

## **Sightsavers Benue state Nigeria integrated NTDs programme**

**GiveWell schistosomiasis (SCH) and soil transmitted helminths (STH) project**

**Year 2 annual report: April 2018 – March 2019**

**Country:** Nigeria

**Location:** Benue State

**Start date:** January 2017

**Project goal:** The reduction in the prevalence and intensity of schistosomiasis (SCH) and soil transmitted helminths (STH) in school age children.

### **Project summary**

The GiveWell funded Benue state integrated NTD project offers preventative treatments for onchocerciasis, lymphatic filariasis (LF), SCH and STH across 18 of the 23 districts, known as LGAs. The remaining 5 districts were covered by a DFID UK Aid Match funded project, which finished in March 2019.

In Benue, all 23 of the LGAs are endemic for onchocerciasis, 22 for SCH, 17 for STH and 16 for LF. Due to the overlap of the drugs used to treat for these diseases, onchocerciasis, LF and STH can all be treated simultaneously, where co-endemic.

Despite continuing security issues and significant drug delays, Sightsavers and MoH successfully delivered treatments to the majority of targeted communities.

### **Activity Narrative.**

In May 2018, the planning and review meeting for the year 1 MDA was delayed due to security challenges and a strike action by health workers.

The onchocerciasis and LF MDA took place in early 2019, but due to the late arrival of praziquantel in state, SCH MDA did not start in Benue until March 2019 and some LGAs continue to be treated throughout April and May. SCH/STH data will not be available from Benue until all LGAs have received treatment. We will update these figures as soon as the SCH/STH data has been made available to us.

### **Key Successes:**

- A team building training was conducted for the Benue state NTD team. The training has enhanced understanding of individual skills and strengths, which can be used to improve the programme going forwards;
- Benue state NTD team conducted a sensitisation meeting for the catholic women's organisation, an influential religious group with a very large membership. This helped increase acceptance of MDA within the catholic community;
- As a complimentary strategy to the SCH/STH MDA, UNICEF conducted a training on WASH for Benue state NTD department; where LGA staff and volunteers were trained to collect data on WASH practises and promote healthy hygiene behaviours.

## Key Challenges:

- As mentioned above, there was a delay in conducting the planning and review meeting due to security challenges and strike action by health workers;
- Significant delays in praziquantel delivery meant we were only able to start MDA in March 2019, with treatments expected to finish by the end of May and results to follow thereafter.

## Project monitoring and coverage survey activity

As with the Nigeria four states programme, findings from the year 1 QSAT are being used to develop effective strategies so as to ensure improved quality of project activities.

TCS will take place in Benue state once MDA has been completed; dates for these are currently in negotiation with the MoH. The results will be shared with GiveWell once available and recommendations from the TCS will be used to improve the programme in the future.

## Lessons learned

The Benue QSAT was a successful exercise because we clearly communicated the objectives to the MoH before it was undertaken, therefore encouraging their engagement in the process. An example of learning from the QSAT was that the involvement of the Primary Health Care department head in NTD activities increases the commitment of front line health facility staff to the programme. Sharing the completed QSAT and associated action plan with the MoH improves effective programme coordination and encourages the improvement of programme quality.

## Looking ahead to 2019

We will report on Benue SCH/STH treatments once the data has been made available; we expect this to be a few weeks after the final MDA has finished.

Security was far less of an issue this year for the Benue programme. Going forward we will continue to monitor security and work with local authorities to mitigate its impact on our work.

GiveWell wishlist 3 funding will be used to extend delivery of the integrated oncho/LF/SCH/STH project to all 23 endemic LGAs within the state until March 2022.

Sightsavers is expecting greater efficiencies in having one donor delivering a fully integrated state-wide project.

### Results against targets to date (April 2018 – March 2019)

SCH/STH data will not be available from Benue until all LGAs have received treatment. We will update these figures as soon as the SCH/STH data has been made available to us.

Output	Indicator	Y2 target	Y2 to date
Train health staff, community members and teachers to deliver SCH/STH MDA to schools and endemic communities	No. of Teachers trained on SCH/STH MDA	5,600	-
	No. of health workers trained on SCH/STH MDA	264	-
	No. of CDDs trained on SCH/STH MDA	2,200	-
	No. of schools training at least one classroom teacher on school MDA.	4,784	-
Treat school aged children between 5-15 years for STH and schistosomiasis through MDA	No. of school age children between 5-15 years treated for STH	624,195	-
	No. of school age children between 5-15 years treated for SCH	938,315	-
	No. of treatment coverage surveys conducted with data disaggregated by age group and gender and school attendance.	1	-
Treat people for oncho/LF via integrated MDA with co-administration of ivermectin and albendazole	No. of people treated for onchocerciasis	2,923,433	-
	No. of people treated for LF	2,116,969	-
Ministry of Health coordinates and supports targeted regions/districts to implement the National NTD Plan with focus on SCH and STH.	No. of advocacy meetings conducted with stakeholders on SCH/STH Interventions.	1	1

### Total number of school aged children treated: TBC

Total number of children will be calculated once all district level data has been submitted – see explanation below

### School vs community based treatments

Once all data has been submitted and verified, we will calculate the percentage of treatments delivered in the school and community settings.

### Treatment coverage rates

These will be shared when all the data is available.