

Country progress report - Nigeria

Global AIDS Monitoring 2020



the 1990s, the number of people in the world who are under 15 years of age has increased from 1.1 billion to 1.6 billion, and the number of people aged 65 and over has increased from 0.2 billion to 0.5 billion (United Nations 2002). The number of people aged 65 and over is projected to increase to 1.1 billion by 2050 (United Nations 2002).

There is a growing awareness of the need to address the needs of older people in the workplace. The World Health Organization (WHO) has identified the need for a 'healthy ageing' approach to the workplace (WHO 2002). The WHO defines 'healthy ageing' as 'the process of developing and maintaining the functional ability that enables older people to live the lives they want' (WHO 2002, p. 1). The WHO has identified five domains of healthy ageing: physical, mental, social, spiritual, and financial (WHO 2002).

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- VIII. Community-led service delivery - Ensure that at least 30% of all service delivery is community-led by 2020
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- X. Empowerment and access to justice - Empower people living with, at risk of and affected by HIV to know their rights and to access justice and legal services to prevent and challenge violations of human rights
- XI. AIDS out of isolation - Commit to taking AIDS out of isolation through people-centred systems to improve universal health coverage, including treatment for tuberculosis, cervical cancer and hepatitis B and C

Overall

Fast-track targets

Progress summary

HIV is still a major public health challenge. Nigeria currently ranks fourth in the world with regards to HIV burden. Nigeria has a generalized HIV epidemic with the highest HIV burden in West and Central African sub-region. The country has an estimated 1.8 million people living with HIV (PLHIV) (2019 Spectrum estimate) and an estimated 107,112 new HIV infections which is about 38% of new infections in West and Central African region. Nigeria accounts for about 41% of vertically transmitted HIV infections in children in the region in 2018 (UNAIDS, 2019). In 2018, a population based survey – Nigeria HIV/AIDS Indicator and Impact Survey (NAIIS, 2018) was conducted to estimate HIV prevalence and related health indicators at national and sub-national levels. HIV prevalence from this survey was 1.3% among 15 – 49 years which was an improvement from the last population-based survey conducted in 2012, National HIV/AIDS Reproductive Health and Survey (NARHS) with HIV prevalence of 3.4%. While there has been a remarkable gain in rolling back the epidemic, the total number of people affected by the epidemic remains high.

The 2014 Integrated Biological and Behavioural Surveillance Survey (IBBSS) conducted among the key populations to estimate HIV prevalence showed men that have sex with men (MSM) had the highest prevalence of 22.9% followed by female sex workers (FSW) 14.4% and people who inject drugs (PWID) 3.4%.

3.1 HIV incidence rate per 1000, Nigeria (2010-2019)

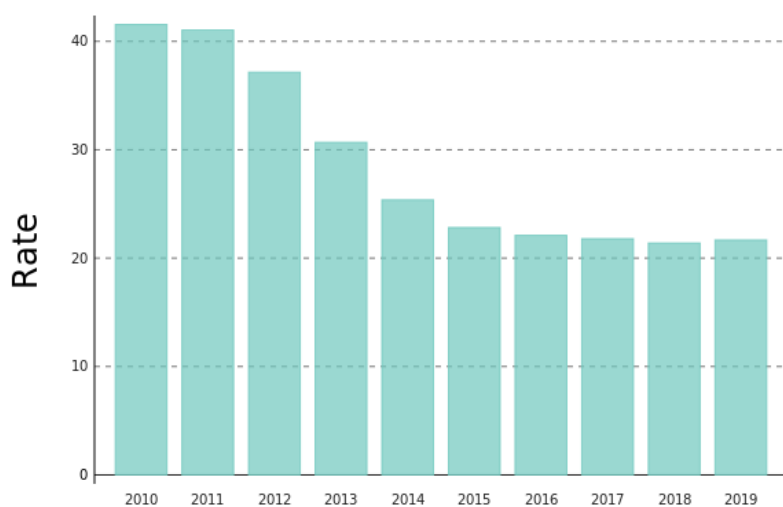
Number of people newly infected with HIV in the reporting period per 1000 uninfected population



Source: Spectrum file

1.7 AIDS mortality per 100 000, Nigeria (2010-2019)

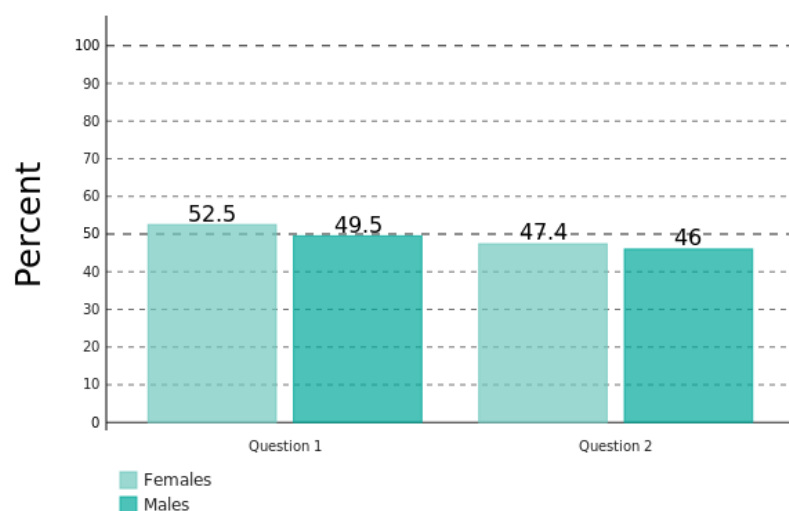
Total number of people who have died from AIDS-related causes per 100 000 population



Source: Spectrum file

4.1 Discriminatory attitudes towards people living with HIV, Nigeria (2019)

Percentage of respondents (aged 15-49 years) who respond "No" to: Question 1 - "Would you buy fresh vegetables from a shopkeeper or vendor if you knew that this person had HIV?"; Question 2 - "Do you think that children living with HIV should be able to attend school with children who are HIV negative?"



HIV testing and treatment cascade

Ensure that 30 million people living with HIV have access to treatment through meeting the 90-90-90 targets by 2020

Progress summary

The strategies that 90% of PLHIV know their status; 90% of people diagnosed with HIV receive ARVs, and 90% of PLHIV on ART are virally suppressed all remain valid, as there are still many PLHIV who do not know their HIV status, the challenges facing PLHIV on treatment remain, and the current less than optimal viral suppression rate warrant continuation of the programmatic adjustments being proposed. This will improve performance and lead to achieving program results and impact.

The GoN, PEPFAR and the GF agreed to align their program funding and implementation support toward accelerated achievement of 90-90-90 HIV targets starting from 2020.

1st 90: It is estimated that there are about 1.8 million people in Nigeria living with HIV in 2019; about one third do not know their HIV status resulting in a gap of about 23% to reach the target of 90% of PLHIV knowing their HIV status. Before 2018, millions of people were tested for HIV and received the results using general population testing approach at less than 1% HIV positivity yield. Return on investment on general population HIV testing was low. In order to close this gap at reasonable cost, the country adopted differentiated HIV testing strategies that include provider initiated testing & counselling, index case testing, key population (KP) sexual network testing, HIV testing for TB patients, and targeted community testing – all of which have been shown to have higher HIV positivity yield than general population testing. HIV Self-Testing has since been adopted for KPs and male partners of HIV positive women. Self-testing will be extended to adolescents and young people. Self-testing is being used to extend reach of HIV testing to populations that are not adequately being reached by differentiated HIV testing strategies.

2nd 90: As of December 2019, 1,147,941 people (about 63% of) people living with HIV are on treatment consisting of 95% adults and 5% children. Differentiated ART Services Delivery is the approach of choice and is implemented at facility and community levels according to categorization of individual patients. Main models of DSD being implemented include case management, multi-month dispensing (MMD) of ARVs for first line ART regimen to stable clients and community-based refill/distribution of ARVs plus adherence support. 2nd 90 also encompasses management of co-morbidities such as TB, STIs, fungal infection, viral Hepatitis B & C, Human Papilloma Virus (HPV) and mental health. Management of advanced HIV disease (AHD) has been introduced this year to address nearly 30% of clients who start

ART with CD4 count of less than 200. Also introduced is third line therapy for those who fail second line and salvage regimens.

3rd 90: 2019 national viral load suppression rate was 74.6%. Main causes of low VLS rates include poor adherence to and retention on treatment, drug toxicity and resistance, and co-infections. Innovative approaches to managing adherence and retention challenges include the use of Treatment Champions, Case Managers, and Mentor Mothers to support, motivate, and counsel clients to adhere to and remain on treatment as well as track and return clients lost to follow up. Adoption of VL treatment monitoring resulted in significant reduction of CD4 count coverage, including the baseline test which is used for diagnosing AHD. This trend will have to be reversed along with introduction of TB LAM and cryptococcal antigen test for management of AHD.

Policy questions (2019)

Is there a law, regulation or policy specifying that HIV testing:

a) Is mandatory before marriage

No

b) Is mandatory to obtain a work or residence permit

No

c) Is mandatory for certain groups

No

What is the recommended CD4 threshold for initiating antiretroviral therapy in adults and adolescents who are asymptomatic, as per MoH guidelines or directive, and what is the implementation status?

No threshold; treat all regardless of CD4 count; Implemented countrywide (>95% of treatment sites)

Does your country have a current national policy on routine viral load testing for monitoring antiretroviral therapy and to what extent is it implemented?

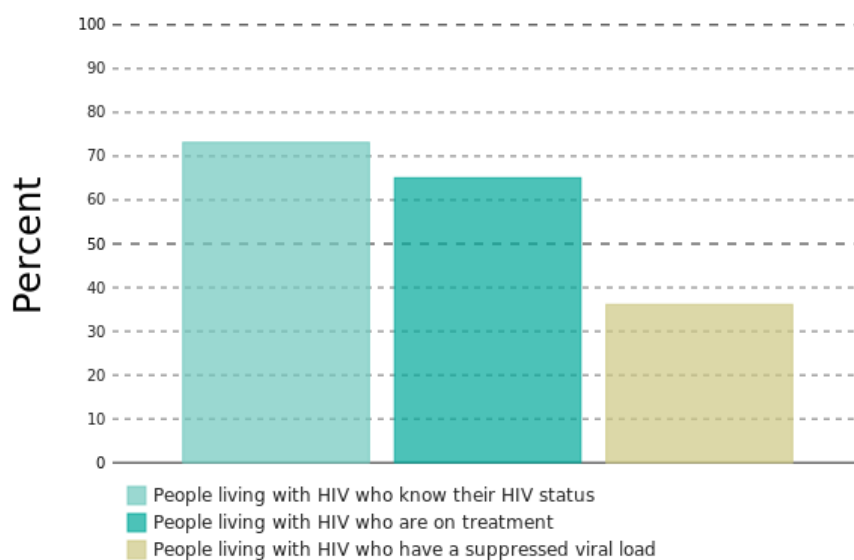
a) For adults and adolescents

Yes; Implemented countrywide (>95% of treatment sites)

b) For children

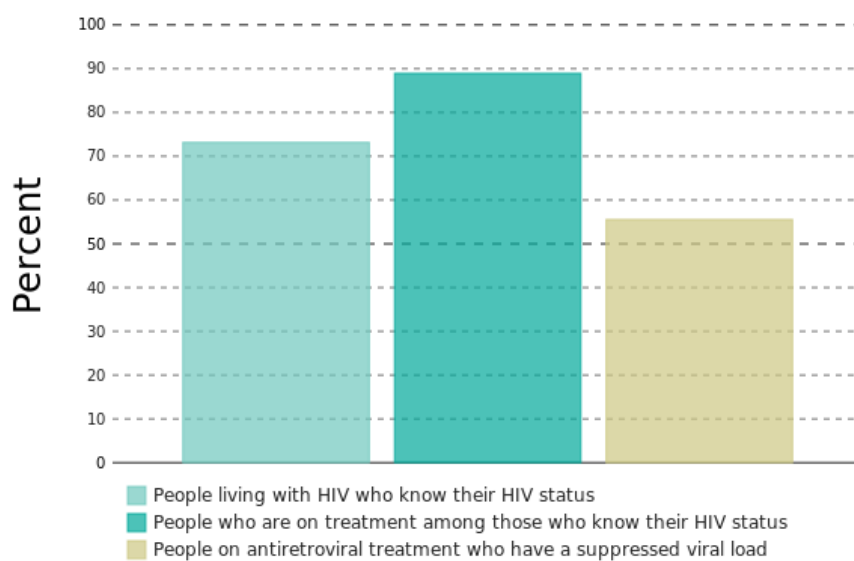
Yes; Implemented countrywide (>95% of treatment sites)

HIV testing and treatment cascade, Nigeria (2019)



Source: Spectrum file

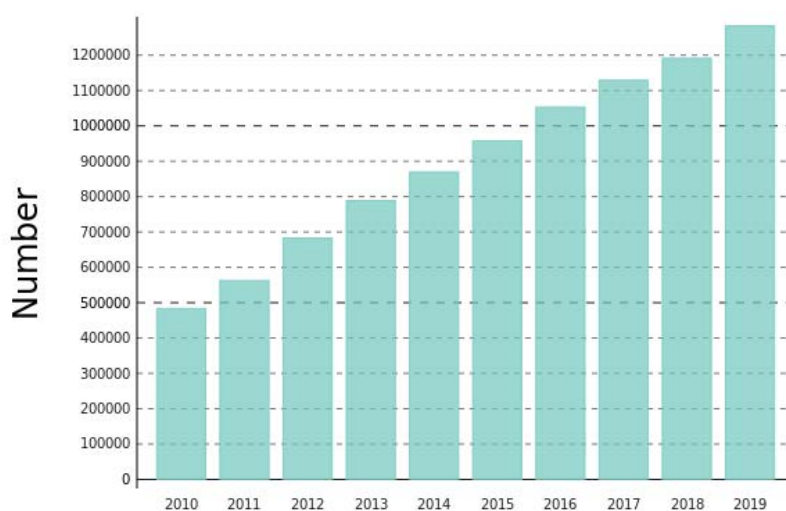
Progress towards 90-90-90 target, Nigeria (2019)



Source: Spectrum file

1.1 People living with HIV who know their HIV status, Nigeria (2010-2019)

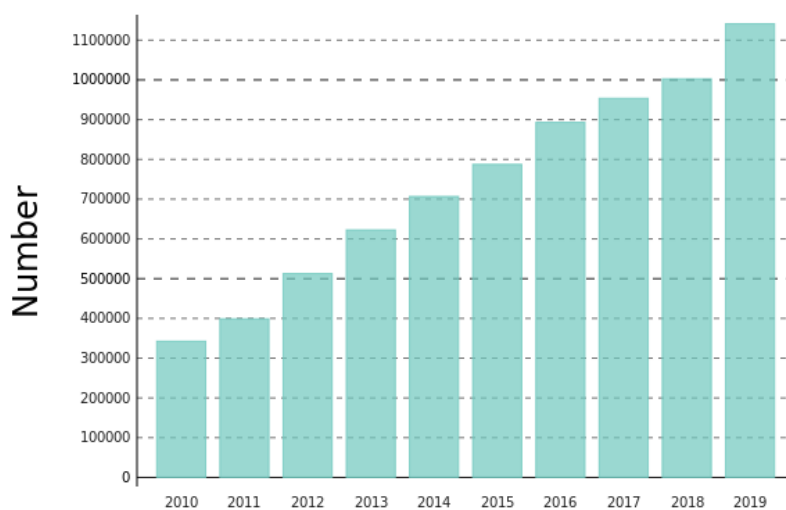
Number of people living with HIV who know their HIV status



Source: Spectrum file

1.2 People living with HIV on antiretroviral therapy, Nigeria (2010-2019)

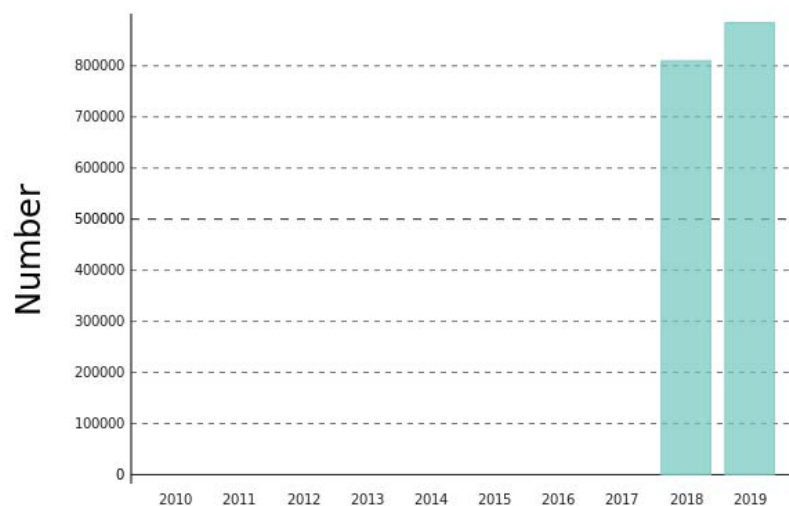
Number of people on antiretroviral therapy



Source: Spectrum file

1.3 People living with HIV on antiretroviral treatment who have suppressed viral load, Nigeria (2010-2019)

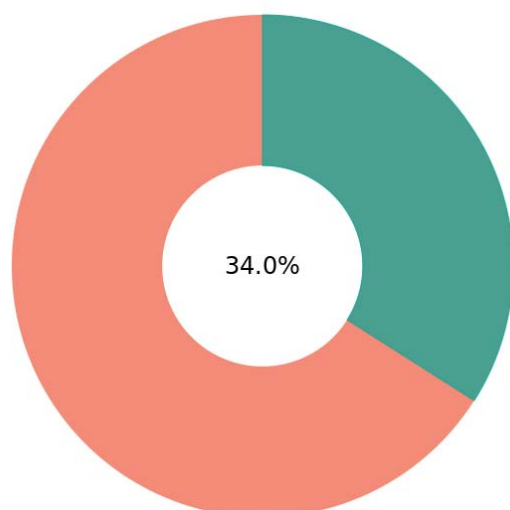
Number of people living with HIV with suppressed viral loads



Source: Spectrum file

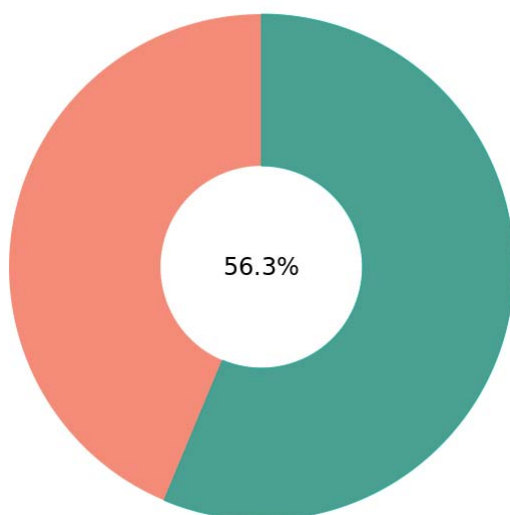
1.4 Late HIV diagnosis, Nigeria (2019)

Percentage of people living with HIV with the initial CD4 cell count <200 cells/mm³ during the reporting period



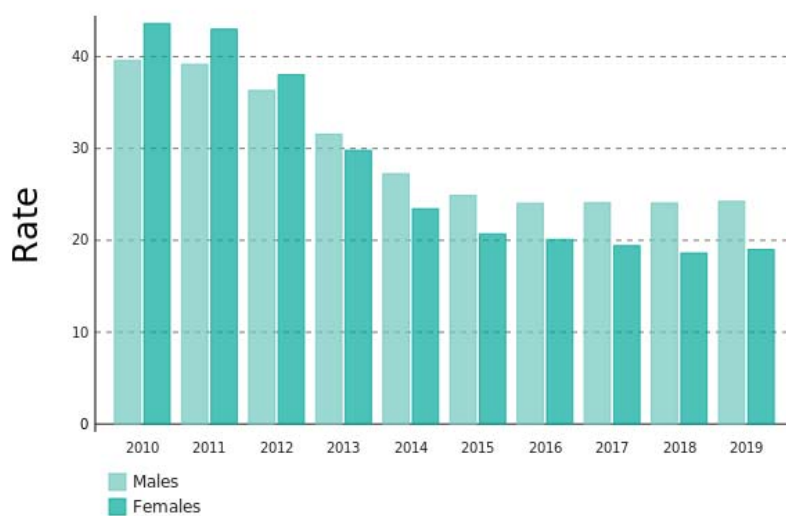
1.4 Late HIV diagnosis, Nigeria (2019)

Percentage of people living with HIV with the initial CD4 cell count <350 cells/mm³ during the reporting period



1.6 AIDS mortality rate per 100 000, Nigeria (2010-2019)

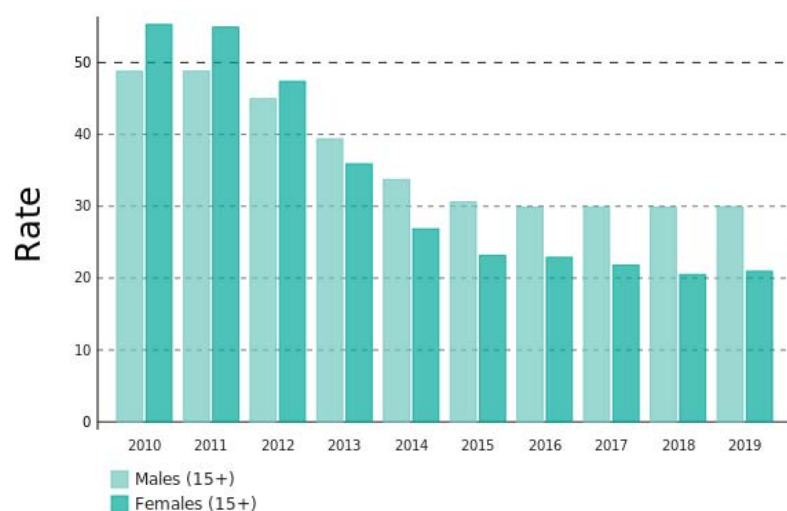
Total number of people who have died from AIDS-related causes per 100 000 population



Source: Spectrum file

1.6 AIDS mortality rate per 100 000 among adults, Nigeria (2010-2019)

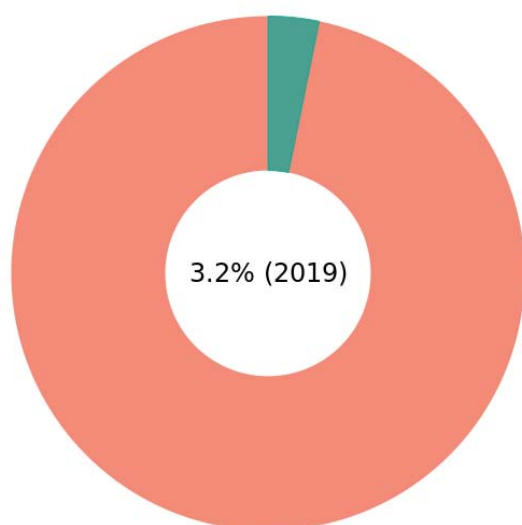
Total number of adults who have died from AIDS-related causes per 100 000 population



Source: Spectrum file

1.7 HIV testing volume and positivity, Nigeria

Percentage of HIV -positive results returned to people (positivity) in the calendar year



Number of HIV tests conducted = 7 109 423

Prevention of mother-to-child transmission

Eliminate new HIV infections among children by 2020 while ensuring that 1.6 million children have access to HIV treatment by 2018

Progress summary

All HIV pregnant women accessing antenatal care services are provided with HIV testing and extending the testing points to other service delivery points like pediatric and immunization clinics. In high burden states, community mobilization for HIV testing for pregnant women was priorities. Case managers and mentor mothers (peers) are used to support all HIV positive pregnant women and to ensure that HIV all exposed babies were proactively linked to early Infant diagnosis services. The resilient health system strengthening by Government of Nigeria through Federal Ministry of Health is another way to ensure elimination of new HIV infections among children.

Policy questions (2019)

Does your country have a national plan for the elimination of mother-to-child transmission of HIV?

Yes

Target(s) for the mother-to-child transmission rate and year: -

Elimination target(s) (such as the number of cases/population) and year: -

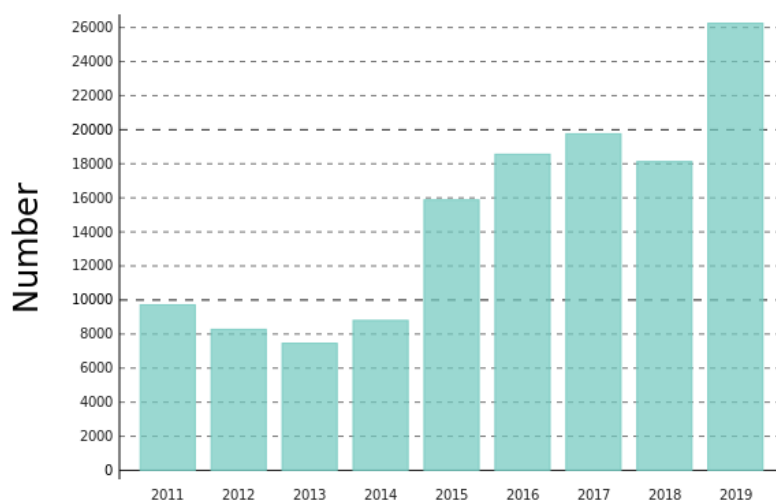
Do the national guidelines recommend treating all infants and children living with HIV irrespective of symptoms and if so, what is the implementation status of the cut-off?

Treat all, regardless of age

Implemented countrywide (>95% of treatment sites)

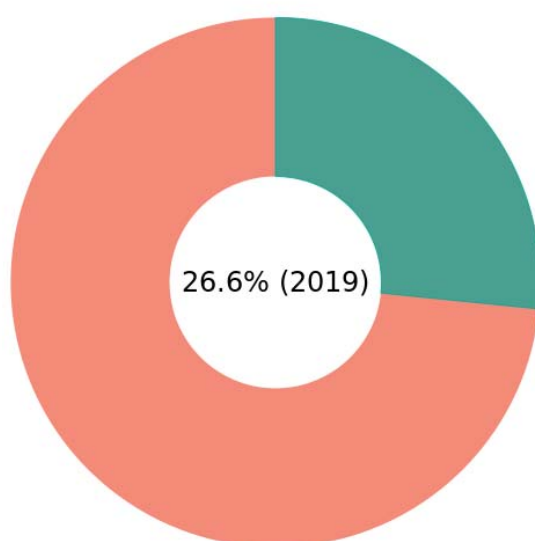
2.1 Early infant diagnosis, Nigeria (2011-2019)

Number of infants who received an HIV test within two months of birth



2.1 Early infant diagnosis, Nigeria (2018-2019)

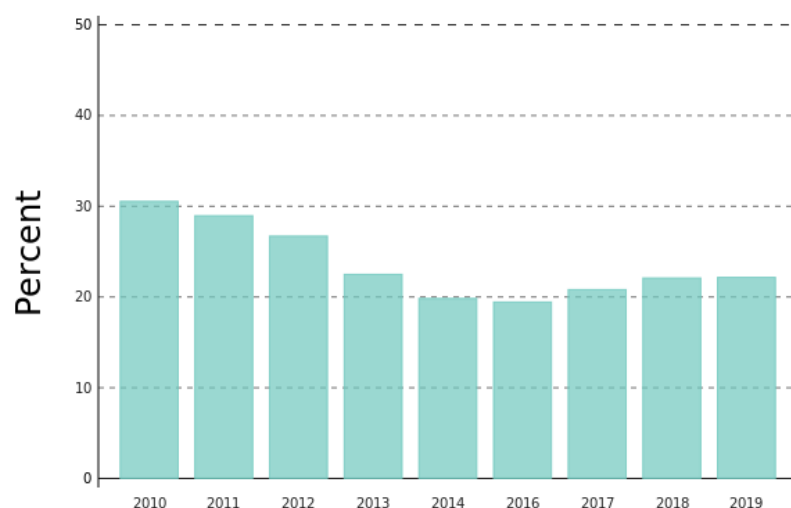
Percentage of infants born to women living with HIV receiving a virological test for HIV within two months of birth



↑ 18.4% (2018)

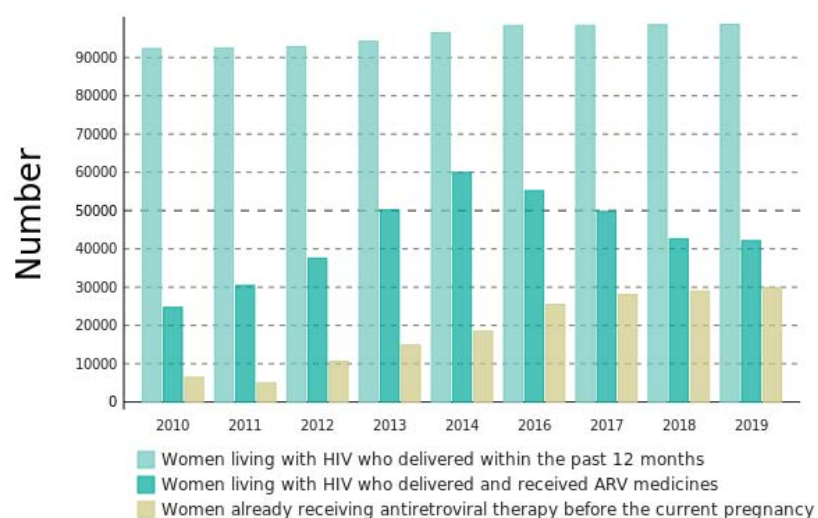
2.2 Mother-to-child transmission of HIV, Nigeria (2010-2019)

Estimated percentage of children newly infected with HIV from mother-to-child transmission among women living with HIV delivering in the past 12 months



Source: Spectrum file

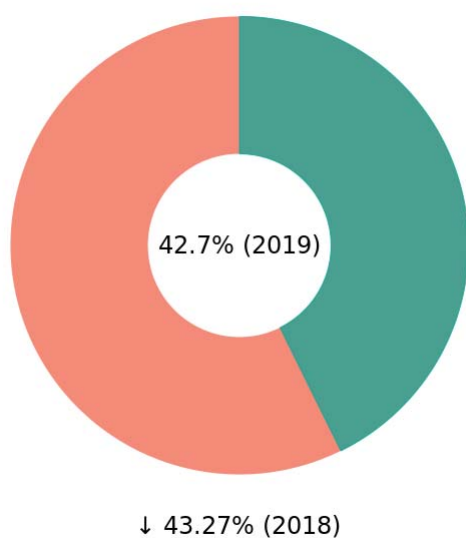
2.3 Preventing mother-to-child transmission of HIV, Nigeria (2010-2019)



Source: Spectrum file

2.3 Preventing mother-to-child transmission of HIV, Nigeria (2018-2019)

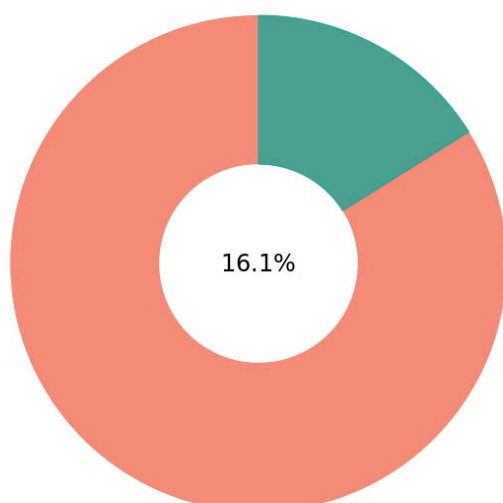
Percentage of pregnant women living with HIV who received antiretroviral medicine to reduce the risk of mother-to-child transmission of HIV



Source: Spectrum file

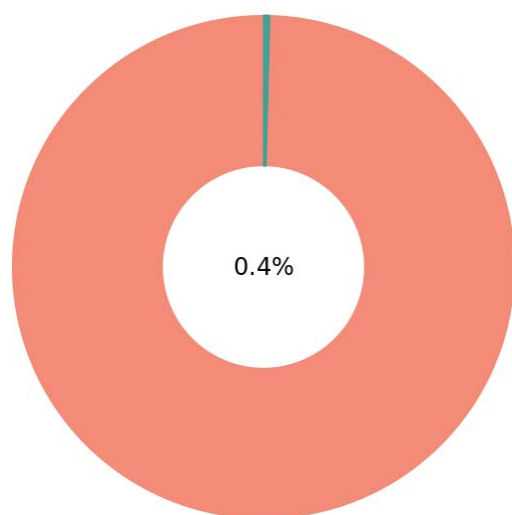
2.4 Syphilis among pregnant women, Nigeria (2019)

Percentage of pregnant women tested for syphilis



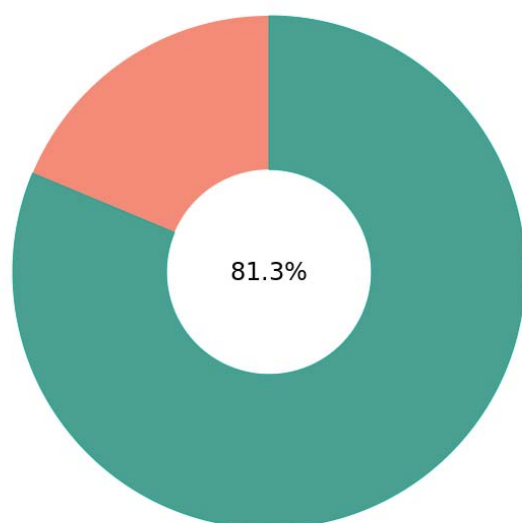
2.4 Syphilis among pregnant women, Nigeria (2019)

Percentage of pregnant women tested positive for syphilis



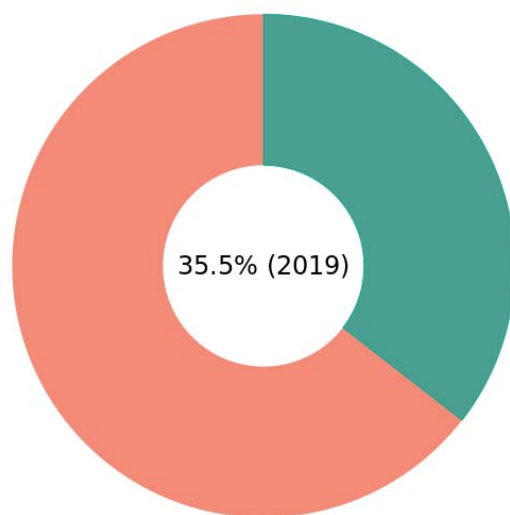
2.4 Syphilis among pregnant women, Nigeria (2019)

Percentage of pregnant women on treatment among those who tested positive



2.6 HIV testing in pregnant women, Nigeria (2018-2019)

Percentage of pregnant women with known HIV status



↑ 0% (2018)

HIV prevention; Key populations

Ensure access to combination prevention options, including pre-exposure prophylaxis, voluntary medical male circumcision, harm reduction and condoms, to at least 90% of people by 2020, especially young women and adolescent girls in high-prevalence countries and key populations—gay men and other men who have sex with men, transgender people, sex workers and their clients, people who inject drugs and prisoners

Progress summary

PrEP is provided in-country for the Key Population (Provided by partners) and discordant couples (Provided by GON). In partnership with USAID and with support from PEPFAR There are on-going plans for a PrEP collaborative study in Nigeria. The Collaboration for HIV Prevention Options to Control the Epidemic (CHOICE) will conduct a series of learning and planning sessions to support oral PrEP roll out and scale-up.

With a score of 98%, voluntary medical male circumcision is not one of the Global HIV prevention pillars that Nigeria reports on. However, there are plans to ensure that the remaining 2% are reached with interventions.

Nigeria is in the process of piloting harm reduction interventions in three states (Oyo, Abia and Gombe states). The pilot program will cover Needle Syringe program(NSP) and provision of Naloxone for treatment of drug overdose.

A National Condom Strategy (NCS) 2017-2021 is in place. This strategy outlines the strategic priorities and key interventions needed to ensure the availability of and access to male and female condoms in Nigeria.

Combination prevention package has been updated for Adolescent Girls and Young women (AGYW) in high prevalence settings. Resource mobilization ongoing to expand focused programming for AGYW in priority locations

Policy questions: Key populations (2019)

Criminalization and/or prosecution of key populations

Transgender people

- Neither criminalized nor prosecuted

Sex workers

- Other punitive and/or administrative regulation of sex work

Men who have sex with men

- Yes, imprisonment (up to 14 years)

Is drug use or possession for personal use an offence in your country?

- -

Legal protections for key populations

Transgender people

- Neither criminalized nor prosecuted

Sex workers

- No

Men who have sex with men

- -

People who inject drugs

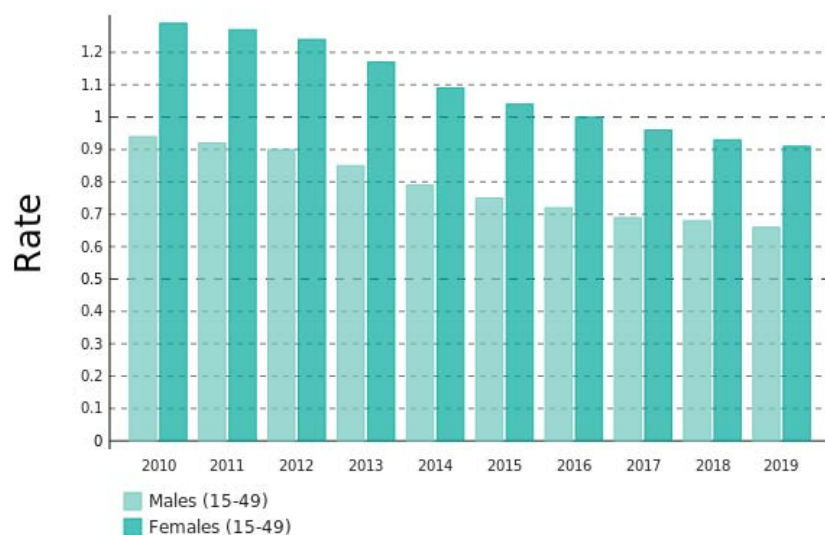
- No

Has the WHO recommendation on oral PrEP been adopted in your country's national guidelines?

No, guidelines have not been developed

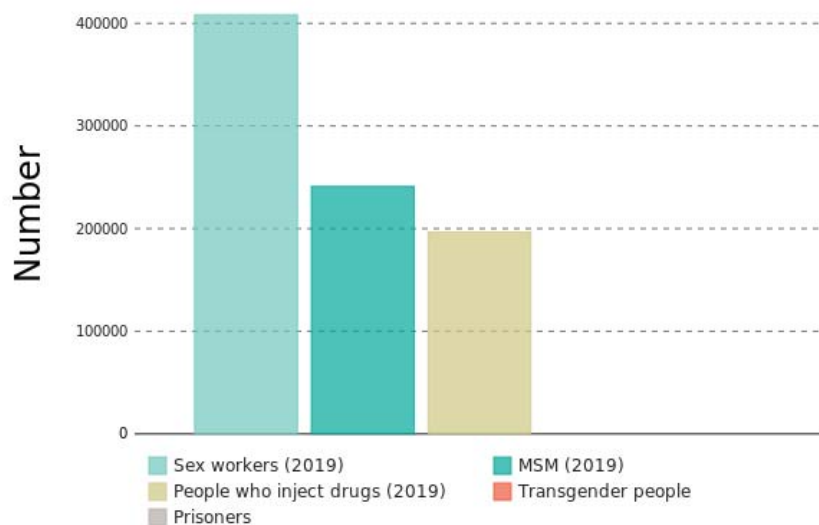
3.1 HIV incidence rate per 1000, Nigeria (2010-2019)

New HIV-infections in the reporting period per 1000 uninfected population (Adults, ages 15-49)



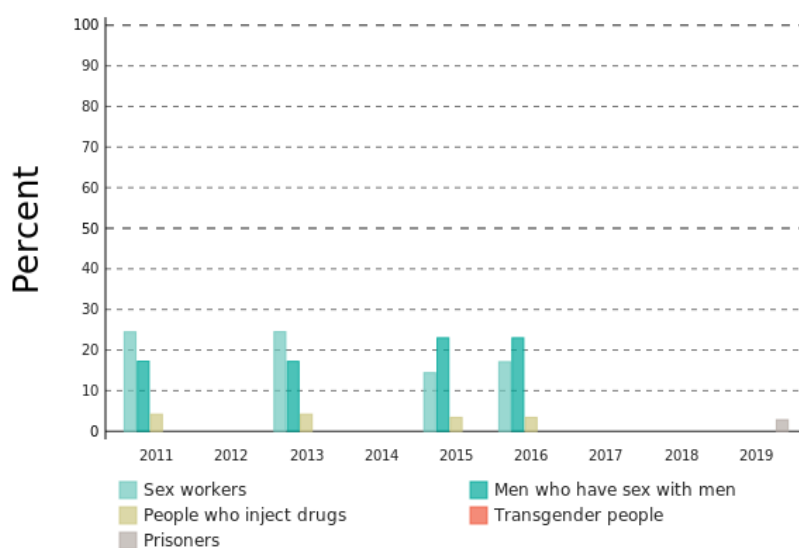
Source: Spectrum file

3.2 Estimates of the size of key populations, Nigeria



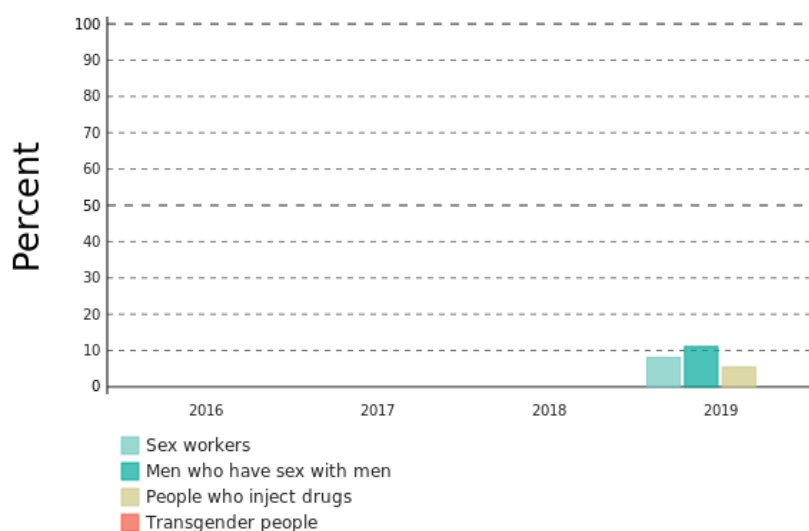
3.3 HIV prevalence among key populations, Nigeria (2011-2019)

Percentage of specific key populations living with HIV



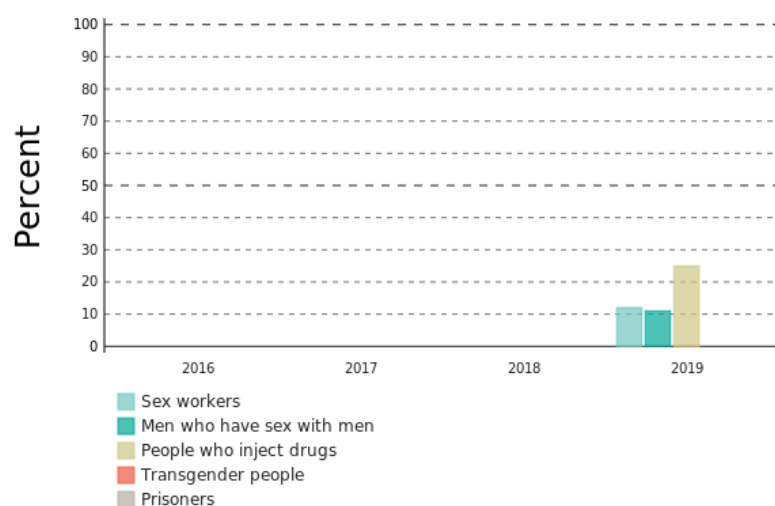
3.4 HIV testing among key populations, Nigeria (2016-2019)

Percentage of people of a key population who tested for HIV in the past 12 months, or who know their current HIV status



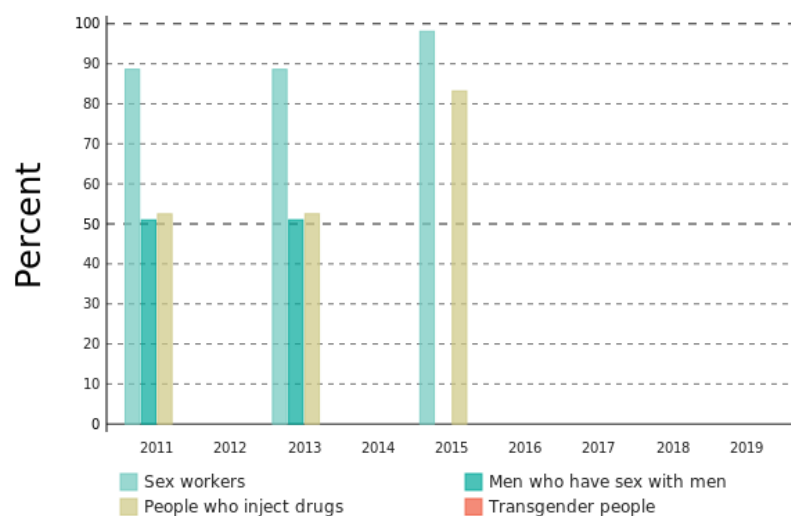
3.5 Antiretroviral therapy coverage among people living with HIV in key populations, Nigeria (2016-2019)

Percentage of the people living with HIV in a key population receiving antiretroviral therapy in the past 12 months



3.6 Condom use among key populations, Nigeria (2011-2019)

Percentage of people in a key population reporting using a condom the last time they had sexual intercourse



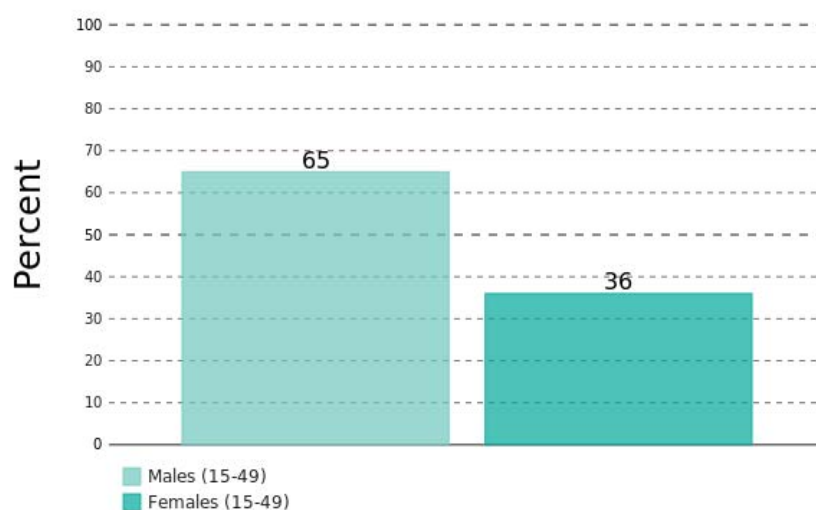
3.15 People who received pre-exposure prophylaxis, Nigeria (2017-2019)

Total number of people who received oral PrEP at least once during the reporting period



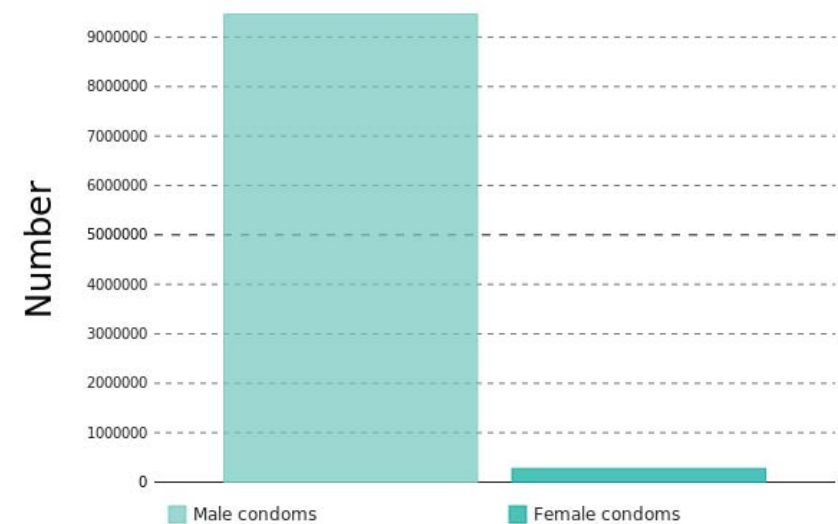
3.18 Condom use at last high-risk sex, Nigeria (2018)

Percent of respondents who say they used a condom the last time they had sex with a non-marital, non-cohabiting partner, of those who have had sex with such a partner in the last 12 months



3.19 Annual number of condoms distributed, Nigeria (2019)

Number of condoms distributed during the past 12 months



Gender; Stigma and discrimination

Eliminate gender inequalities and end all forms of violence and discrimination against women and girls, people living with HIV and key populations by 2020

Progress summary

A multi-sectoral national plan of action was developed in 2015 to conduct interventions to eliminate gender inequalities and end all forms of violence and discrimination against women, girls, and PLHIV and key populations. The 3-year plan aimed at reducing the incidence of HIV by addressing GBV using a multi-sectorial approach at the national, states and local levels. The main achievements of the plan include strengthened human and institutional capacity; reviewed laws and policies; increased knowledge and awareness on GBV/HIV prevention and management; and improved information management and use. Plans under way to expand interventions to improve outcomes of HIV prevention and impact mitigation program towards ending AIDS by 2030.

Policy questions (2018)

Does your country have a national plan or strategy to address gender-based violence and violence against women that includes HIV

Yes

Does your country have legislation on domestic violence*?

Yes

- Physical violence
- Sexual violence
- Emotional violence
- Economic violence
- Explicit criminalization of marital rape
- Protection of former spouses

What protections, if any, does your country have for key populations and people living with HIV from violence?

- General criminal laws prohibiting violence
- Specific legal provisions prohibiting violence against people based on their HIV status or belonging to a key population
- Programmes to address intimate partner violence*
- Programmes to address workplace violence
- Interventions to address police abuse
- Interventions to address torture and ill-treatment in prisons

Does your country have policies in place requiring healthcare settings to provide timely and quality health care regardless of gender, nationality, age, disability, ethnic origin, sexual orientation, religion, language, socio-economic status, HIV or other health status, or because of selling sex, using drugs, living in prison or any other grounds?

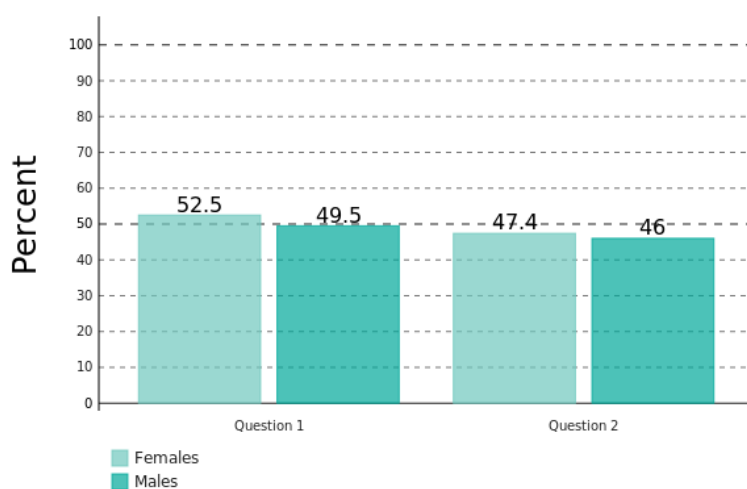
Yes, policies exists and are consistently implemented

Does your country have laws criminalizing the transmission of, non-disclosure of or exposure to HIV transmission?

No, but prosecutions exist based on general criminal laws

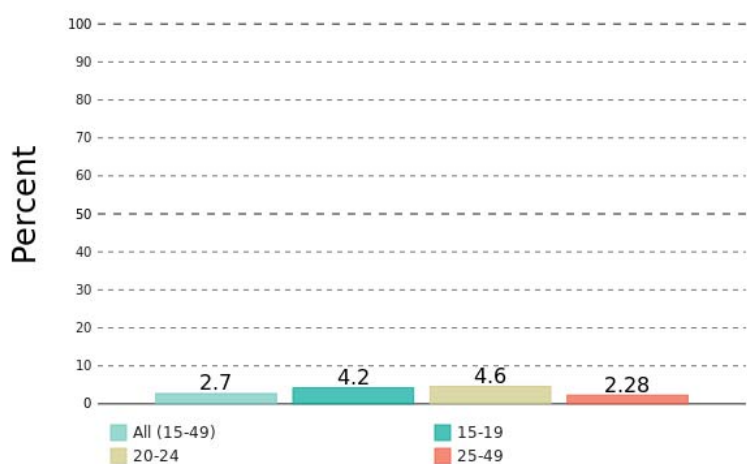
4.1 Discriminatory attitudes towards people living with HIV, Nigeria (2019)

Percentage of respondents (aged 15-49 years) who respond "No" to: Question 1 - "Would you buy fresh vegetables from a shopkeeper or vendor if you knew that this person had HIV?"; Question 2 - "Do you think that children living with HIV should be able to attend school with children who are HIV negative?"

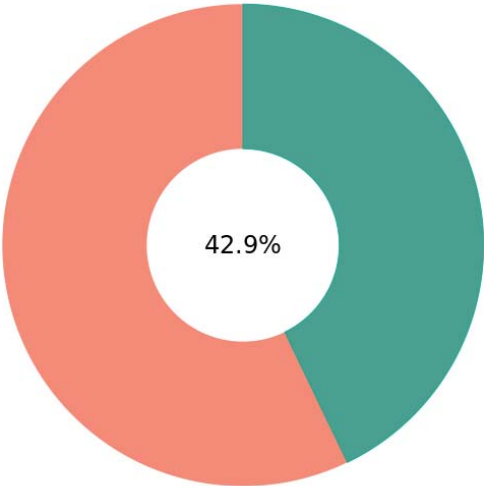


4.3 Prevalence of recent intimate partner violence, Nigeria (2018)

Proportion of ever-married or partnered women aged 15-49 who experienced physical or sexual violence from a male intimate partner in the past 12 months



Percentage of Global AIDS Monitoring indicators with data disaggregated by gender



Knowledge of HIV and access to sexual reproductive health services

Ensure that 90% of young people have the skills, knowledge and capacity to protect themselves from HIV and have access to sexual and reproductive health services by 2020, in order to reduce the number of new HIV infections among adolescent girls and young women to below 100 000 per year

Policy questions (2018)

Does your country have education policies that guide the delivery of life skills-based HIV and sexuality education, according to international standards, in:

a) Primary school

Yes

b) Secondary school

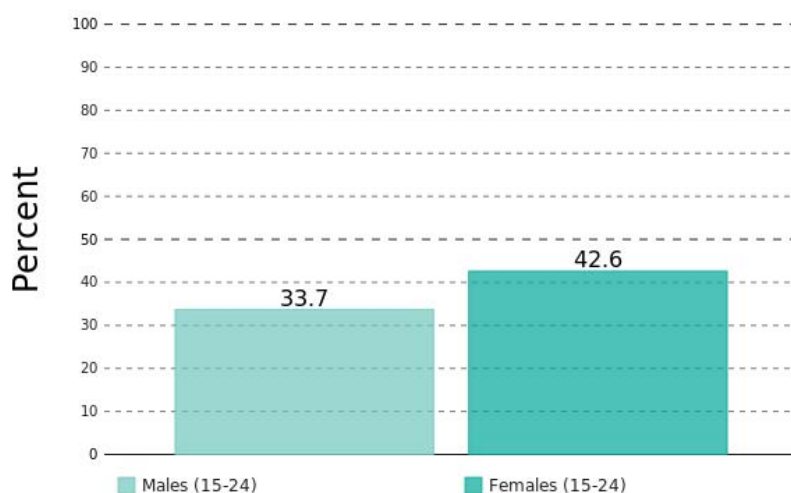
Yes

c) Teacher training

Yes

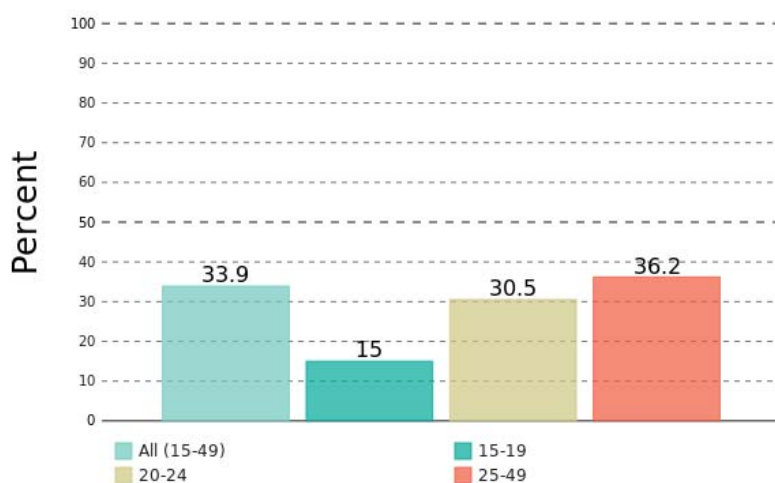
5.1 Young people: Knowledge about HIV prevention, Nigeria (2018)

Percentage of women and men 15-24 years old who correctly identify both ways of preventing the sexual transmission of HIV and reject major misconceptions about HIV transmission



5.2 Demand for family planning satisfied by modern methods, Nigeria (2018)

Percentage of women of reproductive age (15-49 years old) who have their demand for family planning satisfied with modern methods



Social protection

Ensure that 75% of people living with, at risk of and affected by HIV benefit from HIV-sensitive social protection by 2020

Progress summary

Interventions and engagement with the National Social Safety Net Coordinating Office (NASSCO) to facilitate the linkage of vulnerable populations with the social investment program in Nigeria. Ongoing linkages of poor and vulnerable People Living with HIV and key population to economic empowerment initiatives within the community.

Community-led service delivery

Ensure that at least 30% of all service delivery is community-led by 2020

Progress summary

Concerted efforts to strengthen the community end of the service delivery include the review of the National HIV/AIDS Community Care and Support Guidelines scheduled to be rolled out in 2020.

Policy questions (2019)

Does your country have a national policy promoting community delivery of antiretroviral therapy?

No

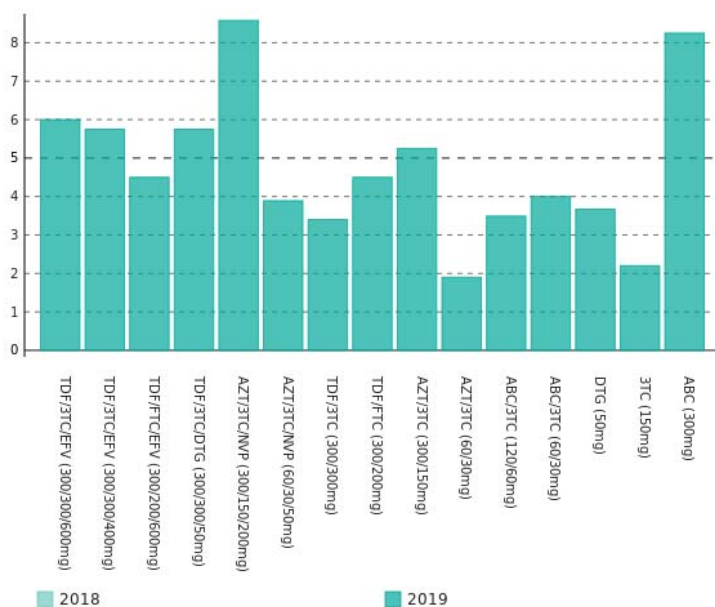
Are there any of the following safeguards in laws, regulations and policies that provide for the operation of CSOs/CBOs in your country?

- Registration of HIV CSOs is possible
- HIV services can be provided by CSOs/CBOs
- Services to key populations can be provided by CSOs/CBOs
- Reporting requirements for CSOs/CBOs delivering HIV services are streamlined

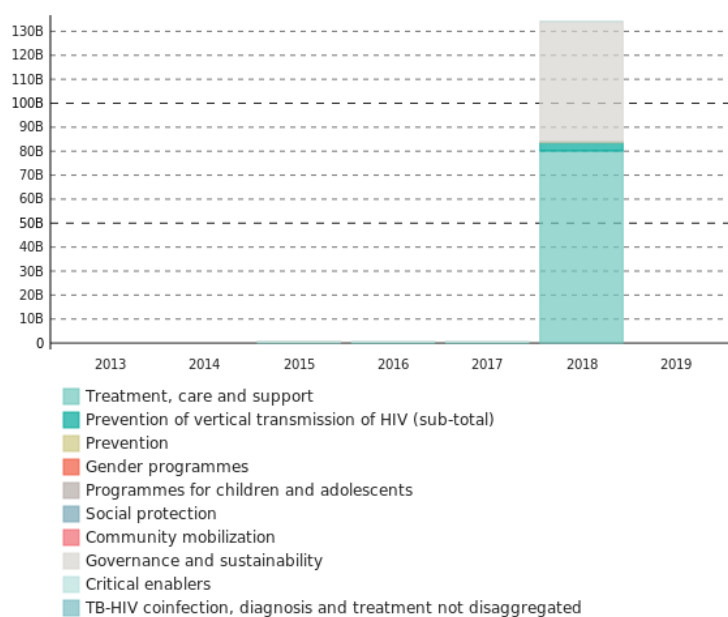
HIV expenditure

Ensure that HIV investments increase to US\$ 26 billion by 2020, including a quarter for HIV prevention and 6% for social enablers

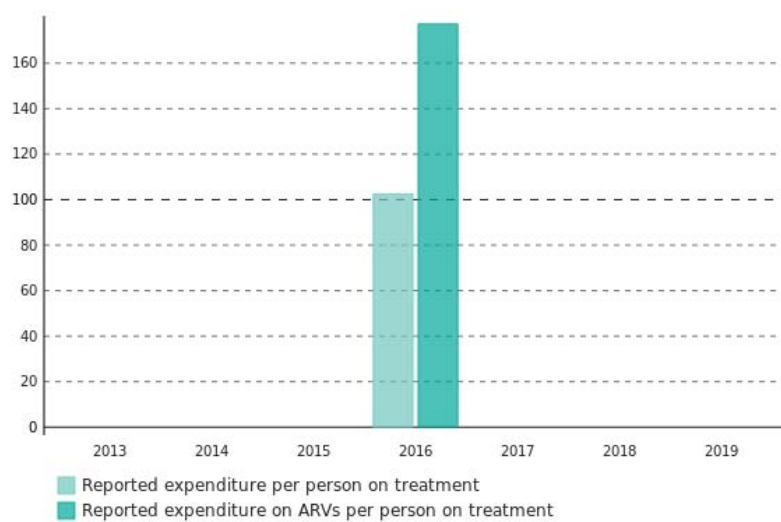
8.2 The average unit prices of antiretroviral regimens (in US\$), Nigeria (2018-2019)



8.3 HIV expenditure by programme category, Nigeria (2013-2019)



Expenditure per person on treatment, Nigeria (2013-2019)



Empowerment and access to justice

Empower people living with, at risk of and affected by HIV to know their rights and to access justice and legal services to prevent and challenge violations of human rights

Progress summary

In 2014, the national HIV and AIDS Anti-Discrimination Act of the Federal Republic of Nigeria was passed into law. This Act makes provisions for the prevention of HIV and AIDS-based discrimination and protects the fundamental human rights and dignity of people living with and affected by HIV and AIDS in Nigeria. The law has been domesticated in 17 States. It has also been translated into four Nigerian languages (Hausa, Igbo, Pidgin English and Yoruba) for popularization. Mediation and litigation of cases are carried out to challenge violations while a compendium of HIV/AIDS related stigma and discrimination cases has been developed to document cases.

Policy questions (2018)

In the past two years have there been training and/or capacity building programmes for people living with HIV and key populations to educate them and raise their awareness concerning their rights (in the context of HIV) in your country?

Yes, at scale at the sub-national level

Are there mechanisms in place to record and address cases of HIV-related discrimination (based on perceived HIV status and/or belonging to any key population)?

Yes

What accountability mechanisms in relation to discrimination and violations of human rights in healthcare settings does your country have, if any?

- Complaints procedure
- Mechanisms of redress
- Procedures or systems to protect and respect patient privacy or confidentiality

What barriers in accessing accountability mechanisms does your country have, if any?

- -

AIDS out of isolation

Commit to taking AIDS out of isolation through people-centred systems to improve universal health coverage, including treatment for tuberculosis, cervical cancer and hepatitis B and C

Progress summary

There is a national policy in place on cervical cancer screening and treatment for all women including women living with HIV.

The National Guidelines on HIV Prevention and Treatment for adult, adolescent and children and TB/HIV contains co-infection policies on Isoniazid preventive therapy (IPT) or latent TB infection (LTBI) prophylaxis for people living with HIV, Intensified TB case finding among people living with HIV, TB infection control in HIV health-care settings, Co-trimoxazole prophylaxis, Hepatitis B and C screening and management in anti-retroviral therapy clinics

Policy questions (2019)

Is cervical cancer screening and treatment for women living with HIV recommended in:

a) The national strategy, policy, plan or guidelines for cancer, cervical cancer or the broader response to non-communicable diseases (NCDs)

-

b) The national strategic plan governing the AIDS response

-

c) National HIV-treatment guidelines

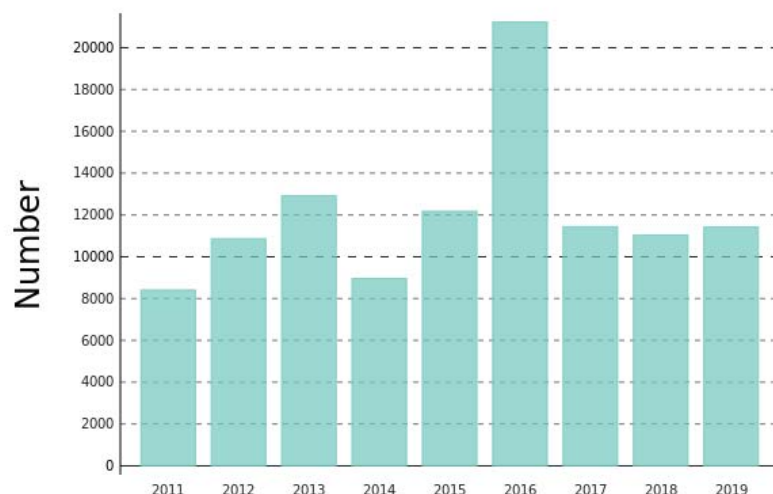
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What coinfection policies are in place in the country for adults, adolescents and children?

- Isoniazid preventive therapy (IPT) or latent TB infection (LTBI) prophylaxis for people living with HIV
- Intensified TB case finding among people living with HIV
- TB infection control in HIV health-care settings
- Co-trimoxazole prophylaxis
- Hepatitis B screening and management in antiretroviral therapy clinics
- Hepatitis C screening and management in antiretroviral therapy clinics

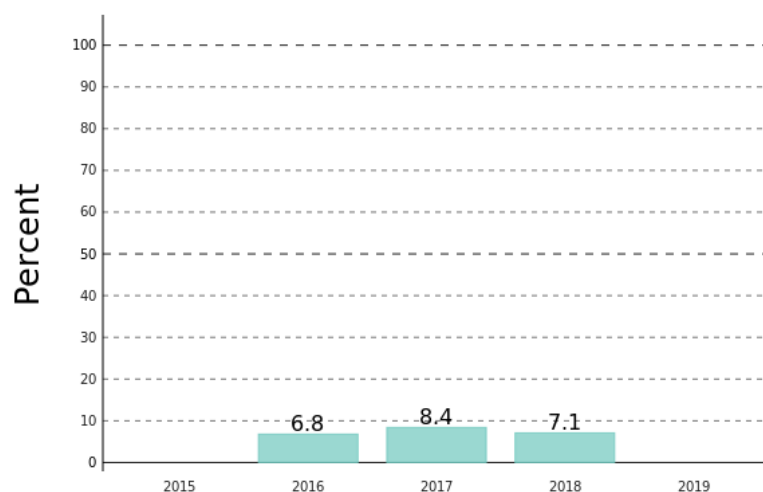
10.1 Co-managing TB and HIV treatment, Nigeria (2011-2019)

Number of HIV-positive new and relapse TB patients started on TB treatment during the reporting period who were already on antiretroviral therapy or started on antiretroviral therapy during TB treatment within the reporting year



10.2 Proportion of people living with HIV newly enrolled in HIV care with active TB disease, Nigeria (2015-2019)

Total number of people living with HIV with active TB expressed as a percentage of those who are newly enrolled in HIV care (pre-antiretroviral therapy or antiretroviral therapy) during the reporting period



10.3 Proportion of people living with HIV newly enrolled in HIV care started on TB preventive therapy, Nigeria (2015-2019)

Number of patients started on treatment for latent TB infection, expressed as a percentage of the total number newly enrolled in HIV care during the reporting period

