Leveraging the power of partnerships to save the lives of children under five in Nigeria

THE COALITION ON CHILDHOOD ESSENTIAL MEDICINES IN NIGERIA COMMITTED TO reducing child diarrhea and saving thousands of lives through the collective action of public and private sector partners.

Every year, approximately 100,000 children in Nigeria die needlessly from diarrhea, the second leading cause of death for children under 5. These deaths can be easily prevented with a simple treatment – zinc and oral rehydration salts (ORS).

In 2012, the Nigerian government launched the National Essential Medicines Scale-up Plan to galvanize existing efforts to reduce infant mortality by scaling up the supply and use of essential medicines, including zinc and ORS, to treat diarrhea.

To help kick off national implementation, a Coalition on Childhood Essential Medicines in Nigeria meeting was convened in October 2012 to bring together leaders from Nigeria’s public and private sectors. This initial meeting included 15 organizations who endorsed the Pledge to Eliminate Child Diarrheal Deaths in Nigeria to support three key actions: building demand among caregivers and providers to promote the use of ORS and zinc; ensuring widespread availability of optimal, affordable and high-quality ORS and zinc; and mobilizing attention and resources to scale-up the initiative.

Key Results:

- Zinc and ORS were classified as over-the-counter pharmaceutical products allowing them to be widely distributed and marketed. The Pharmacists’ Council of Nigeria also added zinc to the list of approved medications for Proprietary Patent Medicine Vendors (PPMVs), which are over-the-counter pharmaceutical dispensers.

- The National Essential Medicines Coordinating Mechanism (NEMCM) was formed to coordinate and align investments across partners. By the end of 2015, over $45 million in new funding was raised to support treatment scale-up efforts in the country with activities implemented in 13 states (full coverage) and 24 states (partial coverage).

- By the end of 2015, four new low-osmolarity ORS (a new formulation of ORS with lower levels of both sodium and glucose recommended by WHO) and five new zinc suppliers entered the market (compared to one Low-ORS supplier and zero zinc suppliers in mid-2012), resulting in a drop in wholesale prices by 77% to $0.34 per treatment course.

- More than 90% of registered PPMVs and 85% of public sector health providers in focal states were trained on diarrhea management, resulting in improved prescription rates for zinc and ORS.

- An estimated 20% increase in combined zinc and ORS coverage was achieved in eight high burden states.

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PARTNERSHIPS

The initial Coalition meeting in 2012 was co-hosted by the Nigerian Ministry of Health, the MDG Health Alliance, the Wellbeing Foundation Africa, and the Clinton Health Access Initiative (CHAI), together with 15 private and public partners. Since then, the Coalition has grown to 25 partners, listed below.

The Government of Nigeria has demonstrated its commitment to prioritizing diarrhea treatment as a high-impact intervention for reducing child mortality and has facilitated a favorable policy and regulatory environment to enable widespread access to zinc and ORS. The National Essential Medicines Coordinating Mechanism (NEMCM) drives continued engagement across the public and private sectors—as well as in partnership with the global Diarrhea & Pneumonia Working Group, co-chaired by UNICEF and CHAI. The NEMCM has followed up on original commitments from the Coalition meeting and has recruited new partners and investments.

NEMCM members and additional business partners have helped to ensure a sufficient supply of high-quality, affordable, and optimal zinc and ORS products throughout the country, including in rural and hard to reach areas. This has included increasing investments, expanding promotion, marketing, communications and distribution efforts.

NGOs and implementing partners have played a critical role in executing key interventions outlined in the national scale-up plan, particularly through improving demand for zinc and ORS among caregivers, mothers, and health providers and filling major resource gaps.

LESIONS LEARNED

Ensuring that new partner and donor investments are aligned with the national scale-up strategy is essential to drive dramatic gains.

The NEMCM helped to coordinate efforts and ensure a strong feedback loop between the public and private sector; for example, public sector commitment has driven supplier investments and public sector prescriptions help drive availability of product. Replication of the NEMCM structure at the state level will build on and strengthen existing partner/government efforts to ensure large-scale coverage of interventions across the country.

NEXT STEPS

Key priorities moving forward include bringing activities to scale and securing additional commitments from partners to extend the reach and impact of existing efforts. State-level commitments are also required for scale-up at local government level and to ensure sustainability. The National Scale-up Plan will be revised in 2016.