USAID Nigeria Strategic HIV/AIDS and TB Response Program (Nigeria SHARP) Task Orders 1 and 3

The USAID Nigeria Strategic HIV/AIDS and Tuberculosis (TB) Response Program — or Nigeria SHARP — works to improve the quality of high-impact HIV and TB prevention and treatment services and to strengthen local health systems to respond to the epidemic.

As the lead partner on USAID’s Nigeria SHARP Task Order 1 and 3 in northern Nigeria, Chemonics delivers critical technical assistance to improve HIV and TB services in 11 states. Through these projects, our teams provide daily support to front-line health workers in more than 145 health facilities, and engage more than 935 volunteers to help identify new cases of HIV, link patients to care, provide psychosocial counseling, and update and monitor clinical data.

Background

Reducing the burden of HIV and TB in Nigeria, the most populous country in Africa, remains a critical public health challenge. Nigeria has one of the largest HIV/AIDS burdens in the world. In total, nearly 2 million people are estimated to be living with HIV in Nigeria; a little more than half of those diagnosed are receiving treatment (National AIDS Indicator and Impact Survey 2018).

The nation is also among the 14 countries in the world with the highest burden of TB, multi-drug-resistant TB, and TB/HIV co-infection (World Health Organization 2019). Nigeria faces the complex task of effectively reducing HIV and TB morbidity and mortality while institutionalizing essential health system reforms to enable a sustainable public health response to the epidemic.

Geographic Coverage


USAID Nigeria SHARP Task Order 3 operates in Adamawa, Bauchi, Borno, Jigawa, Kano, and Yobe states (March 2020 – March 2022)

Project Partnerships

Chemonics is partnering with the Nigerian Ministry of Health and state and local governments in northern Nigeria.

We are joined by key implementing partners: Institute of Human Virology–Nigeria (IHVN) and University of Maryland Baltimore/ Maryland Global Initiative Corp. (UMB/MGIC)
Addressing HIV and TB Service Delivery Challenges in Northern Nigeria

Through the Nigeria SHARP activity, Chemonics, IHVN, and UMB/MGIC are providing critical technical assistance to improve the delivery of HIV and TB services in 146 health facilities across 11 states in the expansive region. Many of these facilities face a severe shortage of skilled health care workers and limited access to reliable electricity, water, internet, and medical supplies. Additionally, protracted violence marked by ongoing armed conflict and terrorism create a highly unpredictable security situation in communities and along many routes across the northern states. These security challenges can prevent patients from accessing health services and severely limits the movement of health workers, government health staff, and the delivery of medicines and other essential supplies.

In addition to these health-service delivery challenges, underlying drivers of HIV in the region — extreme poverty, food insecurity, poor HIV and sexual health literacy, high levels of stigma and discrimination around HIV and TB, gender inequities, and high rates of sexual and gender-based violence — exacerbate the impact of HIV and TB on local populations.

Through Nigeria SHARP, Chemonics and our partners are bringing our extensive experience in Nigeria and fragile contexts worldwide to support state and local governments and health workers to provide high-quality, accessible HIV and TB services; and to mitigate drivers of HIV, including gender-based violence and stigma and discrimination.

Key Project Strategies

Nigeria SHARP will support the implementation and scale up of comprehensive HIV and TB prevention, identification, care, and treatment programs, and will improve the ability of state and local health systems to coordinate, monitor, and finance HIV and TB services. Key strategies include:

• Addressing gaps along the HIV and TB prevention and treatment cascade emphasizing using data to target places, populations, and service delivery areas that require the most support

• Scaling interventions to reach at-risk and hard-to-reach populations through strategies such as biometric tracking for patient records, community ART groups, mentoring and job aids for case managers on HIV testing and linking patients to care, improved psychosocial support, and population-targeted services such as male corners and youth days

• Expanding community-based services for the distribution of ART and increased access to counseling and psychosocial support services, especially for young men, HIV-positive pregnant women and mothers, and adolescents

• Providing training and mentorship for laboratory quality assurance and performance standards to reduce turnaround times for viral load and early infant detection tests

• Improving the effectiveness of linkages and referral procedures between HIV and TB systems

• Improving data sharing and use by improving the transfer of HIV, TB, and laboratory data across health information systems and strengthening local government staff ability in data collection and analysis for managing the HIV response

• Providing technical assistance for health financing reform, including reducing user fees for HIV and TB services

• Assisting in transitioning the management of HIV case managers and other critical front-line health workers from donor-supported programs to state and local governments

• Enhancing mentorship and on-the-job coaching for government staff and front-line health workers to foster a culture of continuous quality improvement, facilitate knowledge-sharing of best practices and lessons learned between states, and support virtual and peer learning

• Carrying out targeted and high-impact operational research to inform and strengthen programming across the HIV cascade

Nigeria SHARP TOs 1 and 3 Project Goals

• Control the spread and reduce the burden and impact of HIV and TB in the 11 targeted states

• Contribute to achievement of Nigeria’s 95-95-95 targets by ensuring identification of 95% of all persons living with HIV; provision of treatment to 95% of those identified as HIV positive; and ensuring viral suppression among 95% of those on treatment. This will result in reduced HIV incidence, AIDS, and TB-related mortality; and elimination of mother-to-child HIV transmission.

• Improve the capacity of the Nigerian government at the state and local levels to be the stewards of the HIV/AIDS response.

This assistance is from the American people and through USAID