



NATIONAL MALARIA AND VECTOR CONTROL
DIVISION

FEDERAL MINISTRY OF HEALTH, ABUJA

A BRIEF OF 2007 ANNUAL REPORT

1.0 PREAMBLE

1.1 MANDATE

The National Malaria and Vector Control Programme, NMCP has the mandate to oversee all malaria and vector control activities in Nigeria. The year under review marked several milestones in the strive towards the RBM goals which is to halve the malaria burden by 2010.

1.2 VISSION

A Malaria Free -Nigeria

1.3 MISSION

The Government and entire people of Nigeria believe that every Nigerian has the right:

- *To access highly effective malaria preventive services and curative care delivered as close to the household as possible.*
- *All households, communities and Governments at all levels are working together to take appropriate and effective action to prevent and treat malaria.*

2.0 ACHIEVEMENTS IN 2007

The NMCP has different interventions including; Case management, IVM, IPT, ITNs, BCC and M&E

2.1 Case Management

2.1.0 Capacity Building for Medical Laboratory Scientists:

A training workshop to strengthen laboratory diagnosis of malaria was conducted at UCH, Ibadan in March 2007 for 30 Lab. Scientist. It was attended by Dr. Sofola, National Coordinator, Mr. Banjo, Mrs. Uko and other facilitators from UCH, Ibadan.

2.1.1 Review of Activities Related to Malaria in Pregnancy

(MIP): In February 2007, a meeting to review the activities related to prevention and management of malaria was held in Abuja.

- **Malaria in Pregnancy Technical Working Group, MIPTWG:** The MIPTWG was set up to scale up the implementation of the strategy in the country. The TWG is

composed of Development partners, Reproductive Health Division, NMCP, ACCESS, Netmark and other Stakeholders.

- **Pilot Project on Long Lasting Insecticidal Nets (LLINs) Distribution to Pregnant Women in Selected LGAs Using a Voucher System:** In order to effectively strengthen the distribution of nets to pregnant women a pilot project at ANC was planned using a voucher system. 3 LGAs each were selected from Zamfara, Ekiti and Ebonyi States. The preparation for the implementation of the project is on-going and it is expected to take off soon.

2.2 Incorporation of Antimalaria Policy Changes in the Medical School

Curriculum: The NMCP organized a meeting with lecturers (stakeholders) in medical schools in July 2007 to set out modalities for incorporating the new antimalaria treatment policy into the medical school curriculum.

- 2.3 **Phasing Off Monotherapies:** As part of the steps necessary for the full implantation of the new antimalaria treatment policy in Nigeria, The National Agency for Food and Drug Administration and Control (NAFDAC) has stopped further registration of monotherapies.

- 2.4 **Stakeholders' Meeting on Planning and Implementation of Home Management of Malaria:** NMCP hosted a stakeholders' meeting to jump start the implementation of HMM in Nigeria in September, 2007. Six states were selected to commence implementation, including Kaduna, Cross river, Oyo, Imo, Kwara and Taraba. A road map for the implementation of HMM was drawn up at this meeting and a baseline survey in the selected states was slated to be conducted in December

3.0 ADVOCACY, COMMUNICATION AND SOCIAL MOBILIZATION

- 3.1 **Development of an Integrated Social Mobilization:** ACSM unit of NMCP completed the development and mass production of targeted IEC materials on Intermittent Preventive Treatment (IPT), Artemisinin-based Combination Therapies (ACTs) and Long Lasting Insecticidal Nets (LLINs) which commenced in the last quarter of 2006. Distribution of the materials is on-going.
- 3.2 **Development of an Integrated Social Mobilization:** As part of the effort of the NMCP to integrate its activities with other programmes, the ASCSM unit of NMCP participated in the development of an integrated social mobilization strategic document that would incorporate all aspects of

community mobilization for health. This meeting was held between 3rd – 9th June, 2007 at Kaduna State.

- 3.3 **Commemoration of 2007 Africa Malaria Day:** The annual commemoration of AMD was held. The Theme for this year's AMD was "Free Africa from Malaria Now, Roll Back Malaria" and the slogan was "Leadership and Partnership for Result". Several activities were carried out to mark the event including a World Press Conference, a news media roundtable conference, musical float, drama presentations, Community Rally at Bwari Area Council with football match, Awareness on ITNs retreatment campaign, exhibition of malaria commodities, schools quiz and essay competition.
- 3.4 **Production Advocacy Kits/Brochures:** In the 2nd quarter of the year, the ACSM unit in conjunction with the steering committee developed advocacy kits containing key messages on malaria and its control targeted at policy and decision markers at all levels.
- 3.5 **Advocacy Visit to the New Executive Director of GFATM:** The National Coordinator paid advocacy visit to the new Director of the GFATM in Geneva, Switzerland in May 2007.

4.0 SCALING UP INSECTICIDE TREATED NETS/INTEGRATED VECTOR MANAGEMENT (ITN/IVM)

- 4.1 **Integrated Vector Management Stakeholders' Meeting:** NMCP hosted a meeting of IVM stakeholders to finalize the IVM policy and guidelines between 28th Jan and 2nd Feb 2007.
- 4.2 **Setting-up and Inauguration of the Integrated Vector Management Steering Committee:** In first quarter of the year under review, the ITN/IVM unit of NMCP identified representatives of various Ministries, Parastatals, Private Sector, Non- Governmental organizations and Civil societies. This multi- disciplinary and multi-sectoral committee is to steer and coordinate the implementation of integrated vector management in Nigeria.
- 4.3 **Technical Support to FCT on Approach to malaria Control/Prevention:** Mr. G. N Mbong facilitated a workshop for FCT on approach to malaria control/prevention on 21st March, 2007.
- 4.4 **LLINs Stand- alone Distribution Campaign:** Distribution of Long Lasting Insecticidal Nets to beneficiaries in six (6) LGAs through Stand Alone campaign was held in April, 2007
- 4.5 **Integrated Distribution of LLINs:** The Roll Back Malaria Programme has been collaborating with NPI to

rapidly scale up the distribution of LLINs to under five children. A total of 371,185 were distributed during the IPDs in 2007.

- 4.6 **Implementation of Biological method for malaria control:** The IVM unit of NMCP paid advocacy visits to four (4) States for implementation of biological method for mosquito control in May, 2007.
- 4.7 **Sewage and Emission Control:** Mr. G.N Mbong visited Owerri, Imo State on Sewage and Emission control to appraise the proposal of Euro-Afric Environmental Consortium on 7th March, 2007.
- 4.8 **Sensitization Workshop on Biological Method of Vector Control:** A sensitization workshop on the use of BTI as Biological method of malaria vector control was held in Katsina and Kogi States in June and also in Ekiti, Bayelsa and Enugu States in July 2007.
- 4.9 **IVM Steering Committee Meeting:** The unit organized and hosted the IVM Steering Committee Meeting in Abuja between 23rd and 24th July, 2007. During this meeting, the way forward for IVM implementation was identified and IVM documents were reviewed and harmonized. Also, IVM Subcommittees were formed and a structure for community sustainability of IVM in Nigeria was identified.
- 4.10 **Review of UNICEF Activities:** UNICEF RBM activities on LLINs in the last one year were reviewed in the five UNICEF supported States.
- 4.11 **National Networking Review Meeting on LLINs:** As a follow up on the first national networking meeting and awareness creation on LLINs held in Kaduna in August 2006. NMCP hosted there second meeting in September at A Abeokuta, Ogun State. The objectives of the meeting were to review activities carried out by RBM State Programme Managers on LLINs promotion and use; to scale up awareness on LLINs through the mass media and to advocate for sustainability of LLINs promotion and use. Five UNICEF focal States participated at this meeting.
- 4.12 **Zonal Orientation Review meeting on LLINs:** This was carried out in five UNICEF Zonal Headquarters. RBM focal persons in UNICEF supported States and LGAs were orientated on LLINs.
- 4.13 **ITN Massive Promotion and Awareness Campaign (IMPAC):** Assessment on ITNs tracking was carried out in focal LGAs of the five UNICEF supported States. ITNs tracking on possession and use were carried out in UNICEF focal LGAs.

4.14 Evaluation of Pilot Indoor-Residual Spraying (IRS) In Nigeria: In 2006, NMCP and its Partners initiated a small scale pilot IRS project in three LGAs, namely: Epe in Lagos State, Barkin Ladi in Plateau State and Damboa in Borno State. The result of the evaluation showed that although the spraying was done after the peak transmission period and further evaluation was not carried out beyond the initial 3 months after the implementation due to logistic problems, the 3 insecticides showed good residual effect at least for the first three months.

5.0 MONITORING AND EVALUATION

- 5.1 Revision of National Health Management Information System Format:** NMCP participated in the review of the NHMIS formats for data and information flow in the health system. The meeting was held in January, 2007 in Minna, Niger State.
- 5.2 Supervisory Visits:** The technical staff of the division carried out supervisory visit to the 36 States of the federation and FCT in the first and second quarters of the year under review.
- 5.3 Compilation and Production of 2006 Annual Report:** To facilitate proper tracking and documentation of successes and shortfall in programme implementation for the division, the M&E unit compiled and produced the 2006 Annual Report for NMCP in the first quarter of the year under review.
- 5.4 Development of Draft M&E Frame Work** was done in April, 2007. This was to ensure one M&E frame work for the programme which all partners could buy into.
- 5.5 Household Survey, Data Analysis and Report Writing:** A household survey was conducted during the under review in 16 selected LGAs in 14 States to assess the impact of integrated distribution of LLINs with immunization and the utilization of ITN, IPT and ACTs by the vulnerable groups. The analysis of the data and preparation of the technical report for the survey has been completed. Lessons learnt from the survey showed that although integrated mechanism of distribution of nets can be useful for massive scaling up of ITN ownership, there are still low levels of coverage of the various RBM interventions. Household ownership of ITN (42%); Average number of ITNs in the household (0.6); children under five years and pregnant women who slept under ITNs the night before the survey (40%) and (27) respectively; pregnant women who took IPT2

in their last pregnancies (7%) and children under five years who took ACTs (1%). These coverages are quite low compared to the revised Abuja target of 80%.

6.0 GLOBAL FUND TO FIGHT AIDS, TUBERCULOSIS AND MALARIA

(GFATM)

6.1 Deployment of Artemisinin-based Combination Therapies (ACTs): Through the R2 and R4 GFATM grants; 3,405,498 doses of ACTs have been distributed to all the 36 States and FCT as well as institutions in the Country between January and July, 2007.

6.2 Promotion of Use of ITNs: 773,848 LLINs were distributed in 12 States including Borno, Taraba, Lagos, Cross river, Delta, Plateau, Kwara, Imo, Ebonyi, Zamfara and Kaduna between January and July, 2007.

6.3 Provision of Sulphadoxine Pyrimethamine (SP) for Intermittent Preventive Treatment (IPT) Among Pregnant Women: 878,453 doses of SP were distributed to end users as at February, 2007.

6.4 Collaboration with NPHCDA/Community Directed Treatment Intervention (CDTi): Collaboration with NPHCDA/CDTi is on going through the development of the Ward/Village Millenniums Health Package Programme.

6.5 Preparation of GF Round 7 Proposal: In order to secure more resources for the programme, the NMCP prepared a proposal for Round 7 Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) grant in June, 2007. The process was supported by RBM Partners. The grant was however not approved for funding.

7.0 NIGERIA WORLD BANK-ASSISTED MALARIA CONTROL BOOSTER

PROJECT

Implementation of World Bank Booster Project for malaria control commenced in the year under review. 7 States were selected to take part in the Booster Project. They are: Anambra, Akwa Ibom, Bauchi, Gombe, Jigawa, Kano and Rivers States.

7.1 Stakeholders' Meeting: The World Bank Team (IFC) met with the ITNs stakeholders on 31st January 2007 on local production of LLINs by making loans available from the Global Manufacturing

Services, Washington. The local Producer must: (a) Register with NAFDAC (b) Be WHOPEs approved and (c) Work with FMOH.

7.2 Assessment Visit: Based on the concept of Project Implementation Facility, an assessment visit to all the 7 selected States was carried out between 4th and 10th February, 2007. Objectives of the visit were to assess the capacity and capability needs of the participating States and their readiness to implement the project.

7.3 Inauguration of the National Project Steering Committee: This took place on Thursday, 22nd February 2007 at the HMH Conference Hall, 6th floor Federal Secretariat Complex Abuja.

7.4 Project Preparatory Facility (PPF) Procurement Activities: During the year under review, the procurement unit was established with the deployment of the procurement officer from the Procurement Unit of the Health System Development Project (HSDP) II, Department of Health Planning & Research, Federal Ministry of Health.

7.5 Procurement of Office Equipment: 2Nos. Desktops, 2Nos. Stabilizers, 6Nos. Laptops with Printers, bags, flash disks, etc.

7.6 Procurement of Commodities: 1.8 m LLINs were procured during the period under review and have been distributed to the States

7.7 Acquisition of a New Office Accommodation for NMCP: The process of acquiring a new office accommodation for the NMCP commenced in April 2007. The World Bank gave a 'No Objection' in the period under review and an office space was been secured for the programme at Abia House, Maitama, Abuja. The office is however awaiting partitioning.

8.0 CHALLENGES/CONSTRAINTS

- Limited resources in the face of the enormous burden of malaria
- Non execution of the planned activities due to lack of funds
- Capacity building for members of Staff is still inadequate
- Delay in programme implementation due to bureaucratic bottlenecks.

9.0 WAY FORWARD

- Continuing advocacy at all levels of governance to enlist political commitment of the policy makers to malaria control.
- Fund to be released for completion of pending activities.
- Capacity building for staff of NMCP.

10.0 TARGETS FOR 2008

- 50% coverage for LLINs, IPT and ACTs for the vulnerable groups.

