Executive briefing

The Lagos Promise Research Compendium · a geospatial reading of Ìlérí Èkó · The Lagos PROMISE

November 2026

What this is

The Lagos Promise Research Compendium reads every pledge in *Ìlérí Èkó · The Lagos PROMISE* on the ground of Lagos. It keeps the book's own structure (seven pillars, P-R-O-M-I-S-E, and 31 chapters) and quotes every pledge in the book's own words with its printed page: 96 labelled pledges (82 commitments and 14 aspirations), plus 5 unlabelled statements of intent.

For each chapter it asks the same questions: what the pledge commits to, why it matters for Lagos, where it lands, what earlier administrations have already built, what published evidence exists, and what the delivery team will need to measure. Two chapters, health (P.1) and technical education (P.2), also carry a full road-network analysis of access across Lagos.

This is a supportive research interpretation. It does not re-order the PROMISE's priorities or propose alternatives to it, and it implies no government endorsement.

Why a geographical reading

The PROMISE asks to be measured. Its first operating principle is "Measure Before You Promise", and it commits to "face the public in every IBILE division so that failure cannot hide inside a state average" [IE p.7]. Most of its pledges are about where services reach people: hospitals, colleges, secretariats, junctions, markets, the coast. A geographical reading shows where each pledge lands, who it reaches, and what baseline a delivery dashboard will need.

What the research found

1. **The PROMISE is a continuity programme, and the record supports that.** A 64-event continuity record, checked against published sources, traces rail, ports, waterways, health, education and safety institutions back through four administrations since 1999. The PROMISE mostly finishes, scales and connects systems that already exist.
2. **The hospitals named for expansion are where the load already sits.** Of the 16 General Hospitals with published 2019 figures, Ikorodu admitted the most patients and Alimosho the second most, and Odan had the largest medical team. These are the three the book names for expansion by up to 50 per cent.
3. **Health access is already broad, and the PROMISE extends it.** On the road-network model, about 8 in 10 Lagosians live within 10 km of a public hospital today. Ojo General Hospital halves the average trip in Ojo LGA. Two further General Hospitals, placed where the model finds they reach most people (model outputs, not announced sites), would lift that to about 9 in 10.
4. **The technical-college pledge reaches the furthest Local Governments.** The three PROMISE colleges cut the average road trip to a public technical college from 12.0 to 8.7 km and halve the share of Lagosians more than 20 km away. Badagry, the book's choice, is also the model's first

choice. For a further college, the model performs most favourably near Ajah–Sangotedo across the population tests, while Orimedu has its own case as an employment location beside the Lekki Free Zone and the Deep Sea Port. Neither is an officially selected location.

5. **The outer divisions need measured travel times.** In Epe division the median populated square is about half a kilometre from the mapped road network, against about 35 metres in Ikeja division. For creek- and lagoon-side settlements, the real journey (by footpath, motorcycle track or boat) is longer than the road figure. A short field survey would give the "no one left behind" pledges a measured baseline.
6. **Most pledges name a place or a number; few carry a date or a cost.** About four pledges in ten name a place and four in ten a number or target; about one in nine carries its own date. Baselines, milestones and division-level targets are the first work of the delivery dashboard the PROMISE itself commits to.
7. **A few of the book's baselines differ from published sources.** Examples include internally generated revenue and some population totals. The compendium shows each with its source so they can be reconciled before the dashboard is published.

What it means for delivery

- **Publish the siting reasons.** Where the book names no site (new General Hospitals, satellite secretariats, junctions, food hubs), a published siting method applies the book's own principle "Publish and Be Judged".
- **Set baselines by division.** The pledge register already holds the structure for a dashboard: pledge, printed page, place, target, date and division.
- **Start with the most geographic pledges.** Early-warning and risk mapping, the 180 km coast, the ten priority junctions, the satellite secretariats, food hubs in every Local Government and the lagoon-side and riverine communities each have a defined next analysis using open data.

How far the evidence goes

- Spatial analysis is complete for 2 of 31 chapters (P.1, P.2). The other 29 are documentary readings against published sources.
- The road model measures distance, not travel time; it ignores one-way streets and ferries; and it has not yet had sensitivity tests.
- Population grids are modelled and are used only as shares, never as headcounts.
- Engineering studies are briefs only. Nothing in the work is a design, and nothing is validated.
- The pledge register and every chapter's citations were second-checked in November 2026; the remaining open items are listed in the verification status report.

The research package

Item	Purpose
Research Compendium (PDF, with an editable Word copy)	The full research publication: 31 chapters, 21 figures, pledge register, sources
Stakeholder presentation	A 20-minute summary with two live demonstrations

Item	Purpose
Digital story map	Interactive companion: the pledges by pillar, a searchable register, and the P.1 and P.2 analyses
Verification status report	What was checked, what was corrected, what remains open