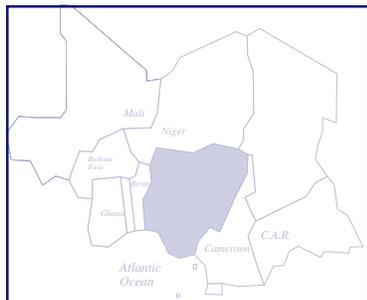


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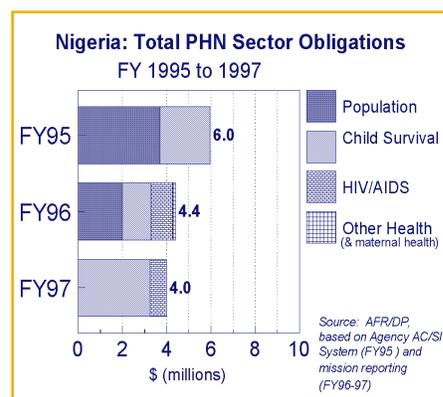
Family Planning and Health Activities in

Nigeria



Population:	106 million
Infant mortality rate:	87 deaths per 1,000 births (1990 DHS)
Adequate nutrition (wt.-for-age):	55% of children age 12–23 months (1990 DHS)
Total fertility rate:	6.0 children per woman (1990 DHS)
Contraceptive prevalence rate:	7% (modern methods, 1995 MICS)
Demographic and Health Surveys:	1986 (Ondo State), 1990 (nationwide)
Multi-indicator cluster survey:	1995 (UNICEF)

Because of U.S. government sanctions against Nigeria, USAID/Nigeria is restricted to working with nongovernmental organizations (NGOs) for specific humanitarian assistance only. As a result, the mission's program has a strong focus on NGO capacity-building and the integration of private and community-based family planning and health services. Though some mission activities are national in scope, the program is primarily active in 14 focus states in the north, southwest, and southeast. Declining USAID funding for family planning and health in Nigeria is summarized for FY 1995–97 in the figure to the right. The mission submitted a country program strategic plan in December 1992 but revised its strategy in November 1994. The mission is pursuing the following strategic objectives and intermediate results (IRs) in family planning and health; these objectives are complemented by a closely integrated special objective in democracy and governance that promotes women's political, economic, and personal empowerment.



Strategic Objective 1: Increase voluntary use of family planning.

IR 1.1: Increase demand for modern contraceptives.

IR 1.2: Increase availability of modern contraceptives.

Strategic Objective 2: Improve maternal and child health practices.

IR 2.1: Improve immunization practices and coverage.

IR 2.2: Improve case management of the sick child.

Special Objective 1: Increase the use of improved, effective, and sustainable responses to reduce human immunodeficiency virus (HIV) transmission and to mitigate the impact of HIV and acquired immune deficiency syndrome (AIDS) pandemic.

IR 1: Increase awareness of HIV/AIDS and sexually transmitted infections (STIs) and how to prevent transmission.

IR 2: Increase availability of condoms.

IR 3: Mitigate impact of AIDS through community, home-based care of people living with AIDS and people affected by AIDS.

Activities in Family Planning and Health

Promotion of Family Planning. Pursuing a community-based strategy, the mission is promoting increased use of family planning through support for distribution of contraceptives; a variety of information, education, and communication (IEC) activities such as radio spots and training of peer educators; institutional development of NGOs, and training of community-based distribution agents and traditional birth attendants. Nationwide, the mission's contraceptive social marketing program is promoting sustainable supply and use of a variety of contraceptives through a grant to Population Services International and PSI's local affiliate, the Society for Family Health.

Child Survival. The mission's child survival program promotes the development of health care alternatives through the private sector, providing local NGOs with the capacity necessary to sustain services for maternal and child care. Of particular importance have been technical and material assistance to NGOs and IEC activities in preparation for Nigeria's national immunization days (NIDs). The mission is promoting adaptation of the integrated management of childhood illnesses (IMCI) approach, improved control and treatment of malaria and diarrheal diseases, improved polio surveillance, and an epidemic preparedness and response (EPR) initiative designed to help NGOs and communities more effectively respond to periodic outbreaks of meningitis, cholera, yellow fever, and other infectious diseases.

Prevention and Control of HIV/AIDS. The mission has a buy-in to the AIDSCAP Project, whose NGO subprojects have promoted institutional capacity building and IEC activities that target higher-risk groups. AIDSCAP has created guidelines and training for treatment of STIs, a mass media awareness campaign, employee education for a variety of commercial and industrial organizations, and works with people living with AIDS to spread awareness at the community level. PSI's social marketing campaigns have also contributed greatly through media spots, IEC, and training of peer educators. Integrated health programs supported by other partners also promote the use of condoms, reduction in numbers of sexual partners, and treatment of STIs. The mission plans to work with community- and home-based organizations that assist patients with AIDS and people affected by HIV/AIDS.

Donor Coordination, Collaboration, and Sector Leadership. Through Nigeria's interagency coordinating committee (ICC), the mission and its partners have successfully coordinated NID inputs and promoted IMCI and EPR approaches in child survival. In family planning, where levels of USAID support have diminished greatly since 1993, the mission has worked closely with other donors to help fill the gap in contraceptive supply; UNFPA, DFID, and the Planned Parenthood Federation of Nigeria (PPF-N) have responded with increased support for distribution of contraceptives in Nigeria.

Global Bureau and USAID/Nigeria Joint Programming Activities

Access to Family Planning Through Women Managers Project (ACCESS) seeks to improve access to quality family planning and reproductive health services by using the resources of trained women managers. In Nigeria, partner organizations started nine subprojects and trained more than 1,300 men and women to serve as distribution agents for family planning services in nine states.

AIDS Control and Prevention Project, is also supporting behavioral research on sexuality and STIs in teenagers. AIDSCAP received a bridging grant in 1997–98 to lead into HIV/AIDS activities to be conducted under the AIDSMARK and IMPACT projects.

Basic Support for Institutionalizing Child Survival is helping to expand health care coverage for lower-income residents of Lagos and Kano through the Community Partnerships for Health program, a model of collaboration between community-based organizations and private providers. The project is also engaged in the formulation and implementation of training curricula and treatment guidelines for use by NGOs receiving USAID support.

Centers for Disease Control and Prevention (CDC) is working to increase the technical capacity of NGO family planning and health services. Of particular significance has been assistance to NGOs preparing for immunization campaigns during epidemic outbreaks in the north. CDC is also supporting efforts of the River Blindness Foundation to eradicate onchocerciasis.

Johns Hopkins University/Population Communication Services conducts training in IEC material development for USAID-supported NGOs active in family planning and health.

Bureau for Humanitarian Response, Office of Private & Voluntary Cooperation

Carter Center/Global 2000 Program is receiving matching grant funding for river blindness eradication.



This USAID Country Program Brief was prepared for the Human Resources Division, Office of Sustainable Development, USAID Africa Bureau (AFR/SD/HRD), by the Center for International Health Information (CIHI). Questions and comments can be directed to CIHI (info@cihi.com).