

SUCCESS STORY – SIDHAS

Strengthening Integrated Delivery of HIV/AIDS Service (SIDHAS)

FY15

A NEW BEGINNING: USAID HANDS OVER MANAGEMENT OF HIV/AIDS PROGRAMING IN ABIA AND TARABA STATES TO THE GOVERNMENT OF NIGERIA



One of the cardinal mandates of the Strengthening Integrated Delivery of HIV and AIDS Services (SIDHAS) project in Nigeria is to build and strengthen the capacity of

government institutions to own and demonstrate increased stewardship towards sustaining the HIV/AIDS response. As part of this strategy, the SIDHAS project, funded by the United States Agency for International Development (USAID), has supported the Government of Nigeria (GON) to strengthen its systems and processes at the national, state and local government levels. The pivot of support provided to the government institutions was geared towards achieving an increased level of knowledge and skills needed to deliver qualitative health care services. It also prepares supported states and facilities to manage and sustain the project activities beyond its funding cycle in each of the supported 15 states. This was demonstrated with a pre-term transition of the SIDHAS supported HIV and AIDS interventions in Abia and Taraba states to the GON in March 2015.

With the overall SIDHAS project end date being September 2016, Abia and Taraba states took the first shot at taking over the project in March 2015.

Upon request by the GON to begin with two states, Abia and Taraba states were transitioned for continued funding by the Subsidy Re-Investment Program (SURE-P), through the National Agency for the Control of AIDS (NACA). Through the SURE-P/NACA project, the stage was set for an epoch-making event that marked the time GON began full responsibility for a statewide funding for HIV/AIDS activities in Nigeria.

With a relatively short turnaround time, FHI 360 engaged in extensive consultations with NACA, USAID and the two states, on modalities for a successful transition. A robust transition plan was articulated and followed. This plan dictated the pace of transition activities, defined roles and responsibilities of each stakeholder, and ensured a smooth transition without interruption in service delivery. While series of consultative planning meetings were ongoing with the service beneficiary community, key stakeholders (Abia/Taraba states, NACA, USAID and FHI 360) met in February 2015, to agree on a final transition date of March 30, 2015. With great enthusiasm from GON to begin this epoch-making event, transition committees were set up at both national and state levels. The primary task of the committees was to facilitate seamless transition at different levels, while ensure NO disruption in the live sustaining services. The Network of People Living with HIV/AIDS in Nigeria (NEPWHAN) played active roles in the transition planning and implementation process.



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Key transition activities included weekly meetings, where information and updates were shared at both states and national levels. At the states level, systematic skills transfer and sites handover were conducted with the states ministries of health (SMOH) and the states agencies for the control of AIDS (SACA), through their respective State Project Implementation Units (SPIU). At the national level, the FHI 360/SIDHAS project transition committee interacted with the NACA/SURE-P committee to deal with high level technical issues on the transition process and also facilitated an orientation workshop to adequately equip the SPIU teams for project start-up. The leadership of NACA, USAID, NEPWHAN and FHI 360 also met timeously to deliberate on policy level and other overarching issues bordering on the transition process. The meetings held at various levels, provided an opportunity for FHI 360 to make technical presentations on the different thematic areas to the stakeholders.



At the state and operational levels, the SIDHAS strategies for ensuring quality and uninterrupted services delivery were presented

to the states government technical teams. This were done to refresh their minds, as they've been working closely with the SIDHAS teams for close to a decade. The number of patients receiving treatment in various health facilities of each state was shared to help with planning processes. Technical work planning sessions were facilitated in the two states, to clearly replace SIDHAS with designated point persons within the government technical and management teams.

A high point of the transition process was the handover of support for 130 private health facilities in Abia state and several others in Taraba State to the government.

Under the NACA/SURE-P program, NACA will continue funding the private health facilities to deliver quality HIV/AIDS services in the states. This is a laudable effort, considering that over 50% of Nigerians access health care from private sector providers. By implication, this marked the beginning of a new era of closer collaboration for impact, between the public and private healthcare institutions in the states. The state government teams were particularly impressed and delighted at the opportunity to provide technical leadership to the HIV/AIDS response in their states.



Following approval from the USAID, all SIDHAS project assets in the two states, including vehicles, generators, information technology infrastructure, computers, office furniture, among other things, were handed over to the Abia and Taraba states government.

The transition process was culminated by high level advocacy visits conducted to the two states of Abia and Taraba by USAID. The USAID team visit to Abia State was led by Dr. Susan Coleman, Director, HIV/AIDS and TB Division at the USAID/Nigeria. The visit to Taraba State was led by Dr. Philip Dayal, Deputy Director, HIV/AIDS and TB Division at the USAID/Nigeria. Other members of the teams were McPaul Okoye (USAID), who joined the Abia team, and Doreen Magaji (USAID) and Dr. Robert Chiegil

(FHI 360) who joined the Taraba teams. The USAID team visits effectively marked the end of the transition process in the two states.