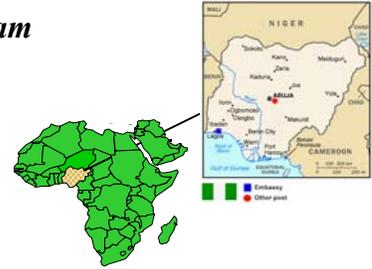




DoD HIV/AIDS Prevention Program Status Report:

Nigeria



BACKGROUND

Introduction/General Information

Nigeria is Africa's most populous country, with population estimates ranging from 117 to 130 million people. Life expectancy is approximately 51 years and declining due to the HIV/AIDS epidemic. English is the official language in Nigeria, with a literacy rate of 57%, disproportionately distributed between males and females. While Nigeria is described as a resource-rich country, political circumstances have resulted in a population that still relies primarily on substance agriculture. Estimates of annual per capita income in Nigeria range from \$260 to \$840.

Country HIV/AIDS Statistics and Risk Factors

HIV/AIDS prevalence in Nigeria is estimated to be nearly 6% of the adult population with either HIV infection or AIDS. Estimates of the number of people living with HIV in Nigeria vary widely, ranging from 2.7 million to 3.5 million. Identified significant risk factors include a high prevalence of other sexually transmitted infections (STIs), high-risk heterosexual contact with multiple partners, and powerful cultural stigmatization of people with HIV/AIDS.

Military HIV/AIDS Information

Nigerian military size is estimated at 150,000. Nigerian Armed Forces have not performed force-wide testing of personnel, making current prevalence rates unavailable. It is believed that the military population currently has HIV prevalence rates similar to the national average.

PROPOSED PROGRAM

Nigerian Armed Forces submitted a prevention proposal titled *Nigerian Armed Forces Program on AIDS Control (AFPAC)*. Objectives outlined included a comprehensive education program to develop greater HIV/AIDS awareness and training and support for healthcare workers. Nigeria requested funding and logistical assistance with several specific components of its program, including sponsorship of an annual HIV/AIDS Week, implementation of HIV/AIDS education and training for trainers and military personnel, enhanced nutritional support of people with AIDS in medical facilities, training of healthcare workers in HIV management, and integration of HIV/AIDS into the general studies curriculum of military institutions. However, the plan contained only rudimentary information and was described by the Nigerian military as "outdated." Nigerian Armed Forces agreed to submit an updated plan and resource requirements list to the Program Management Office; updated information had not been received by report time.

PROGRAM RESPONSE

Military-to-Military

DHAPP staff traveled to Accra, Ghana, during February and March 2001 to participate in the Working Group for the Development of a Comprehensive HIV Prevention Package for the Uniformed Services of Africa. As part of their visit, they met with representatives from the Nigerian military.

Nigeria is being assisted through external contractors approved by the Defense Attaché Office. DHAPP awaits the requirements list and prevention plan to begin consideration for military-to-military funding.



A DHAPP collaborator conducted a focus group with representatives from the Nigerian armed forces.

Contractor-Based Assistance

In 2001, the University of Maryland, Institute of Human Virology, Baltimore, Maryland, was awarded a contract by the DHAPP to establish baseline data on HIV seroprevalence and incidence rates in the Nigerian Navy and to identify specific high-risk behaviors associated with the spread of HIV. In addition, the University of Maryland provided a comprehensive training program to the Nigerian Navy, covering HIV ethics and confidentiality issues, HIV counseling, and improved diagnosis accuracy.

In order to develop the surveillance program described in its proposal, the University of Maryland conducted a detailed, in-country assessment of existing facilities and systems used for HIV testing and counseling. Information gathered was used for capacity building and updating, expanding, and optimizing the system. Following the assessment, Maryland provided HIV testing and counseling training for Nigerian naval personnel training included exposure to well-equipped laboratories, and direct, hands-on experience using the Enzyme-Linked Immunosorbent Assay and Western Blot testing techniques. Advanced training for a select group of naval personnel also included exposure to more sophisticated laboratory tests coupled with training in data management and capture, with an emphasis on ethical and scientifically sound research methods; serum samples were tested throughout the training to provide the prevalence data necessary for the project.

Following the training and data collection, the University of Maryland conducted a series of workshops with Nigerian Naval colleagues, where a prototype for an HIV surveillance program for the Nigerian Navy was developed and refined.



DHAPP funds were used to provide laboratory infrastructure and sophisticated training.

In 2001, Lincoln University, Pennsylvania, was also awarded a contract by DHAPP to

develop and implement an HIV/AIDS prevention program in conjunction with Nigerian Armed Forces. Lincoln's program provided comprehensive HIV/AIDS prevention education and counseling to Nigerian military personnel.

Lincoln University created a three-stage process designed to increase HIV/AIDS awareness and provide prevention education throughout the Nigerian military service. Elements of the program included conducting a knowledge, attitudes, and practices (KAP) survey, providing an awareness seminar for military and government officials, training peer military educators in HIV/AIDS prevention, control, and counseling, and prevention education workshops in 36 military units.

During phase one of its program, Lincoln University provided to all local military officers a 2-day prevention seminar at the Nigerian Institute for Policy and Strategic Studies in Kuru, Jos. The impact of HIV/AIDS on the military and strategies for reducing infection risks were discussed. At the same time, the KAP survey was administered throughout Nigerian Armed Forces; 4,000 surveys were completed within the 3 branches.

Lincoln used information obtained during the survey to finalize the *Military Personnel HIV/STI Prevention Training and Counseling Manual* and created an accompanying program to train a cadre of 180 peer educators drawn from units throughout the country. Peer educator training lasted 3 days. Upon return to their units, each educator formed a peer education group and conducted prevention workshops.

Finally, in 2002, Lincoln University was awarded an additional contract by the DHAPP to expand the program begun in 2001. Lincoln is increasing the cadre of educators by training an additional 240 military personnel as peer health educators. Following training, Lincoln will expand HIV/AIDS/STI prevention activities to all

military locations throughout Nigeria. Training material developed in Phase One of Lincoln's project will be updated and distributed throughout the program.

Clinical Provider Training

Two Nigerian medical officers, a clinician, and a laboratory technician received a combined training experience at the University of Maryland and the *Military International HIV Training Program* in San Diego, California. The University of Maryland component emphasized laboratory skills in retro virology diagnostics, while the San Diego rotation focused on clinical management of HIV and provided an exposure to a DoD HIV unit.



DHAPP funds provided clinical laboratory training to the Nigerian Armed Forces.

Interoperability

IN addition to DHAPP efforts, the United States Agency for International Development and Family Health International are supporting HIV prevention efforts in the Nigerian military, particularly in the area of peer education.

PROGRAM IMPACT

Master Trainers and Peer Educators

To date, 185 peer educators have been trained and certified by Lincoln University. Twenty-five health counselors have been trained by the University of Maryland to date.

Number of Troops Trained

Although training by peer educators is currently in process, the exact number of troops trained has yet to be reported.

Potential Number of Troops Affected

DHAPP funds sponsored HIV prevention efforts that can reach 150,000 troops.



Nigerian military representatives discussed HIV prevention.

Voluntary Counseling and Testing (VCT)

One VCT center has been opened and 1,967 specimens have been tested through the University of Maryland surveillance program.

Laboratory Capability/Infrastructure

Laboratory capabilities in HIV diagnostics, quality assurance, and data entry, have been established. Twelve laboratory personnel have received advanced technical training.



DHAPP sponsored an HIV/AIDS prevention workshop for Nigerian military representatives.

Mass Awareness

DHAPP sub-contractors produced and distributed 750 copies of the *Peer Health Education Training Manual* and the *HIV/AIDS and Sexually Transmitted Infections (STIs) Facts Book*.