The project is 50 million GBP DFID funded 5 years programme to work in 8 states starting with 3 states viz. Anambra, Kano & Lagos. The project has a strong emphasis on capacity building as well as supporting rapid scale-up of interventions. The design followed the findings of DFID’s situation assessment and was refined in consultation with partners. The project commenced in April 2008 and was launched in June 2008.

The programme is being implemented by a group of International Partners: Malaria Consortium, HPI & GRID, local partners and stakeholders. The stakeholders include the NMCP, State Malaria Programmes, LGAs & Communities while the Partners include HERFON, JHU / CCPN, FOMWAN, CHAN, CHAN Medipharm & PMG – MAN.

Programme Approach

The approach of the partnership towards the Support to National Malaria Programme in Nigeria is to provide the necessary technical expertise and experience for a comprehensive fight against malaria. We aim to demonstrate new ways of working, innovation using evidence of what has and has not worked in Nigeria and elsewhere. The best response to the current needs in Nigeria requires a pluralistic approach that prepares and supports the Nigerian commercial and civil society sectors for their long term role of tackling malaria control in the country. Achievement of our vision requires that we work closely with all stakeholders in Nigeria especially the Government ministries, donor community, commercial sector, not-for profit agencies and civil society.

Three crucial aspects of the Nigerian situation have prompted our approach:

1. The massive burden of malaria in Nigeria with over 300,000 children dying each year from a disease that is completely preventable and curable.
2. An overstretched public health system, which offers limited access and insufficient quality of care.
3. A vibrant, constantly evolving commercial sector for the manufacture, distribution and sale of pharmaceutical products and mosquito nets, that responds to market demands, but is not aligned with national policy.

These are addressed in our technical approach as follows:

**Reaching the poor and vulnerable**
- Ensuring that the poor, vulnerable and those at risk have access to LLINs and ACTs at affordable low cost, closer to where they live and in consonance with their care seeking and buying behaviour.
- Demonstrating that aiming for close to attainable universal coverage of LLINs may be a better, less costly, and a more rapid way of reaching the poor and most vulnerable than through investing huge amounts of public funds in complex “targeting systems”.
- Making sure that Intermittent Preventive Treatment (IPT), a technology proven to have high impact for low cost, but currently underexploited in Nigeria, is scaled up rapidly.

**Investing in capacity development**
- Investing significant financial and local human resources to dramatically improve the capacity of public sector, civil society and private sector health services to properly prevent and treat malaria in the country.
- Ensuring donor and government investments are optimised through engagement in harmonisation processes, systems development and policy dialogue at State and Local Government Area (LGA) level as well as Federal level
- Using locally generated research, monitoring and evaluation to refine constantly our approaches and advice, based on robust evidence.

**Moving towards new approach to public-private partnership**
- Moving away from ‘social marketing’ approaches by using instead a ‘public health private market’ approach that embraces a full market philosophy and supports the commercial sector rather than suffocating it. This approach draws on the diversity of enterprises in Nigeria and existing marketing organisations with experience and success in promoting and distributing not just health products but also other consumer goods.

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### Outputs

In order to achieve the **purpose** of strengthening delivery of Nigeria’s national malaria control effort, the project will achieve the following outputs:

**OUTPUT 1. Improved National, State, and LGA level capacity for policy development, planning and coordination**

Following joint needs assessment we shall provide a range of innovative management and organisational development support activities for FMOH and at State and LGA level including support for planning, monitoring and evaluation and creating learning networks. We shall undertake training of health workers using job analysis, competency-based tools and on-the-job training linked with supervision, and
develop a programme to improve management of severe malaria.

**OUTPUT 2. Effective harmonization of all agencies’ support for the malaria sub-sector at federal, state and local levels**

Our activities will include increasing access to information through a range of networks and tracking tools, supporting national and state resource mobilisation and harmonising funding around single national and state plans. We shall also focus on mitigating risk of ruptures in resources by improving performance tracking and establishing early warning systems.

**OUTPUT 3. Improved population coverage of effective measures for the prevention of malaria**

We plan a multiple approach with (1) LLINs campaigns engaging community-based organisations and local authorities to provide rapid increase in coverage, (2) supporting routine distribution in collaboration with LGAs to build and maintain higher coverage and (3) commercial sector development with price support, distribution and marketing support and transfer of LLIN technology to increase the choice, quality, reach and affordability of LLINs in Nigeria. We shall also facilitate a major increase in uptake of intermittent preventive treatment for pregnant women.

**OUTPUT 4. Improved access of the population to effective treatment for malaria**

We shall strengthen health systems for treatment in public, NGO and private sectors, particularly quantification, supply chain management, diagnostic and quality assurance systems. We shall use Roving Change Agents in an innovative on-site training programme. We shall dramatically increase access to affordable ACTs even for the very poor through supporting their use by patent medicine vendors and pharmacists. This will involve training, public education and price support of ACTs coupled with market research and careful quality monitoring. We shall also support local manufacturers, improve management of severe malaria and support efficacy monitoring.

**OUTPUT 5. Increased community awareness and demand for effective malaria treatment and prevention**

All the other activities will be informed and improved through a comprehensive programme of behaviour change communications. This will entail joint review of existing strategies, joint development of state-specific communications strategies, development of media and materials for LLIN campaigns, other ITN approaches, treatment seeking and IPT. Priority approaches will include community engagement strategies, advocacy and capacity building.

**OUTPUT 6. Operational research into key areas of prevention and treatment provides the evidence base for more effective strategies**

Our operational research approach will closely involve Federal and State MOH in order to answer the questions they see of greatest relevance. They will also play a key role in commissioning appropriate Nigerian research institutions to undertake some of the research. Capacity development will be supported through calls for proposals and mentoring research teams, and there will be communications strategy to ensure useful dissemination. In addition there will be a series of key monitoring and evaluation activities for the interventions supported by the project.

**Delivering Results**

Our approach synergises ‘social’ and ‘market’ objectives. The result will be that a thriving market is able to develop, which will provide more choice and security of availability of both services and commodities, whilst public sector support ensures vulnerable groups are protected with LLINs and use ACTs at affordable costs. There will be choice:
- for the consumer by supporting a diversity of brands,
- within the commercial sector as more than one agency is supported through our commercial development approach and
- for central government, State and LGAs by presenting and discussing strategy options for their programme planning and development and providing opportunities for them to commission research to test these strategies.

**Expected results:**
- **6,000,000** LLINs to unreached households and LLIN coverage targets over 3 years
- **Affordable LLINs and over 9,000,000 affordable ACTs to under-fives with fever by support of the commercial sector**
- **9,000,000** doses of sulfadoxine-pyrimethamine (SP) for IPT
- Improved quality of care in targeted health facilities in the project states

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