

SECRET

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A MEMORANDUM OF THE HONOURABLE COMMISSIONER FOR HEALTH, ADAMAWA STATE ON THE IMPLEMENTATION OF HIV AND TB INTERVENTION AMONG INTERNALLY DISPLACED POPULATION IN ADAMAWA STATE

PURPOSE

The purpose of this memorandum is to showcase experiences of Adamawa State Agencies for the Control of HIV/AIDS in coordinating Active HIV and TB Case finding among Internally Displaced Populations (IDPs) in Camps and Host Communities

INTRODUCTION

Adamawa State is affected by massive movement of IDPs as a result of the ongoing Boko Haram insurgency. With an estimated population of over 4.2 million (projected from 2006), the State has 21 Local Government Areas (LGA's). Activities of Boko Haram insurgents led to the destruction of communities and health facilities leading to a humanitarian crisis with the resultant displacement of over 1.76 million people; 56% were Children, 53% females and 7% were elderly above the age of 60 according to the International Office for Migration (IOM) Displacement Tracking Matrix Report of June, 2017. With over 140,875 IDPs in 7 Camps and 419 Host Communities in the State as at June, 2017. The IDP population placed a remarkable strain on the already overstretched health service delivery system. IDPs are known to be at a higher risk of contracting HIV and TB compared to the General Population.

This memorandum showcases efforts made by the Adamawa State Agency for the Control of HIV/AIDS in collaboration with a Community Based Organization in coordinating the implementation of HIV and TB Control activities among IDPs through the STOP TB Partnership's Wave 5 TB REACH grant.

CONTENT

Decreased funding for HIV/AIDS and TB Control, inadequate domestic funding and the IDP situation in the North-Eastern States of Nigeria threatens the investments made in the past and achievements recorded in HIV and TB Control. The Adamawa State Agency for HIV/AIDS Control in collaboration with the Gombe State Agency for HIV/AIDS Control jointly secured the Wave 5 TB REACH grant from the STOP TB Partnership which runs from 1st July 2017 to 30th June 2018. The grant is meant for the implementation of TB and HIV interventions among IDPs. The intervention is being coordinated by the Adamawa State Agency for the Control of HIV/AIDS (ADSACA) in Adamawa State.

In collaboration with the State TB Control Programme, the State Emergency Management Agency, the State Primary Health Care Agency and other key stakeholders at the State and LGA level, IDP Camps and Host Communities were mapped and clustered for the intervention. Community Based Organizations (CBOs) were engaged formally to coordinate the intervention which is being implemented through 60 Community Volunteers (CVs), 10 Health Workers (HWs) from DOTS centers and 10 laboratory staff from GeneXpert sites. A State Project Team (SPT) headed by the Executive Secretary of ADSACA coordinates the project.

Active screening for HIV and TB in IDP camps and host communities were conducted through continuous house-to-house screening, monthly outreaches and systematic screening of IDPs on arrival in the Camps by the CVs. Quarterly joint supervision by the SPT and the State TB Programme and monthly supervision by the LGA TB Supervisors and LACA Coordinators were carried out. Data was managed in accordance with the existing system for the TB and HIV control programmes.

From 1st July to 31st December, 2017, 5,487 Internally Displaced Persons were screened for HIV out of which 92 (1.7%) were found to be HIV+. A total of 207 children were screened over the same period; one child was detected with HIV. Similarly, a total of 6,191 presumptive TB cases were screened for TB using GeneXpert out of which 396 (6.4%) were diagnosed with bacteriologically positive TB while 10 were diagnosed with Rifampicin Resistant TB. All HIV and TB cases detected, including pregnant women and children, were linked to designated treatment centers for further management. Key challenges encountered include; Shortages of HIV RTKs, low capacity for HIV counselling and testing (especially among CVs), lack of appropriate HIV guidelines, shortage of GeneXpert Cartridges and inadequate numbers of CVs.

PRAYERS

Council is hereby invited to note that:

- HIV and TB are serious public health problems among IDPs in Adamawa and other North-Eastern States of Nigeria;
- The influx of IDPs including PLHIVs into Adamawa led to the overstretch of existing HIV/AIDS and TB services especially in IDP Camps and Host Communities; and
- The integration of IDPs including PLHIV into the host communities could lead to an increase in the transmission of HIV and TB which calls for an urgent need to strengthen HIV and TB interventions.

Council is further invited to approve that:

- The FMOH intensify its support to Ministry of Health in States affected by insurgency in order to cope with increased demand for HIV/AIDS and TB services in IDP Camps and Host Communities; and
- The FMOH supports the scale up of this intervention across all IDP Camps and Host Communities in the North-East zone of Nigeria.

Honourable Commissioner for Health, Adamawa State

JUNE, 2018