DR. S.G. OSENI FOUNDATIONS



COMPREHENSIVE PROJECT PLAN (2025–2035)

Strategic Focus (2025–2035)

Over the next decade, the Dr. S.G. Oseni Foundations will strategically position itself as a transformative force across the African continent and beyond, with a clear roadmap guiding its actions and investments from 2025 to 2035. The foundation's strategic focus is built on three core principles: **geographical targeting**, **phased expansion**, and values-driven impact.

First and foremost, Africa will remain the central focus of our work, receiving 70% of our total programming and operational investments. This prioritization stems from the recognition that Africa, particularly West Africa, continues to face significant challenges in areas such as public health, education, housing, and social inclusion. By channeling the majority of our resources into Africa, we aim to address these systemic issues and create meaningful, measurable, and long-lasting change. Our commitment is not just to intervene but to build sustainable, community-owned solutions that uplift vulnerable populations and help bridge the inequality gap across the region.

Our approach will be implemented in three distinct phases. Phase One will focus on Nigeria (2025–2028), laying the groundwork for scale by piloting key projects, developing institutional capacity, and forging local partnerships. Nigeria, as the most populous country in Africa and home to diverse social and economic challenges, provides a critical launchpad for our vision. Once strong results and proof-of-concept are established, we will move to Phase Two (2028–2032), which expands our initiatives across six additional West African countries—Ghana, Benin, Togo, Sierra Leone, Liberia, and Senegal. These countries were selected based on a mix of need, strategic relevance, and the potential for regional collaboration.

Phase Three (2032–2035) will extend our reach globally, particularly to Europe and America, through strategic partnerships, research, policy advocacy, and diaspora engagement. This phase is not about direct service delivery but rather about mobilizing global networks to sustain and scale our work in Africa. By influencing policy, leveraging innovation, and tapping into the energy and expertise of the African diaspora, we aim to drive systemic change that benefits communities at home and abroad.

Throughout the entire strategic period, the foundation will be guided by its core values of equity, compassion, and impact. These values will inform every decision, ensuring that our work remains people-centered, inclusive, and purpose-driven. We envision a future where every child, woman, and underserved individual has access to basic healthcare, education, and safe shelter, and our strategic focus for 2025–2035 is designed to make that future a reality.

Phase 1: Nigeria (2025–2028)

The first phase of the Dr. S.G. Oseni Foundations' 10-year project plan will begin in Nigeria, serving as the pilot country and strategic entry point for the Foundation's broader West African agenda. Scheduled to run from 2025 to 2028, this phase is critical for laying a solid operational, institutional, and impact-driven foundation upon which the rest of the regional expansion will be built.

Nigeria was deliberately chosen as the starting point due to its high population, diverse socio-economic landscape, and urgent development needs, particularly in the areas of healthcare, education, housing, and youth empowerment. As Africa's most populous country, Nigeria presents both a challenge and an opportunity. A successful

intervention here not only brings immediate relief to millions of lives but also offers scalable models that can be adapted to other countries in the region.

With 40% of the total project budget allocated to this phase, the Foundation aims to deliver a high-impact combination of infrastructure, service delivery, and human capital development programs. One of the flagship initiatives will be the establishment of 50 community health clinics in underserved urban and rural areas across key states such as Lagos, Ogun, Oyo, Kwara, and the FCT (Federal Capital Territory). These clinics will focus on maternal and child health, immunizations, malaria and HIV treatment, and general outpatient care. The clinics will be staffed by a team of over 300 trained healthcare professionals, with special attention to culturally sensitive care and preventive health education.

To tackle the growing burden of cancer in Nigeria, the Foundation also plans to establish 5 regional cancer care centres capable of screening over 100,000 people annually. These centres will offer services such as diagnostics, chemotherapy access, patient counselling, and palliative care—services that are currently beyond reach for many Nigerians, particularly those in low-income or rural communities.

On the educational front, the Foundation will train 1,000 community health educators who will work in schools, religious centers, and local gatherings to raise awareness on hygiene, nutrition, disease prevention, and family health practices. Their grassroots engagement will serve as a preventive extension of the health clinics, encouraging healthy habits and early detection of illness.

In the area of housing, the Foundation will construct 200 two-bedroom housing units equipped with solar-powered electricity and borehole water systems, to be distributed to widows, internally displaced persons (IDPs), and low-income families. These homes

will serve not just as shelter, but as a pathway to dignity, stability, and long-term wellbeing for marginalized groups.

To support vulnerable youth, especially school-age children from low-income households, the Foundation will sponsor 1,000 students annually with comprehensive support packages that cover school fees, daily meals, hygiene supplies, and uniforms. These interventions will help reduce the rate of school dropouts and ensure that children have a fair shot at academic success and personal growth.

From the outset, monitoring and evaluation (M&E) will be an integral part of Phase 1. A comprehensive baseline assessment will be conducted in Q3 of 2025, followed by annual impact assessments starting in Q4 of 2026. The Foundation will also establish community feedback mechanisms such as town hall forums and mobile-based surveys to ensure transparency, accountability, and community participation.

Overall, Phase 1 is designed not only to deliver measurable impact but to serve as a blueprint—one that reflects the Foundation's ability to adapt to complex needs, build local trust, and deliver transformative services. The lessons, systems, and relationships built during this phase will be pivotal for the successful expansion to the rest of West Africa in the following years.

Phase 2: West Africa Expansion (2028–2032) – Detailed Explanation

Building on the foundational success of Phase 1 in Nigeria, Phase 2 of the Dr. S.G. Oseni Foundations' project plan (2028–2032) will mark a bold and strategic expansion into six additional West African countries: Ghana, Benin, Togo, Sierra Leone, Liberia, and Senegal. This phase is designed to scale tested models, replicate impactful programs, and localize interventions based on the unique needs of each target country.

This stage will be allocated 30% of the total project budget, reflecting the Foundation's deep commitment to a regional transformation that is inclusive, scalable, and locally driven. Each country was selected based on a combination of developmental need, cultural alignment, potential for partnerships, and regional influence. By focusing on countries with both high potential and high need, the Foundation aims to maximize social return on investment while fostering regional cooperation and solidarity.

At the heart of Phase 2 is the deployment of Mobile Health Clinics, with at least two units operational in each country. These clinics will provide critical medical services, particularly in remote or underserved areas that lack access to fixed healthcare facilities. Services will include emergency response, vaccinations, disease screening, maternal care, and health education. The mobility and adaptability of these clinics make them particularly suitable for rural and post-crisis regions.

To sustain the gains made in cancer awareness in Nigeria, the Foundation will launch annual cancer awareness roadshows in each of the six countries. These community-driven campaigns will be focused on early detection, education, and stigma reduction. Through mobile screenings, local radio campaigns, partnerships with ministries of health, and grassroots volunteers, these roadshows aim to educate hundreds of thousands of people each year, especially in areas where cancer is poorly understood or diagnosed too late.

Recognizing the critical link between sanitation and public health, the Foundation will also implement WASH (Water, Sanitation, and Hygiene) upgrades in 200 schools across the region. This intervention will involve the installation of boreholes, gender-sensitive toilet facilities, and handwashing stations, along with the integration of hygiene education into school curricula. These improvements are expected to reduce

preventable diseases, improve school attendance (especially for girls), and create safer learning environments.

To address youth unemployment and underemployment—a major challenge across West Africa—the Foundation will launch Youth Empowerment and Vocational Training Programs in each of the six countries. These programs will establish skill acquisition centers offering courses in tailoring, carpentry, agribusiness, ICT, and small business development. Graduates of these programs will be supported with start-up toolkits and mentorship, enabling them to contribute to their local economies and lead self-sustaining lives.

Additionally, the Foundation will roll out Post-Crisis Housing Support for families affected by conflict, flooding, and other disasters. Using modular housing technologies, these homes can be quickly deployed to provide safe, temporary or permanent shelter, especially in areas recovering from displacement or humanitarian emergencies.

Monitoring and evaluation in Phase 2 will be both centralized and country-specific. A regional performance dashboard will be maintained, and quarterly review meetings will be conducted with in-country program leads. To ensure accountability and integration with regional frameworks, the Foundation will work in close collaboration with the West African Health Organization (WAHO) and other intergovernmental bodies.

Phase 2 represents a critical scaling moment for the Dr. S.G. Oseni Foundations. By exporting proven models, investing in local partnerships, and embedding programs in national systems, the Foundation aims to touch millions of lives while strengthening the resilience and self-sufficiency of communities across West Africa. The outcomes

of this phase will further position the Foundation as a leader in regional development and set the stage for a global impact strategy in the years to follow.

Phase 3: Global Reach (2032–2035)

Phase 3 of the Dr. S.G. Oseni Foundations' long-term strategy marks a significant shift from direct regional implementation to a broader, globally focused agenda. Spanning from 2032 to 2035, this final phase is designed to leverage international networks, partnerships, and advocacy platforms to sustain and amplify the work initiated in Africa. With 10% of the total project budget earmarked for this stage, the focus moves beyond infrastructure and service delivery to influence policy, innovation, diaspora engagement, and global development cooperation.

By this stage, the Foundation would have successfully executed robust programs across Nigeria and at least six other West African countries, positioning it as a credible voice and actor in the global development space. Phase 3 seeks to translate this credibility into long-term sustainability and influence by embedding African-led solutions into global health, education, and humanitarian development conversations.

A key initiative in this phase is the Foundation's engagement in health policy advocacy, particularly within Europe and the United States. The Foundation will collaborate with diaspora-led health policy groups, philanthropic councils, and development institutions to champion inclusive health systems and social investment models that reflect the needs of African communities. By participating in forums, working groups, and policy consultations, the Foundation will raise the visibility of its impact, share best practices, and influence global funding priorities in alignment with African realities.

Another strategic pillar of Phase 3 is Research and Innovation Partnerships. The Foundation plans to co-create pilot studies and community health research projects in

collaboration with global universities, research centers, and health-focused think tanks. Areas of interest will include non-communicable disease prevention, digital health solutions, maternal and child health innovations, and climate-resilient community planning. These partnerships will help validate the Foundation's models, attract global grant funding, and generate data to inform policy both locally and internationally.

Perhaps one of the most critical elements of this phase is diaspora engagement. With millions of Africans living abroad—especially in the UK, US, Canada, and parts of Europe—the Foundation sees a strategic opportunity to mobilize the diaspora for resource generation, technical expertise, and influence. A comprehensive Diaspora Engagement Campaign will be launched to recruit ambassadors, host fundraising galas, activate professional networks, and build volunteer programs that allow diaspora communities to "give back" to Africa meaningfully and sustainably.

Monitoring and evaluation during Phase 3 will include biannual global impact reviews, stakeholder roundtables, and independent audits conducted in partnership with international development organizations. These evaluations will focus on how well the Foundation's advocacy, partnerships, and diaspora strategies contribute to the continuity and scale-up of its core mission in Africa.

Ultimately, Phase 3 is about creating a sustainable global support ecosystem for the Foundation's Africa-first mission. It positions the Dr. S.G. Oseni Foundations not just as an implementer of programs, but as a thought leader, knowledge partner, and catalyst for global solidarity. Through targeted advocacy, knowledge sharing, and diaspora collaboration, this phase will ensure that the impact made over the past decade continues to grow and evolve—long after the initial project cycle concludes.

Impact Goals by 2035

The Dr. S.G. Oseni Foundations has set forth ambitious but achievable impact goals to be realized by the end of the 10-year plan in 2035. These goals are not just numbers—they represent lives touched, communities transformed, and systems strengthened. Each target has been carefully projected based on the scope of interventions in Phases 1 to 3, as well as the Foundation's core commitment to evidence-based, high-impact service delivery.

1. 10+ West African Countries Reached

By 2035, the Foundation aims to have active footprints in at least 10 West African countries, scaling from the original 7 (including Nigeria) and incorporating additional nations as needed based on impact, demand, and strategic partnerships. This expanded reach will position the Foundation as a key development player in the region.

2. 5 Million+ Lives Touched

Through direct and indirect services—such as healthcare delivery, educational support, housing, and awareness campaigns—the Foundation expects to reach and positively influence the lives of over 5 million individuals. This includes patients treated, students supported, families housed, and community members educated or empowered.

3. 1,000+ Homes Built

Housing is a central part of the Foundation's social inclusion program. By 2035, over 1,000 homes will be constructed for widows, displaced families, and low-

income communities. These homes will serve as both shelter and symbols of restored dignity and hope.

4. 500,000+ Students Empowered

Education-focused interventions, including scholarships, learning materials, meals, hygiene kits, and mentorship, will benefit more than 500,000 students. The goal is not only to keep children in school but to help them thrive academically and socially.

5. 100+ Health Projects Deployed

Across three phases, the Foundation will execute over 100 health-related initiatives, ranging from clinic construction and mobile units to cancer screenings, health educator training, and sanitation upgrades. These projects will enhance access to quality healthcare across underserved areas.

These impact goals serve as the **north star** for every activity undertaken within the 10-year timeline. They also provide measurable outcomes for donors, partners, and communities to track the Foundation's success and continued relevance.

Budget Allocation Snapshot

To ensure balanced growth, sustainability, and accountability, the Dr. S.G. Oseni Foundations has outlined a clear and responsible financial allocation model for the decade-long initiative. This budget snapshot reflects strategic foresight in aligning resources with real-world needs and long-term operational requirements.

Region/Focus	Percentage
Nigeria	40%
Other West Africa	30%
Europe & America	10%
Admin & Contingency	20%

Nigeria – 40%

As the launch country and testbed for scalable programs, Nigeria will receive the largest share of the project budget. This investment will fund clinics, housing, education programs, and administrative infrastructure needed to build momentum and credibility.

1. Other West African Countries - 30%

Funding allocated here will be used to adapt and expand successful models from Nigeria into neighbouring countries. It includes operational logistics, staffing, community engagement, and implementation of mobile health, housing, WASH, and youth empowerment programs.

2. Europe & America - 10%

This portion will support global advocacy, diaspora engagement, research collaborations, and fundraising efforts. It also includes hosting donor summits, international campaigns, and maintaining relationships with global development institutions.

3. Administration & Contingency – 20%

A critical portion of the budget is set aside for administration (governance, reporting, staff salaries, compliance) and contingency funds to handle unforeseen challenges such as currency fluctuations, natural disasters, political instability, or public health emergencies. This ensures project continuity and risk mitigation.

This structured financial model ensures that resources are deployed with efficiency, transparency, and equity, while building the resilience needed for long-term operations and impact.