

**Africa TB Summit, Kigali, Rwanda**

## **Nigeria presentation**

**EXPANDING PRIVATE  
SECTOR ENGAGEMENT IN TB**

**4<sup>th</sup> to 6<sup>th</sup> March 2019**



**INSTITUTE OF HUMAN  
VIROLOGY NIGERIA**



# Status according to GTB Report- 2018



- low TB case notification in Nigeria (25% and 52% of estimated DS-TB and DR-TB cases respectively)
- Suboptimal awareness and knowledge of TB
- TB Treatment coverage – 24%
- Proportion of TB patients and household who incur catastrophic cost during TB treatment: 71%
- Weak facility - community Linkages
- Suboptimal functionality of the GeneXpert Machines (34%) and coverage (390 machines located in 309 LGAs out of 774 LGAs)

# Strategic shift- High Level mission in Feb 2018



Recommendations include

1. Restructuring – from separate DR TB and DS TB grants to an integrated approach
2. Refocusing – **TB PPM** and **TB public sector Grants**
3. Innovations – Adopt targeted innovative strategies focused on finding the missing cases
4. GeneXpert Optimization and Expansion

# Key PPM Indices for Nigeria - 2017



- Only 2.5% of PPM providers were engaged to provide TB services
- PPM contributed only 4.5% of the targeted 30% contribution(NSP 2015 -2020)

# Public Private Mix for TB Control



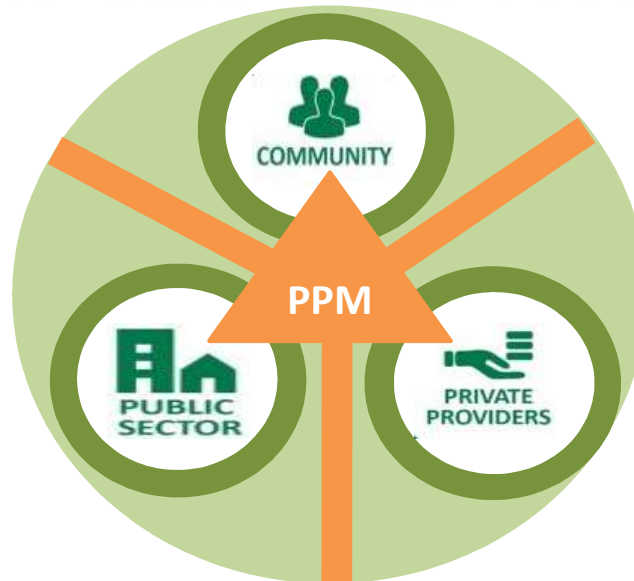
## Why PPM?

**About 300,000 missing TB cases in Nigeria**

**60% of Nigerians first seek care at Private Health Facilities**

**Low TB case notification at Private Health Facilities**

**Poor knowledge of TB management at Private Health Facilities**



## Benefits of PPM

**Increased TB case Notification**

**Enhanced quality of TB diagnosis & treatment**

**Reduced diagnostic delays**

**Improved coverage and access to TB care**

# Expected impact



## % of Facilities providing TB services out of total country estimates

	2017	2019 - 2020
FBOs	51% (277 vs 547)	75% (412 vs 547)
PFP	5% (646 vs 13,448)	13% (1,708 vs 13,448)
Labs	4.6% (96 vs 2,103)	20% (421 vs 2,103)
PMVs /CPs	1.4% (743 vs 54,500)	39% (21,200 vs 54,500)
TBAs/ Religious houses		

## Contribution to TB case Notification

	2019	2020
FBOs	21,298 (9%)	26,855 (11%)
PFP	31,948 (14%)	40,283 (16%)
Labs	3,550 (2%)	4,476 (2%)
PMVs /CPs	9,939 (4%)	12,571 (5%)
TBAs/ Religious houses	4,260 (2%)	5,371 (2%)

## Total TB case Notification

Year	Total TB case Notification
2019	70,995 (30%)
2020	89,517 (35%)

# Geographical Scope



The geographical coverage for the PPM grant was selected based on

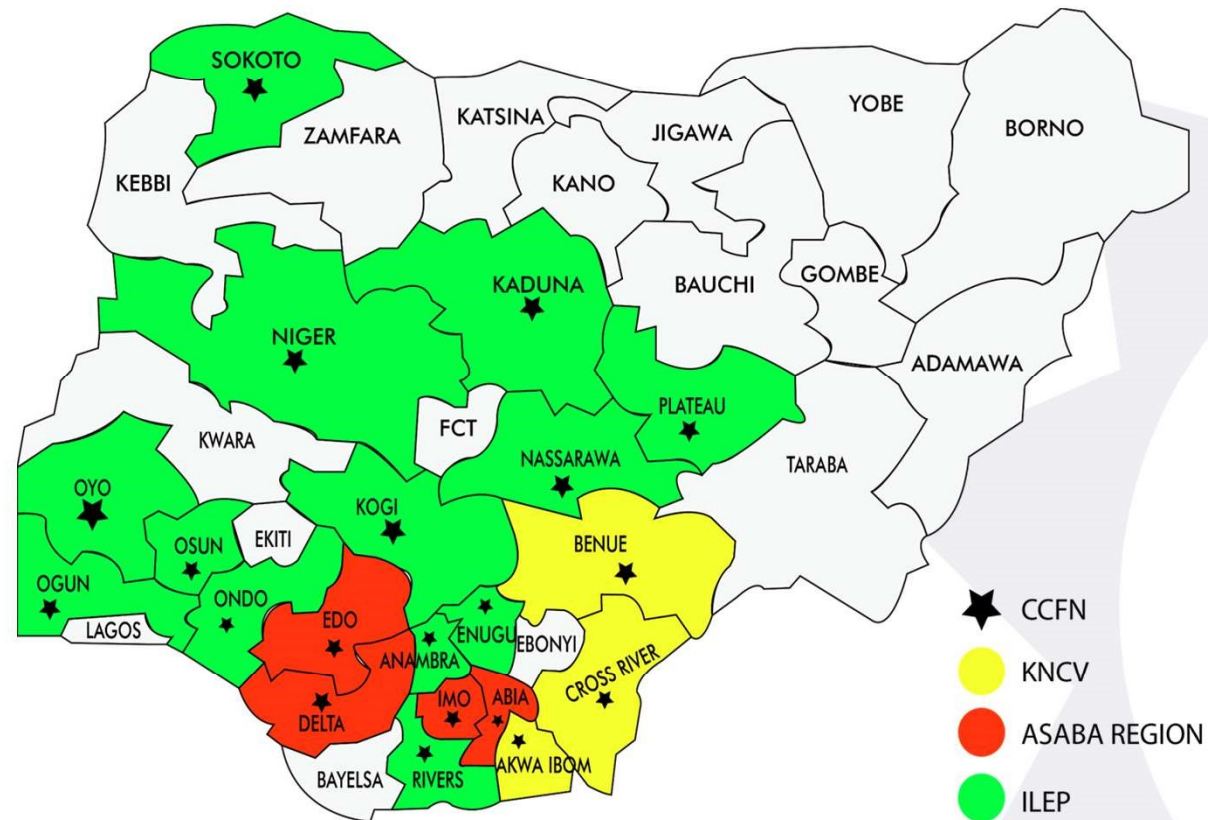
1. Analysis of disease burden
2. Proportion of missing TB cases - 169,779 (54%) of the missing TB cases in Nigeria are in the selected States
3. Volume of PPM providers and the existing gap in TB service expansion in the private sector
4. Assessment of Health Seeking Behavior
5. Absence of a current PPM support from any other source (Kano and Lagos were excluded)



# Geographical Scope -2



FBOs, PFPs, Standalone private facilities, Community Pharmacists and Patent medicine vendors, Traditional Birth Attendants and practitioners, prayer houses, etc. in the following 20 States





# Innovative Strategies for PPM engagement



## Supply side strategies

## Demand side strategies – linkage to Public sector

Engagement of umbrella bodies/  
PPM platform activation

Mapping/  
Site Selection  
and  
activation

Capacity  
building/  
mentoring

Supply chain  
Management &  
M and E (linkage  
to public sector)

Sustained Demand  
Creation

Community linkages

National & State  
Social Health  
Insurance schemes

Enablers

Provision of microscopes for treatment monitoring

Deployment of a TB screening and Notification application (MAT App)

Performance-based Incentives (for referral, testing and treatment)

A hub-and spoke cluster model to strengthen community-facility linkages for increased case notification, capacity building, patient support , etc