Malaria transmission in Nigeria takes place all year round in the south but is more seasonal in the northern regions. The annual reported number of malaria cases in 2015 was 14,732,621 cases.
Malaria
Global Fund Update
The Global Fund has announced that Nigeria will receive US$ 660.7 million for HIV, tuberculosis, malaria, and health systems strengthening as the country allocation for 2018-2020. The Global Fund has determined the total allocation amount based on Nigeria’s disease burden and income level, as well as several other factors. The malaria component is also allocated a specific proportion of the total, according to a formula developed by the Global Fund that takes into account several factors, including disease burden and previous disbursements. For Nigeria this is calculated at US$ 313.4 million. The allocations to the individual disease components are not fixed, and can be adjusted according to decisions made at country level. Nigeria is urged to ensure that resources are allocated to malaria control from the overall Global Fund country allocation, as well as from domestic resources, to sustain the gains made in recent years.

Progress
Nigeria has carried out insecticide resistance monitoring since 2014 and has reported the results to WHO. Nigeria has achieved high operational coverage of vector control. The country is implementing iCCM.

Impact
The annual reported number of malaria cases in 2015 was 14,732,621 cases. WHO estimates that the country has achieved a change of less than 20% in the malaria incidence rate and a decrease of 20-40% in the malaria mortality rate for the period 2010 - 2015.

Key Challenges
- Funding gaps to achieve and sustain universal coverage of all malaria interventions in 2016 - and 2017.
- Mobilising sufficient domestic resources to meet the Global Fund incentive funding requirements.

Previous Key Recommended Actions

<table>
<thead>
<tr>
<th>Objective</th>
<th>Action Item</th>
<th>Suggested completion timeframe</th>
<th>Progress</th>
<th>Comments - key activities/accomplishments since last quarterly report</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address funding</td>
<td>Work to fill outstanding funding gaps for essential malaria commodities</td>
<td>Q2 2015</td>
<td></td>
<td>Nigeria has submitted a Global Fund proposal for a non-cost extension to the end of 2017 to cover LLIN gaps. The malaria impact bond is under development</td>
</tr>
<tr>
<td>Vector Control</td>
<td>Prepare the national insecticide resistance monitoring and management plan</td>
<td>Q1 2017</td>
<td></td>
<td>Nigeria has drafted the insecticide resistance monitoring and management plan and aims to finalise this by end 2016</td>
</tr>
</tbody>
</table>
New Key Recommended Action

<table>
<thead>
<tr>
<th>Objective</th>
<th>Action Item</th>
<th>Suggested completion timeframe</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address funding</td>
<td>Ensure the GF malaria funding application is submitted by Q2 2017 and ensure that resources are allocated to malaria control at a level that is sufficient to sustain the gains made in recent years.</td>
<td>Q2 2017</td>
</tr>
</tbody>
</table>

MNCH

Progress

Nigeria has significantly enhanced the tracking and accountability mechanisms with the development of the Saving One Million Lives Scorecard. The country has achieved high coverage of the tracer RMNCH intervention vitamin A.

Previous Key Recommended Actions

<table>
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<tr>
<th>Objective</th>
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</tr>
</thead>
<tbody>
<tr>
<td>MNCH¹: Optimise quality of care</td>
<td>Work to accelerate coverage of ARTs in the total population and in children under 14 years of age</td>
<td>Q1 2017</td>
<td></td>
<td>Deliverable not yet due but Nigeria has increased ART coverage by 2% in the total population and reports 5% coverage in children. Nigeria has developed a national paediatric ART acceleration plan aligned to 90-90-90 (2016-2018/9) and has shifted policy to Test-and-Treat for all children and Option B+ for PMTC T. HIV programme integration is ongoing within routine child healthcare tools for iCCM</td>
</tr>
</tbody>
</table>

Nigeria has responded positively to the MNCH recommended actions addressing low coverage of skilled birth attendants and exclusive breastfeeding, and continues to track progress as these actions are implemented.

Key

- Action achieved
- Some progress
- No progress
- Deliverable not yet due

¹ MNCH metrics, recommended actions and response tracked through WHO MCA