Leaving No Prisoner Behind: Reducing HIV in Nigerian prisons
“There is no such thing as a single-issue struggle because we do not live single issue lives.”  Audre Lorde
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Nigeria: Leaving No Prisoner Behind

There are 73,000 prisoners in Nigeria in 240 facilities with an occupancy rate of 136%. One study has found an 18% prevalence of HIV among prisoners in Nasarawa State.

Ending AIDS in Nigeria will remain a distant goal if key populations are left behind. Treatment for prisoners is an urgent priority. The work proposed builds on a rapid situation assessment (already funded) and the results will guide specific actions for this initiative.

There is a funding gap of USD 4 million which would ensure the development and implementation of a tangible response in prisons. Continued and monitoring and evaluation for maximum results is built into this.

In addition to the prisoners reached, outreach will be made to 25,000 people working in prisons.

In line with the Nelson Mandela Rules, this project promotes the right to health for all.
1. Why this initiative?

Nigeria’s HIV epidemic affects all population groups and geographic areas of the country. Key populations, including prisoners, are disproportionately impacted by the epidemic.

Like most countries around the world, the prisoners in Nigeria have systematically been left behind in the national HIV response.

Therefore, there is an urgent need to advocate for a national framework that will address access to quality health services and ensure access to HIV prevention, treatment and care programs among people in prisons.

2. What aspects make this project unique?

The project will support Nigeria to improve coverage and quality of HIV services for people in prisons by addressing the major barriers and building sustainable national/sub-national partnerships between criminal justice, prison and public health sectors, and civil society and community-based organizations.

3. Collaboration

The project will help to integrate prison health into national health system and empower the national key stakeholders to address and create sustainable methods of quality HIV services. The project will also help to improve engagement of the Ministry of Health in prison health systems and advocate for an increase in domestic funding for prison health systems.

Civil society organization will contribute to the peer education program in prisons, community outreach, and ensuring continuity of care.

Services will be tailored to the needs and requests of the prison population in Nigeria. In consultation with relevant authorities, programs will be developed that are adapted to the cultural and structural contexts.

Contributing partners: UNODC (implementer) in partnership with WHO, UNDP and UNAIDS.
4. The project approach and timeline

1. Increased access of people in prisons in Nigeria to human rights and evidence-based HIV prevention, treatment and care services.

2. Ensured continuity of HIV services for people in contact with the criminal justice system.

Timeline: 2019-2021

5. Indicators: How will we measure success?

How will this help us end AIDS by 2030?

Recent published reports show a reduction in HIV transmission in certain demographics, but prison population are not sufficiently addressed.

However, ending AIDS as a public health threat by 2030 in Nigeria will continue to remain a distant goal unless the left behind population groups, particularly prisoners, are reached with comprehensive HIV prevention and treatment services on an urgent basis to be on track for the 2020 and 2030 targets.

This project will have the support of national authorities to close this gap in HIV service provision to this often neglected population.
6. Questions and Answers

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
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<tbody>
<tr>
<td>How many people will be reached?</td>
<td>73,000 individuals</td>
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<tr>
<td>How will my money be used exactly?</td>
<td>USD 4 million</td>
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<tr>
<td>How will success be monitored? What are the indicators?</td>
<td>The project will adopt an inclusive monitoring, evaluation and learning approach with close involvement of its key partners and stakeholders. The performance of the project and the context in which it will be implemented will be comprehensively monitored on a quarterly basis. The results of the project will be reported semi-annually and annually, and a final independent project evaluation will be conducted. A detailed description of Monitoring and Evaluation for this initiative is immediately available upon request.</td>
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<td>Who are the contributing partners?</td>
<td>UNODC, WHO, UNAIDS, UNDP</td>
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7. The budget

The cost for this initiative is **USD 4 million**. A detailed budget can be made available upon request.