The Centers for Disease Control and Prevention (CDC) office in Nigeria was established in 2001. To achieve CDC-Nigeria’s vision “Public Health Excellence for Healthy Nigerians” the office supports the Nigerian Federal Ministry of Health in the development, implementation, and evaluation of disease response efforts and programs that contribute to a strengthened public health infrastructure in Nigeria.

**HIV/AIDS**

Nigeria is the third largest President’s Emergency Plan for AIDS Relief (PEPFAR) program. Through PEPFAR, CDC works closely with Nigeria’s Federal Ministry of Health to support sustainable, country-owned HIV prevention, treatment, and care programs and to strengthen the country’s laboratory, disease surveillance, and program monitoring and evaluation systems. CDC works with more than 20 implementing partners to address HIV/AIDS in Nigeria by:

- Providing training and support for counseling and testing services;
- Integrating HIV and TB programs;
- Helping health facilities screen all transfused blood;
- Developing tailored prevention efforts for high-risk populations;
- Supporting interventions to prevent mother-to-child transmission of HIV; and,
- Transitioning HIV/AIDS treatment programs to Nigeria government and local partners for long-term sustainability.

**Polio**

Nigeria is one of three countries, including Afghanistan and Pakistan, where wild poliovirus (WPV) transmission has never been interrupted. Nigeria is also the only country in the world with ongoing transmission of three types of poliovirus: wild poliovirus (WPV) type 1, WPV type 3, and circulating vaccine-derived poliovirus type 2.

CDC helps Global Polio Eradication Initiative efforts in Nigeria by:

- Providing training to the Nigerian government and partners to improve the use of data to monitor coverage and quality of polio vaccination campaigns;
- Providing field consultants through the National Stop Transmission of Polio program to support polio eradication activities in high risk states;
- Supporting the development of a “Dashboard” system used by senior Nigerian decision makers to monitor key indicators of vaccination campaign performance;
- Supporting efforts to increase vaccination coverage among children in missed communities including nomadic populations;
- Supporting media engagement to increase acceptance of vaccination; and,
- Piloting projects to improve cold transport of vaccine, as well as stool samples for testing.
Malaria
Nigeria has more reported cases of malaria and deaths due to malaria than any other country in the world. CDC’s activities in Nigeria are a part of the President’s Malaria Initiative (PMI). The main goal of PMI in Nigeria is to achieve 85% coverage of the most vulnerable groups — children under five years of age and pregnant women — with proven preventive and therapeutic interventions, including long lasting insecticide treated nets, intermittent preventive treatment of pregnant women, indoor residual spraying (IRS), and artemisinin-based combination therapies. CDC/PMI provides technical assistance to Nigeria’s Federal Ministry of Health, National Malaria Control Program and other partners to develop evidence-based malaria policy and programming to help reduce the burden of malaria in Nigeria. CDC provides technical assistance in the areas of:
- Monitoring/evaluation and operations research;
- Case management and malaria diagnostics; and,
- Vector control through IRS.

CDC/PMI is also building Nigerian epidemiologic capacity through the Field Epidemiology and Laboratory Training Program. CDC malaria activities in Nigeria are conducted through the USAID Mission bilateral program.

Animal-Human Diseases (Zoonoses)
CDC’s Animal-Human Interface Project (AHIP) promotes health systems strengthening by encouraging interagency collaboration, preparedness, and response to outbreaks of diseases spread between humans and animals (zoonotic). CDC’s AHIP provides consultation to country partners on animal and public health issues directly, and through education and training residents of the Nigeria Field Epidemiology and Laboratory Training Program. Since 2009, this program in Nigeria has:
- Provided technical expertise for response to outbreaks of pandemic influenza H1N1, rabies, Lassa fever, and leptospirosis;
- Conducted studies to detect influenza viruses in swine, identify novel pathogens and diseases in bats that could be transmitted to humans; and,
- Determined prevalence of vector-borne diseases, brucellosis, and zoonotic tuberculosis.

Tobacco
CDC’s Global Tobacco Surveillance System (GTSS) aims to enhance country capacity to design, implement and evaluate tobacco control interventions, and monitor key articles of the World Health Organization’s (WHO) Framework Convention on Tobacco Control (FCTC) and components of the WHO MPOWER technical package. CDC provides technical support to Nigeria for tobacco surveillance.

Field Epidemiology Laboratory and Training Program
The Nigeria Field Epidemiology Laboratory Training Program trains field public health laboratory, epidemiology, and veterinary epidemiology residents to work in leadership positions in the Ministry of Health and the Federal Ministry of Agriculture and Water Resources. This two-year program helps improve public health systems within the country by increasing knowledge and skills in field epidemiology and laboratory science and building a cadre of skilled and well-trained health professionals in Nigeria.

Top 10 Causes of Deaths in Nigeria

1. HIV/AIDS 16%
2. Lower respiratory infections 11%
3. Malaria 11%
4. Diarrheal diseases 7%
5. Measles 6%
6. Perinatal conditions 5%
7. Tuberculosis 4%
8. Cerebrovascular disease 4%
9. Ischaemic heart disease 3%
10. Whooping cough 2%

Source: WHO World Health Statistics, 2006

Nigeria at a Glance

Population: 170,123,740
Per capita income: $2,600
Life expectancy at birth women/men: 55/49 yrs

Source: CIA Factbook, 2012

Publication Date: December 2012