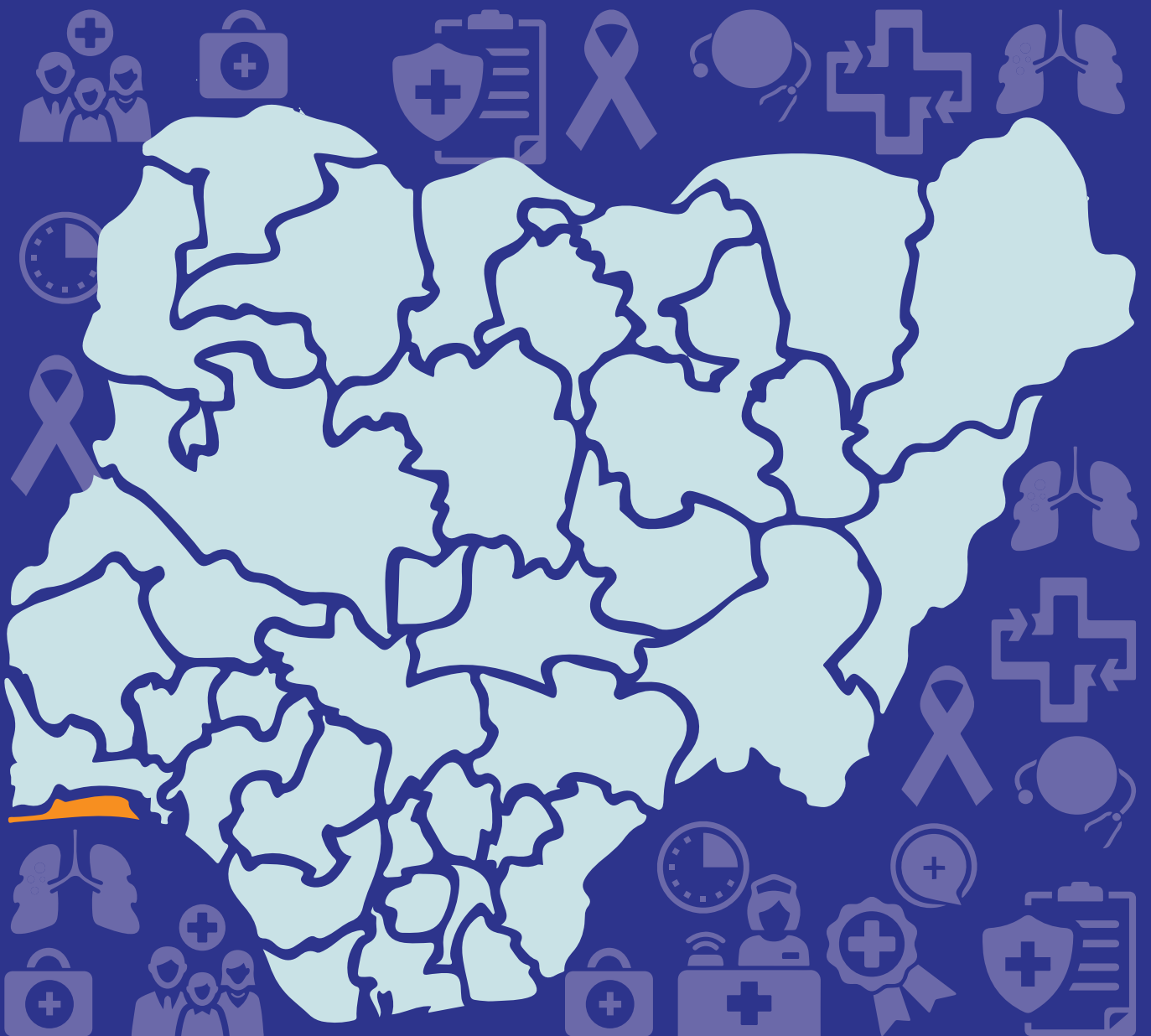




USAID
FROM THE AMERICAN PEOPLE



LAGOS STATE HEALTH PROFILE





Overview

CAPITAL

Ikeja

POPULATION

8,048,430 (2006, NPC)

URBAN/RURAL POPULATIONS

2,245,958 /5,240,568

LOCAL GOVERNMENT AREAS

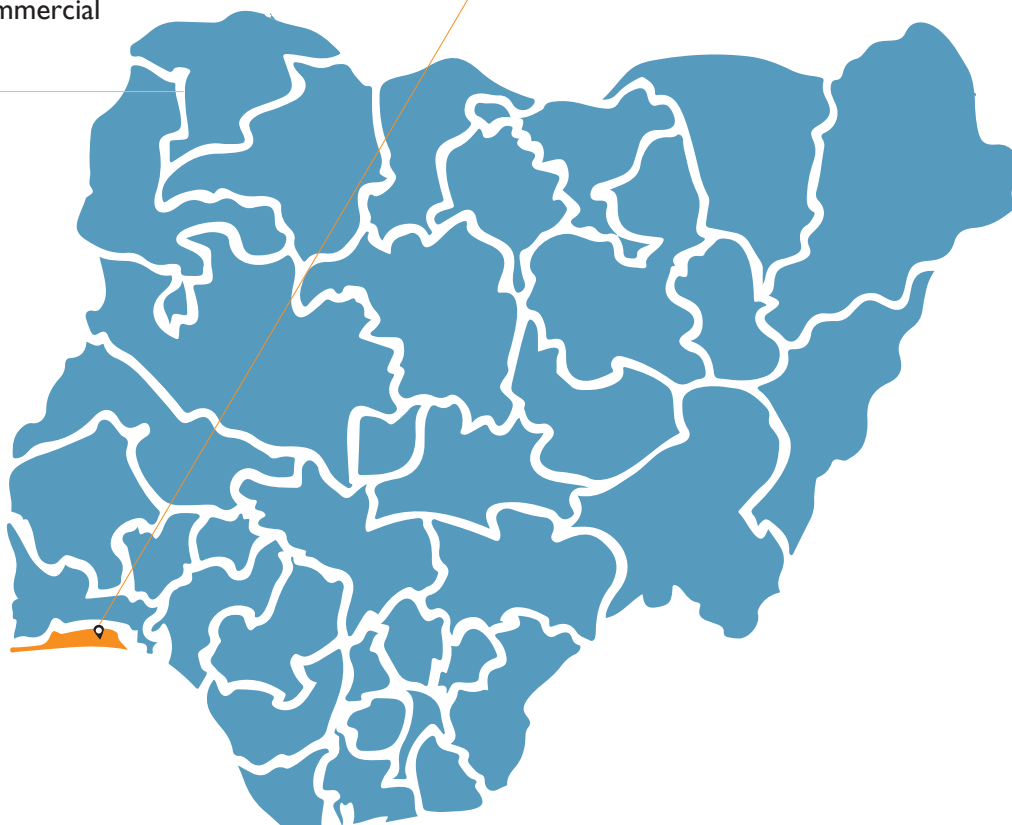
20 LGAs

ETHNIC GROUPS

Essentially a Yoruba-speaking environment, it is a socio-cultural melting pot attracting both Nigerians and foreigners alike.

MAIN OCCUPATIONS

Agricultural, fishing and other commercial activities





State Health Indices

HIV AND AIDS
PREVALENCE

2.2%

(NARHS 2012)



TUBERCULOSIS
PREVALENCE



LAGOS STATE
CARRIES

8.4%

OF NIGERIA'S
TB BURDEN

The State has consistently been responsible for about 11% of the cases of TB registered in Nigeria

MATERNAL
MORTALITY RATE

650

MATERNAL
DEATHS PER
100,000

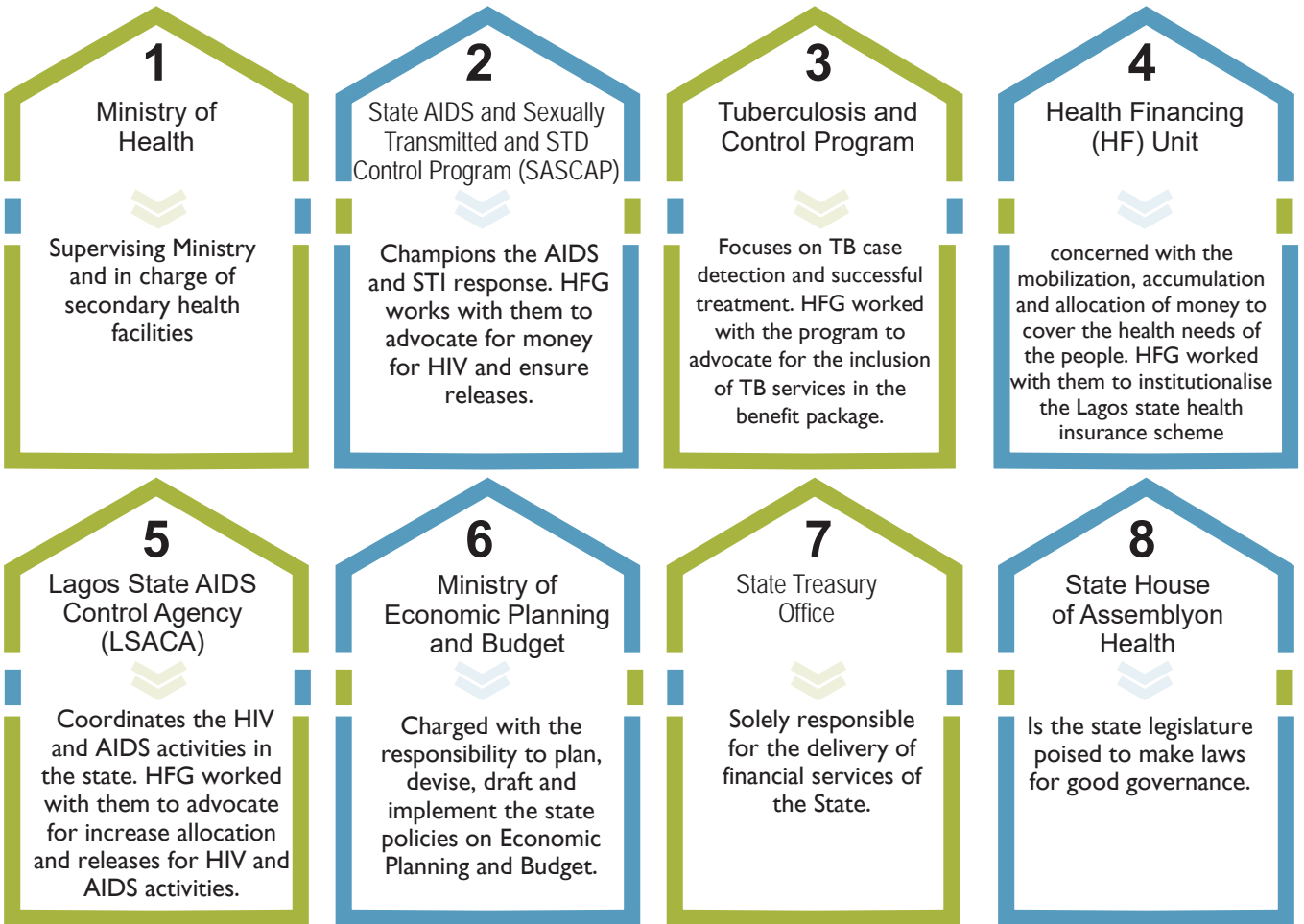
LIVE BIRTHS

IN LAGOS STATE
(NDHS 2008)





Key Stakeholders



THE USAID/HFG PROJECT IN LAGOS STATE

KICKED OFF IN 2015



To ensure sustainable financing for HIV and AIDS and TB activities



USAID/HFG in Lagos State

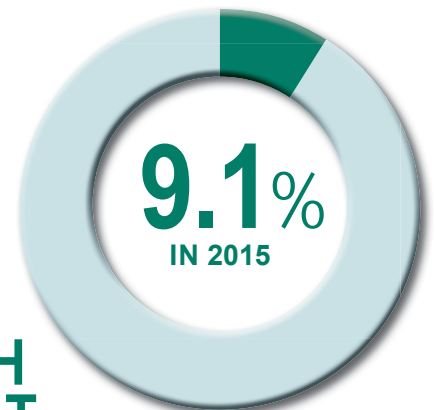
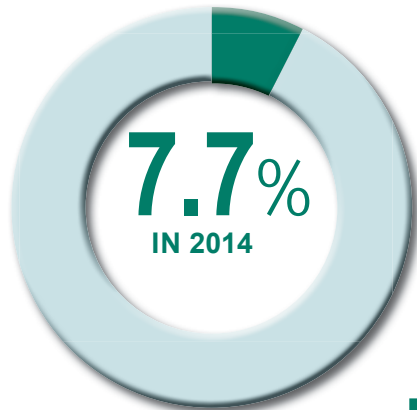
HEALTH STRUCTURES AND SERVICES

Functional facilities that are not able to meet the populace demands.

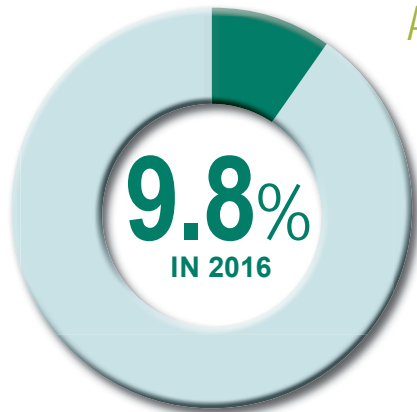
STATE HEALTH INSURANCE SCHEME

Law was passed but the scheme was not operationalised.

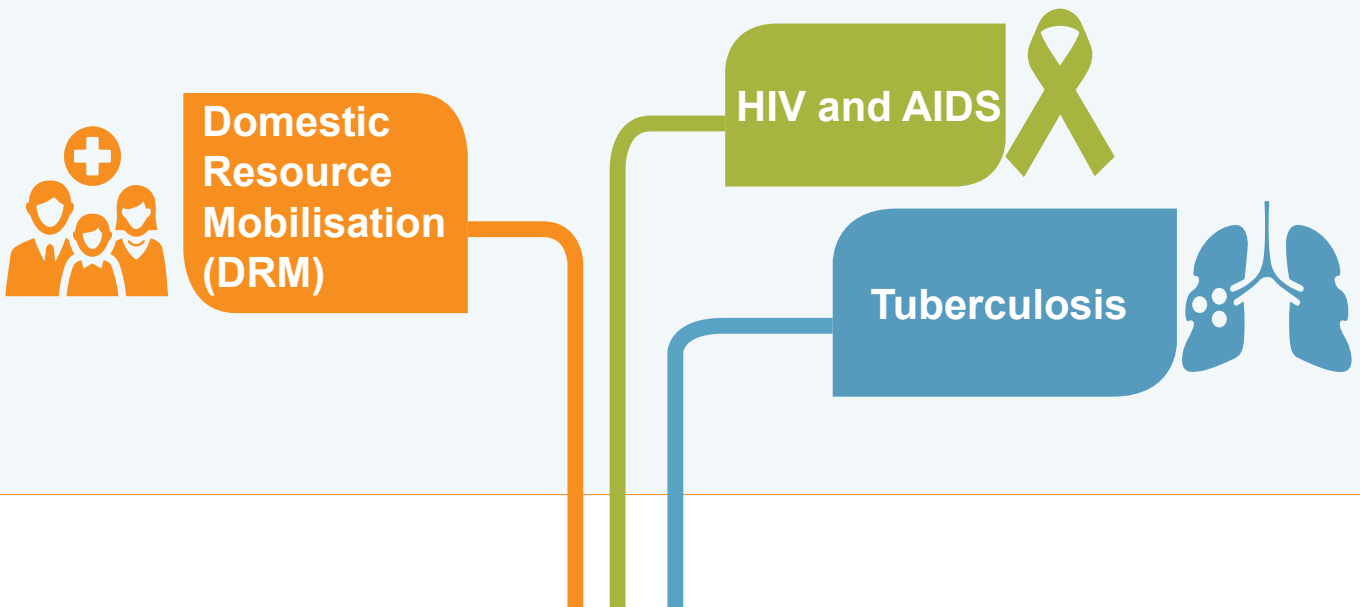
A **GOVERNMENT MINDSET** that believed HIV and AIDS activities are already funded by donors therefore HIV and AIDS activities should not be appropriated for by the state.



HEALTH BUDGET ALLOCATIONS



INTERVENTION AREAS





Approach



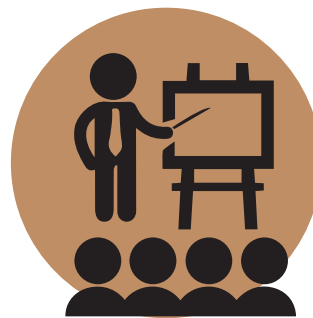
DIAGNOSTIC TO ACTION

Results of the diagnostic to action were used as tools for high level advocacies throughout the project schedule to stakeholders with political wherewithal and interest to increase budgetary allocation and effect releases of funds to State HIV and AIDS and TB Program activities.



MULTI SECTORAL PLATFORMS

Created a platform where MDAs of Government and other relevant stakeholders meet and discuss issues on health financing and other health related challenges



CAPACITY BUILDING

Conducted Health financing trainings for DRM TWG members, Health Financing Unit (HFU) and Lagos State Health Management Agency (LASHMA).



ADVOCACY

Continuous advocacy and lobbying for progressive implementation of policies, operational plan and launch of the LSHS. Conducted 8 surveys and assessments; FSA, Governance Assessment, Political economy analysis, HHS, Health Account, SASA, PPM. The reports were used to sensitise and generate evidence for improved appropriation, release and private sector involvement.



Achievements

USAID HFG Lagos has achieved the following:

- Institutionalization of the inter sectoral collaboration platform brought about improved working relations. The ministries of finance, budget and economic planning have now begun to work together, leading to increased interest by the state House of Assembly to defend the health budget.
- A budget head is now created for LASHMA with a total of NGN 700 million (\$1,928,374.70) allocated for the agency in the 2018 Budget.
- A 29 percent (NGN 811 million/ \$2,234,159.83) budget increase for HIV and AIDS was achieved for Lagos State AIDS Control Agency (LSACA), State AIDS and Sexually Transmitted and STD Control Program (SASCAP), Lagos State Health Management Agency (LASHMA) and Local Government (LG) budget.
- The state expanded and strengthened the DRM TWG to include a co-chair; the director of economic planning and budget. This will build sustainability and enhance appropriation and releases.
- SASCAP made releases of NGN 39.9 million (\$1,099,173.58) in 2017 compared to 0 releases in 2016.
- Developed the Lagos state Health Scheme (LSHS) benefit package to include of vertical HIV and AIDS services; PMTCT, HCT and ART.

29%

INCREASE IN HIV AND AIDS
**BUDGETARY
ALLOCATION**

VALUED AT N811m

N700
MILLION

**TOTAL 2018
BUDGET HEAD**

FOR LAGOS STATE HEALTH MANAGEMENT
AGENCY (LASHMA)

N39.9
MILLION

TOTAL RELEASES

FOR STATE AIDS AND SEXUALLY TRANSMITTED
AND STD CONTROL PROGRAM (SASCAP)



Lessons Learnt



INTERAGENCY COLLABORATION

Interagency collaboration is a problem solver that can effectively improve services.



CONTINUOUS ENGAGEMENT

Transparency, accountability and continuous engagement played a vital role in funds appropriation and releases.



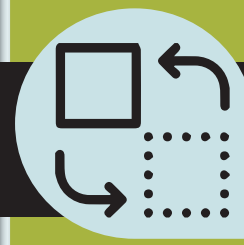
ADVOCACY

Advocacy was a successful tool used to provide evidence to stakeholders on the need to allocate and disburse resources for health.



ALL-INCLUSIVE SECTOR STUDY

Projects should conduct an all-inclusive sector study before commencement of activities to understand the system and enable early buy in. In Lagos HIV and AIDS are considered health issues therefore they cannot be treated in isolation and this called for re-strategizing of intervention plan to include health in general.



FLEXIBILITY

Projects should be open to changes to enable successful implementation and attainment of goals. Initially, Lagos only thought of including Prevention of Mother To Child Transmission (PMTCT) in the benefit package but ended up including all the HIV and AIDS services.



Challenges



Delay in the take-off of the Lagos State Health Scheme



Territorial method of working is one of the major challenges in Lagos



The facilities are over stretched due to the ever-growing population in Lagos



Legacy



Intersectoral collaboration amongst MDAs and other key stakeholders



An established Domestic Resource Mobilization (DRM) Technical Working Group (TWG) for HIV and AIDS and TB



Diagnostic reports and policy documents for referral and guidance



Recommendations

The state should Institutionalize the TWG intersectoral collaboration so that it becomes an organisational norm



Continuous capacity building and sensitization activities for staff and general public is required to enable change of attitude towards making health everyone's problem



USAID should consider a follow up programme to ensure proper take off of the health insurance scheme in Lagos.





Sustainability Initiative



The state is putting DRM as a mandate for the HFU and will be funded by them. A budget line has been created



The state developed implementation plan and put the DRMs to work together. HFU is to coordinate all DRM activities.



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