

Nigeria Update

Dr Nwaokenneya Peter

Head, Treatment Care and Support

National AIDS and STI Control Program(NASCP)

Federal Ministry of Health, Abuja, Nigeria

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Outline

- **Where are we now?**
 - Progress towards 95:95:95 targets
 - Treatment capability maturity model self-staging results
 - DART model mix and MMD
 - AHD CMM self-staging results
 - dHTS CMM self-staging results
- **How did we get here?**
 - Country planning and coordination activities
 - Engagement with CQUIN
 - Update on CQUIN Action Plan
 - 6th annual meeting action plans
 - dHTS meeting action plans
 - Integration of HIV and Non-HIV services into DSD
 - Successes and Challenges
- **What's next?**

Progress towards the 95:95:95 targets

- Nigeria has an estimated population of 218 million people (NPC 2022), with HIV prevalence of 1.4% (NAIIS,2018)
- 2 million people are living with HIV, and about 1.9 million are currently on ART
- An estimated 34,176 health facilities exist in Nigeria with 88.1% being primary health care facilities, 11.7% secondary, and 0.3 % tertiary care
- Over 2,000 Health facilities offer comprehensive ART services

CQUIN Treatment Dashboard Results: 2023

Guidelines				
Scale Up Plan	Quality			
Procurement	Policies			
Facility Coverage	Diversity			
Client Coverage	Coordination			
AHD	Community Eng.	M&E System	MCH	Key Populations
TB/HIV	Training	HTN	Family Planning	Impact

Most mature domains **Least mature domains**

- Achieved Light Green & Dark Green in 68% of the domains
- A Technical Working Group for HIV service integration has recently been inaugurated and a HIV service integration Manual is currently being developed among others

CQUIN Treatment Dashboard Results: Change Over Time

The country **improved** in:

- Scale-up plan
- TB/HIV
- Quality
- Training
- M&E systems

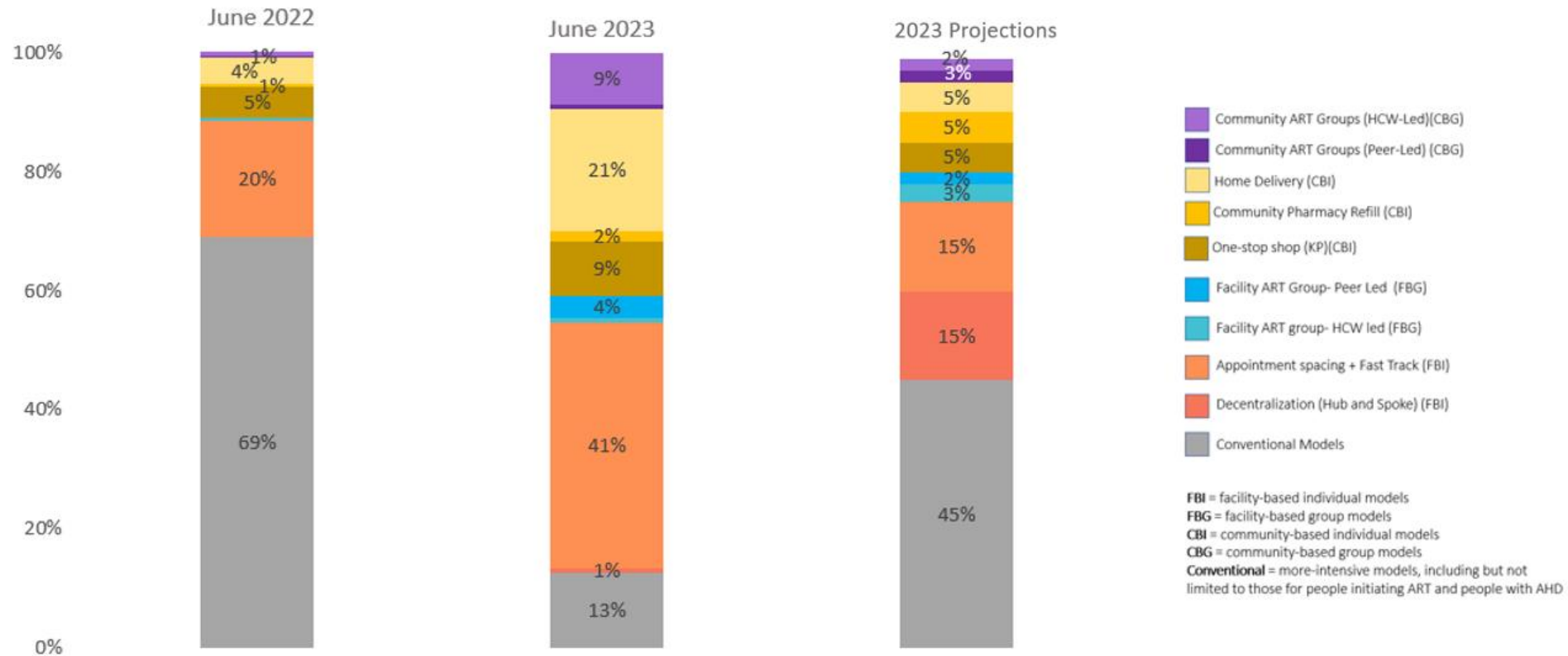
No improvement was noticed in:

- Impact
- KP
- MCH
- FP

The country's action plan will aim to address barriers to these domains

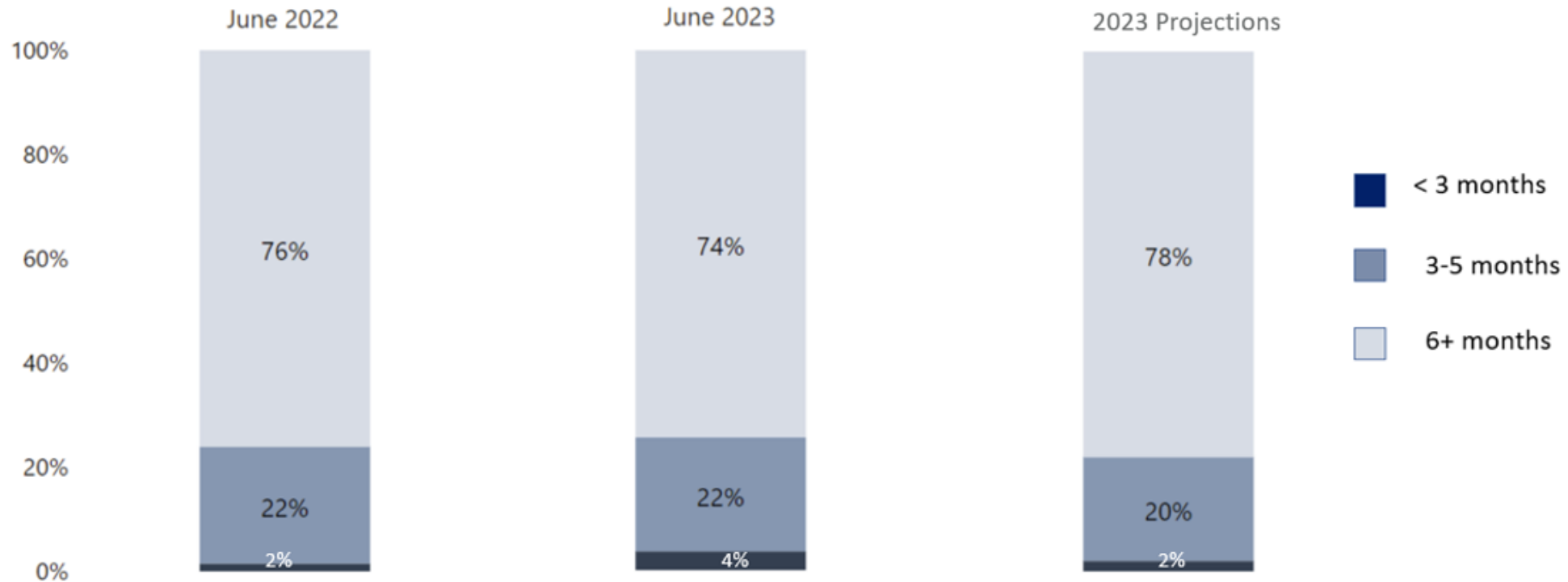
	Nigeria	
	2022	2023
Policies	Dark Green	Light Green
Guidelines	Dark Green	Dark Green
Diversity	Dark Green	Light Green
Scale-up Plan	Orange	Dark Green
Coordination	Dark Green	Light Green
Community Engagement	Light Green	Light Green
Training	Yellow	Light Green
M&E System	Orange	Yellow
Facility Coverage	Dark Green	Dark Green
Client Coverage	Dark Green	Dark Green
Quality	Orange	Light Green
Impact	Red	Red
P&SM	Dark Green	Dark Green
AHD	Light Green	Dark Green
KP	Red	Red
TB/HIV	Yellow	Dark Green
MCH	Orange	Orange
FP	Orange	Orange
HTN	Grey	Yellow

Differentiated Treatment Model Mix



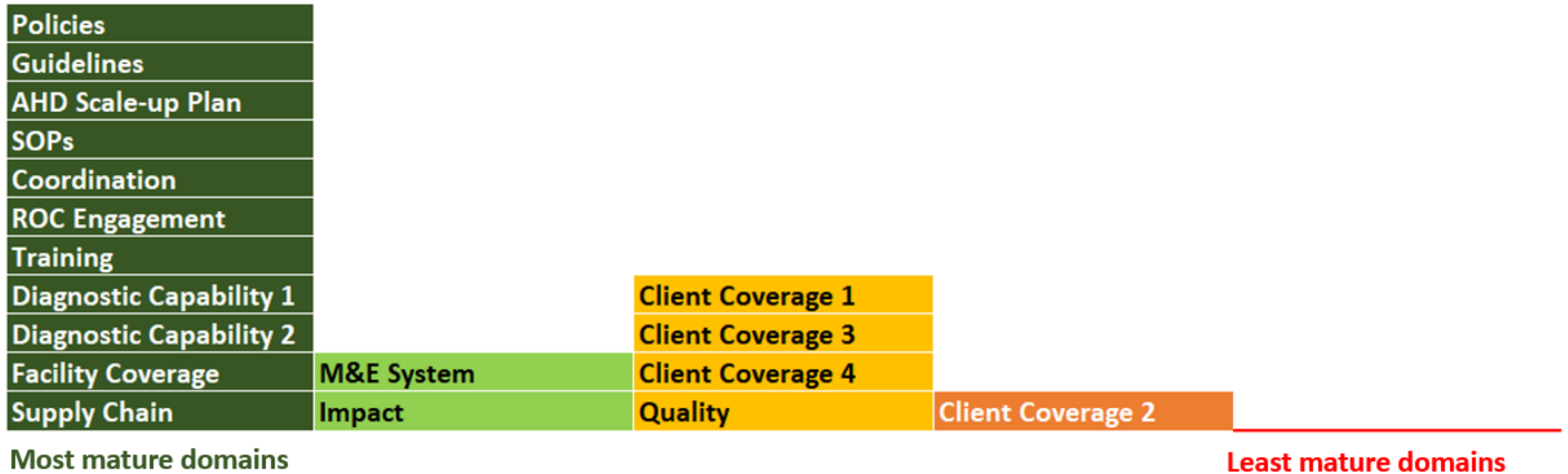
The country have diverse array of Less Intensive Models. The number of persons devolved to Less Intensive Model DSD models increased from 31% to 87% from 2022 - 2023. There's an expansion of home delivery, one stop shop, and CAGs.

Differentiated Treatment: Multi-month Dispensing



- The number of individuals refilled on MMD 6 fell to 74%, which represents a slight decrease compared to the projected figures for 2023. All children are placed on 3-5 months MMD.
- All unstable clients are placed on monthly or <3months for proper monitoring of drug adherence

CQUIN AHD Dashboard Results 2023



- Significant progress has been made in AHD implementation and scale-up in the country
- Some gaps noticed in client coverage

CQUIN Testing & Linkage Dashboard – 2023

Policy: Strategic Model Mix				
Policy: Optimizing HIV Testing				
Policy: Linkage				
Meaningful CE				
M&E				
Linkage to Tx: Timely Linkage	Financing and Resource Allocation			
Linkage Tx: Confirm/Verification Testing	Private Sector Engagement/Oversight			
Proficiency Testing	Coordination			
Clinical Services	Procurement & Supply Chain Management			
Impact: Linkage to Treatment	Linkage to Prevention and Other Services	SOPs	Implementation and Scale-Up Plan	
Impact: Linkage to Prevention	EQA/IQC	Population Coverage	dHTS Training	Impact: Knowledge of HIV Status

- Have 77% (17/22) of the domains in DG & LG
- The least matured domains highlighted in orange and red includes the Implementation and scale up plans, dHTS training, Impact-Knowledge of HIV statuses.

Most mature domains

Least mature domains

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Country Level Planning and Coordination-1

- The DSD Sub Committee is used for the Planning and coordinating DSD activities in Nigeria
- DSD SI Quarterly coordination meeting also coordinates DSD activities implemented under the DSD-SI grant
 - **More than four planning and coordination meetings were held in the past year**
 - **NEPHWANN represented RoCs in these meetings**

Activities prioritized at CQUIN meetings in the past year, or confirmed for funding include:

PEPFAR Fund (USAID/CDC)

- Inclusion of DSD indicators and variables on the NDR by Q4 2023
- AHD, NCDs/co-morbidities (more-intensive models)-Integrating NCD Screening into Routine Clinical Assessment for HIV Service Delivery(Inclusion of standards for NCD screening and Referral into the National Guideline for HIV Prevention, Treatment and Care and. Implementation of standardized NCD screening (Blood Pressure and BMI checks) and referral system across service delivery points in states.

Country Level Planning and Coordination-2

Global Fund

- Review DSD indicators and variables
- Quality Management of DSD
- DSD performance review
- State-to-state learning exchange visits
- Engage the clinical mentors to identify, influence, and monitor the attitude of HCPs in providing HTS

NACA – Capacity building of health care providers on differentiated ART delivery

- Activities were prioritized based on the outcome of the needs assessment conducted within the country

Engagement with CQUIN-1

- The country has participated in the following CQUIN communities of practice: TB/HIV, MNCH and Family Planning Services; Quality & Quality Improvement, Differentiated HIV Testing services (dHTS), Monitoring and Evaluation, Key population, and Migrant and mobile populations
- Nigeria recently participated C2C visits to Rwanda and Zambia on FP integration and DSD for Men respectively
- Conducted mixed methods(Qualitative and Quantitative)DSD Performance reviews in 4 states (Kaduna, Anambra, Lagos, and Taraba) with funding from the Global Fund.

Engagement with CQUIN-2

- Conducted a DSD quality of care assessment in 5 states (Rivers, Imo, Plateau, Kano, and Adamawa) also funded by the GF
- Conducted 8 State-to-state visits to encourage knowledge sharing on DSD implementation between states
- DSD-related activities supported by CQUIN include DHTS, DART, and AHD staging meetings and C2C learning visits to Rwanda and Zambia

Engagement with CQUIN-3

Key lessons learned and impact on country DSD implementation plans

- The country's sensitization on Service Integration brought about the effective functioning of service delivery points across designated states
- The preferred DSD models observed were Fast track, Home delivery, After-hours, and Mother-infant pairs. Most care recipients who opt for DSD are reluctant to return to the regular care routine

Update on Country Action Plan from the 6th Annual Meeting (2022)-1

Activities that have been successfully completed include:

- Activities on Quality Management of DSD- Evaluated the DART service quality using the developed HIV quality assessment tool
- Inclusion of the DSD module into the National Guidelines for HIV Quality of Care
- Engaged with IPs to standardize the model mix terminologies within the facility EMRs,
- Completed the DSD module on the national data repository (NDR)
- Engaged with other stakeholder for sources of data (NCDs as regards service integration)

Activities on meaningful engagement of RoC:

- Reviewed existing national CLM tool to incorporate DSD CLM indicators
- Orientated the data collectors on the inclusion of the DSD component into the CLM tool
- Administered the community engagement toolkit assessment checklist

Update on Country Action Plan from the 6th Annual Meeting (2022)-2

Activities on differentiated testing and linkage services

- Engaged clinical mentors to identify, influence and monitor the attitude of HCPs in providing HTS

Activities for AHD, NCDs/co morbidities (more-intensive models)

- Implementation of standardized NCD screening (Blood Pressure and BMI checks) and referral system across service delivery points in designate states

Activities that are still underway include:

- Training of the national and 36+1 states clinical mentors on DSD; Cascade DSD training to health care facilities
- Include guidelines/standards for NCD screening and Referral into the National Guideline for HIV Prevention, Treatment and Care

Activities that were dropped include:

- Conduct refresher training for HCPs on ECHO
- Develop and Upload a DSD training module on ECHO

Activities added to the action plan midyear-1

After the dHTS meeting in March 2023

- Expand learning from social media and apps mobilization for KP to the general population with an emphasis on young people
- Modifying our M & E system to monitor the implementation of status-neutral testing
- Full implementation of status-neutral testing at community pharmacies, patent medicine outlets, and private and public health facilities.
- Set up a monitoring system to capture linkage for re-engagement for previously known positives that are LTFU.
- Optimize prevention services for those who tested negative
- Ensure a full package of prevention is available and routinely provided
- Build capacity of KP-friendly facilities

Activities added to the action plan midyear-2

The country-to-country learning visit in Zambia (Men's Clinic)

- To develop an implementation plan for the Men's Clinic at both the facilities and community level
- To work with designated leads at NASCP to ensure the current DSD framework on the DSD clinic is incorporated into the revised National Treatment guidelines and DSD Operational manual
- Develop indicators and variables for monitoring and evaluation of DSD for men and follow up with data entry into the EMR and other reporting platforms by focal persons
- Conduct a pilot implementation of the DSD for men model in a few selected facilities in Oyo and Akwa Ibom State leveraging on support group
- Expand the scale-up of the DSD for men model to selected facilities and community DSD models

Integration of HIV and Non-HIV services into DSD

Integration policy(ies) adopted this year/working on

- Nigeria is finalizing the Standard Operating Procedures (SOPs) for HIV service integration, covering all relevant thematic areas
- Adopting a user-friendly job aid, including checklists, flowcharts, and reference materials, to support healthcare professionals in implementing HIV service integration
- Working on a dissemination plan outlining strategies to promote awareness and usage of these service integration policy documents
- Inclusion of additional populations such as DSD for Men/Men's Clinic into the National Guideline for HIV Prevention, Treatment and Care
- Currently reviewing the National Guideline for HIV Prevention, Treatment and Care and also the DSD Operational Manual

DSD Implementation Successes in 2023

- The Country utilized the national quality assessment tool to evaluate DART service quality
- Standardized DSD community engagement toolkits have been administered
- Inclusion of DSD component in the CLM tool
- Adoption of additional DSD indicators in the National Data Repository to track DSD performance
- Effectively functioning service delivery points as a result of the country's sensitization on Service Integration
- Inclusion of guidelines/standards for NCD screening and referral into the National Guideline for HIV Prevention, Treatment, and Care
- Implementation of standardized NCD screening (Blood Pressure and BMI checks) and referral system across service delivery points across designated states in Nigeria
- Conducted eight (8) S2S visits, and supported states to domesticate and implement lessons learned
- Conducted DSD performance review meetings in 4 states, disseminated findings, and formulated action plans across designated states
- Country-to-country learning visit on DSD for Men and Family Planning to Zambia and Rwanda

Challenges in DSD Implementation

- Security concerns in some states delaying implementation of activities e.g., Sit at at-home agenda happening in the Eastern part of Nigeria
- High volume of activities at SASCP and NASCP leads to conflicting schedules
- Change in the political climate
- Staff transfer causing attrition
- Training of HCPs: The date for this activity and funds from NACA keeps shifting

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DSD priorities for 2024

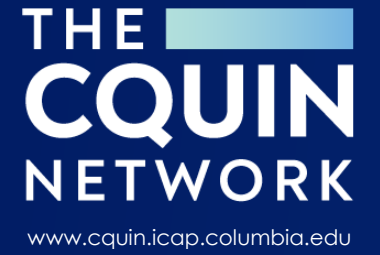
The country's plan for 2024 is to create activities around domains not doing well.

Proposed learning visits in the coming year to address

- DSD program on Key Population (IDU/Harm reduction)
- Client Coverage (AHD,DART,DHTS)
- NCD/HIV
- Impact
- Triple elimination Testing for HIV, Syphilis, and HBV mother-to-child transmission

Acknowledgements

- PEPFAR(CDC & USAID)
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- Bill and Melinda Gate Foundation
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- CQUIN
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- NASCP
- NEPHWAN



Thank you!

