TB REACH grantees in Nigeria step up the fight

**June, Abuja, Nigeria** - In Nigeria, the TB problem is acute, and approximately 300,000 people who develop TB every year are not detected, treated, or notified to the national TB program. Despite significant Global Fund investments, these numbers remain stubbornly high.

Dr. Jacob Creswell from the Stop TB Partnership, Dr. Robert Stevens and Dr. Sanaie Ataulhaq, part of the Stop TB Partnership’s TB REACH M&E team travelled to Nigeria to participate in meetings and visit TB REACH projects to see the progress being made.

The mission began with a joint TB, HIV, and malaria program review, the first of its kind in Nigeria. All major donors and partners came together to discuss progress as well as how to overcome the serious challenges Nigeria faces in trying to end the diseases.

The TB REACH initiative provides funding to partners looking to implement innovative ways to reach more people with quality TB services. This mission brought all four current grantees from Nigeria together to present their findings and share their results with the TB program. After a meeting in Abuja, the M&E reviewers visited the different projects to see what progress was being made.

**From meeting rooms to the field**

Dr. Creswell and Dr. Stevens traveled to northeastern Nigeria to visit two projects focused on providing care to two marginalized groups:

- **Caring for internally displaced people**
  Due to the Boko Haram insurgency, more than 13 million people have been affected, and an estimated 2.2 million people have been displaced. These communities are at greater risk of poor health outcomes due to their lack of access to services and poor living conditions. The project, led by the Dr. Suraj Kwami and the Gombe State Agency for the Control of AIDS, focuses on providing care to internally displaced people (IDP). It spans across four states most affected by the insurgency—Gombe, Yobe, Adamawa and Borno.

- **Supporting nomadic communities**
  The second project, led by KNCV with local NGOs, implements the service delivery for the nomadic communities. There are more than 9 million nomads in Nigeria, and more than half of them travel through Adamawa, Taraba and Gombe States. Despite their longstanding presence, health services have not been accessible to nomadic pastoralists.
A training was organized for new staff at the primary care facilities in Adamawa State to introduce them to the importance of screening people for TB symptoms, and getting people tested, ideally using Xpert MTB/RIF.

In Nigeria, less than 2,000 people were diagnosed and treated for MDR-TB, even though more than 20,000 people develop the disease each year. For children, the situation is even more difficult, with only a few thousand children being receiving treatment globally each year. Through the outreach efforts of the Janna Health Foundation, better services are being provided to the children who have been fleeing violence with their families.

Working with local leaders is critical to any intervention’s success as access to the communities can only be obtained through close collaboration at both the community and political level. The team paid a visit to the nomadic chief to secure political support for ongoing activities and expansion of case detection and treatment support to new areas.

Overall, it was an insightful and successful mission in meeting the grantees and integrating new and innovative ways to fight TB.