

GEORGETOWN GLOBAL HEALTH NIGERIA IN 2023



GHN



The opinions expressed are those of the authors and do not necessarily represent the views of any government or donor agency associated with the content of this report.

No 2 Babatope Ajakaiye Crescent, Jahi District. Abuja.



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FROM THE CHIEF EXECUTIVE DIRECTOR



As we reflect on the past year, I am immensely proud to share the collective achievements and challenges faced by our dynamic organization. Guided by our mission to improve public health outcomes, this report encapsulates our achievements, challenges, growth trajectory, and strategic vision for the future.

Achievements

The past year's achievements are a testament to our organization's unwavering dedication and the community's collaborative spirit. We have witnessed significant strides in several key areas, each contributing to our overarching goal of enhancing public health.

One notable accomplishment has been implementing our comprehensive **HIV/TB care and treatment** programs in Kano, Bauchi, and Jigawa states, Nigeria. These initiatives, bolstered by donor support, have improved access to essential healthcare services for persons living with HIV/TB in these communities. From HIV/TB care to **polio immunization campaigns** in fragile, conflict, and violence settings in Niger and Katsina states, Nigeria, our impact has been substantial, touching the lives of thousands in these underserved communities.

In our inaugural four years, our organization's robust financial management structures have effectively managed multimillion-dollar donor funds and cleared both **donor and statutory audits**. This success underscores our commitment to responsible stewardship, fostering confidence among our donors and stakeholders. We remain dedicated to upholding the highest standards of financial integrity as we continue our impactful journey in advancing public health globally.

Diversifying our **funding base** has been pivotal for securing stability and enabling strategic growth. We appreciate the support from multiple donors, yet recognize the need to explore additional funding avenues, including innovative profit-making approaches. This proactive stance ensures organizational sustainability, empowering us to evolve and deliver impactful public health solutions continually. We remain committed to financial resilience, fostering a dynamic ecosystem that enables us to evolve and deliver impactful public health solutions continually. Together with our partners, we forge a path toward sustainable, diversified funding for a healthier future.

“

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Our **strategic diversification**, encompassing emergency preparedness, response, recovery, and humanitarian crisis management, has fortified our mission. This expansion is accompanied by significant workforce development, research initiatives, and the integration of **cutting-edge digital health technology**. Together, these efforts enhanced our organizational resilience and empowered us to proactively address emerging health challenges, ensuring a comprehensive, agile, and technologically advanced approach to public health. Our commitment to excellence and innovation positions us at the forefront of impactful and sustainable healthcare solutions for the communities we serve.

Our organization celebrates successes in **product development**, offering diverse solutions that strengthen public health programming. These products, from innovative predictive modeling and data analytics platforms to advanced healthcare apps, reflect our commitment to pioneering approaches. These achievements reinforce our impact, ensuring that our programs are effective and at the forefront of advancements in public health, improving the lives of individuals and communities.

Our collaboration with **local academic institutions** has been transformative. These partnerships enriched our research, expanded outreach, and enhanced program efficacy. Together, we will make significant strides in advancing public health, leveraging shared expertise and resources for sustainable impact. Our **internship program** is a cornerstone in developing a sustainable public health workforce. By providing hands-on experience, we empowered future leaders, ensuring the continuity and dynamism of our mission.

Our research endeavors have yielded valuable insights, contributing to the broader scientific community and informing evidence-based healthcare policies. Expanding our **research and manuscript** portfolio is imperative to contribute meaningfully to the public health knowledge base. Active representation at conferences is crucial for showcasing successes, fostering collaboration, and ensuring our advancements become integral to global health discourse, reinforcing our commitment to innovation, excellence, and continuous improvement.



Challenges

However, it is crucial to acknowledge the challenges we encountered along this journey. The global landscape, marked by unforeseen health crises and geopolitical shifts, posed operational challenges for many organizations like ours. Navigating funding uncertainties and adapting swiftly to evolving health emergencies demanded resilience and agility. The safety and well-being of our staff, always a paramount concern, require meticulous planning and continuous monitoring. Addressing these challenges became a testament to our organizational adaptability. The lessons learned have positioned us to enhance our crisis response strategies, fortify partnerships, and invest in resilience-building measures for the future.

Growth Path

Our growth path centers on innovation, collaboration, and technological advancement. Embracing the power of technology, we are investing in data analytics and digital health solutions to enhance program efficiency and impact. This strategic focus aligns with our commitment to delivering results and maximizing the reach of our interventions.

Collaboration remains at the core of our growth strategy. Strengthening partnerships with local and international stakeholders amplifies our collective impact. By fostering an environment of knowledge exchange and shared resources, we expand our capacity to tackle complex public health challenges.

Future Plans

Looking forward, our vision is anchored in a commitment to excellence, inclusivity, and sustainable impact. Emerging stronger from the challenges of the past year, we aspire to lead in developing and implementing innovative public health solutions. Our plans encompass a multidimensional approach. We will continue to adapt swiftly to emerging health challenges, leveraging research and embracing innovation. Advocacy for policies prioritizing public health and community engagement initiatives will be integral to our strategy. Furthermore, sustainability will be a guiding principle, ensuring the enduring impact of our interventions. Our commitment extends beyond organizational boundaries. We are dedicated to fostering a workplace culture that thrives on diversity, inclusivity, and continuous learning. By nurturing a dynamic and collaborative environment, we empower our team to drive positive change in the public health landscape.

In conclusion, I extend my heartfelt gratitude to our dedicated staff, generous donors, and committed partners. Your support propels us forward, and I am confident that our shared commitment will drive even more outstanding achievements in the years to come.

Ibrahim Bola Gobir, MD MSc & MA Public Health



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Georgetown Global Health Nigeria

OUR SECTORS

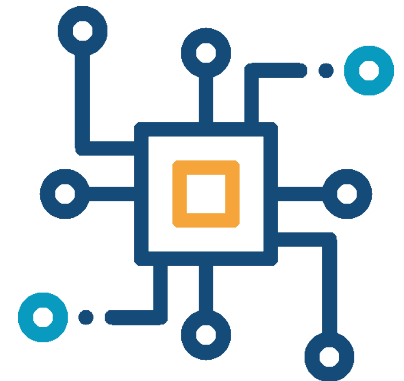


Public Health

Advancing public health through collaborative research for digital innovations

Digital Acceleration

Enhancing and safeguarding the overall well-being of communities and populations on a country and regional level



Education

Providing affordable, high-quality hands-on training and mentorship across various skill areas related to public health.

A group of diverse professionals, including men and women of various ethnicities, are gathered in a meeting room. In the background, a man in a light-colored shirt is pointing at a presentation screen displaying a slide with text and graphics. The room has wooden pillars and a whiteboard with the letters 'GHN' on it. The overall atmosphere is professional and collaborative.

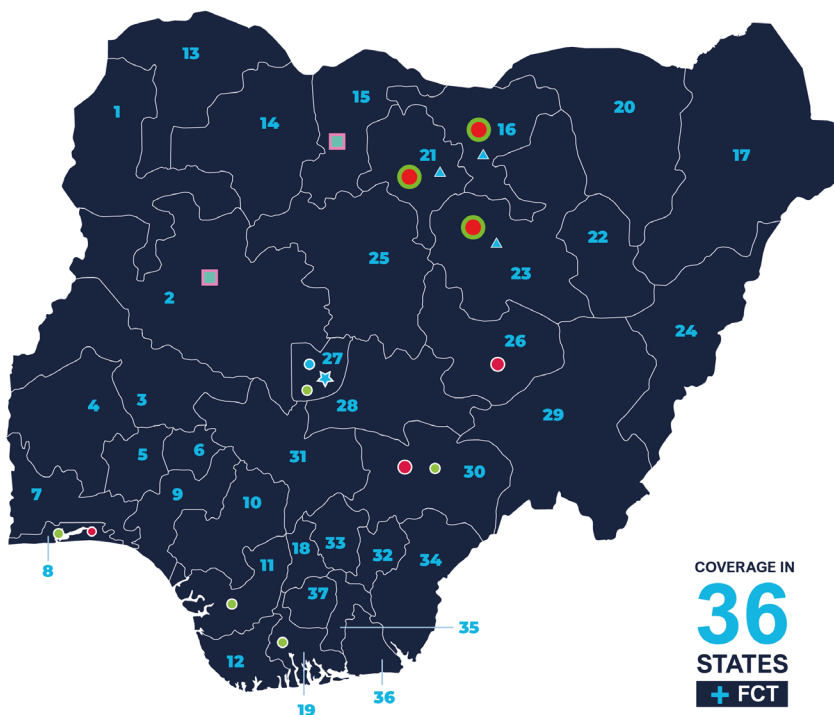
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DEVELOPMENT IMPACT IN NIGERIA



States

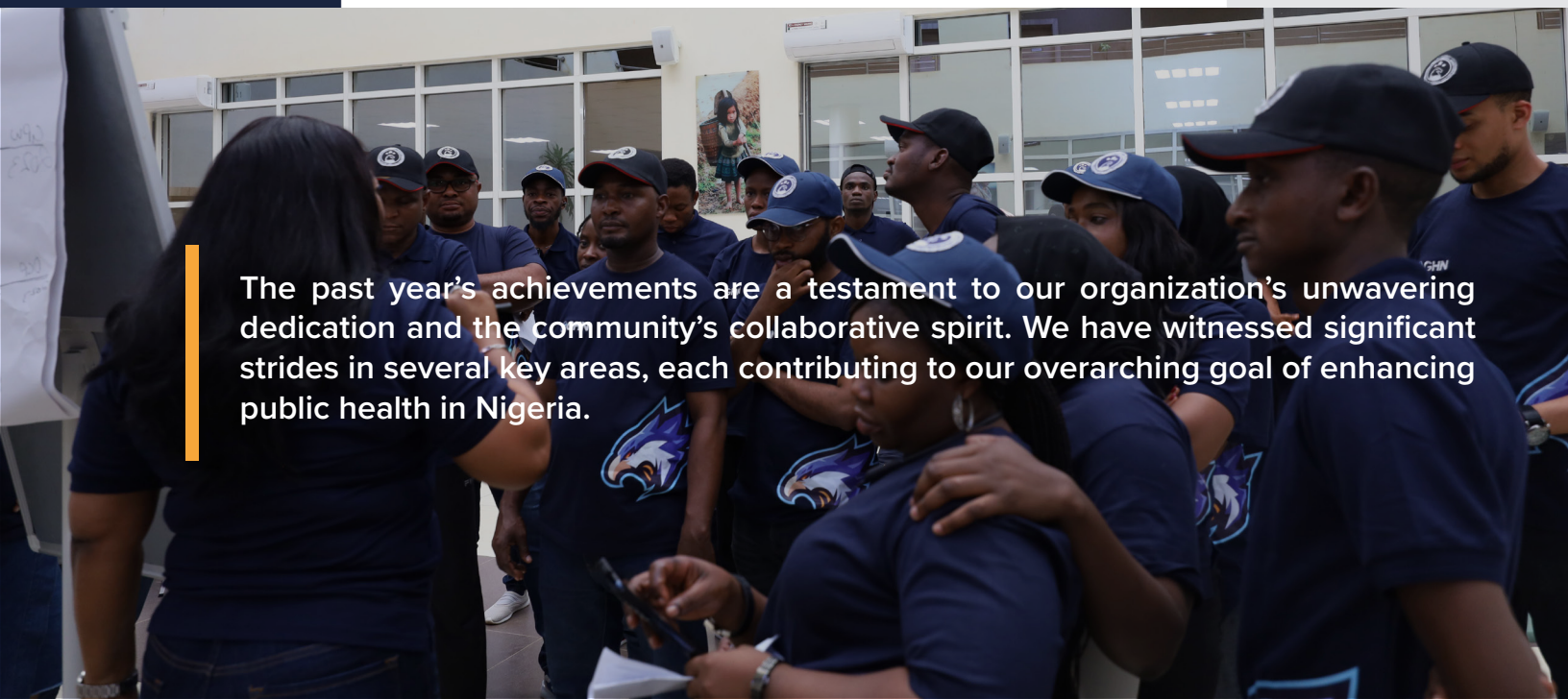
- 1. Kebbi
- 2. Niger
- 3. Kwara
- 4. Oyo
- 5. Osun
- 6. Ekiti
- 7. Ogun
- 8. Lagos
- 9. Ondo
- 10. Edo
- 11. Delta
- 12. Bayelsa
- 13. Sokoto
- 14. Zamfara
- 15. Katsina
- 16. Jigawa
- 17. Borno
- 18. Anambara
- 19. Rivers
- 20. Yobe
- 21. Kano
- 22. Gombe
- 23. Bauchi
- 24. Adamawa
- 25. Kaduna
- 26. Plateau
- 27. Federal Capital Territory
- 28. Nasarawa
- 29. Taraba
- 30. Benue
- 31. Kogi
- 32. Ebonyi
- 33. Enugu
- 34. Cross River
- 35. Abia
- 36. Awka Ibom
- 37. Imo

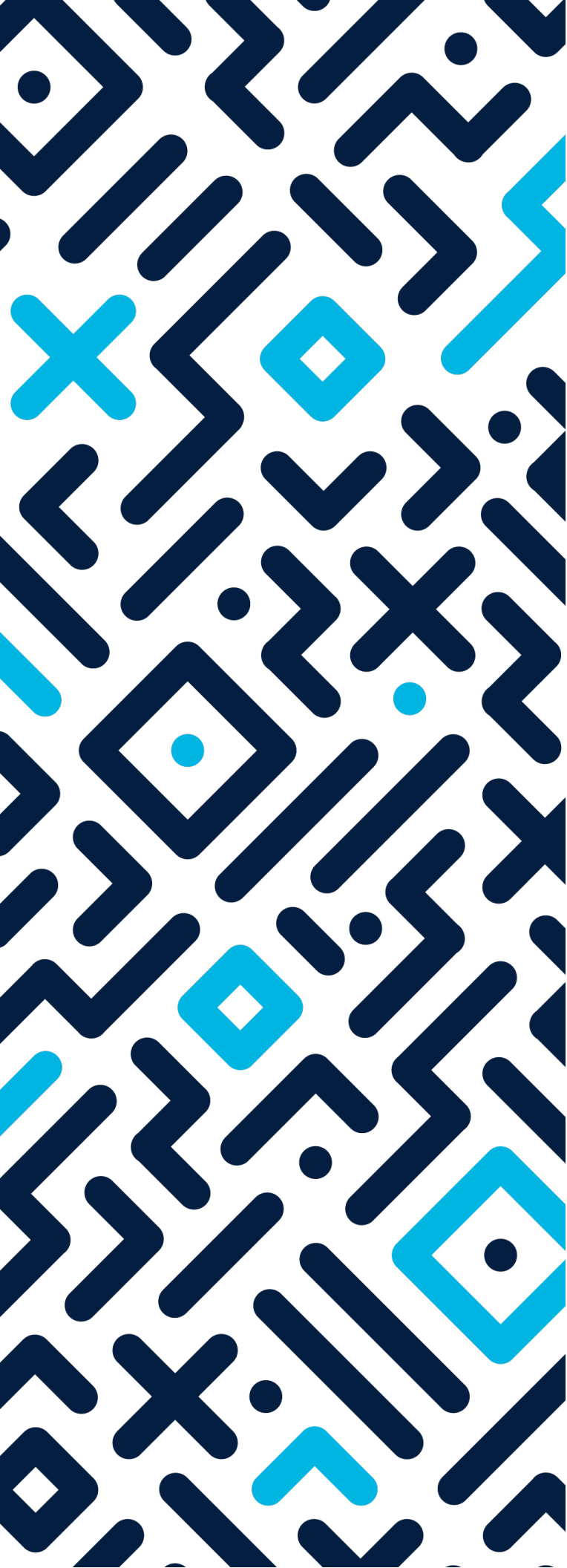


KEY

- Preventive Therapy (TPT) focused Data Quality Assessment (DQA) in Nigeria (USCDC/UCSF, 2022) ●
- Evaluation of PROTECT (Preventing Occurrence of Tuberculosis by Expanding Coverage of Tuberculosis Preventive Therapy TPT among PLHIV) in selected states in Nigeria (BMGF-CDC Foundation, 2022-2023) ●
- Assessment of the EMR/LIMS exchange system (USCDC/PHIS3, 2021-2022) ●
- Implementation of an electronic National Laboratory Information System (eN-LIS) in Nigeria: RSSH II Project (GFATM /NACA -2023) ●
- Accelerating Control of the HIV Epidemic in Nigeria – Cluster 2 (ACE2) (USAID, 2022-2027) ●
- Nigeria Polio Outbreak Response Support (BMGF/SCIDAR, 2022) ■
- GGHN Offices ▲
- GGHN Head Office ★

The past year's achievements are a testament to our organization's unwavering dedication and the community's collaborative spirit. We have witnessed significant strides in several key areas, each contributing to our overarching goal of enhancing public health in Nigeria.





GGHN Projects





ACE 2 - Accelerating Control of the HIV Epidemic in Nigeria

USAID | GGHN



In the heart of Nigeria, the states of Jigawa, Bauchi, and Kano grapple with the HIV epidemic amidst socio-cultural complexities. Despite their relatively low HIV prevalence, these regions confront formidable challenges. Cultural practices and hidden behaviors—ranging from engaging in sexual relationships with multiple partners to clandestine drug use—fuel the spread of HIV and TB. The need for robust screening and treatment is evident, yet a performance gap persists, particularly in tuberculosis (TB) screening among people living with HIV (PLHIV).

The launch of the USAID-funded Accelerating Control of HIV Epidemic in Nigeria – Cluster 2 (ACE

C2) project signifies a crucial turning point in our fight against HIV in those states. Led by Georgetown Global Health Nigeria (GGHN), the project is a collaborative effort that embodies the spirit of USAID's community programs. Our vision is clear: we are dedicated to expediting the journey towards the control of the HIV epidemic and to establish a resilient and sustainable healthcare infrastructure in Jigawa, Bauchi, and Kano.

Employing five transformative approaches:



Sustainable Service Delivery Models: We are building a future where healthcare system that is self-reliant and enduring.



Human-Centered Design: We are building a future where the healthcare system is self-reliant and enduring.



Data-Driven Programming: We are leveraging the power of data to make informed and impactful decisions.



Leveraging Technology: We are harnessing cutting-edge technology to stay ahead in the fight against the epidemic.



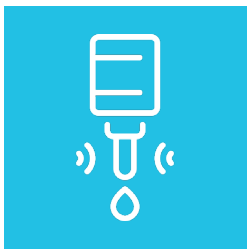
Mentorship: Nurturing the next generation of healthcare professionals.





Special Intervention Project - Strengthening the Polio Programme in Katsina and Niger State through Technical Assistance and Special Interventions.

**BMGF through SCIDaR
2022 | GGHN**



In 2023, the SCIDaR Polio Eradication Project, in partnership with George Global Health Nigeria, made remarkable strides in tackling the problem of circulating variant polio virus 2 (cVDPV2) outbreaks in Nigeria. The project aimed to support the Katsina and Niger state governments in vaccinating children in areas where security was a challenge. These areas were at risk of cVDPV2 transmission despite the country's historic achievement of being free of the wild poliovirus (WPV) in 2016. The project devised and implemented strategies to identify security compromised settlements and is scheduled to carry out three rounds of campaigns, targeting 16 Local Government Areas (LGAs) in Katsina and 10 in Niger State. We will also, in collaboration with traditional leaders and security groups, to ensure the

effectiveness of the campaigns, in dynamic and evolving insecurity prone areas..

In the year under review, we conducted two rounds of campaigns in Niger and Katsina states. The campaigns reached impressive milestones regarding the number of settlements and children vaccinated with the new oral polio vaccine 2 (nOPV2).

Strategies Employed



Social/community mobilization



Engagement with Traditional Birth Attendants (TBAs)



Use of Pictorial Tags



Real-time migration tracking



Independent monitoring



KATSINA

Number of Immunized Children

358,572



NIGER

Number of Immunized Children

399,355



**PHEM CoE - Public Health
Emergency Management Center of
Excellence**

CDC | GU & GGHN



The Public Health Emergency Management Center of Excellence (PHEM CoE) is an initiative that combines guiding principles, processes, governance, and standards to achieve the 18-step certification process—a method for measuring and enhancing how national public health institutes (NPHIs), such as the Nigeria Centre for Disease Control (NCDC), handles public health emergencies. As part of this initiative, the project focuses on supporting the enhancement of processes at the NCDC, emphasizing key deliverables such as program documentation, internal reviews, branding, and the maintenance of the 'Program in a Box.' Additionally, our commitment extends to providing continuous support to the NCDC throughout the implementation of the PHEM CoE to facilitate adaptability and the sustained

effectiveness of our collaboration.

In the preceding year, we developed and implemented a strategy for effective communication of project progress, which incorporates a feedback mechanism that enables us to provide guidance and one-on-one assistance to the NCDC staff and ensure that progress updates are documented and disseminated for improvements. We also identified and engaged Champions and Domain Leads, who are key stakeholders and drivers of the PHEM CoE activities, and established clear and regular communication channels and timelines with them. Showing our commitment to transparency and collaborative problem-solving, we conduct regular status update meetings with the project team, fostering discussions on progress, challenges, and potential solutions. Furthermore, we successfully conducted a PHEM CoE workshop, which was a valuable opportunity to share and exchange knowledge and experiences with the staff of the NCDC and other partners and disseminated the workshop outcomes and insights through various platforms. We have crafted engaging video scripts that showcase the PHEM CoE's work and initiatives, highlighting the benefits and impact of the 18-step certification process. We have also developed abstracts for potential publication in relevant public health journals. Through these publications, we hope to disseminate the PHEM CoE's approach and results to a wider audience and contribute to the public health emergency management evidence base

Achievement in numbers

1 
PHEM CoE Focal Lead

8 
PHEM CoE Champions

 **GU hosted a 2-day residential workshop on PHEM CoE**



PHEM PDP - Public Health Emergency Management Professional Development Program.

CDC | GU & GGHN



The Public Health Emergency Management Professional Development Program (PHEM PDP) is a comprehensive capacity-building initiative dedicated to workforce development and establishing resilient systems across all levels of government, encompassing national and sub-national cadres. The program aims to expand the reach of PHEM expertise, ensuring that multiple Ministries, Departments, and Agencies (MDAs) possess the necessary knowledge and skills to respond effectively to public health emergencies in collaboration with the National Public Health Institute (NPHI).

In implementing the PHEM PDP program, we employed diverse strategies to achieve its goals

and objectives in the past year. A key approach was developing a communication plan designed to address challenges faced by the program and its stakeholders, fostering open communication, trust, and collaboration. This plan is instrumental in ensuring stakeholders remain engaged, supportive, and aligned with the program's overarching goals.

As a capacity-building program, our emphasis on collaboration and knowledge exchange was paramount. Coordinated efforts with CDC-Nigeria and NCDC were initiated to plan PHEM PDP Training and PHEM Intermediate sessions. To enhance the skills and knowledge of key stakeholders, especially within the NCDC team, the program closely collaborated with the Focal Lead and team members, advocating for capacity-building activities, such as suggesting PHEM Basic Level 1 and 2 Courses for NCDC Staff at the National level.

In alignment with our commitment to advancing Public Health Emergency Management (PHEM) expertise, we played a crucial role in co-facilitating the Peer-to-Peer visit of the Mali Ministry of Health (MoH) Team to Nigeria. This initiative aimed to foster cross-country knowledge exchange and share best practices in public health emergency management. Additionally, we leveraged the PHEM VLE platform as a learning management system to deliver online courses and assessments, providing accessible and flexible learning opportunities.

To further the program's impact, showcasing adaptability is vital. A significant step in this direction is the expansion of language options on the PHEM VLE platform, which ensures accessibility for both Anglophone and Francophone countries. This enhancement caters to a diverse linguistic audience, bridging the gap between different language speakers and fostering a more inclusive learning environment.



90
Participants

onboarded for





PROTECT - Preventing Occurance of Tuberculosis
by Expanding Coverage of Tuberculosis
Preventive Therapy TPT among PLHIV

**BMGF & CDC Foundation
2022**

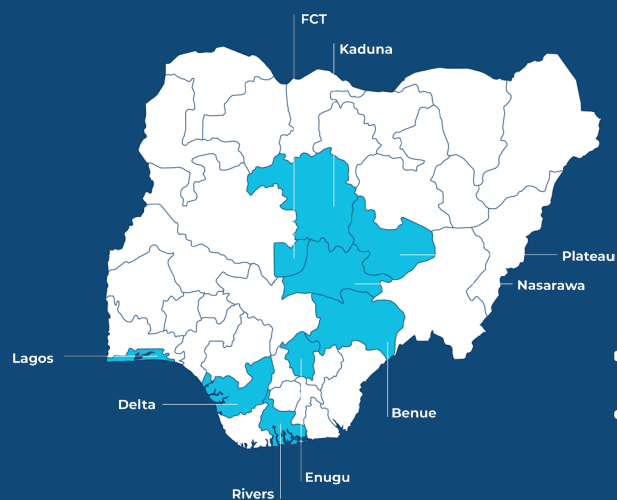


The PROTECT project evaluated the impact of Tuberculosis Preventive Therapy (TPT) among People Living with HIV (PLHIV) following the TPT scale-up in selected CDC-supported comprehensive Antiretroviral Therapy (ART) sites across Nigeria during the period from October 2019 to September 2021.

The primary objective was to assess TPT's effectiveness in preventing new TB cases and reducing TB-related mortality among PLHIV. Additionally, the project also set out to evaluate the functionality of the newly introduced electronic TB module on the Nigeria Medical Records System (NMRS), which was

developed in 2022. Notably, the facilities participating in this evaluation represent the pioneering sites where data entered into the new TB module will be submitted to the National Data Repository, providing crucial insights for national decisions regarding the scale-up of this innovative tool. The project is anticipated to contribute valuable learnings that will inform future strategies and policies related to TPT and TB management nationally.

We used various approaches to achieve our goals and objectives this past year. Firstly, we utilized the CDC's Framework for Program Evaluation, aligning with Nigeria's TPT Surge Plan and CDC-Nigeria's NDR Protocol. Secondly, we engaged the Federal Ministry of Health, other implementing partners, and stakeholders through pre-evaluation, post-evaluation, and result utilization sessions. In addition, we trained data entry clerks (DECs) on the project, NMRS and TB module, and data quality. The DECs were embedded for timely and validated data entry into NMRS. Furthermore, to ensure data quality during abstraction, we conducted field supervision, which included spot checks and peer reviews. Finally, we developed SQL scripts for de-identified data extraction from NDR.



**Data abstraction
and entry were
conducted in**



**60
Facilities**



**30
LGAs**

9

**States supported
by PEPFAR**

2023 PROTECT Impact

- Conducted a comprehensive study in Delta, Rivers, Lagos, Kaduna, Federal Capital Territory (FCT), Nasarawa, Benue, and Plateau states to evaluate and determine the incidence of new TB cases and TB-related deaths in people living with HIV.
- Reviewed treatment records of people living with HIV on antiretroviral therapy between October 2019 and September 2021.
- Trained Data Entry Clerks (DECs) responsible for entering study data into the Nigerian Medical Record System (NMRS).
- Conducted data abstraction and entry in 60 facilities across 30 Local Government Areas in the nine selected states with a commendable completion rate of 96.6% across all facilities.
- Piloted the new TB Module in selected facilities to manage and track data related to tuberculosis (TB) and TB preventive therapy (TPT) for people living with HIV (PLHIV).
- Implemented supportive supervision through Field Implementation Coordinators and State Level Supervisors, ensuring data quality through a Data Monitoring Tool (DMT).

CR19RM - COVID-19 Response Mechanism

CDC | GU & GGHN



The CR19RM project supports Public Health Emergency Operating Centers' (PHEOCs) capacity building at the sub-national level to demonstrate our commitment to effective COVID-19 response and coordination efforts. For this goal, the project develops and implements essential tools and frameworks to strengthen emergency management activities across all levels of expertise. The project employed four strategic approaches to enhance the PHEOCs' performance and readiness. These approaches ensure that the project remains agile and responsive to the evolving landscape of public health emergencies.

Strategic Approaches

- Review and adoption of Terms of Reference (ToR): This approach provided clear guidelines and expectations for the PHEOCs and established a framework for cohesive and standardized operations.
- Creation and execution of a Simulation package: This innovative training initiative built the capacity of responders with practical experience, augmenting their proficiency in handling emergency situations.
- Establishment of a collaborative framework with key stakeholders: This approach fostered partnerships and facilitated seamless coordination and the exchange of vital information among various PHEOCs.
- Pilot of assessment tools: This initiative enabled us to respond promptly to emerging challenges and established a valuable mechanism for ongoing evaluation and refinement of strategies based on real-world scenarios.

Achievement in numbers



Hired Program Officer



Onboarded Target States



Engagement Meetings with NCDC & CDC



LFCM - Lassa Fever Clinical Management

CDC | GU & GGHN



Lassa fever is a viral haemorrhagic fever that poses a serious public health threat in Nigeria. It is transmitted by rodents and causes severe illness and death in humans. The clinical management of Lassa fever requires specialized skills and equipment, often lacking in many health facilities in the country. To address this gap, we initiated the Lassa Fever Clinical Management Fellowship, a co-curricular multi-partner collaborative case management in-service training program that can be adapted for other healthcare workers. This project aims to increase the country's capacity in the clinical management of Lassa fever.

The project has three main objectives. Firstly, to increase the capacity of doctors (immediate) and other healthcare workers (long term) with the clinical competencies required to safely manage cases of Lassa fever in Nigeria. Secondly, to establish clinical management capacity for Lassa fever across 37 hospitals (one per state, including the FCT) in Nigeria as part of preparedness and response. Thirdly, a register of trained doctors and other healthcare workers with the capacity to manage cases of Lassa fever should be maintained, which can be deployed to support Lassa fever case management in outbreak situations when needed.

Approaches Used



Stakeholder Management: We engaged with stakeholders actively and strategically. We started by identifying key stakeholders who were critical to the project's success. We then consulted with institutional leadership and Subject Matter Experts to gather valuable insights. We also involved foundational members, including 3 Tertiary Health Institutions, FMoH, and NCDC, in shaping the trajectory of the Fellowship Program.



Finalization of LF Clinical Fellowship Concept: We finalized the LF Clinical Fellowship through a series of deliberate steps. We began with an extensive literature search for relevant training courses and modules on Lassa fever clinical management. We then reviewed the existing Lassa Fever Clinical Management Training curriculum and used it as a benchmark. We followed this with meetings with Subject Matter Experts to refine and finalize the Lassa fever Case Management Curriculum. We also developed the Lassa fever Clinical Fellowship Program Management Materials, which shaped the project's trajectory.



Pilot Implementation of the First Cohort Training: We implemented the first cohort training with meticulous planning. The process included selecting participants based on pre-determined eligibility criteria and asking them to express their interest. We also administered a participant pre-training work-up kit to gauge their baseline knowledge and skills. Furthermore, we trained the identified facilitators comprehensively, ensuring the highest standard of delivery. The successful commencement of the 1st Cohort of the Lassa Fever Clinical Fellowship marked a tangible realization of our objectives.

Achievement in numbers

2WEEK

TRAINING FOR



12

Doctors

from 12
states
across 6
geopolitical
zones in
Nigeria

A photograph showing four healthcare workers in a clinical setting. They are wearing blue scrubs and hairnets. One woman on the right is actively handling a large, crumpled blue plastic bag. Three men are standing behind her, observing. The background shows a window with white curtains and a mirror on the wall.

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Internship Activities		
Course/Task	Objectives/Goals	Result
Introduction to computing	<ul style="list-style-type: none"> HTML CSS Bootstrap Javascript 	<ul style="list-style-type: none"> Good refresher
Academic English: Writing and Editing	<ul style="list-style-type: none"> Grammar and Punctuation Getting Started with Essay Writing Advanced Writing in Academic English Introduction to Research for Essay Writing 	<ul style="list-style-type: none"> Aided in the foundation of all assignments given after regarding Essays and report writing
Introduction to React	<ul style="list-style-type: none"> Introduction to React Creating components using React Styling your application using React State management Redux 	<ul style="list-style-type: none"> Working on an application and using the gained knowledge to manipulate it to my desire Used as one of the key building tools in my project
Systematic Review and Meta-analysis	<ul style="list-style-type: none"> Introduction to systematic review Framing the question Searching principles and bias assessment Planning meta-analysis and statistical methods 	<ul style="list-style-type: none"> Joined a systematic review session with Michael, Hector, Mary and many others while learning



HACBY - Hands-on Application and Capacity Building for Youths | **SHSIL | GGHN**

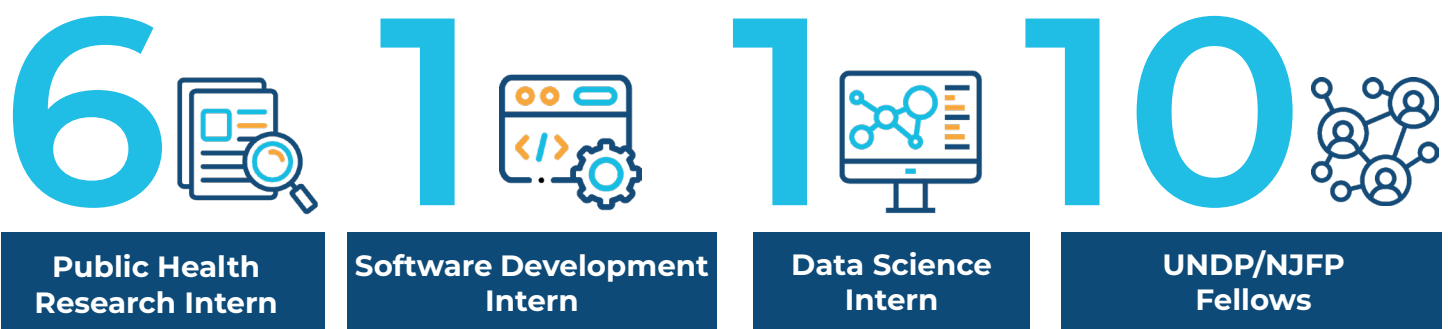


The Hands-on Application and Capacity Building for Youths (HACBY) Program is a partnership between Savannah Health System Innovation Ltd (SHSIL) and Georgetown Global Health Nigeria (GGHN). The Program aims to provide affordable, high-quality, hands-on training and mentorship to communities of young African undergraduates, researchers, and professionals in various skill areas related to global health security, such as integrated health service delivery, data science and analytics, and software development. The target audience of the Program includes undergraduates who want to conduct their SIWES or IT, and recent graduates from health related and other varied backgrounds, and others seeking a career change. The Program is built on four pillars: learning through practice, peer-to-peer

learning, an interactive and supportive environment, and a human-centered approach to self-development. The Program offers in-person, on-site, and virtual engagement modes, with a certificate of completion at the end of the program.

The past year has been fruitful for the HACBY Program, as we have achieved several milestones and outcomes that reflect our commitment to providing high-quality training and mentorship to young African professionals in global health security. We have engaged the public health research interns, who have completed the program and acquired valuable skills and experience in conducting fieldwork, data analysis, and report writing. We have also partnered with the United Nations Development Programme (UNDP) to engage the Nigeria Jubilee Fellowship Programme (NJFP) fellows across various disciplines, such as software development, data science, and health service delivery, to offer them an opportunity to learn, develop, and gain work experience for a year. Furthermore, we have supported the fieldwork activities of the HACBY fellows, such as the cholera risk assessment conducted in Jahi environs, which have contributed to the evidence base for public health interventions and policy recommendations. Lastly, we have expanded our pool of mentors, who have provided guidance, feedback, and support to the interns and fellows from diverse backgrounds and sectors, such as academia, government, private sector, and civil society.

Achievement in numbers





CRADLE - Collaborative Research for Digital Innovations for Learning and Evolution.

GGHN



Collaborative Research for Digital Innovations for Learning and Evolution (CRADLE) is the research arm of Georgetown Global Health Nigeria. It is focused on public health research, which is part of our commitment to providing quality public health services. Our research unit has three main goals for 2023: to publish high-quality research papers, disseminate our findings to relevant audiences, and contribute to advancing public health knowledge and practice.

How did we achieve these goals? We used various approaches in the past year. Firstly, we created and managed a research tracker, which helped us monitor the status of the different categories of

papers, articles, or manuscripts. The tracker also helped us prioritize our tasks and deadlines and identify any gaps or challenges in our publication process. Next, we brainstormed suitable topics and objectives for our publication goals on each project. Then, we drafted manuscripts based on rigorous data analysis and literature review. We followed the guidelines and standards of scientific writing and ensured that our manuscripts were clear, concise, and coherent. After that, we reviewed documents, ensuring they met the target journals' and platforms' standards and requirements. We adopted peer review and feedback mechanisms to improve the quality and impact of our documents. In addition, we shared ideas on how to manage our writings to maximize impact, such as choosing appropriate keywords, titles, and outlets. We used online tools and databases to identify and rank the most suitable journals or platforms for our publications. We also considered the visibility, accessibility, and reach of our publications to our intended audiences. Finally, we met regularly to discuss and review papers, providing feedback and support to each other.

Achievement in numbers



Journals on PLOS ONE Journal



1 published



2 Ongoing submissions

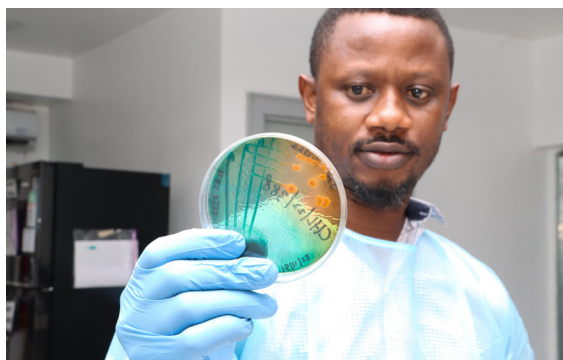


GEORGETOWN UNIVERSITY

Center for Global Health Practice and Impact

GGHN is part of the Center for Global Health Practice and Impact's global network that collaboratively implements diverse projects in Nigeria, Cameroon, Eswatini, Kenya, Tanzania, and Haiti. Over the years, GGHN has expanded its core expertise to include integrated service delivery, program evaluation, surveys, global health security, and health information management.

The Technical Assistance to the Nigeria Centre for Disease Control and Prevention (NCDC)



The Technical Assistance to the National Centre for Disease Control (NCDC) project is a collaborative effort with the NCDC to enhance the public health agency's capacity and system in various technical areas. The project aims to support the NCDC in fulfilling its obligations under the International Health Regulations (IHR) and strengthen the country's core capacities in preventing, detecting, and responding to infectious and non-communicable chronic diseases. Additionally, the project provides targeted health systems solutions to improve the strategic information capacities, adoption of point-of-service lab technology, healthcare governance and administration, and performance-led healthcare financing of the NCDC.

Lassa Fever Case Management & Psychosocial Support

The Lassa fever Case Management and Psychosocial Support pillar is a technical area operational under the National Lassa fever Technical Working Group. The Pillar aims to improve the quality of care and outcomes for patients with Lassa fever and provide psychosocial support for patients, families, and healthcare workers. It also contributes to generating and disseminating evidence-based knowledge and best practices for the clinical management of Lassa fever.

Approaches used:

The Lassa fever Case Management and Psychosocial Support Pillar focuses on seven thematic areas to carry out its responsibilities: Clinical management/Quality of Care/Quality Improvement, Data Management, Document development and review, Partnerships, Psychosocial Support, Research, and Training. We provide technical assistance in these thematic areas through coordination, planning, and implementation of various activities, which include:

- Technical assistance to treatment centres on patient care including prompt triaging, case isolation, and clinical care (for both uncomplicated and complicated cases) including referrals
- Assessment of Lassa Fever Treatment Centres
- Building & equipping of Treatment Centres
- Guideline/SOP/Job-aid development, review, and compliance
- Training of Health Care Workers
- Adherence to PPE Compliance by Healthcare Workers
- Sensitization of Health Care Workers
- RRT Deployments
- Clinical Data Management
- Investigation of Lassa fever-related deaths, including Health-care Workers
- Efficient result sharing to inform prompt clinical decisions
- Research Activities on clinical management of Lassa fever
- Publications on innovations and advancements in Lassa fever Clinical Management
- Others e.g., Review and validation of the National Lassa fever 5-year Strategic plan, development of the Incident Action Plan for the 2023 LF outbreak



We played a pivotal role in the success of the 2023 Joint External Evaluation (JEE), an assessment of Nigeria's local health security conducted by the World Health Organization (WHO) and other partners. We served as a member of the JEE Planning Team and a facilitator for critical technical areas, such as surveillance, laboratory, and emergency preparedness. We contributed significantly to internal and external assessment processes, resulting in a comprehensive report identifying the strengths and gaps in Nigeria's health system.



We were involved in the 2023 Lassa Fever After Action Review, which is a process of evaluating the response to the Lassa fever outbreak. We functioned as a subject matter expert and facilitator during the 3-day meeting, which brought together stakeholders from the federal and state governments, WHO, and other partners. We diligently identified strengths, weaknesses, and strategies for refinement in the aftermath of the Lassa fever outbreak and helped develop a roadmap for improving the prevention and control of future outbreaks.

Information Technology (IT)

This arm of the Technical Assistance project is dedicated to enhancing the nation's public health Information Technology infrastructure. This initiative aims to empower the Nigeria Centre for Disease Control with the necessary IT capabilities to effectively manage and respond to public health challenges. The project emphasizes knowledge transfer and capacity building and offers strategic guidance to enhance the NCDC's ability to protect the health of Nigerians with advanced and efficient technology.



The goals of this collaboration are multifaceted, aiming to:



Fortify existing IT systems to ensure they are robust, reliable, and capable of handling the dynamic needs of public health surveillance and response.



Empower the NCDC with the necessary skills and resources to independently manage and sustain their IT system, fostering a sense of ownership and self-reliance.



Promote active country ownership of IT-related policies and practices, ensuring the NCDC is at the forefront of decision-making and strategy implementation.

In advancing the goals of the Technical Assistance project, our approach was grounded in practicality and collaboration. Effective stakeholder management techniques were key, ensuring a participatory process where contributions and insights from all parties were valued. This approach fostered a sense of unity and shared purpose, crucial for the project's success. Simultaneously, we engaged in thoughtful organizational strategy analysis to address each challenge thoughtfully and provide practical and impactful solutions. By integrating these approaches, we enhanced IT systems and built capacities in a meaningful way aligned with the NCDC's mission of safeguarding public health in Nigeria.

Achievements:

- Migration of cloud-based solutions from and to Microsoft Azure Services to ensure continuity of services
- Decommissioning of the Nigeria International Travel Portal (NITP)
- Review and deployment of the National Health Info App to replace the NITP
- Development of an IT Security Policy to mitigate cyber and other IT security issues
- Conducting an End-Term Evaluation for the ICT unit to assess progress, challenges, and guide management investments in IT
- Routine maintenance and updates of the website and other web applications
- Ensuring the effective functioning of APHIDS MS and timely resolution of user issues
- Supporting the deployment of Event Based Surveillance (EBS)
- Systems in 26 states of Nigeria, including hardware, software, and network setup
- Assisting the Risk Communication unit with technology and expertise during outbreaks of diseases of public health concern
- Mentoring of IT staff

10



Application
Deployed

1



Policy Document
Developed for use

1



Applications
Supported

10



NCDC Personnel
Mentored

Laboratory

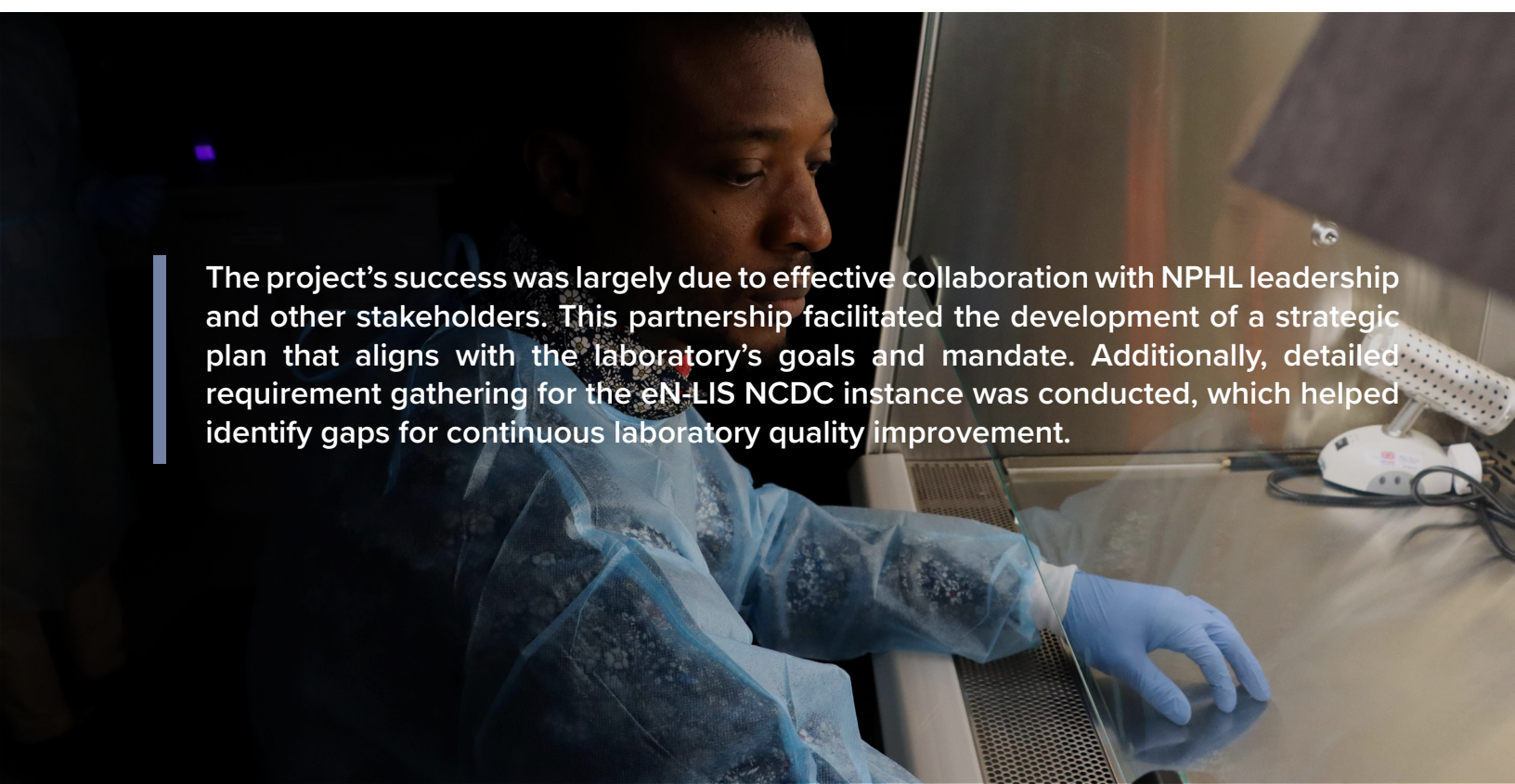
The Technical Assistance to the National Public Health Laboratory (NPHL) project is committed to enhancing the operational standards and service quality of the National Reference Laboratory (NRL). Through targeted expertise, guidance, and support, the project aligns with overarching goals for the year, focusing on improving the laboratory quality management system, building institutional capacities, and promoting country ownership.



The project's success was largely due to effective collaboration with NPHL leadership and other stakeholders. This partnership facilitated the development of a strategic plan that aligns with the laboratory's goals and mandate. Additionally, detailed requirement gathering for the eN-LIS NCDC instance was conducted, which helped identify gaps for continuous laboratory quality improvement.

The past year has been marked by significant achievements:

- The past year has been marked by significant achievements:
- Management of the COVID-19 Data Warehouse and result upload into the NCDC travel portal.
- Support and preparation of the Laboratory pillar for the country's 2nd Joint External Evaluation (JEE), with the Laboratory pillar's score improving from 51% to 58%.
- Participation in the external audit of the Bacteriology, Serology, and Multiplex Bead Assay (MBA) Laboratory.
- Development of a draft document for the NCDC Public Health Laboratory framework for a tiered network.
- On-the-job training on Diphtheria diagnosis and laboratory optimization for the COVID-19 Network of Laboratory.
- Review and customization of the Laboratory Information Management System for the NRL and NCDC Network of Laboratory.
- Development of two checklists for Laboratory assessment and auditing of three COVID-19 Laboratories in Akwa-ibom State.



The project's success was largely due to effective collaboration with NPHL leadership and other stakeholders. This partnership facilitated the development of a strategic plan that aligns with the laboratory's goals and mandate. Additionally, detailed requirement gathering for the eN-LIS NCDC instance was conducted, which helped identify gaps for continuous laboratory quality improvement.



GGHN Corporate Units



Strategic Communications



Throughout the year, our Communications unit has adeptly navigated the complex landscape of global health communications. We've crafted messages that resonate with diverse audiences, from health professionals and policymakers to the communities we serve. In an era where information is abundant yet fragmented, we've consistently provided clarity and coherence to our narrative.

Leveraging various platforms and media, we've expanded our reach and reinforced our commitment to improving health outcomes globally. Reflecting on the year 2023, we've made significant strides in increasing GGHN's presence and visibility within the global health landscape. A cornerstone of this effort was the branding of projects, where a focused strategy was implemented to ensure that all GGHN's initiatives were consistently and professionally branded.

This cohesive branding approach not only unified our projects under the GGHN umbrella but also elevated the recognition of our work across various platforms. In the digital realm, we saw a marked increase in our social media presence, gaining a remarkable 117% increase in followers compared to the previous year. Our team actively utilized platforms such as Twitter, Facebook, and LinkedIn, posting regular updates, engaging with our audience, and sharing compelling content that highlighted GGHN's projects and pertinent global health issues.

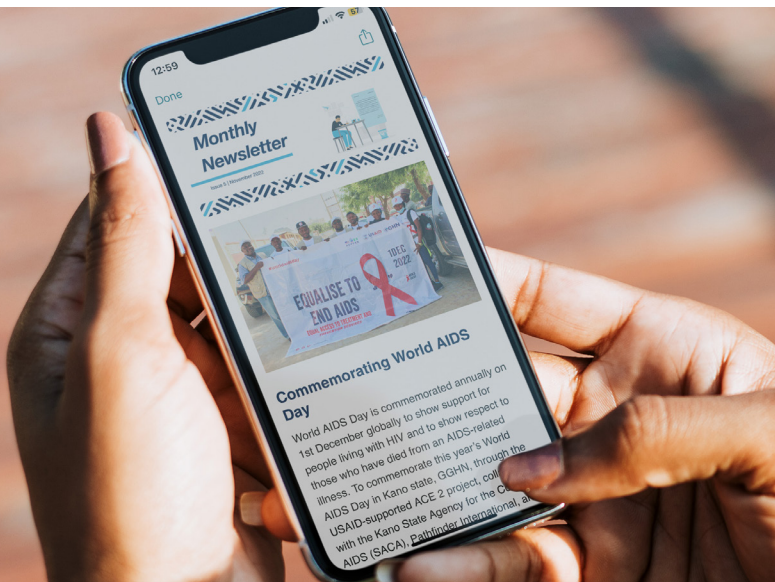
Our dedication to multimedia content creation resulted in the development of visually engaging and informative materials. Videos, infographics, and presentations were crafted to effectively communicate GGHN's mission and achievements. Through these concerted efforts, we've successfully ensured that our voice is not only heard but also resonates with those we aim to serve and collaborate with.

In our mission to improve health literacy among our audiences, we employed two strategic approaches. Firstly, we leveraged UN-observed international days. These days provided a valuable opportunity to align our health messaging with globally recognized themes and to participate in larger conversations that were already happening around these important dates. Additionally, we integrated social listening into our strategic approach to improve health literacy.

This proactive measure allows us to stay informed about ongoing outbreaks of infectious diseases and to swiftly create informative content for our audience regarding such outbreaks. For instance, our team closely monitors updates from reliable sources such as the CDC, WHO, and NCDC to identify current health threats. By incorporating this real-time data into our narrative, we can inform our audience about these pressing health issues as they unfold.

Furthermore, we've made a strategic investment in our most valuable resource—our staff—by providing targeted training and resources to enhance their communication skills. This initiative has been particularly impactful in Bauchi, Kano, and Jigawa, where we trained communications focal persons to support documentation and content gathering at the state level. As a result, we have fostered a culture of effective communication across all of our operations.

As we look to the future, we are excited about the potential for growth and innovation in our communications strategies. The Communications Unit is eager to explore new avenues for engagement and outreach.



Achievements



Creating a Plan for Internal Communications



Establishing an SOP for Content Distribution



Designing a Content Bank Template



Drafting an SOP for Content Review



Creatively Edited Videos



13 Monthly Newsletter Development and Dissemination



Creative Designing of Seal and Mascot

Social Media Achievements



151519 Total Reach



4093 Total Followers

Human Resource



The primary goal of the Human Resources (HR) Unit in GGHN is to support the organization’s mission by effectively managing its human capital. This includes recruiting, developing, and retaining a diverse and skilled workforce that can deliver the organization’s humanitarian services and respond to emergencies promptly and efficiently.

The HR Unit is charged with finding, screening, recruiting, and training job applicants. It is also tasked with maximizing employee productivity and protecting the organization from any issues that may arise within the workforce. We are also responsible for ensuring GGHN deals with a fast-changing business environment and a greater demand for quality employees. Our responsibilities include compensation and benefits, recruitment, dismissing, and keeping up to date with any laws that may affect the organization and its employees.

2023 Achievements



Execution of Staff Well-fare Packages



Established robust Management System



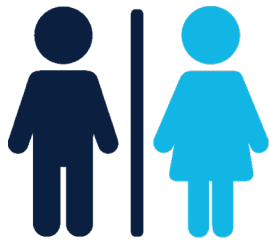
Up to Date Staff Documentation



Ensured Compliance to Regulatory Bodies



Recruited Qualified Staff for maximum Impact



Staff Strength

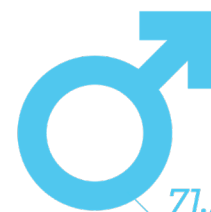
From **11** staff in 2019
To **178** staff in 2023

28.1% (50)



Female

Male



71.9% (128)





The compliance unit plays a vital role in overseeing the organization's internal audits and internal control activities. The unit works across all the organization's business to ensure proper implementation of the organization's award in line with applicable donor regulations, government laws, and the organization's policies. The unit also ensures the adequacy of internal controls in the organization's financial and operational activities to maintain appropriate compliance and controls that align with the Organization's internal policies, the Donor's regulations, and the Government's laws and regulations.

One of the key strategies that we adopted in the outgoing year was the preventive review and control approach on transactions conducted by the organization. This approach aimed to foster reasonable assurance on the various activities and transactions conducted on GGHN operations and financial and programmatic interventions/services provided to clients who benefit from the organization's services. We also conducted various compliance activities, audits, and reviews on transactions within the organization to deepen the existence and reasonable adequacy of internal control protocols on transactions conducted in implementing the organization's businesses and validate that the control protocols are functional in the organization.

To guide the reviewed activities of the organization, the department utilized the TARA risk management approach at every stage. The TARA approach is an acronym for Transfer, Accept, Reduce, and Avoid; these risk management principles were very beneficial to the reviews within the year. The compliance department also adopted a relational approach while dealing with other team members, with objectivity as a priority. We believe this approach could help win more donor goodwill for the organization by promoting a transparent and accountable work style.

Achievements for the year



We worked with the team to turn the election seasons in Nigeria into a training season, where we conducted virtual training for all employees of the organization during the pre- and post-election holidays declared by the Nigerian government. This is a laudable achievement that provided the opportunity to continue to orient and train GGHN staff for more productivity, even while they were working from home due to the imposed holidays. We know that trainings of Manpower, being one of the "5 M" of a business entity, will translate into effective utilization of the other resources of the organization.



Similarly, we worked with the leadership of the organization to ensure business continuity plan of GGHN were implemented during the General Elections



Within the year, we deployed preventive audits and reviews on all the businesses of the organization's transactions to ensure that the organization's risks were well mitigated. The various reviews cut across all the organization's businesses, resulting in improved efficiency of the organization's operations and projects.



We worked to conduct reviews and develop policy documents and procedures for the organization's business. In light of this, the unit also worked with the organization's H.I., H.R., and Finance units to migrate GGHN paperwork processes into automated online processes that ensure more effectiveness and efficiency in the organization's businesses.



We also worked with the organization's leadership and Management to kickstart the process for the strategic development plan/direction for the organization's future.

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SOLINA CENTRE FOR INTERNATIONAL DEVELOPMENT AND RESEARCH



CENTERS FOR DISEASE CONTROL AND PREVENTION



FEDERAL MINISTRY OF HEALTH



NPHCDA
National Primary Health Care Development Agency



CDC Foundation
Together our impact is greater



West African Health Organization
Promoting better health through regional integration

fhi360

THE SCIENCE OF IMPROVING LIVES

PHIS3

Data for Life

G GHN

Facilities supported under the ACE2 Project

SN	State	LGA	Facility
1	Bauchi	ba Shira	Abubakar Tafawa Balewa University Teaching Hospital
2	Bauchi	ba Bauchi	Bayara Infectious Diseases Hospital
3	Bauchi	ba Bauchi	Urban Maternity
4	Bauchi	ba Katagum	Azare Federal Medical Centre
5	Bauchi	ba Tafawa Balewa	Tafawa-Balewa General Hospital
6	Bauchi	ba Toro	Toro General Hospital
7	Bauchi	ba Misau	Misau General Hospital
8	Bauchi	ba Ningi	Ningi General Hospital
9	Jigawa	jg Hadejia	Hadejia General Hospital
10	Jigawa	jg Dutse	Dutse General Hospital
11	Jigawa	jg Birnin Kudu	Birnin-Kudu Federal Medical Centre
12	Kano	kn Tarauni	Aminu Kano Teaching Hospital
13	Kano	kn Fagge	Kano Infectious Diseases Hospital
14	Kano	kn Kano Municipal	Murtala Mohammed Specialist Hospital
15	Kano	kn Nasarawa	Sir Mohammed Sanusi General Hospital
16	Kano	kn Wudil	Wudil General Hospital
17	Kano	kn Tarauni	Al Noury Specialist Hospital
18	Kano	kn Kano Municipal	Hasiya Bayero Paediatric Hospital
19	Kano	kn Ungogo	Waziri Shehu Gidado Hospital
20	Bauchi	ba Alkaleri	Alkaleri General Hospital
21	Jigawa	jg Gumel	Gumel General Hospital
22	Jigawa	jg Jahun	Jahun General Hospital
23	Jigawa	jg Kazaure	Kazaure General Hospital
24	Jigawa	jg Ringim	Ringim General Hospital
25	Kano	kn Fagge	Sheikh Mohammed Jidda General Hospital
26	Kano	kn Tudun Wada	Tudun Wada General Hospital
27	Kano	kn Nassarawa	Mohammad Abdullahi Wase Hospital
28	Kano	kn Bichi	Bichi General Hospital
29	Kano	kn Rano	Rano General Hospital
30	Bauchi	ba Katagum	Azare General Hospital
31	Bauchi	ba Darazo	Darazo General Hospital
32	Bauchi	ba Jama'are	Jama'are General Hospital
33	Jigawa	jg Gwaram	Gwaram Cottage Hospital
34	Kano	kn Gwarzo	Gwarzo General Hospital
35	Kano	kn Gaya	Gaya General Hospital
36	Kano	kn Takai	Takai Comprehensive Health Centre
37	Kano	kn Gezawa	Gezawa General Hospital
38	Kano	kn Dambatta	Danbatta General Hospital
39	Kano	kn Dawakin Kudu	Dawakin Kudu General Hospital
40	Kano	kn Kano Municipal	Nuhu Bamalli Maternity Hospital
41	Kano	kn Nassarawa	Ahmadiyya Muslim Hospital

SN	State	LGA	Facility
42	Kano	kn Bebeji	Tiga General Hospital
43	Kano	kn Tarauni	Unguwa Uku Maternal and Child Health Centre
44	Bauchi	ba Dass	Dass General Hospital
45	Bauchi	ba Bauchi	Pohlycon Clinic
46	Bauchi	ba Tafawa Balewa	Lere PHC
47	Bauchi	ba Bauchi	Wuntin Dada Maternal and Child Health Clinic
48	Bauchi	ba Giade	Giade General Hospital
49	Bauchi	ba Bauchi	Apple Clinic
50	Bauchi	ba Bauchi	Ni'ima Consultant
51	Bauchi	ba Bogoro	Bogoro General Hospital
52	Bauchi	ba Itas Gadau	Itas General Hospital
53	Bauchi	ba Warji	Warji General Hospital
54	Bauchi	ba Bauchi	State Low Cost Primary Health Centre
55	Bauchi	ba Shira	Shira Yana General Hospital
56	Bauchi	ba Gamawa	Gamawa General Hospital
57	Bauchi	ba Dambam	Damban General Hospital
58	Bauchi	ba Ganjuwa	Kafin Madaki General Hospital
59	Bauchi	ba Bauchi	Reemee Clinic
60	Bauchi	ba Bauchi	Mararraba Primary Health Centre
61	Bauchi	ba Zaki	Katagum Zaki General Hospital
62	Bauchi	ba Giade	Giade Maternal & Child Health Clinic
63	Jigawa	jg Dutse	Rasheed Shekoni Specialist Hospital
64	Jigawa	jg Birnin Kudu	Birnin Kudu General Hospital
65	Jigawa	jg Kafin Hausa	Kafin Hausa General Hospital
66	Jigawa	jg Hadejia	Gawuna Primary Health Centre
67	Jigawa	jg Hadejia	Kofar Arewa Primary Health Centre
68	Jigawa	jg Birnin Kudu	Bamaina Primary Health Centre
69	Jigawa	ig Babura	Babura General Hospital
70	Jigawa	jg Birniwa	Birniwa General Hospital
71	Jigawa	jg Gwaram	Gwaram Primary Health Centre
72	Kano	kn Fagge	International Clinic
73	Kano	kn Sumaila	Sumaila General Hospital
74	Kano	kn Dala	Dala Maternal and Child Health Clinic
75	Kano	kn Kibiya	Kibiya Primary Health Centre
76	Kano	kn Kiru	Kiru Comprehensive Health Centre
77	Kano	kn Ungogo	Mariya Sanusi Primary Health Care
78	Kano	kn Fagge	Rijiyar Lemo Maternal Child Health
79	Kano	kn Kumbotso	Kumbotso Comprehensive Health Centre
80	Kano	kn Madobi	Akilu Memorial Primary Health Centre
81	Kano	kn Tsanyawa	Tsanyawa Comprehensive Health Centre
82	Kano	kn Bebeji	Bebeji General Hospital
83	Kano	kn Dawakin Tofa	Dawakin Tofa General Hospital
84	Kano	kn Doguwa	Doguwa General Hospital
85	Kano	kn Nassarawa	Kano Evangelical Church of West Africa (ECWA) Hosp
86	Kano	kn Karaye	Karaye Comprehensive Health Centre
87	Kano	kn Fagge	Khadijat Memorial Hospital (FGE)
88	Kano	kn Kura	Kura General Hospital
89	Kano	kn Rogo	Rogo General Hospital
90	Kano	kn Tofa	Tofa Primary Health Centre

SN	State	LGA	Facility
91	Kano	kn Gabasawa	Zakirai Primary Health Centre

Facilities supported under PROTECT Project

SN	State	LGA	Facility
1	Benue	Makurdi	Federal Medical Center - Makurdi
2	Benue	Makurdi	Bishop Murray Medical Center
3	Benue	Makurdi	Northbank General Hospital
4	Benue	Makurdi	Makurdi KP One Stop Shop
5	Benue	Makurdi	be Madonna Hospital
6	Benue	Gboko	Nongu Kristu ke Sudan hen Tiv (NKST) Hospital - Mkar
7	Benue	Gboko	be Gboko General Hospital
8	Benue	Gboko	Gboko East Comprehensive Health Center
9	Benue	Gboko	Sev-Av Foundation Gboko
10	Benue	Gboko	Gboko KP One Stop Shop
11	Benue	Gboko	Atuna Clinic and Maternity
12	Benue	Gboko	Three Brothers Transport Hospital
13	Benue	Gwer East	St. Vincents Hospital
14	Benue	Gwer East	Aliade General Hospital
15	Benue	Gwer East	St. Gregory Health Center
16	Rivers	Obio/Akpor	Initiative for Advancement of Humanity (IAH)
17	Rivers	Obio/Akpor	KPIF Obio-Akpor KP OSS
18	Rivers	Obio/Akpor	University of Portharcourt Teaching Hospital
19	Rivers	Port Harcourt	Braithwaite Memorial Specialist Hospital
20	Rivers	Port Harcourt	Health of the Sick
21	FCT	AMAC	Gwarinpa One Stop Shop
22	FCT	AMAC	Asokoro District Hospital
23	FCT	AMAC	Nyanya One Stop Shop
24	FCT	AMAC	National Hospital - Abuja
25	FCT	Gwagwalada	Gwagwalada KP One Stop Shop
26	FCT	Gwagwalada	University Of Abuja Teaching Hospital - Gwagwalda
27	Nasarawa	Karu	Karu KP one stop shop
28	Nasarawa	Karu	KPIF_Karu OSS
29	Nasarawa	Karu	Mararaba Guruku Medical Center
30	Nasarawa	Lafia	Dalhatu Araf Specialist Hospital
31	Nasarawa	Lafia	Lafia KP One Stop Shop
32	Nasarawa	Akwanga	KPIF_Akwanga OSS
33	Nasarawa	Keffi	Federal Medical Center - Keffi
34	Nasarawa	Nasarawa	na Nasarawa General Hospital
35	Lagos	Mushin	Mushin KP One Stop Shop
36	Lagos	Mushin	Lagos University Teaching Hospital (LUTH)
37	Lagos	Alimosho	Alimosho General Hospital
38	Lagos	Ikeja	Lagos State University Teaching Hospital
39	Lagos	Eti Osa	Eti-Osa KP One Stop Shop
40	Lagos	Amuwo-Odofin	Amuwo Odofin KP One Stop Shop
41	Delta	Warri South	KPIF_Warri South OSS
42	Delta	Warri South	de Warri Central Hospital
43	Delta	Oshimili South	KPIF_Oshimili South OSS

44	Delta	Udu	KPIF_Udu OSS
45	Kaduna	Kaduna South	Gwamna Awan General Hospital
46	Kaduna	Kaduna South	St. Gerald's Hospital - Kaduna
47	Kaduna	Kaduna South	Yusuf Dantsoho Memorial Hospital
48	Kaduna	Kaduna North	Barau Dikko Specialist Hospital
49	Kaduna	Chikun	Sabon Tasha General Hospital
50	Kaduna	Giwa	Ahmadu Bello University Teaching Hospital - Shika
51	Enugu	Igbo Eze North	Enugu-Ezike District Hospital
52	Enugu	Igbo Eze North	Chima Hospital And Maternity
53	Enugu	Enugu North	Mother of Christ Specialist Hospital
54	Enugu	Nkanu West	University Of Nigeria Teaching Hospital (UNTH)
55	Enugu	Enugu East	Annunciation Specialist Hospital- Emene
56	Enugu	Awgu	Awgu District Hospital
57	Plateau	Jos North	Jos University Teaching Hospital
58	Plateau	Jos North	Faith Alive Foundation
59	Plateau	Jos North	Plateau State Specialist Hospital
60	Plateau	Jos North	Bingham University Teaching Hospital

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