NIDSG 2025 ANNUAL REPORT



*NIDSG led maternal and child health clinics at the Wasa IDP refugee camp in Nigeria

Our Motto: "Brighten the corner you're in!"

1. EXECUTIVE SUMMARY

1.1 About NIDSG

NIDSG is a medical charity based in UK and Nigeria, that was originally set up to help some of the 3million internally displaced people (IDPs) and populations who are victims of conflict and insecurity in Nigeria. However, our work has now expanded into broader healthcare capacity building across Nigeria. NIDSG was founded in 1997 by Nigerians in diaspora who are concerned about the plight of IDPs and poor health indices in Nigeria and feel a moral obligation to give back. Our Trustees and volunteers are highly experienced doctors, nurses, psychologists and healthcare professionals, in UK, USA, Qatar, UAE, South Africa and Nigeria; offering their expertise at no cost and most people even pay their own travel costs. We work in two clinical areas and support two main populations:

Clinical Areas	Populations supported
● Mental Health and Psycho-social support (MHPSS) ● Maternal and Child Health (MCH)	● IDP communities and people in conflict areas, impacted by displacement and trauma ● People in medically underserved rural areas across Nigeria, served by primary health centres

1.2 Summary of Activities in 2025

Maternal and Child Health (MCH)

- Delivered 2 Basic Emergency Obstetrics and Newborn Care train the trainer workshops and upskilled 585 primary health workers in 2025 to help reduce mother and baby deaths in childbirth. To date this primary health care capacity building programme has upskilled nearly 3000 primary health workers
- Delivered clinics for circa 650 pregnant women and children under 5yrs in two camps for internally displaced people (IDPs). To date this initiative has treated circa 2600 IDP patients.
- Donated over NGN10m of NHS surplus medical equipment and supplies to local hospitals and IDP clinics. To date, this initiative has donated over NGN70m worth of medical supplies.

Mental Health and Psycho-social support (MHPSS)

- Delivered two MHPSS workshops, to train 67 Adult and specialist child MHPSS Lay counsellors and two further remote seminars to our nationwide MHPSS community of practice. To date this initiative has trained over 450 Lay Counsellors.
- Launched the Tally Tripp Programme to help address child trauma in Nigeria
- Set up a supervision and mentoring scheme for around 30 lay mental health counsellors

Monitoring and evaluation

- Improved monitoring and evaluation, including a survey to assess the impact of our Mental Health and Psycho-social support (MHPSS) Maternal and Child Health (MCH) interventions.

Sustainability

- Fully established active online communities of practice, in both mental health and maternal and child health.

1.3 Recognition and Awards in 2025

NIDSG's work won a second-place award at the Biennial Conference of the Association of Public Health Physicians of Nigeria held at the Marriott Hotel, Lagos from 3rd-4th Dec 2025. The conference theme was "*Global Health Under Threat:*

Advancing Sustainable Financing and Workforce Capacity for Equitable Healthcare Delivery in the Global South." The judges were particularly impressed by the impact made by NIDSG led initiatives in the two clinical areas, where the national needs are severe and there is huge gap in effective service provision. They commended the strong collaboration between the NIDSG diaspora team and local partners. The judges also highlighted the Communities of Practice (CoP), which ensures sustainability for the communities served in both clinical areas.



Poster presentation by Dr Morenike Alex-Okoh, Consultant Public Health Physician and Chair of NIDSG's Primary health capacity building programme

1.3 Primary Health Capacity in Mental Health and Maternal and Child Health Grant Funding

NIDSG's delivered a truly remarkable results on our Primary Health Worker Capacity Building Programme in Mental Health and Maternal and Child Health, with grant funding provided by the UK Department of Health and Social Welfare, via THET's, Global health workforce programme. This ended in January 2025.

Global Health Partnerships
FORMERLY THET

3rd Floor, 86 – 90 Paul Street
London
EC2A 4NE

Email | justina.joshua-eke@thet.org

20th March 2025

Dear Mr Kevin Obi and Dr. Fatima Akilu,

I am writing to appreciate your incredible team for the great work you have done in this GHWP Phase 1. I acknowledge the submission of your Reporting Period 2 (RP2) narrative and financial reports, as well as entering your data into the MEL portal. It has been a pleasure to read about everything which you have achieved during this reporting period.

It is amazing you were able to surpass many of your targets especially in exceeding the number of BEmONC trainers target by 3%. The BEmONC step-down training also upskilled 1,674 additional frontline workers, bringing the total to 2,194, surpassing the target by 1,371%! The MHPSS counselling training equally exceeded the set target by 6%.

Having been opportune to attend the last day of BEmONC training held in Abuja, I was really thrilled to see so many participants and how the training was very practical and the attendees each had hands-on-experience. The facilitators were fantastic and easy to understand. It is not surprising how despite the length of the training, the participants were never bored. Well -done to your wonderful team!

I am happy you did not have many challenges except for logistics for the participants and knowing the areas to cover within the large BEmONC curriculum within a short period. But you were able to mitigate this by focusing on the leading causes of mortality in childbirth using the Community of Practice (CoP) as a vehicle to address the gaps. The CoP was also useful for the MHPSS training especially as there was insufficient basic MHPSS capabilities to expand on pre-existing knowledge.

On your Financial report, I commend the fact that throughout this grant period you have been thorough and meticulous in recording your transactions, providing explanations where necessary and always supplying the means of verifications requested. So far, your report indicated that you have received a total grant payment of £47,477.20, your actual spend is £49,948.87. You should have now received the balance of £2,471.67 from Global Health Partnerships (GHP) to make up the total Grant amount spent.

I acknowledge the receipt of your asset register and the disposal letters. These have been submitted to GHP for consideration.

I wish you success as you seek further funding to expand this great work you are doing to more healthcare workers across Nigeria.

If you would like to run anything by me, you can always send an email.

Warm regards,

Justina Joshua-Eke

Consultant Grants Manager, GHWP

Global Health Partnerships

1.4 Acknowledgements

We'd like to express profound appreciation to our sponsors, SCIB & Co Nig Ltd and NNPC Retail, who have provided steadfast support, covering our local costs for several years. NIDSG also thanks our trustees and volunteers, particularly the MCH and MHPSS clinical teams, and the support team. This great work is only made possible by the talent, great effort and financial contribution made by these amazing individuals. We'd also like to thank "Friends of NIDSG," including Mr & Mrs Onyemanem and others who each make a generous contribution to the charity every year. NIDSG owes a huge debt of gratitude to our partners, NEEM. Foundation and University of Abuja Teaching Hospital and Lux Terra Leadership Foundation, who made huge contributions in kind and to the Obuaya family foundation for co-sponsoring this year's programme in Asaba, Delta State in May 2025.



Kevin Obi - Chair, NIDSG

2. WHO WE WORK WITH, WHAT WE DO AND WHY

2.1 WHO WE WORK WITH

NIDSG has worked in collaboration with the Federal and State health authorities, Nigerian Medical Association, international NGOs (UNFPA), numerous local NGOS and civil Society organisations, faith groups and other reputable local institutions in Nigeria. NIDSG is most grateful for the enduring collaboration of our current in-country delivery partners:

- Mental Health – Neem Foundation, Lux Tera Leadership Foundation
- Maternal and Child Health – University of Abuja Teaching Hospital

2.2 Maternal and Child Health Interventions



NIDSG's maternal and child health interventions

Nigeria accounts for 28.5% of all maternal deaths worldwide with about 993 maternal deaths per 100,000 live births (the world average is 230 deaths per 100,000 live births). The rate of under five deaths in Nigeria is 835,030. This is amongst the highest in the world [UNICEF]. The figures are much higher in conflict zones with significant populations of IDPs [Source: World Bank, UNFPA]. Basic Emergency Obstetric and Newborn Care (BEmONC) training is one of the most proven, high-impact interventions in global maternal health to equip frontline health workers with the essential, lifesaving skills needed to prevent the main causes of maternal and newborn deaths.

- NIDSG in partnership with University of Abuja Teaching Hospital, is delivering a nationwide BEmONC Train the Trainer programme, aimed at upskilling frontline primary health care workers (mainly Nurses, Midwives and doctors) to recognise, manage, and stabilise obstetric and newborn emergencies during pregnancy, labour, delivery, and the immediate postnatal period. These "master trainers" "step down" their training to colleagues, to help reduce maternal and neonatal deaths in childbirth in primary care. To date, the BEmONC ToT programme has upskilled 2943 primary health workers across 12 States in Nigeria.
- NIDSG runs free medical treatment clinics and offers free medicines for pregnant women, babies and young children in IDP camps. We also work alongside local health colleagues to ensure two-way knowledge exchange.
- NIDSG arranges follow up in-hospital treatment critically ill patients who are at risk of death or life altering ailments if not urgently dealt with
- To date NIDSG has also donated over NGN70million worth of medical equipment and supplies, that have been freely sourced from the UK National Health Service, to IDP camp clinics and to several local hospitals

2.3 Mental Health Interventions



NIDSG trained MHPS Counsellors have won National awards for their work

With 281 psychiatrists and very few clinical psychologists for 220 million people, Nigeria's mental health services are chronically and dangerously under-resourced, with limited patient access. 15% of the population have experienced mental health half of 3million IDPs [source WHO] have experienced trauma. Since 2017 NIDSG has helped to address this huge gap in mental health service provision by training nearly 450 lay mental health and psychosocial support counsellors [MHPSS], from all States in northern Nigeria, middle belt and southern Nigeria. NIDSG trains Lay MHPSS Counsellors in 3 sub-specialties:

- **Adult MHPSS**: Trauma is pervasive in IDP populations and in conflict zones, and about half of IDPs have experienced trauma, violence, and displacement trauma and mental health side effects such as depression. Access to services is even more limited in where mental health needs are often greatest due. To address this NIDSG trains people from these communities in "MHPSS interventions that can be delivered by non-specialists".
- **Sexual and gender-based violence and domestic abuse** against women and girls is endemic in Nigeria the No.1 trauma issue reported by our trainees, especially in non-conflict areas. In conflict areas and IDP populations Numerous women and girls have experienced rape; sex trafficking and slavery; early/forced marriage, according to a 2024 Amnesty International report, and access to mental health and psychosocial support services is extremely limited. NIDSG trains women to support female victims of sexual and gender based violence and domestic abuse.
- **Therapeutic arts lay counselling for Children**: The vast majority of people affected by conflict and insecurity in Nigeria are children and youths (0-17 years). Across the rest of Nigeria, there is a high prevalence of Adverse Childhood Experiences (ACEs), which can include various forms of physical, emotional, or sexual abuse, physical or emotional neglect, and household dysfunction such as substance abuse or domestic violence. Children often find it difficult to express their trauma in words. Therefore, NIDSG trains people working in schools, orphanages, social and NGO workers dealing with traumatised children, in therapeutic arts counsellors for children, to use art-making, play drama and psychotherapy techniques as a trauma intervention to help children suffering from mental trauma

2.4 Communities of Practice

Continuous engagement and support are essential to delivering sustainable outcomes. Following the initial training, NIDSG enrolls all participants in online Communities of Practice (CoP), one each of maternal and child health and for mental health and psycho-social support, where they access:

- Peer and expert learning networks to share best practice and exchange practical advice on service delivery
- eLearning & knowledge-sharing. Videos and other useful material for resource challenged environments
- Virtual training. Further professional development through quarterly online seminars
- Remote Mentorship. Ask questions, discussions and support for difficult cases:

.

3. KEY INTERVENTIONS IN 2025

3.1 Maternal and Child Health Interventions

3.1.1 Basic Emergency Obstetrics and Newborn Care – Train the Trainer Programme

In 2025 NIDSG led two BEmONC TOT Workshops in Asaba (May 2025) and Abuja (Oct 2025), trained 53 frontline Doctors, Nurses and Midwives, as master BEmONC trainers. The participants were drawn from Delta, Ebonyi States in southern Nigeria and Niger State and FCT in Northern Nigeria. 100% of participants reported that the training had enhanced their BEMoNC skills, that they could apply the skills acquired in their daily work. Telephone interviews and data provided following the training showed that participants from Abuja and Asaba delivered "step down" training to a total of 585 health workers colleagues in to improve management of medical emergencies during childbirth to in their respective Primary Healthcare Centers (PHCs).





Top: Images from the BEmONC ToT workshop in Abuja at Radiance Spring Hotel, Oct 2025. Bottom: Images from the BEmONC ToT workshop in Asaba at Orchid Hotel, May 2025.



Practical demonstration in Asaba



Practical BEmONC training in Abuja



Step down training taking place in Asaba

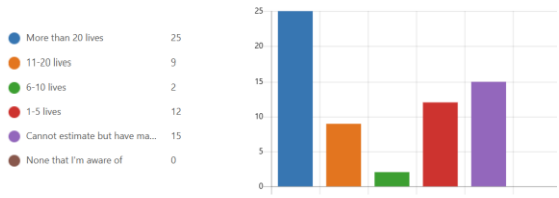
3.1.2 BEmONC TOT Impact Survey in 2025

The 2025 BEmONC ToT programme impact survey results were quite remarkable and demonstrate that this initiative has improved skills of primary health workers in managing medical emergencies during child birth, saved lives and delivered positive outcomes for thousands of women and babies.

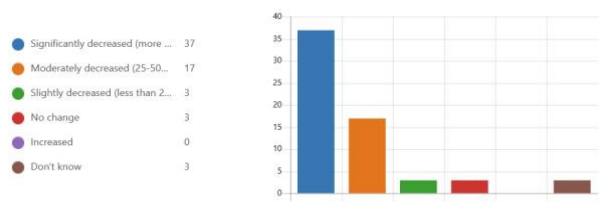
14. Rate how significantly the BEmONC training improved your skills in managing obstetric emergencies:



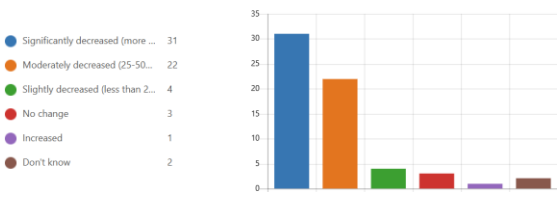
28. How many lives (mothers and/or babies) do you estimate you have directly saved using BEmONC skills?



22. How has neonatal mortality changed at your facility since your BEmONC training?

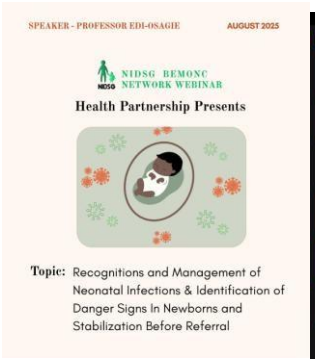


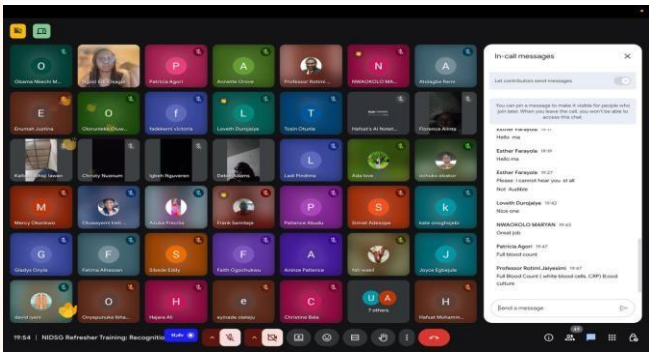
20. Since attending BEmONC training, how would you rate the change in maternal mortality at your facility?



3.1.3 BEmONC Community of Practice (CoP)

In 2025, NIDSG delivered remote seminar for our BEmONC (CoP) on *Recognition and management of Neonatal Infections and Identification of Danger Signs in Newborns and Stabilization Before Referral*, the session was delivered by Professor Edi-Osagie, a Consultant Neonatologist and the UK National Clinical Director Neonatal Care NHS England. The session was very interactive, with 49 participants in attendance who all reported that they found the session extremely useful.





Poster for the seminar and screenshot of the BEmONC remote workshop that had 50 participants in attendance.

3.1.4 Maternal and Child Health [MCH] Clinics in IDP Refugee Camps

From Oct 6-9th NIDSG delivered four days of medical clinics at Waru and Wasa IDP Camps in FCT, treating over 427 children under 5yrs and 250 pregnant women. Unlike previous years there was only one acute relating to a child with a broken arm, for which NIDSG paid for hospital treatment. Malnutrition remains the most common peadiatric issue**,** affecting growth, immunity, and cognitive development. Wide spread scabies and parasitic skin infections were observed, linked to overcrowding and limited access to personal hygiene products. NIDSG provided personal hygiene education for caregivers, to address the high incidence of preventable infections among children, and nutrition-focused counselling whilst acknowledging that hunger and under-nutrition remain stem from deep structural challenges in many IDP communities.



MCH clinics delivered for 657 pregnant women and children in Waru and Wassa IDP camps

2.1.4. Donation of Medical Supplies

NIDSG delivered NGN10m freely secured NHS surplus medical equipment and supplies to Jos University Teaching Hospital, Jos Specialist Hospital, Federal Medical Centre Asaba and University of Abuja Teaching Hospital. To date NIDSG has donated circa NGN70m of medical supplies and equipment to IPD camp clinics and hospitals across Nigeria.



Medical supplies and equipment donations by NIDSG

3.2. Mental Health Interventions

3.2.1 Adult Lay MHPSS Counsellor Workshops;

In 2025 NIDSG ran two Workshops in Asaba and in Abuja respectively to train 58 Adult Lay MHPSS Counsellors. The workshop in Abuja was more trauma focused, delivered in partnership with Lux Terra Leadership Foundation, and included participants from Delta, Ebonyi, Niger, FCT,Benue Plateau, Yobe, Adamawa, Oyo, Enugu mostly conflict or high insecurity States in Nigeria, and included a societal trauma healing session. The Asaba training was focused on more general mental health and participants were drawn from local communities around Asaba. The women only sexual and gender-based violence workshop was not delivered in 2025, but will be covered in remote sessions in 2026.



Top: Images of the MHPSS Lay counsellor training in Asaba at Orchids Hotel, 2025 Bottom: Images of the Adult ,MHPSS training in Abuja Lux Terra Leadership Foundation, 2025.

3.2.2 The Tally Tripp Child Trauma Programme

In Oct 2025, NIDSG launched the Tally Tripp Child Trauma Programme, in memory of Prof Tally Tripp, the late Dean of NIDSG's Children's mental health initiative, to help improve the detection and treatment of child trauma and PTSD. Nine participants from Kano, Borno, Niger, Plateau States and Abuja, who work daily with children who have PTSD as teachers, orphanage caregivers, psychiatrists, psychologists, counsellors, took part in the Children's Accelerated Trauma Technique (CATT) training programme delivered virtually in collaboration with ACT International. The participants were drawn from affiliated organisations that support children who have experienced trauma. They are currently undergoing a six-month supervision period following the training due to conclude March 2025, all participants taking part in supervision sessions have passed the programme and are to be awarded their certificates and added to the Global CATT register.



Left to Right: Screenshots of the ACT International trainers online. Group picture of all CATT trainees and NIDSG support team. Storyboard created by participant for CATT assessment

3.2.3 The MHPSS Lay Counsellor Mentorship Scheme

While the short-term intensive training provides the initial knowledge and counselling skills, ongoing supervision builds the clinical skills and helps transform the basic training into real-world competence to ensure that the support given by lay counsellors is safe, ethical, and effective. In 2025 NIDSG launched our lay MHPSS counsellor mentorship scheme. We are most grateful to the 5 experienced UK based psychotherapists and counsellors who volunteered their time and expertise to provide mentorship, support and expert consultations on difficult cases. 18 NIDSG trained lay Counsellors are currently enrolled in the scheme and receiving Mentorship. We hope to recruit more mentors and expand the scheme to more participants in 2026.

3.2.4 MHPSS Community of Practice

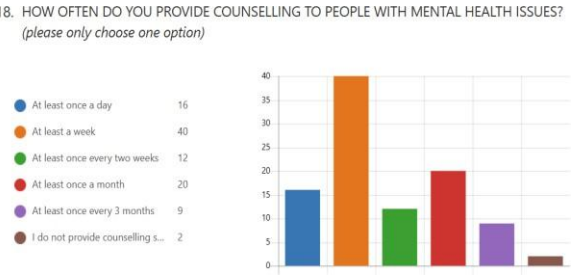
In 2025, NIDSG delivered two remote mental health continuous professional development webinar on to the MHPSS Community of Practice. For example, the webinar on The *Guiding Conversations on Depression and Anxiety* delivered by Kia Parris, an integrative therapist based in the UK and one of the mentors of the NIDSG mentoring scheme, was particularly well received. A post-event poll taken by participants demonstrated that that they found the lecture and Q&A very useful.

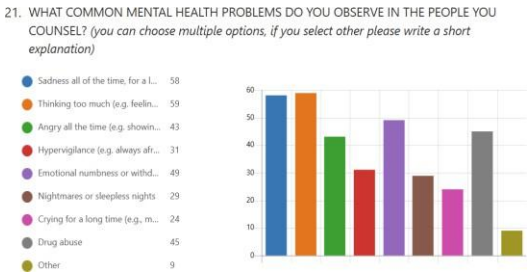


Publicizing poster for seminar and screenshot of session.

3.2.5 MHPSS Lay Counselling Impact Survey

NIDSG ran our annual an impact survey again in 2025. The survey was completed by 99 lay counsellors and demonstrated that NIDSG trained lay MHPSS counsellors are actively helping to address mental health issues in their communities. NIDSG continues to support them via the CoP.





4. Conclusion

Although the funding situation was made difficult by the UK International Development/Department of Health and Social Care funding ending in January 2025 and the expected USAID and Melinda Gates Foundation Grants not coming to fruition. Nevertheless, NIDSG had a busy, impactful year and 2025 has been one of our most successful years to date in 2025. We are most grateful to all the individuals and organisations who made this possible.

Appendix - THE NIDSG CORE TEAM

Clinical Leaders



Professor Rotimi Jaiyesimi is an award-winning consultant Obstetrician and Gynecologist and NIDSG's maternal and child health clinical leader in maternal and child health, and a Trustee of NIDSG. He graduated from University of Ibadan in in 1978 and in 1993, he became one of the first Nigerians appointed as a consultant in obstetrics and gynaecology in the UK. He is based at the Nuffield Health Brentwood Hospital in UK. Prof Jaiyesimi received the UK Health Service Journal National Award for Innovation in 2014, University of Ibadan presented him with the Lifetime Achievement Award in 2018. He also received the Nigerian Diaspora Merit Award for Medicine and Healthcare in 2023. Rotimi is a trustee of NIDSG



Dr Wale Lagundoye - Is NHS Consultant psychiatrist since 2002. He is NIDSG' mental health clinical leader in mental health and a Trustee of NIDSG. He was recently Clinical Director in the UK NHS in Sheffield and has over 35yrs experience as a clinician,trainer ,medical manager and mental health advocate, including development of health policy and clinical guidelines. Dr Lagundoye earned a Bachelor of Medicine and Bachelor of Surgery degree (MBBS) from University of Ibadan in 1986 and is a co-founder of The retreat a privately owned mental health facility in Nigeria.



Dr Morenike Alex-Okoh. Consultant in Public health with over 30 years of cognate experience. She is Chair of the NIDSG/NEEM/UATH Steering Committee and leader of NIDSG's health systems strengthening programmes. Dr Alex Okoh retired as Director of Public Health at the Federal Ministry of Health, where she initiated and led the establishment of the National Mental Health Program to coordinate mental health interventions and services in Nigeria. She has served on various Technical Advisory Committees for Africa Center for Disease Control and World Health Organisation, and earned a Bachelor of Medicine and Bachelor of Surgery degree (MBBS) from University of Benin in 1988.

Mental Health



Prof Chris Piwuna - Professor and Head of Department of Psychiatry Jos University Teaching Hospital. He is NIDSG's in-country mental health expert and an MHPSS instructor. His research focuses on mental health, clinical assessment, and psychotherapeutic interventions particularly in aging populations.



Dr Zainab Imam – Formerly an NHS Consultant Psychiatrist, she is currently Division Chief of Women's Mental Health Division for Sidra Medicine in Qatar. Dr Imam is an MHPSS volunteer instructor and specialist in Rehabilitation Psychiatry, Psychodynamic Psychotherapy. She also teaches Perinatal Psychiatry on the MCH training. She is a Fellow the Royal College of Psychiatrists. Zainab is a trustee of NIDSG.



Dr Femi Adebajo – Consultant Psychiatrist in the UK National Health Service at Royal Cornhill Hospital in Aberdeen, UK and a member of the Royal College of Psychiatrists. Dr Adebajo is a volunteer instructor in the MHPPS clinical area and also responsible for the training curriculum. Femi is a trustee of NIDSG.



Dr Geoffrey Ijomah - Consultant Forensic Psychiatrist, with qualifications and a special interest in psychotherapy. Dr Ijomah leads NIDSG's research monitoring and evaluation activities. Geoff is a trustee of NIDSG.



Lorette Dye is a Psychologist, Counsellor and Psychotherapist with training in Psychology, with specialization in Art Therapy and the effects of sexual and gender-based violence. She trains individuals as Arts Therapies Counsellors using art as a medium to counsel individuals or groups facing mental health challenges, and I have a passion is to make a difference by helping disadvantaged communities across Africa using my Art Therapy expertise.



Judy Nkechukwu - Registered Psychologist and Counsellor She has a degree in Psychology and Counselling, a Masters in Dramatherapy, a post graduate diploma in Clinical Supervision is EMDR accredited. She works with vulnerable children and is a clinical Supervisor to Psychotherapists in UK Judy is an MHPSS training faculty member and will contribute to establishing a supervision and mentoring regime.

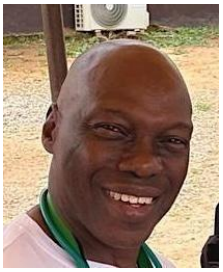


Fiona Lovatt is an educator and Lay Counsellor, with over 40 years experience of working with children in education. She has lived and worked with almajirai, displaced people, orphans, widows and vulnerable children, in education, health and enterprise, everywhere in Northern Nigeria, from Katsina to Maiduguri, Minna to Lokoja. During this period she has help 100s of people through trauma and out of poverty.

Maternal and Child Health



Dr Ify Anidi is a Consultant Paediatrician and specialist in emergency medicine veteran of numerous medical missions to the medically underserved countries, based in California, USA. She is an expert on (Helping Babies Survive (aap.org), which aims reduce infant mortality in resource-limited environments.



Dr Tosin Otunla has over 30 years experience. He has been a Surrey based NHS consultant neonatologist, and paediatrician with expertise in cardiology He is a Fellow of the Royal College of Paediatrics and Child Health (UK) with subspecialty accreditation in Neonatology. He is also an honorary consultant paediatrician at the Royal Brompton Hospital, London and a regular member of the teaching faculty at UK 'hands on' paediatric echocardiography courses**.**



Dr Brigit Allagoa – is a Consultant Paediatrician and Neonatologist in Mid Yorkshire Hospitals NHS Trust, who will deliver the "reducing maternal and neonatal mortality in childbirth project." Dr Allagoa is also a retired Lt Colonel in the British Army and received an International Security Assistance Force (ISAF) medal for her service in Helmand Province in Afghanistan. She recently received a Zenith Global Health Award special recognition award in 2024.



Adebola Aroboto UK registered Nurse, who works as a female genital mutilation (FGM) and perineal health specialist midwife in the UK National Health. She was awarded the best British Midwife of the Year in 2020 and won the NHS@70 Excellence Awards UK for outstanding Contribution to Midwifery. 'Bola manages the MCH community of practice (CoP).

Management & Support



Mrs Tutu Asielue. A Business manager in the NHS. Formerly responsible for managing Service Operations across severe, complex and non-Psychotic services in Barnet NHS Trust Mental Health. Mrs Asielue is NIDSG's Secretary General and a trustee, responsible for development and adherence to all policies, and managing NIDSG's finances. She is also the Programme Manager responsible for managing the Mental Health initiatives.



Mrs Hafsat Dagazau is the NIDSG Charity's Maternal and child health clinical programme manager, and manages all activities relating to delivering MCH clinics in IDP camps and follow up treatment for critically ill patients. Mrs is a graduate of University of Maiduguri and lives in both Nigeria and UAE.



Hafsat Mohammed is an International Business graduate and the NIDSG's Programme Officer in Nigeria. She co-ordinates activities, manages finances and logistics and supports the NIDSG clinical teams in Nigeria.



Kevin Obi Is NIDSG's Chairman and Founder and has overall management responsibility for all NIDSG's activities.



NIDSG AUDITED FINANCIAL STATEMENTS FOR THE YEAR ENDED 31st DECEMBER 2025

"Brighten the corner you're in!"

NIDSG - FINANCIAL STATEMENTS FOR THE YEAR ENDED 31ST DECEMBER 2025

CORPORATE INFORMATION

THE GROUP

NIDSG is a UK based charity, registered in October 2020 with The Charity Commission of England and Wales (Charity number 1191702). NIDSG is also registered as Diaspora IDP Support Initiative In Nigeria, as a non-profit making organization, registered on the 12th of October 2023 (Registration number 7177679) under the Companies and Allied Matters Act 2004 LFN as amended.

ADDRESS

UK: 42 West Avenue, London N3 1AX
Nigeria: Suit 115 Deo gratis Plaza Utako, Abuja, Nigeria

BANKERS

NatWest Bank (Uk)
First Bank Plc (Nigeria)

TRUSTEES	**DESIGNATION**
Kevin Obi	Executive Chairman
Mrs Adetutu Asieiue	Charity Secretary
Dr Geolfrey Ijomah	Trustee
Dr Zainab Imam	Trustee
Dr Olawale Lagundoye	Trustee
Dr Olufemi Adedeji Adebajo	Trustee
Prof Rotimi Jaiyemisi	Trustee

INDEPENDENT REVIEW

Edward Osuntokun ACMA, GCMA (990921087)
21 Wood Close
London NW9 7NR

NIDSG

REPORT OF THE TRUSTEES FOR THE YEAR ENDED 31ST DECEMBER 2025

The Trustees submit with pleasure their report together with the balance sheet of the company as of 31st December 2025 and statement of financial performance as at that date.

PRINCIPAL ACTIVITIES

NDISG (Nigerian IDP Diaspora Support Group) was started to help victims of conflict and internally displaced people (IDPs) in Nigerian, in diaspora and 'friends of NIDSG' who were concerned about the plight of IDPs and felt a moral obligation to give back. In 2024 our work expanded to primary health care systems strengthening across Nigeria, mainly in primary healthcare.

NIDSG focuses on two clinical areas in Nigeria

- Mental Health and Psycho-social support (MHPSS)
- Maternal and Child Health (MCH)

NIDSG also supports two key populations:

- IDPS and people supporting communities impacted by conflict and traumatic events.
- Nationwide primary health care capacity building, working in collaboration with State and Federal Health authorities focused mainly in medically underserved rural areas.

INCORPORATION AND COMMENCEMENT OF BUSINESS

The group was registered in October 2020, by the Charity Commission of England and Wales. NIDSG was registered as Diaspora IDP Support Initiative in Nigeria on 12th October 2023 and commenced operations immediately.

STATE OF AFFAIRS AS AT 31ST DECEMBER 2025

In the opinion of the Trustees, the state of the Group's affairs is satisfactory.

	2025	2024
FINANCIAL SUMMARY	**£**	**£**
Property, Plant and Equipment	1,703.13	2,554.69
Net Current Assets	12,663.25	11,214.81
	14,366.38	13,769.50
Total Income	30,901.41	58,135.56
Less Total Expense	(31,250.19)	(50,985.90)
Deficit	(348.78)	7,149.66

TRUSTEES

The names of the directors who have held office during the year and at the date of this report are Follows:

Kevin Obi	Executive Chairman
Mrs Adetutu Asieiue	Charity Secretary

NIDSG
Detail Profit and Loss Account item for the year ended 31st December 2025

	2025	2024
	£	£
Cash and Cash equivalents		
Cash at hand		
Bank balance	9,516.61	
		8,763.83
	9,516.61	**8,763.83**
Accumulated fund		
As at 1st		-
January 2025	10,886.87	
Surplus / Deficit for the year	-348.78	
		7,149.66
	10,538.09	**7,149.66**
Revenue		
Grant		
THET(restricted fund)	2,471.67	
		47,470.00
Total Grant		
	2,471.67	**47,470.00**
International Income		
Benefits in Kind (Flights/Experts)	10,270.30	
Donationss from friends of NIDSG	8,304.46	
		4,708.12
Other	694.27	
		313.30
TOTAL INTERNATIONAL INCOME		
	19,269.03	**5,021.42**
Local Income		
Sponsorship from NNPC Retail Ltd and Scib& Co	4,582.72	
		4,901.96
Donations from friends of NIDSG	4,578.00	
		742.18
TOTAL LOCAL INCOME		
	9,160.72	**5,644.14**

GLOBAL INCOME		
	30,901.41	**58,135.56**
Project Execution Cost		
Project implementation		
	2,997.07	23,346.42
Project management		
	11,807.66	7,335.28
Transportation		
	1,882.09	11,994.43
	16,686.82	**42,676.13**
Expenditure		
International Travel	10,270.30	
		1,690.41
Training of lay mental trauma counsellors		
		1,492.83
Pregnant women and babies		
clinics		300.19
General Admin expenses		
	3,376.76	3,289.55
Foreign exchange gains	-357.48	
Audit Fees	250.00	
		245.10
Depreciation	851.56	
		1,277.34
Bank Charges	172.23	14.35
	14,563.37	**8,309.77**
Payables		
Audit Fees	250.00	
		245.10
	250.00	
		245.10
Receivables		
NNPC		
	3,146.64	**2,455.98**

BALANCE SHEET AS AT 31st DECEMBER 2025

	NOTES	2025 £	2024 £
NON-CURRENT ASSETS			
Property, plant and equipment	1	1,703.13	2,554.89
		1,703.13	**2,554.89**
CURRENT ASSETS			
Cash and cash equivalents	2	9,516.61	8,763.88
Receivables	8	3,146.64	2,450.98
		12,663.25	**11,214.86**
TOTAL ASSETS		**14,366.38**	**13,769.75**
EQUITY			
Accumulated Fund	3	10,538.09	10,886.87
Current Liabilities			
Payables	7	250.00	245.10
Deferred Income		3,578.29	2,637.53
Total Equity		**14,366.38**	**13,769.50**

The financial statements were approved by the Board of Trustees on 1st October 2026.



Kevin Obi
Executive Chairman, NIDSG



NIDSG AUDITED FINANCIAL STATEMENTS FOR THE YEAR ENDED 31st DECEMBER 2025

"Brighten the corner you're in!"

NIDSG - FINANCIAL STATEMENTS FOR THE YEAR ENDED 31ST DECEMBER 2025

CORPORATE INFORMATION

THE GROUP

NIDSG is a UK based charity, registered in October 2020 with The Charity Commission of England and Wales (Charity number 1191702). NIDSG is also registered as Diaspora IDP Support Initiative In Nigeria, as a non-profit making organization, registered on the 12th of October 2023 (Registration number 7177679) under the Companies and Allied Matters Act 2004 LFN as amended.

ADDRESS

UK: 42 West Avenue, London N3 1AX
Nigeria: Suit 115 Deo gratis Plaza Utako, Abuja, Nigeria

BANKERS

NatWest Bank (Uk)
First Bank Plc (Nigeria)

TRUSTEES	**DESIGNATION**
Kevin Obi	Executive Chairman
Mrs Adetutu Asieiue	Charity Secretary
Dr Geolfrey Ijomah	Trustee
Dr Zainab Imam	Trustee
Dr Olawale Lagundoye	Trustee
Dr Olufemi Adedeji Adebajo	Trustee
Prof Rotimi Jaiyemisi	Trustee

INDEPENDENT REVIEW

Edward Osuntokun ACMA, GCMA (990921087)
21 Wood Close
London NW9 7NR

NIDSG

REPORT OF THE TRUSTEES FOR THE YEAR ENDED 31ST DECEMBER 2025

The Trustees submit with pleasure their report together with the balance sheet of the company as of 31st December 2025 and statement of financial performance as at that date.

PRINCIPAL ACTIVITIES

NDISG (Nigerian IDP Diaspora Support Group) was started to help victims of conflict and internally displaced people (IDPs) in Nigerian, in diaspora and 'friends of NIDSG' who were concerned about the plight of IDPs and felt a moral obligation to give back. In 2024 our work expanded to primary health care systems strengthening across Nigeria, mainly in primary healthcare.

NIDSG focuses on two clinical areas in Nigeria

- Mental Health and Psycho-social support (MHPSS)
- Maternal and Child Health (MCH)

NIDSG also supports two key populations:

- IDPS and people supporting communities impacted by conflict and traumatic events.
- Nationwide primary health care capacity building, working in collaboration with State and Federal Health authorities focused mainly in medically underserved rural areas.

INCORPORATION AND COMMENCEMENT OF BUSINESS

The group was registered in October 2020, by the Charity Commission of England and Wales. NIDSG was registered as Diaspora IDP Support Initiative in Nigeria on 12th October 2023 and commenced operations immediately.

STATE OF AFFAIRS AS AT 31ST DECEMBER 2025

In the opinion of the Trustees, the state of the Group's affairs is satisfactory.

	2025	2024
FINANCIAL SUMMARY	**£**	**£**
Property, Plant and Equipment	1,703.13	2,554.69
Net Current Assets	12,663.25	11,214.81
	14,366.38	13,769.50
Total Income	30,901.41	58,135.56
Less Total Expense	(31,250.19)	(50,985.90)
Deficit	(348.78)	7,149.66

TRUSTEES

The names of the directors who have held office during the year and at the date of this report are Follows:

Kevin Obi	Executive Chairman
Mrs Adetutu Asieiue	Charity Secretary

NIDSG
Detail Profit and Loss Account item for the year ended 31st December 2025

	2025	2024
	£	£
Cash and Cash equivalents		
Cash at hand		
Bank balance	9,516.61	
		8,763.83
	9,516.61	**8,763.83**
Accumulated fund		
As at 1st		-
January 2025	10,886.87	
Surplus / Deficit for the year	-348.78	
		7,149.66
	10,538.09	**7,149.66**
Revenue		
Grant		
THET(restricted fund)	2,471.67	
		47,470.00
Total Grant		
	2,471.67	**47,470.00**
International Income		
Benefits in Kind (Flights/Experts)	10,270.30	
Donationss from friends of NIDSG	8,304.46	
		4,708.12
Other	694.27	
		313.30
TOTAL INTERNATIONAL INCOME		
	19,269.03	**5,021.42**
Local Income		
Sponsorship from NNPC Retail Ltd and Scib& Co	4,582.72	
		4,901.96
Donations from friends of NIDSG	4,578.00	
		742.18
TOTAL LOCAL INCOME		
	9,160.72	**5,644.14**

GLOBAL INCOME		
	30,901.41	**58,135.56**
Project Execution Cost		
Project implementation		
	2,997.07	23,346.42
Project management		
	11,807.66	7,335.28
Transportation		
	1,882.09	11,994.43
	16,686.82	**42,676.13**
Expenditure		
International Travel	10,270.30	
		1,690.41
Training of lay mental trauma counsellors		
		1,492.83
Pregnant women and babies		
clinics		300.19
General Admin expenses		
	3,376.76	3,289.55
Foreign exchange gains	-357.48	
Audit Fees	250.00	
		245.10
Depreciation	851.56	
		1,277.34
Bank Charges	172.23	14.35
	14,563.37	**8,309.77**
Payables		
Audit Fees	250.00	
		245.10
	250.00	
		245.10
Receivables		
NNPC		
	3,146.64	**2,455.98**

BALANCE SHEET AS AT 31st DECEMBER 2025

	NOTES	2025 £	2024 £
NON-CURRENT ASSETS			
Property, plant and equipment	1	1,703.13	2,554.89
		1,703.13	**2,554.89**
CURRENT ASSETS			
Cash and cash equivalents	2	9,516.61	8,763.88
Receivables	8	3,146.64	2,450.98
		12,663.25	**11,214.86**
TOTAL ASSETS		**14,366.38**	**13,769.75**
EQUITY			
Accumulated Fund	3	10,538.09	10,886.87
Current Liabilities			
Payables	7	250.00	245.10
Deferred Income		3,578.29	2,637.53
Total Equity		**14,366.38**	**13,769.50**

The financial statements were approved by the Board of Trustees on 1st October 2026.



Kevin Obi
Executive Chairman, NIDSG