



# Viral Hepatitis Integration into Harm Reduction in Nigeria

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# Overview of Nigeria Viral Hepatitis Programme



- Nigeria officially established the viral hepatitis programme in 2013



- Currently domiciled at the National AIDS, Viral hepatitis and STIs Control Programme (NASCP)

## Activities Implemented So Far:



### Leadership and Governance

- Inaugurated the National Viral Hepatitis Technical Working Group (TWG)
- Developed the National Policy on Viral Hepatitis (2015)
- Developed a National Strategic Plan (2016-2020) and National Treatment Guidelines (2016)
- Developed national training materials, viral hepatitis facility directory (2018) and a viral hepatitis state roadmap (2020)
- Activated all the 36+1 States viral hepatitis desks with varied levels of response

# Overview of Nigeria Viral Hepatitis Programme

## Service Delivery:

- Nigeria Government through efforts in Nasarawa State has screened over **190,000** people for HCV and initiated over **2,800** of those who were found to be infected on treatment
- Nasarawa state government committed to HCV elimination in the state by 2025 (2020)
- CHAI facilitated market shaping for HCV diagnostics to improve access to affordable diagnostic services in some health facilities in-country; **HCV RNA at ~\$25 and DAAs at \$20/month**
- The Yakubu Gowon Centre in partnership with Taraba state government provided affordable diagnostics and treatment for HCV for patients at its treatment locations in Takum local council of Taraba state
- The Federal Government through World Bank supported Adamawa State with the “Save a Million” fund to establish a diagnostics and treatment programme for VH



# Integration of Viral Hepatitis into Harm Reduction

## Policy

- Established the National Drug Demand and Harm Reduction programme (2019)
- Developed national strategies and incorporated into the national drug master plan
- Developed guidelines for Needle and Syringe Programmes (NSP) (2020)
- Developed the training manual on integration of HIV/VH for prisons and KPs (2023)

## VH Integration

- Assessment of the pilot project conducted in 2021 revealed HBV and HCV screening and referral services were integrated as part of the package of care for PWID
- NASCP VH focal person is a member of Harm Reduction TWG
- Gaps identified with access to HBV and HCV testing services for key populations
- Participated in the National Harm Reduction Assessment with key stakeholders (June 2023)
- Preliminary results indicated limited but ongoing screening for HBV and HCV, whereas diagnosis and treatment are **still out-of-pocket** and available via referral



# Challenges



Low level of awareness about viral hepatitis among general population



Inadequate programme funding at national and subnational levels



Limited access to VH services due to high cost of services



Out-of-pocket expenses for VH services still persist



Inadequate capacity of HCWs to manage VH (primarily at primary and secondary levels)



Sub-optimal data reporting, monitoring and evaluation



# Technical Mechanisms Necessary for VH Implementation

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- Advocacy at international and domestic levels for subsidized or free screening, diagnosis and treatment for HCV and HBV for both the general and key populations
- Advocacy for annual budgetary allocation and release to facilitate VH programming
- Explore alternative sustainable financing mechanisms for subsidized or free treatment of HCV and HBV such as BHCPF/NHIS and donors
- Integration of viral hepatitis services into other disease programmes such as HIV at various points in the care cascade
- Scale up best practices from Nasarawa and other state pilot programmes to expand VH services to additional states

