



2008 HIV Sentinel Sero-Prevalence Survey among the Antenatal Clinic Attendees in Nigeria

FACT SHEET

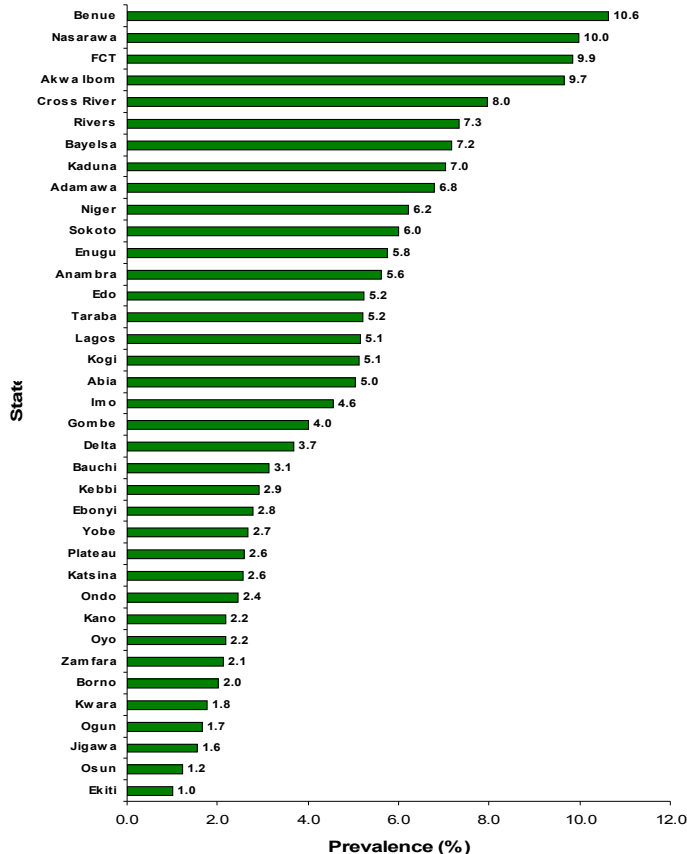
Goal/Objectives of study: The goal of the survey was to provide information about the current HIV prevalence and distribution in Nigeria, with the aim of sensitizing all stakeholders to taking appropriate action. The objectives were to determine HIV prevalence among pregnant women attending antenatal clinics, assess the trend in HIV prevalence and to provide data for estimating and projecting the HIV epidemic in the general population

Implementers: Federal Ministry of Health(HIV/AIDS Division), National Agency for the Control of AIDS (NACA) with funding and technical support from US Centers for Disease Control and Prevention (CDC) and World Health Organization (WHO).

Survey scope: 36, 126 pregnant women from 158 sentinel sites (84 urban and 74 rural) in the 36 states in Nigeria and the Federal Capital Territory participated in the study. An unlinked method of sample collection and testing was used

Key Results:

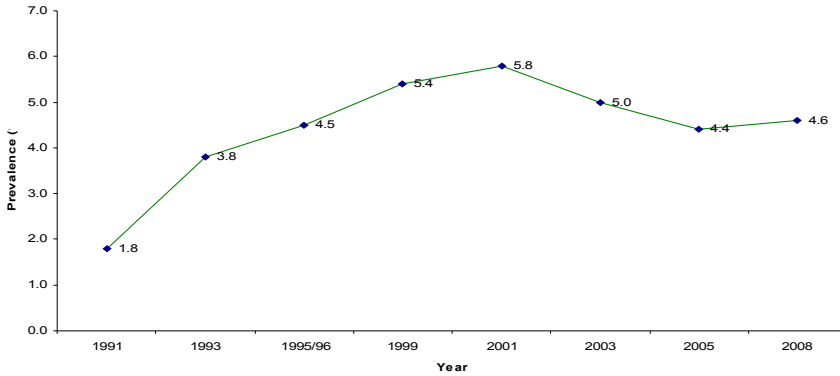
HIV Prevalence:



The 2008 National ANC HIV sero prevalence is 4.6%. The prevalence value ranged from 1.0% in Ekiti State to 10.6% in Benue State. Seventeen (17) States and FCT had prevalence of 5.0% and above. In seven (7) states and FCT, the prevalence was 7% and higher. The survey further revealed that, Four (4) of these seven (7) States were from the South-South, while two and FCT from the North Central and one from the North West geo-political zones of the country. The prevalence was generally higher in urban than rural areas except in 9 States and FCT where the reverse was the case. In two of these States and FCT, the prevalence was greater than 10.0 %. In terms of sites, Bwari in FCT recorded the highest prevalence of 22.0% in the Country and four sites [Igbara Odo (Ekiti), Ganawuri (Plateau), Taura (Jigawa) and Tudun wada (Kano State)] recorded the least (0.0%). The prevalence increased with age up to 25 – 29 years after which it declined and was higher among women with primary and secondary level education. The prevalence was higher in single parent than married.

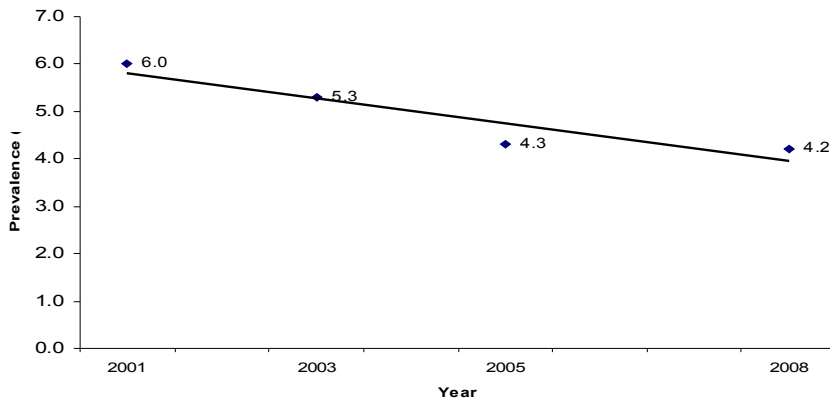
HIV Prevalence Trend

HIV Prevalence Trend 1991 – 2008 (HSS 2008)



The National HIV prevalence trend was observed to have steadily increased from 1.8% in 1991 through 4.5% in 1995/6 to peak at 5.8% in 2001 before declining to 4.4% in 2005. From 2005 to 2008 however, the prevalence appeared to have slightly increased to 4.6%. Examining the trend from 2001-2008 among women aged 15-24years (which is considered as an index of new infections), the prevalence among this group steadily decreased from 6.0% in 2001 to 4.2% in 2008. These two trends could probably be due to improvement in survival rate among PLWHAs and the positive effects of the interventions among the youths. The increased access to ART from the scale-up programmes could be a major contributor to the improved survival rate.

Prevalence among women aged 15 – 24 years, 2001 – 2008



HIV estimates and Impact The HIV/AIDS epidemic has affected every facet of life and every sector of the economy and social well being of the community and individuals. With the current HIV prevalence of 4.6%, an estimated 2.95 million people are living with HIV in Nigeria by the end of 2008. Of this, 833,000 (adult: 740,000, children under 15 years: 93,000) require ART. This poses an enormous strain on the country's health care resources. Presently, only about 236,000 people are accessing ART which translates into a gap of about 597,000.

The estimated total annual AIDS deaths of 280,000 people and 2.23 million children orphaned by the disease are already exerting excessive burden on the families and communities who may eventually give up such responsibilities. Consequently, these orphans may not achieve their full potentials or become delinquent.

Recommendations:

- a. The national response to the HIV/AIDS epidemic must be strengthened and expanded to ensure balance in interventions between urban and rural areas, as well as in intervention strategies – Prevention, Care and impact mitigation.
- b. Definite intervention should be designed to target people with primary and secondary level education especially using mass media messages that they will be responsive to. The extent of adoption and implementation of HIV/AIDS education curricula should be assessed and strengthened in order to reduce the prevalence among this population that are in school.
- c. Emphasis should continue to focus on the youth to ensure a sustained downward trend in new infections.
- d. There should be increased efforts to expand quality comprehensive HIV/AIDS prevention, treatment, care and support services.
- e. In view of the large number of AIDS orphans with its attendant burden, comprehensive care and support programmes should be packaged and adequately delivered on sustainable basis.
- f. Focused research in sites/states with consistently low and high prevalence would facilitate the identification of possible factors for appropriate intervention strategies.
- g. State-level analysis and utilization of ANC data should be encouraged. This will also expose important variations, as observed or yet to be observed by the surveys.
- h. A technical review of all the available national survey reports on HIV/AIDS with a view to producing a holistic strategic information document for a better focused national response to the epidemic.