



Nigeria's Road to Malaria Elimination by 2020

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Outline

- Introduction/Background
- Road Map
- Impact/Achievements/Progress
- Challenges
- Clarion Call for Private Sector Participation
- Conclusion



Introduction/Background



Introduction

- Unique opportunity for NMEP to garner critical support for the current malaria agenda
- The theme: “The Road To 2020: Mobilizing Private Sector in Nigeria’s Fight Against Malaria” aptly captures the national aspiration for all hands to be on deck to realize the ambitious target of pre-elimination by 2020.
- Private Sector participation needs to be better coordinated to align with the national priorities.
- Malaria is the nation’s number 1 public health problem and is not only a direct MDG issue, but also impacts on others, including those not directly linked to health.



Malaria: MDG Number 6

- **Goal:** To have halted by 2015 and begin to reverse the incidence of malaria
- **Indicator 1:** Incidence and death rates associated with malaria
- **Indicator 2:** Proportion of children U-5 sleeping under ITNs
- **Indicator 3:** Proportion of children U-5 with fever who are treated with appropriate antimalarial medicine



Malaria Burden: In Perspective

1

Global



- There has been a significant decline in malaria deaths (from 985,000 in 2000 to 584,000 in 2013 – **WMR 2014**)
- 3.3 billion people in 97 countries/territories are at risk of being infected with malaria

2

Africa



- Malaria burden has fallen in many parts of SSA
- Africa still bears over 80% of the global malaria burden
- Children under 5 years old are the most vulnerable risk group and account for 78% of malaria deaths (**WMR 2014**)
- A significant proportion of this burden lies in Nigeria, with Nigeria and the Democratic Republic of Congo accounting for an estimated 40% of deaths in 2012 (**WMR 2014**)

3

Nigeria



- Malaria accounts for:
 - 60% of out-patient visits to health facilities
 - 30% of childhood deaths
 - 25% of deaths in infants (children aged <1 year)
 - Major cause of school absenteeism & low productivity

SOURCE: World Malaria Report 2009, 2010, 2011, 2013, 2014; Nigeria National Indicator Survey 2010; Nigerian Demographic and Health Survey 2008 and 2013



Road Map



The National Malaria Elimination Programme (NMEP)

- Division under the PH Department
- Vision - *Malaria Free Nigeria*
- Mission - To provide equitable, comprehensive, cost effective, efficient and quality malaria control services ensuring transparency, accountability, client satisfaction, community ownership and partnership.
- Programme implemented at National, State and Local Government levels
- Strong donor support
- Heavily constrained by several issues
- Programme activities derive from National Malaria Policy & Strategic Plan
- New harmonized Policy & NMSP 2014-2020 - *linked to the NSHDP*



Road Map: Generations of Strategic Plans

- **2001-2005:** Developed after the African Summit on Roll Back Malaria to build partnership and garner political will
- **2006-2010:** Focus was on vulnerable populations as primary target groups for interventions (pregnant women, children less than 5 years of age, people living with HIV/AIDS)
- **2009-2013:** Provided a road map for malaria control in Nigeria; provided for universal & equitable access and witnessed rapid scale up of a package of core interventions for impact.
- **2014-2020:** Aims to achieve pre-elimination and reduction of malaria related deaths to zero by 2020



NMSP 2014-2020

GOAL: To reduce malaria burden to pre-elimination levels and bring malaria-related mortality to zero by 2020

Strategy 1: Long-lasting Insecticidal Nets

- Mass distribution campaigns (Catch-up)
- Routine Distribution Strategy (Keep-up)

Strategy 2: Indoor Residual Spraying, Environmental Management and Larviciding

Strategy 3: Effective Case Management

- Increasing Access to RDTs and ACTs
- Community Case Management

Strategy 4: Intermittent Preventive Therapy in Pregnancy (IPTp) and infants (IPTi)

Cross-Cutting Strategies

- Advocacy, Communication and Social Mobilization (ACSM)
- Product and Supply Chain Management
- Monitoring and Evaluation (M&E)
- Programme Management
- Intersectoral collaboration and partnership



Global Malaria Agenda: The Global Technical Strategy (GTS 2016-2030)

- Ultimate goal is to eliminate malaria in all countries of the world
- Hinged on 3 pillars and 2 supporting elements
 - universal access to malaria prevention, diagnosis and treatment;
 - Acceleration of efforts towards elimination and attainment of malaria-free status;
 - Institutionalizing malaria surveillance
 - Harnessing innovation and expanding research; and
 - Strengthening the enabling environment.



Global Technical Strategy (GTS) 2016-2030 at a Glance

Vision: A world free of malaria

Goals	Milestones		Targets
	2020	2025	2030
1. Reduce malaria mortality rates globally compared with 2015	≥40%	≥75%	≥90%
2. Reduce malaria case incidence globally compared with 2015	≥40%	≥75%	≥90%
3. Eliminate malaria from countries in which malaria was transmitted in 2015	At least 10 countries	At least 20 countries	At least 33 countries
4. Prevent re-establishment of malaria in all countries that are malaria-free	Re-establishment prevented	Re-establishment prevented	Re-establishment prevented



Programme Interventions/Activities

- Review and Development of Policy, guidelines and strategic Plans based on malaria epidemiological trends
- Capacity building of various cadres of Health and informal Health/service providers
- Program coordination and periodic monitoring and evaluation
- Resistance monitoring & tracking
- Procurement of malaria commodities, logistics management including Product tracking
- Advocacy and IEC materials development and message tracking
- Working with Partners to distribute LLINs at the states and communities using unified Plans
- Resource mobilization



Achievements/Impact/Progress



NMEP Programmatic Milestones

2002

Increased Partner support to **NMEP** ; GE, DFID, PMI, WB, UNICEF

IRS coverage expansion

Continuous distribution (ANC, EPI, comm based, school based, MNCH)

LLIN mass campaign

Replacement campaign

3rd strategic plan, 2009-2013



2005

2006

2007

2008

2009

2010

2011

2012

2013

2014

ACTs

RDTs

Artemisinin and other monotherapies banned

Testing before treatment recommended by **NMEP**

MPR

National Policy on Malaria

4th strategic plan, 2014-2020

2nd Generation strategic plan 2006-2010



Binned Predicted Mean $PfPR_{2-10}$

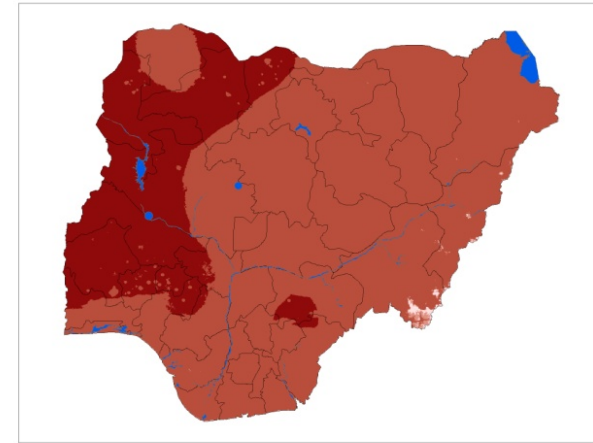
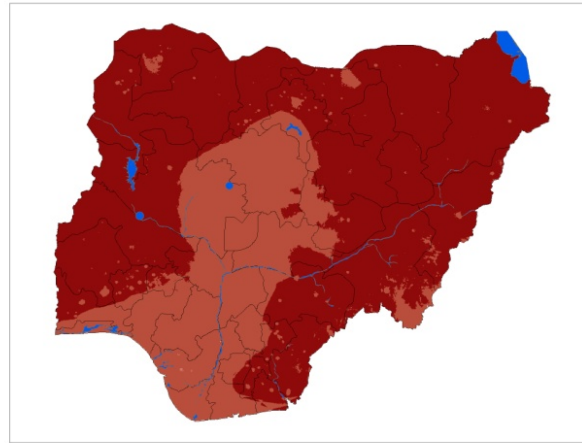
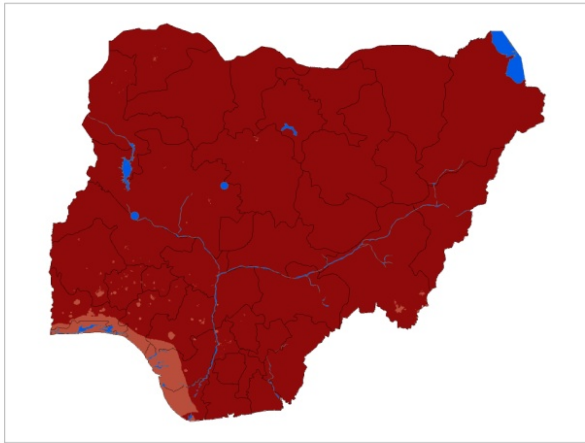
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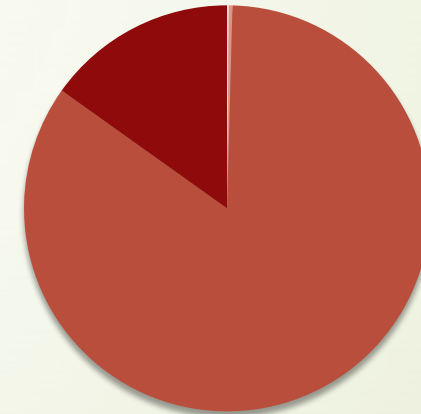
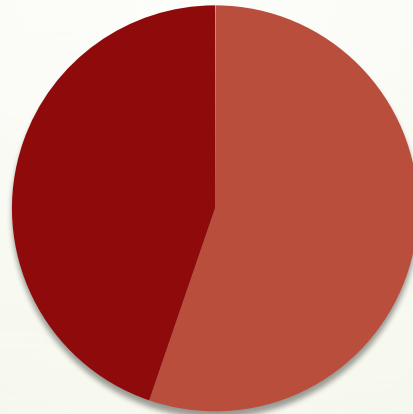
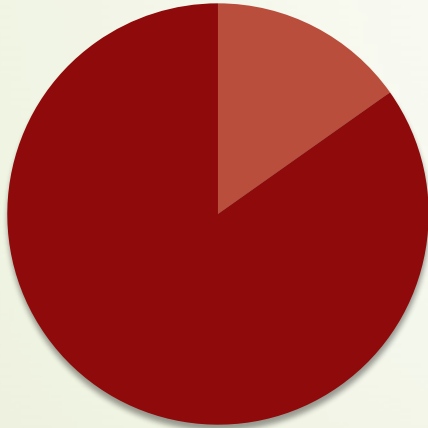
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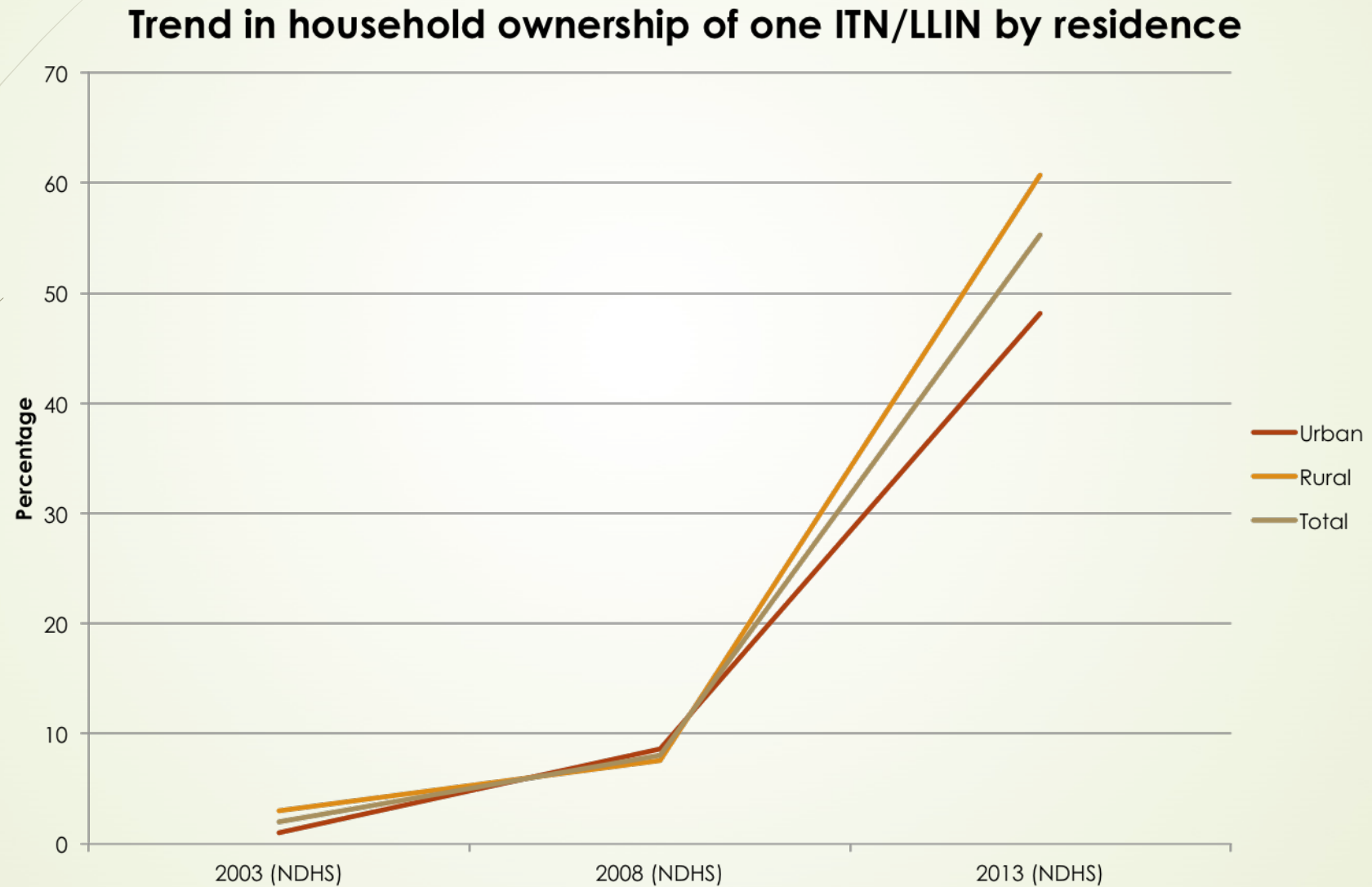
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Gradual transition from Hyper-endemicity to Meso-endemic presentations in most settings

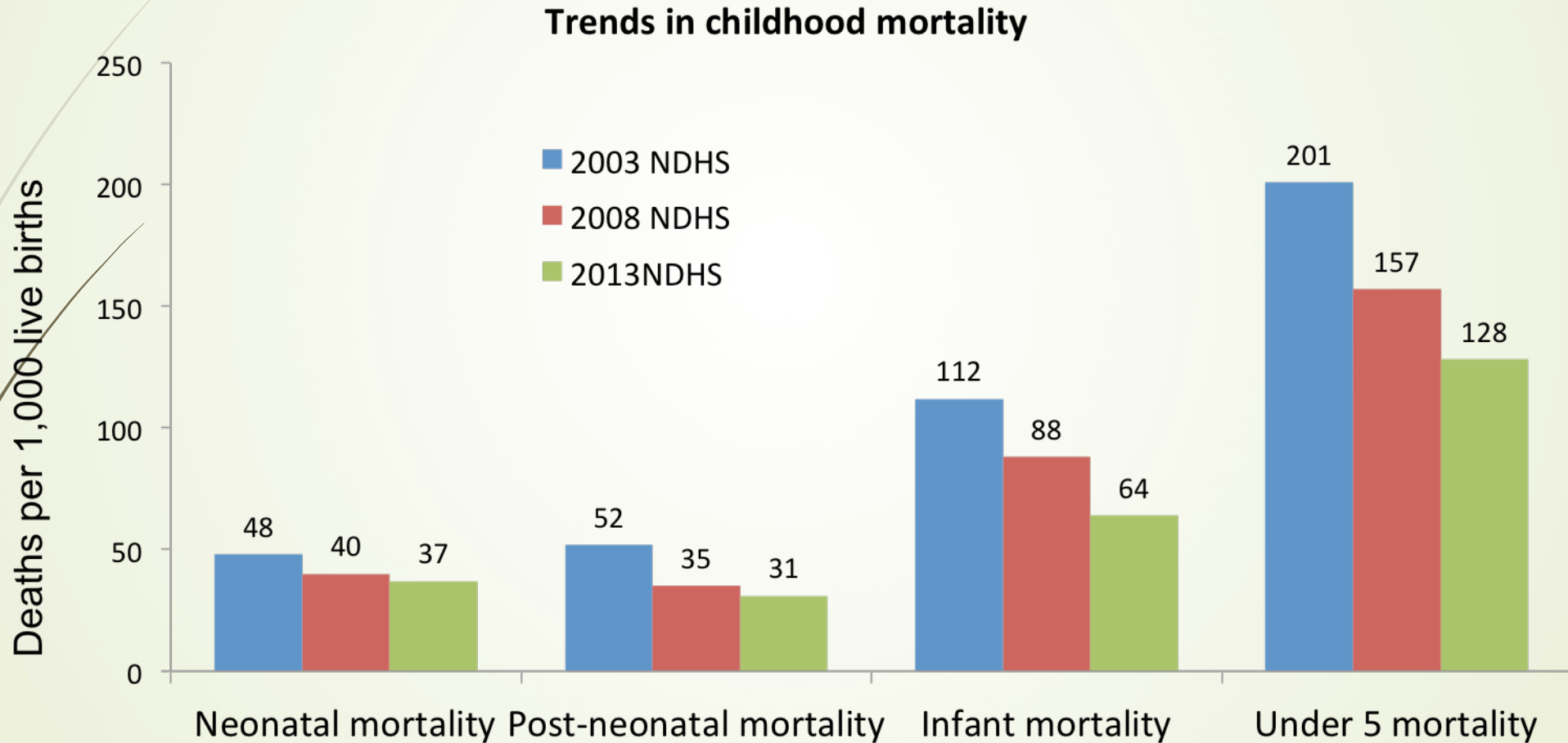


3. Changing Trends in Household Ownership of LLINs





Impact: 35% decline in Under 5 mortality over the last decade





Gradual decline in reported health facility malaria deaths, partly due to scale-up of ACT in recent years (RIA 2013)

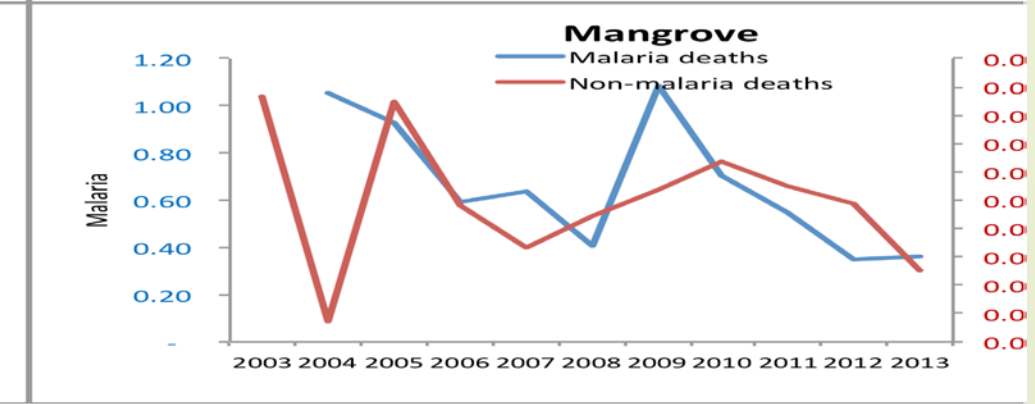
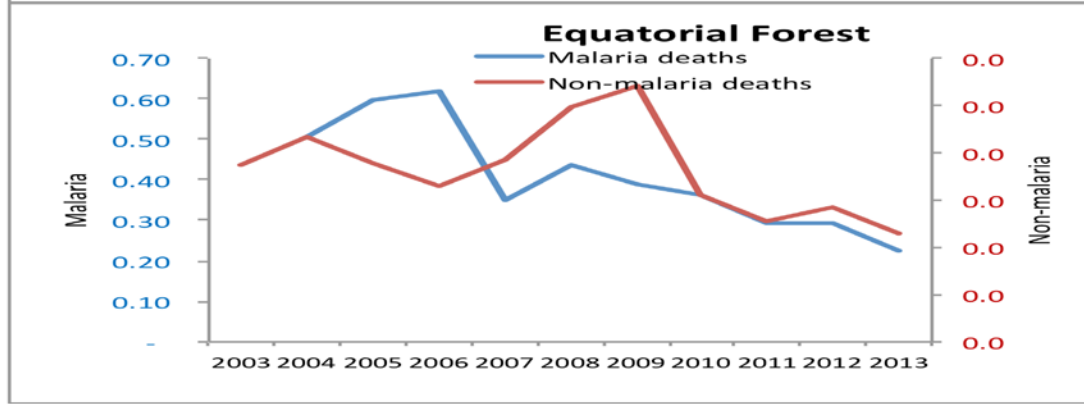
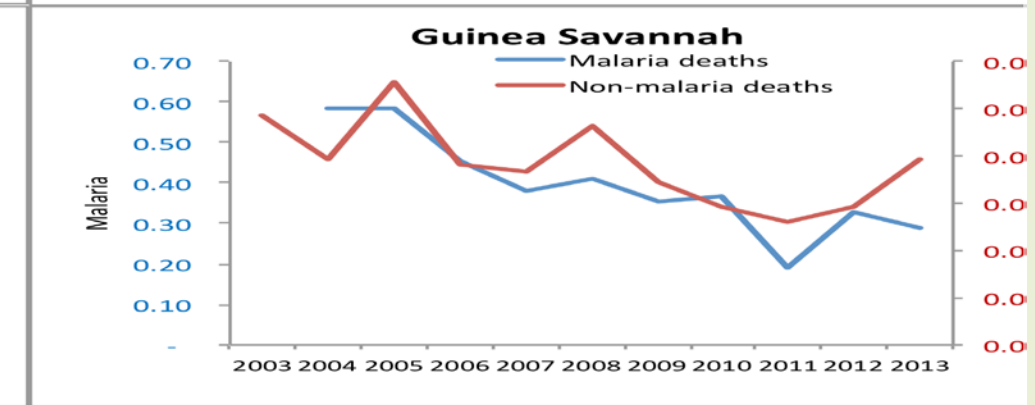
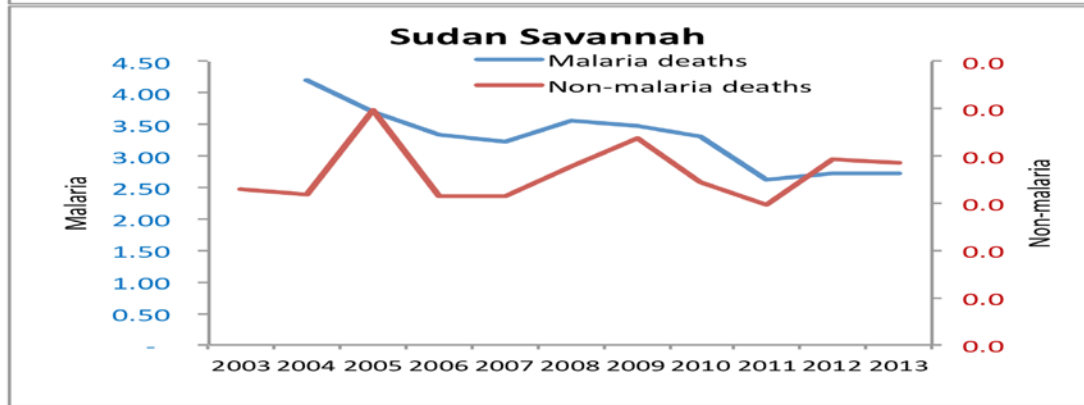
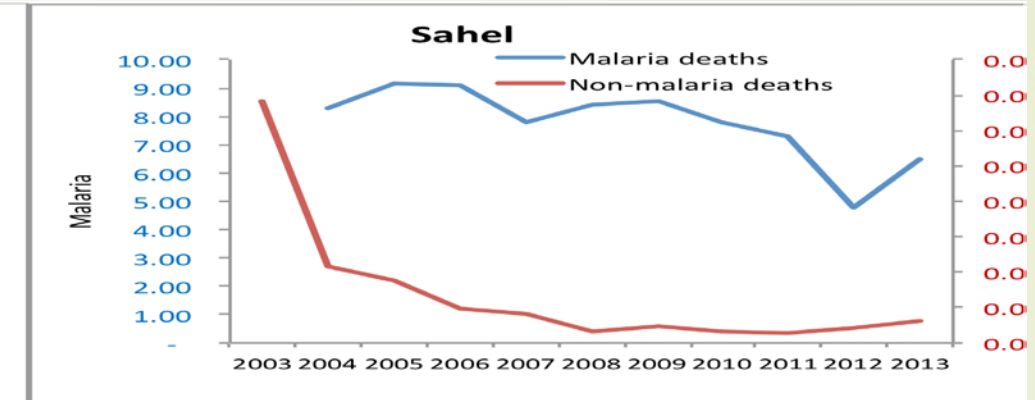
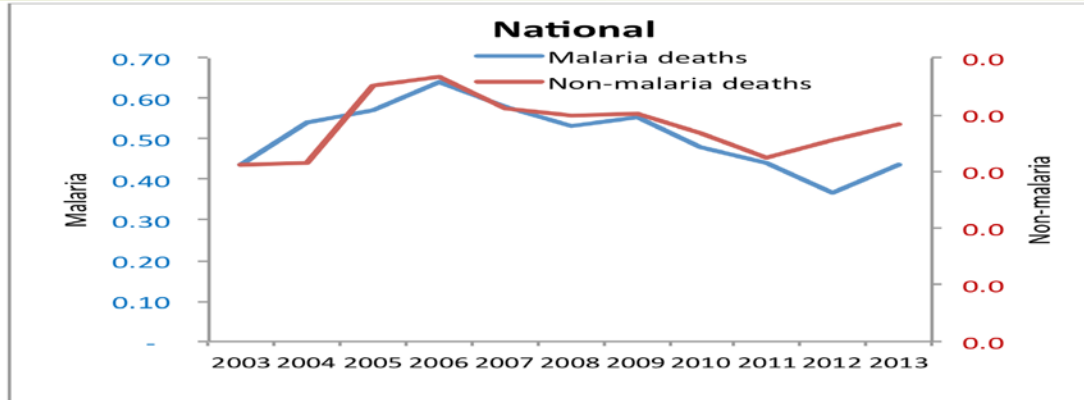




Fig.5 ACT use in Children U5

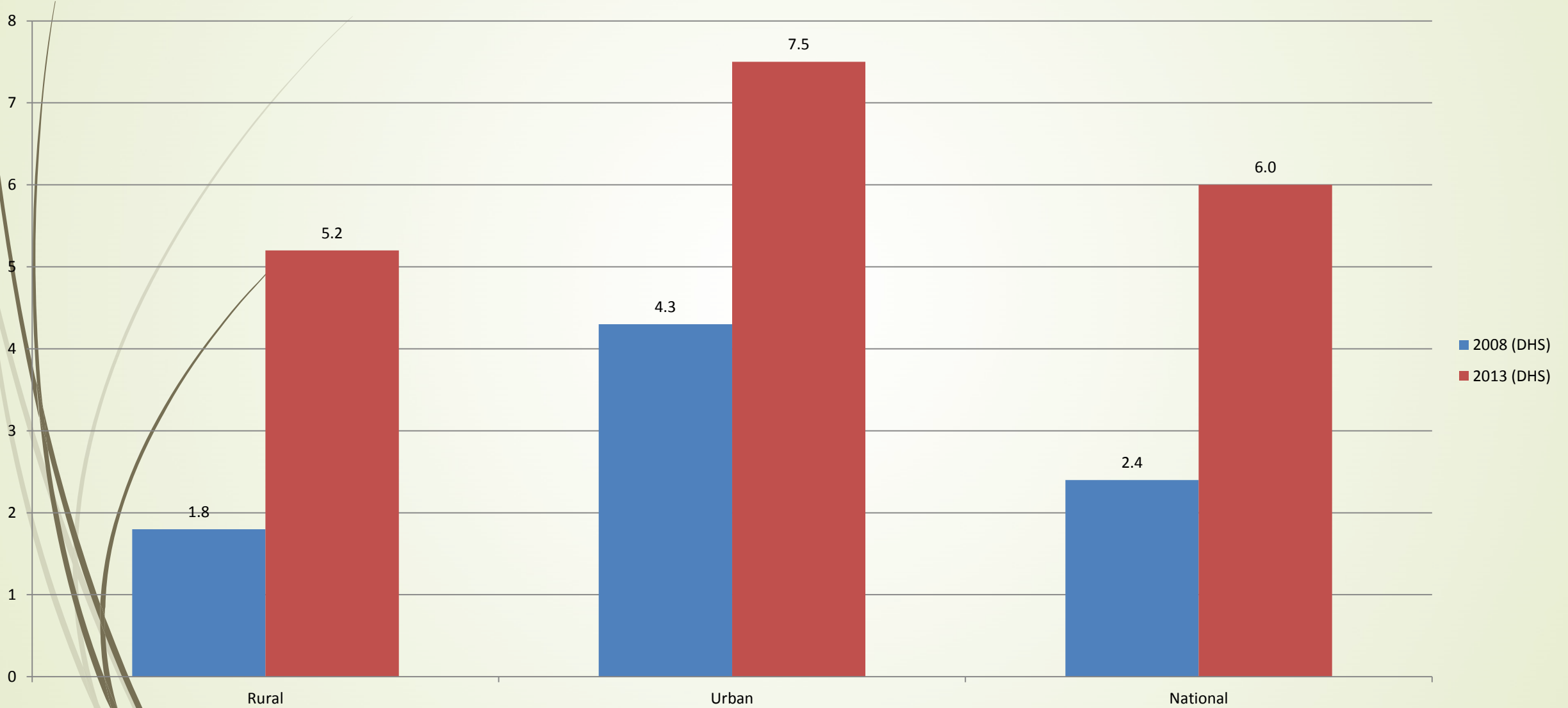
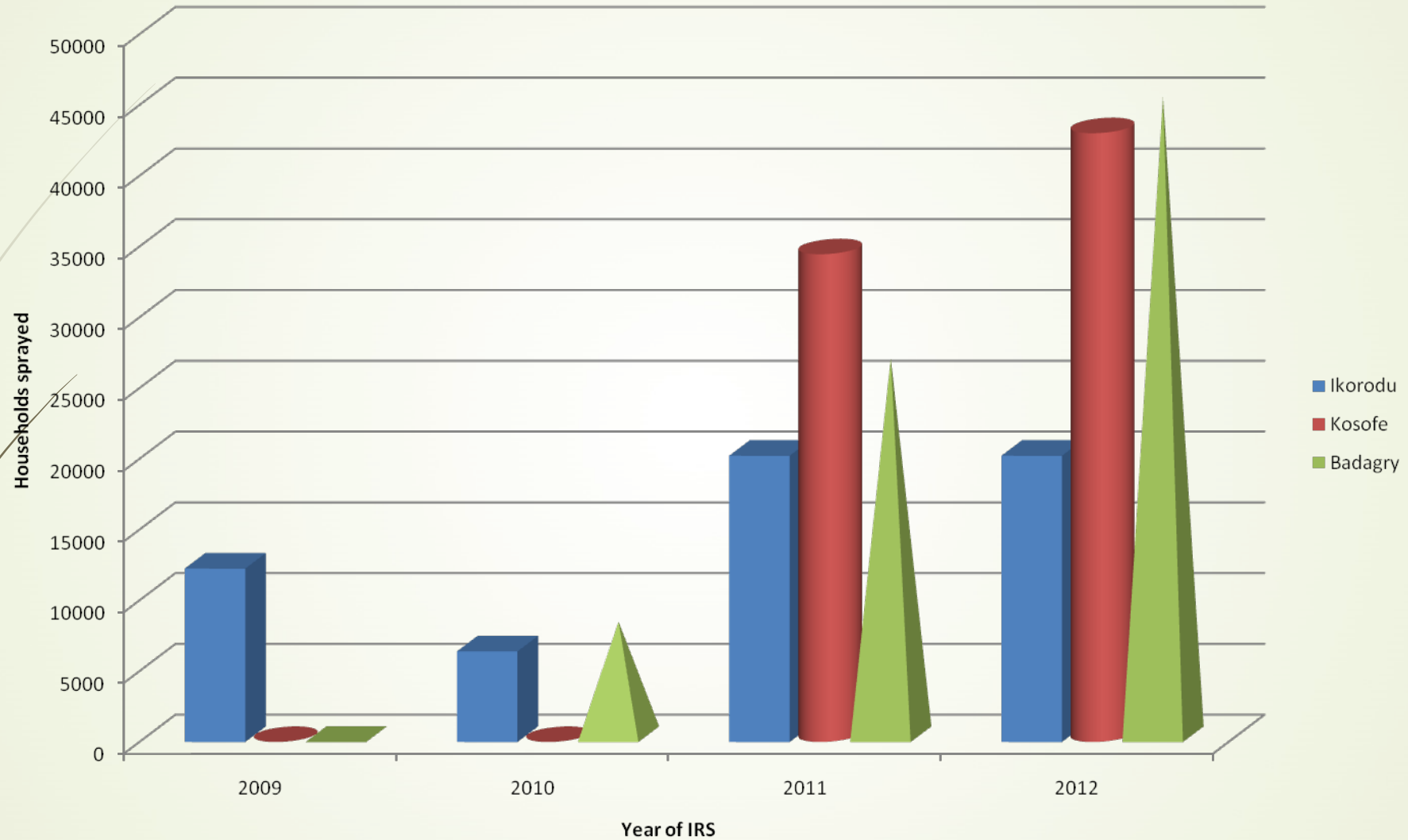


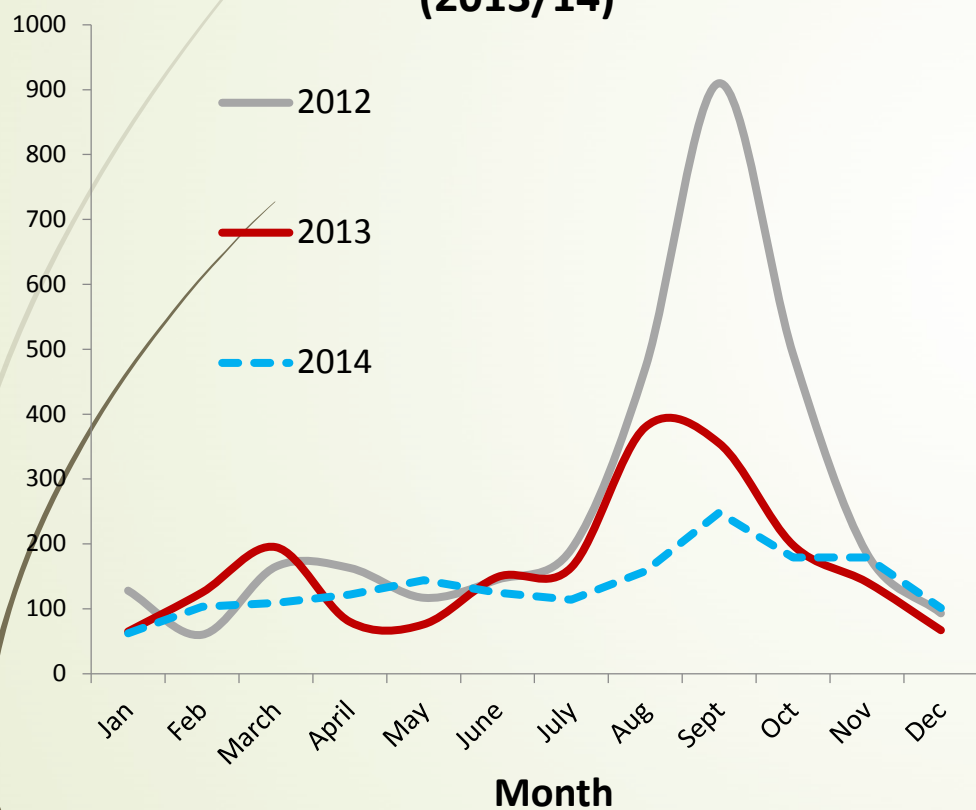


Fig 4. Scale-up of IRS activity in Lagos State, Ikorodu, Kosofe and Badagry

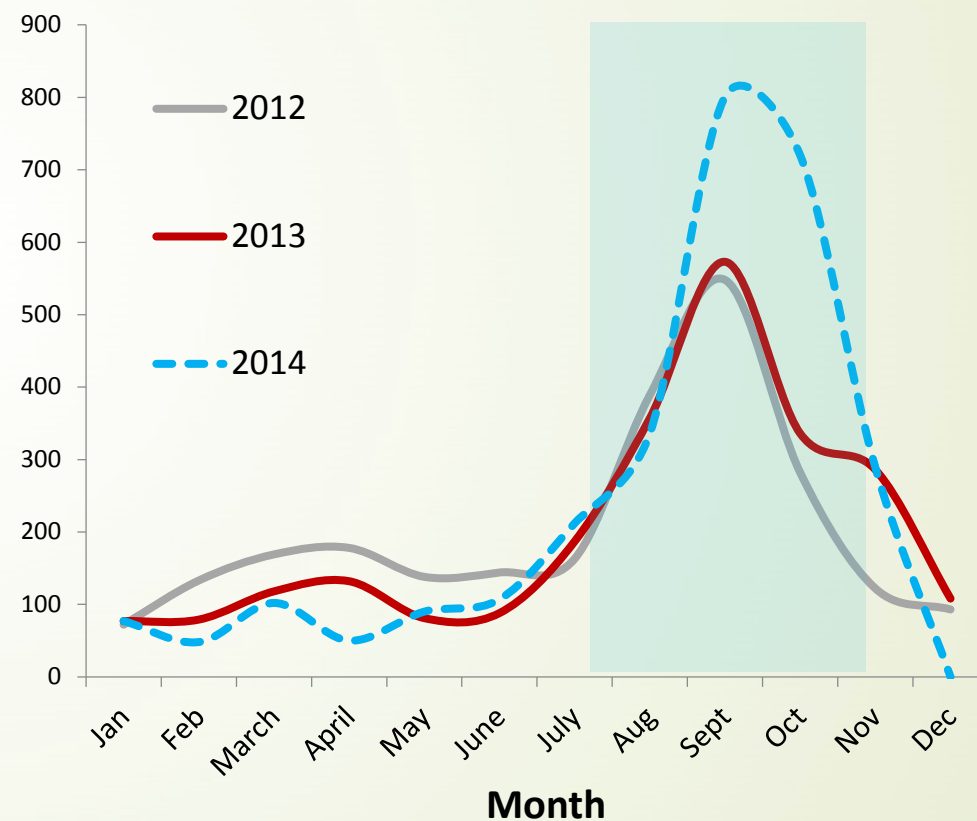


Katsina state: SMC in children under the age of five years (DFID 2014)

Total monthly malaria cases by year, in LGAs that received 2 SMC Rounds (2013/14)



Total monthly malaria cases by year, in LGAs that did **NOT** receive any SMC





Challenges



NMSP 2014 -2020 total funding need is **\$4,133,110,170**

	2015	2016	2017
Need	\$671,422,303	\$814,219,540	\$1,023,036,003.62
Financed	\$286,954,981.23	\$183,908,130	\$95,391,862
Gap	\$384,467,321.77	\$630,311,410.00	\$927,644,141.62

	Sources of Funding	Remark
1	Federal & State Governments	Continuous especially for recurrent budget such as HR and overheads
2	Global Fund	NFM 2015-2016 (24 states)
3	PMI/USAID	Commitment up to 2016
4	DFID/SuNMaP	SuNMaP closes out March 2016
5	World Bank Booster Project	World Bank Booster Closed March 2015
6	DFATD/WHO	ICCM ends in March 2017 (2 states)



Challenges

- Flouting of government policies by health care providers
- *Quantity and quality of health care providers*
- *Inadequate funding* (Slide on funding gaps)
- Absence of local capacities for commodities
- Infrastructure (enabling environment)
- Logistics issues
- Relegation of Training and retraining
- Apathy /Poor attitude of professionals
- Security issues
- Staff attrition



Clarion Call for Private Sector To Participate



Opportunities for Private Sector Participation

- Find a niche in the proposed PPP arrangement to scale up IRS
- Undertake establishment of sentinell sites for monitoring malaria trend and resistance of chemicals used for vector control
- Embark on local manufacture of essential malaria commodities (including LLINs, RDTs, ACTs)
- Support and Assist NMEP in strengthening logistics management of commodities (warehouses, transportation / commodity distribution, and infrastructure)
- Support the airing of sustained Public Service Announcements for public awareness of what individuals and groups can do (including radio and TV jingles, mobile phone messages)
- Providing IT packages for tracking malaria interventions and progress e.g. SMS
- Award scholarships/Endow academic chairs for human resources development in critical areas e.g. entomologists
- Provision of infrastructure such as Malaria Programme House for effective programme management and implementation.
- Advocate for domestic resource allocation at the various tiers of government.



Conclusion

- Nigeria has a robust malaria programme with ambitious goal of attaining pre-elimination by 2020
- Constrained by several challenges that could derail the gains so far made
- Though the malaria targets of MDG were not strictly attained progress was made and we are on the right track
- Contribution of the Private Sector is acknowledged and highly valued but we need to be more coordinated and align with national priorities to fast track progress.
- As the whole world march towards malaria elimination we should not only pray, but commit resources and other efforts to ensure that we are not left behind.



Thank you for Listening