



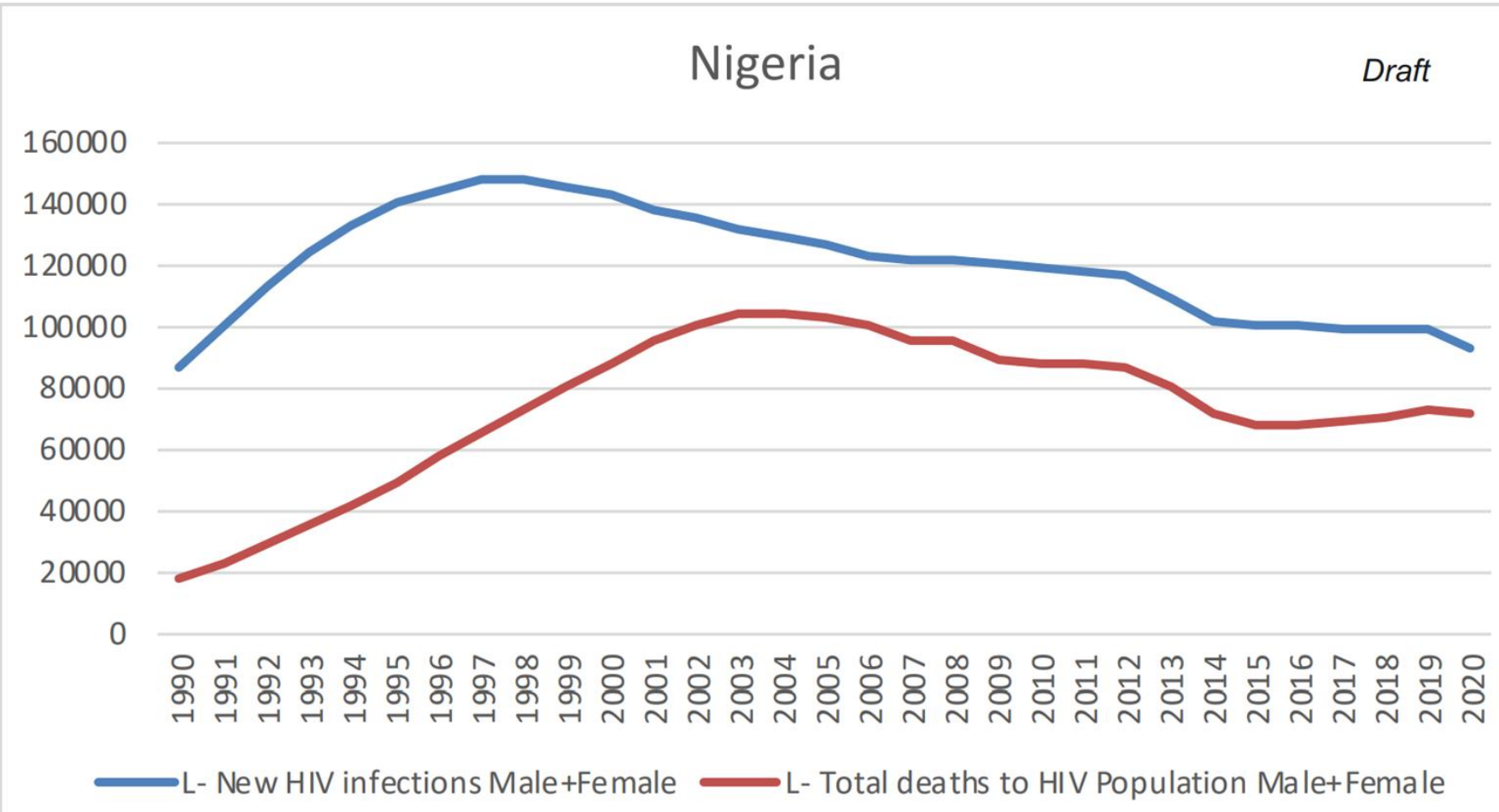
# PEPFAR Nigeria: Updates on the HIV Response

Nigeria Health Commissioners Forum

September 2, 2021

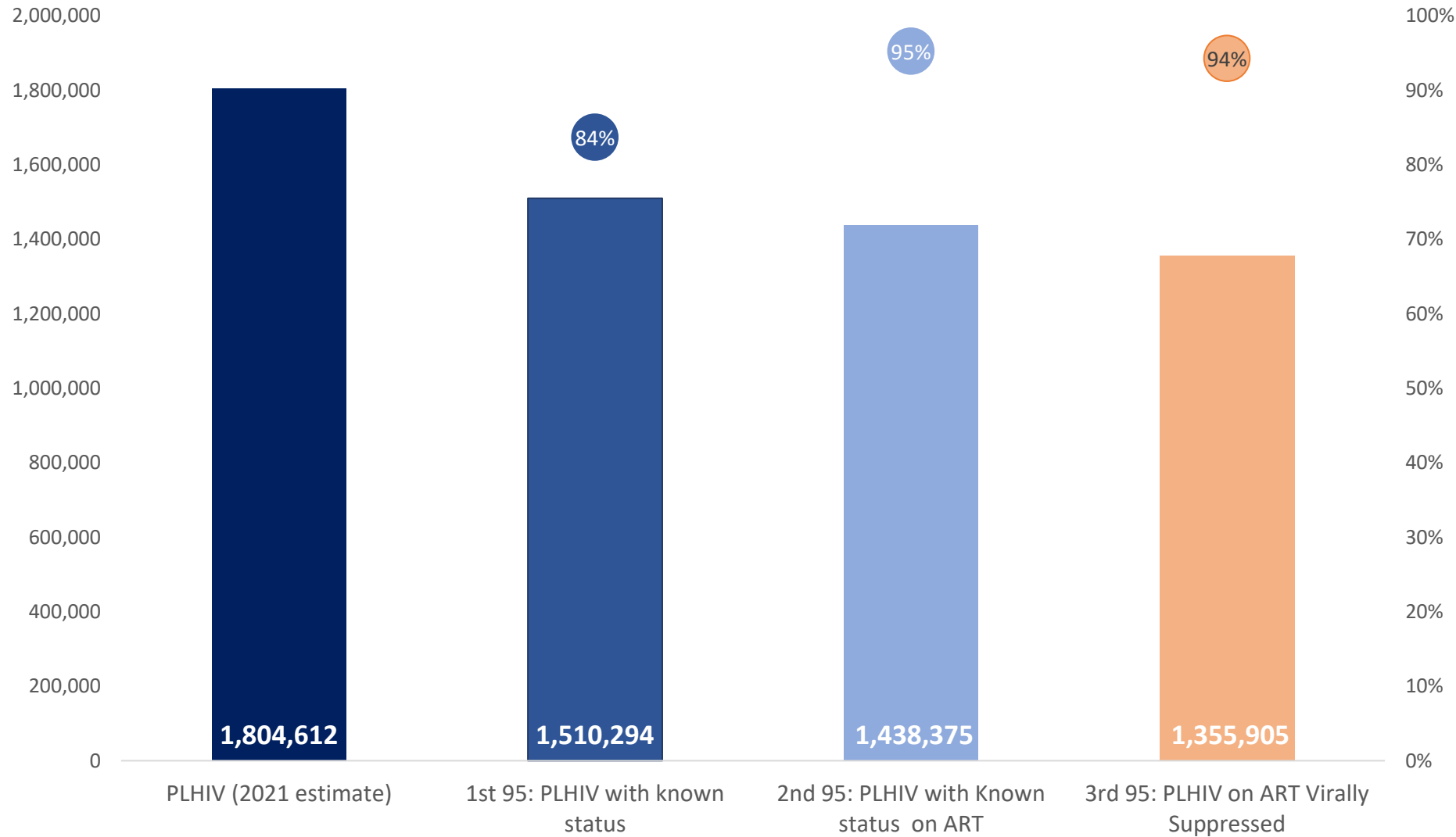
Abuja

# STATES HAVE A LARGE ROLE TO PLAY TO REACH EPI CONTROL



**HIV epidemic control**  
When total number of new infections falls below total number of deaths from all causes among HIV-infected individuals with both declining

# Nigeria is MAKING PROGRESS TOWARDS 95-95-95....



1<sup>st</sup> 95 based on 100% Linkage

2<sup>nd</sup> 95 based on PEPFAR Tx\_curr FY21Q3

3<sup>rd</sup> 95 modeled from 2<sup>nd</sup> 95 using PEPFAR VLS FY21Q3

# A 'SURGE' IN RESOURCES WHERE THE EPIDEMIC IS GREATEST

- National HIV prevalence\*:

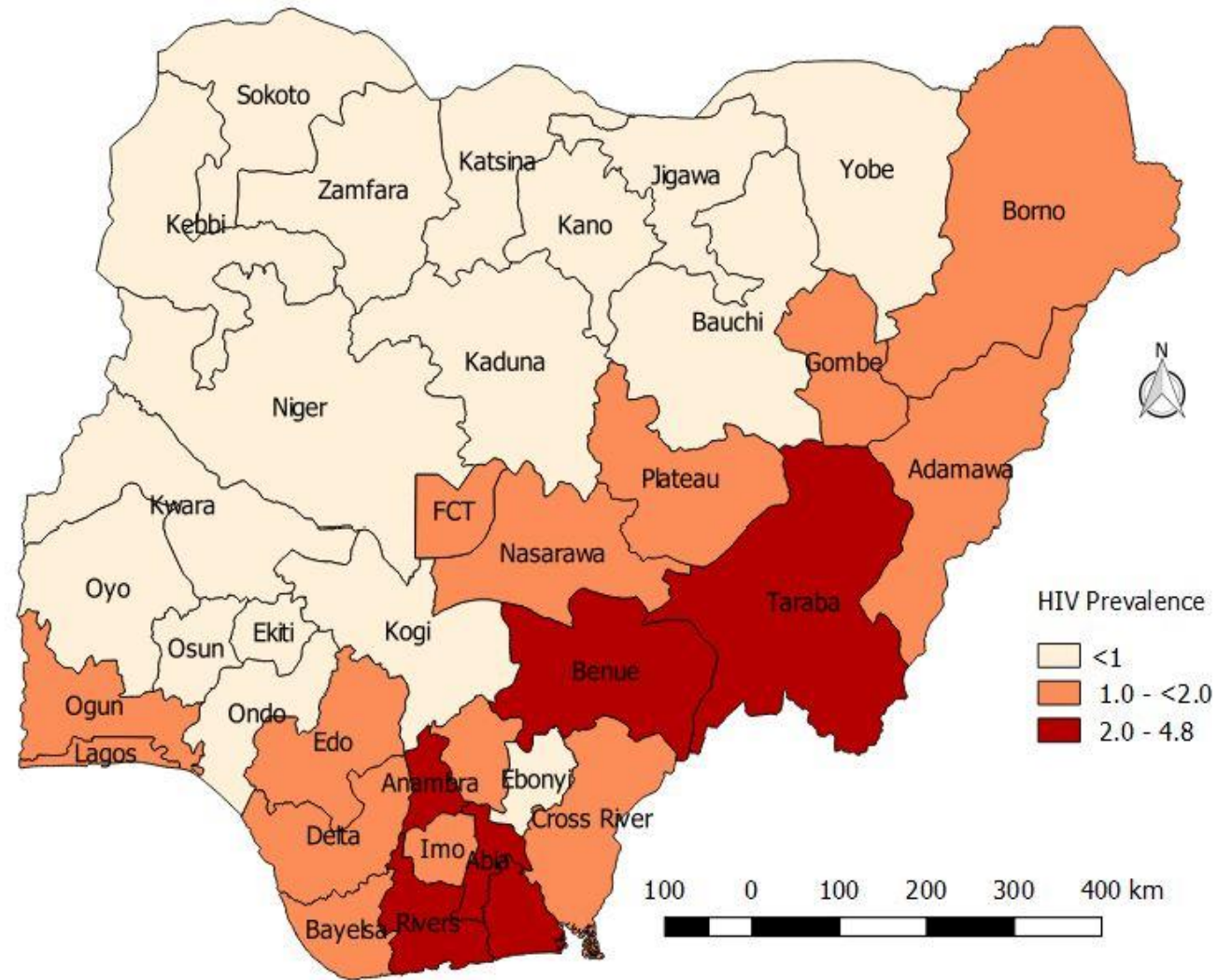
- Ages 15-49 years - 1.3%
- Male - 0.8%; Female - 1.7%

- State Prevalence\*:

- High  $\geq 2\%$  (6 states),
- Medium 1%-1.9% (13 states +FCT),
- Low  $<1\%$  (17 states)

- People living with HIV (PLHIV) in Nigeria

- Total PLHIV: 1.8m #



\*Nigeria AIDS Indicator and Impact Survey 2018

# UNAIDS SPECTRUM 2021

# PICTURE OF HIV EPIDEMIC AT START OF SURGE (2019)

**High Impact Zone**

- High Unmet need
- Low Saturation

PICTURE OF HIV EPIDEMIC AT START OF SURGE (Q3FY 19)

Size of the bubble is TX\_CURR

Unmet needs calculated based on SPECTRUM estimates for PLHIV for 2018

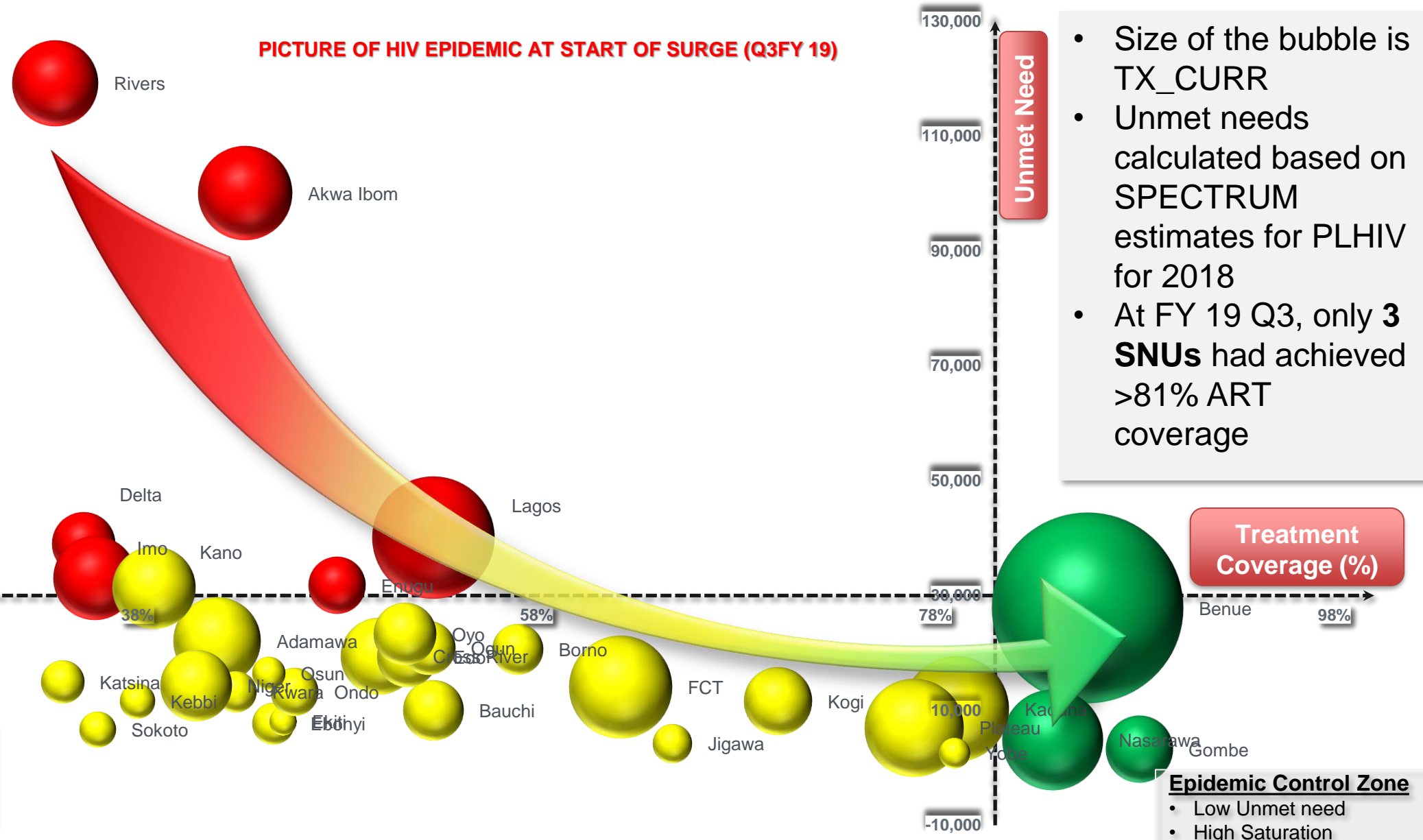
At FY 19 Q3, only 3 **SNUs** had achieved >81% ART coverage

18% Bayelsa

Zamfara

**Low Impact Zone**

- Low Unmet need
- Low Saturation



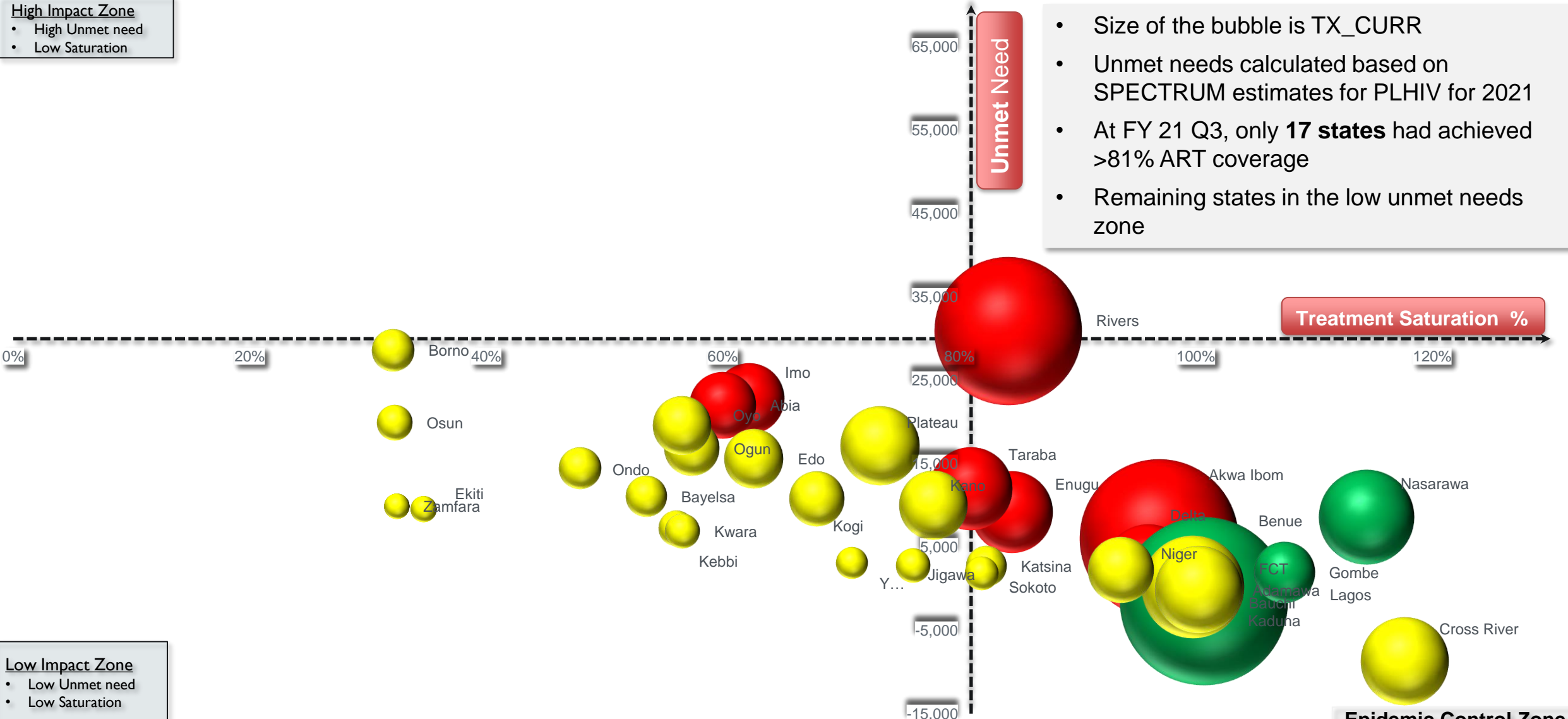


# CURRENT PICTURE OF THE EPIDEMIC

**High Impact Zone**

- High Unmet need
- Low Saturation

- Size of the bubble is TX\_CURR
- Unmet needs calculated based on SPECTRUM estimates for PLHIV for 2021
- At FY 21 Q3, only **17 states** had achieved >81% ART coverage
- Remaining states in the low unmet needs zone



**Low Impact Zone**

- Low Unmet need
- Low Saturation

**Epidemic Control Zone**

- Low Unmet need
- High Saturation



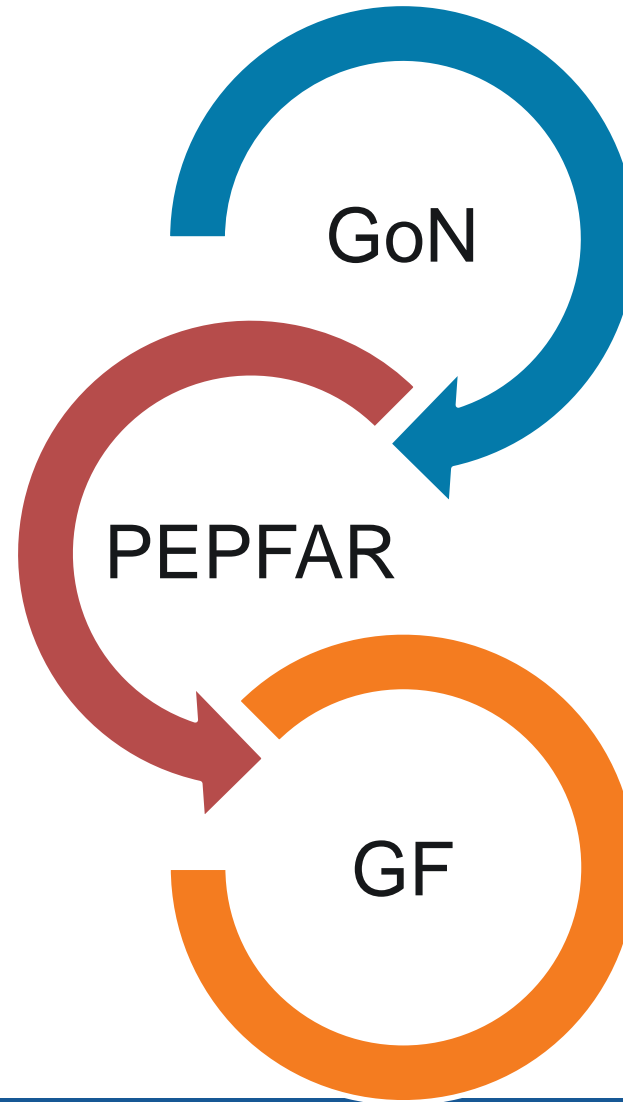
**17 YEARS OF SAVING LIVES THROUGH AMERICAN GENEROSITY AND PARTNERSHIPS**

# NATIONAL HIV ALIGNMENT

PEPFAR	Global Fund	Govt. of Nigeria
Commodity procurement and logistics for National programme	Commodity procurement for National programme	Commodity procurement for National programme
Provision of High-Quality HIV C&T service in all states except Ebonyi, Anambra,	Provision of High-Quality HIV C&T service in Ebonyi & Anambra	Coordinate National HIV programme
KP programming (12 states); ongoing discussions to scale up	KP programming (13 states); AGYW/AYP (2 states); Harm Reduction (3 states)	KP Facility services in Abia and Taraba
Support National EMR/NDR platform	Invest in Health System Strengthening	Support State Implementation Teams in Abia & Taraba
Leverage & improve KP service package	Support funding gap for governance in GON Coordination	Lead coordination of National Programme Performance Framework
Support Capacity building for GON	Support Capacity building for GON	Coordinate and staff HIV program; Work towards sustainability

# MAXIMIZE EACH PARTNERS' COMPARATIVE ADVANTAGE

- Proximity to program implementation and capacity for oversight and technical support
- Investments in, availability and use of data and review processes for evidence-based decision-making



- Increase and maintain financial contributions- maintaining PLHIV on treatment
- Strengthen state-level engagement: user fees, policy barriers (CLM)
- Commodities procurement
- Fund gaps, HIV prevention, harm reduction
- Systems strengthening to boost HIV investments (NDR)



# REQUIREMENTS TO REACH EPI CONTROL

Index testing, and Enhanced Pediatric + Adolescent Case Finding	Test & Start	Differentiated Service Delivery and Multi-Month Scripting
Alignment of OVC Program to CLHIV & 9-14 year olds	TLD transition and ARV regimen optimization (including DTG for children >20kg)	Monitoring morbidity/mortality outcomes
Increased Funding to Indigenous Partners	TB Preventive Therapy scale-up	Elimination of User Fees
Linkage >95%	VL/EID Optimization	Unique identifier and EMR
		PrEP for KP



# PEPFAR FY 22 TARGET PROPOSAL BY STATE

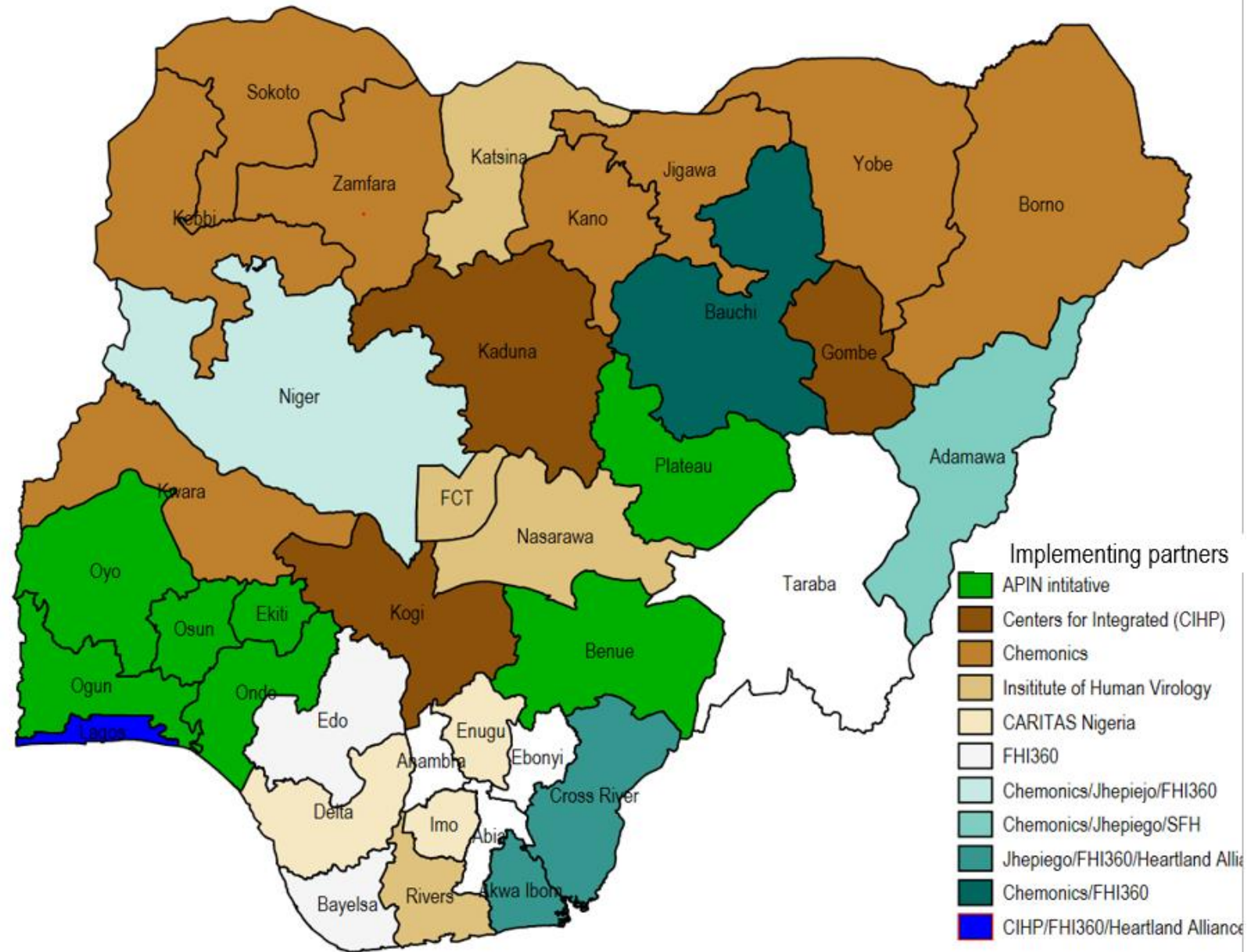
	<b>OU Total</b>	<b>1,700,861</b>	<b>1,696,433</b>	<b>204,717</b>	<b>238,646</b>	<b>100%</b>
State	Funding Agency	2021 Estimated PLHIV	FY 22 Proposed TX_CURR Target	FY 22 Proposed TX_NET NEW Target	FY 22 Proposed TX_NEW Target	Treatment Coverage
Rivers	HHS/CDC	193,423	183,752	19,574	23,249	95%
Akwa Ibom	USAID	176,311	167,495	10,910	14,260	95%
Delta	HHS/CDC	62,968	57,931	1,068	2,226	92%
Lagos	USAID/CDC	125,410	112,869	17,276	19,533	90%
Enugu	HHS/CDC	58,128	52,315	14,534	15,581	90%
Imo	HHS/CDC	65,547	58,992	30,922	32,102	90%
Gombe	HHS/CDC	20,699	27,054	329	870	131%
Nasarawa	HHS/CDC	52,034	64,703	874	2,168	124%
Benue	HHS/CDC	160,523	193,515	2,776	6,646	121%
Adamawa	USAID	30,549	49,990	743	1,743	164%
Cross River	USAID	35,831	53,175	661	1,724	148%
Plateau	HHS/CDC	33,694	47,776	676	1,632	142%
FCT	HHS/CDC	46,251	64,900	903	2,201	140%
Niger	USAID	26,953	32,907	604	1,262	122%
Yobe	USAID	9,086	9,563	160	351	105%
Jigawa	USAID	10,187	10,677	172	386	105%
Kaduna	HHS/CDC	52,965	55,123	905	2,008	104%
Bauchi	USAID	19,948	20,146	415	818	101%
Sokoto	USAID	10,126	9,620	153	345	95%
Edo	USAID	38,305	31,027	2,583	3,204	81%
Katsina	HHS/CDC	17,688	14,327	3,441	3,728	81%
Kogi	HHS/CDC	38,967	31,563	7,754	8,386	81%
Ogun	HHS/CDC	33,441	27,087	6,887	7,429	81%
Kwara	USAID	15,912	12,889	3,469	3,726	81%
Ondo	HHS/CDC	24,685	19,995	5,960	6,360	81%
Kebbi	USAID	19,051	15,431	5,230	5,539	81%
Kano	USAID	51,094	41,386	3,357	4,185	81%
Oyo	HHS/CDC	44,841	36,321	9,951	10,678	81%
Bayelsa	USAID	23,609	14,271	6,968	7,253	60%
Ekiti	HHS/CDC	12,251	7,351	2,447	2,594	60%
Zamfara	USAID	17,594	10,556	5,009	5,221	60%
Osun	HHS/CDC	33,701	20,221	11,240	11,644	60%
Borno	USAID	41,032	24,557	8,166	8,657	60%
Taraba	USAID	44,534	46,392	861	1,789	104%
Abia	HHS/CDC	53,523	32,114	14,526	15,168	60%
Military Nigeria	Military Nigeria		38,440	3,211	3,980	

29 States and OU will achieve >81% Treatment Coverage

6 states with security issues & low HIV burden achieve 60%

All Surge & Red States achieve 90% Treatment Coverage

# PEPFAR IMPLEMENTING PARTNERS BY STATE





# What's Next? Sustaining the HIV Response

# DOMESTIC RESOURCE MOBILIZATION ACHIEVEMENTS



- **National endorsement of HIV Blueprint, formally integrating HIV services in health insurance packages**
- Inclusion of HIV services into Basic Healthcare Provision Fund (BHCPF)
- Completed survey to support evidence-based advocacy for elimination of user fees in selected states
- Improved Budget Allocation and Release
  - Increased HIV Budget Allocations (Lagos 30% ; Kano 26% from 2019 to 2020)
- Local procurement and distribution of HIV commodities (RTKs, ARVs)





# 2022 – The tipping point to Sustained epidemic control



## FY19 – NAIIS Driven re-calibrated Epidemic control

- OU HIV Prevalence Survey
- KP Size Estimate

## FY20 – PEPFAR Surge

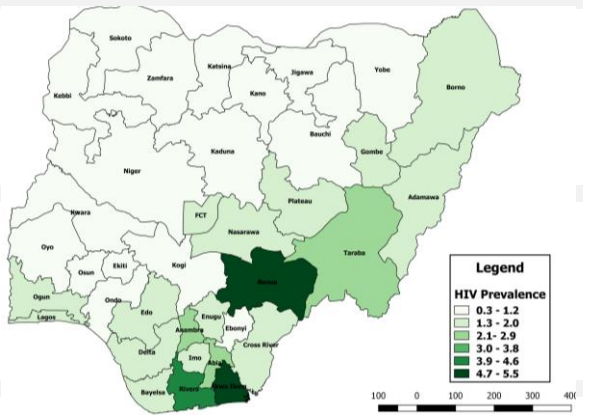
- Epidemic driven SNU response
- ESM approach reloaded and deepened
- Weekly analytics

## FY21 – National Alignment: Accelerated Surge Across the Country

- Align HIV program with the Global Fund behind a National strategy
- Community centric scale up
- COVID Adaptive Responses
- KP Surge
- Next generation NDR analytics

## FY22 – Going Green 'treatment saturation'

- Continue National Alignment
- Saturate and Sustain
- Continuity in care & deepened resilience
- Abia & Taraba Scale up



## FY23 – Sustained Epidemic control



**17 YEARS OF SAVING LIVES THROUGH AMERICAN GENEROSITY AND PARTNERSHIPS**



# Thank You