AFENET-C O N F E R E N C E
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Addressing Public Health Priorities in Africa through FELTPs
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Nigeria FELTP Program Update
www.nigeria-feltp.net
AFENET-TEPHINET Program Directors Meeting
Addis Ababa
22 November 2013

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Program Director
Background

- Established in 2008, first to adopt one health approach
- New strategic plan 2014 – 2020
- Mission
  - Nigeria FELTP exists to develop, implement, and strengthen an effective public health surveillance and response system with adequate numbers of competently trained personnel providing epidemiologic service, public health research, and public health emergency response to all Nigerians.
- Vision
  - NFELTP seeks to become a world class FELTP producing public health leaders and practitioners that can strengthen and lead public health systems to prevent and reduce morbidity and mortality from priority diseases in Nigeria.
- Goal statement
  - Develop and implement a sustainable, effective, networked and adequately staffed multi-disease public health surveillance and response system that is operational in all States and LGAs in Nigeria by 2020.
Program objectives

• Implement 4-tier public health workforce development plan
  ➢ 5 year target: 200 2-year degree graduates, 1000 mid-level short course graduates, 3000 basic level short course graduates, 5000 certificate level public health practitioners

• Strengthen Integrated Disease Surveillance and Response (IDSR) at all levels (Federal, State, LGA, community)
  ➢ 5 year target: At least one networked functional IDSR unit at each administrative level of the country & At least 80% of public health emergencies that are notified to the IDSR units are responded to within 48 hours

• Conduct and disseminate public health operations research on priority topics
  ➢ 5 year targets: At least one annual dissemination meeting of public health operations research conducted by NFELTP graduates is held by each State

• Develop and implement a sustainability plan and support NFELTP operations
  • 5 year targets: Adequate funding for the planned activities to implement the strategic plan is available annually with contribution from Government, donors, private sector & NFELTP has a permanent location
NFELTP Four-tiered training approach

Proposed NFELTP 4-tier Approach

- Target Federal and State Level
  - 2-year FELTP Master's degree [200 in 5 years]
- Target State Level
  - Mid-Level Short Course (2 to 4 week didactic + 6 month project)
    - Diploma [1000 in 5 years]
- Target Local Government Areas
  - Basic Short Course for LGA Disease Surveillance and Notification Officers
    - (2 weeks training + 3 month project) Certificate [3000 in 5 years]
- Target Public Health Practitioners
  - 5000 Certificate Level public health practitioners in 5 years

Workforce Cadre
- Public Health Leaders
  - Role: Operate Federal and State Level IDS and other surveillance and response systems
- Public Health Implementers
  - Role: Operate State Level IDS and other surveillance and response systems
- Frontline workforce
  - Role: Operate LGA level IDS and other surveillance and response systems
- Public Health Practitioners
  - Role: Participate in surveillance and response systems as necessary
Nigeria FELTP; multiagency collaboration

• Two collaborating universities
  – Ahmadu Bello University & University Ibadan

• Two Ministries
  – Federal Ministry of Health
  – Federal Ministry of Agriculture and Rural Development

• Other agencies – AFENET, CDC, WHO, USAID

• Funding
  – Nigeria Government (NCDC/FMOH, FMARD)
  – USG – PEPFAR, BEP, AHIP, PMI, GID
  – WHO – short courses and research

• Field sites – Federal, State, CDC, UN, PEPFAR implementing partners

www.nigeria-feltp.net
NFELTP Key Achievements

• Training
  – 5 cohorts on the long course; 154 residents
  • 86 (56%) M/Epidemiology, 27 (17%) V/Epidemiology & 41 (27%) Lab epidemiologists
  • Graduates – 25 (cohort 3 awaiting final external thesis defense delayed for 4 months by ASUU strike)
    – NFELTP – 10 (support program and Polio Eradication efforts)
    – State – 5; leadership (S/Epid, S/Immunization, Lab, HIV)
    – Teaching institutions – 2 (ABU and UI)
    – FMOH – 2; Guinea Worm Disease (Director), Weekly bulletin
    – FMARD – 2
    – Others – 4 (politician, secondment)
    – NCH Memo for appropriate post-training deployment
  – Short courses; > 700 (Competency based M&E, HIV Program Management and Zoonoses)
# Residents by Zone of Origin (N=154)

<table>
<thead>
<tr>
<th>Zone</th>
<th>Number</th>
<th>PER 1 MILLION POPULATION</th>
<th>% COVERAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>North West</td>
<td>37</td>
<td>1.0</td>
<td>20%</td>
</tr>
<tr>
<td>North Central</td>
<td>33</td>
<td>1.4</td>
<td>28%</td>
</tr>
<tr>
<td>South West</td>
<td>30</td>
<td>0.9</td>
<td>18%</td>
</tr>
<tr>
<td>North East</td>
<td>24</td>
<td>1.1</td>
<td>22%</td>
</tr>
<tr>
<td>South East</td>
<td>18</td>
<td>1.0</td>
<td>20%</td>
</tr>
<tr>
<td>South South</td>
<td>12</td>
<td>0.6</td>
<td>12%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>154</td>
<td><strong>1.0</strong></td>
<td><strong>20%</strong></td>
</tr>
</tbody>
</table>

Target is 5 per 1 million population
HIV activities

• Scientific HIV workshop (April 2013) to identify research topics for residents for thesis

• Working with CDC and Implementing partners
  – Posting residents
  – Secondary data analysis
  – ART & PMTCT Rapid Data Quality and Services Quality Assessment
  – Intensified case finding tuberculosis among HIV positive person
  – More than 30 residents working on HIV related thesis, assessments, secondary data analysis
Polio Activities

• Creation of NSTOP (Nigeria Stop Transmission of Polio)
  – Highly competent culturally appropriate persons at lowest possible levels
• To support the National Polio Eradication Emergency Plan
  – >100 National STOP Local Government Officers (NSLO) to cover all HR LGAs
  – 15 Field coordinator (centrally and regionally) – decentralization
• Training
  – 120 NSTOP training – FELTP, Universities, Ministries
  – Modular thematic 500 health care workers – competency based
    • Routine immunization – baseline assessment – organize outreach
    • Micro-planning
    • Service delivery
    • Vaccine cold chain management
• Responded to all polio outbreaks
• Supported all IPDS – micro-planning, monitoring, service delivery
• Operational research
  – Improvement of surveillance using SMS reminders
  – Acceptability of new vaccines, expansion of age group, FGD
• Informatics – GPS, smart phones, Open data kit
• 4 residents supported by BEP for 2 week advanced training on lassa fever in S/Leone
• AFENET conference – largest number of accepted abstracts, polio workshop
• Research prioritization for residents
  – HIV, Malaria and Vaccine Preventable Diseases
• Graduate won a grant from BMG foundation
• Cohort 6 selection – short listing ongoing
• Alumni association registered
• Hepatitis National survey – prevalence & RF
1. Polio field census and vaccination of underserved populations — northern nigeria, 2012–2013 – MMWR CDC

2. Assessment of integrated disease surveillance and response strategy implementation in selected local government areas of Kaduna state – Annals of Nigerian Medicine

3. Polio moving target - finding and vaccinating Nigerian nomads may be one of the last obstacles to the eradication of polio. – Nature


5. Molecular detection and characterization of tick-borne Pathogens in dogs and ticks from Nigeria – PLOS- NTD


7. Residents contributing to Nigeria Bulletin of Epidemiology
2. Evaluation of Quality of TB Control Services by Private Health Care Providers in Plateau State, Nigeria; 2012
3. Health care workers’ knowledge and attitude and outcomes of TB treatment in Plateau state Nigeria, 2011
4. Health care workers’ knowledge and attitude and outcomes of TB treatment in Plateau state Nigeria, 2011
6. National stop transmission of polio (N-STOP) outreach to nomadic and other under-served communities in northern Nigeria: an innovation to close chronic immunity and surveillance gaps among under-served populations — August 2012 to July 2013
7. HIV infection among under-five malnourished children in Kano State
8. Overcoming programmatic barriers to polio eradication in Nigeria through the National Stop Transmission of Polio (N-STOP) Program – Nigeria, 2012-2013
9. Prevalence and Factors Associated with Hypertension and Obesity among Civil Servants in Kaduna, Kaduna State, June 2012
10. Determinants of Routine Immunization Coverage in Bungudu, Zamfara State, Northern Nigeria; May 2010
11. Performance of a HRP-2 rapid diagnostic test in children less than 5 years in Kaduna State, Nigeria
12. Factors associated with probable case of Leptospirosis among kennel workers in Abuja, Nigeria
14. Prevalence and correlates of Influenza A among piggery workers
15. HIV Prevalence Trends in Nigeria from 2001 to 2010: What is the Progress, Where is the Problem?
16. Descriptive characterization of the 2010 cholera outbreak in Nigeria”
17. Factors Associated with Tuberculosis among Patients Attending a Treatment Centre in Zaria, North-west Nigeria. 2010
18. Evaluating a surveillance system: Live bird market surveillance for highly pathogenic avian influenza; a case study.


20. Factors associated with interruption of treatment among Pulmonary Tuberculosis patients in Plateau State, Nigeria. 2011
Challenges

- ASUU strike – delay in university based programs
- Security issues
- Challenges of scale up
  - Additional technical and administrative staff
- HR issues at state levels
  - Staffing shortages, unwilling to release
  - State level training may be an option, ? Reposting to the state
  - Lack of trainable persons in some of the states
- Laboratory support
- Funding & Sustainability
  - Strategic plan
  - Grant writing and resource mobilization skills
  - GON funding
Plans for future

• Continued institutionalization
• Broadening resource base – Strategic plan
• Personnel – additional – university graduates, experienced FELTP/EIS, research/publication
• Monitoring and evaluation framework
  – Epi-track, Bound volume assessment
• Field site
  – Reaching all states
  – Range of activities – HIV, Polio, Malaria, NCD
  – Mentors and supervisors. Additional personnel
  – Improvement in supervision
• Strategic plan development finalization
Thank you