2020-2021 | WESTERN AND CENTRAL AFRICA

NIGERIA

Report prepared by the Joint UN Team on AIDS

JOINT TEAM

UNICEF, WFP, UNDP, UNFPA, UNODC, UN WOMEN, ILO, UNESCO, WHO, WORLD BANK, UNAIDS SECRETARIAT

JOINT PROGRAMME CONTRIBUTIONS AND RESULTS IN 2020-2021

In Nigeria, the Joint Team made meaningful contributions to scale up services for the prevention of mother-to-child transmission of HIV (PMTCT). State specific action plans were developed to tackle challenges and gaps and build on opportunities aimed at improving PMTCT coverage in all 36 states in the country. Government- and development partners-led HIV treatment and PMTCT programmes and resources were harmonized yielding increased number of people accessing antiretroviral treatment. Point of Care equipment were procured and donated to increase early infant diagnosis and paediatric HIV services. HIV self-testing kits were procured, and peer educators were trained to improve HIV case finding in formal and informal workplaces. HIV prevention was addressed through the development of an investment case; completion of the integrated biological and behavioural surveillance survey and modes of HIV transmission analysis; provision of comprehensive sexuality education to more than 700 000 adolescents and young people; and strengthening of youth-friendly, and safe centres for the provision of HIV and sexual and reproductive health information and services. The Joint Team provided critical support for the mobilization of over US\$ 1.7 billion from international donors to support the national HIV, tuberculosis, malaria, and COVID-19 responses in Nigeria.

HIV PREVENTION AMONG YOUNG PEOPLE AND KEY POPULATIONS

To overcome the persistent high level of new HIV infection among adolescent and young people, the Joint Team supported various efforts aimed at strengthening the implementation of adolescent- and youth-friendly HIV prevention programmes. This included the rollout of an investment case for HIV prevention among adolescents to gather concrete evidence to inform targeted programming and advocacy for resource allocation; the completion of the secondary analysis of data from the integrated biological and behavioural surveillance survey (IBBSS), which highlighted key gaps and challenges preventing adolescents and young people from key population groups from accessing HIV and sexual and reproductive health (SRH) services; and thirdly, the development of the adolescent health state score card and dissemination at the national adolescent health conference for strategic actions.

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Technical assistance was provided for the revision of the Family Life and HIV/AIDS Education (FLHE) basic and secondary education curricula ensuring the inclusion of school-related genderbased violence; sexual and gender-based violence; early and unintended pregnancy; and ending violence against women and girls and harmful practices, including child, and forced marriages.

The Joint Team also supported the education sector system strengthening to deliver quality, scientific, age-developmentally appropriate FHLE through the capacity building of 34 077 pre-and in-service teachers and representatives of youth organizations on the delivery of quality FLHE. A total of 736 493 in-school adolescents and young people were reached with quality FLHE and essential skills to prevent new HIV infections and sexually transmitted infections, early and unintended pregnancies and eliminate gender-based violence. In 2020-2021, more than two million condoms were also distributed to improve access to HIV prevention commodities among people at higher risk of acquiring HIV, while a National Condom Operational Strategy 2021-2025 was developed to galvanize total market approach to HIV condom programming in the country.

The Joint Team provided technical and financial assistance for the establishment or upgrading of 11 Youth-Friendly Centres (YFCs) to improve access to quality integrated sexual and reproductive health and HIV services for young people across the country. In 2020-2021, the Joint Team further supported the empowerment of about 10 000 girls through the delivery of accurate information on HIV prevention and sexual and reproductive health and rights (SRHR) in 1450 safe spaces.

During the COVID-19 pandemic, the Joint Team led the innovative use of social and other digital media platforms and COVID-19 youth ambassadors to reach an estimated 14.5 million adolescents and young people with information on HIV and COVID-19 prevention. Technical support was provided to sensitize people living with HIV on the prevention and management of COVID-19 in 15 targeted states which also helped to increase the number of people living with HIV who were willing to take the COVID-19 vaccines.

The 2021 Mode of Transmission Analysis in Nigeria showed that key populations who account for less than 1% of the population contributed to more than 11% new HIV infections in the country. To address this challenge, the Joint Team collaborated with the National Human Rights Commission (NHRC), PEPFAR, and other partners to develop an action plan for the protection of key and vulnerable populations in the country; and to review and respond to punitive laws and policies affecting these groups.

The Joint Team provided technical support for the Global Fund commissioned rapid assessment and mapping of gender and human rights programmes. The findings informed the prioritization of interventions aimed at reducing human rights related barriers preventing people living with HIV, key populations, and young people from accessing HIV services in the Global Fund funding proposal, including the provision of an emergency fund for addressing arrests by law enforcement agencies. This support coupled with intensive advocacy by the Joint Team led to the release of people from key populations, specifically men who have sex with men, who were arrested in affected states such as Anambra. The Joint Team also facilitated mainstreaming of gender and human rights into Global Fund supported programmes through training of officers from government institutions, including the Federal Ministry of Education , Federal Ministry of Health, Federal Ministry of Humanitarian Affairs, the National Agency for the Control of AIDS, the National Agency for Prohibition of Trafficking in Persons (NAPTIP), the National human Rights Commission (NHRC), ministry of Justice, Nigeria Police Force FCT Command and the National Bureau for Statistics.

The Joint Team further supported a rapid situational assessment of women's health in custodial centres. The study focused on the identification of sexual and reproductive health and mental health issues; the risks and vulnerabilities of women in custody to HIV infection and genderbased violence, and the availability of health services tailored to address the needs of women in custody. The draft report is expected to be launched end of 2022.

As a result of the Joint Team's technical assistance, the Government developed the genderresponsive National Policy on HIV 2020-2025 and the national integrated HIV prevention and treatment guidelines. The Joint Team further supported the integration of gender priorities into

the national COVID-19 Multi-Sectoral Pandemic Response Plan to address the needs of vulnerable women, including women living with HIV exacerbated by the COVID-19 pandemic.

The Joint Team supported the Government in the development of Guidelines for Medication Assisted Treatment for Opioid Dependence—the Methadone and Buprenorphine in Nigeria and a Standard Operating Procedures for this guideline. In 2021, technical assistance was also provided for the development of the National Care and Referral Model for HIV and Related Health Conditions in Custodial Centres in Nigeria and Standard Operating Procedures for HIV Testing Services (HTS) in Custodial Settings. A pool of experts from the Nigerian Correctional Service received training on the new guidelines and standard operating procedures to support their implementation.

HIV TESTING AND TREATMENT

In 2020-2021, the Joint Team facilitated the development and revision of policies and guidelines on HIV and viral hepatitis testing and treatment services, including the national HIV self-test operational guidelines. Further support was provided to develop the National Differentiated Service Delivery Plan and the National HIV and Supply Chain Plan. To improve HIV testing, treatment, and care services in these settings, technical assistance was provided for the development of the national care and referral model for HIV and other health conditions in closed settings; and ensure the continuity of ART and care services for people living with HIV upon their release into the community.

The Joint Team provided technical and financial support to advance HIV self-testing in workplaces, with particular focus on men and young workers. Hence, training was provided for 100 peer educators in Lagos drawn from 41 workplaces in various sectors, including transport, construction, hospitality, and health sectors to improve their understanding and skills in developing, administering, and implementing HIV self-testing programmes in formal and informal workplaces. The training topics included distribution of HIV self-testing kits, monitoring of HIV self-testing, and reporting of test results. Under the VCT@Work initiative, the Joint Team procured and distributed 20 000 HIV self-testing kits in 41 workplaces and obtained 14 575 HIV self-test results. The 98 people who tested HIV positive (61 females) using the self-testing kits were referred to health facilities for appropriate follow up services.

These interventions in testing and treatment led to an appreciable and sustained increase in the number of people on ART, from 1.15 million in 2019 to 1.48 million (30% increase) in 2020 and to 1.73 million (20% increase) by the end of 2021 (GAM data).

Leveraging on the risk communication and community engagement pillars of the national COVID-19 pandemic response, the Joint Team developed and disseminated information, education, and communication (IEC) materials on COVID-19 prevention and control among inmates and correctional officers in four languages (English, Yoruba, Hausa, Igbo) to over 200 custodial centres in Nigeria. Food support, face masks and hygiene supplies for 253 custodial centres, 640 women living with HIV from resource-poor and conflicted-affected areas and communities across 18 states and from the Association of Women Living with HIV in Nigeria (ASWHAN).

INVESTMENT AND EFFICIENCY

The Joint Team provided coordination and technical support to various resource mobilization efforts securing US\$ 890 million from the Global Fund for the national HIV, tuberculosis malaria responses for 2021-2023 grant period and US\$ 800 million from PEPFAR for the Country Operational Plan 2020 and 2021. In addition, technical support was provided for the rapid mobilization of over US\$ 300 million from the Global Fund for the control and containment of COVID-19 while mitigating its impact on HIV, tuberculosis, and malaria programmes. An additional US\$ 73 million was also raised from the European Union, the governments of Canada and the United Kingdom, and the private sector to support the National Multisectoral COVID-19 Pandemic Response.

CONTRIBUTION TO THE INTEGRATED SDG AGENDA

The Joint Team continued to make significant contributions to the implementation of the United Nations Sustainable Development Partnership Framework (UNSDPF) for Nigeria 2018-2022, including monitoring and reporting of progress towards the UNSDPF and the Sustainable Development Goals (SDGs). In 2020-2021, the Joint Team's catalytic support in Nigeria strongly contributed to SDGs 3, 4, 5, 10 and 16.

For instance, under SDGs 3 and 4, the capacity of Education Management Information System (EMIS) officers was strengthened to integrate HIV and comprehensive sexuality education global core indicators in EMIS. This intervention is contributing to making data available for planning, decision making, resource mobilization, decentralization, and programme improvement.

Technical support was provided to conduct a rapid mapping of programmes on human rights and gender interventions for key populations to guide the Global Fund investment during the 2021-2023 grant period. This resulted in the implementation of integrated gender sensitive and rights-based interventions. Strategic institutional capacity building was also conducted benefiting 23 legal officers, 36 implementing partners and 165 civil society organizations on the protection of the rights of key populations in Nigeria—contributing directly towards SDGs 5 and 10.

In line with SDGs 3, 4, and 8, the Joint Team provided technical and financial support to both the Ministry of Health and the Ministry of Education to organize a series of consultations on the status of adolescents and young people's health and wellbeing. The consultations were part of the processes aimed at fulfilling the West and Central Africa Ministerial Commitment towards attaining educated, healthy, and thriving adolescents and young people in the region. The recommendations of the consultation were endorsed by the respective Honourable Ministers of Education and Health.

CHALLENGES AND LESSONS LEARNED

The COVID-19 pandemic posed major challenges to the implementation of HIV-related activities and substantially slowed down progress towards national and international targets. These challenges were mitigated by the prioritization of community-based approaches which ensured the continuity of HIV services during the pandemic.

There is a slow pace of decline in HIV incidence, with regards to the constrained rights of adolescents, women and young girls, key populations, and vulnerable groups. Additionally, there is little change in treatment coverage among children—from 27% in 2016 to 31% in 2021—indicating a large unmet HIV treatment need to achieve 95 95 95 HIV testing, treatment, and viral suppression targets for children.

Progressive decline in PMTCT coverage from 53% in 2016 to 34% in 2021 underscores the need to accelerate efforts to eliminate vertical transmission of HIV and end paediatric AIDS. The stack analysis reveals that majority of HIV positive pregnant women do not receive treatment. The mapping of antenatal care service delivery points, and equipping with HIV test kits and reporting tools, provides the first step in efforts to increase access to HIV testing by all pregnant women.

Inadequate supply of HIV test kits continued to challenge the delivery of PMTCT services. Lessons learned underscore the need to implement the newly developed *HIV commodity security plan* to effectively quantify and forecast the commodity needs of all HIV programmes and avoid stockouts.

The needs of women in prisons and other closed settings continued to require more attention from the authorities and the public health system. The Joint Team sought to address this by generating evidence on the correlation between structural conditions and social and institutional factors on the behaviours of women in prisons and other custodial centres and recommend mitigating actions. Poor integration between health facilities in custodial centres and the public health system continue to challenge the national HIV response.

Report available on the UNAIDS Results and Transparency Portal

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