

Overview of Nigeria's Global Fund Portfolio

CCM Secretariat Presentation to the Nigeria Health Commissioners' Forum

2nd September 2021
Transcorp Hilton, Abuja, FCT.

Outline

- About Global Fund & CCM Nigeria
- Nigeria's Contributions to GF
- GF Investment in Nigeria 2002-2020
- Summary of Achievements
- Nigeria's GF Allocation 2021-2023
- Investment Priorities: HIV, TB and Malaria (2021-2023)
- States Engagement, Ownership & Sustainability Agenda
- Conclusion

About The Global Fund & CCM Nigeria

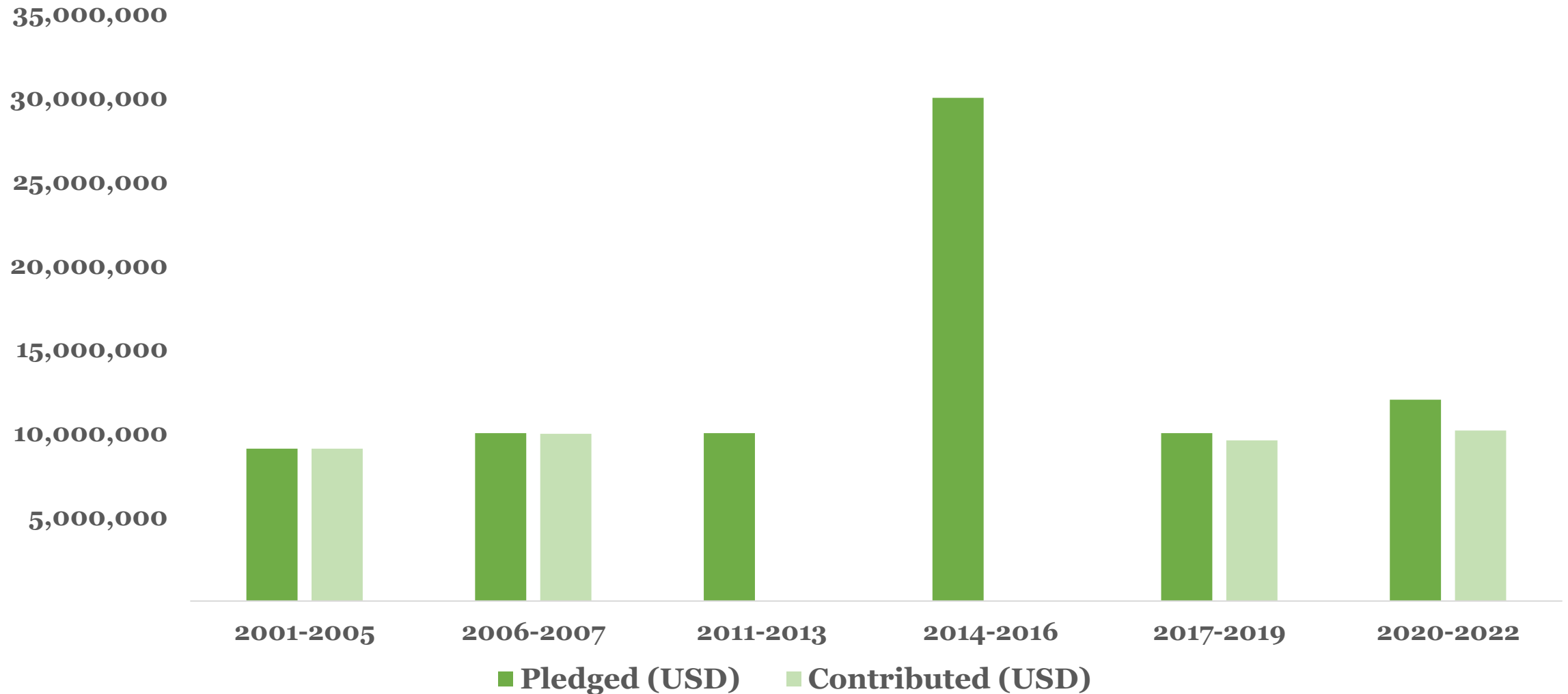


- An innovative monetary mechanism established in 2002
- Mobilises funds from heads of governments and private sector
- Allocates funds to poorer countries with high burden of HIV, tuberculosis and malaria
- Committed to save lives from HTM and strengthen health systems
- The GoN facilitated the establishment of the Country Coordinating Mechanism (CCM) Nigeria in March 2002
- A partnership of public, private and civil society actors (Chaired by the HMM)
- The only recognized entity that can access the Global Fund donations to Nigeria
- Mobilises and oversees the use of GF grants in Nigeria



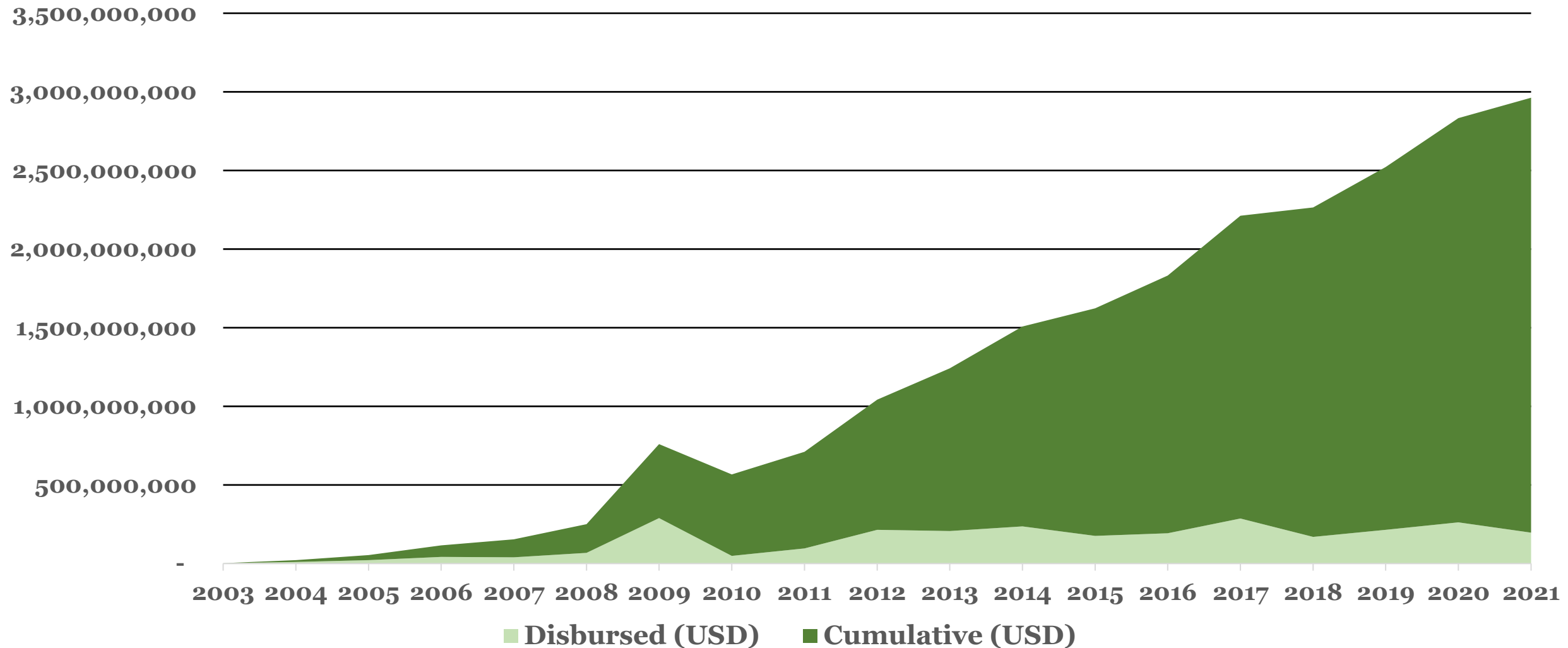
Nigeria's Pledges & Contributions to the GF

Nigeria's Pledges & Contributions by Replenishment



GF Investment in Nigeria 2003-2021

GF Investment in Nigeria 2003-2021



Achievements: HIV/AIDS

- Contributed to **1,536,821** PLHIV on treatment in Nigeria
- Providing lifesaving ARVs for **181,288** PLHIV
- Supported the national AIDS indicator and Impact Survey (NAIIS) survey (\$20M) which provided more precise data about the epidemic in Nigeria –
 - ✓ HIV prevalence **1.3%** (**1.8m** PLHIV)
 - ✓ 1.9 Million people living with HIV in Nigeria
 - ✓ Varied HIV prevalence across states
 - ✓ Low awareness of HIV status
- Increased HIV testing and PLHIV initiation on ART amidst COVID-19 pandemic

Achievements: Tuberculosis

- Case notification rate that stagnated at **53%** increased to **67%** by 2020
- **84%** increase in treatment centres creating more access for TB presumptive nationwide
- PPM contribution increased from **14%** in 2018 to **29%** in 2020.
- Contribution of community to case finding increased from **19%** in 2018 to **30%** in 2020 due to the strategic engagement of CBOs in the grassroots to increase PPM case contribution from the private sector

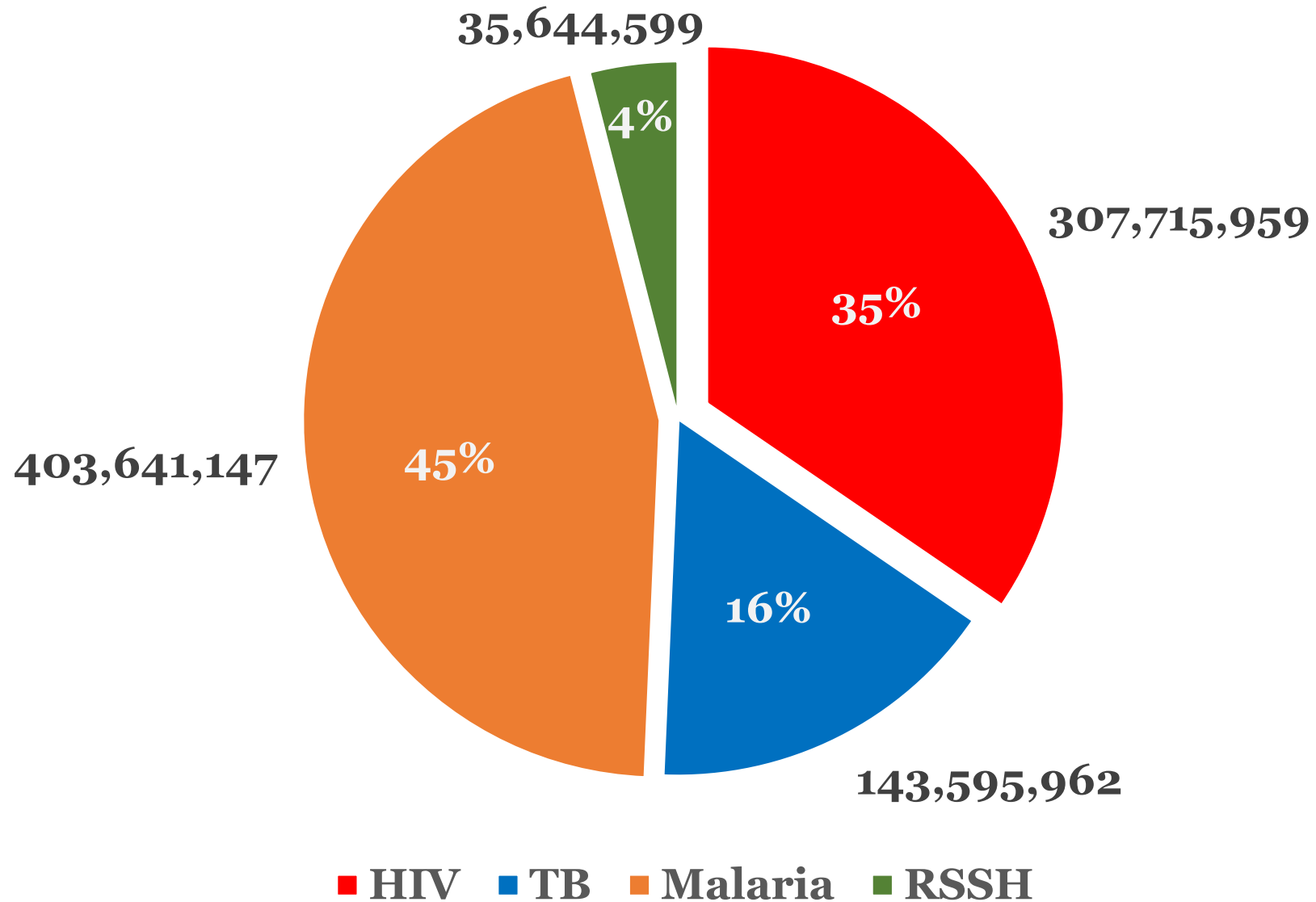
Achievements: Malaria

- Contributed to decline in malaria prevalence from **42%** to **23%** from 2010 – 2018
- At least **11 million** Long Lasting Insecticide Treatment Nets distributed annually through mass campaign to general population
- Routine distribution of LLIN among children <5yrs and preg. women
- At least **4 million** confirmed malaria cases treated annually at public health facilities in 13 states
- **1,381,498** IDPs received a parasitological test, and **1,022,376** cases treated in targeted states
- Seasonal Malaria Chemoprevention intervention reached **11,813,735** children aged 3-59 months in Kano, Yobe and katsina

Achievements: COVID-19

- **USD 273,711,419** allocated to Nigeria for COVID-19 response
- Procured reagents and test kits (PCR & Ag RDTs) for over **1 million** tests
- Provided PPEs for frontline health workers
- Re-purposed TB and HIV laboratory equipment for COVID-19 testing
- **24** ambulances to support states' emergency response
- repair of medical oxygen production plants in 38 tertiary hospitals (on-going)

Nigeria's GF allocation 2021-2023

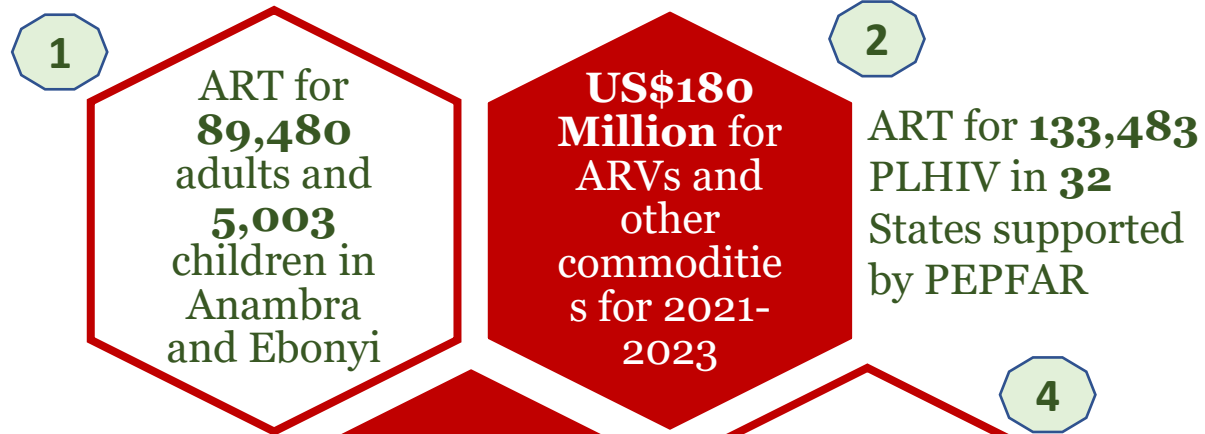


Geographic Coverage of GF Supported Programmes

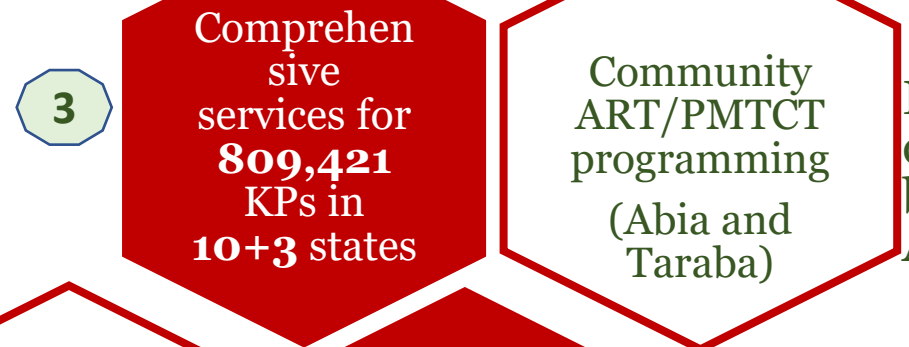
| S/N | State | TB | Malaria | HIV Gen Pop | HIV KP |
|-----|-------------|------|---------|-------------|--------|
| 1 | Abia | Blue | | | Red |
| 2 | Adamawa | Blue | Orange | | |
| 3 | Akwa Ibom | Blue | | | |
| 4 | Anambra | Blue | | Green | Red |
| 5 | Bauchi | Blue | | | |
| 6 | Bayelsa | Blue | | | |
| 7 | Benue | Blue | | | |
| 8 | Borno | Blue | | | |
| 9 | Cross River | Blue | | | |
| 10 | Delta | Blue | Orange | | |
| 11 | Ebonyi | Blue | | Green | Red |
| 12 | Edo | Blue | | | Red |
| 13 | Ekiti | Blue | | | |
| 14 | Enugu | Blue | | | Red |
| 15 | FCT | Blue | | | |
| 16 | Gombe | Blue | Orange | | Red |
| 17 | Imo | Blue | | | Red |
| 18 | Jigawa | Blue | Orange | | 43% |
| 19 | Kaduna | Blue | Orange | | Red |
| 20 | Kano | Blue | Orange | | Red |
| 21 | Katsina | Blue | Orange | | |
| 22 | Kebbi | Blue | | | |
| 23 | Kogi | Blue | | | |
| 24 | Kwara | Blue | Orange | | Red |
| 25 | Lagos | Blue | | | |
| 26 | Nasarawa | Blue | | | |
| 27 | Niger | Blue | Orange | | |
| 28 | Ogun | Blue | Orange | | |
| 29 | Ondo | Blue | | | |
| 30 | Osun | Blue | Orange | | |
| 31 | Oyo | Blue | | | Red |
| 32 | Plateau | Blue | | | Red |
| 33 | Rivers | Blue | | | |
| 34 | Sokoto | Blue | | | |
| 35 | Taraba | Blue | Orange | | Red |
| 36 | Yobe | Blue | Orange | | |
| 37 | Zamfara | Blue | | | |

- TB in 36 States & FCT
- Malaria in 13 States
- HIV ART, PMTCT & HTC programming in 2 States; commodities in 36 States & FCT
- HIV Prevention and Treatment for KP in 13 States

HIV Investment Priorities 2021-2023



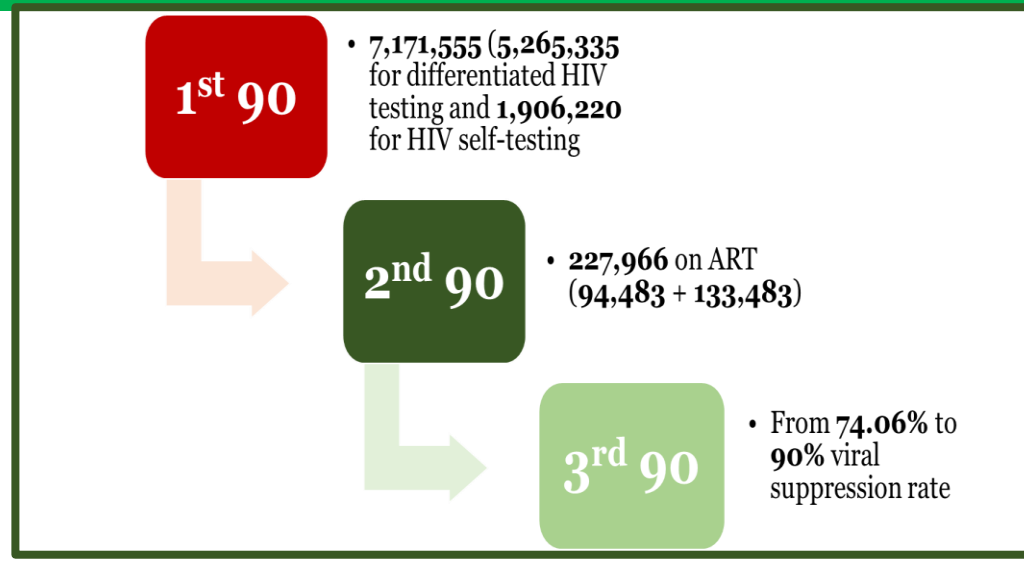
Fill gaps in 12 PEPFAR supported states, including harm reduction



1. Abia
2. Akwa-ibom
3. Taraba
4. Delta
5. Enugu
6. Imo



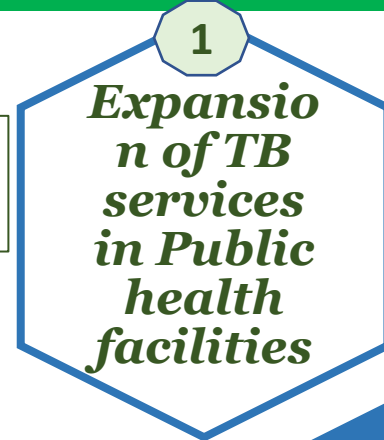
1. Abia
 2. Taraba
 3. Anambra
- * Fill gaps in 7 PEPFAR supported states



Institutional capacity building for Abia & Taraba

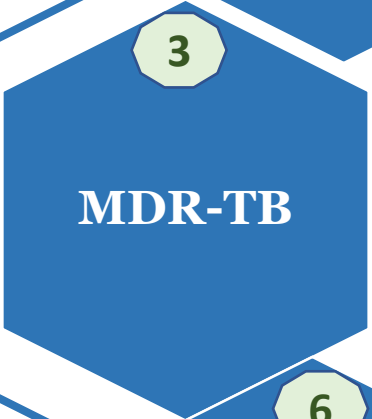
TB Investment Priorities 2021-2023

***60%** coverage by **2023**
*(+ **5,000** DOTS)



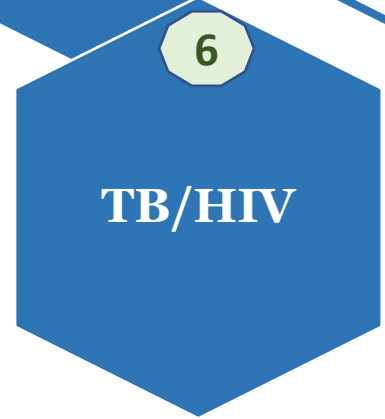
*GX Alert expansion
*Notify and link all positive results to treatment

*Case finding for DR-TB
*Transition to new WHO approved regimen



*Active case findings in the slums
*TB integration with RMNCH (target Children)
*Patient support for DR-TB

Increase PPM contribution to the National TB case notification from 14% in 2019 to 35% in 2023



*Universal HIV testing services for presumptive and TB patients
*Improve access to diagnosis, TPT, ART, etc.

Malaria Investment Priorities 2021-2023

Vector Control:

48,754,487

LLIN in 13 States

Case Management:

Diagnose

16,302,952

& treat

14,779,827

SMC:

36,946,114

children

reached in
10 states by
2023

ICCM:

Diagnose

246,247 &

treat

218,109 in 2

States

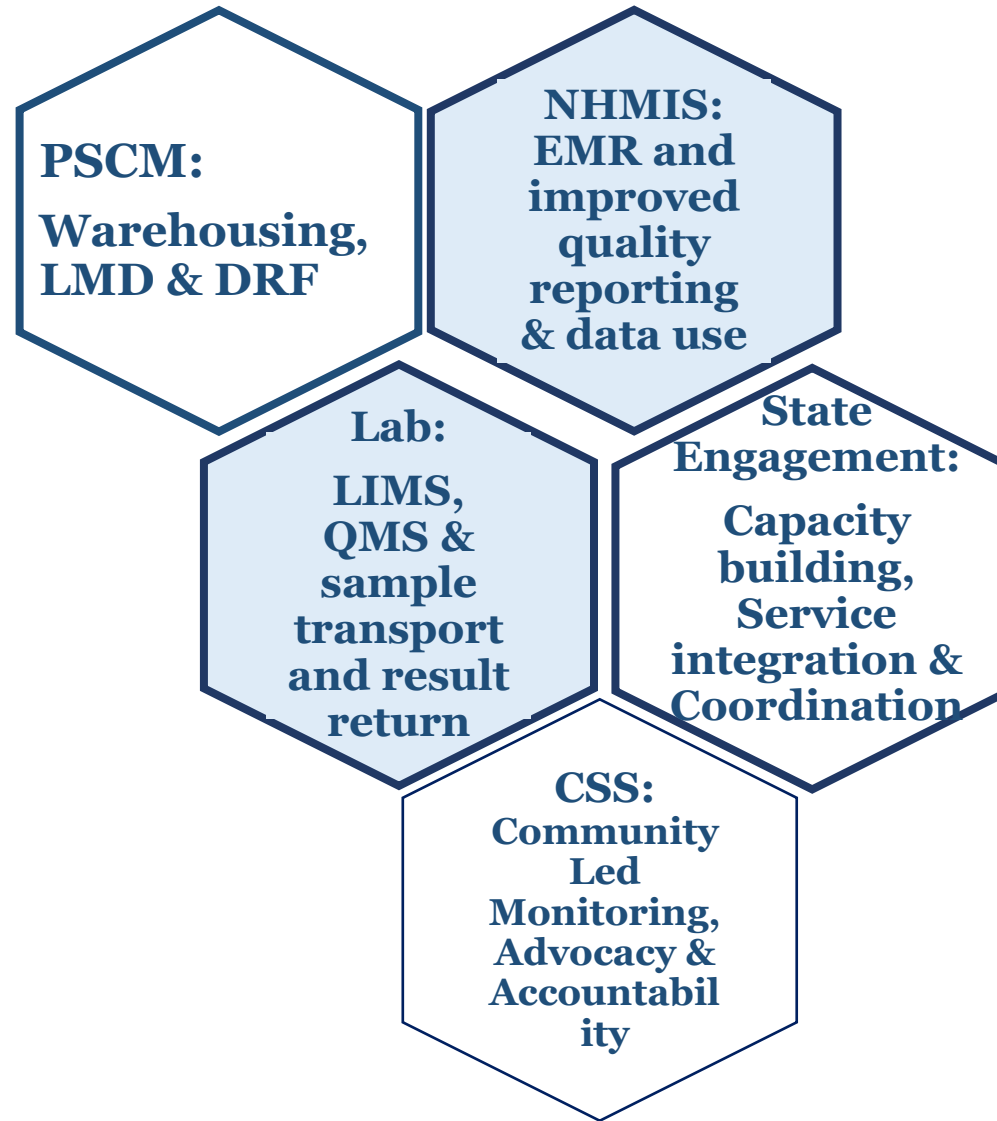
ACSM in
13 states

IDP
population
(400,000)

1. Adamawa
2. Delta
3. Taraba
4. Ogun
5. Osun
6. Kwara
7. Katsina
8. Niger
9. Yobe
10. Kaduna
11. Kano
12. Gombe
13. Jigawa



RSSH Investment Priorities 2021-2023



States Engagement for Ownership and Sustainability

- Align grants implementation arrangements with National & State structures – *How best can this be achieved?*
- Strengthen States structures to manage their programmes optimally – *integrated approach to service delivery and management; abolish programme verticalization*
- Increase State financial investment in health system and disease programmes for increased ownership and sustainability – *fulfilling co-financing requirement of GF*
- Strengthen State structures and systems for more effective oversight and accountability

Conclusion

- The launch of the Health Commissioners' Forum is a step in the right direction
- All patients/service beneficiaries are citizens of the States; therefore, the States need to be at the table where critical investment decisions are made
- The GF funding support to countries is premised on the principle of “additionality” and “gap filling”
- States need to demonstrate leadership and get development partners to align with their health development policies and programmes
- The CCM is committed to collaborative engagement with this Forum to advance the ownership and sustainability agendas

Thank You