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THE CAMPAIGN IMPLEMENTATION COMMITTEE MEMBERS

IMPLEMENTATION COMMITTEE OF THE "ARM OUR YOUTHS (ArOY) HEALTH CAMPAIGN"

'N	Name	Background	Role in ArOY Committee
	SPECIAL	MEMBERS OF THE ARM OUR YOUTHS HEA	ALTH CAMPAIGN
L.	Prof. Kate OMENUGHA	Commissioner for Basic Education, Anambra State, Nigeria	Official Sponsor (Logistics)
2.	Lady Joy ULASI	Immediate Past State Chairman, PPSSC, Awka, Anambra State, Nigeria	Official ChampionCommittee Chairman
	Dr Chioma EZENYIMULU	Executive Secretary, Primary Health Care Development Agency, Anambra State, Nigeria	Official Champion
		ST PRIMARY SCHOOLS SERVICE COMMISS	ION (PPSSC), ANAMBRA STATE
ł	Josephine ONUORAH	Secretary, PPSSC State Headquarters	Member
;	Sabina NDIGWE	PPSSC State Headquarters, Awka	Overseer/Desk Officer
j	Eucharia ILLIKAH	PPSSC State Headquarters, Awka	Member
/	Stella EZEKANNAGHA	PPSSC, Aguata Zone	Member
}	Bridget BIELU	PPSSC, Awka Zone	Member
2	Nonyelum Odenigbo	PPSSC, Nnewi Zone	Member
0	Afoma AGBAPUONWU	PPSSC, Ogidi Zone	Member
1 2	Florence MBAKWE	PPSSC, Onitsha Zone	Member Member
	Maureen OKAFOR	PPSSC, Otuocha Zone	
3 4	Ego OKPOKO Victoria UNEGBU	PPSSC, Otuocha Zone PPSSC, Otuocha Zone (ZDE)	Member Member
7		ENTATIVES, ANAMBRA STATE GOVERNME	
5	Roseline MBANEFO	Ministry of Health (Planning Officer and Focal person, Health Care Financing)	Member
6	Vivian NZEWI	Ministry of Basic Education (Desk Officer for Health)	Member
_		SENTATIVES OF THE RELIGIOUS GROUPS	
7	Cannon Henry NDUKA	Anglican Faith	Member
8	Fr. Thaddeus UGWUOKE	Catholic Faith	Member
9 D	Rev. Sam Chukwu EZE Alhaji Yusuf Haruna	Pentecostal Faith Islamic Faith	Member Member
1	Parents in the Committee	Parents-Teachers' Association	Member
Ĩ	Parents in the committee	TECHNICAL MEMBER	wember
2	Dr Emmanuel AZUIKE	Deputy CMAC, Chukwuemeka Odumegwu Ojukwu University, Awka, Nigeria	Consultant Public Health Physician
	••-	REPRESENTATIVES OF THE OCI FOUNDA	
3	Barr Onyechi ONONYE	Legal Adviser	Member
4	Imelda EMEKA	Domestic Liaison Officer	Deputy Chairman
5	Ifeoma IFEDIORA	Administrative Officer	Member
6	Njide EZEONYEJIAKU	Media Consultant	Member
7	Peter Okolie A/Prof Chris IFEDIORA	IT Officer President	Committee Liaison Officer Convener
8			

BY THE OCI FOUNDATION FOR ANAMBRA STATE OF NIGERIA (July 2019)

... We rise, by lifting others!!!

WELCOME LETTER

Dear participants, fellow Ndi Anambra, guests, and friends of the OCI Foundation,

Welcome to the 3-day flag-off and workshop of the long-awaited **Arm Our Youths (ArOY) Health Campaign.** This is a program that, in our humble but strong view, will equip our young women and men with the know-hows on how to curtail the risks of breast and cervical cancers in our communities.

Unlike the situations in most advanced economies of the world, ours in Nigeria and most of the other countries of the developing world is a tricky situation. We record avoidable deaths because, for various reasons, our healthcare systems are not yet well positioned to provide the universal and affordable healthcare that our people desire, need and deserve. To minimize these deaths, we can either accept the status quo, or do the much we can to protect our lives, and those of our dear ones. We have chosen the latter option. And this 3-day gathering is a clear testament to this.

As we all know, starting from September the 10th 2019, Anambra State will take the lead in the implementation of a wide-reaching, sustainable and cost-effective anti-breast and anti-cervical cancer program that will ultimately benefit all men and women across the length and breadth of Nigeria. In evaluating the hitherto annual health interventions of the OCI Foundation, we were stunned to realize that, despite their positive attitudes to breast and cervical cancer preventive techniques, our young women have no effective and sustainable ways of learning the necessary and life-saving preventive measures.

The ArOY Campaign provides a solution to this problem. The advocated program, which is to include the anticancer teachings into the regular curriculum across all senior secondary schools in Nigeria, is endorsed by Harvard Medical School, USA, arguably one of the best medical schools in the world. The campaign is also backed by evidence from empirical research, with supporting publications available in peer-reviewed journals of international reach and reputation.

The current workshop is designed to prepare the teachers from all senior secondary schools in Anambra State, on ways to best teach, assess, and evaluate their students. This aspect of the Campaign is vital to the overall program, as we have to ensure that what we do will be of high standard, and will be sustained over the years to come without compromising this standard.

Ladies and gentlemen, by being a participant in this workshop, you are part of history. We need to remember this, and congratulate ourselves for it, because, to the best of our knowledge, this is the first time this is happening anywhere in the world.

Let us all imagine a world where virtually every Nigerian man or woman will know all about the ways to reduce their risks of breast and cervical cancers. A world where everyone knows what the early symptoms of these cancers are, and a world where we all know what to do once these suspicious symptoms are observed.

This is the world the ArOY Campaign is creating. And this is the world you all have come together to create, as pioneers of this project. So please, let us make the best of this history. Let us make the best out of this 3-day workshop. Let us all learn as much as we possibly can, so that we can train our families, our colleagues, and our friends. We enjoin all participants to actively engage in this workshop. Please feel free to ask questions, and to make suggestions where you deem it fit to. We, at the OCI Foundation, do not know everything, and with your inputs, we will deliver the best.

We thank you all once again for finding time to attend this event. We wish you all a happy workshop, and the networking that comes with it. God bless you all.

Assoc. Prof. Chris Ifediora

MBBS, MPH, FRACGP, HMS-SEAL, FIMC, CMC, FANZAHPE

Founder and President, OCI Foundation.

DAY ONE (TUESDAY, SEPTEMBER 10TH, 2019)

Flag-off Ceremony

NB: This is the page that I am hoping will be photocopied and distributed to non-VIPs on Day One.

- 1. Prayers
- 2. Introduction of members of the high table
- 3. Breaking of kolanuts
- 4. Anthems:
 - a. National
 - b. State
 - c. ArOY Anthem
- 5. Chairman's opening remarks
- 6. Address by OCI President (Poem by Nebechi before the speech)
- 7. Introduction of ArOY Team
 - a. Sponsor
 - b. Champions
 - c. ArOY Implementation Committee members
 - d. Workshop Committee
 - e. Video production crew: Nollywood stars.
 - f. OCI Staff
 - g. Cyfed Scholars
- 8. Presentation of certificates to Sponsor (Prof Omenugha), Champions (Lady Ulasi and Dr Ezenyimulu), Ambassador (Mrs Ebelle Okaro), Partners (UNIZIK and Innoson CEO/IVM)
- 9. Unveiling of:
 - a. UNIZIK as official partner
 - b. Innoson Group as official partner
 - c. Anambra Broadcasting Service (ABS) as a partner
 - d. Nollywood Ambassador
 - e. Stakeholders: PPSSC plus Ministries of Basic Education, Health and Women Affairs
- 10. Handover of the ArOY textbooks to the 6 different ZDEs (Total of 3,000)
- 11. The CerviBreast Mobile App: Explanation, Demonstration and Introduction (Dance by Nebechi and
 - team before or after this part)
- 12. Speeches:
 - a. Cyfed Scholar: Victor Oforka (COOU)
 - b. Champions: Lady Joy Ulasi and Dr Chioma Ezenyimulu
 - c. Nollywood: Ebelle Okaro Onyiuke and Team
 - d. Chairman, Innoson Group, Nigeria: Chief Innocent Chukwuma
 - e. PPSSC Chairman
 - f. WHO Rep
 - g. ABS MD/CEO: Chief Uche Nworah
 - h. UNIZIK VC: Prof Charles Esimone
 - i. Commissioners for Basic Education (ArOY Sponsor), Health and Women Affairs
 - j. His Excellency, the Executive Governor of Anambra State, Nigeria
- 13. Refreshment
- 14. Dance/Entertainment: Poem and Dance by Ms Nebechi (UNIZIK)

DAYS TWO AND THREE (September 11th and 12th, 2019)

Workshop activities

Venue:

UNIZIK Main auditorium, Awka, Anambra State, Nigeria

Time:

Starts 10am to 3.30pm daily.

Participants:

All Civic Education and other selected teachers from all 261 senior secondary schools in Anambra State, under the jurisdiction of the Post Primary Secondary Schools Commission (PPSSC)

- Day One (Group 1): Wednesday September 11th Teachers from PPSSC zones in Aguata (15) + Awka (64) + Nnewi (30) zones = 109 Teachers
- Day Two (Group 2): Thursday September 12th Teachers from PPSSC zones in Ogidi (36) + Onitsha (43) + Otuocha (23) zones 23 = 102 Teachers;

PROGRAM

- a) Introduction of Facts and Rationale behind ArOY (10am to 10.30am): By A/Prof Chris Ifediora
- b) Session 1 (2 hours): By Dr Emmanuel Azuike
 - i. Cervical Cancer: 10.30am to 11am
 - ii. Breast Cancer: 11am to 11.30am
 - iii. First Break out session (in groups): 11.40am to 12noon
 - iv. Discussion: post break-out: 12.10pm to 12.30pm
- c) Break/Refreshments: 12.30pm to 1.30pm

d) Session 2 (1.5 hours): By A/Prof Chris Ifediora

- i. How to choose exam questions for the mid-term tests: 1.30pm to 1.20pm
- ii. Assessments and Scoring: 1.20pm to 1.30pm
- iii. Submitting results to the OCI Foundation through the Overseer : 1.30pm to 1.40pm
- iv. Feedbacks: Monitoring/Evaluations (Use OCI Foundation Website or Email): 1.40pm to 2pm
- v. Second Break-out session: 2.10pm to 2.30pm
- vi. Discussion: post break-out: 2.40pm to 3pm
- e) Closing (30 minutes): By Dr Emmanuel Azuike
 - i. Questions/ Feedback form completion: 3.10pm to 3.30pm

END OF WORKSHOP

PICTURES OF ArOY CAMPAIGN IMPLEMENTATION COMMITTEE









LIST OF THE ArOY FLAG-OFF AND 3-DAY WORKSHOP PLANNERS

- 1. Mrs Imelda Emeka (OCI Foundation): Chairman
- 2. Mrs Sabina Ndigwe (PPSSC): Secretary
- 3. Dr Williams Obiozor (UNIZIK): Member
- 4. Mr. Peter Okolie (OCI Foundation): Member
- 5. Mrs Njide Ezeonyejiaku (OCI Foundation): Member
- 6. Mr Casmir Mabia (ANSPHCDA)
- 7. Mrs Eucharia Illikah (PPSSC): Member
- 8. Mrs Ngozi Maureen Okafor: PPSSC): Member
- 9. Dr Emmanuel Azuike (COOU)
- 10. Assoc. Prof. Chris Ifediora (OCI Foundation): Member

THE ARM OUR YOUTHS CAMPAIGN ANTHEM

I have arisen to arm with knowledge Not weapons to waste, mishandle my womanhood I am not just a Child, a Youth I am the Future's Mother Even the Future's grandma The first host of all humans on Earth...

> Arm us Young... Arm us All... Arm us Now...

I'll often do BSE To note any symptoms That could (en) danger my life, my motherhood I will avoid Habits, practices that may risk My fruitfulness, my happiness...

> Arm us Young... Arm us All... Arm us Now...

Breast and Cervical Cancers Have tumbledown millions of women in Nigeria I must be healthy to raise the generations Through safe birth, safe milk and safe self...

> Arm us Young... Arm us All... Arm us Now...

Today I stand with OCI Foundation Now I go with ArOY To practice, to advocate, to campaign And prevent, reduce, control breast and cervical cancers...

> To Arm us Young... To Arm us All... To Arm us Now...

Courtesy:

Mr Samuel Agwa, Head of Advocacy Team,

Arm Our Youths Health Campaign

ABOUT THE ARM OUR YOUTHS HEALTH CAMPAIGN

The Arm Our Youths (ArOY) Campaign is an evidence-based, Harvard-endorsed anti-breast and anti-cervical cancer health promotion initiative of the OCI Foundation, which is being introduced across all senior secondary schools in Nigeria from 2019. This follows the Foundation's two years of annual health symposium on breast and cervical cancer preventive techniques in Anambra State, Nigeria. The initiative, which will replace the annual health symposium, became necessary due to the compelling need to have a campaign that is all-encompassing in a sustainable and affordable way.

The ideas, plans and approaches of this campaign are primarily the brain-child of the OCI Foundation, and have been developed with some oversight from the Harvard Medical School, Boston, United States of America.

The ArOY Campaign aims to arm our women when they are YOUNG (in their mid to late teens), arm then NOW (with the necessary inclusion into the curriculum done as soon as possible), and arm the ALL (attempts will be made to reach all young women across Nigeria).

DETAILED BACKGROUND AND RATIONALE FOR THE CAMPAIGN

The need to set up the **OCI Foundation**, and thereafter, intervene against breast and cervical cancers, was inspired by the Founder's awareness of the poor health outcomes in Nigeria, having witnessed it first-hand during his undergraduate medical training in the country. Since migrating overseas (first to the UK, and then to Australia), he has watched with admiration how developed countries protect their women from breast and cervical cancers, through effective health policies and interventions, and realized that, back in his original country, these life-saving measures are inexistent.

Available statistics underline the urgent and dire need for this campaign in developing countries. Global costs from premature deaths related to non-communicable diseases (NCDs) might exceed \$US30 trillion in the next 20 years, and, out of the 40 million deaths per year that are attributable to these diseases, 31 million (78%) of them come from developing countries like Nigeria.² Ironically, just 1% of universal health funding is earmarked for preventing NCDs,² with current attention in the developing world focusing on communicable, non-cancer, infective diseases like HIV, malaria and tuberculosis,³ as well as childhood immunizations.⁴ Breast and cervical cancers are among the diseases that contribute to the NCD burdens in these developing countries, most of which lack organised, government-sponsored national prevention programs that is the norm in developed countries like Australia. Further statistics linked to breast and cervical cancers highlight the "burning platform" they pose in Nigeria and other developing countries, and provide justifications for intervening at high schools. These are discussed next.

CERVICAL CANCERS: In 2012, developing countries accounted for 445,000 (84%) of all global cervical cancer occurrences, along with 270,000 (85%) of the resultant deaths.⁵ In Nigeria, about 50.3 million women aged 15 years or more are at risk of developing cervical cancer, and about 8,240 of the 14,089 that had the disease in 2017, died.⁶ Projections have it that, by the year 2025, cervical cancer deaths may rise by 63% among affected women aged 65 years or less, and 50% for those older than 65 years.⁷

The cancer is known to be caused mainly by a sexually-transmissible virus. Unfortunately, the age of sexual debut for Nigerian women is 16.7 to 17.9 years,⁸ which is about the age when most females are in the final year of their high schools.⁹ Interestingly, only 15.6% of 16-year-old Nigerian women are sexually active, but up to 51.7% become active before the age of 20 years,⁶ while between 71.2%¹⁰ to 81.5%¹¹ are already sexually active among university undergraduates. This means that, for a good proportion of women in Nigerian tertiary institutions (usually in their late teens to mid-twenties), potential exposures to the cervical-cancer-causing virus would have already occurred. Unfortunately, going by the results of a recent study, most of these women would be unaware of the associations between sexual exposure and cervical cancer.¹² The **ArOY Campaign** is designed to mitigate this risk, It has also been reported that up to 12% of cervical cancer cases in developing countries occur in women under 30 years of age, further justifying the need for early interventions.¹³

BREAST CANCERS: Up to 3.3% of cases in Nigeria are reported among women aged 25 years or less, with one being reported in a patient as young as 14 years.¹⁴ Despite this risk faced by young adults, a poor level of knowledge of the cancer exists among Nigerian high school girls.¹ Since prognoses in younger patients are poor,¹⁵ early screening and detection becomes vital given that no other functional preventive programs are in place in most developing countries. Being "breast aware" provides a cheap and non-invasive way of empowering young women in this regard. Even though breast cancer is more common in developed countries, levels from developing countries are gradually matching theirs, mainly due to increasingly westernized lifestyles. Unfortunately, outcomes from these developing countries are much poorer, given that only one out of every 10 affected women in these places will survive, compared to the 7 out of every 10 that will survive in the developed world.¹⁶ With the cancer being responsible for 571,000 global deaths in 2015 alone, the need for more attention to women in developing countries becomes imperative.¹⁷

Poor knowledge of preventive strategies and limited government-funded preventive programs contribute to the poor statistics enunciated above. Given the persisting limitations in funds and poor healthcare facilities in most developing countries, this unfortunate trend will most likely continue. The implication, therefore, is that direct empowerment of women through health campaigns present the most realistic and affordable intervention measure in these countries. Such campaigns are known to improve knowledge, preventive practices, screening uptakes, and the adoption of positive behaviours. Combined, all these will ultimately reduce the cancers' incidences. Unfortunately, most current awareness campaigns target working-class adults or undergraduates (mostly aged 20 years or more) through symposiums that involve, at most, a few hundred participants at any point in time due to limitations imposed by costs and physical spaces.

Since 2017, the **OCI Foundation** has been at the vanguard of youth empowerment on the preventive measures against breast and cervical cancers for female senior secondary school students in South-eastern Nigeria. The prime focus up till now has been on Anambra State, which is one of the country's 36 states. Even though feedbacks from guests and participants alike indicate that these campaigns have so far been resoundingly successful, evaluations by the Foundation itself reveal that, despite positive attitudes, breast¹ and cervical¹² cancer-preventive knowledge among Nigerian high school females are poor, and that no reliable source of information (including from their own schools) is available to these students, as their current curriculum does not include them. Given that 72.8% of Nigerians aged 15 to 24-year-old Nigerians pass through high schools,¹⁸ a curriculum that includes relevant teachings is expected to be wide-reaching.

The **ArOY Campaign**, which will replace the annual campaigns, became necessary due to the compelling need to have an intervention that is all-encompassing in a sustainable and affordable way. It has been designed to present a practical, inexpensive and sustainable solution to these identified limitations. To ensure the sustained efficacy of interventions over the medium to long-term, the advocated curriculum change will incorporate in-built evaluation systems (like examinations and quizzes) as a way of ensuring "engagement". It will also integrate repeated yearly teachings of the same items across the final three classes in Nigerian high schools for each student cohort, given that repetition is a proven way of transforming learned behaviours into habits.¹⁹ Even though breast self-examinations (BSEs) are not proven to reduce breast cancers, their regular practice helps improve body awareness, which in turn allows changes potentially indicative of breast cancer to be picked up early.²⁰

As already revealed, the duo of breast and cervical cancers have their roots in early adulthood, and, delaying enlightenment interventions into mid or late adulthood would come late to many, as exposure to irreversible risks might have occurred. Interventions at the teenage years will also have multiplicative effects, as these young women have many years ahead of them to influence a lot of others, including their children, grandchildren, friends, school mates, work colleagues, and others in the society.

The evidence-based proposals of the **ArOY Initiative**, therefore, posit that interventions targeting high school teenage students is an effective approach in developing countries, and, in reality, might be the only sustainable approach in equipping the population at risk for majority of these countries. The Campaign's ideas are novel, and will be the first of its kind in Nigeria. As far as is known from the existing literature, it might also be the first of its kind in most other parts of the developing world. A successful implementation in Nigeria, will, therefore, have hugely significant impacts on all other developing countries that face similar problems, and with millions of lives at stake, the importance of this project can never be overestimated.



ABOUT THE FOUNDER, OCI FOUNDATION

Dr. Onyebuchi Chris Ifediora (*MBBS*, *MPH*, *FRACGP*, *HMS-SEAL*, *FIMC*, *CMC*, *AFANZAHPE*) is an Associate Professor of Medicine based in Australia. He is the Founder and President of the OCI Foundation, an Australian-Nigerian charity organisation that advances health, education and social welfare.

He obtained his primary medical degree from the Nnamdi Azikiwe University Medical School, Nigeria, and later added to it a Master of Public Health degree from the University of Liverpool, United Kingdom.

He is a Harvard-trained healthcare leader, having completed a one-year Harvard Medical School's South-East Asia Healthcare Leadership (HMS-SEAL) program. The SEAL program equipped him with the skills for managing complex health, charity and financial organisations, and accords him an associate Alumnus status with the prestigious Harvard Medical School, Boston, United States of America.

Dr Chris is a practising Family Physician based on the City of Gold Coast, Australia, and holds the Fellowship of the Royal Australian College of General Practitioners (RACGP). He also Supervises, Mentors, Educates, and Examines

medical registrars and other junior doctors on behalf of the RACGP. In August 2017, Dr Ifediora was elected into the Faculty Board of the Royal Australian College of General Practitioners, Queensland, Australia, which is the representative body of all general practitioners in the State of Queensland.

As a medical undergraduate, Dr Ifediora served as the Secretary-General of the Federation of African Medical Students' Associations, FAMSA, the body of all African medical students in 2001. He was also the Secretary Generals of the Nnamdi Azikiwe University Medical Students Association (NAUMSA), as well as the ROTARACT Club of Nnamdi Azikiwe University Teaching Hospital, NAUTH, among other positions.

Dr OCI is passionate about teaching and research. As an Associate Professor, he contributes to the training of medical students at the Griffith University School of Medicine, Gold Coast Campus, Australia. He is also a member of the Australian and New Zealand Association for Health Professional Educators (ANZAHPE), and have published a number of scholarly articles in numerous peer-reviewed journals of international repute.

His research publications have contributed immensely to healthcare and policy developments in both Nigeria and Australia, and these frequently throw him into the limelight. As such, he has been interviewed multiple times on Australian televisions and radios, while multiple print media in both Nigeria and Australia write about his work.

During his primary, secondary and university education, all of which took place in Nigeria, Dr Chris saw first-hand the dangers of poorly funded education and ill health, and how these can limit the potentials of otherwise gifted individuals. Having overcome these obstacles himself, he swore that, whenever he could, he would do all within his powers to ensure that those coming after him would not have their dreams cut short by these same impostors. He believes that as he strives to rise to the peak of his career, he would do so while lifting others. This is the dream that birthed the OCI Foundation, and led to the introduction of the Arm Our Youths Campaign, along with a number of other academic scholarships.

Dr Ifediora is married to Mrs Nkem Ifediora, who is also the Vice President of the OCI Foundation. They are blessed with 4 lovely children.

