



Reducing the malaria burden in Nigeria

Strengthening Nigeria's public health system to achieve pre-elimination levels by 2025

Background

Malaria is a leading cause of illness and death in Nigeria, which has the highest malaria burden in the world. In 2019, the country recorded over 61 million cases — an increase of 2.4 million compared to 2018 — and 95,000 deaths attributable to malaria.^[1] Morbidity varies widely in terms of geography, gender and age,^[2] with pregnant women and young children particularly at risk and 13 densely populated states accounting for 42 percent of the country's malaria prevalence.^[3] To achieve pre-elimination — that is, less than 10 percent parasite prevalence and 50 deaths per 1,000 for mortality attributable to malaria — interventions should promote preventive behaviours and strengthen diagnosis, treatment and reporting of malaria cases, particularly among high-risk regions and populations.^[4]

The Global Fund to Fight AIDS, Tuberculosis and Malaria recently signed a US\$387 million (£280 million) grant to support Nigeria in its efforts to control and eliminate malaria. The grant will fund a three-year, multi-partner programme that aims to reduce the country's malaria burden to pre-elimination levels by 2025.

Country

Nigeria

Donor

The Global Fund to Fight AIDS, Tuberculosis and Malaria

Length of project

January 2021 – December 2023

Partners

Catholic Relief Services
Federal Republic of Nigeria's National Malaria Elimination Programme

Project outline

Malaria Consortium will support Nigeria's National Malaria Elimination Programme to deliver a set of interventions that are designed to develop capacity around reporting and case management within the public health system.

The project will be implemented in 13 highly populous malaria-endemic states, with Malaria Consortium delivering interventions at the health facility level in Jigawa, Kaduna, Kano, Niger and Yobe. We will also implement the integrated community case management component of the grant in Jigawa and Niger, as part of the Community Health Influencers, Promoters and Services (CHIPS) intervention; distribute long lasting insecticidal nets (LLINs) in Jigawa and Yobe; and deliver seasonal malaria chemoprevention (SMC) in Jigawa, Kaduna, Kano and Niger.

Objectives

By 2025, we aim to contribute to the overall national strategic objectives to:

- improve access to and use of vector control interventions for at least 80 percent of targeted populations
 - ensure provision of chemoprevention, diagnosis and appropriate treatment for 80 percent of targeted populations
 - improve the generation of evidence for impactful decision-making through reporting of quality malaria data and information from at least 80 percent of public and private health facilities, as well as other data sources, including surveillance, surveys and operations research
 - strengthen coordination, collaboration and strategic partnerships to promote efficiency and effectiveness of malaria control activities towards achieving at least 75 percent improvement from baseline using a standardised Organisational Capacity Assessment tool
- improve funding for malaria control by at least 25 percent annually through predictable and innovative sources to ensure sustained funding for malaria control at federal and subnational levels.

Activities

Malaria Consortium will:

- provide training, primarily to community health workers but also to staff at the national, state, local government area (LGA) and health facility levels
- support the rollout of the CHIPS intervention in Jigawa and Niger
- support malaria-in-pregnancy activities to ensure pregnant women attending antenatal clinics receive at least three doses of preventive treatment and an insecticide treated mosquito net
- organise quarterly data quality assurance activities for health facility staff, supportive supervision of routine monitoring and evaluation, and bi-monthly data-validation meetings to monitor and improve the accuracy of reporting in Jigawa, Kaduna, Kano, Niger and Yobe
- deliver 3.8 million LLINs to cover all households in Jigawa through a mass distribution campaign in 2021
- deliver 2.3 million LLINs to cover all households in Yobe through a mass distribution campaign in 2022
- deliver SMC to cover approximately eight million eligible children each year in all LGAs in Jigawa, Kaduna, Kano and Niger in 2021–2023
- facilitate the oversight of CHIPS agents by their supervisors at health facilities, as well as by LGA and state level staff.

References

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4. Federal Ministry of Health. National malaria strategic plan 2021–2025. Nigeria: FMOH; 2020.

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Cover image: Mother and child, Nigeria

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