and pesticides procured  2. Proportion of insecticides and pesticides distributed across the State  3. Proportion of insecticides and pesticides distributed at ward level 4. Proportion of wards with insecticides and pesticides distributed | MOA | 2023 |
| Rehabilitate existing rural-urban roads and construct new ones for easy flow of farm produce | Kilometres (KM) of rural-urban roads rehabilitated or constructed | 1. Proportion of existing rural/urban roads rehabilitated  2. Proportion of LGAs with new rural-urban roads | MOW | 2026 |
| 4 | **NON-AGRICULTURAL SECTORS:**  Support non-agricultural sectors with high employment potentials such as manufacturing, agro- industries, and tourism | Provision of concessional loans to manufacturers, local industries, small and medium enterprises (SMEs) across the state. | 1. Amount of concessional loans provided to manufacturers, local industries, small and medium enterprises (SMEs), across the state  2. Number of manufacturers, local industries, small and medium enterprises (SMEs) that accessed concessional loans by LGAs. | 1. Proportion of concessional loans accessed  2. Proportion of manufacturers, local industries, small and medium enterprises (SMEs) that accessed concessional loans by LGAs. | MOCI&T | 2024 |
| Training and retraining of youths and women on processing of various agricultural raw materials in the State | 1. Number of youths and women trained on processing various agricultural raw materials | Proportion of youths and women trained on processing various agricultural raw materials | MOA, OSAEC, MWSD, MYSD | 2023 |
| Establish incubation facilities for trained youths and women in agro-allied industries | 1. Number of incubation facilities established on agro-allied activities 2. Number of youth and women utilizing the incubation centres | Proportion of youth and women utilizing the incubation centres | MOA, OSAEC, MWSD | 2023 |
| Set-up internship programmes for youth and women during training on various aspects of agro-allied business activities such as processing, packaging and marketing. | Number of youth and women offered internship placement during training | Proportion of youth and women offered internship placement during training | MOA, OSAEC, MWSD, MCIC | 2023 |
| Engage public private partnerships to upgrade and repackage tourist attraction sites to boost youth employment | Number of tourist sites upgraded | Proportion of tourist sites upgraded | MCT, MOI | 2023 |
| Undertake aggressive sensitization of citizens and improve information dissemination about tourism in the State | Number of advocacy meetings and sensitization programmes organized about tourism | Growth in the number of advocacy visits and sensitization programmes organized about tourism | MCT, MOI | 2022 |
| Train youth and key stakeholders (hospitality providers, drivers, schools, agencies, NGOs, etc) to deliver quality services to tourists. | Number of key stakeholders and youth trained to deliver quality services to tourists. | Proportion of key stakeholders and youth trained to deliver quality services to tourists. | MCT, MOI | 2022 |
| Intensify advertisement of the tourist sites to local and international audience using bill boards, fliers, radio and TV jingles and other media outlets including social media and customized Apps | 1. Number of advertising platforms (including social media) utilized to promote tourism  2. Number of times (frequency) adverts are aired per week/month  3. Traffic on social media platforms and Apps dedicated for tourism | 1. Growth in the number of times (frequency) adverts that are aired per week/month  2. Growth in traffic on social media platforms and Apps dedicated for tourism | MCT, MIO | 2022 |
| 5 | **STATE CENTRAL DATA BASE:**  Establishment of State Central Data base of Unemployed & Underemployed youths across the State | Create a register of unemployed youth in all Local Government Areas in the State | 1. Number of registers/centres created across the State  2. Number of Local Government Areas with register of unemployment  3. Number of unemployed youths registered | 1. Proportion of Local Government Areas with register of unemployment  2. Proportion of unemployed youths registered | MOYD/MSW | 2022 |
| Conduct regular Census or survey of unemployed and underemployed youths across the State | 1. Census/Survey conducted regularly  2. Number of unemployed and underemployed youths | Proportion of youths that are unemployed/underemployed | MOYD | 2024 |
| Procurement & Installation of ICT equipment for data stroge, analysis & retrieval | ICT equipment Procured & installed | No. of ICT Equipment procured & installed for database | MOYD/ICTDept | 2025 |
|  |  |  |  |  |  |  |
| **Pillar 4: Good Governance**  **Broad Objective:** To improve the governance system in the State by focusing on the quality of institutions through improved accountability, rule of law, transparency, efficiency and participation as well as ensuring adequate security for the people. | | | | | | |
| **S/N** | **Investments** | **Activity** | **Performance Indicator** | **Monitoring Indicator** | **Responsible MDAs** | **Timeline** |
| 1. | **NON-DISCRIMINATORY POLICY:**  Domesticate, review and implement non-discriminatory policies to enhance good governance | Domesticate and implement Freedom of Information (FOC) law | Domesticated FOC Act | Number. of FOI-based requests successfully released | MOJ; MOI; SOHA;  Ministry of Finance  MOWCA; MYDC | 2023 |
| Amendment of Consolidation law 2019 Policy to make it mandatory to revise the Sokoto Internally Generated Revenue | Implementation of Consolidation Act | Request released based on the consolidation Act | MOJ; MOI; SOHA;  Ministry of Finance, MOWCA; MYDC | 2023 |
| Domestication of National Action Plan on Peace and Security (NAPPS) | Domesticated NAPSS Act | Number. of NAPPS requested handled | MOJ; MOI; SOHA; Ministry of Finance, MOWCA; MYDC | 2023 |
| Establish the Sokoto State Marshal Law | Numbers of laws implemented | Proportion of laws reviewed and implemented | MOJ; MOI; SOHA; Ministry of Finance, MOWCA; MYDC | 2023 |
| Update Zakat and Wakaf Law 2016 | Reviewed Zakat and Wakaf law | Number. of Zakat and Wakaf based request handled | MOJ; MOI; SOHA; Ministry of Finance, MOWCA; MYDC | 2023 |
| Implementation of Prohibition and discrimination against people with special needs Act 2019 | Existence of laws reviewed and domesticated | Proportion of laws reviewed and implemented | MOJ; MOI; SOHA; Ministry of Finance; MOWCA; MYDC | 2023 |
| 2. | **VIOLENCE AND ABUSE:**  Eradicate all forms of violence and abuse in the State | Implementation of the Violence Against Persons’ Prosecution (VAPPs) Law and Child Right Act | Domesticated VAPPs Act  Domesticated Child Right Act | 1. Number of VAPPs Act handled 2. Number of Child Right Act cases being handled | MOJ;SOHA; MOWCA; MOI; MSW; HOS; MYDC; NGOs | 2022 |
| Establishment of Sex Offender registers in the State | 1. Numbers of sex offender registers established | 1. Number of sex offender cases reported 2. Number of sex offender cases rescued | MOJ;SOHA; MOWCA; MOI; MSW; HOS; MYDC; NGOs | 2022 |
| Creation of more complaint units that is accessible to victims | 1. Number of complaint unit created | 1. Number of effective complaint units 2. Number of cases handled in each complaint unit | MOJ;SOHA; MOWCA; MOI; MSW; HOS; MYDC; NGOs | 2022 |
| Campaigns against all forms of violence using the media platforms, community, traditional and religious leaders | 1. Number of campaigns held | Proportion of sensitization campaign held | MOJ;SOHA; MOWCA; MOI; MSW; HOS; MYDC; NGOs | 2022 |
| 3. | **ADVOCACY:**  Sensitize with various stakeholders to buy-in into Demographic Dividend | Conduct advocacy visits to relevant MDAs, LGAs, NGOs, CBOs and other Stakeholders to have buy-in into demographic dividend | Number of advocacy visits held | Percentage of advocacy visits held | MOI;MOBEP; MYDC;  NGOs | 2022 |
| Creating awareness to religious. traditional, and community leaders on demographic dividend | Number of meeting held with traditional and community leaders | Proportion of meeting held with traditional and community leaders | MOI;MOBEP; MYDC;  NGOs | 2022 |
| Production and airing of jingles and dramas on media/ social media platforms in creating awareness to general public to harness demographic dividend and support the efforts of the state | Number of jingles, dramas and advertisement on media held | Proportion of jingles, dramas and advertisement on media held | MOI;MOBEP; MYDC;  NGOs | 2022 |
| 4. | **YOUTH AND WOMEN PARTICIPATION:**  Ensure the affirmative action for women and youth in leadership position is considered | Implementation of 35% affirmative action of women participation in politics | Number of women in politics | Proportion of women participation in governance | SOHA; EXCO; MOJ | 2023 |
| Implementation of 35% affirmative action of youth participation in politics | Number of youths in politics | Proportion of youths participation in governance | SOHA; EXCO; MOJ | 2023 |
| 5. | **SOCIAL PROTECTION:**  Combat all forms of crime and ensure adequate protection of lives and properties and engage community-based security networks | Recruitment and training of more security personnel | Number of security personnel recruited  Number of security personnel trained | Proportion of security personnel recruited  Proportion of security personnel trained | MSA and Office of HOS; MOJ; Law Reform Commission; SOHA; MOBEP; MOWCA and MYDC | 2023 |
| Provide adequate equipment for effective and efficient security services | Number of new equipment for security personnel | Proportion of equipment per security personnel | MSA and Office of HOS; MOJ; Law Reform Commission; SOHA; MOBEP; MOWCA and MYDC | 2023 |
| Members of the administration of criminal justice committee to be appointed and implemented with the responsibility to ensure that criminal matters are speedily dealt with. | Members of the committee appointed and implemented  Number of the committee members set up | Number of criminal cases handled | MSA and Office of HOS; MOJ; Law Reform Commission; SOHA; MOBEP; MOWCA and MYDC | 2023 |
| Synergize with community-based security networks | Number of community-based security networks | 1. Number of crimes averted by community security networks 2. Proportion of cases resolved / transferred from community-based networks | MSA and Office of HOS; MOJ; Law Reform Commission; SOHA; MOBEP; MOWCA and MYDC | 2023 |
| Enactment of conflict resolution mechanism policy in the State | Number of policies on conflict resolution enacted | Proportion of policies on conflict resolution enacted | MSA and Office of HOS; MOJ; Law Reform Commission; SOHA; MOBEP; MOWCA and MYDC | 2023 |
| 6. | **RULE OF LAW:**  Promote transparency, accountability, rule of law and access to justice | Establishment of anti-corruption and transparency units in all the MDAs to ensure checks and balances | Number of anti-corruption and transparency units in all the MDAs established | Number of anti-corruption and transparency units that are effective | MOJ; SOHA and Executives; MOBEP | 2024 |

*This roadmap was developed (after its consultative training by the Sokoto State Team) by the research team from the Health Policy Training and Research Programme comprising Olanrewaju Olaniyan, Akanni Lawanson, Noah Olasehinde, Oyeteju Odufuwa, Olabanji Awodumi, and Temitope Olalude*