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**TITLE: PATHWAYS TO AN EXPEDITED, COMPREHENSIVE,  
EFFECTIVE ROLLOUT AND IMPLEMENTATION OF THE  
OCI FOUNDATION'S CANCER BILL: LESSONS FROM  
ANAMBRA.**

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*“Nothing is more powerful than an idea whose time has come.” – Victor Hugo*

## **INTRODUCTION**

Cervical and breast cancers are a familiar foe with a disproportionate bias for women in Lower to Middle-Income Countries [LMICs] (Ifediora and Azuike, 2018). This gloomy reality is likely to stay the same without intervention as most LMICs lack universal, government-funded vaccination and screening programmes (World Health Organization [WHO], 2019). However, while to contract these cancers is to unwittingly sign for a slow painful death, highly consistent preventive lifestyles can forestall their development altogether. It is this prevention-based strategy that has formed the focus of the OCI (Onyebuchi Chris Ifediora) Foundation’s anti-cervical and anti-breast cancer project. Having already taken off in Anambra State in 2019, its outcome so far will be used in this essay as a guide in drawing adaptable strategies for a rapid, comprehensive, and effective rollout of the project nationwide.

## **THE OCI FOUNDATION’S LEGISLATIVE BILL**

In recent times, the OCI foundation has championed a course for the incorporation of anti-breast and anti-cervical cancer teachings into the curriculum of all senior secondary schools nationwide. After passing through the parliament, anti-prostate cancer teachings became a part of the bill (OCI Foundation, 2023). The foundation has made a case for its bill to target youths in all Senior Secondary Schools in Nigeria given that cervical cancer particularly, and breast cancer to some extent, make appearances at this young age. The bill is titled “Mandatory Inclusion of

Teachings on Breast, Cervical, and Prostate Cancers into the Curriculum of Senior Secondary Schools and Colleges of Education in Nigeria Bill, 2023".

The bill is a novel, research-driven initiative which has already enjoyed relative success by recently navigating its course through both chambers of the 9<sup>th</sup> Nigerian National Assembly (NASS) and is currently poised for the presidential seal of approval to become a law of the Federal Republic of Nigeria.

## **LESSONS FROM THE ANAMBRA PILOT TEST**

From the test, it was observed that the benefits of the interventions were not sustained when delivered as one-off events (within a single month). However, when the interventions were delivered over 12 months or more, the improvements in knowledge about cervical cancer were significantly increased and maintained (Ifediora et al., 2022). This suggests that repeated exposure to the interventions and regular assessments are crucial for maximizing their effectiveness.

Other lessons were the importance of partnering with local stakeholders as vital instruments for easy communication and engagement (WHO, 2020); collaboration with non-profit organizations, academic institutions, and governmental bodies in implementing high-impact interventions (Naija News, 2018); the potency of culture-friendly interventions in enhancing community acceptance.

# **STRATEGIES FOR THE EXPEDITED, COMPREHENSIVE, AND EFFECTIVE IMPLEMENTATION OF THE OCI FOUNDATION'S PROJECT NATIONWIDE**

The pilot phase of the program has provided an invaluable learning opportunity for the development of a robust and contextually appropriate set of strategies (Ogunrinde, 2019). However, realizing similar success on a national scale is not merely about the replication of the Anambra model. Careful consideration is required in adapting the programme to suit the diversity of Nigeria's socio-cultural, economic, and geographical landscape.

Firstly, outcomes from the test have shown the effectiveness of building and sustaining engagements through repetition and built-in assessments (Ifediora et al., 2022). Incorporation of anti-cervical, anti-breast, and anti-prostate cancer teachings into the curriculum alone may be insufficient to ensure students' understanding and retention of the whole concept. However, incorporating questions on these cancers into termly exams and the Senior Secondary Certificate Examinations (SSCE) would ensure that with the consistency of necessitated study, over time, knowledge of the prevention of these cancers would become an ingrained part of students' education, awareness, and compliance. Similarly, there should be provision of hardcopy books for the students with illustrative pictures of these cancers. The books would serve as a printed version of the OCI CERVIBREAST smartphone app, allowing students who are vulnerable to trifling engagements on social media to still benefit from the program.

Secondly, promoting interest and incentivization is another adroit strategy – just like the bait to draw and catch the fish. This could be achieved through the introduction of quiz competitions (inter-class and inter-school) between participating students and schools. Prizes for

winners would serve as incentives to take an active interest in learning – for students – and in teaching the material – for teachers.

Thirdly, as the case was in Anambra about the myths surrounding these cancers, it could be the same in other places, or even worse. However, effective and extensive health education campaigns will be crucial in breaking down the barriers of stigma, misinformation, and fear associated with these cancers. In Anambra, the use of community health workers to educate the public significantly enhanced awareness, leading to increased early detection rates (Stefan, 2015). To replicate this success on a national scale, similar structured educational campaigns should be implemented using multi-media platforms and professional trainers. These trainers should be equipped with accurate and evidence-based materials, including first-hand experience from individuals who have been affected by these diseases before. This approach can lessen the challenges related to knowledge and belief in the program.

Furthermore, the role of integrative technology is crucial. The Anambra experience demonstrated the effectiveness of combining offline and online activities. The use of web-based platforms and mobile applications improved access to information, service delivery, and feedback. Hence, leveraging existing technology to provide for remote learning, teleconsultations, and electronic health records must be explored for the nationwide rollout. The OCI Cervibreast Mobile Phone Application is a relevant tool for this purpose amongst a potential of several others.

Also, the programme must be culturally sensitive and context-based. The nation is geographically, culturally, and ethnically diverse. The program must therefore be designed to be flexible and adaptable so that it can be tailored to the specific needs of each region. Further, as Nelson Mandela said; “If you talk to a man in a language he understands, that goes to his head. If

you talk to him in his own language, that goes to his heart.” For it to be contextually appropriate, it is essential to gather and analyze local data, consult with community members, employ the use of local dialects (where necessary), and train local personnel. This will ensure that the program fits into the cultural and social realities of each region (Guardian Nigeria, 2019). Further, this will put the program in a position where it is truly owned by the people it is meant to serve.

Again, about demography, Nigeria’s population is approximately 200 million, many times the population of Anambra State (World Population Review, 2020). Given this significantly higher population, it is clear that the resources – both human and material – required for a nationwide rollout will be greater. To meet this responsibility, a multi-stakeholder collaboration will be indispensable to expedite the bill’s application across Nigeria. Research has shown that multi-stakeholder partnership promotes the successful implementation of public health programs (Kruk et al., 2015). In the Anambra model, the partnership was established by the state government, local authorities, international agencies, and nonprofit organizations. We should replicate this on a national scale. The program can also be integrated into existing health and educational structures to leverage existing resources and expertise. This collaborative approach will altogether maximize the program’s impact and reach, while also reducing the burden on any one organization or entity.

Emphatically, what is a successful program without a monitoring and evaluatory system? Monitoring and evaluation must undergird the rollout. By tracking progress against established benchmarks, identifying areas for improvement, and making adjustments as needed, the program can be effectively refined and optimized.

Importantly, the support the project has garnered from prominent individuals, government institutions, and non-governmental organizations (NGOs) inspires confidence.

Individuals like Dr Aisha Buhari (Immediate past Nigerian First Lady) and Senator Dr Ifeanyi Patrick Uba, NGOs like the FUTURE ASSURED FOUNDATION and Sweet Home Africa Humanitarian Foundation, and institutions like the Federal Ministry of Education (FMOE) and the Nigerian Medical Association (NMA) amongst many others have shown their support. Many of these institutions and NGOs (the foregoing list is not exhaustive) were present at the public hearing of the bill. Actively engaging as many of these groups as possible would advance the course of executing an expedited, comprehensive, and effective implementation of the project nationwide.

## **CONCLUSION**

In the global health landscape, cervical, breast, and prostate cancers have notoriously stolen the headlines. Their devastating impact has felt like an assault on the health of LMICs, like Nigeria. However, the OCI Foundation's "Arm our Youth" (ArOY) Health campaign initiative has emerged as a beacon of hope. By building on the benefits of the lessons learned from the Anambra experience, a nationwide rollout has no reason to lag or fail like many other public health interventions. Through the committed execution of the suggested strategies, the project could achieve rapid widespread and sustainable success across Nigeria. Consequently, this would result in empowering young people to improve their health and that of their communities. Further, the project could catalyze a wave of change across Africa and beyond, with empowered individuals leading the fight against these devastating diseases.

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