# Stop B Partnership

# Nigeria

#### Community, Rights and Gender Country Profile

## **Working Document**





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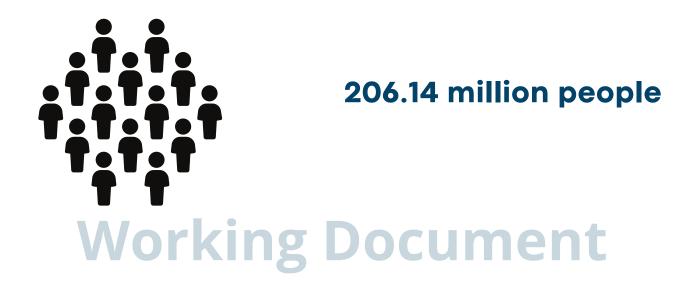
**CRG Interventions** 



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High TB, TB/HIV and MDR/RR -TB Country

#### S THE GLOBAL FUND

**High Impact Africa 1** 



# **UNHLM Targets**

## Resource Needs (2022)

1,101.17 million (USD)



# No Data

# Diagnosis and Treatment Targets (2020)

TB Target: 270,600 % Target Achieved:51



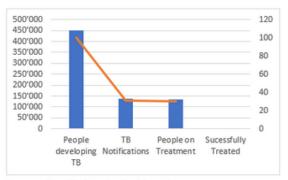
## National Strategic Plan and Funding Opportunities

- Next National Strategic Plan
  Development: 2025
- Next Global Fund funding request (proposal development): 2023

### Stop B Partnership

# **TB** Situation

#### Epidemiological Data (2020)



#### Source: Stop TB Country Dashboard

#### Major Gaps in TB prevention and Care

- 316,680 Missing people with TB (68,651 were children)
- 128,000 people died because of TB
- 2 061 Laboratory confirmed people with MDR/RR-TB (WHO data, 2020)

#### **Community, Rights and Gender Data**

The CRG assessment conducted in 2017/2018 showed the following: Accessibility Barriers include distance and cost of transportation to clinics, lack of integrated TB/HIV services, low public awareness, lack of accurate information and widespread misconceptions about TB and out of pocket costs for services including limited clinic hours.

Availability Barriers: drug stock-outs, unavailability of counselling services and limited availability of rapid molecular tests. Quality issues: public perceptions of low-quality care in public sector, overcrowding, long wait times for services and delays in test results at public clinics, lack of quality assurance for TB drugs sold over-the-counter at private chemists, self-medication and traditional or faith healers, untrained Healthcare workers (HCWs) stigmatizing and discriminatory treatment by HCWs.

Acceptability issues: lack of privacy in clinics, overcrowding and concerns for confidentiality of medical records in public clinics, stigmatizing and discriminatory treatment by HCWs, lack of gender-sensitive TB programming and limited clinic hours.

Discrimination issues: there is no legal prohibition of TB discrimination. TB-related law and policy uses stigmatizing and discriminatory terminology. TB stigma and discrimination is pervasive in families, communities, healthcare, educational and workplaces.

Freedoms: there is no legal protection for right to privacy of people with TB. Lack of privacy in clinics is a barrier services and challenge to adherence. There is no law, policy or guidance on TB isolation. Subnational health laws allow for apprehension, detention and compulsory treatment of people with TB, HIV and other infectious diseases and criminalizes the transmission of TB and HIV.

Gender: Nigeria's Gender Policy does not address TB. Men delay seeking services due to work duties, preference for self-medication, fear of stigma at clinics and socio-cultural notions of masculinity. Women seek services sooner than man because of concern for children's well-being and socio-cultural notions of femininity. But experience delays due to limited financial and low decision-making power in families. Men face TB risk from social habits, occupations, communal drinking and drug use. Women face TB risk from caregiving roles and pregnancy lowering immune response. Men experience stigma but are able to hide their status to mitigate stigma's impact. There is lack of gender-sensitive TB programming.

Key and Vulnerable Populations recognized by NTP include PLHIV, prisoners, detainees, sex workers, IDPs, urban and rural poor, smokers, PWUD, children and HCWs. Key populations newly recognized include street kids, truck drivers, taxi drivers, motorcycle transporters, tricycle transporters, factory workers and quarry workers. Mobile populations experience treatment interruptions and are often lost to follow up.

Participation: there is lack of community mobilization for TB. Few TB CBOs contributes or participate in TB programs and decision-making.

Remedies and Accountability: access to justice for people with TB is hindered by strict standing requirements in courts, high litigation costs and complexity of legal procedures





### **Community Engagement and Representation**

Active National Stop TB Partnership

• Yes

National Network of People Affected by TB

• TB Network

TB Network represented on CCM

• Yes

High-Level Engagement with Parliamentarians

- Yes (Led by Stop TB Partnership and NTP) Celebrities Engagement in TB response
  - No (Wives of Governors)

Challenge Facility for Civil Society Round 10

- Janna Health Foundation/Sufabel Community Development Initiative
- Debriche Health Development Centre (DHDC)
- Lawyers Association Makurdi
- Stop TB Partnership Nigeria

CFCS Round 10 Regional Level Partners

 African Coalition on TB (ACT)

**Global Networks:** 

- TB People
- TB Women/Lean on Me Foundation





- CRG Assessment Completed
- Costed CRG Action Plan Available
- TB Stigma Assessment Conducted
- TB Stigma Elimination Plan Available
- Community-led Monitoring Mechanism
  - In progress



### CFCS Round 10 Grantees

#### Janna Health Foundation/Sufabel

#### **Community Development Initiative**

- Global Fund Sub Recipient
- Project Location: Mambila Plateau, Sarduana, Gashaka, Kurmi Local Government Area and Ngada Development Area of Taraba State
- Timeline: December 2021 December 2022
- Objectives
  - To sustain community-based Active TB Case finding among refugee communities in Sardauna, Gashaka and Kurmi LGAs including Ngada development area of Taraba State.
  - To empower individuals and communities to identify, monitor and advocate for local priorities and improve the TB response in Sardauna, Gashaka and Kurmi LGAs including Ngada development area of Taraba State.
  - To propose evidence based CRG strategies and a minimum package of services to reach refugee populations with TB services in Nigeria.



## CFCS Round 10 Grantees

#### Debriche Health Development Centre (DHDC)

- Global Fund Grant: No
- Project Location: Lagos State
- Timeline: November 2021 November 2022
- Objectives
  - To advance the capacity / knowledge of TB affected communities and the general public on TB , COVID 19 and Human rights in Lagos state Nigeria.
  - To develop a context specific digital solution, using OneImpact to facilitate community led monitoring and to reduce barriers to access, human rights violations, and stigma among slum dwellers in Lagos State, Nigeria.
  - To engage and empower slum dwelling communities and people affected by TB in Lagos State, Nigeria.
  - To facilitate/establish Platform/ mechanism of exchange of CLM data and accountability between TB affected communities, the State TB Program and legal service providers to enhance social accountability and rapid responses to TB challenges in Lagos State, Nigeria.
  - To use resources/information generated from CLM data to ensure quality TB services are available, accessible and acceptable for all, that TB support services are available to all, towards the elimination of TB stigma and the protection and promotion of human rights at an individual level, community level and programmatic level in Lagos State, Nigeria
  - To participate and engage in TB advocacy and accountability initiatives at national, regional, and global levels.



# CFCS Round 10 Grantees

#### Lawyers Alert Association Makurdi

- Global Fund Grant: No
- Project Location: Lagos State and FCT Abuja
- Timeline: December 2021 December 2022
- Objectives
  - To empower communities affected by TB and lawyers in Lagos and FCT Abuja to use the law to protect and promote the rights of people affected by TB.
  - To build networks and coalitions between Lawyers, people affected by TB and the Media in Lagos and FCT Abuja to promote a rightsbased, people-centred, gendertransformative TB response.
  - To participate and engage in TB advocacy and accountability initiatives at national, regional, and global levels



## CFCS Round 10 Grantees

#### Stop TB Partnership Nigeria

- Global Fund Grant: No
- Project Location: National
- Timeline: December 2021 December 2022
- Objectives
  - To implement a human rights-based approach to TB in Nigeria leveraging the law and through the mobilization, empowerment and engagement of TB Survivors, public health experts and law and policy makers.
  - To advocate for the development of National TB Legislation to protect and promote the rights of people affected by TB in Nigeria.
  - To participate and engage in TB advocacy and accountability initiatives at national, regional, and global levels.



# Questions? Contact us.

#### cfcs@stoptb.org

